

Changing the Way We Work Community of Practice for Ontario Family Physicians

Dec 5, 2025

**Dr. Daniel Warshafsky
Dr. Kieran Moore**



Infectious Disease & Current Public Health Issues



Family & Community Medicine
UNIVERSITY OF TORONTO

Ontario College of
Family Physicians



Infectious Disease & Current Public Health Issues

Moderators:

- **Dr. Ali Damji**, Family Physician, Credit Valley Family Health Team, Mississauga, ON
- **Dr. Eleanor Colledge**, CPD Program Director, University of Toronto and Family Physician, South East Toronto Family Health Team, Toronto, ON

Panelists:

- **Dr. Daniel Warshafsky**, Associate Chief Medical Officer of Health at the Office of the Chief Medical Officer of Health, Toronto, ON
- **Dr. Kieran Moore**, Chief Medical Officer of Health and Assistant Deputy Minister, Ontario Ministry of Health, Office of Chief Medical Officer of Health, Public Health Division, Toronto, ON
- **Special Guests** - Recurring Speakers, Former Hosts and Community of Practice Scientific Planning member

Host:

- **Dr. Jobin Varughese**, OCFP President, Family Physician, Assistant Dean of Primary Care Education for the School of Medicine at Toronto Metropolitan University (TMU), Brampton, ON

Session slides will be available on the CTWWW website by the end of the day.

The Changing the Way We Work Community of Practice for Ontario Family Physicians has been certified by the College of Family Physicians of Canada and the Ontario Chapter for up to 32 Mainpro+ Certified Activity credits.

Land Acknowledgement

We acknowledge that the lands on which we are hosting this meeting include the traditional territories of many nations.

The OCFP and DFCM recognizes that the many injustices experienced by the Indigenous Peoples of what we now call Canada continue to affect their health and well-being. The OCFP and DFCM respects that Indigenous people have rich cultural and traditional practices that have been known to improve health outcomes.

I invite all of us to reflect on the territories you are calling in from as we commit ourselves to gaining knowledge; forging a new, culturally safe relationship; and contributing to reconciliation.

Changing the way we work

A community of practice for family physicians

At the conclusion of this series participants will be able to:

- Identify the current best practices for delivery of primary care and how to incorporate into practice.
- Describe point-of-care resources and tools available to guide decision making and plan of care.
- Connect with a community of family physicians to identify practical solutions for their primary care practice under current conditions.

Disclosure of Financial Support

This CPD program has received in-kind support from the Ontario College of Family Physicians and the Department of Family and Community Medicine, University of Toronto in the form of logistical and promotional support.

Potential for conflict(s) of interest:

N/A

Mitigating Potential Bias

- The Scientific Planning Committee has full control over the choice of topics/speakers.
- Content has been developed according to the standards and expectations of the Mainpro+ certification program.
- The program content was reviewed by a three-member national/scientific planning committee.

Planning Committee: Dr. Jobin Varughese (OCFP), Dr. Ali Damji (DFCM), Dr. Eleanor Colledge (DFCM), Dr. Harry O'Halloran, Julia Galbraith (OCFP), Pavethra Yogeswaran (OCFP), Angeline Tan (OCFP), Marisa Schwartz (DFCM), Erin Plenert (DFCM)

Previous webinars & related resources:

<https://dfcm.utoronto.ca/past-changing-way-we-work-community-practice-sessions>

Self-learning program

The session materials, including recordings, tools, and resources are available as self-learning modules.

This one-credit-per-hour Group Learning program has been certified by the College of Family Physicians of Canada and the Ontario Chapter for up to 80 credits.

To participate in this self-learning:

- Select the dates/sessions you wish to participate in. You are welcome to complete as many sessions as you wish.
- Watch the video recording of the live session.
- Review the session tools and resources.
- Complete the self-learning post-session activity, click the button below.

[Complete self-learning activity](#)



Self-Learning Activity and Evaluation: COVID-19 Community of Practice for Ontario Family Physicians

By completing this Self-Learning Activity for the COVID-19 Community of Practice for Ontario Family Physicians, you are confirming that you have completed this activity.

*** 1. Attestation: I confirm that I have completed the COVID-19 CoP self-learning activity (video and resources). (If completing multiple session dates, please enter all that apply below**

ENTER DATE AS Month-Day-Year i.e. December 10, 2021)

Session Date(s):

Name:

Email:

*** 2. After reviewing this COVID-19 session material (video and resources), I have a question (s) regarding the content that needs clarifying.**

I have no questions

Question:

Missed a session? Want to earn credits?

The Self-learning Program lets you earn credits for watching past sessions.

Just click the link and fill out a 60s form!



Dr. Daniel Warshafsky – Panelist

Associate Chief Medical Officer of Health at the Office of the Chief Medical Officer of Health



Dr. Kieran Moore– Panelist

Chief Medical Officer of Health and Assistant Deputy Minister, Ontario Ministry of Health, Office of Chief Medical Officer of Health, Public Health Division

Speaker Disclosure

- Faculty Name: **Dr. Daniel Warshafsky**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: N/A
 - Others: N/A

- Faculty Name: **Dr. Kieran Michael Moore**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: N/A
 - Others: N/A

Speaker Disclosure

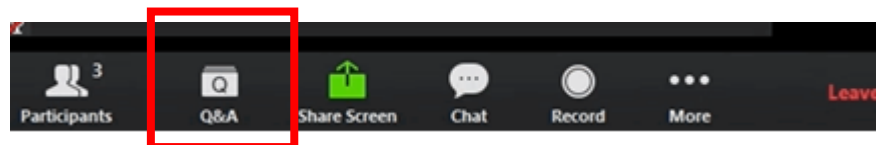
- Faculty Name: **Dr. Jobin Varughese**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians
 - Others: Toronto Metropolitan University, School of Medicine (Assistant Dean of Primary Care Education)

- Faculty Name: **Dr. Ali Damji**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians, Ontario Medical Association Section of General & Family Practice, Trillium Health Partners, Canadian Mental Health Association Peel Dufferin, Center for Effective Practice, GSK
 - Advisory boards: Medical Post Advisory Board, Foundation for Advancing Family Medicine, Center for Effective Practice
 - Others: N/A

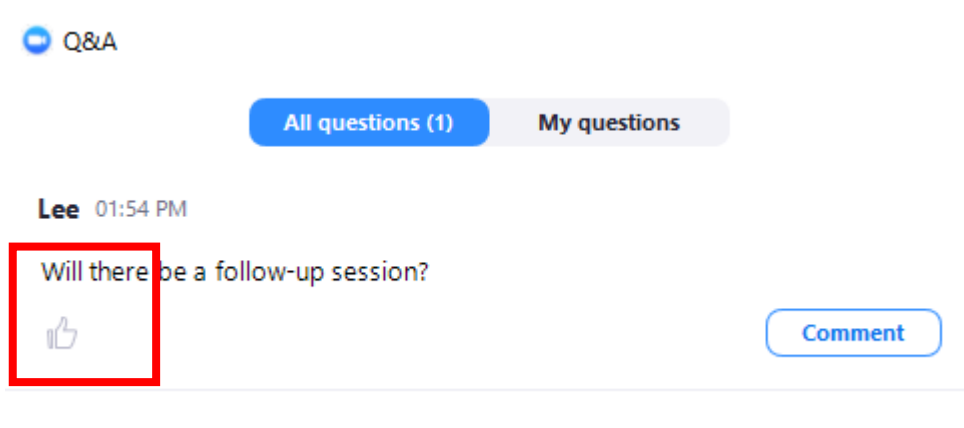
- Faculty Name: **Dr. Eleanor Colledge**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians
 - Others: The Foundation for Medical Practice Education (McMaster University)

How to Participate

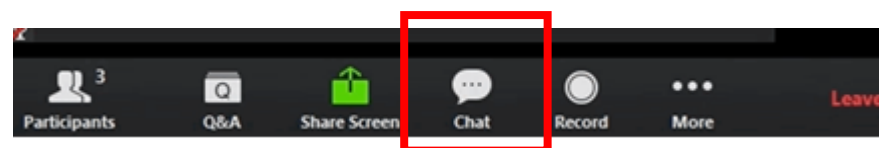
- All questions should be asked using the Q&A function at the bottom of your screen.



- Press the thumbs up button to upvote another guest's questions. Upvote a question if you want to ask a similar question or want to see a guest's question go to the top and catch the panels attention.



- Please use the chat box for networking purposes only.





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Ontario College of
Family Physicians



100th

Changing the Way We Work
Community of Practice

What is one way this CoP has impacted your clinical practice?

Contribute to the word cloud here:

PollEv.com/cpdcoordinat896

or scan the QR code





Dr. Daniel Warshafsky – Panelist

Associate Chief Medical Officer of Health at the Office of the Chief Medical Officer of Health



Dr. Kieran Moore – Panelist

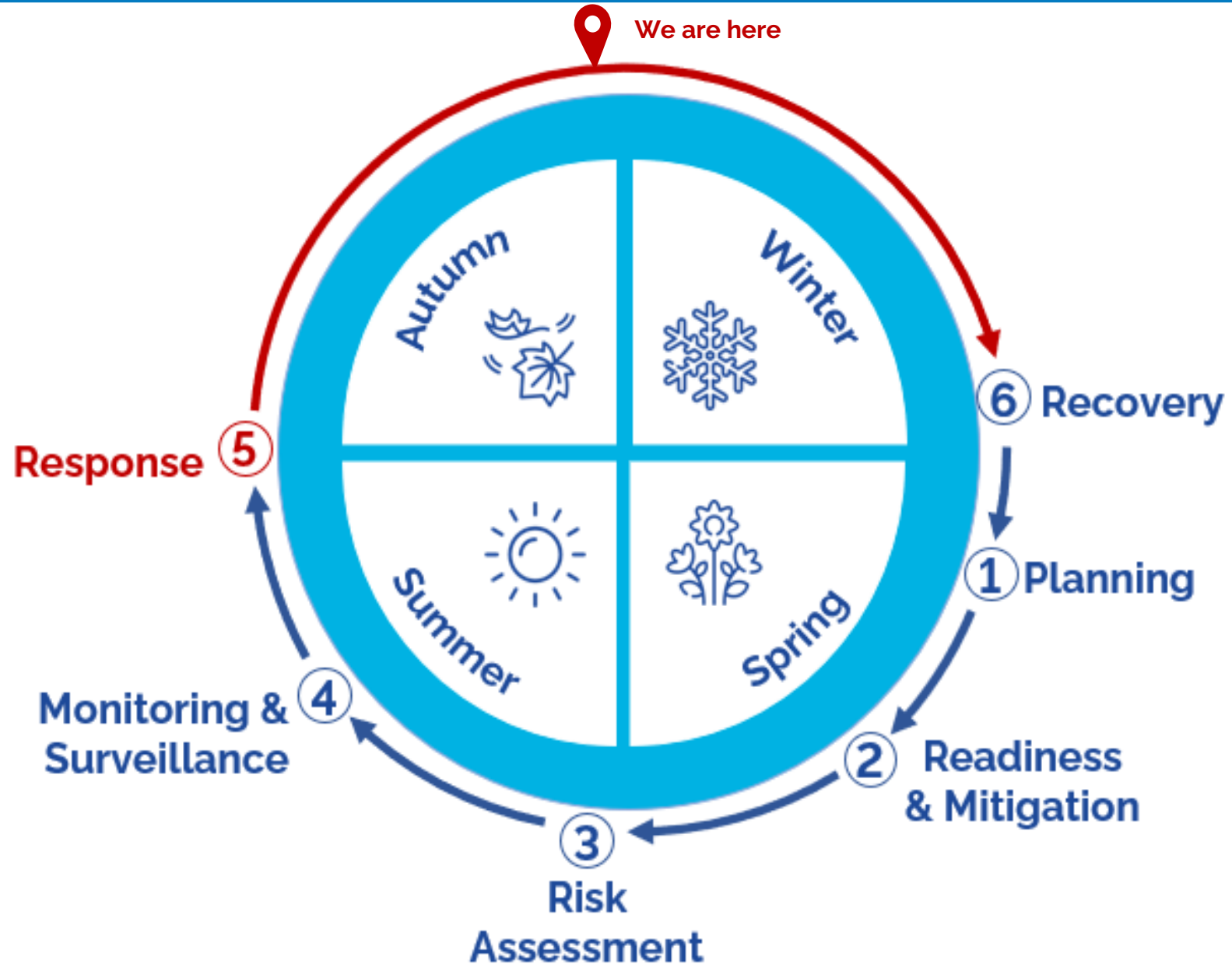
Chief Medical Officer of Health and Assistant Deputy Minister, Ontario Ministry of Health, Office of Chief Medical Officer of Health, Public Health Division



THANK YOU!!!

Preparedness Cycle and Yearly Planning

Preparedness Cycle



MOH Response Plan

Working with key partners, MOH has developed **baseline readiness and surge response plans**, in each of the following key functional areas. Plans include key information such as goals, success indicators, steps taken to ensure readiness, and mitigation planning in the event of a surge.



Surveillance, Monitoring and Evidence



Public and Stakeholder Communications



Immunization



Testing



Therapeutics



Acute and Post-Acute Care: All Ages



Long-Term Care Homes



Acute Care: Pediatrics



**Outpatient and Care in the Community
– Home Care**



Human Health Resources



Infection Prevention and Control



**Outbreak Management and Public
Health Advice**



Supplies and Equipment



**Outpatient and Community Care –
Primary Care**

*Early signals from the Southern Hemisphere:

- COVID-19: Activity remains low across jurisdictions, with NB.1.8.1 dominant in Australia; vaccination uptake in Australia has declined, especially among younger adults.
- RSV: Trends are typical, declining or low, with highest impact on children under 5 and those aged 16 or younger in Australia.
- Influenza: Elevated influenza activity in Australia with a slower decline post-peak; A(H1N1) is dominant in both Australia and New Zealand. Vaccine strains are well-matched, but coverage is lower than previous years.

Baseline scenario

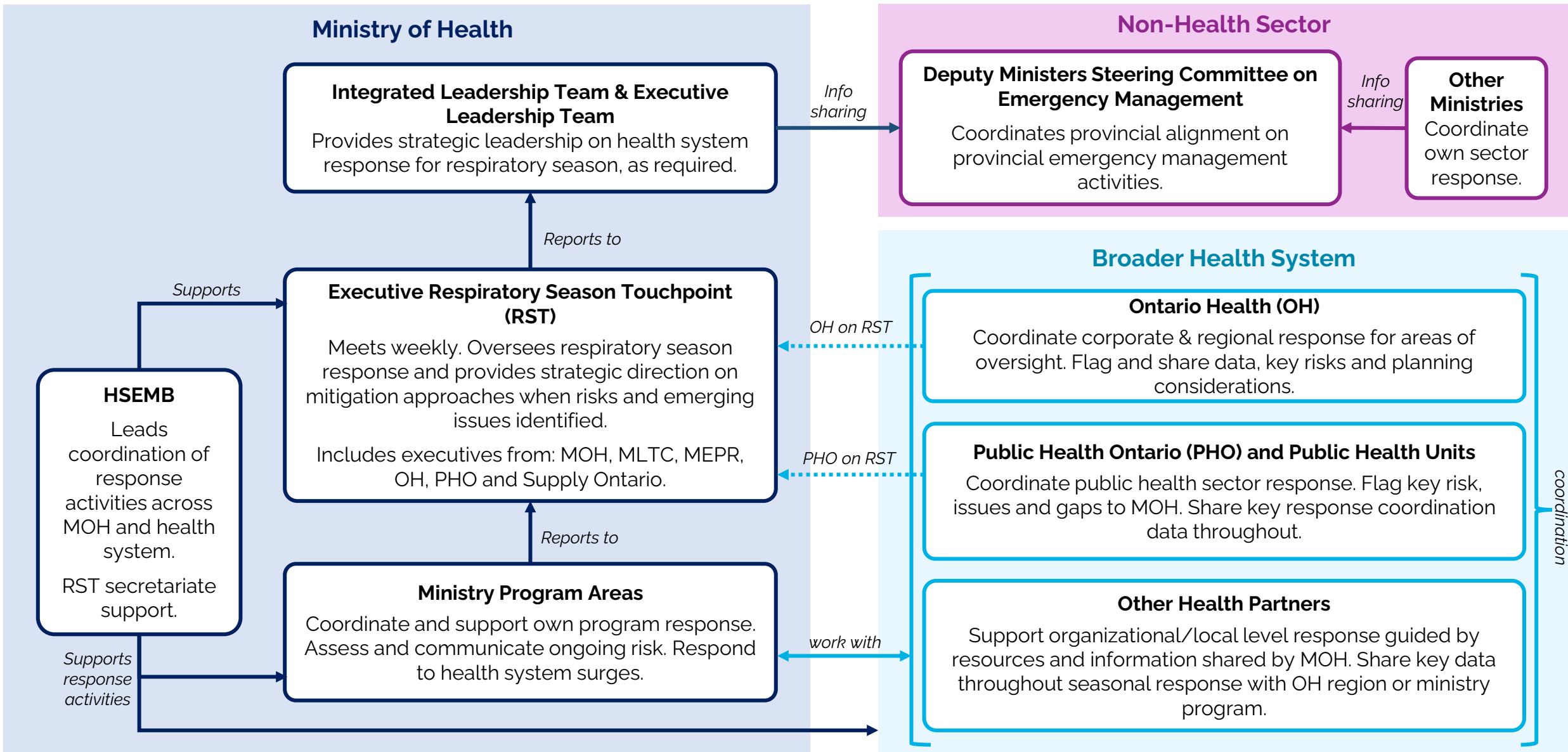
- Seasonal peak(s) of influenza, including both influenza A and smaller influenza B peaks of activity. Based on the 2024-25 season, it is anticipated that peaks of influenza activity will be more similar than the pre-pandemic levels.
- Seasonal peaks of RSV and other respiratory pathogens with the potential for early and extended RSV activity, and increased burden of illness from other respiratory pathogens, including measles and enterovirus.
- Ongoing, similar COVID-19 activity and burden than as the 2024-25 season.

Respiratory surge scenario

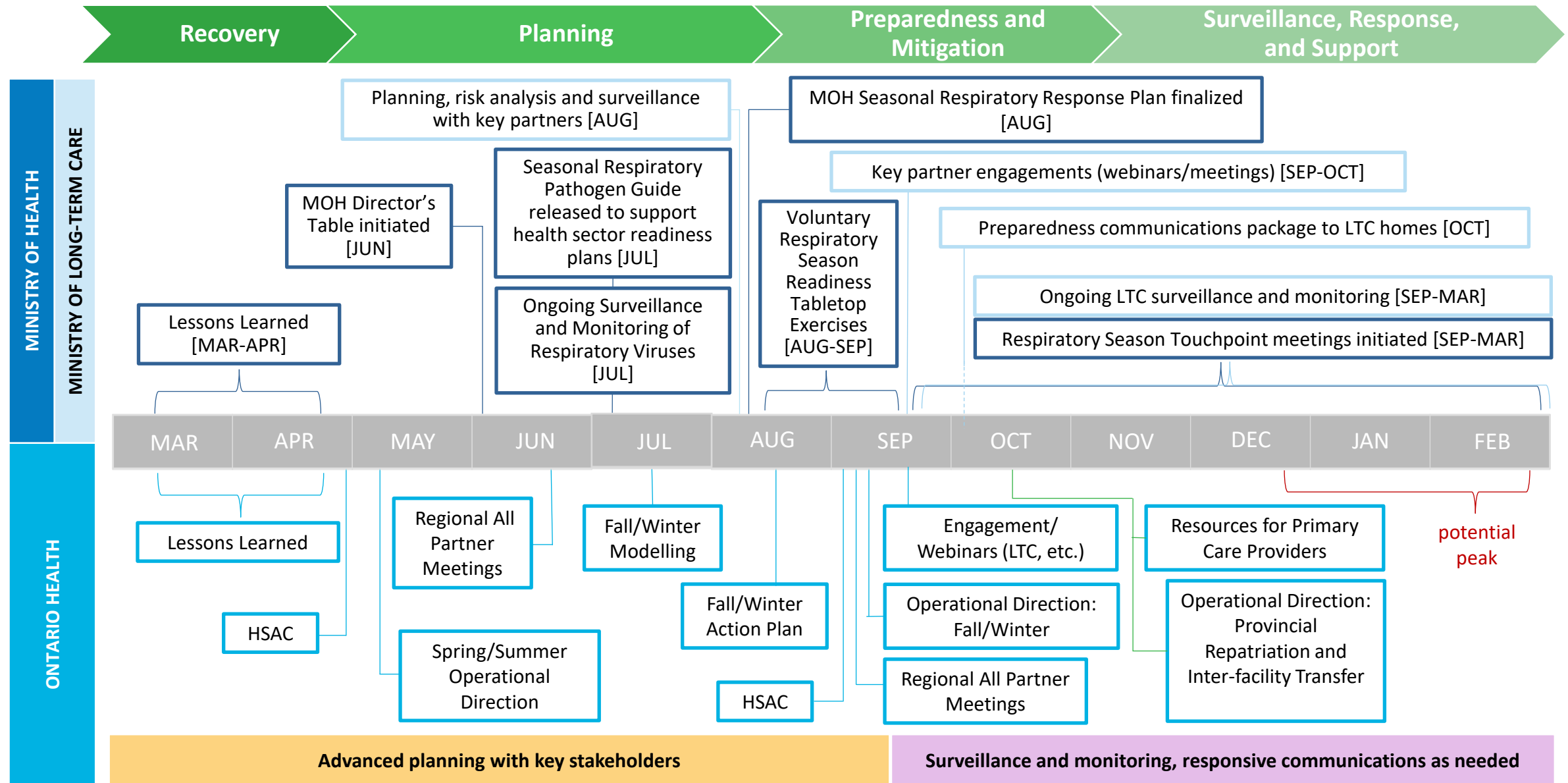
- Overlapping peaks of RSV, influenza, and COVID-19 activity through December-January timeframe, with extended increased respiratory virus activity through the winter.
- Respiratory virus activity with increased burden on elderly, long-term care home, and retirement home populations, along with pediatric populations.
- There are pressures across the health system due to simultaneous respiratory virus activity as well as ongoing health system pressures, and surge response mitigation activities (e.g., high resource demands) as required.

*Source: PHO - Summary of the 2025 respiratory season in the Southern Hemisphere

Health Sector Response Coordination Structure



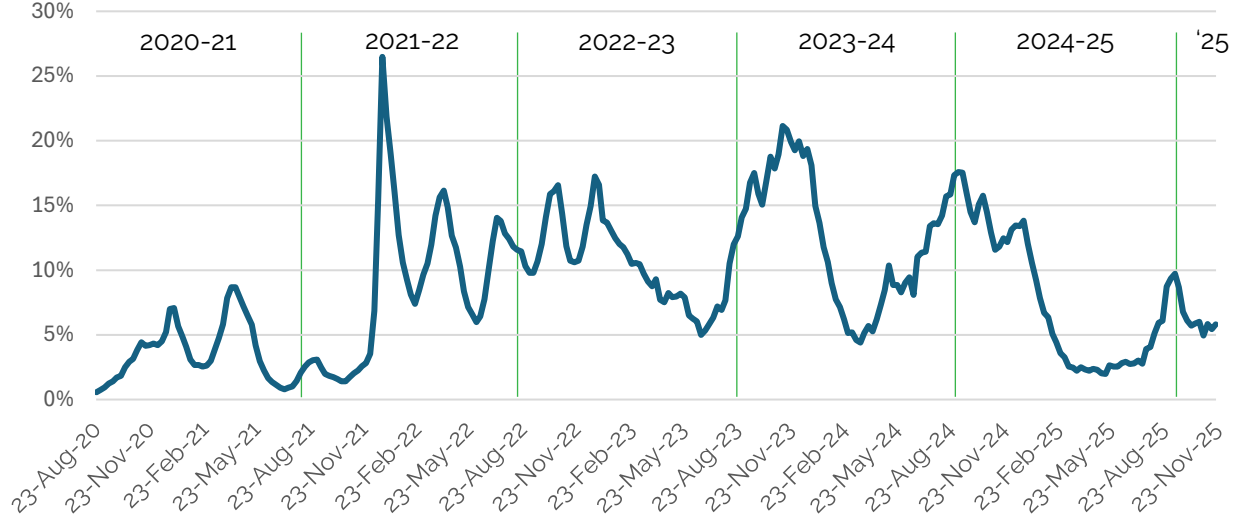
MOH/MLTC/OH Annual Fall/Winter Surge Planning Timeline



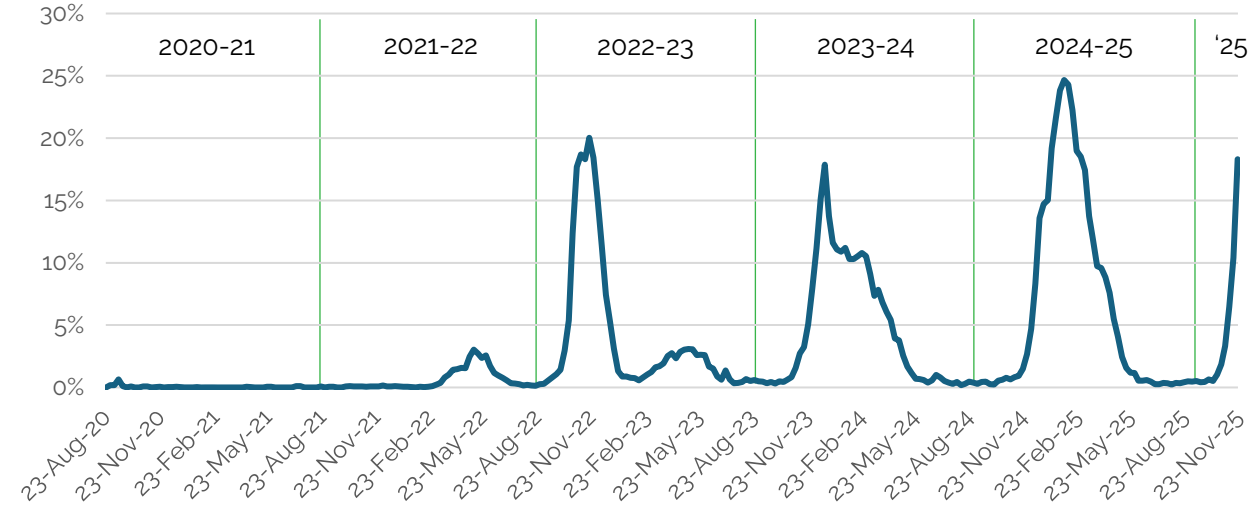
Seasonal Epidemiology

5-Year Epi Trend: Three Major Respiratory Viruses

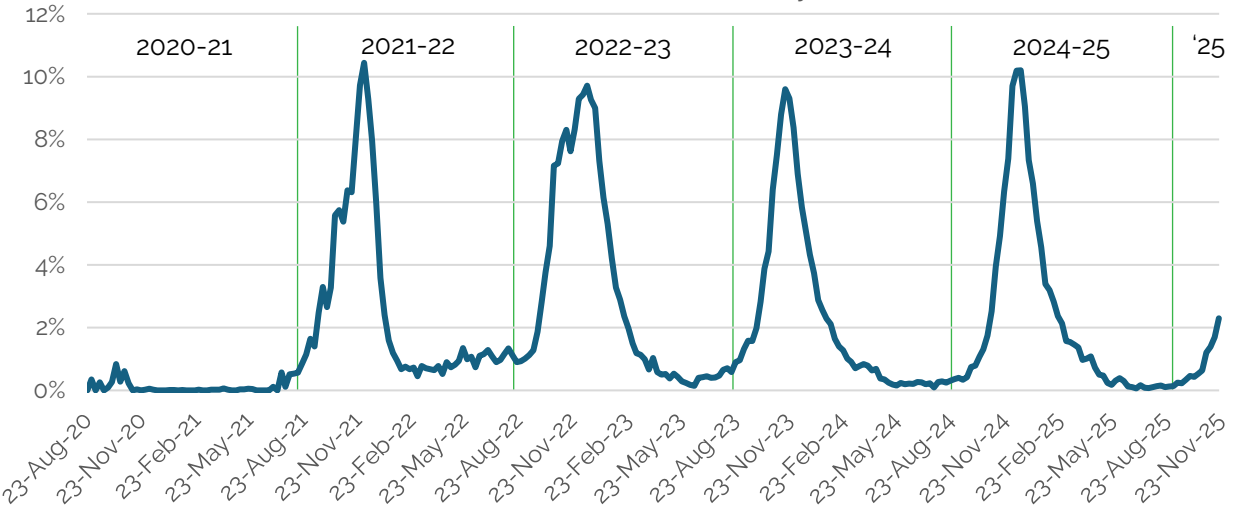
COVID-19: Percent Positivity



Influenza: Percent Positivity



RSV: Percent Positivity

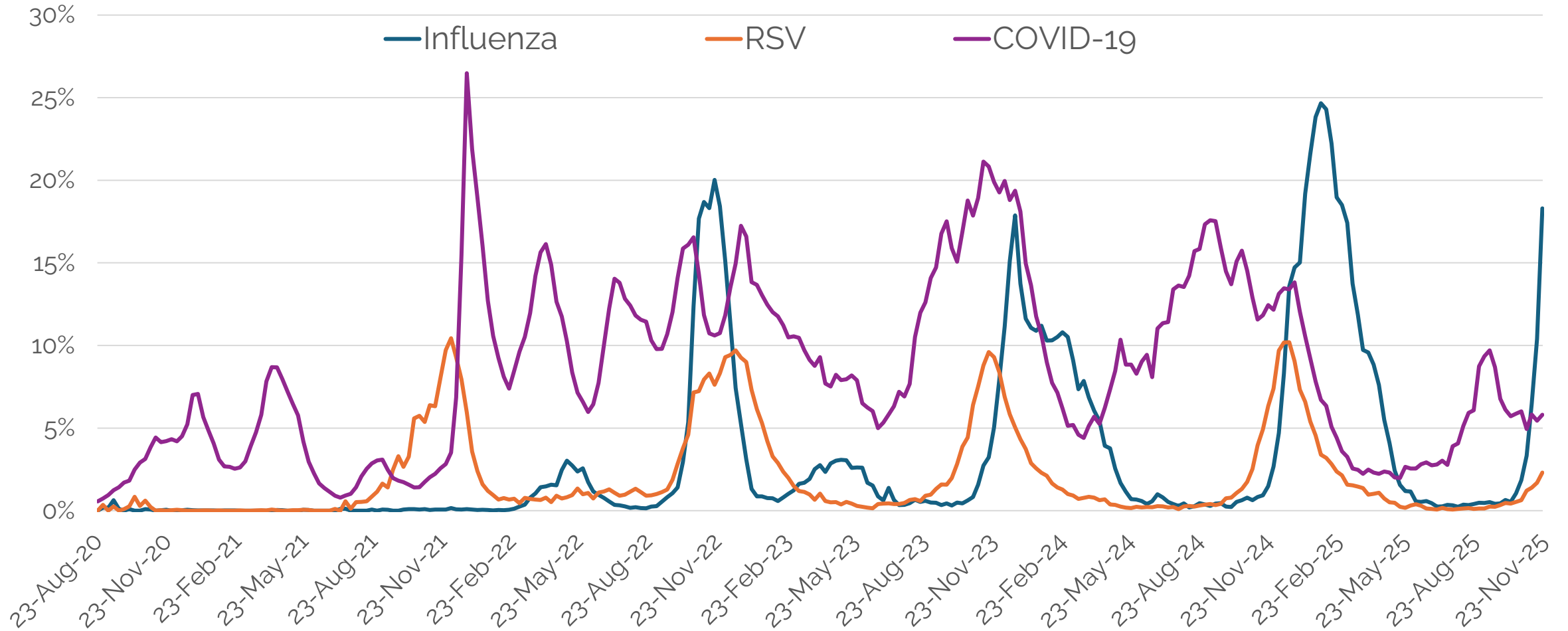


Current Projections:

- COVID-19: trending is unclear – two of past three seasons had increases through December but stable trends this year in November
- Influenza: likely peak within the next 2-5 weeks
- Infant RSV: likely peak within the next 2-5 weeks
- Senior RSV: likely peak within the next 6-9 weeks

Source: Ontario Lab Information System.
Data complete up to November 30, 2025

5-Year Percent Positivity: Major Respiratory Viruses



Source: Ontario Lab Information System. Data complete up to November 30, 2025

Summary of key respiratory metrics: December 4 published

Summary table of key respiratory metrics: Fall 2025/26

| Δ from previous week | COVID-19 | Δ | Influenza A/B | Δ | RSV | Δ | As of date |
|---|-----------|-----------|------------------------|----------------------|------|----------|------------|
| Viral: % positivity | 5.4% | -0.1% pts | 19.1% (A=18.6%B=0.6%) | 7.4% (A=7.1%B= 0.3%) | 2.4% | 0.5% pts | 30/11/2025 |
| *Viral: Positive cases/tests | 570 | 54 | 1,801 (A=1,792 B=9) | 859 (A=855 B=4) | 250 | 76 | 30/11/2025 |
| Viral: LTC % positivity | 10.7% | 1.7%pts | 11.3% (A=11.3%B= 0.0%) | 5.6% (A=5.6%B= 0.0%) | 0.4% | -0.0% | 29/11/2025 |
| New Outbreaks: LTC | 10 | -4 | 8 | 3 | 0 | 0 | 29/11/2025 |
| New Outbreak: Hospitals | 6 | -3 | 6 | 2 | 0 | 0 | 29/11/2025 |
| Hospital: New confirmed admits (last 7 days) | 171 | 20.4% | 371 | 60.6% | 66 | 46.7% | 2/12/2025 |
| Hospital: Daily confirmed patients (avg) | 274 | 26.1% | 256 | 64.4% | 47 | 41.4% | 2/12/2025 |
| **Hospital ICU :New confirmed admits (last 7 days) | 14 | 7.7% | 44 | 158.8% | 12 | | 2/12/2025 |
| **Hospital ICU: Daily confirmed patients (avg) | 10 | -1.4% | 18 | 115.3% | 6 | | 2/12/2025 |
| Treatment: Paxlovid/Tamiflu dispenses | 179 | -2.2% | 377 | 6.2% | N/A | | 20/11/2025 |
| ***Vaccines: Pharmacy doses administered (cumulative) | 1,096,129 | 62,503 | 1,434,491 | 223,864 | N/A | | 3/12/2025 |
| Vaccines: % of pop w/ fall 2025/26 dose | 8.6% | 0.5% | N/A | | N/A | | 3/12/2025 |

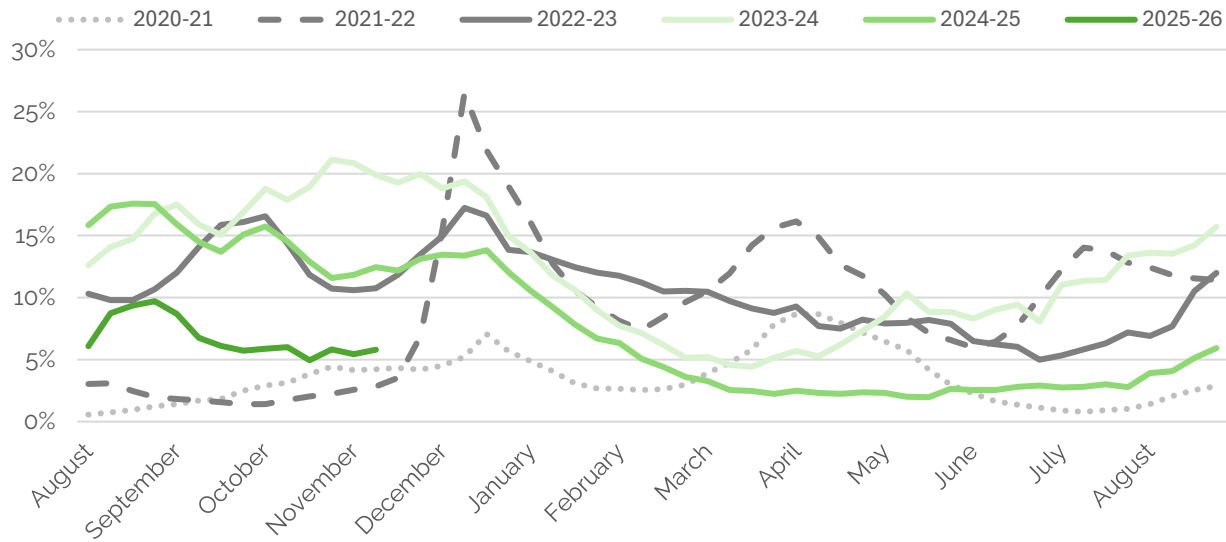
*Viral: Positive cases/tests: COVID & Flu are measured as cases (FLU to be added October 2025). RSV is measured as positive tests. See notes tab for more information.

** ICU: Criticall data source is used for ICU COVID measures, FLU and RSV ICU measures are provided from the hospital bed census data source versus Criticall data source.

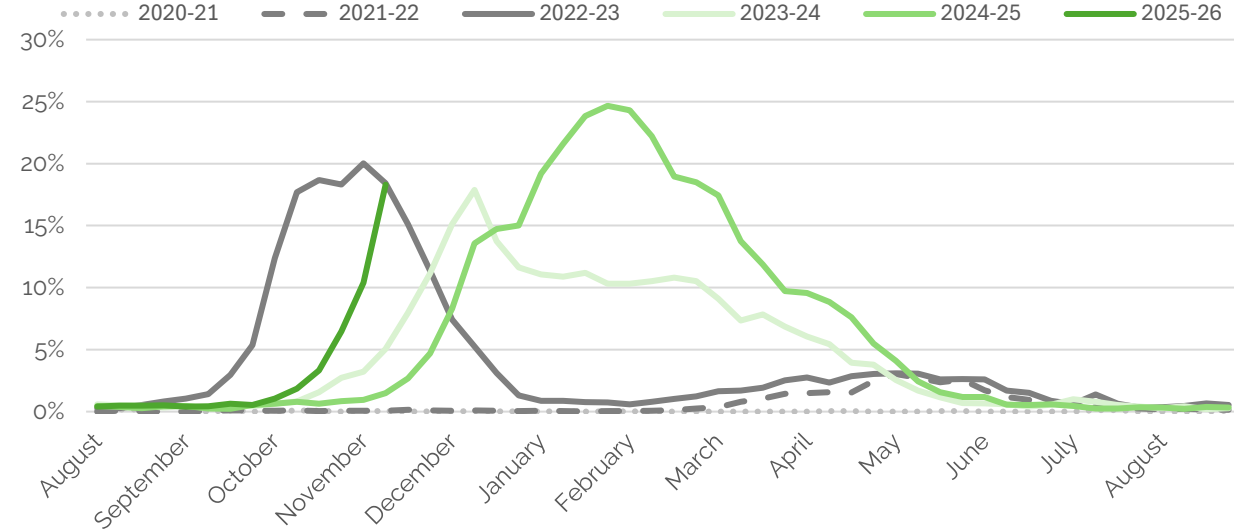
*Viral: COVID and flu cases refer to individuals with a positive PCR/NAAT test result in OLIS provided that the result is not within 90 days of another positive result. RSV positive tests refers to absolute number of positive tests in OLIS in latest week.

Respiratory Lab Testing: Percent Positivity

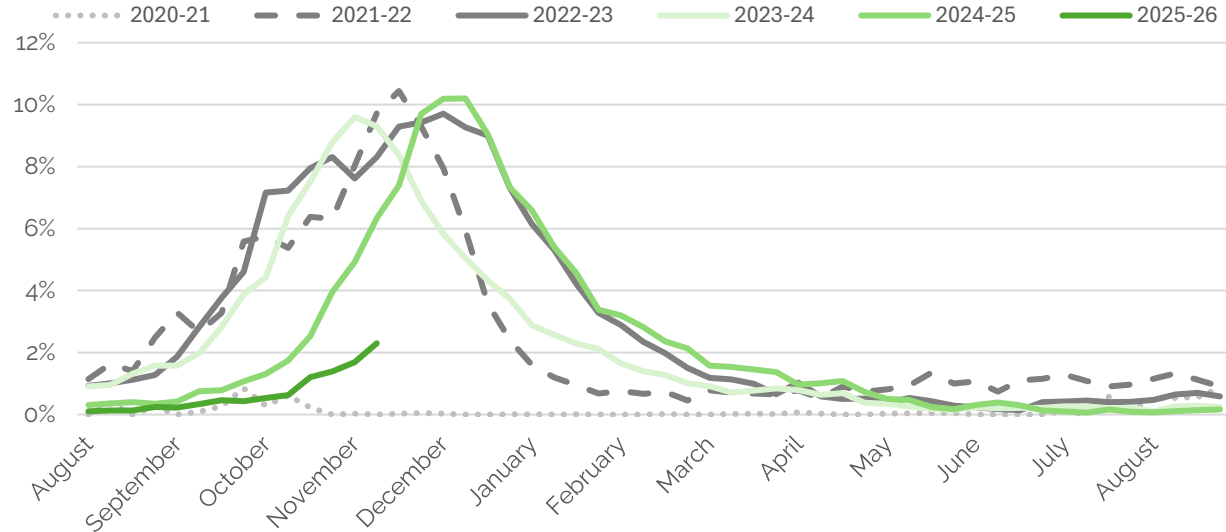
COVID-19: Percent Positivity



Influenza: Percent Positivity



RSV: Percent Positivity



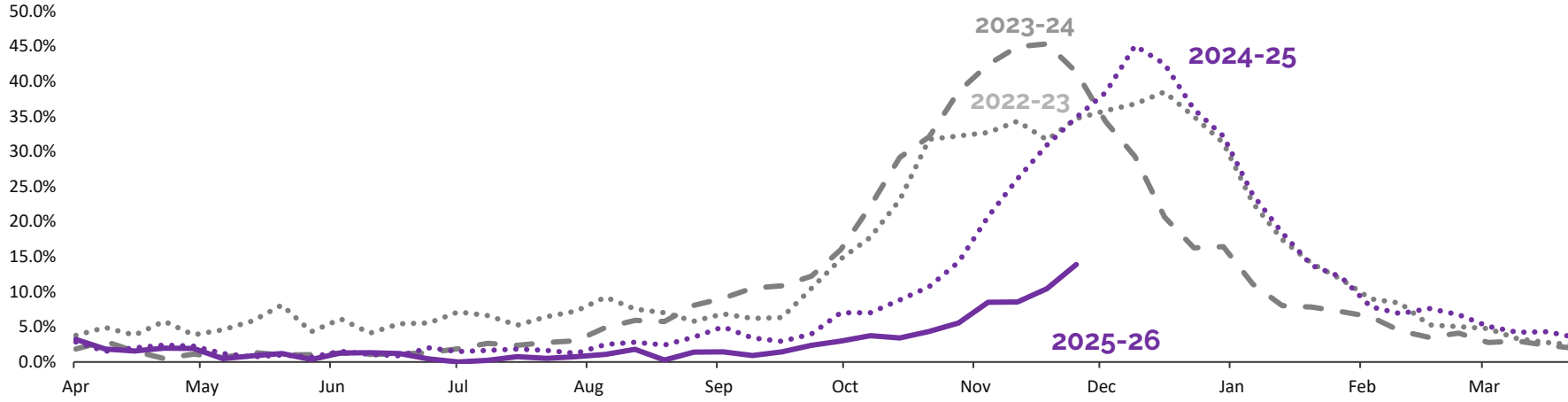
Genomic surveillance:

- COVID-19: XFG is projected to be dominant strain (39.6% of cases), followed by XFG.3 (32.4% of cases)
- Influenza A: for week ending November 22, approximately 73% of influenza A cases with subtyping were H3N2

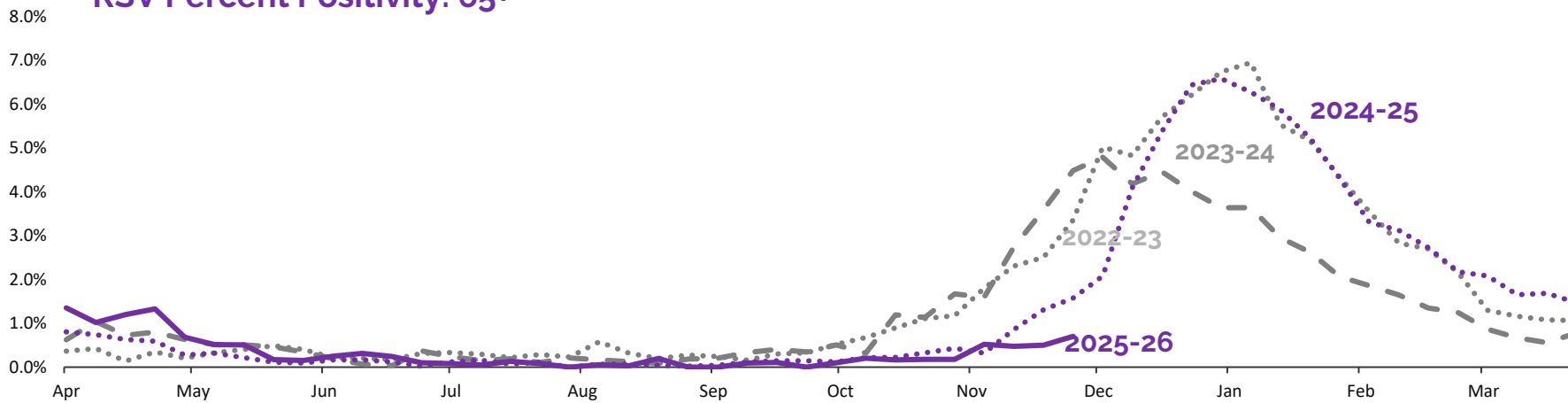
Source: Ontario Lab Information System.
Data complete up to November 30, 2025

RSV: Infant Peaks Earlier Than Senior

RSV Percent Positivity: 0-4



RSV Percent Positivity: 65+

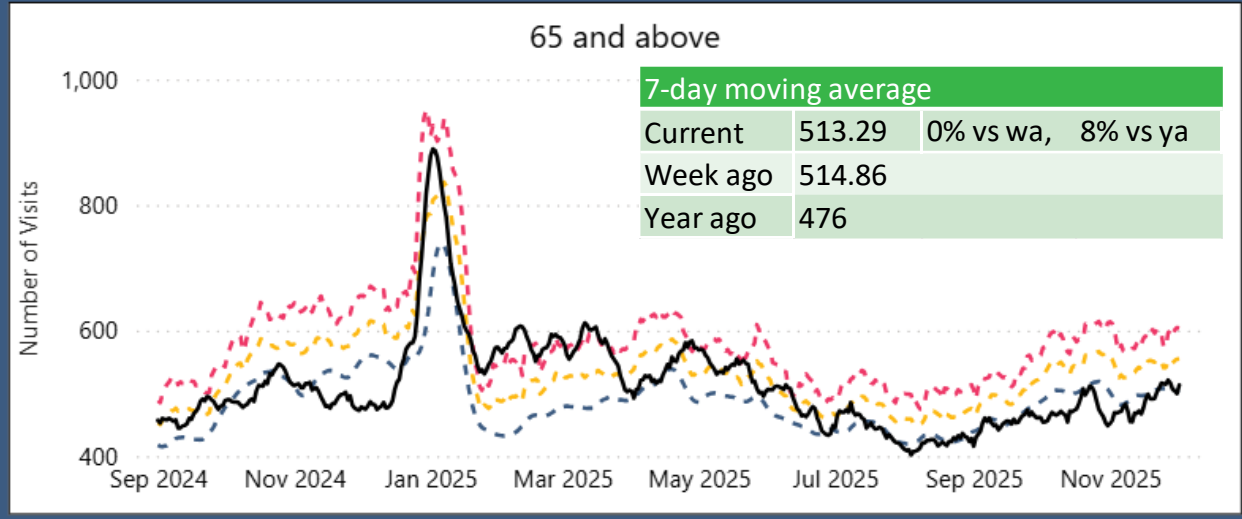
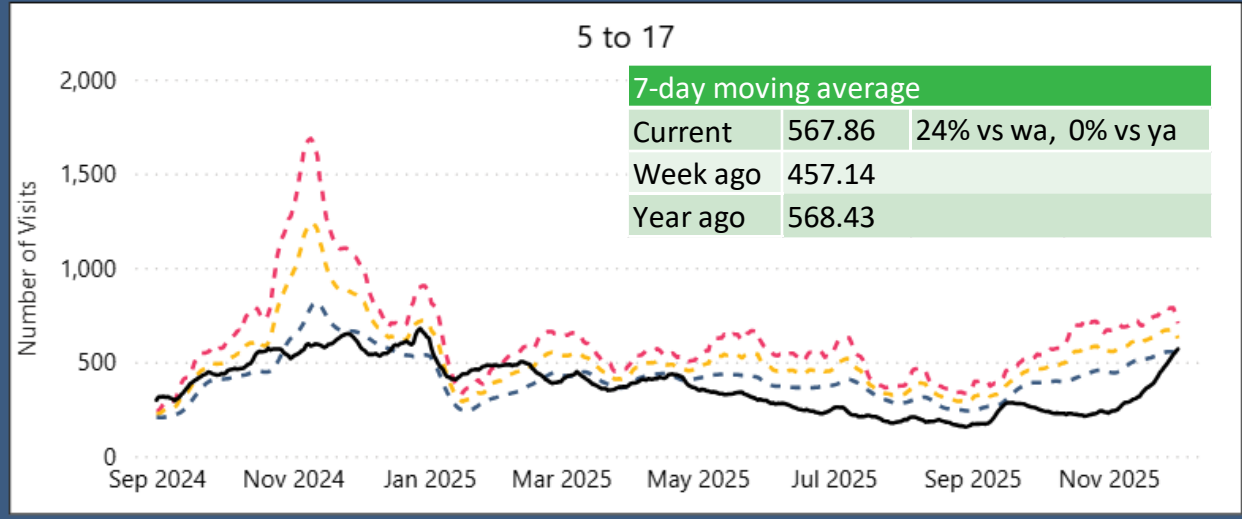
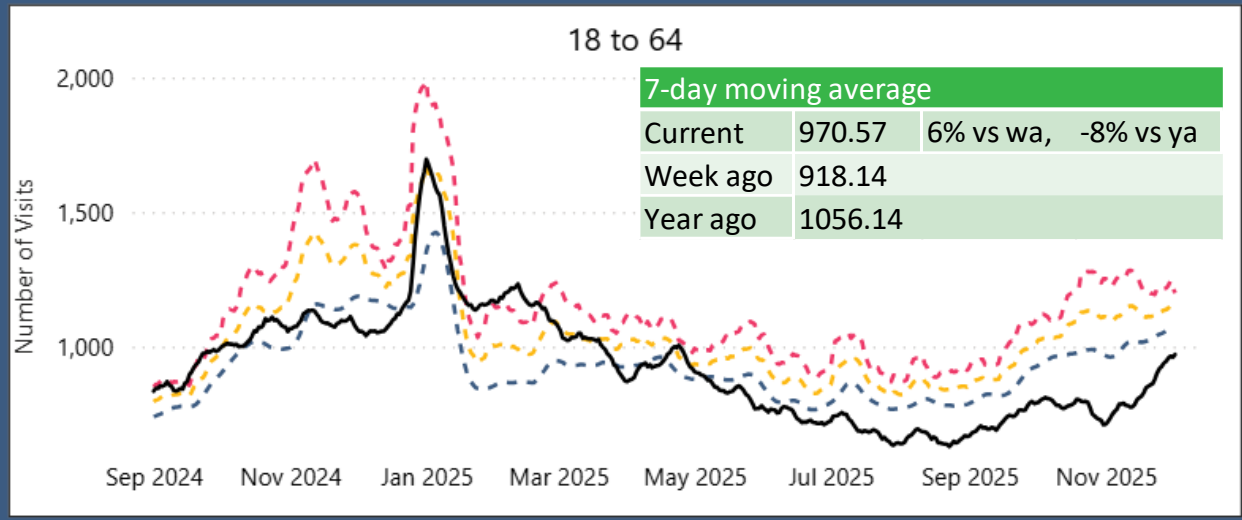
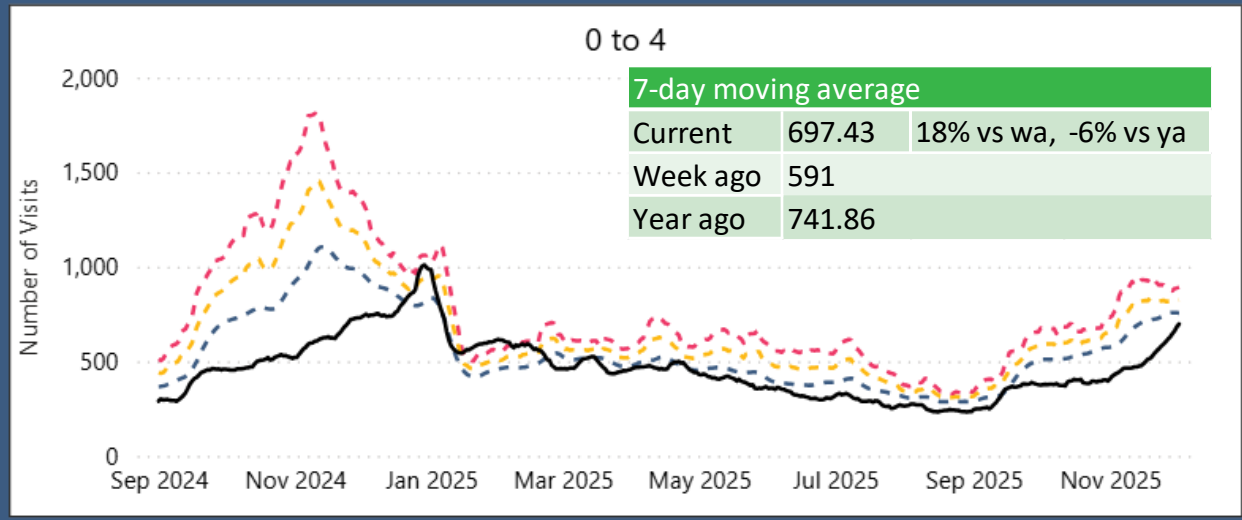


| Peak | 0-4 | 65+ |
|---------|--------------------|-------------------|
| 2022-23 | 38.5% (Dec 18) | 6.9% (Jan 8) |
| 2023-24 | 45.4% (Nov 19) | 4.8% (Dec 3) |
| 2024-25 | 45.1% (Dec 8) | 6.6% (Dec 29) |
| 2025-26 | 13.9% (current) | 0.7% (current) |

Source: Ontario Lab Information System. Data complete up to November 30, 2025.

ACES ED respiratory-related presentations volume data (to December 3)

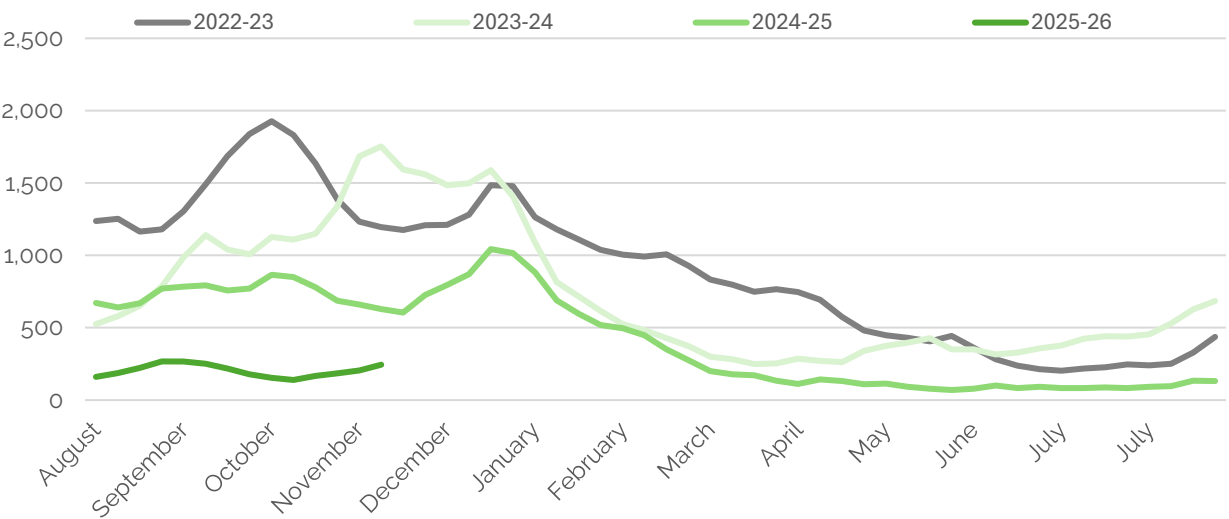
■ 7-Day Moving Average
 ■ Historical 7-Day Moving Average
 ■ Historical 7-Day Moving Average + 1 Standard Dev
 ■ Historical 7-Day Moving Average + 2 Standard Dev



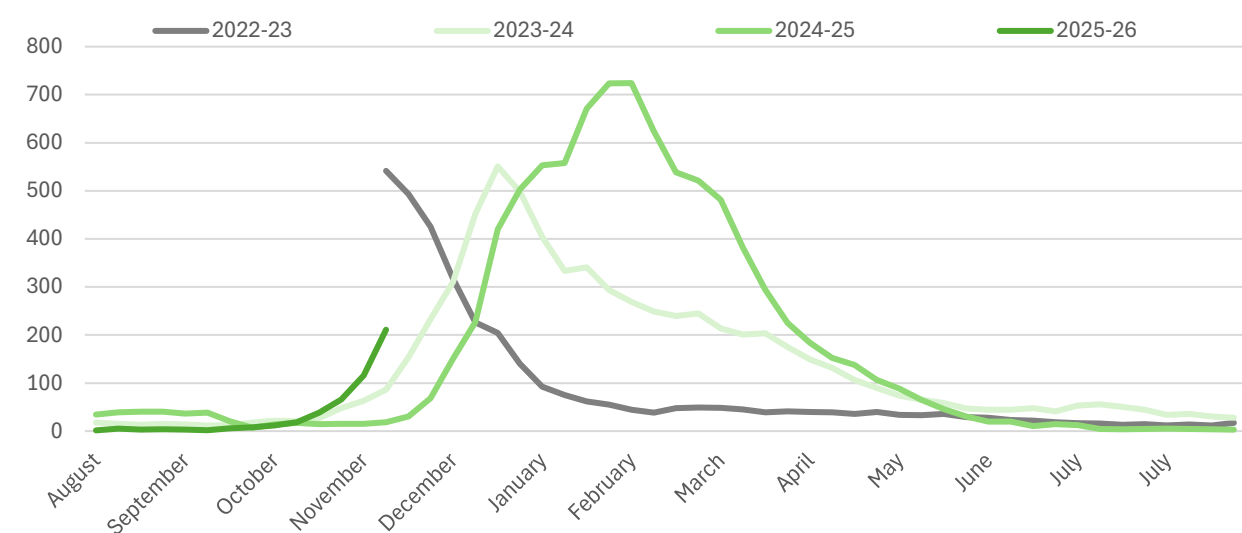
Source: [ACES](#)

Respiratory Virus Patients Admitted in Hospital: Daily Average

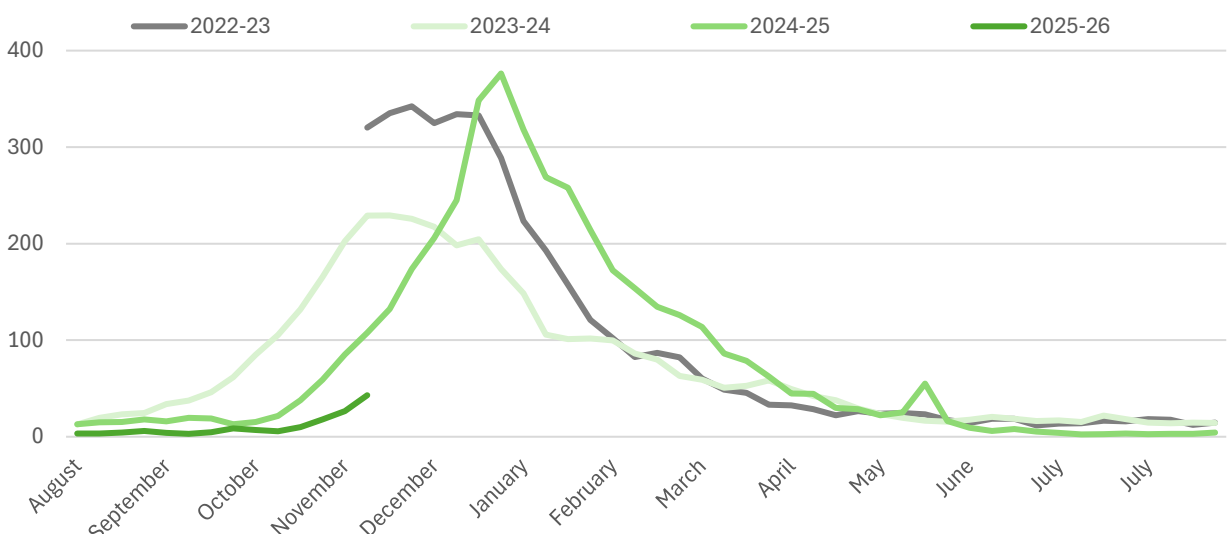
Daily Confirmed COVID-19 Patients in Hospital



Daily Confirmed Influenza Patients in Hospital



Daily Confirmed RSV Patients in Hospital

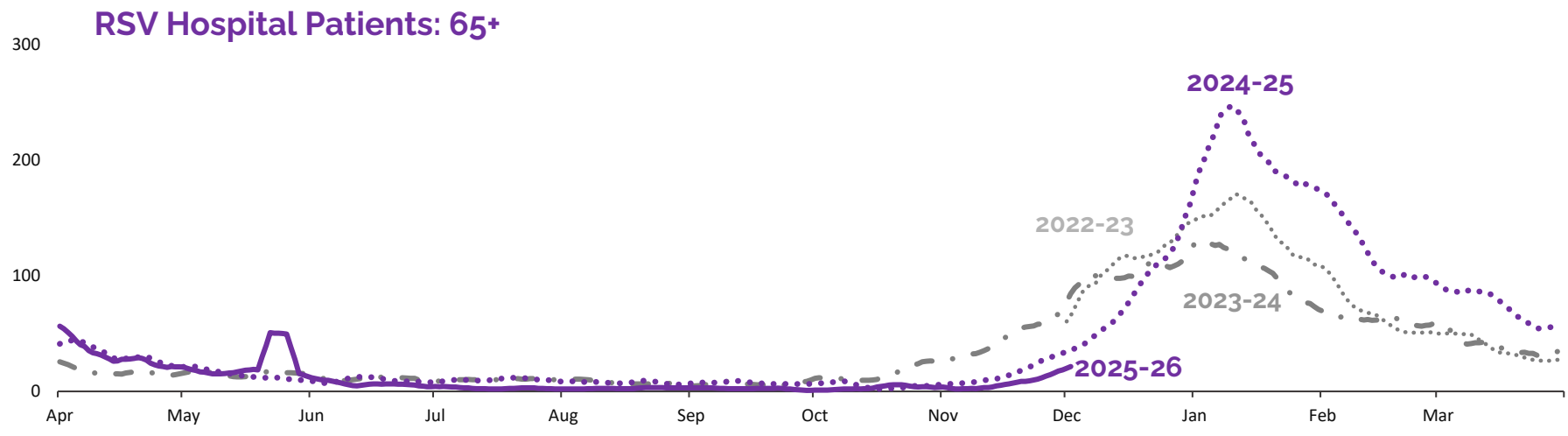
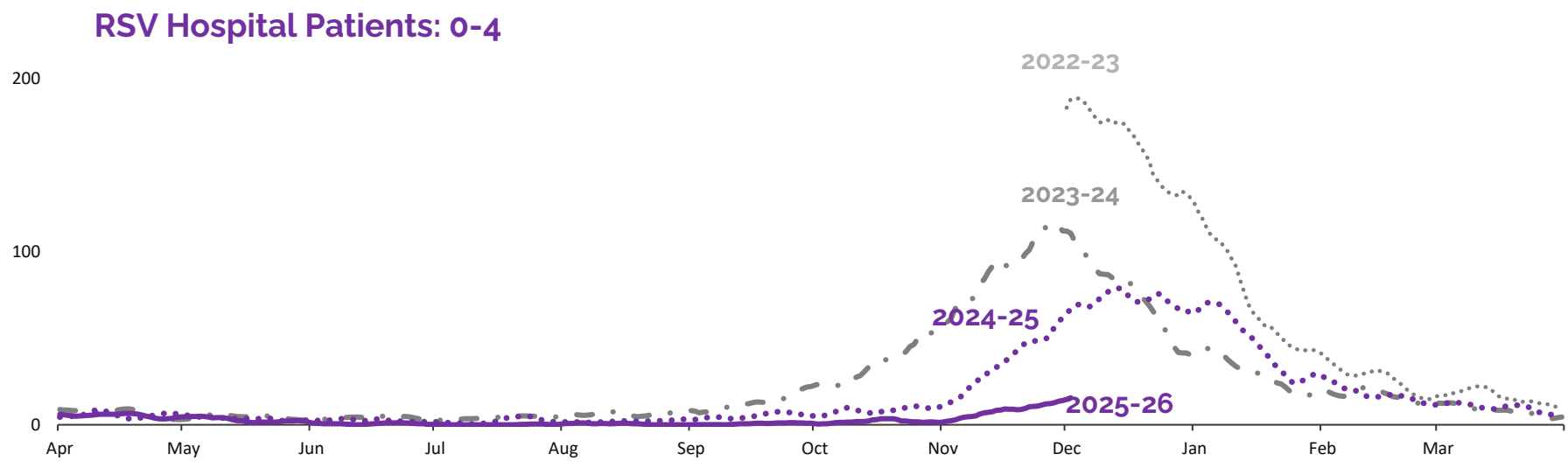


| Peak Patients | Current | 2024-25 | 2023-24 |
|---------------|---------|---------------|----------------|
| COVID-19 | 283 | 1,113 (Jan 5) | 1,832 (Nov 26) |
| Influenza | 287 | 802 (Feb 9) | 607 (Jan 1) |
| RSV: 0-4 | 16 | 89 (Dec 10) | 124 (Nov 28) |
| RSV: 65+ | 20 | 275 (Jan 7) | 142 (Jan 1) |

Source: Hospital Census Survey.
Data complete up to December 1, 2025



RSV: Infant Peaks Earlier Than Senior

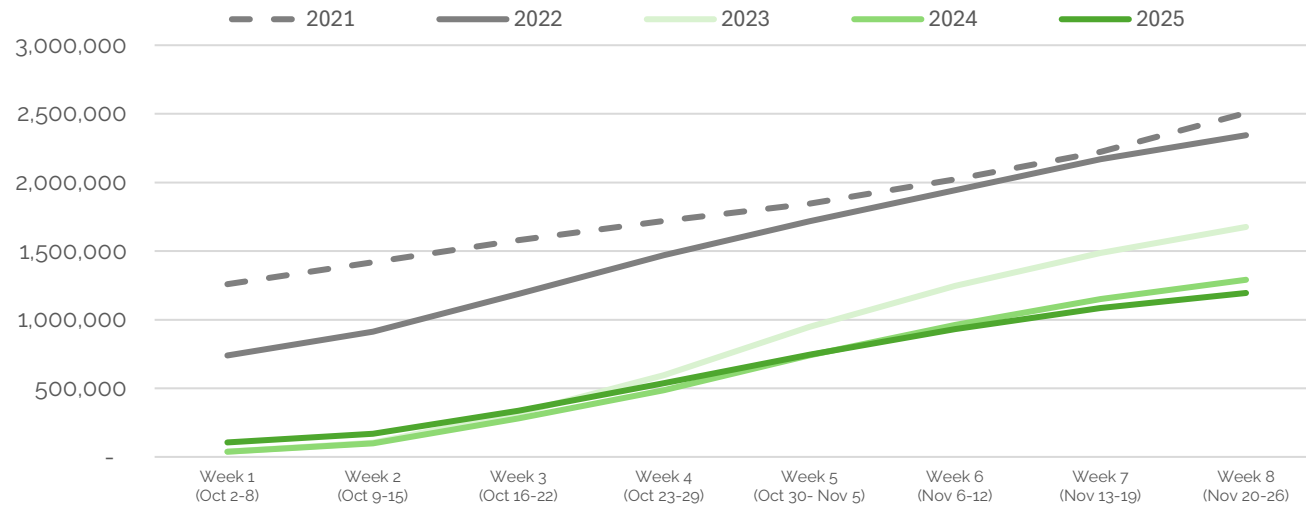


| Peak | 0-4 | 65+ |
|---------|-----------------|----------------|
| 2022-23 | 201 (Dec 1) | 182 (Jan 9) |
| 2023-24 | 124 (Nov 23) | 144 (Jan 1) |
| 2024-25 | 89 (Dec 10) | 279 (Jan 7) |
| 2025-26 | 21 (Dec 2) | 28 (Dec 2) |

Source: Hospital Census Survey. Data complete up to December 2, 2025.

Cumulative Immunization Administration

Cumulative COVID-19 Vaccine Administration (All Channels)



2025 Cumulative COVID-19 Administration:
1,244,899 (as of Dec. 1)

- 61.8% of all doses administered to 65+

Priority Population COVID-19 Coverage:

- 65+: 28.4%
- Long-term care home residents: 35.1%
- Retirement home residents: 40.8%

Cumulative Influenza Vaccine Administration (Pharmacy Channel Only)



2025 Cumulative Influenza Administration
(Pharmacy only): 1,559,443 (as of Nov. 26)

- 52.6% of doses administered to 65+

Of infants born in October and who the province has valid RSV immunization information about, 69% of infants have protection against RSV either through Beyfortus or prenatal RSV vaccine.

OH Influenza Clinical Guidelines and Resources page

Influenza Clinical Guidelines and Resources | Ontario Health

<https://ontariohealth.ca/clinical/infectious-diseases/flu>

Health care providers can find information on the use of select drug therapies for the management of patients with seasonal influenza.

Seasonal Influenza Clinical Guidance

The following document provides guidance and algorithms on the appropriate prescribing of antiviral therapy (oseltamivir, zanamivir, baloxavir, peramivir) for patients (adults and children) with seasonal influenza.

Highlights include information on influenza severity classification, risk factors for developing influenza-related complications, and recommendations for influenza treatment including an overview of the clinical evidence for antiviral therapies.

[Recommendations for Antiviral Therapy of Seasonal Influenza \(pdf\)](#) (November 3, 2025)

Resources

Resources

Immunization

- [Universal Influenza Immunization Program \(Ministry of Health\)](#)
- [Ontario's Flu Vaccination Program \(Ministry of Health\)](#)

Testing and Diagnosis

- [Ontario Respiratory Virus Surveillance Tool \(Public Health Ontario\)](#)
- [Canadian Respiratory Virus Surveillance Report- Influenza \(Health Canada\)](#)
- [Molecular Testing for Respiratory Viruses including influenza \(Public Health Ontario Laboratory\)](#)
- [Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings \(Ministry of Health\)](#)
- [Infectious Diseases Protocol Appendix 1: Case Definitions and Disease-Specific Information- Influenza \(Ministry of Health\)](#)

Drug Availability

[Expand all](#)

Oseltamivir (Oral)

Zanamivir (Inhaled)

Zanamivir (Intravenous)

Baloxavir tablet (Oral)

Baloxavir suspension (Oral)

Peramivir (Intravenous)

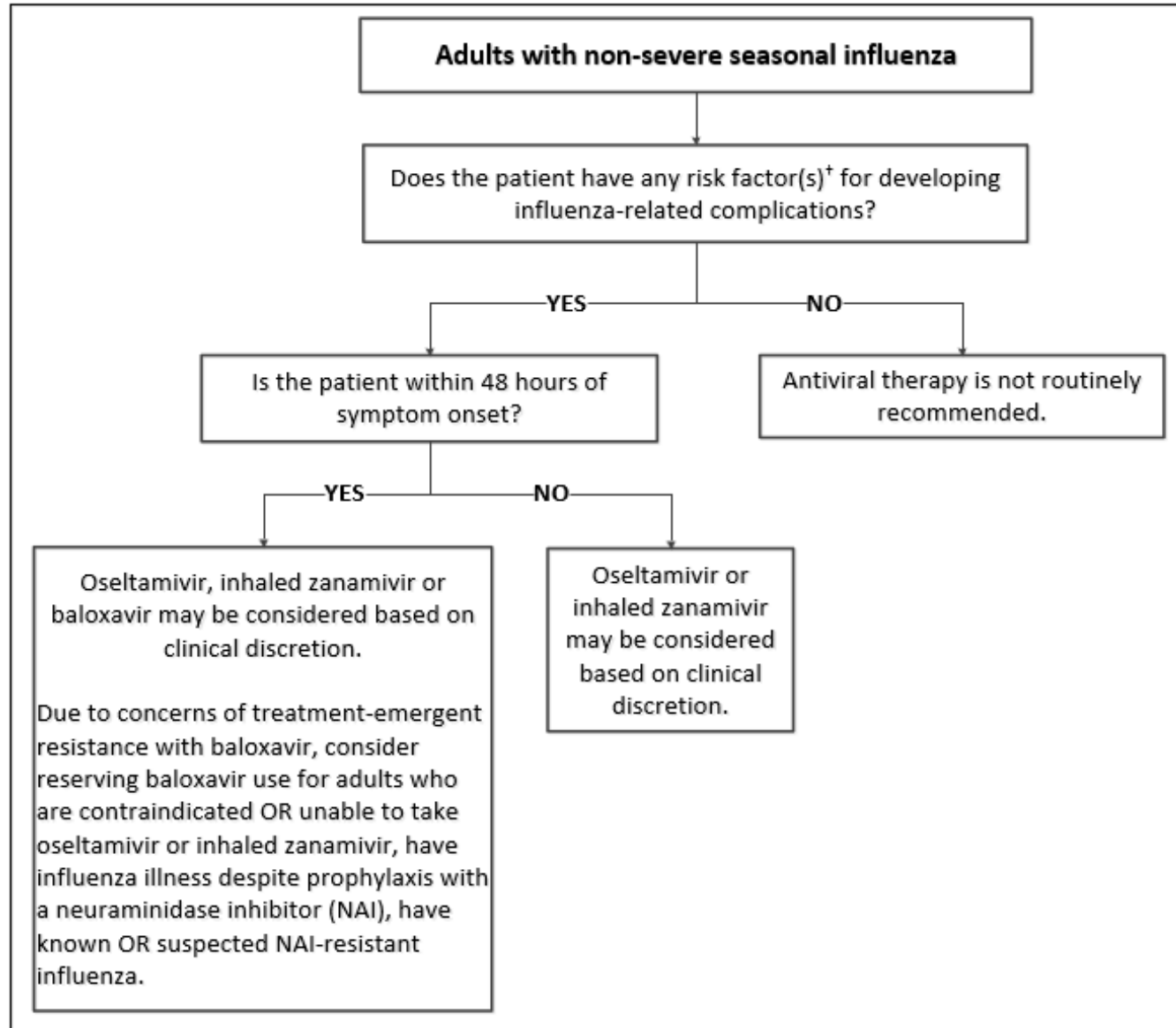
Oseltamivir (Oral)

Currently marketed in Canada: Yes

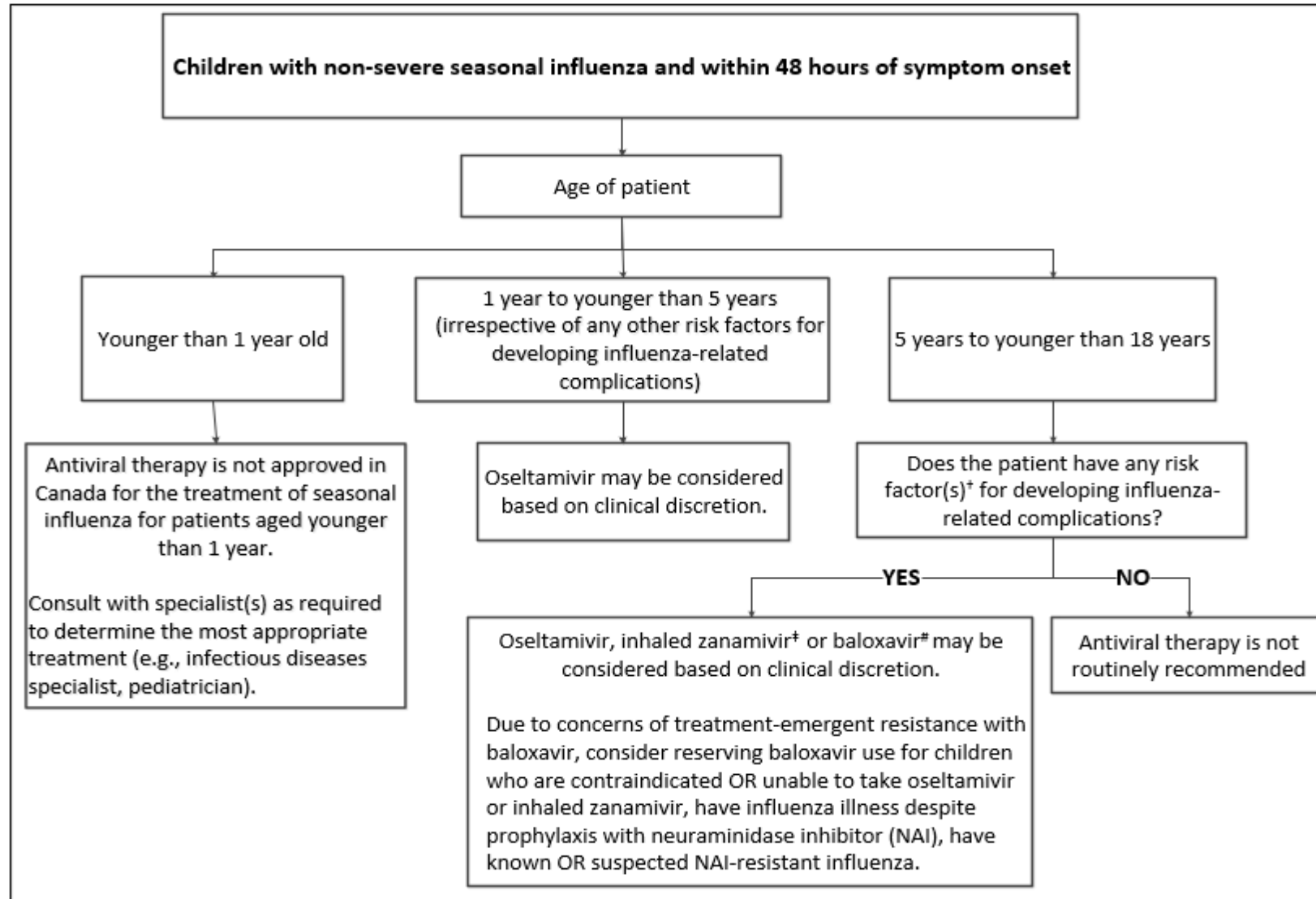
Coverage Options:

- For eligible Ontario Drug Benefit (ODB) program recipients, refer to the [ODB Formulary](#) for information on the conditions for reimbursement.
- For Indigenous Services Canada's Non-Insured Health Benefits (NIHB) clients (eligible First Nations and Inuit individuals), refer to the NIHB [drug benefit list](#) for information.
- Individuals with private insurance should confirm with their plan directly as coverage options may vary.
- For eligible individuals with the Interim Federal Health Program (IFHP), refer to the IFHP [Information for Health Care Professionals](#) webpage for more information.
- Individuals who do not have private insurance or do not qualify for the publicly funded oseltamivir programs outlined above may need to pay out-of-pocket.

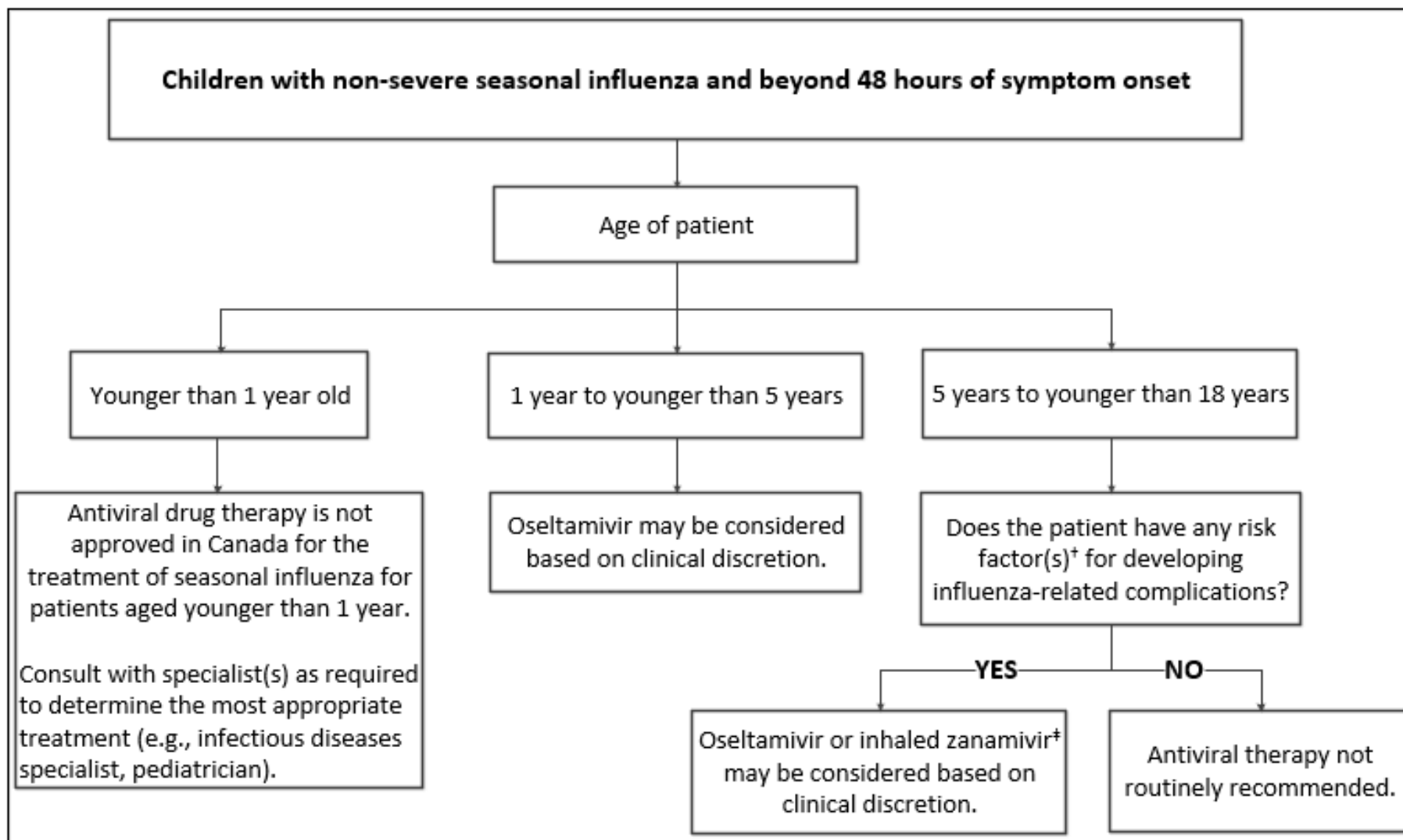
Non-Severe Seasonal Influenza in Adults



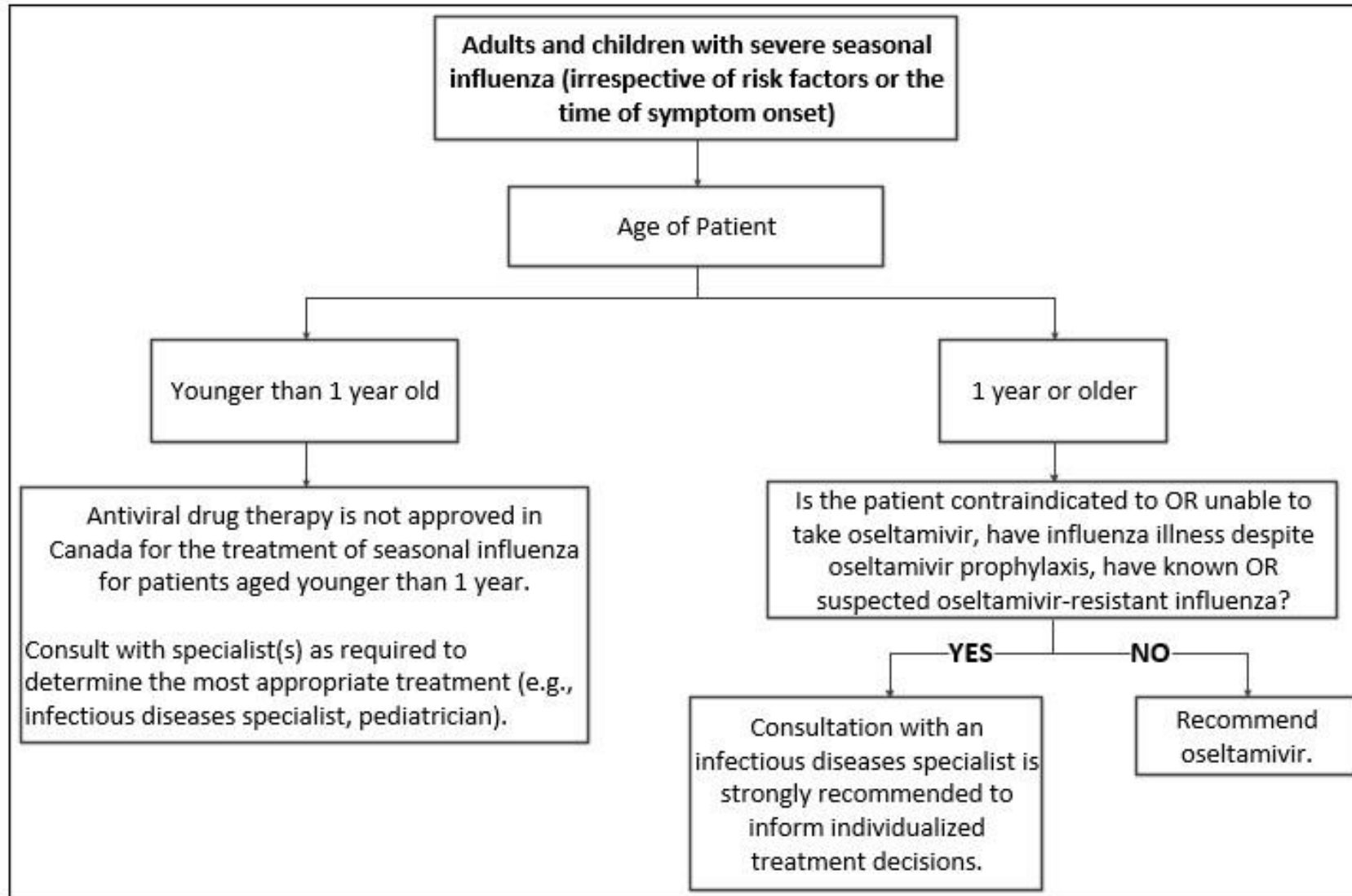
Non-Severe Seasonal Influenza in Children within 48 hours of Symptom Onset



Non-Severe Seasonal Influenza beyond 48 hours of Symptom Onset



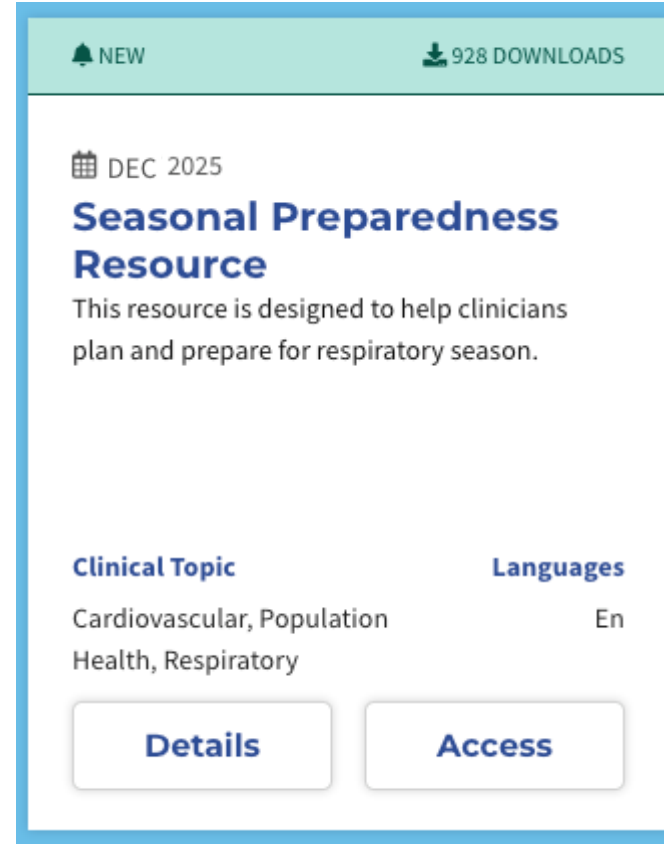
Severe Seasonal Influenza in Adults and Children



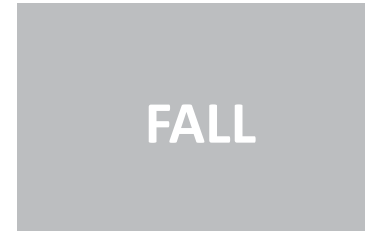
CEP Seasonal Preparedness Resource

Seasonal Preparedness Resource

The **Centre for Effective Practice's [Seasonal Preparedness Resource](#)** is designed to help clinicians plan and prepare for respiratory season.



✓ Chronic condition optimization



✓ Practice management

✓ Seasonal and respiratory immunizations

✓ Vaccine confidence and equitable access



✓ Seasonal illness testing and management

✓ IPAC recommendations

Topics include:

<https://cep.health/clinical-products/seasonal-preparedness-guide/>



SUMMER



Chronic condition optimization:

- Assess individuals with chronic lung disease and other at risk individuals
- Educate on preventing respiratory infections
- Support trigger management
- Promote self-management strategies
- Update action plans
- Refer to specialized care as needed



FALL



Practice management strategies:

- Be proactive (e.g., identify high-risk patients, share educational messages, etc.)
- Leverage care team members (e.g., as vaccine promoters, administrators, etc.)

Seasonal & respiratory immunizations:

- Update immunizations and provide education
- Monitor and report for any adverse events following immunization (AEFI)
- Manage vaccine storage and transportation
- Address vaccine hesitancy and access barriers



WINTER



Seasonal illness testing & management:

- Identify key illness symptoms
- Test based on eligibility and access
- Support illness management with self-care strategies and/or medications
- Refer or send to ED for severe or worsening symptoms

IPAC recommendations:

- Implement PPE practices and follow hand hygiene protocols
- Ensure a clean clinic environment and maintain safe physical spaces
- Reduce transmission risk by supporting healthy workspace policies

PREVENTION

RESPONSE

Seasonal Preparedness Resource

Seasonal illness testing and management



| Treatment of <u>non-severe</u> seasonal influenza | | |
|---|---|--|
| Age | Timeframe of symptom onset | Antiviral |
| < 1 year | N/A | Anti-viral therapy not approved in Canada for treatment of seasonal influenza. |
| 1 year - < 5 years | All cases. | Oseltamivir |
| 5 years - < 18 years | With risk factors and <u>within</u> 48 hours. | Oseltamivir, inhaled zanamivir or baloxavir* |
| | With risk factors and <u>beyond</u> 48 hours. | Oseltamivir or inhaled zanamivir |
| ≥ 18 years | With risk factors and <u>within</u> 48 hours. | Oseltamivir, inhaled zanamivir or baloxavir* |
| | With risk factors and <u>beyond</u> 48 hours. | Oseltamivir or inhaled zanamivir |

*Consider baloxavir for individuals who are contraindicated or unable to take oseltamivir or inhaled zanamivir, have influenza illness despite prophylaxis with a neuraminidase inhibitor (NAI), have known or suspected NAI-resistant influenza.

| Treatment for <u>severe</u> seasonal influenza | |
|--|--|
| Age | Antiviral |
| < 1 year | Antiviral therapy not approved in Canada for treatment of seasonal influenza. |
| ≥ 1 year | Oseltamivir is recommended as first-line therapy for severe seasonal influenza. For individuals who are contraindicated to or unable to take oseltamivir, have influenza illness despite oseltamivir prophylaxis, have known or suspected oseltamivir-resistant influenza, consultation with an infectious disease specialist is recommended. |

COVID-19 antiviral use³⁸

COVID-19 anti-viral treatments include:

- ✓ Paxlovid
- ✓ Remdesivir**

**Complete the appropriate [referral form\(s\)](#) and submit to Ontario Health atHome. Individuals will receive infusions at a community nursing clinic. At-home service may be provided for homebound patients.

Consider antivirals if individuals:³⁸

Have symptoms and test positive for COVID-19 (positive PCR or RAT).

Are at increased risk for severe outcomes, such as:

- Age ≥ 65 years (regardless of vaccine status and any other risk factors)
- Immunocompromised (regardless of age, vaccine status or prior COVID-19 infections)

Are at increased risk due to a combination of age and other medical conditions or risk factors, based on clinician discretion.

For full list of risk factors, see: [COVID-19 Clinical Guidelines and Resources](#) (Ontario Health)

| Parameter | Nirmatrelvir/Ritonavir (Paxlovid) | Remdesivir (Veklury) |
|--------------------|---|--|
| Place in therapy | Preferred first-line therapy | Alternative when nirmatrelvir/ritonavir cannot be used |
| Prescribing window | Within 5 days of symptom onset | Within 7 days of symptom onset |
| Dosage | Nirmatrelvir 300 mg and ritonavir 100 mg orally twice daily for 5 days Dose adjust for renal impairment. For more details, see Paxlovid Prescribing and Drug Interaction Guide (University of Toronto and University of Waterloo). | 200 mg IV single dose on day 1, then 100 mg IV once daily on day 2 and day 3 |

Anti-virals can have **drug-drug interactions** with many commonly used medications and natural health products. Consult with specialists to determine if the drug interaction can be safely mitigated.³⁸

For full list of drug interactions see:

- [Health Canada's Paxlovid Consumer Information Summary](#)
- [Paxlovid Prescribing and Drug Interaction Information](#)
- [Remdesivir Product monograph](#)



Family & Community Medicine
UNIVERSITY OF TORONTO

Ontario College of
Family Physicians



100th

Changing the Way We Work
Community of Practice

Thank you

To the administrative staff that have helped make the Changing the Way We Work CoP a success!

Julia Galbraith

Pavethra Yogeswaran

Marisa Schwartz

Erin Plenert

Jay Scull

Angeline Tan

Thank you Dr. Daniel Warshafsky



Dan's 2nd session: February 5, 2021 – The COVID-19 Vaccine: New vaccines, building vaccine confidence and more

35+ impactful presentations

First session: January 22, 2021
The COVID-19 vaccine: Sharing Best Practices
and Answering your Questions

Public health Q&A expert

**Immeasurable
community of practice
support**



Early Years and Resident Survey



Survey 1: Supporting Early-Career Family Physicians

OCFP is gathering insights to **better support members in their first five years** of practice
Your feedback will help develop: Practical tools and resources and knowledge translation materials.

Survey 2: Supporting Family Medicine Residents

OCFP is gathering insights to support residents as they **transition into practice**
Your feedback will help: Improve the Transition to Practice Guide, develop practical tools and resources and offer educational content that meets your needs.

Deadline: Friday, December 12 at 5:00 PM

Time to complete: Less than 10 minutes

Upon survey completion: Enter a draw for a **\$200 Amazon.ca gift card**



Scan to complete
Early-Career Survey



Scan to complete
Resident Survey

Supports for Mental Health, Addictions and Chronic Pain

Find information to support the care you give patients – in a way that also considers your wellbeing.



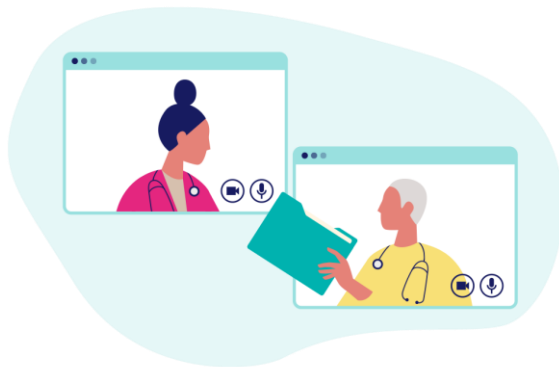
Community of Practice

[Psychedelics Use in Treatment of Mental Health \(Dec 10\)](#)

[Perinatal Mental Health: Practical Screening and Support for Family Physicians \(Jan 28\)](#)

[Prescribing for Insomnia: When and How to Use Medications Safely \(Feb 25\)](#)

[Navigating WSIB for Family Physicians: Improving Patient Access and Your Practice \(Mar 25\)](#)



Peer Connect Mentorship

Receive tailored support to skillfully respond to challenges in your practice and earn Mainpro+ credits.

Topics Explored by Peer Learners:

- Managing ADHD in primary care
- Strategies to address work-life balance
- Supporting patients living with chronic pain and addiction challenges

[Sign up to become a Peer Learner](#)

UPCOMING!

Antimicrobial Stewardship in Primary Care Audit and Feedback to Improve Antibiotic Prescribing

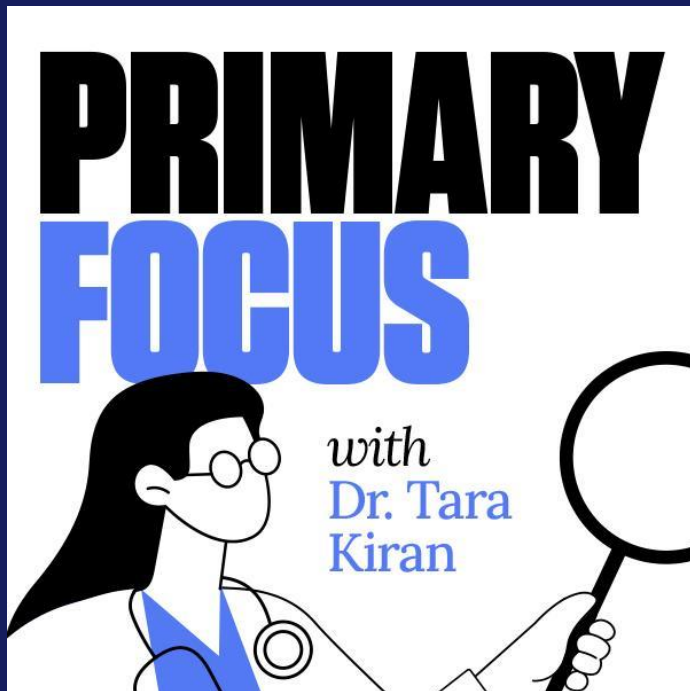


January 16, 2026
12:00 to 1:00 p.m.

FREE

[Register](#)





Follow us wherever you get your podcasts. Search “**Primary Focus**” or Visit www.primaryfocus.ca



• New Podcast Episode

How One Calgary Clinic Gets Team-Based Care Right

Primary Focus with Dr. Tara Kiran

Today • 51 min 26 sec



Episode Description

This season, we're diving into innovative primary care practices across Canada—starting in Alberta, where one family practice is making timely, high-quality care a reality for more than 25,000 patients within a fully capitated model. In this episode, Tara visits Crowfoot Family Practice in Calgary—a clinic that's getting team-based care right. Physicians here manage patient panels about 30 percent larger than their peers, thanks to a model where 35–40 percent of care is delivered by non-physicians. Executive Director Shauna Thome gives us a tour of the clinic, and then she and medical director Dr. Janet Reynolds join Tara in conversation. They talk about how the role of the physician on the team is different, how the team is piloting new ways to attach patients without a family doctor, and how continuous quality improvement—with patients as partners—shapes the clinic's culture.

DFCM's First Five Years Community of Practice

Free, fun and full of answers to all those questions you never thought to ask during residency, this monthly online CPD series is about supporting early career physicians as they get started in their family medicine career!

Upcoming sessions:

From 7 – 8pm



Jan 20, 2026: Work smarter, not harder: Managing your inbox and paperwork

Feb 24, 2026: Getting started with financial planning

Mar 24, 2026: Patient referrals: using eConsult, eReferral and SCOPE

Registration will open soon on the [First Five Years CoP website](#)

The First Five Years Community of Practice is a one-credit-per-hour Group Learning program that has been certified for up to a total of 9 Mainpro+ credits.

RECENT SESSIONS

| | | |
|--------------|---|---|
| September 5 | Infectious Disease: Preparing for Fall & Important Vaccine Updates | Dr. Daniel Warshafsky Dr. Allison McGeer |
| September 26 | Infectious Disease & Metabolic Associated Steatotic Liver Disease | Dr. Daniel Warshafsky Dr. Hemant Shah |
| October 17 | Infectious Disease & Managing Nutrition | Dr. Gerald Evans Dr. Mary Sco |
| October 31 | Infectious Disease & New Aneurysm Screening Program | Dr. Daniel Warshafsky Dr. Varun Kapila |
| November 21 | Infectious Disease & Migraine Updates | Dr. Zain Chagla Dr. Danny Adel Monsour |

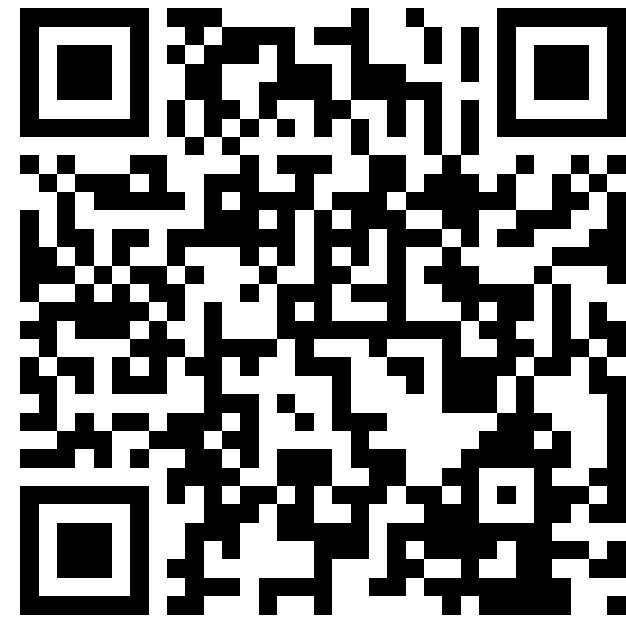
Past Webinars, Slides, Self-Learning & More Resources:
<https://dfcm.utoronto.ca/past-changing-way-we-work-community-practice-sessions>

UPCOMING SESSIONS

| Month | Date |
|---------------|-------------|
| January 2026 | January 16 |
| February 2026 | February 20 |
| March 2026 | March 6 |

SAVE THE DATE

Registration links will be emailed to you closer to the date



Questions?

Webinar recording and curated Q&A will be posted soon.

Session slides will be available by the end of the day:

<https://dfcm.utoronto.ca/past-changing-way-we-work-community-practice-sessions>

Our next Community of Practice: January 16, 2026

Contact us: ocfpcme@ocfp.on.ca

The Changing the Way we Work Community of Practice for Ontario Family Physicians has been certified by the College of Family Physicians of Canada and the Ontario Chapter for up to 32 Mainpro+ Certified Activity credits.

Post session survey will be emailed to you. Mainpro+ credits will be entered for you with the information you provided during registration.