Testing for COVID-19 and “last mile” vaccination

Moderator: Dr. Tara Kiran
  Fidani Chair, Improvement and Innovation
  Department of Family and Community Medicine, University of Toronto

Panelists:
• Dr. Jeya Nadarajah, Toronto, ON
• Dr. Nili Kaplan-Myrth, Ottawa, ON
• Dr. Latif Murji, Toronto, ON
• Dr. David Kaplan, Toronto, ON
• Dr. Liz Muggah, Ottawa, ON

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 1 Mainpro+ credits.

The COVID-19 Community of Practice for Ontario Family Physician includes a series of planned webinars. Each session is worth 1 Mainpro+ credits, for up to a total of 26 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 recognize 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 respect 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 during COVID-19

At the conclusion of this series 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.

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, Patricia O’Brien (DCFM), Susan Taylor (OCFP) and Mina Viscardi-Johnson (OCFP), Liz Muggah (OCFP)

Potential for conflict(s) of interest:
N/A

Previous webinars & related resources:
https://www.dfcm.utoronto.ca/covid-19-community-practice/past-sessions
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Twitter: @JeyaNadarajah
Infectious Disease Specialist, Public Health Ontario and Markham Stouffville Hospital

Dr. Nili Kaplan-Myrth – Panelist
Twitter: @nilikm
Family Physician, Common Ground Collaborative Care

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Physician Lead, VaxFacts Clinic, Scarborough Health Network
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Family Physician, North York Family Health Team and Chief, Clinical Quality, Ontario Health - Quality

Dr. Liz Muggah – Co-Host
Twitter: @OCFP_President
OCFP President, Family Physician, Bruyère Family Health Team
Speaker Disclosure

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

- Faculty Name: **Dr. Nili Kaplan-Myrth**
  - Relationships with financial sponsors:
    - Grants/Research Support: N/A
    - Speakers Bureau/Honoraria: Ontario College of Family Physicians
    - Others: N/A

- Faculty Name: **Dr. Latif Murji**
  - Relationships with financial sponsors:
    - Grants/Research Support: Stand Up for Health – not-for-profit organization
    - Speakers Bureau/Honoraria: N/A
    - Others: N/A
Speaker Disclosure

• Faculty Name: **Dr. David Kaplan**
  • Relationships with financial sponsors:
    • Grants/Research Support: N/A
    • Speakers Bureau/Honoraria: Ontario College of Family Physicians
    • Others: Ontario Health (employee)

• Faculty Name: **Dr. Liz Muggah**
  • Relationships with financial sponsors:
    • Grants/Research Support: N/A
    • Speakers Bureau/Honoraria: Ontario College of Family Physicians
    • Others: N/A

• Faculty Name: **Dr. Tara Kiran**
  • Relationships with financial sponsors:
    • Grants/Research Support: St. Michael’s Hospital, University of Toronto, Health Quality Ontario, Canadian Institute for Health Research, Toronto Central LHIN, Toronto Central Regional Cancer Program, Gilead Sciences Inc.
    • Speakers Bureau/Honoraria: Ontario College of Family Physicians, Ontario Medical Association, Doctors of BC, Nova Scotia Health Authority, Osgoode Hall Law School, Centre for Quality Improvement and Patient Safety
    • Others: Vancouver Physician Staff Association, University of Ottawa
Where are we from (outside the GTA)?
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 panel’s attention.

- Please use the chat box for networking purposes only.
Dr. Jeya Nadarajah - Panelist
Twitter: @JeyaNadarajah
Infectious Disease Specialist, Public Health Ontario and Markham Stouffville Hospital

Dr. Nili Kaplan-Myrth – Panelist
Twitter: @nilikm
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Dr. Latif Murji – Panelist
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Physician Lead, VaxFacts Clinic, Scarborough Health Network
COVID-19 CoP

Primer on COVID-19 testing in primary care

Jeya Nadarajah, MD, MSc, FRCPC
Infectious Diseases & Medical Microbiology
IPAC physician, Public Health Ontario
October 22 2021
COVID-19 Community of Practice for Ontario Family Physicians

Contact:
ipac@oahpp.ca
## COMPARISON OF COVID-19 TESTS (performance varies with context)

<table>
<thead>
<tr>
<th>Description</th>
<th>MOLECULAR LABORATORY – BASED TEST</th>
<th>MOLECULAR POINT OF CARE TEST</th>
<th>ANTIGEN POINT OF CARE TEST</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td>Nucleic Acid Amplification Test (NAAT) – e.g. PCR</td>
<td>NAAT – e.g. ID NOW®</td>
<td>Detection of proteins. e.g. PanBio®</td>
</tr>
<tr>
<td><strong>Indication</strong></td>
<td>Diagnosis (primarily) Symptomatic Asymptomatic Contacts</td>
<td>Diagnosis (primarily) Symptomatic Asymptomatic Contacts</td>
<td>Frequent repeat screening of asymptomatic individuals</td>
</tr>
<tr>
<td><strong>Specimens</strong></td>
<td>Hospitalized: Nasopharyngeal (NP) or lower resp (e.g. BAL) Others: NP; throat-bilater nasal; buccal-deep nasal; bilat-deep nasal; saliva.</td>
<td>Hospitalized: NP Others: NP; throat-bilater nasal; bilat-deep nasal</td>
<td>NP; throat-bilater nasal; bilat-deep nasal</td>
</tr>
</tbody>
</table>
SETTING UP LAB-BASED DIAGNOSTIC TESTING IN YOUR OFFICE

• Local laboratories – PHO, Private lab, Hospital lab
  1. What types of specimens do they accept?
  2. Sensitivity / Specificity of their test(s)
  3. Specimen storage/transport specifications
  4. Turnaround time and reporting of results

• Public Health Unit (PHU)
  • Reporting obligations of positive results
  • Access to local testing resources and support

• Colleagues
SETTING UP LAB-BASED DIAGNOSTIC TESTING… CONT’D

• Community:
  • Specimen processing through local assessment centre
  • Specimen processing through local hospital lab
  • Expansion of types of specimens tested at local labs
  • Access to take-home self-collection/drop-off programs
Swab and Saliva kits

Source: https://www.publichealthontario.ca/en/laboratory-services/test-information-index/covid-19
SETTING UP MOLECULAR POINT OF CARE TESTING IN YOUR OFFICE

• Available platform: Abbott ID NOW®
• Contact Ontario Health for onboarding: covid19testing@ontariohealth.ca
• Considerations:
  • Community setting
  • Diagnostic test (Symptomatic patients and Asymptomatic contacts)
  • Some cases will require confirmatory lab-based testing
  • Physical space
  • Quality Control
  • Reporting obligations
Antigen Point of Care (POCT) Testing

• Deployed as an additional screening tool in Ontario
• Varied use in jurisdictions across Canada/Globally
• Performance varies and is context-specific:
  • Comparator – PCR or Culture, time lag in comparator test.
  • Viral Load
  • Frequency of testing
• Screening tool:
  • Frequent, repeated screening of a population of asymptomatic individuals
  • Frequency: 1-3X week – increased frequency results in a more sensitive screening program.
  • Utility varies with community rates
Antigen POCT Interpretation of Sensitivity: PCR, culture, and frequency of testing

Days from Exposure

Viral Load (log 10 copies/ml)

0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20

Frequency of testing

Antigen limit
Culture limit
PCR limit

Frequency of testing
Antigen POCT Interpretation of Sensitivity: Symptoms < 7 days onset

- **Viral Load (log10 copies/ml)**
- **Days from Exposure**
- **Antigen limit**
- **PCR limit**
- **Sensitivity ~ 85%** (6/7 days)

**Symptoms**
Serology

- Collect > 2 weeks post symptom onset
- Unknown correlation with immunity
- Available at PHO:
  - MIS-C/MIS-A
  - Treatment decisions for monoclonal antibody therapy
  - Other scenarios for Public health/clinical management
- Available at some hospitals/research labs and private labs ($)
Resources:

- Provincial Testing Guidance
- Quick Reference

COVID-19 Provincial Testing Guidance Update

This document is an update to the COVID-19 Provincial Testing Guidance Update issued May 26, 2021. This document also adds to the Quick Reference Public Health Guidance on Testing and Clearance. This information is current as of August 25, 2021 and may be updated as the situation on COVID-19 continues to evolve.


This information can be used to help guide decision making on testing and clearance of contacts of cases or individuals suspected or confirmed to have COVID-19. This information is current as of September 14, 2021 and may be updated as the situation on COVID-19 continues to evolve. See the Ministry of Health’s COVID-19 Fully Immunized/Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance for management of fully immunized and previously positive COVID-19 cases or contacts and definitions.

All other individuals should follow the standard Management of Cases and Contacts Management in Ontario guidance.

Who should be tested for COVID-19?

Please refer to the COVID-19 Provincial Testing Guidance Update.
Resources:

• Provincial Antigen Screening Guidance
• Managing POCT Results

Contact: ipac@oahpp.ca
PRIMARY CARE, AT YOUR SERVICE

Dr Nili Kaplan-Myrth, MD, CCFP, PhD
One Small Office

FRONT PORCH
WAITING ROOM
EXAMINING ROOM
Vaccine mandates for all staff

Mask mandates for everyone
Two ways we test

Rapid antigen testing

PCR triple swab
Who do we test?

RAPID ANTIGEN SCREENING OF STAFF & STUDENTS

RAPID ANTIGEN TESTING OF ASYMPTOMATIC KIDS

PCR TESTS FOR SYMPTOMATIC KIDS AND ADULTS
Do-it-yourself kits for kids

The #CHEO Assessment Centre now offers Do-It-Yourself Test Kits!
- Parents can choose a date and time to pick-up a kit
- They’re available for kids ages 2 months to 18 years old
- The self-swab is gentle and easy to do

Learn more + schedule a pick-up:
ow.ly/BdV750GfTAX
Get a Kit for marginalized populations (16y +)

You can now order a free COVID-19 self-test!

GetaKit is operating a pilot study of free at-home molecular COVID-19 self-tests in Ontario. This is available if you are over 16 years of age AND if at home self-test is safe and feasible for you.

To be eligible for a COVID-19 self-test, you must be:

- Showing symptoms of COVID-19, OR
- A contact of someone who tested positive for COVID-19, OR
- A contact of someone who has symptoms of COVID-19, OR
- Black, Indigenous, or a Person of Colour AND have a risk for COVID-19.

[Experiencing symptoms of COVID-19?](#)

[Order a COVID-19 Self-Test](#)
[Report My Result](#)

Step 1
Register online

Step 2
Order your COVID test

Step 3
Do it at home

Step 4
Get your result

You can see how the kit is used by watching the short video here:
Ordering PPE, Swab Kits, Rapid Tests

Ehealthontario.on.ca/en/health-care-professionals/ppe-intake
HEPA filtration
Come in, get your shot, head out
COVID-19 Saliva Testing Toolkit

https://docs.google.com/presentation/d/1uvn3c7kSW_CrdgeYggZGZdVLRevrauC/edit#slide=id.p1
Order a free COVID-19 Self-Test kit anywhere in Ontario through GetaKit!

https://getakit.ca/covid/
Conversations in Vaccine Confidence

Lessons from Scarborough’s very own, VaxFacts Clinic
What is the VaxFacts Clinic?

1st of its kind in Canada, physician-led Covid-19 vaccine confidence clinic

One-to-one phone appointment with physician

- Confidential
- Judgement-free
- 20 minutes

VaxFacts is more than the clinic – a movement of vaccine confidence and education

Book at shn.ca/vaxfacts directly into physician’s calendar
Why VaxFacts Clinic

Racialized, front-line workers, multigenerational households

- More likely to get Covid-19
- More likely to be hesitant about vaccine
- Providing dedicated and trusted experts to discuss vaccines

Started off local, kept scaling to meet the needs of the broader community

- Scarborough -> Toronto -> Ontario -> Canada!

In Spring, 16 out of 17 postal codes in Scarborough were Covid-19 hotspots
## VaxFacts Stats

### VaxFacts Clinic Report

<table>
<thead>
<tr>
<th></th>
<th>2021 - May</th>
<th>2021 - Jun</th>
<th>2021 - Jul</th>
<th>2021 - Aug</th>
<th>2021 - Sep</th>
<th>2021 - Oct</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total # of Appointments</strong></td>
<td>25</td>
<td>119</td>
<td>100</td>
<td>133</td>
<td>227</td>
<td>131</td>
<td>735</td>
</tr>
<tr>
<td># of Appt from Pts Work or Reside in Scarborough</td>
<td>0</td>
<td>104</td>
<td>64</td>
<td>61</td>
<td>72</td>
<td>14</td>
<td>315</td>
</tr>
<tr>
<td>% of Appt from Pts Work or Reside in Scarborough</td>
<td>0.0%</td>
<td>87.4%</td>
<td>64.0%</td>
<td>45.9%</td>
<td>31.7%</td>
<td>10.7%</td>
<td>42.9%</td>
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<tr>
<td># of Appt from Pts Work or Reside in Ontario</td>
<td>25</td>
<td>119</td>
<td>98</td>
<td>129</td>
<td>224</td>
<td>117</td>
<td>712</td>
</tr>
<tr>
<td>% of Appt from Pts Work or Reside in Ontario</td>
<td>100.0%</td>
<td>100.0%</td>
<td>98.0%</td>
<td>97.0%</td>
<td>98.7%</td>
<td>89.3%</td>
<td>96.9%</td>
</tr>
<tr>
<td># of Vaccine Hesitancy Appts</td>
<td>24</td>
<td>77</td>
<td>72</td>
<td>115</td>
<td>195</td>
<td>115</td>
<td>598</td>
</tr>
<tr>
<td># of Successful Vaccine Hesitancy Appts</td>
<td>19</td>
<td>72</td>
<td>66</td>
<td>99</td>
<td>152</td>
<td>78</td>
<td>486</td>
</tr>
<tr>
<td>% of Successful Vaccine Hesitancy Appts</td>
<td>79.2%</td>
<td>93.5%</td>
<td>91.7%</td>
<td>86.1%</td>
<td>77.9%</td>
<td>67.8%</td>
<td>81.3%</td>
</tr>
</tbody>
</table>
The VaxFacts Way

1. Health Equity Lens
   - Accessibility – 7 days a week, 9am-8pm
   - Diverse physician team representative of patient population
   - Over 200 languages live interpretation services
   - No OHIP required

2. Motivational Interviewing
Motivational Interviewing

**Purpose** – to strengthen patient’s intrinsic motivation to change

**Spirit of Motivational Interviewing**

- Partnership
- Acceptance
- Compassion
- Evocation
Motivational Interviewing Skills

• Open-ended questions
• Affirmations
• Reflective Listening/Summaries
• Elicit-Share-Elicit
The most common questions

“I’m young and healthy, and the absolute risk of dying from Covid is so low! Why should I get vaccinated?”

“How do we know there won’t be long term side effects?”

“Is the vaccine safe in pregnancy?”
Want to know more about the COVID-19 vaccine?

Our doctors are ready to talk with you and answer your questions.

Book a one-to-one phone conversation with one of our doctors so that you can make an informed decision:

shn.ca/VaxFacts

416-438-2911 ext. 5738
New Canadian study helping Family Physicians and NPs address COVID-19 vaccine hesitancy among their patients

- Using evidence-based communications strategies, tailored messages are developed in response to patient feedback on reasons for hesitating and sociodemographic factors.

- Messages and surveys are distributed using CPIN, an automated patient outreach and data collection system that collects patient feedback and enables family physicians/NPs to communicate with patients via email or text messages.

We are seeking family physicians and NPs to participate in this study!

For more information, please contact the study team at info@cpin-rcip.com
# COVID-19 Vaccination - Patient Summary

## Practice Level COVID-19 Vaccination Report

**As of:** 20-Jun-21

**Physician:** John Smith  
**CPSO:** 123456

### COVID-19 Vaccination - Patient Summary Report

<table>
<thead>
<tr>
<th>Surname</th>
<th>Given Name</th>
<th>HIN</th>
<th>Patient Date of Birth</th>
<th>Dose</th>
<th>Administration Date</th>
<th>Vaccine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adams</td>
<td>Barry</td>
<td>1234567890</td>
<td>1-Jan-52</td>
<td>2 of 2</td>
<td>14-Jun-21</td>
<td>PFIZER-BIONTECH COVID-19 mRNA PB</td>
</tr>
<tr>
<td>Collins</td>
<td>Meghan</td>
<td>9012345678</td>
<td>2-Mar-66</td>
<td>1 of 2</td>
<td>14-Feb-21</td>
<td>ASTRAZENECA COVID-19</td>
</tr>
<tr>
<td>Alain</td>
<td>Stéphanie</td>
<td>3123456789</td>
<td>4-Oct-84</td>
<td>2 of 2</td>
<td>18-Mar-21</td>
<td>ASTRAZENECA COVID-19</td>
</tr>
<tr>
<td>Lincoln</td>
<td>Margaret</td>
<td>7395085900</td>
<td>2-Oct-72</td>
<td>1 of 2</td>
<td>14-Jun-21</td>
<td>PFIZER-BIONTECH COVID-19 mRNA PB</td>
</tr>
<tr>
<td>Noel</td>
<td>Shiva</td>
<td>6819459408</td>
<td>6-Aug-01</td>
<td>1 of 1</td>
<td>18-Mar-21</td>
<td>ASTRAZENECA COVID-19</td>
</tr>
<tr>
<td>Wu</td>
<td>Francis</td>
<td>8408532145</td>
<td>3-Aug-37</td>
<td>1 of 2</td>
<td>14-Feb-21</td>
<td>MODERNA COVID-19 VACCINE mRNA PB</td>
</tr>
</tbody>
</table>

*Static Disclaimer Statement*

Confidential - Contains Personal Health Information
Parents and vaccinating children

• **65.3%** of respondents indicated that they are ready to vaccinate their children ages 4-11

• **15.8%** of respondents were unsure

• **18.9%** do not intend to have their children vaccinated
Parents and vaccinating children

Of those unwilling to vaccinate their children, the following reasons were selected:

- Children do not need vaccines as they are low risk of severe consequences due to COVID-19: 33%
- Other safety risks: 28%
- Natural immunity from previous COVID-19 infection is sufficient protection for my child: 12%
- Myocarditis risks: 10%
- Fertility risks: 8%
- Something else: 10%
To achieve better protection (vs boosting a response that has waned)

- **Vulnerable elderly in high-risk congregate settings**
  - Long-term care
  - High-risk retirement homes
  - Elder care lodges

- **Moderately to severely immunocompromised**
  - Active treatment for solid tumour or hematologic malignancies
  - Solid-organ transplant and immunosuppressive therapy
  - Chimeric antigen receptor (CAR)-T-cell therapy or hematopoietic stem cell transplant
  - Moderate to severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
  - Stage 3 or advanced untreated HIV infection | acquired immunodeficiency syndrome
  - Active treatment immunosuppressive therapies
    - anti-B cell therapies2 (monoclonal antibodies targeting CD19, CD20 and CD22)
    - high-dose systemic corticosteroids (refer to the CIG for suggested definition of high dose steroids)
    - alkylating agents, antimetabolites, or tumor-necrosis factor (TNF) inhibitors and other biologic agents that are significantly immunosuppressive

MOH guidance, Sept. 14, 2021: [COVID-19 Vaccine Third Dose Recommendations](#)

NACI guidance, Sept. 10, 2021: [Additional dose of COVID-19 vaccine in immunocompromised individuals following 1- or 2-dose primary series](#)
Medical exemptions to COVID-19 vaccination

Four reasons for medical exemptions

1. **Pre-existing condition** — allergist, immunologist or specialist must confirm individual is unable to receive any COVID-19 vaccine).
   - Medical exemption if severe allergy or anaphylactic reaction to a previous dose or any vaccine component
   - Medical exemption if myocarditis *before* starting mRNA vaccine series (age 12 to 17)

2. **Contraindications to AZ/COVISHIELD vaccine** — history of capillary leak syndrome, cerebral venous sinus thrombosis with thrombocytopenia, heparin-induced thrombocytopenia, or major venous and/or arterial thrombosis with thrombocytopenia following any vaccine
   - Complete vaccine series with mRNA vaccine
     - Medical exemption if individual has medical exemption to receiving mRNA vaccine

MOH guidance, Sept. 14, 2021: [Medical Exemptions to COVID-19 vaccination](#)
3. Adverse events following COVID-19 immunization

- Severe allergic reaction or anaphylaxis following a COVID-19 vaccine.
  - Exemption if allergist/immunologist determines unable to receive any COVID-19 vaccine

- TTS/VITT following AstraZeneca/COVISHIELD COVID-19 vaccine
  - Exemption if medical exemption to completing series with mRNA vaccine

- Myocarditis or pericarditis following a mRNA COVID-19 vaccine
  - Exemption if diagnosed after medical evaluation (discuss immunization/re-immunization options with specialist if uncertain diagnosis)

- Serious adverse event following COVID-19 immunization
  - Exemption if medically evaluated, risk-benefit of immunization options discussed with relevant specialist AND determined unable to receive any COVID-19 vaccine
4. Receiving monoclonal antibody therapy OR convalescent plasma therapy for the treatment or prevention of COVID-19
   ➢ Time-limited exemption while receiving therapy

*****

MOH guidance, Sept. 14, 2021: Medical Exemptions to COVID-19 vaccination
Practising Well: Your Community of Practice

Upcoming sessions focused on physician wellness:

Are you experiencing burnout and want to learn techniques to incorporate balance into your practice? Add the next two Practising Well CoP calls to your calendar:

October 27, 2021 (8:00 to 9:00am) – Burnout and Balance
Dr. Stephanie Klein, Dr. Liz Muggah and Dr. Caitlin Schwartz
https://us02web.zoom.us/webinar/register/WN_8l1scaDxQX6l64hknv5w9w

November 10, 2021 (8:00 to 9:00am) – Getting Off the Path to Burnout
Dr. Marcia Kostenuik
https://us02web.zoom.us/webinar/register/WN_e1zH607PTH6ozekq1KhJZQ
Call for abstracts!

- Call for abstracts open exclusively to Family Medicine residents and early career family doctors
- Selected presenters get dedicated support in preparing to deliver their session
- Deadline for submitting abstracts: November 8, 2021

OntarioFamily Physicians.ca/Education/Conferences

Livestream days:
January 28 & 29, 2022
+ dozens of on-demand sessions
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: **Friday, November 5, 2021**

*Contact us:*  [ocfpcme@ocfp.on.ca](mailto:ocfpcme@ocfp.on.ca)

*Visit:*  [https://www.ontariofamilyphysicians.ca/tools-resources/covid-19-resources](https://www.ontariofamilyphysicians.ca/tools-resources/covid-19-resources)

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