

Reclaiming your office practice

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With new cases of coronavirus disease 2019 (COVID-19) declining across the country and businesses at various stages of reopening, family physicians are also exploring next steps for their practices. There is much family doctors can learn from each other to make this transition safe as we gradually expand in-person care.

In June I helped present a CFPC webinar on “reclaiming” our office practices, along with family physicians Dr Katherine Stringer and Dr Nadia Alam.¹ Here I share highlights from that session and reflections from my own clinical work.

In a CFPC survey of members conducted in May, 76% of respondents had reduced their work hours owing to COVID-19, with an average decrease in workload of 45%.² The associated financial stress and concerns about caring for our patients make it imperative that family doctors have the information and support they need to reopen their practices.

One of the most important aspects of preparing to resume in-person services is having a detailed plan:

- Establish a screening protocol to determine which patients can be seen virtually and which should be seen in person.
- Ensure your clinic set-up allows for safe physical distancing for both staff and patients, which might include using staggered scheduling for physicians and other team members.
- Communicate frequently and consistently with staff and patients about clinic policies.
- Plan proper cleaning and maintain supplies of personal protective equipment.
- Prepare to dial back and rethink all of these aspects, as the situation remains fluid; that is, use a cautious, controlled, and gradual approach, and have multiple backup plans.

Adjusting the plan as needed really is key, as we are all learning as we go. Dr Tara Kiran, a family physician in Toronto, Ont, has suggested a helpful framework regarding what to consider when balancing in-person versus virtual visits and what data to collect for a quality improvement approach to guide these decisions.³

Given how large our country is, we have regions that are at different stages with COVID-19. This means we can learn from colleagues and apply what works and what is relevant to our own situations. Many provinces have guidance from a regulatory authority or public health guidelines, so these sources should be considered first. Doctors of BC has produced an excellent resource for community-based physicians for expanding in-person care.⁴ My co-presenters in the webinar mentioned another amazing guide for reopening your office that was created by the Ontario Health West-South West Primary Care Pandemic Response Table.⁵

Part of reopening requires us to prioritize certain aspects of care that benefit from in-person visits. Dr Kimberly

Wintemute and Dr Guylène Thériault, the Primary Care Co-leads of Choosing Wisely Canada, have written a terrific blog with a detailed outline describing what clinical services to reintroduce based on specific pandemic phases.⁶

We need to consider whether there are patients we should be concerned about who have not sought care during the pandemic, such as those with poorly controlled diabetes, those who ignored or downplayed cardiac symptoms, parents who avoided bringing their kids in for vaccinations, and those with mental health and addiction disorders.

There are also many patients with nonspecific symptoms, such as swelling or recurrent resting pain, who might have avoided the office. Consider having team members reach out to targeted groups (such as patients older than 65 with risk factors or specific illnesses) and using your teams in new ways. In my group teaching practice, we have had residents conduct this outreach work and have found it beneficial.

The pandemic has had considerable effects on patients in terms of mental and physical burnout. For many, this has been compounded by added home and family responsibilities, and health care providers have also felt this shift. We are used to providing strategies to our patients, but are we taking our own advice? Ensure you make time for regular exercise, meals with your family, and sleep. Other ideas include engaging in a new online activity (such as virtual concerts), staying connected with friends, learning mindfulness-based stress reduction practices, and keeping a gratitude journal. **Box 1** provides a list of mental health resources.

I hope you stay healthy and well as we embark on the next phase of new ways of working and reclaiming our practices. 🌱

Box 1. Useful mental health resources

The following is a list of resources for you or for sharing with others:

- <https://takecare19.com/about>
- <https://www.anxietycanada.com/covid-19>
- <https://www.crisistextline.ca>
- <https://www.hopeforwellness.ca>
- <https://ca.portal.gs>
- <https://www.headspace.com>

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References

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