

# COVID-19 Vascular Stakeholder Forum #3

## **MEETING SUMMARY NOTES**

**DATE:** April 15, 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

#### **HIGHLIGHTS**

### **System Planning Updates**

- The Ontario Health Workforce Matching Portal is now available and is linked <a href="here">here</a>.

  Participants are referred to the Ontario Hospital Association website for more information.
- A COVID-19 Provincial Surgical Services Pandemic Advisory Panel is now meeting for system monitoring of resource constraints and capacity issues and planning accommodations to manage the demand across health care (including across surgical specialties). CorHealth is participating on this advisory panel with the lens of cardiac, stroke and vascular domains.
- Recommendations from this panel will be tabled at the Ontario Health/COVID-19 Command Table.

#### **Vascular Patient Triage/Prioritization**

- Dr. Nagpal shared that, while we may have avoided the expected surge of COVID-19 patients in many Ontario hospitals, we instead may be in a new steady state of reduced access to operating rooms (OR's)/procedure suites over a number of months.
- With reference to earlier vascular patient triage/prioritization lists that were created in other
  jurisdictions and modified for the Ontario context and with the assumption of short-term,
  very low OR access, Dr. Nagpal asked if there was appetite to develop or revise the proposed
  Ontario vascular patient triage/prioritization list with the assumption of reduced OR access
  over a medium-to-long term period of time.



- General consensus from participants that an updated guidance document/memo would be very helpful and would likely continue to be useful in the post-COVID-19 period as a provincial tool.
- Dr. Jaskolka shared a link to an article (Medically-Necessary, Time-Sensitive Procedures: A Scoring System to Ethically and Efficiently Manage Resource Scarcity and Provider Risk During the COVID-19 Pandemic) for consideration (<a href="https://doi.org/10.1016/j.jamcollsurg.2020.04.011">https://doi.org/10.1016/j.jamcollsurg.2020.04.011</a>).
- Several stakeholders agreed to participate to support this work.

#### **Vascular Procedure Activity & Wait List Monitoring**

- CorHealth, through collaboration with Ontario Health CCO Access to Care, shared vascular procedural activity and wait list data obtained from the Wait Times Information System database.
- Information shared suggested that, provincially, there was a step-wise reduction in elective vascular activity over time from March 15 to April 6 2020 relative to activity levels for the same time period in 2019.
- Participants indicated support for continued monitoring of these data, as the information will be valuable at the hospital and system level when planning to increase capacity following the COVID-19 period.
- Available wait list data suggests a reduction in priority 3 and priority 4 patients waiting for vascular procedures through the month of March.
- It was thought that this observation may be due to multiple factors resulting in a reduction and/or delay in patients being added to the wait list during the COVID-19 pandemic. Several participants confirmed that their clinics have reduced or stopped adding patients to the wait list, patients on the wait list have been "DARTed" (temporarily deactivated) due to OR restrictions.
- CorHealth provided an estimate of wait list growth as of the end of March 2020 based on
  actual wait list data and historical volumes of vascular procedures. However, it was noted
  that the estimates are crude and it will be important to continue to monitor and refine wait
  list growth estimates throughout the period of reduced OR access to support planning to
  overcome the bolus of surgical cases post-COVID-19.
- Comments shared that considerations beyond OR access (i.e. funding models) will need to be taken into account to help hospitals plan for post-pandemic activities and to catch up with the backlog of deferred cases.
- CorHealth acknowledged that these discussions are ongoing at many system-level and specialty-agnostic tables.

# **Facilitated Open Discussion**

The following topics were shared and discussed by stakeholders:

 Overall PPE (masks) are being worn repeatedly throughout several cases and being saved for re-use, sterilization options being investigated at some hospitals



- Local/systemic pressures include concerns around the ramping up of vascular activity, particularly competition with other specialties for limited hospital resources. The vascular community will need to advocate strongly for their patients' needs/vascular OR time.
- London shared that their local ramp-up planning has been a collaborative approach between vascular and cardiac to jointly advocate for OR time needs.
- CorHealth indicated that there is activity going on at OH/MOH with Dr. Chris Simpson being
  asked to chair a group to look at surgical triage activities post-COVID CorHealth will be
  advocating for cardiac and vascular surgery needs with this table. Dr. Everson commented
  that she also sits on the group chaired by Dr. Simpson and shared support for the
  development of the vascular patient triage/prioritization list which she felt would be
  extremely helpful.
- Discussion took place around physician income stabilization and the resulting lack of care provision if vascular specialist outpatient office clinics have to limit activity and/or close. Participants were referred to the OMA for more information.
- General concerns being heard from patients, some of whom expressed fear and anxiety
  about going to the hospital for an appointment/procedure and has led some patients to
  decline upcoming appointments. Other patients have expressed anger wondering why their
  procedure has been cancelled or deferred indefinitely.
- OTN and other video conference platforms seem to be causing difficulty for many patients
  who are unfamiliar or uncomfortable using the technology and for HCP's there have been
  frustrations with the time it takes to organize and set-up the videoconference calls. Most
  participants agreed that the majority of their patient consultations are now being done by
  phone only.

#### **NEXT STEPS**

- CorHealth to distribute meeting summary notes and post on the <u>CorHealth COVID-19</u> <u>Resource Centre</u>
- CorHealth to coordinate meetings between Dr. Nagpal and group of interested stakeholders to develop an updated guidance document/memo on vascular patient triage/prioritization.
- CorHealth to schedule the next COVID-19 Vascular Forum meeting in two weeks (April 29<sup>th</sup>, 2020; 9-10am), unless the need for an earlier meeting is made apparent.

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