



**Report of the Chief Executive Officer
Presented at the Annual Meeting of Members
by Ms. Leanne Clarke
on November 14, 2018**

In my first year as CEO, I have experienced the tremendous rewards that come from serving the OCFP's membership, and continue to be inspired by the dedication you show to your patients and the contributions you make to our health system. Ontario's family physicians are the bedrock of health care; this is a fact that I reflect on daily and what drives the work that our Board, staff, advisors and faculty do on your behalf.

It has also been a year of frustration at times, given the many emerging challenges that impact how you work and your ability to deliver high-quality care. The OCFP's work is guided by our four pillars of Education, Leadership, Advocacy and Research. From our unique Continuing Professional Development programs, to our Collaborative Mentoring Networks, to the many tables and advisory meetings that we attend, our focus is firmly rooted in your day-to-day realities on how we can best support you.

Transformation in our health system cannot happen without the active participation of family physicians. Despite the calls on your time, many of you have stepped into leadership roles in your regions this past year to make sure that frontline perspectives were informing needed change. We also spent considerable time at tables this past year ensuring policymakers and other healthcare stakeholders know what is happening in your practices. The OCFP may have an address in downtown Toronto, but our Board and members who work on your behalf come from all corners of the province. It is a testament to you that you represent the profession in such tangible ways through the breadth and scope of your role as family physicians.

With that, I am pleased to share this Report with you. As you will read, the report highlights the activities we have undertaken to meet the needs of a diverse membership, ensuring you have the educational supports you need to excel in your practice, thrive in your profession and best serve your patients.

Education and Practice Supports

Central to our work is delivering the education, information, knowledge and skills you need to provide optimal care to your patients. There were several notable developments this past year, including a new conference format – rapid fire and online – new mentoring networks, new CPD programs and new tools.

Mentorship Support

As referenced in the Report of the President, we took a big step forward with a central OCFP program – our certified [Collaborative Mentoring Networks](#) (CMN). Along with the growth of our long-standing networks in Mental Health, and Pain and Addictions, we established new mentoring networks and online communities of practice in Palliative and End-of-Life Care (PEOLC) and Medical Assistance in

Dying (MAiD), as well as Rural Medicine, Leadership in Primary Care and a network to support physicians in their Early Years in Practice (EYP).

There are now more than 700 participants in the expanded Collaborative Mental Health Network (CMHN) and Medical Mentoring for Addictions and Pain Network (MMAP). Mentoring activity for the new networks is rolling out in November 2018 -- Chairs/co-Chairs of each network, supported by Steering Committee members, have been recruiting and onboarding mentors, which will soon bring in mentees and facilitate access to experts and case-based support in these clinical areas.

Of note, the new online spaces for PEOLC and MAiD are now operational and also available to pharmacists and nurse practitioners in Ontario, providing a unique opportunity for partnerships. To support the work of these online communities of practice, the OCFP is partnering with the Nurse Practitioner's Association of Ontario, Queen's University, University of Toronto's Joint Centre for Bioethics, Ontario Pharmacists Association, and the Ontario Palliative Care Network.

And, to support leadership development among family physicians, the Leadership in Primary Care Network got underway; starting with an environmental scan of available leadership initiatives in Ontario to ensure there is no duplication of effort and that the network supports the needs of family physicians as leaders in their communities.

We are grateful for the expert guidance provided by our Mentors and Steering Committees, and their Chairs – Drs. Jon Hunter, James Downar, George Kim and Britta Laslo. We also could not deliver this support to our members without the diligent work of our Clinical Lead for the overall Networks initiative, Dr. Arun Radhakrishnan, who is also co-Chair of CMHN/MMAP, and Dr. Sarah Newbery who is guiding the Rural Medicine Initiative Network and the Leadership in Primary Care Network. Finally, we are thankful for the many years of funding the OCFP receives from the Ministry of Health and Long-Term Care that enables this work. With this support, hundreds of family doctors across the province are currently benefiting from this unique Ontario program, and more are expected in future.

CPD Offerings

The OCFP's [continuing professional development](#) (CPD) offerings evolved this past year, with the decision to offer more in-depth and unique programs designed to maximize impact in the areas you said are most challenging. Based on what you have told us in program evaluations, it was the right decision for members.

Since last November, we have had more than 800 participants in our workshop programs and – when our conferences are included – nearly 2,000 participants overall in the OCFP's CPD programs.

Over the past year we have launched new programs focusing on *Adolescent Addictions and Pediatric Preventive Care*, as well as a workshop sharing practical strategies to support your patients with mood disorders. The *Practising Wisely* program focuses on reducing unnecessary testing and treatment, and *Treating Poverty* is another interactive and engaging program that bridges gaps and supports for vulnerable patients.

Our suite of two and three-credit per hour workshops were once again highly rated for providing clinically relevant information that can immediately be applied to practice. As a participant in last year's *Practising Wisely Day* said recently, the learning experience was “exhilarating” and spurred her on to

participate in more evidence-based development opportunities. We extend our sincere appreciation to the highly-skilled faculty who lead these practical and interactive group learning events.

We are also fortunate to work with other partner organizations to offer learning that reflects your clinical practice needs. This is in addition to our 'By Request' model that allows you to deliver programs of your choice in your practice location - bringing our CPD directly to you.

With funding from the Ministry of Health and Long-Term Care, the OCFP collaborated with the BC-based originators of The CARE Course (Comprehensive Approaches to Rural Emergencies) to pilot the two-day program in rural and northern Ontario. The value of this learning was most evident, and perhaps best illustrated by one participant who said: "it was amazing – it reminded me of why I love my job so much!" In a recent *Hospital News* [article](#), staff at Lion's Head Hospital credited The CARE Course training as being instrumental in their ability to treat a critically-injured patient and achieve a positive outcome. We are evaluating the program and the supports needed for more wide-spread implementation in other rural locations.

Other partnerships included our LEAP (Learning Essential Approaches to Palliative and End-of-Life Care) workshops with Pallium Canada. As part of the Ontario Osteoporosis Strategy we are also collaborating on certified webinars that have proven popular with members, allowing us to reach more members in more locations, more conveniently.

New Learning Opportunity

With the Family Medicine Forum in Toronto in 2018, and thus an off-year for the OCFP's Annual Scientific Assembly (ASA), we hosted our inaugural Sharing Tools for Excellence in Practice (STEP) one-day conference in June in Ottawa. We had 121 family physicians attend, with many of those doing so by webcast – a first-time offering by the OCFP, thanks to the in-kind webcast technology support provided by the Ontario Telemedicine Network. STEP was modeled after the Alberta Chapter's successful conference and we appreciate their support and advice during our planning. We also greatly appreciate the time and efforts of event Chair Dr. France Boudreau and the planning committee for guiding the successful launch of STEP.

STEP's rapid-fire format was highly rated for both the variety of topics and the format, and notably half of those completing evaluations indicated it was their first OCFP event – this new approach representing an opportunity to extend the OCFP's educational reach. It also afforded us an opportunity to test live-streamed learning. We will further explore online opportunities to reach more members in this cost-effective format. Based on your needs, we will also refine both our CPD programs and our delivery - from small group workshops, to conferences and self-learning online.

Practical Tools and Resources

Through our collaboration with the Centre for Effective Practice (CEP), we are supporting the development of more than 20 tools and resources for family physicians and other primary care clinicians. Among the newest and most timely tools available is the recently-released resource on non-medicinal cannabis use to support family physicians in discussions with their patients – including certain subgroups such as pregnant women and youth. Other tools address opioids, dementia, adult and youth mental health, childhood obesity and more. We are also pleased that more of these tools are being

made EMR-friendly – a key need that OCFP has highlighted throughout our collaboration. (<https://thewellhealth.ca/>)

Our partnership with the CEP was given a further boost last December when we co-located our offices, which has served to further streamline the work we do together on behalf of OCFP members.

Collaboration across Family Medicine and Primary Care

In developing our Strategic Plan, interviews with stakeholders reinforced the OCFP's reputation as a thoughtful and effective leader. We had many opportunities this past year to leverage this strength and bring the family physician perspective to various policy and planning tables, working groups and committees. Among them:

- Regular meetings as part of the HQO's Opioid Partnered Efforts Table to ensure supports and resources are available to family physicians caring for patients with chronic pain. Key among the many clinical resources is the OCFP's mentoring network in Medical Mentoring in Addictions and Pain.
- Collaboration with the OMA, Section on General and Family Practice and the Association of Family Health Teams of Ontario on issues related to family physicians and primary care, given that we all share a membership across our organizations. We recognize we all have unique roles for our members, however we also share a commitment to aligning on areas of common interest.
- A new forum with Health Quality Ontario, IHPME (Institute of Health Policy, Management and Evaluation), Association of Family Health Teams of Ontario, Section on General and Family Practice, and Nurse Practitioners Association of Ontario, among others, to explore how to expand a practice improvement learning program, based on IDEAS (Improving and Driving Excellence Across Sectors), across more practices in Ontario.
- Ongoing meetings with numerous stakeholders, including the Ministry of Health and Long-Term Care, the LHINs, four psychiatric hospitals, community mental health agencies, and others on Ontario's rollout of two new structured psychotherapy services for patients with mild to moderate anxiety and depression. With primary care as the key target for these services, the OCFP shared the information with members through a variety of channels, including two well-attended webinars.

Reinforcing the PMH Vision for Primary Care

A key strategic priority for the OCFP is to lead health system change that reflects patient needs and focuses on equitable and sustainable primary care for all Ontarians, within a Patient's Medical Home (PMH).

The PMH is a vision for family medicine, established by our national College, and is anchored by a common set of features that matter to patients and members. It is designed to support family physicians – regardless of their practice model – to provide coordinated, comprehensive, accessible care to their patients. As a helpful guide to PMH implementation, the OCFP developed a [PMH Toolkit](#) for members who are motivated to further align their practices with key features of the PMH.

We know many of you do not have access to team-based resources, and this is a key pillar in the PMH. We have been advocating for more equitable access to these resources, and many of the expanded 'teams' that were funded by the MOHLTC earlier in 2018 have many of the features of the PMH.

We need to do more to make the PMH a reality for all practices. A key step towards greater adoption of the PMH is to simplify what the PMH looks like in your practice to make this vision more tangible. We will be working on this along with the College of Family Physicians (CFPC) of Canada's PMH 2.0 release, once finalized, for use in Ontario.

The OCFP also believes that medical homes cannot exist in silos from other parts of the health system. We have talked about Patient's Medical Neighbourhood, where primary care medical homes serve as the anchor in a more connected health system – with hospitals, home and community care, long-term care and public health. Many LHINs and partners are involved in shaping a more tangible vision that includes the features of the PMH. We are also looking to others across the country who are supporting medical home-type models and learning from experiences in the US with their implementation of the Patient-Centered Medical Home. We know that this vision is achievable with the right investments in primary care.

The OCFP is aware that the PMH or the idea of the medical neighbourhood cannot fully succeed in the absence of a supportive environment. In that regard, particularly with Ontario's new government, it will be important to ensure that the benefits of the PMH and the role of family physicians are understood and valued.

Advocating for your Vital Role

Supporting you to provide the best care possible for your patients is core to the OCFP's work. And while we do this by offering value-add education and practice supports and bringing your perspective to planning tables, we are keenly aware that ultimately the care experience – for you and your patients – is shaped by our policy environment. It is essential that you operate within an environment that reduces your administrative burden, enables better access to team-based care, and values your essential role as the backbone of a well-functioning health system.

As referenced in Dr. Glenn Brown's Report of the President, the OCFP was active this past year working with our partners in primary care to shape regulatory and government policies that impact your day-to-day practice and the profession of family medicine. Of note, we look forward to delivering our organizational response to the CPSO in early December regarding its draft continuity of care policy and ensuing discussions to ensure that the policy leads to positive outcomes for physicians and patients, alike. Our response to the CPSO will be shaped by our own consultation with members over the last three months.

We recognize that some of the advocacy we do is behind the scenes in meetings and one-on-one discussions, away from social media. We need to do a better job of telling you how we are supporting your value, even if it might not always be as visible to you. This includes our direct communication with our partners in primary care and government officials on policies such as OHIP+, immunization reporting, safe injection/overdose prevention sites, and new MAiD reporting.

More broadly, perhaps the most significant healthcare development this past year for members was the election of a new government in Ontario and the OMA's move to binding arbitration for the physician

services agreement. Although the OCFP does not hold the negotiations mandate with government, we were and continue to be focused on amplifying your voice and re-asserting the value of your role in our health system. We did this with MPPs leading up to the election, by being active at tables where decisions are being shaped so that your perspectives were represented, and by collaborating across family medicine with our colleagues at the OMA's Section on General and Family Practice and the Association of Family Health Teams of Ontario.

Our fall symposium, OCFP Renew, was a key step in the OCFP's efforts along this path, focusing on the role family physicians can and should play as health care continues to evolve. Among the guest speakers was Dr. Rueben Devlin, Chair and Special Advisor of the Premier's Council on Improving Healthcare & Ending Hallway Medicine, sharing insights on the new government's health agenda; Globe and Mail columnist Andre Picard, providing his perspectives on health reform; Dr. Ruth Wilson, speaking about the progress and obstacles towards reform over the past decade; and Dr. Ross Upshur, making the case for "expert generalists".

Stemming from this event, work is now underway to drive home the indisputable fact – with government and the broader community of health stakeholders – that investing in primary care, with family physicians as the lead, delivers better outcomes for patients at a lower cost. Indeed, the PMH principles and a stronger role for the family physician in our health system align with and support the government's core priorities of efficiency and sustainability. We are ready to deliver these critical messages to elected and non-elected decision makers.

Member Initiatives

Our Residents Committee advanced several key projects this past year, among them a locum guide and family medicine story series for new residents. We extend our sincere appreciation to Chair Dr. Stefani Vescio and Vice-Chair Dr. Danny Chan for their leadership in ensuring resident perspectives were incorporated in the OCFP's work. As the Residents Committee begins a new term, we are pleased to welcome new Chair and Vice-Chair, Drs. Paule Bertholet and Kate Curtis, along with our thanks for their dedication to this work and providing their peers with a voice at the OCFP.

On November 14, during the Family Medicine Forum in Toronto, the OCFP will officially welcome the organization's 62nd president, Dr. Jennifer Young from Collingwood, for the two-year term of 2018-2020. Following the installation of Dr. Young, the OCFP Awards ceremony will recognize community and medical leadership, outstanding contributions in teaching and exceptional teamwork by family doctors across Ontario.

We hope many of you can join us for these celebratory events, from 6:30 – 8:00 p.m. in the King Ballroom of the Hyatt Regency Toronto. A cocktail reception will immediately follow. For those unable to attend in person, the installation and awards ceremony will be livestreamed [here](#), courtesy of Ontario Telemedicine Network (OTN) broadcast.

Our sincere thanks to the Awards Committee members and Chair Dr. Amy Catania for their time and dedication to this key OCFP initiative celebrating family medicine. And to the nominators, thank you for taking the time to make submissions on behalf of your peers and colleagues. All of the nominees are compelling examples of the dedication and talents within family medicine.

With Gratitude

I wish to extend my gratitude to the many people who help bring the OCFP's mission, vision, and values to life: to our Board of Directors for your invaluable guidance, insight, and enthusiasm for the OCFP's work. In particular, my sincere thanks to outgoing President Dr. Glenn Brown for his exemplary leadership these past two years. I know the staff and Board of Directors were truly fortunate to have Dr. Brown at the helm of our organization, and we look forward to his continued contributions as Past President on the Board.

As the torch is passed to our new President Dr. Jennifer Young, we know we are in good hands and will be guided by a passionate advocate for family medicine and members. With Dr. Elizabeth Muggah from Ottawa becoming our new President-Elect, the future will continue to look very bright for the OCFP. Thank you Dr. Brown, and welcome Dr. Jennifer Young and Dr. Elizabeth Muggah to your new roles on the Board.

Thank you to our numerous committees, faculty, mentors, and advisors for lending your expertise and ensuring we are consistently delivering value-added, high-quality education, and practice supports to members; and to our many partners in primary care for our productive collaborations and shared commitment to a more equitable and sustainable health system. It is through this spirit of collaboration that we will continue to deliver results on behalf of physicians, patients and families across Ontario.

I also wish to express my appreciation to the dedicated staff at the OCFP for living our culture code and core operational value: "We're here for our members!"

Finally, my thanks to you – our members – for the vital work you do every day for your patients, in your communities and for our health system. I look forward to connecting with as many of you as possible and, grounded by your realities and needs, to the work together ahead and bringing us closer to our vision of: Family Physicians – Leaders for a Healthy Ontario.

Best regards,

A handwritten signature in cursive script, appearing to read "Leanne", written in black ink.

Leanne Clarke
Chief Executive Officer