

COVID-19 Cardiac Stakeholder Forum #11

MEETING SUMMARY NOTES

DATE: June 4, 2020 | 8:00 – 9:00 AM

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: More than 100 people joined the call with representation from CorHealth Cardiac Leadership Council, CorHealth Vascular and Stroke Leadership Chairs, Ministry of Health, Ontario Base Hospital-MAC, Ontario STEMI Network, Cardiac Medical Directors, Program Administrators, Cath Lab Medical Directors, EP Medical Directors, interventional cardiologists, and cardiac surgeons.

HIGHLIGHTS

CORE Cardiac Submodule: Recovery Scenarios (Dr. Harindra Wijesundera)

- Modelling of Recovery Scenarios were presented for: 120%, 140%, and 160% capacity, with 120% capacity being the most likely scenario possible
- The goal of recovery is to understand what it would take to get back to Status Quo for the cardiac system so far as procedures (i.e., there has always been a waitlist)
- Over the 10 weeks of the slow down, the build-up in the waitlist has been considerable;
- Time to clear backlog refers to the time 'to return to baseline waitlist' (assuming baseline efficiency, and baseline referral rate)
- At 120% capacity, the time to deal with backlog for CABG and Valve is approximately 11 and 12 weeks, respectively; For PCI it will take approximately >20 weeks; For some devices, complex ablation, and TAVI this it goes beyond the time horizon
- If at 140% capacity, Devices will start to be manageable, while complex ablation and TAVI still will not touch the incremental waitlist
- Overall, the new reality of this situation will mean that efficiency of care delivery will be lower, and 10-15% of capacity will be reserved for surge. The ability to deal with the backlog is not possible, and for some areas, the status quo is not tenable and requires a different approach

OPEN FORUM DISCUSSION

Echocardiography Backlog – Opportunity (Dr. Anthony Sanfilippo)

- Dr. Sanfilippo provided an overview of the Echo recommendations to be released regarding addressing the backlog and incorporating sustainable improvements
- Echo has a significant advantage in that much of it is provided in non-hospital based community labs, which are unconstrained by the 15% surge requirement
- Recommendations provide guidance on:
 - Resumption of activity:
 - Resumption should be coordinated with institutional directives, consistent with OH Task Force, and consistent with IPAC recommendations
 - Expansion of activity:
 - Asking facilities to collaborate between hospital and community, and to look at mechanisms whereby they can share their work and deliver more efficiently
 - Making critical and innovative recommendations about how the surge capacity can be handled (e.g., triaging based on categorizations, links to referring physicians to assess urgency of patients referred)

Key Questions & Discussion

- *How is your hospital responding to the amended Directive #2, and what are some of the key challenges that you face, and/or will continue to face, associated with COVID-19? What are some of the key opportunities?*
 - Recovery scenario modelling rings true from EP perspective; this will require a great deal of re-thinking in terms of ablation resources in the province.
 - The recovery data highlights the challenges with the volumes allotted to TAVI and ablation, and the inability to treat the waiting list prior to COVID. It is challenging to react without knowing volumes from the MOH, and without knowing how programs will be funded going forward.
 - The issue of mortality on the waitlist for CATH and cardiac surgery, was raised, as well as the difficulty of managing government restrictions. It was suggested CorHealth works to alert the MOH of the waitlist mortality data and implications for funding these procedures going forward.
 - William Osler raised the issue of nursing home patients occupying beds in acute care hospital wards; it was highlighted that in addition to COVID care, there must also be advocacy for non-COVID patients and their management

OTHER UPDATES AND NEXT STEPS

- This week's cardiac report was circulated to Forum members
- Next meeting of the group will be held Thursday, June 11, 2020, from 8:00 – 9:00 am
- If group members have any questions or comments, please email to Jana.Jeffrey@corhealthontario.ca, and they will be included for discussion at future meeting