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IPCT Round 2: Call for Proposals

The Ontario government has launched the 2026–2027 call for proposals to create and expand approximately 75 new primary care teams to connect 500,000 more people to primary care. This is part of the more than \$2.1 billion that the province is investing to support Ontario’s Primary Care Action Plan. This will connect everyone in the province to primary care by 2029.

The NWT PCN wants to support **all** primary care providers to get access to the interprofessional supports that they need to grow and sustain their practices. If your organization is interested in gaining access to interprofessional staff like nurses, dietitians, social workers, physiotherapists and medical secretaries, then please email Victoria Warwick at vwarwick@hrh.ca to set up a time to learn more.



Click here to learn more

Check out the *IPCT Expansion* page on our [website](#) to find recordings from our IPCT Information Sessions and to learn more.

Patient Attachment Benefits and Supports

Eligible Primary Care Clinicians looking to accept new patients from Health Care Connect will be eligible to receive up to **\$500** for each patient attached.

In addition, the NWT OHT and NWT PCN are supporting Primary Care Clinicians accepting patients from Health Care Connect by providing access to the following resources:



Clinical Intake Nurse, A nurse embedded part time in select clinics to support with the extra burden of care that is associated with taking on a new patient.



Social Determinants of Health Navigator, A navigator that can help clinicians by taking on the burden of having to help clients navigate to social services and fill out forms etc.

The NWT OHT and NWT PCN is interested in engaging and supporting Primary Care Clinicians accepting new patients.

If you are currently, or will be, accepting new patients please click here to complete the following [form](#).

2025/26 RSV Programs Prevention Program

The following information related to the 2025/26 RSV prevention program has been developed to support health care providers:

1. **Letter to health care providers re: RSV**
2. **Older Adult High-Risk RSV Vaccine Program Fact Sheet for Health Care Providers**
3. **Infant and High-risk Children RSV Prevention Program Fact Sheet for Health Care Providers V2.1**

Please reach out to CStrembicky@hrh.ca if you are interested in receiving a copy.

Cancer Screening Tip of the Month

**Toronto Central
Regional Cancer Program**
Ontario Health (Cancer Care Ontario)

Toronto Central Regional Cancer Program, Cancer Screening eBulletin

Screening Pregnant and Lactating People in the Ontario Breast Screening Program (OBSP)

- Pregnancy associated breast cancer (PABC), commonly defined as a breast cancer occurring during pregnancy, throughout 1 year postpartum, or during lactation, affects about 1 in 3000 pregnancies.
- Delays in PABC diagnoses frequently occur due to physiological changes or minor disorders related to pregnancy that can mask the initial signs or symptoms of breast cancer.
- For patients with suspicious breast cancer symptoms, breast imaging for assessment or diagnosis should be managed as clinically appropriate throughout pregnancy and lactation.

Breast Screening Recommendations for Pregnant and Lactating People:

The [Ontario Breast Screening Program \(OBSP\)](#), has developed recommendations to support breast screening discussions with pregnant and lactating patients.

- Screening with mammography during pregnancy and while lactating is safe and effective.
- Pregnant or lactating patients should be counseled on their options for screening and the risks of PABC.
- People who do not want to screen while pregnant can start screening three months after giving birth, even if they are lactating.
- Screening in the first three months postpartum is not recommended because there are changes in the breast tissue which can result in a mammogram being less effective.

Pregnant Participants	
Average Risk	• Participants should be offered screening with mammography
High Risk	• Participants should be offered screening with mammography and ultrasound • MRI is not recommended during pregnancy as the fetus could be exposed to the contrast dye
Lactating Participants	
Average Risk	• Participants should be offered screening with mammography
High Risk	• Participants should be offered screening with mammography and magnetic resonance imaging (MRI) • Participants should be informed of the potential risks of contrast dye: a very small amount can pass into breast milk but does not pose a risk to the infant

Click [here](#) to access breast screening resources and tools to support primary care providers.

Canada Post Service Disruption

A Canada Post labour disruption started on **September 26, 2025**, and is affecting **cancer screening mailings**, including **ColonCancerCheck (FIT kits)**, and **screening result letters for CCC, OBSP, and OCSP**.

Key Impacts:

- **Screening Letters:** May be delayed or not delivered. Participants should contact their **primary care provider or OBSP** site if due for screening.
- **Abnormal Results:**
 - **FIT:** Results will be couriered for those without a provider.
 - **Breast:** OBSP will contact participants directly.
 - **Cervical & Colorectal:** Providers receive results and must notify patients.

FIT Kit Instructions:

- **Delays expected** in receiving kits.
- **Do NOT return completed FIT kits by mail.** Use LifeLabs drop-off locations: locations.lifelabs.com.
- **Do NOT use expired kits** (less than 6 months to expiry).
- Samples:
 - **15–30 days old:** May not produce a result.
 - **Over 30 days old:** Will not be tested.

Please **coordinate with your Regional Cancer Program** before sharing further.

More info:

- cancercareontario.ca/maildisruption
- canadapost.ca/updates
- cupw.ca