

COVID-19 Cardiac Stakeholder Forum #20

MEETING SUMMARY NOTES

DATE: October 14, 2020 | 8:00 – 9:00 AM

DISCLAIMER: The information in this document represents a high-level summary to capture the discussion at the point of time of the meeting and is NOT general guidance.

GROUPS REPRESENTED: Over 80 people joined the call with representation from CorHealth Cardiac Leadership Council, CorHealth Vascular and Stroke Leadership Chairs, Ministry of Health, Ontario Base Hospital-MAC, Ontario STEMI Network, Cardiac Medical Directors, Program Administrators, Cath Lab Medical Directors, EP Medical Directors, interventional cardiologists, and cardiac surgeons.

HIGHLIGHTS

Strategies for Addressing Acceleration of Care & Responding to Rising COVID-19 Cases

Ramping Up Cardiac Care During COVID-19 – Christine Johnson, Trillium Health Partners

- An overview was provided of the first wave response to COVID-19, including the establishment of a THP COVID-19 Command Center and a robust surgery & procedure prioritization process
- Following the first wave (resumption of non-essential and elective services), resumption of all services is subject to approval of the THP recovery committee to ensure prioritization processes are maintained and there is equal access and collaborative approach; other post-first wave activities included: having two dedicated CVORs, and four dedicated rooms for cardiac cath lab, and a phased approach of ambulatory services resumption
- Discussed how resources are assessed in the context of increasing COVID-19 prevalence, given that the peel region remains a 'Hot Spot'; examples include:
 - EPIC electronic medical record system allowing oversight of all 3 sites and 1 patient record between sites
 - Resources, bed flow and capacity are continually managed through Capacity Management Dashboard in real time
 - Resumption focused on a phased in approach
- Some of the associated changes, have included: leveraging virtual care across the organization where feasible, remote patient monitoring, and on-site COVID-19

testing for staff and patients, and community

- Some of the challenges that were raised, included: virtual visits taking longer and not always the best option for patient history and physical, impact on patient education
- Overall, health human resources have been impacted, with staff remaining positive and focused on patient care & resumption of services, a focus on the launch of EPIC platform during Wave 2, and a notable increase in early staff retirement and staff opting to reaming home with school age children

Navigating Cardiac Care During COVID-19 – Erika MacPhee, University of Ottawa Heart Institute

- UOHI provided an overview of their COVID-19 response, including the establishment of prioritization and triage processes, and the formation of the COVID-19 clinical oversight committee
- A few key tools and strategies were highlighted as part of the COVID-19 response, such as nightly leadership (CEO & Senior Management Team) meetings, triaging of all surgical cases, and development of ICU length of stay predictor
- The expansion of cardiac virtual care was also detailed, including: remote patient monitoring, telemedicine consult, virtual home consult, and TeleICU
- UOHI's second wave response was very different compared to the first wave; staffing has been a major challenge, with an increase in staff absences, and being mindful of exhausting staff that are able to work.

Discussion

- Both UOHI & THP have been maintaining communication with their regional partners, as part of Ontario Health Region meetings; these meetings have included discussion around challenges and access to service, and communicating that it is safe for patients to return for procedures

Virtual Care: Heart & Stroke COVID-19 Impact Survey – Natalie Gierman, Heart & Stroke Foundation

- Natalie Gierman provided an overview of the Heart & Stroke Foundation's COVID-19 Impact Survey completed in May 2020
- The survey highlighted caregiver burden, with caregivers dealing with their own multiple complex needs and comorbidities, while having to care for others dealing with similar issues
- It was also noted that racialized communities and immigrants are being impacted by COVID-19 in different ways, which requires further exploration as the majority of respondents identified as white Caucasian
- Emotional and mental health concerns ranked highest for both PWLE & caregivers, as well as feelings of isolation
- The Heart & Stroke Foundation will engage with this group further and release

additional data after November 15th

Analysis of Mortality on the Diagnostic Cath Lab Waitlist – Garth Oakes, CorHealth

- Garth Oakes presented an analysis of mortality on the diagnostic Cath Lab Waitlist
- It was noted that the mortality on waitlist data has been consistent between 2019 and 2020 across most procedures
- However, Cath lab diagnostic waitlist mortality has been increasing, while there are fewer referrals
- There was a considerable amount of missing data 30-40% of the time when looking at mortality on the waitlist from Inpatient versus Outpatient perspective; in those patients where there is data, no big difference in Inpatient versus Outpatient makeup has been observed
- Consistently, it is being observed that between 2019 and 2020, the patients dying on the Cath lab waitlist in 2020 are waiting less time than they did in 2019; this may perhaps speak to the acuity of patients
- Some members noted that it would be useful to re-running this analysis without the STEMI population included, to see if that population is driving the mortality

OTHER UPDATES AND NEXT STEPS

- This week's cardiac report was circulated to Forum members; cardiac activity reports will continue on a bi-weekly basis over the summer months
- Next meeting of the group will be held Wednesday, November 18th, 2020, from 8:00 – 9:00 am
- If group members have any questions or comments, please email to Jana.Jeffrey@corhealthontario.ca, and they will be included for discussion at future meeting