

COVID-19 Vascular Stakeholder Forum #4

MEETING SUMMARY NOTES

DATE: April 29, 2020, 9:00-10:00am

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: Vascular Leadership Council, Clinical Advisory Committee (vascular members), Vascular Surgery Program & Medical Leadership from 20 hospitals with vascular programs, Vascular Interventional Radiology Program & Medical Leadership from 20 hospitals with vascular programs, CritiCall Ontario, Heart & Stroke Foundation, Ministry of Health, CorHealth Ontario

GUEST SPEAKERS: Dr. Beate Sander, Dr. Justin Clouthier, Dr. Heather Cox

HIGHLIGHTS

System Planning Updates

- Role and purpose of two provincial tables was discussed:
 - COVID Surgical Services Pandemic Advisory Panel
 - o Ontario Health COVID-19 Health System Response Oversight Table
- It was noted that the Ontario Health table is not service specific in their approach to ramping up procedures and surgeries.

Vascular Patient Triage/Prioritization

- CorHealth COVID-19 Vascular Memo #2 *Recommendations for an Ontario Approach to Prioritization of Vascular Surgical and Endovascular Procedures in Response to Phases of COVID-19* was reviewed.
- The intended audience of the memo was hospital leadership and program administrators to better plan for resource allocation for vascular services at the program level. The memo has been sent by email to chiefs of surgery and vascular program medical and administrative directors at each of the hospitals with level-1, level-2 or level-3 vascular programs.
- The purpose of the memo is to provide guidance to hospitals and physicians for prioritization of patients receiving vascular surgical or endovascular procedures within the context of anticipated fluctuations in the number of COVID-19 infected patients requiring hospital care over the coming months COVID-19.



- It was suggested that individuals could use the information contained within the memo when advocating at their individual hospitals for the needs of vascular patients.
- It was noted that documentation of vascular patient waitlists remains important and will be important to monitor outcomes of patients who have had extended wait times related to the COVID-19 pandemic. Additionally, it is of interest to understand what proportion of patients who are on the waitlist do arrive at hospital requiring an unscheduled repair.

CORE (<u>CO</u>vid-19 <u>R</u>esource <u>E</u>stimator) Model Methods

- Guest speaker Dr. Beate Sander presented CORE modelling of COVID-19 impact on hospital resource utilization.
- <u>Question:</u> Are you able to model potential future surges as social distancing measures are relaxed?
 - Not currently but this is something to be worked on as models are developed.
- <u>Question:</u> PPE seems to be more restrictive than beds is this something you are modelling?
 - Yes, the Toronto Health Economics and Technology Assessment (THETA) has been factoring potential limitations into the modelling of bed availability (e.g. PPE, essential medications, human resources)
 - For example, you might have 500 beds available but only enough PPE to operate 300 beds.
 - Modelling has been done for cardiac services, cancer and transplant.
 - Currently working on modelling for vascular services and modelling the impact of delaying procedures / services

OMA Discussion

- Dr. Justin Clouthier spoke to the idea of creating an organization for vascular surgeons that will advocate for vascular surgeons in Ontario. Further discussion of this idea may occur at another venue.
- Dr. Heather Cox spoke to provincial and federal financial supports for small business.
 - Further information can be found on the <u>OMA members page</u>.

NEXT STEPS

• Next meeting will be held on May 13, 2020.

Please submit your requests for discussion topics, questions and concerns for inclusion in the next forum to Mike Setterfield at <u>mike.setterfield@corhealthontario.ca</u>.