



Cardiovascular Rehabilitation Stakeholder #1

Meeting Summary Notes | April 26, 2022; 3:00 - 4:00PM

GROUPS REPRESENTED: Approximately 65 stakeholders joined the call with invitations extended to the CorHealth Cardiac Leadership Council, Cardiovascular Rehabilitation Programs, the Rehabilitative Care Alliance, Ministry of Health Partners, Heart and Stroke Foundation Leadership and colleagues from Manitoba and Saskatchewan.

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.

HIGHLIGHTS

Welcome

Dr. Karen Harkness opened the meeting and provided introductory remarks, including a Land Acknowledgement, and reviewed the meeting objectives:

- To review updated CR data collection results from 6 months of data
- To continue the dialogue and activity supporting a progressive approach to measure, monitor, and report on the status of outpatient Cardiovascular Rehabilitation in Ontario
- To validate feasibility and program value-add for proposed data subgroups
- To share experiences and facilitate dialogue on the current activities and models of delivery for cardiovascular rehabilitation (including virtual, in-person and hybrid)

Provincial CR Measurement & Reporting Initiative: Updated Results

Dr. Karen Harkness provided a recap of the key milestones, initial population cohort, and the two key metrics/data points. The updated results from the data collection period (Aug 2021 – Jan 2022 data) were presented. Over 36 programs (84 sites) submitted data during this period. The 90%+ completion rate of submitting data was maintained. Provincial and regional totals for the two data points were shared.

Dr. Oh thanked CorHealth and the CR community for their engagement and participation to date, and reiterated the importance of data in this space that has been missing from the conversation from the last while. It was acknowledged that referrals during Fall 2021 were higher than the Winter 2021 timeframe, likely due to a winter dip, the holiday period, and the Omicron COVID wave. We can observe a temporal pattern and will continue to monitor these values.

The higher number of referrals compared to the number of first clinically meaningful encounters is a phenomenon we have seen across CR programs. We recognize there are some individuals who are unable or

unwilling to attend CR (i.e. those with clinical instability who are not suitable for referral). We know that people who are referred to CR, but do not attend CR, have a significantly worse clinical trajectory and poorer outcomes. We recognize there is a substantial gap between need (patients requiring CABG and PCI) and our ability to deliver rehabilitation, due to gaps in the system, funding issues, regional issues, etc.

A regional view of the data was presented, which included regional referral and first clinically meaningful encounter volumes for each OH region, including the place of procedure and the place of patient residence for CABG and PCI procedures. CorHealth is in the process of creating a shareable excel file that will show regional and sub-regional level data for volumes of people who had either one of these procedures. The file will be ready to share in approximately one month.

Provincial CR Measurement & Reporting Initiative: Proposed Refinement of the CR Dataset

Following a CR Measurement Task Group meeting on March 22nd, 2022, CorHealth is proposing the following refinement to the existing CR dataset:

- **Refinement:** Explore 2 cardiac subgroups within initial cohort where a clear denominator can be captured from the Cardiac registry and programs can easily identify these subgroups for values that will represent the numerator
- **Rationale:** Provides additional meaning to interpret findings by understanding local supply *and demand*

The two proposed subgroups are:

- Post CABG +/- Valve surgery (cardiac surgery)
- Post PCI (catheter-based intervention)

Forum members were supportive of this additional data collection, which will begin in June 2022, with a request for April 2022 data. The 60-day time lag will be maintained. Having more data granularity will be a valuable opportunity to further explore data trends and insights. Overall, this data collection process continues to be a success. Thank you to all participating programs and the CR community for their continued interest and dedication to this important initiative.

Next steps on monthly data collection timelines were provided. As previously, the contact person from each program can anticipate an email with a program-specific excel file from Joy Tabieros on the first Monday of each month, with a data collection request. Monthly data submissions are due back to Joy via email, by the 15th of each month. Please see the slide deck for additional details of this process over the next few months. CorHealth will present updated findings for the new data subgroups and the initial cohort during the next CR Forum in September 2022 (tentative; date TBC).

Guest Presentation: Dr. Ashlay Huitema, Cardiac Rehabilitation and Secondary Prevention Program St. Joseph's Health Care London

The COVID-19 pandemic forced the St. Joseph's Health Care London's CR team to begin offering virtual cardiac rehab services. Many components were shifted from in-person to virtual settings, including referral

and orientation. The team initiated the use of the Cardiologica Patient App over the past couple of months, notably the patient exercise logging function.

The team has seen an absolute decrease in the number of CR referrals of about 40 %– 50%. Their local results mirror the provincial results that were presented earlier in the meeting. Of the patients that were being referred, an increase was seen in patient attendance for their first intake appointment, from 64% to 79%. Overall, patient outcomes are largely being achieved despite the virtual/hybrid CR model.

Forum members can contact Dr. Huitema at ashlay.huitema@sjhc.london.on.ca with any questions.

CorHealth is planning to host a Cardiologica information session/workshop, likely in Fall 2022. Please note this session will not be led by CorHealth and will be held in parallel to the Fall 2022 CR Forum. We will be exploring the opportunity for programs to present on their local EMR platforms.

Dr. Oh encouraged CR programs to contact Karen if they wish to present experiences from their CR programs as part of the Guest Presentation segment, to facilitate sharing and knowledge transfer exchange and to support the wider CR community.

Open Discussion – Pulse Check: What is the current experience of delivery of CR in Ontario?

Due to time constraints, the open forum discussion was deferred. This discussion will be continued at the next CR Forum.

Next Steps

1. CorHealth to circulate CR Forum #12 meeting notes and slide deck to Forum members
2. Programs to continue with usual data collection process, commencing with email from Joy Tabieros in early-May (joy.tabieros@ontariohealth.ca)
 - a. A new excel template will be circulated to programs beginning in early-June, to enable collection of the two new data subgroups
3. Updated findings for the newly added data subgroups and initial cohort will be presented during the next CR Forum in September 2022 (tentative; date TBC).
4. CorHealth to circulate an excel file that will allow regions to see their regional and sub-regional level data as per patient residence for quarterly volumes of people who had a CABG +/- Valve surgery or PCI
5. The recording of this Forum can be viewed here: <https://youtu.be/HujfpPW64jM>
6. As a reminder, all Forum presentations, videos and summary notes can be found on the CorHealth website under 'Resources for Healthcare Planners & Providers', 'Rehabilitation in Ontario'.

Please email Karen Harkness (karen.harkness@ontariohealth.ca) or Joy Tabieros (joy.tabieros@ontariohealth.ca) if you have any questions.