



CorHealth COVID-19 Stakeholder Forum Meeting

April 28, 2021 | 4:00-5:00 pm

Teleconference: (647) 951-8467 or Long Distance: 1 (844) 304 -7492

Conference ID: 976 522 06#

Agenda

TIME	DISCUSSION	ACTION REQUIRED	LEAD
4:00	Welcome & Meeting Objectives	Information	Sheila Jarvis Dr. Tom Forbes
4:05	COVID-19 Incident Management Tables & Structure	Information/ Discussion	Dr. Andrew Baker
4:25	Transportation & Transfers During COVID-19	Information/ Discussion	Mike Sanderson
4:55	Other Updates & Next Steps	Information/ Discussion	Dr. Tom Forbes



Welcome

Sheila Jarvis, CEO, CorHealth Ontario

Dr. Tom Forbes, Chair, CorHealth Clinical Advisory Committee

Meeting Objectives

- Provide current, consistent information about COVID-19 to CorHealth's cardiac, stroke, and vascular stakeholders
- Identify issues and recommendations to escalate to provincial COVID-19 IMS tables
- Provide an overview of the current COVID-19 situation from the COVID-19 Incident Management Table
- Provide an update on current state of transfers and transport, including EMS pressures
- Provide an opportunity to discuss implications of Wave 3

Housekeeping Reminders:

- *Please ensure that you are on mute, not on hold, when you are not speaking on the call*
- *To unmute on your computer, click the mute/unmute button in the Teams meeting. To unmute on your phone, please press *6*



COVID-19 Incident Management Tables & Structure

Dr. Andrew Baker, Incident Commander, Critical Care Incident Management Table
and GTA COVID-19 Incident Management Table



Transportation & Transfers During COVID-19

Mike Sanderson, Chief, Hamilton Paramedic Service



Other Updates and Next Steps

Dr. Tom Forbes, Chair, CorHealth Clinical Advisory Committee

Other Updates and Next Steps

- We will continue holding a combined COVID-19 Stakeholder Forums (cardiac, stroke, and vascular stakeholders) weekly for half an hour, as necessary
- A Cardiovascular and Stroke Rehabilitation COVID-19 Stakeholder Forum will be taking place April 30th from 8:00am – 9:00am
- If group members would like to share or suggest any future agenda items, please email Emma Jowett (emma.jowett@corhealthontario.ca).



Appendix



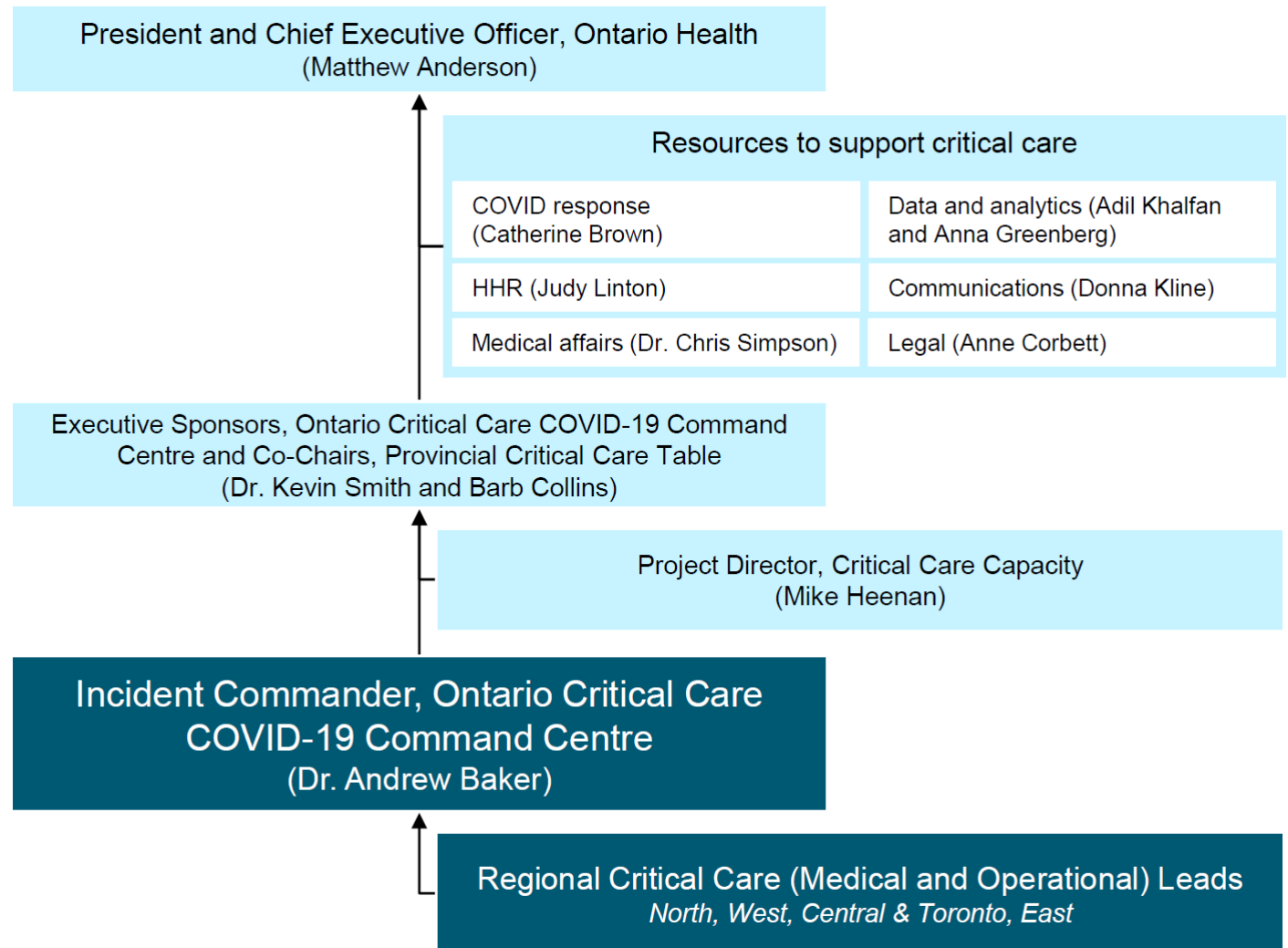
COVID-19 IMS Structures

Critical Care IMS Structure – Ontario Critical Care COVID-19 Command Centre

Established in March 2020, the **Ontario Critical Care COVID-19 Command Centre** is a single provincial decision-making body for critical care and has been given four roles:

- The authority to direct the movement of patients within and across regions to smooth the burden on critical care units and maximize the use of our critical care resources
- The authority to direct the movement of ventilators and other supplies as necessary to maximize critical care capacity
- The authority to trigger triage protocols
- The responsibility to facilitate all regions and critical care hospitals in maximizing the creation and sustainment of additional critical care capacity.

Within this structure, the Ontario Critical Care COVID-19 Command Centre is led by an Incident Commander, who reports to the Co-Chairs of the Provincial Critical Care Table, providing executive sponsorship. The Co-Chairs of the Provincial Critical Care Table report to the President and CEO of Ontario Health. The structure is also supported by Ontario Health resource leads.

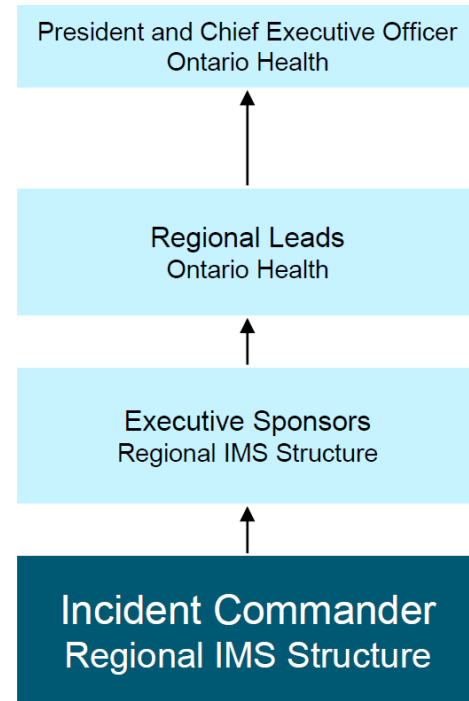


Regional IMS Structure

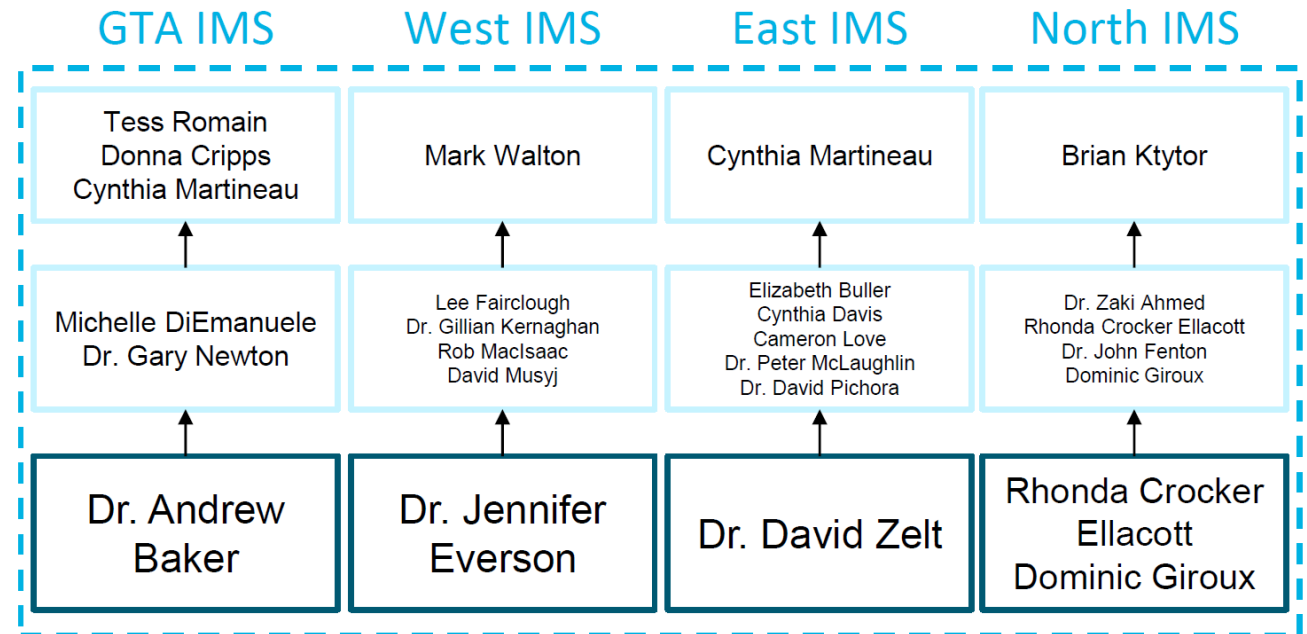
Enabled in November 2020, **Regional IMS'** are led by an Incident Commander and are regional decision-making bodies with the authority to:

- Monitor hospital critical capacity needs across the region in real time
- Respond in a timely manner, commensurate and relevant to the pace of capacity issues
- In response to established triggers, provide necessary executive direction and decision making to facilitate movement of patients, equipment, and supplies amongst hospitals based on need

These structures operate in tandem with the Critical Care IMS structure. The role of the GTA Incident Commander and Ontario Critical Care COVID-19 Command Centre Incident Commander is cross-appointed.



Provincial IMS Coordination



The **Greater Toronto Area (GTA) IMS** is a collaboration across 3 regions (Central, Toronto, and part of East) given the population size and hospital concentration in the GTA area. The **West**, **East**, and **North** also have IMS structures. Together, these structures provide provincial IMS coordination.



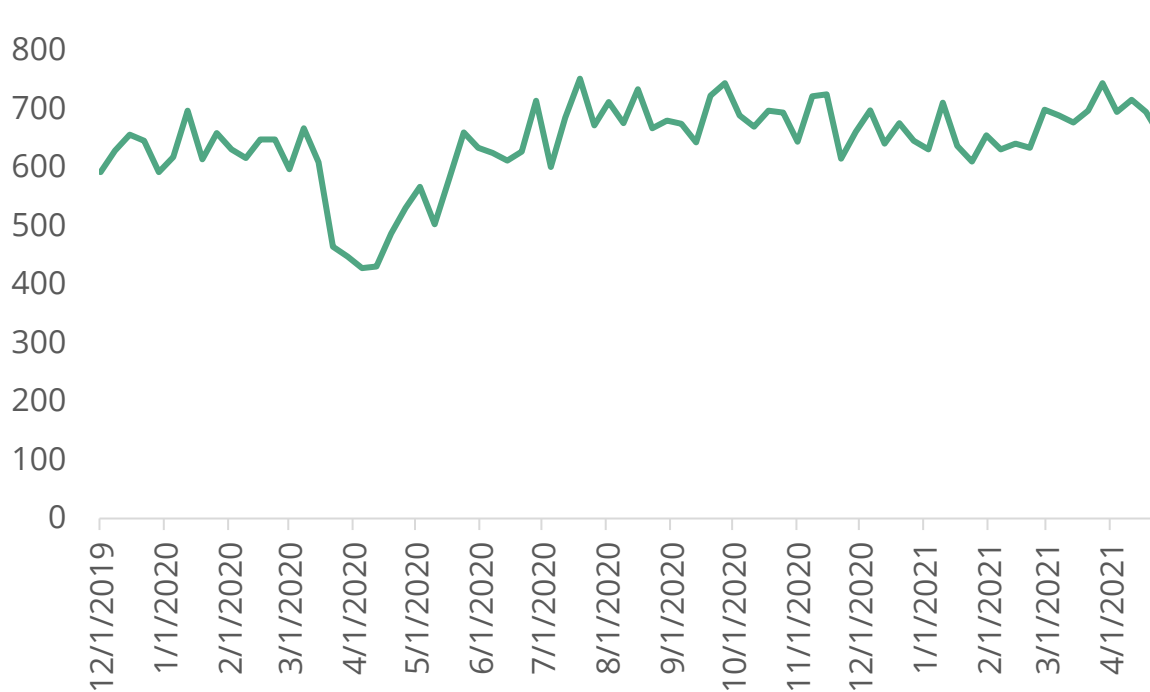
Appendix: Cardiac, Vascular, and Stroke Activity Update

Data from the CorHealth Cardiac Registry and eCTAS

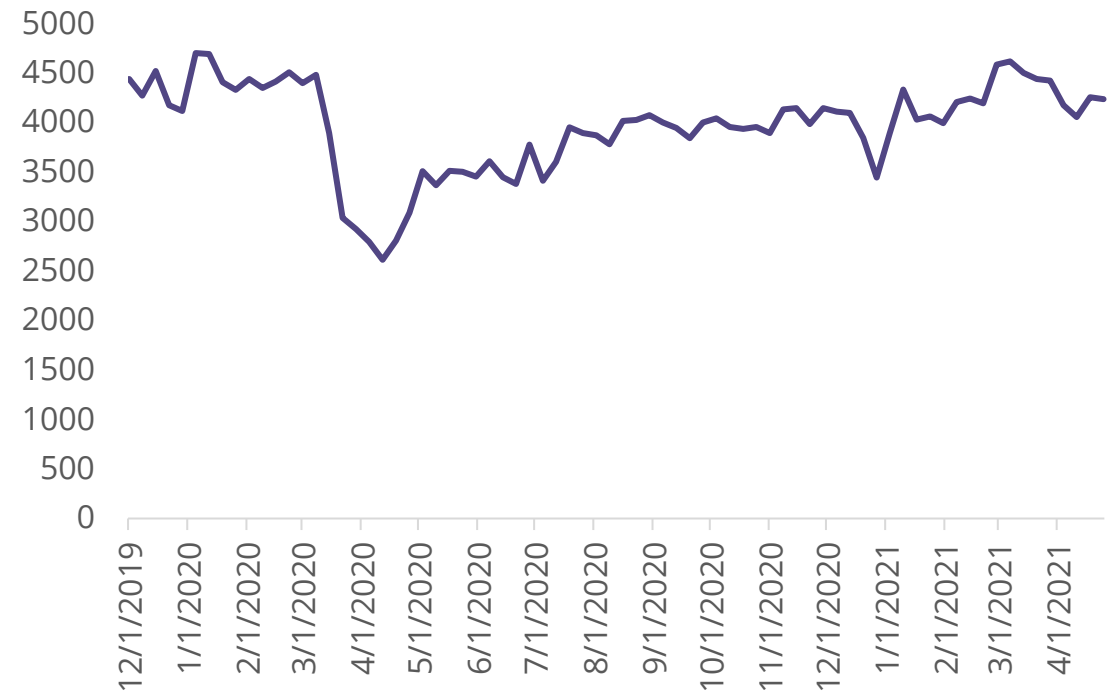
Stroke and Cardiac eCTAS Presentations

Patients have continued to seek care at EDs since grey lockdown and stay at home orders were implemented in March/April

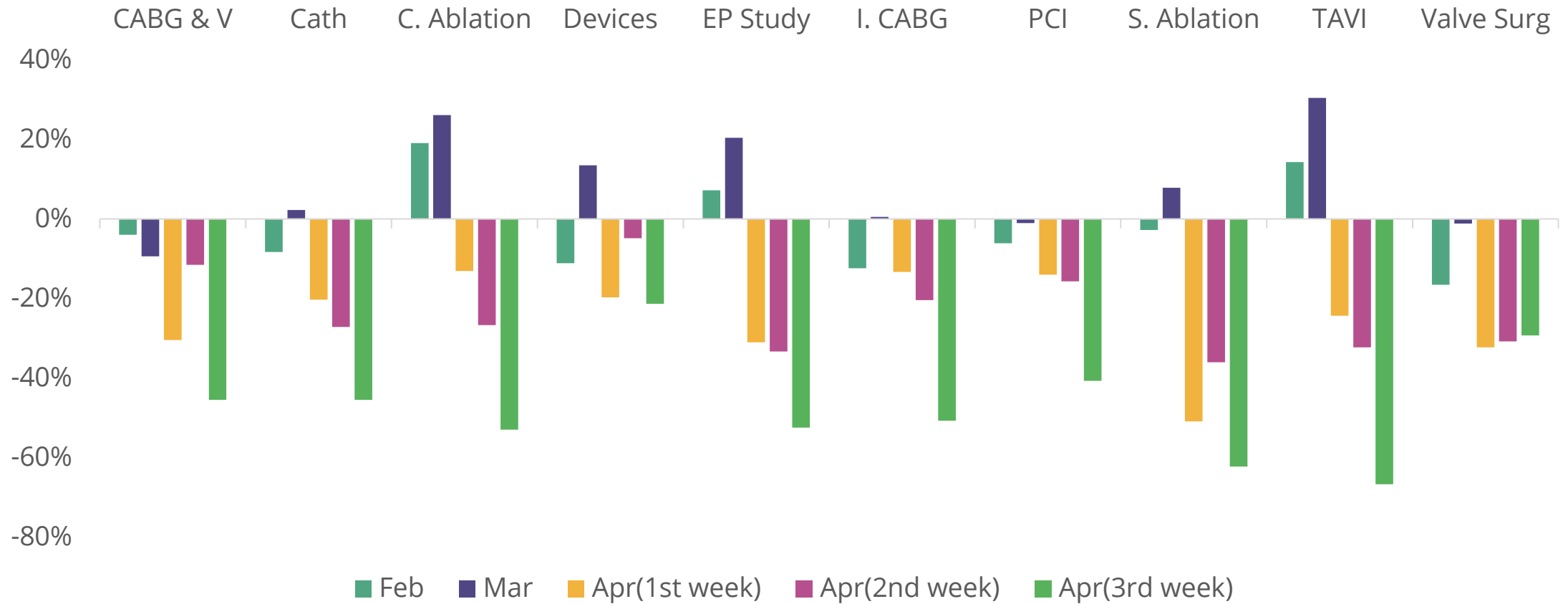
Stroke
Extremity Weakness / Symptoms of CVA



Cardiac
Chest Pain - Cardiac Features



Change in Ontario Cardiac Volumes

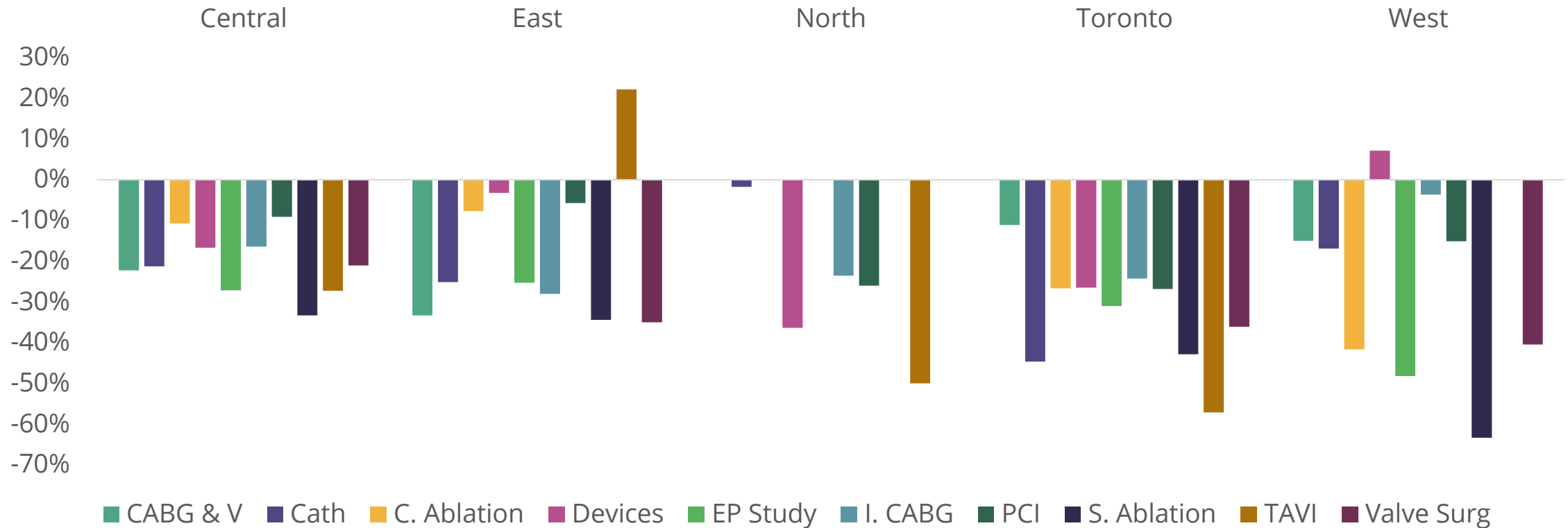


The volume reduction in the most recent week is overestimated due to data entry lag

Baseline = 2020 for February; 2019 for March and April

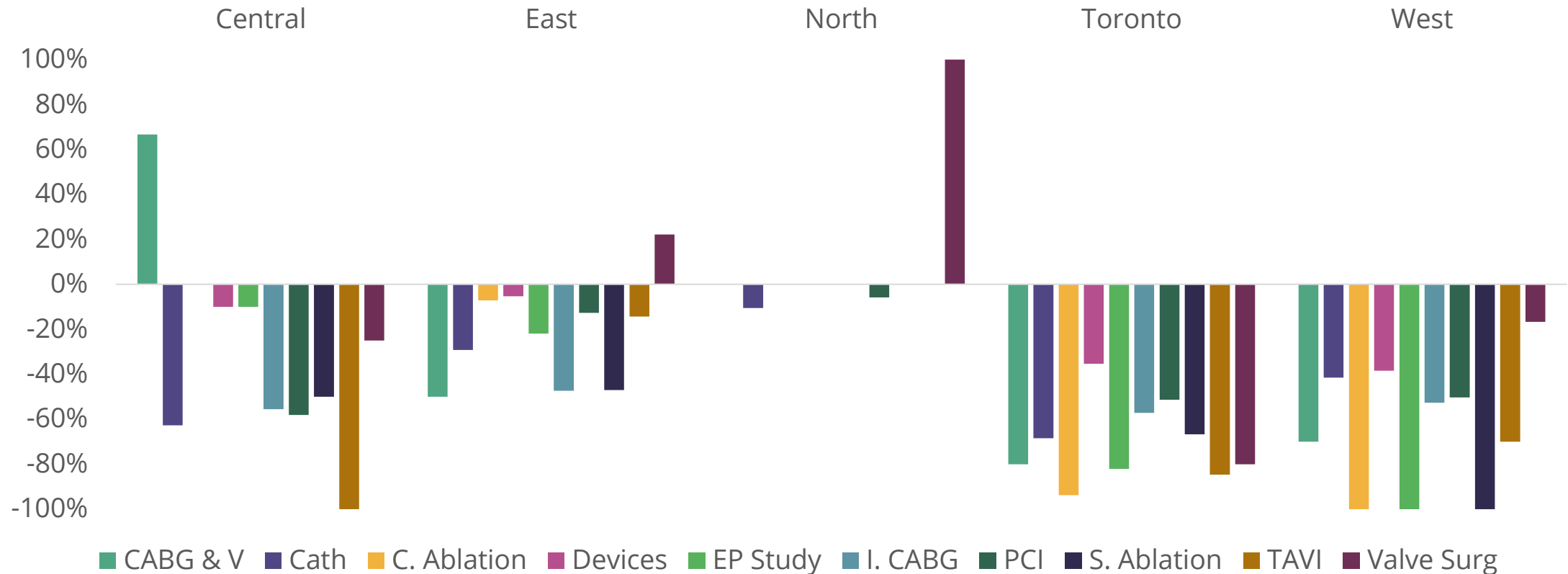
Change in Regional Cardiac Volumes

First two weeks of April 2021 compared to 2019



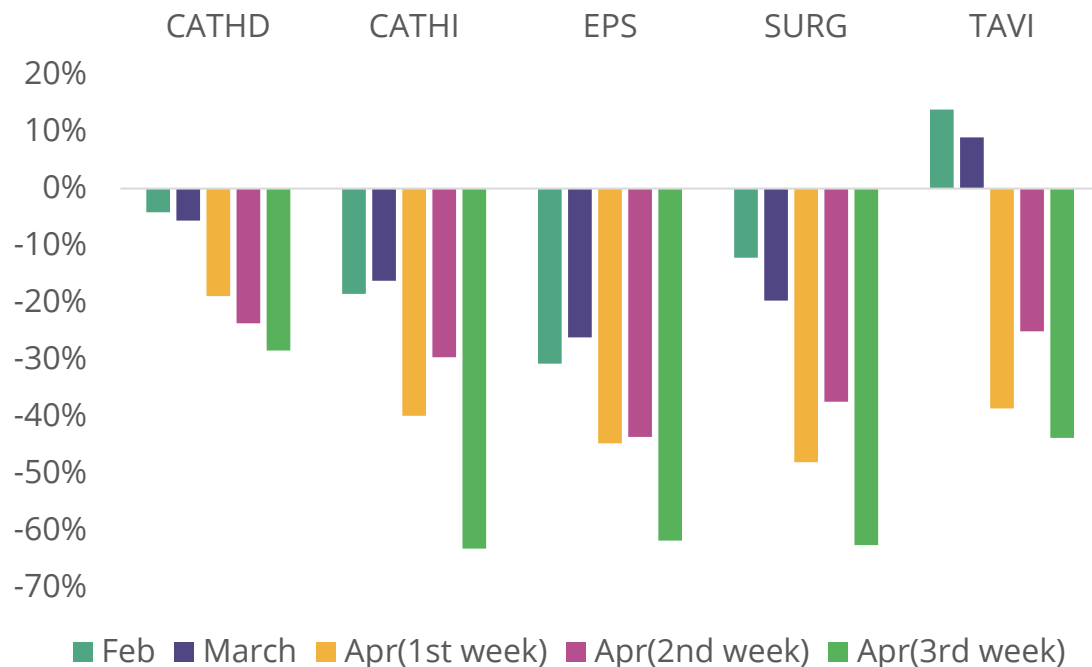
All region have ramped down their activities

Change in Regional Cardiac Volumes 3rd week of April 2021 compared to 2019

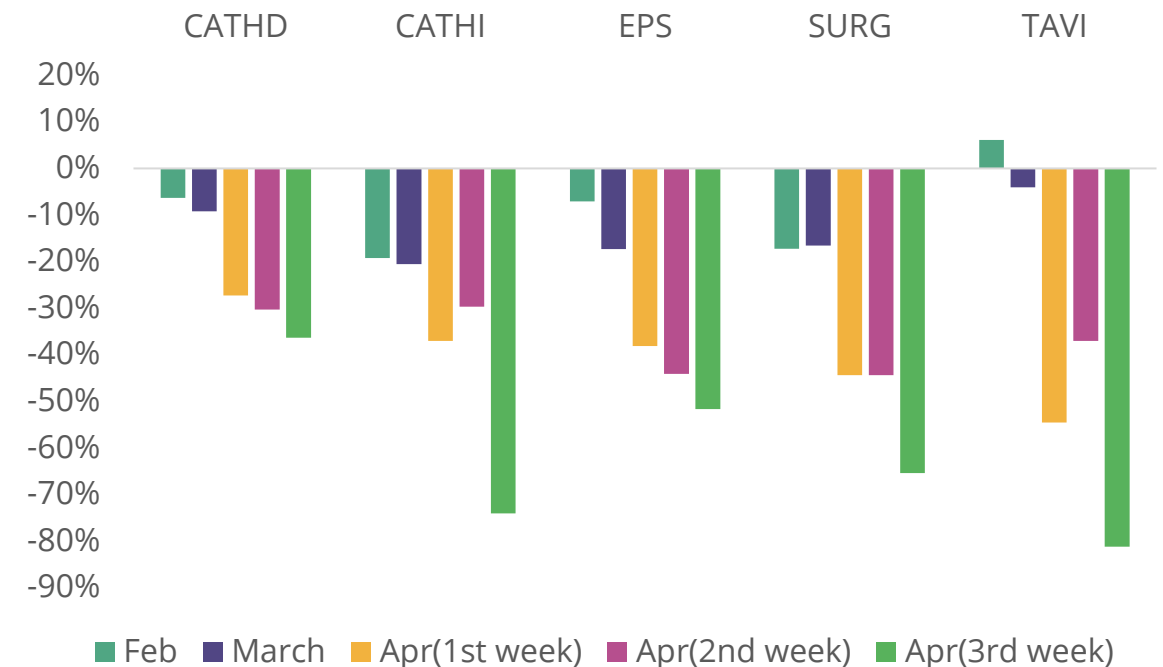


Change in Ontario Cardiac New Referrals 2021 Compared to Baseline

New Referrals (Wait 1 Wait List)



New Acceptances (Wait 2 Wait List)



The volume reduction in the most recent week is overestimated due to data entry lag

Baseline = 2020 for February; 2019 for March and April



Appendix: Brief from the Science Table

COVID-19 Science Table Brief

- Provides information for health care professionals about Vaccine-Induced Prothrombotic Immune Thrombocytopenia (VIPIT), a rare adverse event following the AstraZeneca COVID-19 vaccine.
 - <https://covid19-sciencetable.ca/sciencebrief/vaccine-induced-prothrombotic-immune-thrombocytopenia-vipit-following-astrazeneca-covid-19-vaccination/>

