



# Ontario College of Family Physicians

Education | Leadership | Research | Advocacy

A Chapter of the College of Family Physicians of Canada

## 2019 Ted Freedman Award Submission

**Program Name:** Collaborative Mentoring Networks (CMN)

**Submitted by:** Susan Taylor  
Director, Education and Practice Supports

**Address:** Ontario College of Family Physicians  
400 University Avenue, Suite 2100  
Toronto, Ontario, M5G 1S5

**Phone:** 416-867-1909

**Email:** [staylor@ocfp.on.ca](mailto:staylor@ocfp.on.ca)

### Clinical Leadership

- Dr. Arun Radhakrishnan, CMN Clinical Lead and co-Chair, Collaborative Mental Health Network/Medical Mentoring for Addictions and Pain (CMHN/MMAP)
- Dr. Sarah Newbery, Clinical Lead and Chair, Rural Medicine Initiative Network (RMIN) and Leadership in Primary Care
- Dr. Jon Hunter, co-Chair, Collaborative Mental Health Network/Medical Mentoring for Addictions and Pain
- Dr. George Kim, co-Chair, Palliative and End-of-Life Care/Medical Assistance in Dying (PEOLC/MAiD)
- Dr. James Downar, co-Chair Palliative and End-of-Life Care/Medical Assistance in Dying (PEOLC/MAiD)
- Dr. Britta Laslo, Chair, Early Years in Practice (EYP)

### Value of Innovation as an Agent of Change

The OCFP's Collaborative Mentoring Networks (CMN) are a Continuing Professional Development (CPD) initiative addressing clinical and practice challenges that Ontario's family physicians (FP) have identified as being overwhelming to them. To support FPs in navigating these challenges the CMN have been designed as a multifaceted **mentoring** intervention.

The value of this intervention is in creating compassionate clinician spaces that strengthen resiliency and practice retention. These "spaces" also support knowledge translation that increases competence and confidence resulting in increased primary care capacity to deliver compassionate and evidence-based care in the patient's medical home and in turn optimizing health system utilization.

The CMN began by supporting the areas of mental health, addictions and chronic pain. Based on its impact, the Ontario Ministry of Health and Long-Term care is funding its expansion into the areas of palliative and end-of-life care, medical assistance in dying, rural practice, primary care leadership and transitions into practice. By 2020, the CMN will support 1500 clinicians (12% of Ontario FPs) by connecting them to 140 experts across Ontario.

### Evidence to Substantiate the Innovation

Mentoring is the foundation for the CMN and was selected based on FPs identification of mentoring as a preferred CPD option to address challenging issues in their practice. Additionally, the literature from a range of professional areas (e.g. medicine, nursing, management) reports on the value of mentorship in supporting and developing the competence of participants. CMN uses the adaptability of mentoring to address the principles of

[Type here]

400 University Avenue, Suite 2100 | Toronto ON M5G 1S5

ph: 416-867-9646 | toll-free (Ontario): 1-800-670-6237 | fax: 416-867-9990 | [www.ocfp.on.ca](http://www.ocfp.on.ca) | [ocfp@ocfp.on.ca](mailto:ocfp@ocfp.on.ca)

adult learning theory as well as potential unperceived learning needs. Mentoring in CMN is flexible and undertaken in a variety of ways (face to face, email, videoconferencing) which focuses on connecting a mentee to one or more experts based on their practice region or topic. In addition to on-demand, reflective, longitudinal one-to-one interactions, there are opportunities to engage in group-based mentoring and large-scale communities of practice as well.

To date the CMN approach has demonstrated its value in proportionally supporting FPs in rural/remote regions (12-40%) and solo/group practice types (25-35%) that have been hard to engage in CPD for logistical reasons. Value has also been demonstrated in being able to longitudinally engage participants in the initial networks (>50% participating for 3 or more years).

## **Outcomes to Substantiate the Innovation**

### **The Result – Family Physicians Report Improved Competence and Confidence**

In our evaluation of the initial networks (CMHN/MMAP) the majority (75-85%) of FPs report improvements in knowledge, competence and confidence. Participants are more comfortable seeing a wider range of patients and more complex patients with mental illness, addictions and chronic pain, resulting in reported reductions in consultations, increased support from and to their colleagues, improved resiliency, improved capacity to provide compassionate care and improvements in their patient’s quality of life. Qualitative evaluation has helped identify that compassionate spaces for providers can support a focus on compassionate care for patients.

### **Example in Practice: OCFP’s MMAP Network Supporting FPs in Navigating the Opioid Crisis**

Family physicians feel overwhelmed, fearful, confused, unmotivated and discouraged about their ability to deliver quality care for patients experiencing chronic pain in the face of the opioid crisis. These are some of the comments from focus groups with Ontario FPs held by the OCFP in February 2019. Coupled with concerns about over or under prescribing of opioids related to regulatory requirements, the complexity of care for patients who live with pain and addictions can be daunting. These issues are also compounded by challenges in addressing social determinants of health (e.g. stable housing and employment).

For these physicians, being part of a CMN has made a difference. By connecting with colleagues, FPs are navigating their fear, isolation and logistical challenges common in complex patient situations. They have helped their colleagues and themselves gain knowledge and overcome stigma to provide care for patients with opioid use disorders and provide care that includes non-pharmaceutical options for chronic pain. As a result, these FPs are more confident in providing opioid substitution therapy, helping to maintain continuity of care for their patients in their medical home. MMAP is helping physicians adopt new skills and new paradigms of understanding, and as a result, both patients and doctors are benefitting.

### **OCFPs MMAP Network – Supporting Family Physicians in a Safe and Compassionate Space**

*“Pain specialist referral in NWO takes 2 years +; getting my questions answered helped me manage a very complicated patient, he is better today for it.”*

*“I was close to leaving practice due to feeling overwhelmed; the knowledge and support from MMAP has helped me carry on.”*