

Registrant Information

Date of application:	2022-06-27 00:00:00
Title of group learning program:	The Working Mind Healthcare
Activity start date:	2014-01-01 00:00:00
Activity end date:	2030-04-26 00:00:00
Has the program been previously accredited?	Yes
When was it reviewed?	2022-05-02 00:00:00
By which CPD accreditation system?	Ontario Law Society
How many hours are required to complete the program?	5 hour employee; 7 hour manager
Applicant Category:	Not-For Profit
Name of nursing organization:	Mental Health Commission of Canada
Address:	350 Albert Street, Suite 1210
City:	Ottawa
Country:	Canada
Province / State:	Ontario
Postal/Zip Code:	K1R 1A4
Telephone Number:	613.683.3755
Email:	mhccinfo@mentalhealthcommission.ca
Website address:	https://mentalhealthcommission.ca/contact-us/
First Name:	Charles
Last Name:	Boyer
Address:	350 Albert Street, Suite 1210
City:	Ottawa
Country:	Canada
Province / State:	Ontario
Postal Code/Zip:	K1R 1A4

Telephone Number: 6138068804

Email: cboyer@mentalhealthcommission.ca

Is the planning committee contact different from the main contact? Yes

First Name: Micheal

Last Name: Pietrus

Address: 350 Albert Street, Suite 1210

City: Ottawa

Country: Canada

Province / State: Ontario

Postal/Zip Code: K1R 1A4

Telephone Number: 613-325-0550

Email: mpietrus@mentalhealthcommission.ca

Does your activity have a co-developer? Yes

Name of organization: Canadian Nursing Foundation

Address: 135 Michael Cowpland Drive Suite 105

City: Kanata

Country: Canada

Province / State: Ontario

Postal/Zip Code: K2M 2E9

Telephone Number: 613-680-0879 Ext. 223

Email: cmcgarvey@cnf-fiic.ca

5. Is the co-developing organization a nursing organization? Yes

6. Was the content developed by the applying nursing organization? Yes

Who developed the content? Mental Health Commission of Canada

File Scientific Planning Committee members.docx

1. What is the intended target audience of the activity?

This course is designed for people who work in healthcare settings or facilities. It is recommended that everyone from front-line nurses and doctors to healthcare support staff take this mental health training program.

2. What needs assessment strategies were used to identify the learning needs (perceived and/or unperceived) of the target audience?

The Working Mind core course is the basis for many adaptations for different sectors and target audiences. The original program, Road to Mental Readiness (R2MR) and was designed for the Canadian Military. In 2013, Opening Minds, a division of the Mental Health Commission of Canada, customized R2MR for first responder groups across Canada, and with its success adapted it further to the general workforce and then for other sectors. Over the years, a growing need for mental health and stigma reduction training was identified in healthcare settings. In 2014, focus groups were held with the Nova Scotia Community College, Capital District Health Authority, and the Government of Nova Scotia to better understand the needs for this type of training within healthcare. Successes and challenges were assessed from this group that formed the basis of the adaptation we know today as TWM Healthcare. Further needs were understood through a pilot program with the Ottawa Hospital in 2017 where 46 health providers (16 frontline and 30 supervisory staff) completed the program and provided feedback. The pilot of the program was a success and further supported the journey towards the development of TWM Healthcare. In 2020, the scientific results of a randomized control trial of delivery of The Working Mind with the Nova Scotia Health Authority was published in the Canadian Journal of Psychiatry. Also in 2020, we piloted the TWM Healthcare virtual program with St. Peter's Hospital and Hamilton Health Sciences.

3. What learning needs or gap(s) in knowledge, attitudes, skills or performance of the intended target audience did the scientific planning committee identify for this activity?

Designed by mental health experts in collaboration with healthcare professionals, this training program explores the different aspects of the healthcare industry while focusing on improving participants knowledge of mental health. At the end of this course, participants will be better able to:

- Define basic concepts related to mental health and mental illness;
- Recognize the impact of stigma and discuss how to reduce stigma and other barriers to care in the workplace;
- Recognize and keep track of changes in their mental health and well-being and know when to take appropriate actions;
- Have conversations about mental health and mental illness with colleagues, friends and family members;
- Identify and practice coping strategies to manage stress and remain resilient;
- Identify and use available resources to support themselves and others.

4. How were the identified needs of the target audience used to develop the overall and session-specific learning objectives?

The identified needs of the target audience helped the planning committee modify the TWM Healthcare course content through the following:

- Create and incorporate testimonial videos representing healthcare workers within the course to share their lived experience and their road to recovery. This is known as contact-based education.
- Added Ad Hoc Incident Review (AIR) principle from the First Responders program to supports managers' ability to respond and support their team during a adverse situation or crisis.
- Created and incorporated customized healthcare-specific scenarios throughout the course to reflect the participants' experience and increase relevance. .

5. State the sources of information selected by the planning committee to develop the content of this activity (e.g., scientific literature, clinical practice guidelines):

The scientific published sources of information that formed the development and content of the current program are summarized below:

- Effects of the Anti-stigma Workplace Intervention “Working Mind” in a Canadian Health-Care Setting: A Cluster-Randomized Trial of Immediate Versus Delayed Implementation. The Canadian Journal of Psychiatry, 2020. <https://journals.sagepub.com/doi/10.1177/0706743720961738>
- Implementation, Uptake, and Culture Change: Results of a Key Informant Study of a Workplace Mental Health Training Program in Police Organizations in Canada. The Canadian Journal of Psychiatry, 2019. <https://pubmed.ncbi.nlm.nih.gov/31056932/>
- The Working Mind: A Meta-Analysis of a Workplace Mental Health and Stigma Reduction Program. The Canadian Journal of Psychiatry. 2019. <https://pubmed.ncbi.nlm.nih.gov/31122049/>
- The Road to Mental Readiness for First Responders: A meta-analysis of program outcomes. Canadian Journal of Psychiatry. (2019). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6591743/>
- Workplace Antistigma Programs at the Mental Health Commission of Canada: Part 1. Processes and Projects. The Canadian Journal of Psychiatry. 2019. <https://pubmed.ncbi.nlm.nih.gov/31194589/>
- Workplace Antistigma Programs at the Mental Health Commission of Canada: Part 2. Lessons Learned. The Canadian Journal of Psychiatry. 2019. <https://pubmed.ncbi.nlm.nih.gov/31067994/>
- Opening Minds in Canada: Targeting Change. The Canadian Journal of Psychiatry. 2014: <https://pubmed.ncbi.nlm.nih.gov/25565697/>
- Mental health initiatives in the workplace: models, methods and results from the Mental Health Commission of Canada. World Psychiatry. 2018: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6127746/>

6. What learning methods were selected to help the CPD activity meet the stated learning objectives?

Learning methods incorporated throughout the course include:

- Course introduction includes safe space guidelines to create a safe and respectful learning environment.
- Course objectives and outcomes were clearly outlined at beginning of each module.
- Content is organized into distinct modules to cover core topics (stigma, mental health continuum, coping strategies and building resilience, and supporting your team -manager only)
- Learner-centred training materials, using plain language and clear design, engaging graphic elements
- Certified facilitators with knowledge/experience directly related to mental health and healthcare
- Small group activities to engage participants in discussion (both virtual/in-person) on practical topics.
- Strict group size - Minimum 8 participants to a maximum of 15 participants virtual/25 participants in-person to foster high engagement with those in attendance.
- Contact-based education using peer (healthcare workers) testimonial videos describing the lived or living experience of a mental health or substance use problem and their recovery.
- Handouts and access to the learning management system for retention of the learning.
- Online self-paced boosters content where participants can refresh key messages and practice skills learned in the course.

7. What learning methods were selected to incorporate a minimum of 25% interactive learning?

Blend of videos, activities, questions, breakout rooms/tables mixed within the course. Examples of the engagement include:

- Group discussion activity on the impact of stigma
- Practice and examples using person-first inclusive language about people with lived or living experience of mental health or substance use problems
- Brainstorm and discussion activity on understanding barriers to seeking help
- Self-reflection activity on using the Mental Health Continuum Tool
- Breakout discussions about scenarios related to the mental health continuum, coping strategies and seeking care and support
- Practise and demonstrations of The Big 4 coping strategies
- Brainstorm activity about sources of stress
- Discussion and reference guide to build resilience and promote self-care
- For managers specifically:
 - o Review return to work checklist
 - o Breakout discussion about scenarios related to workplace accommodations
 - o Breakout discussion about using the Ad Hoc Incident Review

8. How will the overall group learning program and individual sessions be evaluated by participants?

The Mental Health Commission of Canada (MHCC) and the University of Calgary have an open Research Ethics Board Approval for continuing analysis of The Working Mind training. The scales used in the evaluation are as follows (please refer to the scientific studies above on how these scales were used in our evaluations):

- Evaluating Stigma. Stigma is measured using the Opening Minds Scale for Workplace Attitudes (OMS-WA). The OMS-WA is a 22-item self-report questionnaire developed to assess attitudes, stereotypes, and behavioral intentions toward people experiencing mental health issues. Good internal consistency (i.e., $\alpha > .7$) of this measure was reported in previous studies.
- Evaluating Resiliency Skills (RS). RS were examined by a 5-item scale, specifically designed for The Working Mind program. This scale reflects participants' perceptions of their skill level and ability to recover from adverse or traumatic event.
- Evaluating the Mental health coping scale. The Mental Health Coping Scale consists of 5 items which explored participants' perceived understanding of mental health in the workplace, their intentions toward seeking help, and their willingness to support a colleague in regard to mental health in the workplace.

• Evaluating Open-ended questions. At the 3-month follow-up period, participants were asked if they had used any of what they had learned in The Working Mind program at work or at home (yes/no response), and if yes, to provide more details in their responses. Open-ended responses were analyzed for themes. In addition to this, MHCC conducts its own participant survey to understand the participants experience with the course and with the facilitator. This data is reviewed by the Training and Delivery Specialist for The Working Mind to ensure participants are learning the key outcomes of the course and that the facilitators adhere to the program.

9. Does the program provide participants with references justifying the appropriate answer?

Yes

10. How will feedback be provided to participants on their performance to enable the identification of any areas requiring improvement through the development of a future learning plan?

Once the course is complete, participants have access to The Working Mind Learning Management System which contains all course material as well as Self-Led Boosters that participant can access to remind them of the key takeaways from the course.

11. Describe how the references are provided to participants:

Participants will have access to all the references and other tools to enhance learning through The Working Mind Learning Management System.

12. How will the overall learning activity and each individual module (if applicable) be evaluated by participants?

Participants will be invited to complete a post survey questionnaire which will evaluate their overall experience and the specific modules within the course.

1. Has the CPD activity been sponsored by one or more sponsors?

No

<p>5. Describe the process by which the SPC maintained control over the CPD program:</p>	<p>The TWM Healthcare program has worked with a number of Healthcare organizations to ensure the program has positive impacts with Healthcare workers. Working with the University of Calgary ensured academic rigour was applied in all of the evaluations and that the evaluations were unbiased and at arms length from the Mental Health Commission of Canada. Including Healthcare professionals on the SPC also ensured that the feedback received from Healthcare would be included in the revisions of the program. Learning specialists within the Mental Health Commission of Canada have been tasked with revising the TWM Healthcare program to meet the educational needs from the pilots conducted with Healthcare organizations. The trainers selected needed to have Healthcare experience and their delivery of the program is also evaluated. Attachment 5 summarizes the needs assessment with the participating Healthcare organizations. It also highlights the evaluation outcomes – most notably was the Randomize Control Trial conducted with the Nova Scotia Health Authority published in the Canadian Journal of Psychiatry in 2020.</p>
<p>6. Describe the process used to develop content for this activity that is scientifically valid, objective, and balanced across relevant therapeutic options:</p>	<p>In 2019, the Canadian Journal of Psychiatry published original research entitled: Workplace Anti-stigma Programs at the Mental Health Commission of Canada: Part 1. Processes and Projects (2019, vol 64(supplement 6), 5S-12S). This publication contains the develop of content specific to The Working Mind that is scientifically valid, objective and balanced across relevant therapeutic options. This publication contains: • History or MHCC's work related to The Working Mind (6S) • Rationale for why MHCC implemented The Working Mind within a workplace context • Specific contained within the course that is evidenced-based (i.e., mental health continuum and big 4 coping strategies) • Rationale as to why MHCC developed content specific to stigma and contact-based education to be included in The Working Mind.</p>
<p>7. How were those responsible for developing or delivering content informed that any description of therapeutic options must utilize generic names (or both generic and trade names) and not reflect exclusivity and branding?</p>	<p>N/A this course does not refer to encourage specific therapeutic options or generic names/brands.</p>
<p>8. If the scientific planning committee identifies that the content of the CPD activity does not comply with the ethical standards, what process would be followed? How would the issue be managed?</p>	<p>We have open research ethics board approval for on-going studies related to the TWM Healthcare program under the guidance of psychologists. Our Program Development team also continues receiving feedback related to our programs. The program is updated regularly to ensure the course meets expectations and has positive impacts with participants that meet academic rigour for following ethical standards and positive impacts with participants.</p>
<p>9. How are the scientific planning committee members' conflicts of interest declarations collected and disclosed to:</p>	<p>The TWM Healthcare course is operated by the Mental Health Commission of Canada which is a not-for-profit organization. The Mental Health Commission of Canada oversees the delivery of the program through advice from the scientific planning committee. There are no products or other commercial activity related to the delivery of training. Should a conflict of interest arise that would impact the delivery of the program, the Mental Health Commission of Canada would be responsible for addressing this conflict and ensuring the course would be free from conflict of interest.</p>

<p>10. How are the speakers', authors', moderators', facilitators' and or/authors' conflicts of interest information collected and disclosed to:</p>	<p>TWM Healthcare facilitators are certified by successful passing a 5-day Facilitator Certification Training. For the purposes of the TWM Healthcare program – the facilitator must provide proof of experience within the healthcare sector in their application. The facilitators sign a contract that outlines the terms and conditions for them to deliver the training. When facilitating a TWM course, the facilitator can share their current role and previous experience to provide credibility, but they first and foremost represent the Opening Minds, MHCC program, and are required to deliver the training as presented, without any additions or omissions to the content. Additional quality assurances for facilitators with course delivery are coordinated through the Mental Health Commission of Canada. These include: • access to a TWM mentor in the beginning stages of facilitating • access to the TWM Facilitator portal which contains additional learning aids and update content • spot checks from the Mental Health Commission of Canada's Training and Delivery Specialist to ensure high quality of delivery • review of participant feedback surveys for to ensure successful delivery and continuous improvement.</p>
<p>11. If a conflict of interest is identified, what are the scientific planning committee's methods to manage potential of real conflicts of interests:</p>	<p>Should a conflict of interest arise with the delivery of the program, the Opening Minds team at the Mental Health Commission of Canada will be notified and will be responsible for actioning and removing any conflicts of interest. For example, there may be conflicts of interest that emerge among those facilitating the program – if this were to be the case these facilitators would be either removed or made ineligible to further delivery the program.</p>
<p>12. How are payments of travel, lodging, out-of-pocket expenses, and honoraria made to members of the scientific planning committee, speakers, moderators, facilitators and/or authors?</p>	<p>Individual organizations are responsible for booking facilitators with the Mental Health Commission of Canada. Through the Facilitator Certification Training where individual organizations have facilitators that can deliver the course within their own organizations, these organizations pay the Mental Health Commission of Canada a nominal fee to cover the costs of the certificates for individuals and other on-going support for delivery of the program.</p>
<p>13. How has the nursing organization ensured that their interactions with sponsors have met professional and legal standards including the protection of privacy, confidentiality, copyright and contractual law regulations?</p>	<p>N/A we did not work with sponsors for the creation and delivery of the program.</p>
<p>14. How has the nursing organization ensured that product specific advertising, promotional materials or other branding strategies have not been included on, appear within, or be adjacent to any educational materials, activity agendas, programs or calendars of events, and/or any webpages or electronic media containing educational material?</p>	<p>N/A we do not permit changes to the TWM Healthcare program or it's associated materials.</p>

- 15. What arrangements were used to separate commercial exhibits or advertisements in a location that is clearly and completely separated from the accredited CPD activity?** N/A there are no other commercial exhibits or advertisements associated with the TWM Healthcare program.
- 16. If incentives were provided to participants associated with an accredited CPD activity, how were these incentives reviewed and approved by the nursing organization?** N/A we do not offer incentives to participants for participation in the program.
- 17. What strategies were used by the scientific planning committee or the nursing organization to prevent the scheduling of unaccredited CPD activities occurring at time and locations where accredited activities were scheduled?** Mental Health Commission of Canada works with nursing organizations for the scheduling of all courses. Mental Health Commission of Canada is able to accommodate scheduling needs of the nursing organizations which will prevent any problems. Programs are able to book both virtual and in-person locations.
- Declaration:** **I Agree** By clicking "I agree" you are agreeing to the declaration stated above.
- Name:** Charles Boyer
- Date:** 2022-06-27 00:00:00
- 1. The preliminary program/brochure/screen shot of webpage:** Appendix 1 - TWM Healthcare Website Screen shot.png
- 2. The Final Program:** Appendix 2 - TWM Healthcare (Virtual) Overview EN.pdf
- 4. Sample form and process for the collection, management and disclosure of conflicts of interests:** Appendix 4 - TWM Facilitator Agreements.pdf
- 5. The (summarized) needs assessment results:** Appendix 5 - TWM Healthcare needs assessment.pdf
- 6. The template evaluation form(s) developed for this activity:** Appendix 6 - TWM Healthcare Post Survey.pdf
- 8. The template certificate of attendance that will be provided to participants:** Appendix 8 - Sample Certificate _ TWM_Manager_EN.pdf

