

Changing the Way We Work

March 24, 2023: IPAC, boosters and digital tools for practice

Panelists: Dr. Chandi Chandrasena & Dr. Michelle Science

Co-hosts: Dr. Mekalai Kumanan & Dr. Liz Muggah

Moderator: Dr. Ali Damji

Curated answers from CoP guest, panelists and co-hosts to in-session questions posed by participants, based on current guidance and information available at the time.

Testing and Positivity

How accurate are the statistics for COVID-19 given many people are testing at home?

Case count is only one factor to consider in the risk assessment - you are right that it does not accurately reflect the actual case counts because of restricted testing eligibility. But, looking at percent positivity can help, as well as other measures like hospitalizations and institutional outbreaks.

10% positivity is high risk?

I would say we are currently in a high and steady state with respect to SARS-CoV-2 based on intuitional outbreaks, community transmission rates, hospitalizations... We may be in a non-high steady state by the summer, but it is hard to predict.

Dr. Michelle Science: Why was it never a suggestion to rapid test patients to ensure a safe environment to see patients (for doctor and patients safety)? People catch COVID from doctor appointments. Is it a good practice or not done due to convenience/cost? Thank you.

There are some limitations with relying on rapid testing, including tests potentially being negative early on in the course of symptoms. For this reason, it's recommended to treat all patients with signs and symptoms of SARS-CoV-2 as suspect cases and manage accordingly with Additional Precautions when being seen.

What is the guidance regarding staff illness protocol? Should they still be getting a PCR test?

There is a move away from COVID-19 specific guidelines and more towards general recommendations for respiratory illness, acknowledging that COVID-19 is one

possibility. So – many hospitals are planning to remove the requirement for COVID-19 testing for return to work and will move towards ensuring symptoms have resolved prior to return to work and adhering to IPAC measures, including masking, for at least 10 days following symptom onset.

Vaccines and Boosters

Can low risk persons access the booster dose now if they have not received one after 1/9/22?

Recommendations are:

- 6 months - <5 years: Get a primary series
- 5+ get a booster (bivalent) on or after Sept 1 2022
- If you are a high risk group (LTC/RH, 65+ - all those defined on a slide) - get a spring bivalent booster.

Will this recommendation for q6month boosters go on indefinitely? Lots of vaccine fatigue in the community and the medical community also!

It is not clear whether ongoing boosters will be recommended. NACI will likely provide guidance towards the end of the summer for fall doses.

Bivalent vaccines in our community were not available until the middle of September 2022. Do you mean that all need a Bivalent booster?

My understanding is that Ontario recommends that those eligible should have a booster on or after Sept 1, 2022. Additional boosters 6 months after the last dose (or COVID-19 infection) are recommended for the high risk groups. The upcoming ministry guidance will likely clarify this.

If you've had a booster after September 2022 - no further boosters required?

That's correct if not considered high risk. There's more info in the MOH guidance on pages 9-10:

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/vaccine/COVID-19_vaccine_administration.pdf

What about boosters for children?

There is no booster guidance for less than 5, but for those 5 years and older that are eligible, Ontario recommends a booster on or after Sept 1, 2022 with preferential recommendation for Pfizer booster for those under 18 yrs.

**Does the booster every 6 months for high risk refer to the bivalent vaccine?
What about non high risk people?**

Yes, the booster for adults would be the bivalent. You'll find more information on page 5 in the MOH guidance:

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/vaccine/COVID-19_vaccine_administration.pdf

IPAC Measures

Patients don't want to wear mask and instead of arguing with them I just let them be. It takes so much time and effort to tell them and it causes me to be delayed. I don't know what else to do.

It can be quite challenging at times. The OCFP offers a summary of the guidance around masking here that you may find helpful:

<https://www.ontariofamilyphysicians.ca/tools-resources/covid-19-resources/clinical-care-office-readiness/ocfp-masking-policies.pdf>

Is the MOH providing funded masks for patients through the portal? I'm tired of being told I have to keep paying for them.

Not that I have heard, the stockpile is only for health care providers/front line staff.

Tools

Which self-registration kiosk do you recommend?

I don't have a great idea of what is out there but we are piloting OCEAN.

How quickly you have to process documents. Is 2 weeks old too old?

I think that is a clinical decisions. I quickly scan to see what is urgent and others can sit in my inbox until I have time.

Can you tell us how much extra costs you have monthly per MD for all of these tools?

It varies with EMR and what you choose.

Are there any functional options yet for scribe functionality in TELUS EMR?

Not yet as far as I know.

Due to the volume of docs/reports in my inbox, I find it very difficult to keep up. I have to worry about abnormal reports that I haven't had a chance to acknowledge yet. Is there a standard of practice determined for

We are going to look at this with our HRM taskforce.

I actually believe technology has increased the workload on family physicians. I wonder if others have same thoughts. Burnout is at all-time high since technology and EMR's have been used more.

We hear this quite often from family physicians and know that we need to find solutions to the address the EMR and administrative burden. The OCFP will continue to advocate for these changes.

These additional questions were answered live during the session. To view responses, please refer to the session recording.

- Dr. Michelle Science: Do you wear a surgical mask or fit tested N95 respirator during your day at work? It's always good to know what experts actually do!
- I would very much like to know the official recommendation related to masking in doctors' offices.
- When do you think that mask mandate at hospitals and healthcare setting will end? If at all?
- Can you please post the link that shows the evidence for ongoing masking?
- Since COVID has no seasonality, no time can be considered low risk. Shouldn't masking be routine in health care settings always?
- What is considered a booster now? I.e. 3rd, 4th, 5th, dose?? Bivalent vaccine?
- Recommend masking still in public indoor venues, sports, entertainment, clubs, and concerts?
- How well masked should health care workers be - surgical mask? Well fitted N95?
- Re boosters. My husband is in his late 50's, and we have an 18 yo. I've had 5 shots, they've had 4, all last in early October. None of us have had Covid. We are healthy other than asthma, our teen is obese. I know if/when we got Covid, that we would likely have mild/moderate illness, but my concern is risk to my patients (I'm a Family Physician) and my husband is a teacher, so high exposure, and elderly relative risk. Are you saying we don't need boosters?
- Is there any place for gowns?
- I work at a CHC. As of the beginning of March we are no longer given time to clean our rooms after each patient. Is room cleaning necessary after each patient needed?
- Dr. Chandrasena: How do we stop duplicate reports in HMR?
- Dr. Chandrasena: If there is no phone/fax for the doctor and we receive a report for someone in error (not our patient) is there somewhere at HMR we can send this too. This takes a lot of time away from our admin staff. Thank you.

- Do you not risk overloading the patient who is depressed by getting them to fill out several forms prior to coming into a visit? Many will likely not do it since they have reduced motivation due to their condition. What do you think?
- What about use in clinics where population does not have access to phones or internet, many of communities who are vulnerable do not have access. How can Ontario MD help these clinics?
- Can you give us insight what's happening with PSS? Will it be retired and when?
- I understand that TELUS is not investing in PSS in the future. Have you heard of anything?
- Can you please explain what DHDR will actually do for me?