

CorHealth COVID-19 Heart Failure Stakeholder Forum #5

MEETING SUMMARY NOTES

DATE: May 13, 2020, 6:00 – 7:00 PM

GROUPS REPRESENTED: Approximately 35 participants, including centers and programs providing outpatient care in Heart Failure (typically in a heart failure clinic, across Ontario), system partners (e.g., eHealth Center of Excellence, Heart & Stroke Foundation, Home Care, Ministry of Health)

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

Recap of April 22nd COVID-19 Heart Failure Stakeholder Forum

- All meeting materials and related resources continue to be posted and updated on the [CorHealth COVID-19 Resource Centre](#)

Cardiovascular Rehabilitation: Update

- Provided an update on the Cardiovascular Rehab activity, including the Stakeholder Forum held on May 8th, and the Cardiac Memo #12 released on recommendations for an approach to the provision of cardiovascular rehab during COVID-19 in Ontario
- The memo can be found here: [https://www.corhealthontario.ca/CorHealth-COVID-19-Memo12-Cardiovascular-Rehab-\(May-12-2020\).pdf](https://www.corhealthontario.ca/CorHealth-COVID-19-Memo12-Cardiovascular-Rehab-(May-12-2020).pdf)

COVID-19: Update on Current Data

- Dr. Ross provided an overview of the current global and provincial landscape of COVID-19, referencing: <https://ourworldindata.org/coronavirus>.

Globally:

- Increasing growth rates of COVID-19 cases in Russia and India, with total confirmed cases globally at just under 4.3 million cases

In Canada:

- Starting to see a bend in ‘the curve’
- Fatality rate is higher than the overall global rate, driven largely by what is occurring in LTC homes

In Ontario:

- App.192 patients in the ICU with COVID-19; The distribution of ICU occupancy varies across the province
- Patients age 80+ years in the ICU have a much higher mortality rate (70%) than younger patients
- Total #of cases (20,907); Resolved (15,391, 73.6%); Deceased (1,725, 8.3%).
New cases today (361, 1.8% daily increase)

Health Canada approves first COVID-19 serological test

- Dr. Ross highlighted that on May 12, 2020, Health Canada authorized the first serological test to detect COVID-19 antibodies, the DiaSorin LIAISON®. Plans for the uptake and implementation of this test in Canada are being explored.

Heart Failure Data

- Dr. Ross presented initial Heart Failure Modelling work completed by Dr. Harindra Wijesundera
- Data was based on prevalent and incident patients at the provincial level, up to March 31st,2019 (IC/ES). There are approximately 305,000 HF patients in Ontario at the beginning of the pandemic. Retrospective data suggests an annual hospitalization rate of 1.7% and ED visit rate of 2.3%
 - As such, over the course of 1 month into the pandemic, we would expect to see ~2300 HF hospitalizations, and ~2800 ED expected visits
 - Based on UHN real time ED visit data (2019 vs 2020), week-to-week there are relatively far fewer HF patients coming to the ED in 2020. For those that do come into ED, far fewer are being admitted – this is concerning.
- Estimate that 5% of the prevalent HF population have high-risk patient characteristics (i.e., 15, 250 patients that are at high-risk and may benefit from an in-person visit at clinic). Clinics are not meeting this need.

Ambulatory Heart Failure Activity: Survey

- CorHealth provided a summary of an ambulatory HF clinical activity survey distributed to cardiac hospital admin and HF clinic contacts. RR 85% (23/27)
- Key findings include:
 - Changes in referral volumes and appointment volumes during COVID-19 are not consistent across settings;
 - Most HF clinics did not provide a virtual care option prior to COVID-19,
 - Have substituted virtual appointments for in-person visits,
 - Provide in-person visits for a highly selected group of patients (10-20% of appointments).

Ambulatory Heart Failure Activity: Planning for Resuming Care

- Dr. Ross introduced an overview of UHN's outlined Recovery Phases and a summary of UHN's IPAC Guidelines on Resuming Ambulatory Care
- Three recovery phases, and a future state 'new normal' were summarized. It is

anticipated that virtual care will remain for 30-40% of patients visits in the future state.

Open Forum Discussion

- Key Changes Being Implemented/Considered:
 - Following IPAC guidelines; set up clinic rooms to allow for physical distancing of six feet when taking patient history; streamlined clinics to have fewer people present; limit wait room to 1 person at a time; potential for putting up plexiglass; ensuring that there is sufficient housekeeping for turnover of rooms
 - Educating staff to minimize patient movement
 - Utilization of PPE- for in person visits- the majority of sites have initial screening with masking by patient and provider (as a minimum). However, the use of PPE varies across sites from full PPE (assume positive until proven otherwise) to no PPE for staff and patients provided a mask only if report symptoms.
- Discussed policies for screening patients coming through the ED with symptoms of HF; at UHN, they have moved to an extremely threshold for COVID testing. If someone presents with shortness of breath, the first test may be negative as the virus could be in the lower respiratory tract, and the patient could still be COVID-19 positive and repeat testing should be considered. Other sites shared experience which ranged widely.
 - Voiced concerns that not testing all ED patients presenting with HF symptoms is putting health care workers and patients at unnecessary risk

NEXT STEPS

CorHealth to:

- Post / distribute meeting summary notes
- Update the CorHealth COVID-19 Resource Centre
- Schedule the next Heart Failure Forum Meeting – *Date TBD*
- CorHealth will be distributing a short survey to stakeholder forum members early next week for their feedback on the COVID-19 Stakeholder Forums

Forum Participants:

- **Please submit your requests for discussion topics, questions and concerns for inclusion in the next forum. Submissions can be sent to Karen Harkness at karen.harkness@corhealthontario.ca**