

# PRIMARY CARE MONTHLY

The Brantford Brant Norfolk Primary Care Council Newsletter

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## CANCER SCREENING

### The Mobile Cancer Screening Coach

- The Cancer Screening Coach is in its second month at the new location – Wayne Gretzky Sports Complex.
  - Taking place Thursday October 31st from 9:00 am – 3:00 pm
  - Booked appointments / Walk-ins accepted
  - Screening for colorectal, cervical, and breast cancer available.
  - Help with quitting smoking is also available.
  - Appointments can be booked by calling 1-855-338-3131 or 905-975-4467
  - To view schedule, [click here](#).



## BRANT COUNTY HEALTH UNIT

### Routine Immunization Spotlight: Varicella

- Varicella is highly contagious. Although most observed cases are typically mild, the risk of severe disease such as encephalitis, septicemia, and necrotizing fasciitis exist in immunocompromised patients, specifically young children, and pregnant individuals.
  - Previously diagnosed individuals are at risk of herpes zoster (shingles). Herpes Zoster is characterized by neuropathic pain and dermatomal vesicular rash, with the most common complication of shingles being post-herpetic neuralgia. Routine preventative immunization against varicella and herpes zoster remains paramount in prevention.
  - Studies have shown strong efficacy of varicella vaccines when administered to children and youth. Effectiveness is maintained 10 years following the receipt of two doses and is estimated at over 98 per cent effective against any varicella disease and 100 per cent against severe varicella.
  - As part of the Province's routine immunization schedule, varicella and herpes zoster immunizations are free of charge to eligible groups. Children and adolescents may receive univalent varicella vaccine or combined multivalent measles-mumps-rubella-varicella (MMRV) vaccine. Elder individuals aged 65 to 70 years old are eligible to receive a two-dose series of Zoster Vaccine Recombinant.
  - It is important to remind patients of the requirement to report routine immunization records to BCHU. Immunization records can be reported online by visiting the [Health Unit's website](#), or by calling 519-752-4937 ext. 451.

### Rabies Exposure Guidance for Primary Care

- The management of a suspected rabies case involves the collaboration of primary care and public health, various considerations must be addressed to determine the appropriate type of clinical management.
  - I.e., type of animal involved, geographic area of exposure, details of exposure, etc.
- Brantford/Brant health practitioners must notify BCHU of any person who has a suspected rabies exposure. The Health Unit works alongside primary care practitioners to conduct a risk assessment outlining recommendations pertaining to rabies post-exposure prophylaxis (rPEP). Review [Public Health Ontario's guide](#) for managing patients with suspected rabies exposure.
  - **Previously unvaccinated individual:** rabies immune globulin on the first day of post-exposure prophylaxis (Day 0) and rabies vaccination on Days 0, 3, 7 and 14. Additional dose is provided to immunocompromised individuals on Day 28.
  - **Previously vaccinated individual:** only two doses of rabies vaccine are required which are given on Days 0 and 3. No rabies immune globulin is required.
- For more information, please view the [Ministry of Health's](#) guide.
- To view memorandum from Dr. Kieran Moore Chief Medical Officer of Health and Assistant Deputy Minister, [click here](#).

## **Fall Planning and Vaccines**

- Flu and Covid vaccinations will be arriving early this month
- BCHU is awaiting from the province on the implementation timeline, and will share this information with the PCC as soon as it is received.
  - Clear communication will be needed to indicate if we do not have aligned implementation timelines for both COVID and flu; if providers cannot administer the vaccines together, this should be advertised to the public.
  - The vast majority of COVID vaccines are administered in pharmacies. Many public health organizations are phasing out their COVID vaccine delivery.

# **STRATEGIC PLANNING**

## **McMaster Residency expansion & City Sponsored Clinic**

- The PCC Executive has met with representatives of McMaster DCFM to discuss increasing the size of the FM residency program in BBN. They are hoping for a minimum of eight residents, four in each of year one and two, starting in 2026 (in addition to the 12 we already have). Discussed the City of Brantford potentially providing a physical site that meets the needs of a clinic. Spoke about different models, such as four physicians moving into one site and taking on teaching responsibilities in a more advanced role. This is in the early planning and discovery stages.
  - McMaster has applied to the Ministry of health for additional funding to support this expansion. There is not a clear date on when they would hear back regarding this ask.

## **OAB (Online Appointment Booking)**

- OH is encouraging the adoption and use of OAB. Eventually it will connect with the Health811 system. The funding is still available for this year. The requirements have been loosened, so the process is less burdensome for physicians. Once we are designated as a PCN we will explore increased adaptation of OAB
  - One requirement from OH is to have 50% of eligible appointments available on OAB. The physician can self-attest what portion of their appointments are eligible for OAB.
  - Currently approximately 39% of providers (49/123) in the BBN area are using OAB.

## **SCOPE (Seamless Care Optimizing the Patient Experience)**

- The PCC executive met with a physician who was instrumental in the introduction the SCOPE program into his OHT
  - This conversation helped to understand what the process is, where is the focus and needs for promotion and pressure points for implementing the process.

## Pain Clinic

- The BBNPCC executive had a follow up meeting with McMaster Pain program, regarding a satellite hub in Brantford, Brant, and Norfolk. We are now waiting to receive FSA data regarding patient's encounters and where they are accessing the system.

## PCC Membership Committee Openings

- People With Lived Experience (PWLE)
  - The 4th Monday of every month
- Primary Care Network (PCN Planning) Dates to be determined
- If you are interested in joining these working groups, please email [ayates@grchc.ca](mailto:ayates@grchc.ca)

## IPCT Funding

- GRCHC has sent out a survey eliciting feedback on primary care needs for allied health supports.
- PCC is working on finding a reoccurring time for the IPCT Team and the PCC Executive to meet to ensure collaboration

## Fall and Winter Preparedness Community of Practice

- A checklist has been shared with guidelines for fall & winter surge planning.
- The purpose of this CoP is a higher-level table to assist with issues that may arise, similar to the group that was created during COVID.
- If there are any issues, concerns, or feeling that pressures are mounting – please contact the PCC executive so it can be addressed.

## PCC Succession Planning

- At the end of March 2025, S. Elliott will transition to Past Chair, D. Major to Chair, and B. Jones. D to Vice Chair.
  - The Member-at-Large position will need to be filled from within the primary care community. D. Vincent and S. Elliott will be continuing governance

## Working Group

- EDI Working Group Update
  - The EDI committee is working on frameworks and models for partners to update their training and education to meet OH guidelines. B. Jones will ensure this table has access to the modules once they are available.

## Paramedicine Homebound Vaccinations

- D. Vincent works with the paramedics doing vaccine delivery for their patients.
  - The eligibility was previously for individuals who are home-bound. This year they are looking to change it to bed-bound.
  - Physicians will be contacted to approve patients to receive the vaccine at home, if you refuse you will be accepting that you will be performing that vaccine.
  - Bed-bound is quite a restrictive requirement, many people who have difficulty getting out of the house to get a vaccine can still get out of bed but this does not diminish their barriers and need for support in home.

## Respiratory Syncytial Virus

- Respiratory syncytial virus (RSV) is a major cause of lower respiratory illness affecting the lungs and airways, particularly among infants, young children, and older adults. RSV often causes cold-like symptoms and is the most common cause of bronchiolitis, a chest infection that affects infants and toddlers.
  - Individuals are most likely to catch RSV when the virus is most active. The RSV season in Canada is generally from November to April
  - Please click the below links to see the supporting documents from the Ministry of Health
    - [Respiratory Syncytial Virus \(RSV\) Fact Sheet](#)
    - [Infant RSV Guidance for Health Care Providers - Beyfortus](#)
    - [Infant RSV Guidance for Health Care Providers - Abrysvo](#)
    - [CMOH Letter - Infant RSV Implementation - Health care Providers](#)
    - [Infant and High-risk Children Respiratory Syncytial Virus \(RSV\) Prevention Program – Monoclonal Antibody for Infants and High-risk Children](#)
    - [Beyfortus Fact Sheet](#)
    - [Abrysvo in Pregnancy Fact Sheet](#)

## MCMASTER DFM RESIDENCY EXPANSION

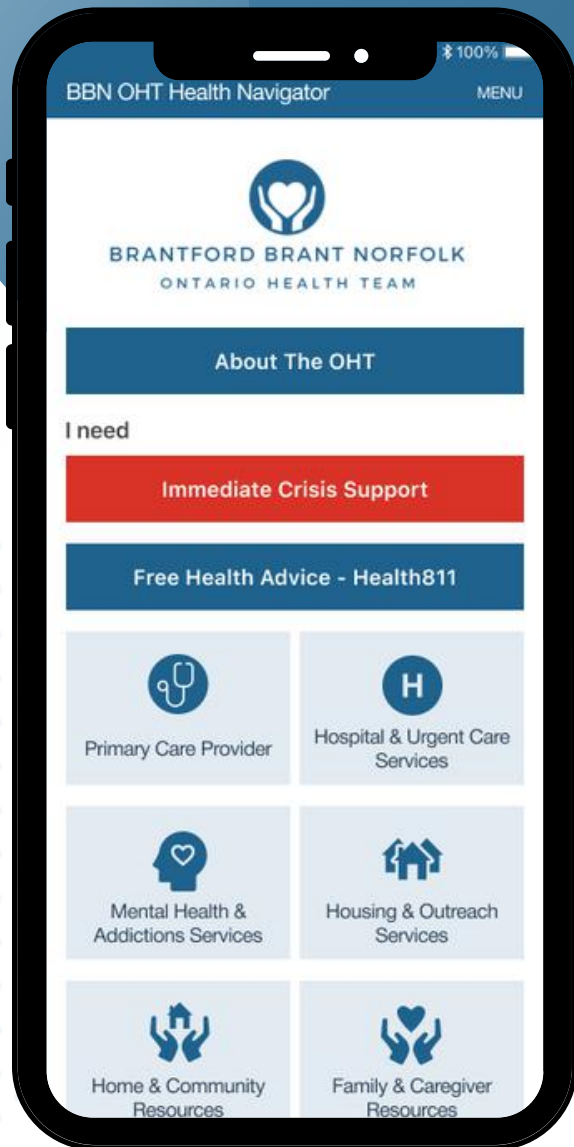
- There is a faculty development event for those involved in teaching on October 9th.
  - The name for the teaching site has been changed to 'Brantford & Indigenous Communities'
  - Lauren Kielstra will discuss this at the faculty development session.



# BRANTFORD BRANT & NORFOLK

## YOUR HEALTH IS IN YOUR HANDS!

The BBN OHT Health Navigator is the one place to find local health services and access your personal health records on your mobile device at no cost!



### HEALTH SERVICES & ADVICE

You can easily access free health advice through Health811 or browse health services in your area. Our health navigator connects you with the local and provincial services you need 24/7!



### VIEW HEALTH RECORDS

ConnectMyHealth is a digital health solution that provides you with an online, single access point to view your health records from participating hospitals in southwestern Ontario including Brant Community Healthcare System & Norfolk General



### LEARN MORE

We welcome and encourage community and user feedback so that we can ensure this Health Navigator meets your needs. Complete our brief survey by clicking "Learn more" in the app

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For more info:  [www.bbnoht.ca](http://www.bbnoht.ca)  
 [contact@bbnoht.ca](mailto:contact@bbnoht.ca)



BRANTFORD BRANT NORFOLK  
ONTARIO HEALTH TEAM



# ConnectMyHealth

## Empower your health journey with ConnectMyHealth

Ask us about ConnectMyHealth - a new digital health tool that provides you with an online, single access channel to view your health records from participating hospitals in southwestern Ontario.

To learn more, visit <https://info.connectmyhealth.ca/>

To register, scan here.



ConnectMyHealth is made possible through a collaboration between Hamilton Health Sciences, Ontario Health, and your local Ontario Health Team.