



The Covid-19 Pivot

*Reclaiming your office
practice during the
pandemic*

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This program is presented by the CFPC and has received no financial or in-kind support from other organizations.

Speaker: Nadia Alam

- » Member-at-Large of Section of General and Family Practice Executive, Ontario Medical Association

Speaker: Shirley Schipper

- » President of the College of Family Physicians of Canada, stipend
- » Salary support from the U of Alberta

Speaker: Katherine Stringer

- » Developmental Disabilities Primary Care Initiative (Ontario) funded honoraria and travel expenditure
- » Health Care Foundation, Eastern Health Newfoundland – funded QI project through Memorial University

Moderator: Jeff Sisler

- » Employee of the College of Family Physicians of Canada

Learning Objectives

After this webinar presentation, the participant will be able to:

1. Discuss strategies to maintain the safety of patients, staff and physicians as in-office care is expanded
2. Explain a framework for how to prioritize the clinical services that should be provided in-person
3. Describe strategies to help patients cope with the effects of the pandemic on their mental health
4. Identify how medical trainees can be re-integrated into the office setting

Screening:

- Screen patients virtually before booking in-person assessment
- Separate clinics for symptomatic patients

Patient & staff communication:

- Patient newsletter/ website updates to explain clinic changes
- Signage on door about hand hygiene, physical distancing, etc.
- Regular staff meetings to re-evaluate supply/demand issues

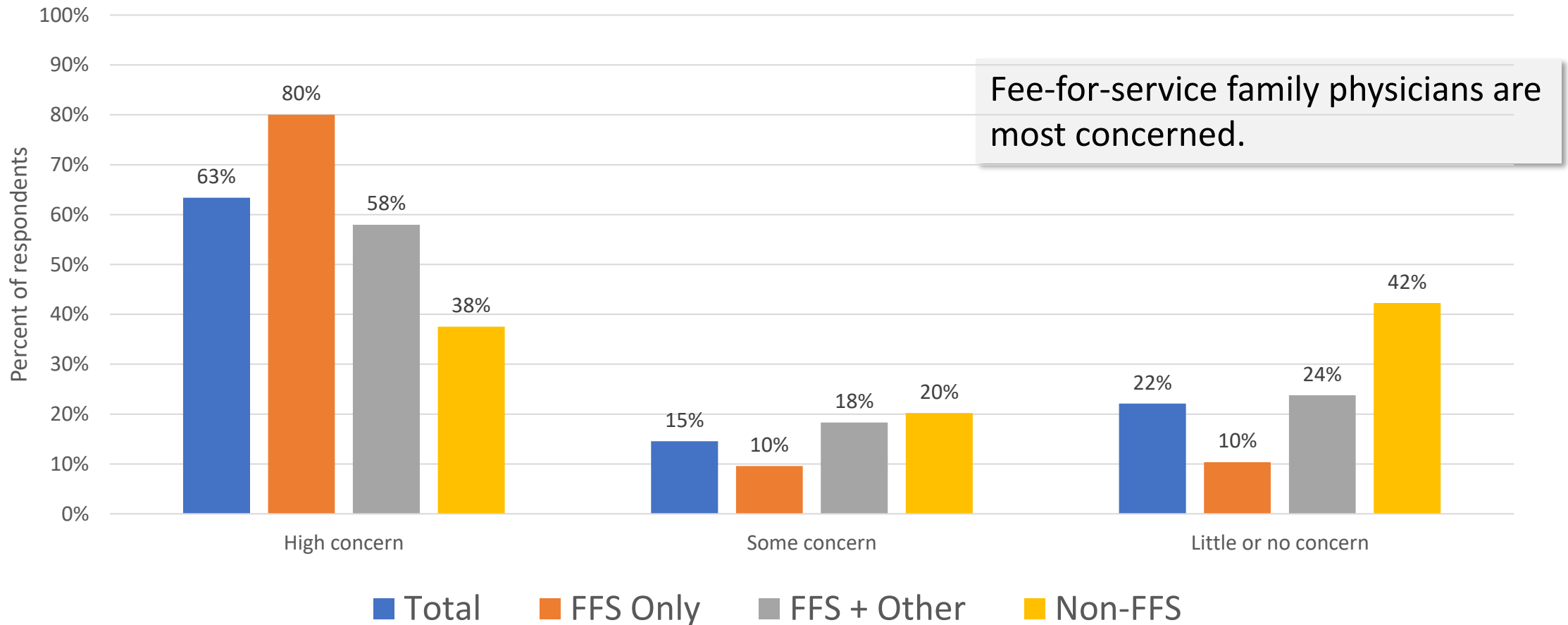
Physical distancing:

- Take patient history over the phone in advance
- Plexiglass barriers for front office staff
- Lock office door; text patients when their turn
- Avoid use of waiting room or mark 6-foot barriers within the waiting room
- Visual markings at entrance and exit (circle taped on the floor)
- For larger group practices, gradually allow more MDs to work regular days (depending on availability of exam rooms)

- **Hand hygiene:** create hand hygiene station for patients
- **Universal masking:** provide masks for patients (or pt brings own)
- **Office cleaning protocol:** who will clean rooms and equipment during the day? How often?
- **OH&S plan for employees:** jurisdiction specific
- **Other:**
 - house-call team for patients who cannot come to the office (e.g. half day a week for frail homebound seniors, new mothers/newborns)
 - Multidisciplinary teams – assign roles to improve efficiency (e.g. well baby or pre-natal clinics; vaccination clinic)

Level of concern over lost revenue due to reduced patient visits, by remuneration group

Are family practices more/less vulnerable to financial loss based on their remuneration sources?





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