COVID-19 Community of Practice for Ontario Family Physicians

July 28, 2023

Dr. Allison McGeer Dr. Mamta Gautam



COVID Updates and Addressing Physician Burnout





COVID Updates and Addressing Physician Burnout

Moderator:

 Dr. Tara Kiran, Fidani Chair of Improvement and Innovation, University of Toronto and Family Physician, St. Michael's Academic FHT, Toronto, ON

Panelists:

- Dr. Allison McGeer, Toronto, ON
- Dr. Mamta Gautam, Ottawa, ON

Host:

Dr. Mekalai Kumanan, Cambridge, ON

The COVID-19 Community of Practice for Ontario Family Physicians is a one-credit-per-hour Group Learning program that has been certified for up to a total of 32 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.

Award-winning journalist Connie Walker's latest podcast reconnects her with her roots









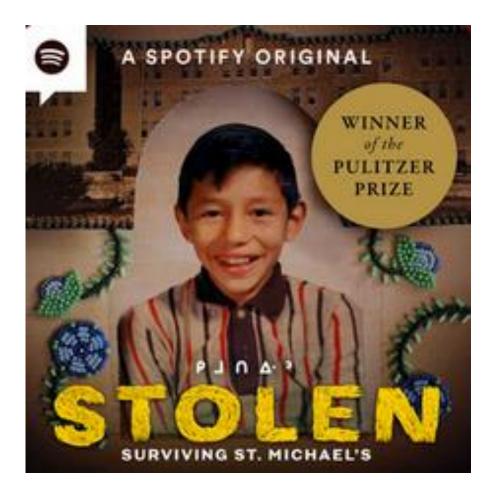


Stolen Season 2: Surviving St. Michael's starts next week and features a story about Walker's father



Bryan Eneas · CBC News · Posted: May 13, 2022 5:00 AM EDT | Last Updated: May 13, 2022





Investigative reporter Connie Walker will release a new podcast with Gimlet Media and Spotify called Stolen Season 2: Surviving St. Michael's. (Submitted by Connie Walker)

Changing the way we work

A community of practice for family physicians during COVID-19

At the conclusion of this <u>series</u> participants will be able to:

- Identify the current best practices for delivery of primary care within the context of COVID-19 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. Tara Kiran (DFCM), Dr. Mekalai Kumanan (OCFP); Dr. Ali Damji (DFCM), Dr. Liz Muggah (OH), Kimberly Moran (OCFP), Mina Viscardi-Johnson (OCFP), Julia Galbraith (OCFP), Pavethra Yogeswaran (OCFP), Marisa Schwartz (DFCM), Erin Plenert (DFCM)

Previous webinars & related resources:

https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions



Dr. Allison McGeer – PanelistInfectious Disease Specialist, Mount Sinai Hospital



Dr. Mamta Gautam – PanelistTwitter: @PEAKMDPsychiatrist, The Ottawa Hospital; President & CEO, PEAK MD Inc.



Dr. Mekalai Kumanan – Host Twitter: @MKumananMDPresident, Ontario College of Family Physicians

Family Physician, Two Rivers Family Health Team

Chief of Family Medicine, Cambridge, ON

Speaker Disclosure

- Faculty Name: **Dr. Allison McGeer**
- Relationships with financial sponsors: Novavax, Medicago, Sanofi-Pasteur, GSK, Merck
 - Grants/Research Support: Sanofi-Pasteur, Pfizer
 - Speakers Bureau/Honoraria: Moderna, Pfizer, AstraZeneca, Novavax, Medicago, Sanofi-Pasteur, GSK, Merck
 - Others: N/A
- Faculty Name: Dr. Mamta Gautam
- Relationships with financial sponsors: N/A
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians
 - Others: N/A

Speaker Disclosure

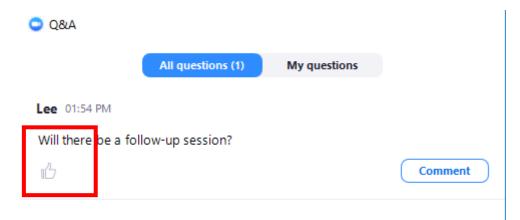
- Faculty Name: **Dr. Mekalai Kumanan**
- Relationships with financial sponsors:
 - Grants/Research Support: N/A
 - Speakers Bureau/Honoraria: Ontario College of Family Physicians
 - Others: Chief of Family Medicine, Cambridge Memorial Hospital
- Faculty Name: **Dr. Tara Kiran**
- Relationships with financial sponsors:
 - Speakers Bureau/Honoraria: St. Michael's Hospital, University of Toronto, Health Quality Ontario (HQO), Canadian Institutes for Health Research (CIHR).Ontario College of Family Physicians (OCFP), Ontario Medical Association (OMA), Doctors of BC, Nova Scotia Health Authority, Osgoode Hall Law School, Centre for Quality Improvement and Patient Safety, Vancouver Physician Staff Association, University of Ottawa, Ontario Health, Canadian Medical Association, McMaster University, Queen's University, North American Primary Care Research Group.
 - Grants/Research Support: Canadian Institute for Health Research, Ministry of Health and Long-Term Care, St. Michael's Hospital Foundation, St. Michael's Hospital Medical Services Association, Women's College Hospital Academic and Medical Services Group Innovation Fund, University of Toronto, Health Quality Ontario, Ontario Ministry of Health, Gilead Sciences Inc., Staples Canada, Max Bell Foundation.

How to Participate

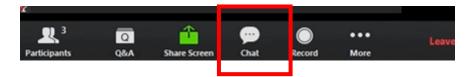
• All questions should be asked using the Q&A function at the bottom of your screen.



Press the thumbs up button to upvote another guests 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.





Dr. Allison McGeer – PanelistInfectious Disease Specialist, Mount Sinai Hospital



Dr. Mamta Gautam – Panelist
Twitter: @PEAKMD
Psychiatrist, The Ottawa Hospital; President & CEO, PEAK MD Inc

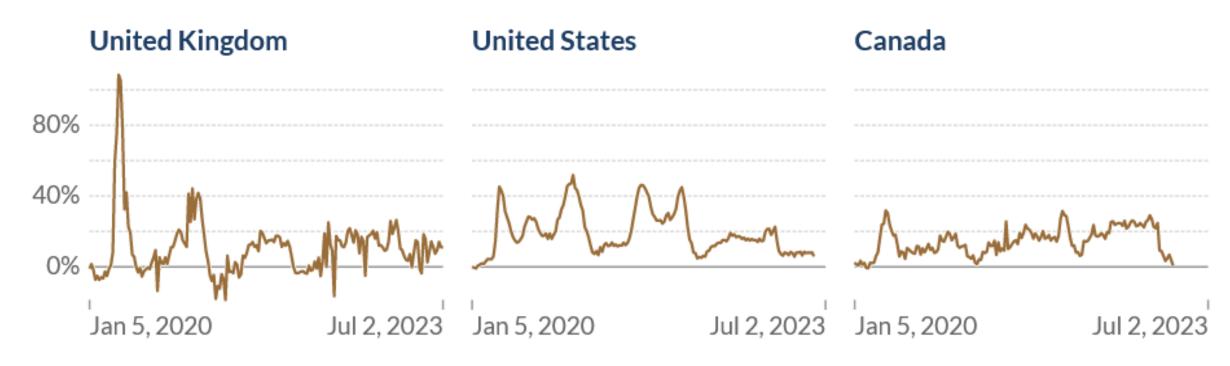


Dr. Mekalai Kumanan – Host Twitter: @MKumananMDPresident, Ontario College of Family Physicians

Family Physician, Two Rivers Family Health Team

Chief of Family Medicine, Cambridge, ON

Excess mortality (percent above baseline) over time

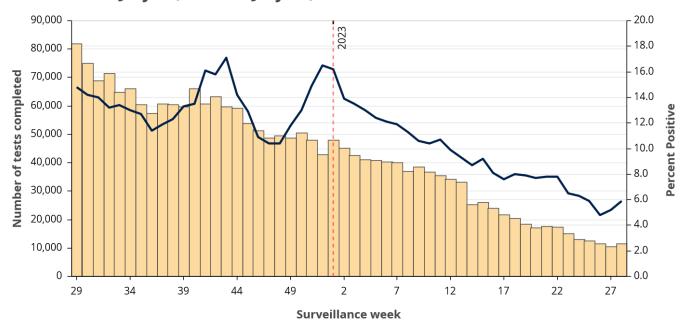


Source: Our World in Data: Human Mortality Database (2023); World Mortality Dataset (2023) https://ourworldindata.org/grapher/excess-mortality-p-scores-average-baseline?facet=entity&country=GBR~USA~CAN

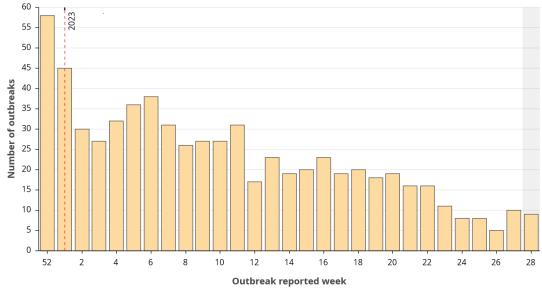
Bubela, T et al. BMJ 2023; 382 doi: https://doi.org/10.1136/bmj-2023-075665

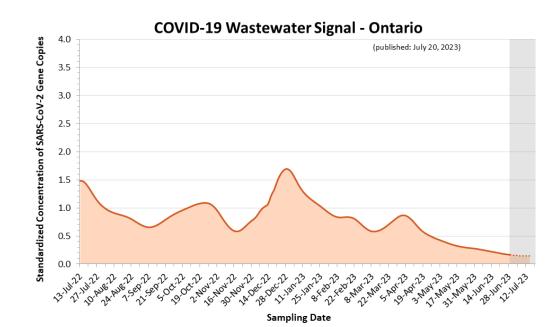
Where are we?

COVID-19 weekly laboratory tests completed and weekly percent positivity in Ontario from July 17, 2022 to July 15, 2023



Weekly confirmed COVID-19 outbreaks in Ontario - December 25, 2022 to July 15, 2023







IPAC CONSIDERATIONS FOR INFECTIOUS RESPIRATORY DISEASES FOR COMMUNITY PRACTICES

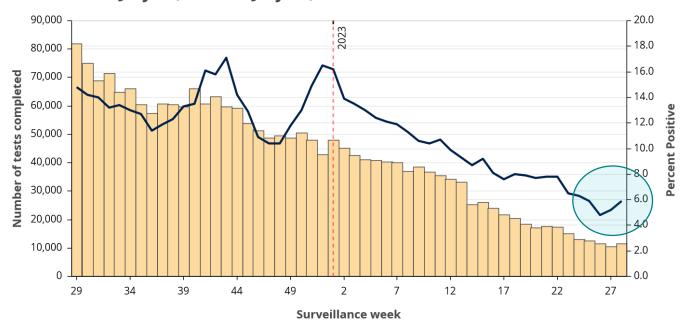
JULY 2023

- 1. ARI screening Active/Passive; Patients & Staff
- 2. Office flow
- 3. Masking
- 4. PPE use
- 5. Hand hygiene
- 6. Touched surface cleaning/disinfection
- 7. Ventilation

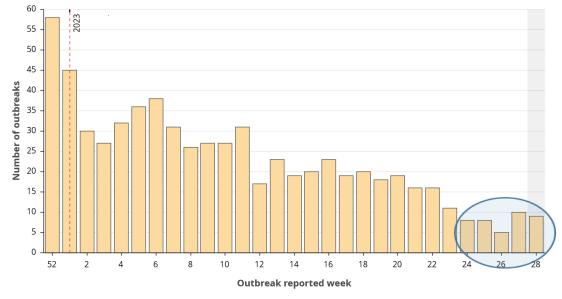
https://www.ontariofamilyphysicians.ca/tools-resources/covid-19-resources/clinical-care-office-readiness/ipac-summary-julyhttps://www.ontariofamilyphysicians.ca/tools-resources/covidhttps://www.ontariofamilyphys

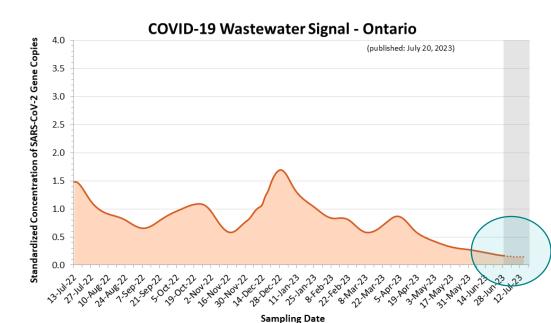
What is going to happen next?

COVID-19 weekly laboratory tests completed and weekly percent positivity in Ontario from July 17, 2022 to July 15, 2023

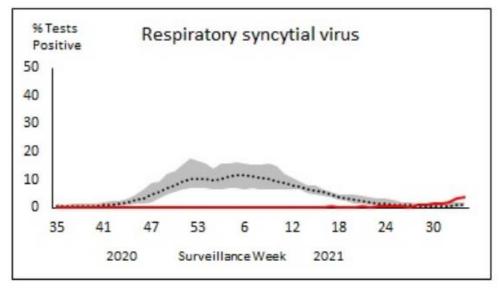


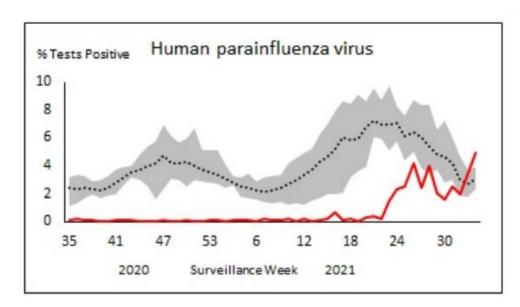
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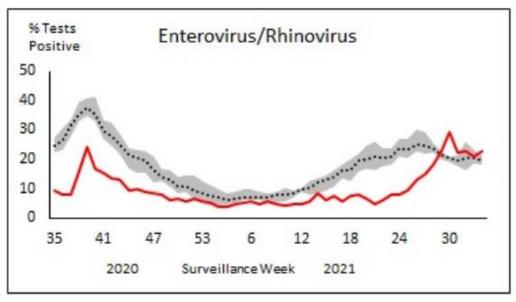


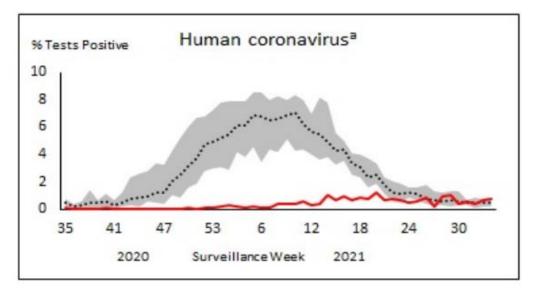


Will SARS-CoV-2 develop a seasonal pattern? Different respiratory viruses have different patterns





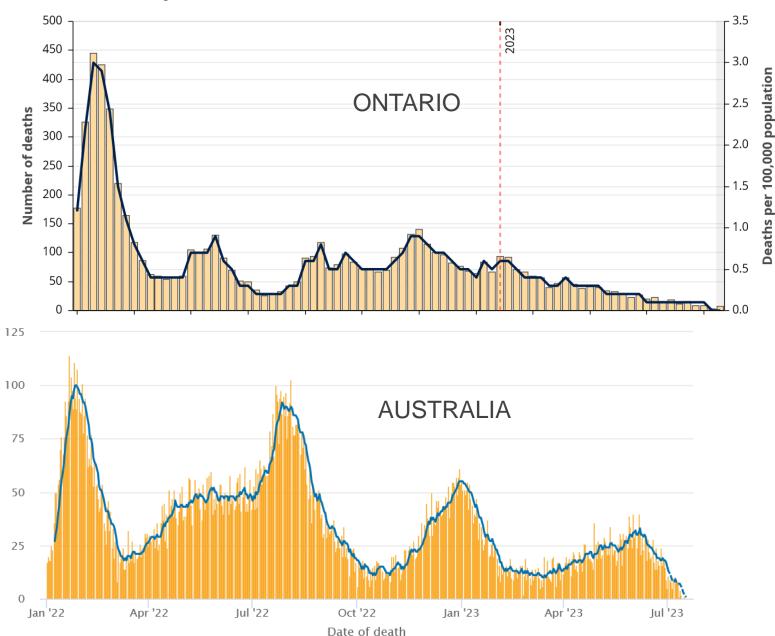




Is the Australian winter wave evidence of seasonality?

COVID-19 weekly death counts and rates

Deaths



NACI recommendations for COVID-19 vaccines

Age group	Primary series (2 or 3 doses)	Booster	Fall 2022 Bivalent	Spring 2022 Bivalent	Fall 2023 Bivalent
6 -59 months					
5-11 years					
5-11 years: High Risk					
12-17 years					
12-17 years: High Risk					
18-64 years					
18-64 years: High Risk					
65 years and older : ALL					

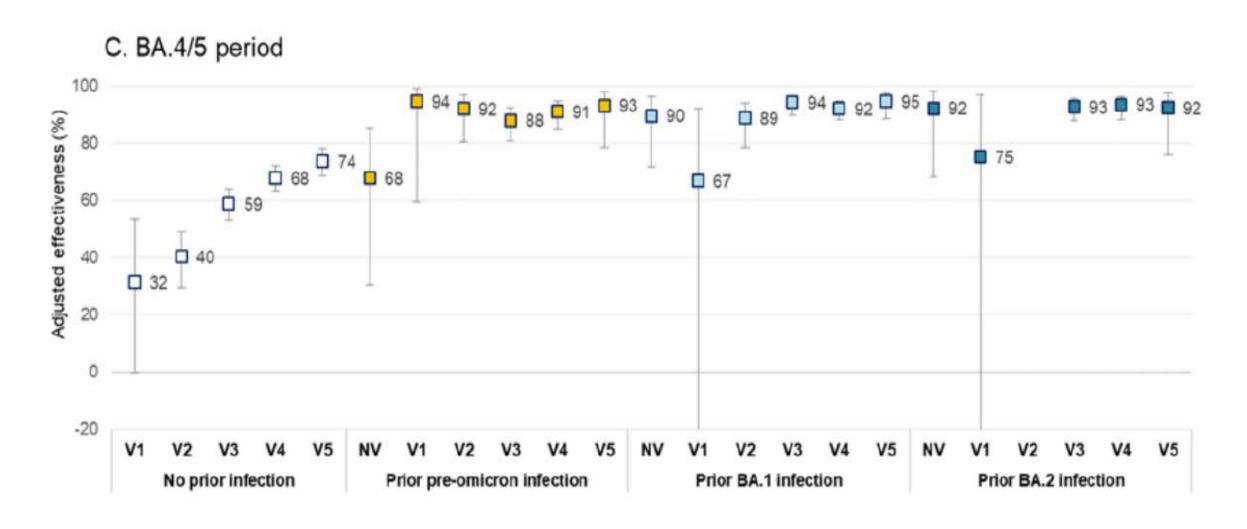




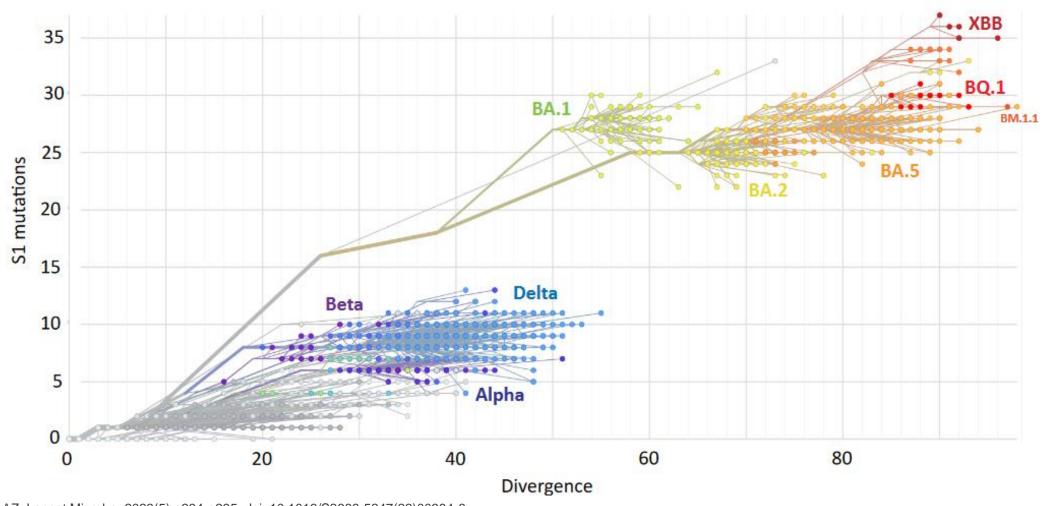




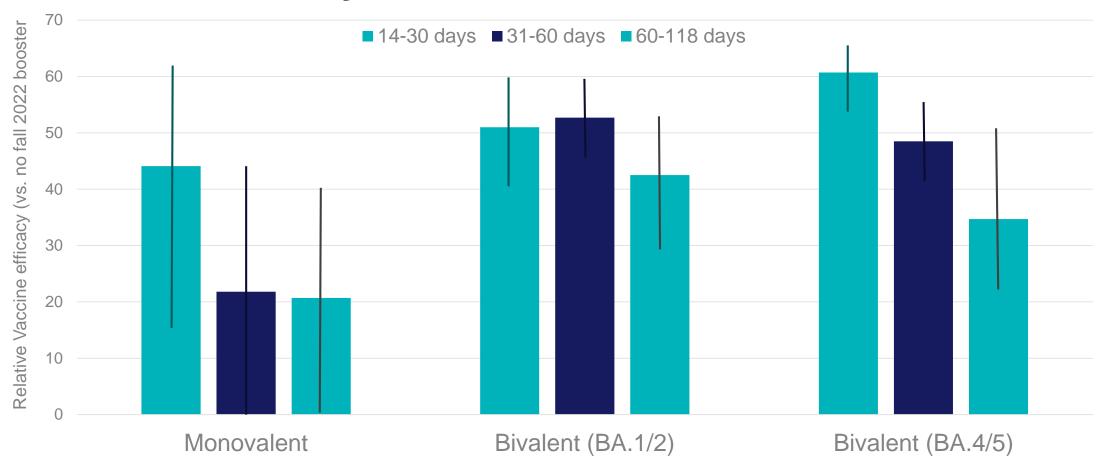
Why do we need boosters this fall? Because 7% matters



Will the XBB boosters work - I? Genetic diversity in SARS-CoV-2 Spike



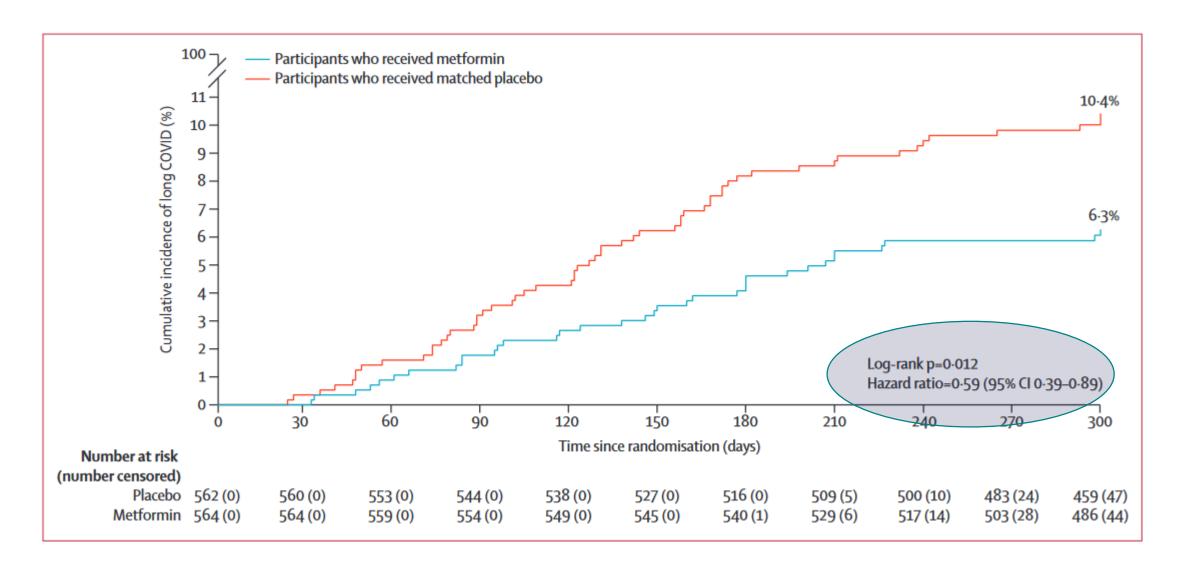
Relative effectiveness of monovalent and bivalent boosters against severe disease in older adults, Italy, November 2022-May 2023



Metformin?

- 30-85 years, ≥25kg/m², positive PCR/RAT, <7 days from symptom onset, not previously infected
- Randomization
 - Placebo: Placebo
 - Metformin: Placebo
 - Ivermectin: Placebo
 - Fluvoxamine: Placebo
 - Ivermectin: Metformin
 - Metformin: Fluvoxamine
- Primary outcome: severe COVID-19 at 14 days
- This analysis: secondary outcome: MD diagnosis long COVID by day 180

Metformin?



COVID-19 Updates

Information current as of July 19, 2023



You may be receiving questions in your practice regarding boosters, access to RATs, Paxlovid and Remdesivir. Below, find quick answers and links to more in-depth guidance to support you in practice. You can also review our Changing the Way We Work (COVID-19) community of practice presentations for more information on these topics.

Boosters

Unless in a known high-risk group, individuals between ages 5-60 years of age can consider delaying receipt of a COVID-19 vaccine booster until Fall 2023. The next generation of boosters, likely to be available in the fall of 2023, will be directed at the dominant XBB subvariants now circulating in Ontario and globally. Receiving the new booster, as respiratory season commences, will maximize protection against COVID-19 when peak circulation of the virus is expected.

Ministry of Health COVID-19 Vaccine Guidance (as of July 7, 2023)

NACI Guidance on the use of COVID-19 vaccines in the fall of 2023 (as of July 11, 2023)

Rapid Antigen Testing Update

Effective June 30, 2023, the general public no longer has access to free RATs at participating grocery and pharmacy locations.

Public Health Units will make RATs available to local communities via existing public health services or through local partners, while provincial supplies last.

Those at high risk of severe outcomes from COVID-19, including high-priority communities and those living and working in high-risk settings, will continue to have access to free RATs through existing channels (ie., LTC). This will support ongoing access to COVID-19 testing through the Fall of 2023, particularly for those who may be eligible for COVID-19 treatment.

RATs will also be available through other health system partners for the upcoming respiratory season.

Molecular PCR testing will continue to be accessible for higher risk individuals and those where clinically indicated.

Ministry of Health COVID-19 Provincial Testing Guidance (as of January 25, 2023)

Ministry of Health update on accessing Rapid Antigen Tests (Last updated: July 11, 2023)

Pg 1/2

https://www.ontariofamilyphysicians.ca/t ools-resources/covid-19resources/ocfp covid updates 2023 hor rev.pdf

COVID-19 Updates

Information current as of July 19, 2023



Paxlovid

- Free to anyone with a prescription.
- Can be prescribed by a physician, nurse practitioner or participating pharmacist.
- ✓ Prescriptions can be filled at most community pharmacies.
- Physicians and nurse practitioners can store or log an unfilled prescription for Paxlovid with a pharmacist for future dispensing (when a patient has symptoms and positive COVID-19 test result).

For patients who:

- ✓ have a positive test result (ie., PCR or RAT); and
- v are within five days of symptom onset; and
- ✓ are at high risk of severe illness (including hospitalization); and
- do not have contraindications.

Paxlovid: What Prescribers Need to Know

(includes dosing and contraindications)

Ontario Health resource on Paxlovid

Paxlovid: FAQs for Healthcare Providers

(includes dosing and contraindications)

Remdesivir

In most areas of the province, eligible individuals can access Remdesivir as a treatment for COVID-19 in the community through Home and Community Care Support Services (HCCSS).

Complete a referral/prescription form and IV referral form and submit to your patient's local HCCSS branch.

HCCSS care coordinators will follow up with your patient.

Treatment will be administered intravenously as a three-day course.

Patients will receive infusions at a community nursing clinic;

at-home service may be provided if required.

For patients who:

- ✓ have a positive test result (ie., PCR or RAT); and
- v are within seven days of symptom onset; and
- ✓ are at high risk of severe illness (including hospitalization); and
- ✓ cannot take Paxlovid due to a drug interaction or contraindication.

Ontario Health resource on Remdesivir (Ontario Health is developing a recommendation on the use of Remdesivir in the community, expected August 2023)

<u>Remdesivir: FAQs for Healthcare Providers</u> (includes dosing and contraindications)

A reminder that adults aged 18-49 years with one or more chronic conditions OR adults aged 50 years and over who have tested positive for COVID-19 with symptoms starting within the last five days are eligible to participate in the <u>CanTreatCOVID</u> Study. Study participants may be eligible to receive COVID-19 medications (including Paxlovid).

Pg 2/2

https://www.ontariofamilyphysicians.ca/toolsresources/covid-19resources/ocfp_covid_updates_2023_hor_rev.p df



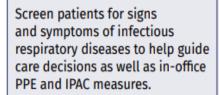
IPAC CONSIDERATIONS FOR INFECTIOUS RESPIRATORY DISEASES FOR COMMUNITY PRACTICES

JULY 2023

The level of concern from COVID-19 infection has reduced significantly since the throes of the pandemic: overall rates of infection are currently low, community level of immunity is high, and Ontario has seen strong vaccine uptake with primary serious and booster doses for high-risk individuals.

Nonetheless, infectious respiratory diseases are always present, and as the CPSO notes, "Ontario's physicians see a variety of patients, including many high-risk individuals, throughout the course of their work" — control measures in your practice remain an important step in reducing the spread of viruses and keeping patients, staff, and yourself safe. Outlined below are measures for infection prevention and control against COVID-19 and other respiratory viruses, including screening, masking, PPE, physical distancing, cleaning, and ventilation.

Active Screening



Active screening is part of best practices, regardless of transmission risk.

Passive Screening

Passive screening (i.e., signage posted at office/clinic and building entrance, asking staff, patients, and visitors to self-identify if ill) to augment active screening.

Staff Screening

Ask all staff to self-monitor for signs and symptoms of infectious respiratory diseases. https://www.ontariofamilyphysicians.ca/to ols-resources/covid-19-resources/clinicalcare-office-readiness/ipac-summary-july-2023.pdf



Masking is not required but still recommended in clinical settings, including most community-based practices.

Given currently lower caseloads of COVID-19 and respiratory illnesses, some practices are altering their masking requirements, making masking non-mandatory while remaining "mask-friendly." The Ministry of Health recommends doing a risk assessment based on the type of practice you have/patient population. In a sports medicine clinic, for instance, with generally younger patients without chronic conditions, masking for patients without respiratory symptoms as well as providers may not be considered a requirement at this time. In contrast, masking continues to be recommended in any community-based practice with high-risk/vulnerable patients to protect both those providing and accessing care.



In all practices, mask wearing should be mandatory for patients with signs and symptoms of infectious respiratory diseases.

You/your staff's own personal risk should also be considered as part of the risk assessment. Also, your clinic's masking requirements should be reviewed on a periodic basis, particularly in fall 2023 when caseloads are expected to rise.

For patients and any accompanying caregiver with signs and symptoms of infectious respiratory diseases:

Provide a well-fitted medical mask.

If a patient refuses or is unable to wear a mask:

If a patient will not/cannot adhere to your clinic's masking requirement, see CPSO's <u>COVID-19 FAQs for Physicians</u> "What if a patient refuses to wear a mask" for options on how to proceed.

Resource: Printable <u>clinic sign</u> reminds patients that abusive behaviour is unacceptable.





- Canada-wide study evaluating effectiveness of COVID-19 medications
- By primary care providers, for primary care providers
- Eligible: Adults with a positive COVID test, aged 50+ years or 18-49 years with one or more chronic condition(s)
- Enrollment underway to refer your patients (patients may self-refer):
 - Phone: 1-888-888-3308 (Monday Friday, 8 am to 6 pm ET)
 - Email: info@CanTreatCOVID.org
 - Website: CanTreatCOVID.org/contact
- More information:
 - FAQs: https://www.dfcm.utoronto.ca/sites/default/files/inline-files/CanTreatCOVID%20Study%20Info%20FAQ.pdf
 - COVID-19 CoP session, "COVID Therapeutics" Jan. 20, 2023:
 https://www.dfcm.utoronto.ca/past-covid-19-community-practice-sessions



Addressing Physician Burnout

Thursday July 28, 2023

7:55-9:00 am ET

COVID-19 CoP for OCFP

MAMTA GAUTAM MD, MBA, FRCPC, CCPE, CPE mgautam@peakmd.ca peakmd.ca



Physician Health During the Pandemic

- Readiness-Response-Relief-Recovery
- Stress vs Distress
- Loss and Grief
- Compassion fatigue
- Moral distress
- Burnout
- Moving beyond the pandemic







MENTAL HEALTH CONTINUUM MODEL

HEALTHY REACTING INJURED ILL

- Normal fluctuations in mood
- · Normal sleep patterns
- Physically well, full of energy
- Consistent performance
- Socially active

- Nervousness, irritability, sadness
- · Trouble sleeping
- Tired/low energy, muscle tension, headaches
- Procrastination
- Decreased social activity

- Anxiety, anger, pervasive sadness, hopelessness
- · Restless or disturbed sleep
- · Fatigue, aches and pains
- Decreased performance, presenteeism
- Social avoidance or withdrawal

- Excessive anxiety, easily enraged, depressed mood
- · Unable to fall or stay asleep
- · Exhaustion, physical illness
- Unable to perform duties, absenteeism
- Isolation, avoiding social events

ACTIONS TO TAKE AT EACH PHASE OF THE CONTINUUM

- · Focus on task at hand
- Break problems into manageable chunks
- Identify and nurture support systems
- · Maintain healthy lifestyle

- Recognize limits
- Get adequate rest, food, and exercise
- Engage in healthy coping strategies
- Identify and minimize stressors

- Identify and understand own signs of distress
- Talk with someone
- · Seek help
- Seek social support instead of withdrawing

- · Seek consultation as needed
- Follow healthcare provider recommendations
- Regain physical and mental health

Where am I along this continuum?





Even the healthiest and strongest of us can become unhealthy in an unhealthy environment.



Wellness is a Shared Responsibility

We need to stop blaming the professional, and see Health (H) as a shared responsibility of:

- Individual (I)
- Culture (C)
- System (S)

H = IXCXS

Quit Multiplying By Zero

(Gautam, CJPL 5(3), 2019))





Addressing the System

Stress at work is caused by critical mismatches between the person and the job:

- Work Overload
- 2. Lack of Control and Choice
- 3. Lack of Reward and Recognition
- 4. Lack of Community and Connection
- 5. Lack of Fairness and Respect
- 6. Conflicting Values





- OMA Burnout Task Force includes physician members, and staff leads from OMA,
 OMD, PHP
- White Paper: August 2021, with top 5 ranked solutions from member surveys and evidence-based system-level recommendations for each solution
- White paper advocated for and led to the creation of the MOH-OMA Bilateral Burnout Task Force
- Significant progress made on all recommendations; some examples listed on following slides







1. Streamline and reduce required documentation and administrative work

MOH-OMA Bilateral Burnout TF identified administrative burden as top priority.

- Advocacy on red tape and admin burden to Premier and Minister of Health
- OMA submission to Ministry of Red Tape Reduction on forms, centralized referral, EMR integration, care coordinators, and regional credentialling
- OCFP Stay tuned!



2. Ensure fair and equitable compensation for all work done.

- OMA and OHRC publication on gender pay gap
- OMA Forms Committee continues to advocate for fair payment for unremunerated forms







3. Increase work-life balance by making organizational policy changes.

- -Engagement with OHA on burnout
- -PHP workshops and education sessions



4. Promote seamless integration of digital health tools.

-Digital Health Advisory Table was established (OMD, OMA, MOH), for digital health topics, including digital health tools and digital health burdens

seamless integration of

-OMA submission to Ministry of Red Tape Reduction included EMR integration and cessation of

standalone portals



5. Provide institutional supports for physician wellness.

- -PHP provision of individual supports, advocacy, education to hospitals and leaders
- -Bilateral TF identification of single-item burnout measure for consistent measurement





Addressing The Culture

- Sets high expectations of self and others: "Be superhuman"
- Promotes hard work, conscientiousness, perfectionism. Compulsiveness, thoroughness
- Patients come first.
- Encourages self-sacrifice, and delay of personal gratification
- Stigma in the Culture of Medicine
- How can you create a healthier culture in your workplace?





Addressing the Individual



The Five C's of Resilience, Gautam, M https://cjpl.ca/fivec.html





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Deadline to apply is September 1.

Questions? Contact ocfpcme@ocfp.on.ca



Thank you!

To all those who have helped make the COVID-19 Community of Practice a success!

Tara Kiran

Mekalai Kumanan

Ali Damji

Mina Viscardi Johnson

Julia Galbraith

Pavethra Yogeswaran

June Yee

Kim Moran

Jay Scull

Marisa Schwartz

Erin Plenart

Olivia Neale

Past team members:

Trish O'Brien,

Kirsten Eldridge

Adrienne Spencer

Leanne Clark

Susan Taylor

Jennifer Young

Leslie Greenberg

Brian Da Silva

David Kaplan

Elizabeth Muggah



Questions?

Webinar recording and curated Q&A will be posted soon https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions

Our next Community of Practice: September 15, 2023

Contact us: ocfpcme@ocfp.on.ca

Visit: https://www.ontariofamilyphysicians.ca/tools-resources/covid-19-resources

The COVID-19 Community of Practice for Ontario Family Physicians is a one-credit-per-hour Group Learning program that has been certified for up to a total of 32 credits..

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



