Critical Care Strategy

Improving Access, Quality and System Integration

Monthly Update October 2006

Strategy Highlights:

Minister of Health Announces $ 7.5 M for Critical Care Beds to Help Ease ED Pressures
On October 27, the Honourable George Smitherman announced an Emergency Department Action Plan that will provide over $142 M in new funding to address the challenges faced by hospital emergency departments (EDs) in Ontario. A portion of this funding – $7.5 M – has been allocated to fund new critical care beds in hospitals where ED pressures are exacerbated by high critical care unit occupancy rates. Managing critically ill patients in the ED for extended periods of time drains ED physician, nursing and monitoring resources and can slow down the ED triage process. Ideally, critically ill patients move through the ED to the appropriate critical care unit, following initial ED/trauma care. Funding decisions will be made based on recommendations from the Critical Care LHIN Leaders, who will review hospital applications and consider the system-wide implications of these strategic capacity investments.

Minister of Health Announces Funding for 5 Additional Intensivist-Led CCRTs
The October 27th announcement also confirmed that 5 additional Ontario hospital sites will receive permanent funding to implement an intensivist-led CCRT, raising the total number of intensivist-led teams funded in Ontario to 27. The new sites are York Central Hospital (Richmond Hill), William Osler Health Centre – Peel Memorial Site, Royal Victoria Hospital (Barrie), Hotel Dieu Grace Hospital (Windsor) and Queensway Carleton Hospital (Ottawa). Queensway Carleton is continuing on from the original 4 site pilot project and is already providing 24/7 service. The other four sites will begin Phase I of the implementation process in January 2007.

Ontario's Critical Care Strategy Profiled at Toronto International Symposium on Acute Care
Ontario's Critical Care Strategy was successfully profiled to frontline critical care staff at the 2006 Toronto International Symposium on Acute Care. At the plenary symposium in honour of the late Dr. William Sibbald, Hugh MacLeod, ADM, Health System Accountability and Performance, MOHLTC, gave a stirring talk on the transformation underway in Ontario's acute care sector, drawing on examples from the Critical Care Strategy. At a session devoted to the Strategy itself, leaders from the field addressed a packed house on each component of the strategy. Two special meetings - one of CCRT participants and a second involving the Performance Improvement Coaching Teams – were very productive. In addition, two ministry-sponsored booths, profiling the overall Strategy and the Critical Care Information System, were very well attended.

Other Progress:

Application for CCRT Alternative Model Demonstration Project Closes
27 community hospitals applied to participate in the CCRT Alternate Model Demonstration Project. The purpose of this demonstration project is to test several CCRT models in smaller community hospitals. Unlike the intensivist-led teams funded in large hospitals, alternate model CCRTs will be supported by physicians but led by nurses or respiratory therapists. The goal of the project is to learn how CCRTs work in these smaller acute care centres by studying the patient outcomes associated with various funding levels, team composition, service coverage options, performance benchmarks and staff training. Selection and announcement of successful hospitals sites is scheduled for the end of November 2006.

Ontario

Critical Care Information System - Implementation Moves Forward with 14 Pilot Sites
Preparation for implementation of the CCIS in 14 lead sites across the province is well underway. The 14 lead sites are: University Health Network, Mount Sinai Hospital, London Health Sciences Centre, The Ottawa Hospital, Royal Victoria Hospital, Hotel Dieu Grace Hospital (Windsor), Windsor Regional Hospital, Sudbury Regional Hospital, Thunder Bay Regional Health Sciences Centre and Grand River Hospital. These sites offer a test-base of geographically disperse community and teaching hospitals having varied profiles regarding ICU capacity and utilization, integration of critical care and information technologies, and CCRT implementation. October site visits provided the CCIS team an opportunity to meet with, and extend support to the individuals within the hospitals who will be responsible for the implementation and utilization of the CCIS beginning late January 2007. Outcomes of this pilot will be used to inform the broader rollout of the CCIS to the remaining hospitals operating med/surg ICUs across the province. A Readiness Assessment Survey was disseminated in October 2006 to these remaining ICUs to identify their preparedness for CCIS implementation beginning in April 2007.

Performance Improvement Collaborative Wraps Up Site Visits
With the completion of site visits to 40 of 41 Ontario hospitals receiving Performance Improvement Coaching teams this 2006/07 fiscal year, teams are now beginning to focus on the second phase of their engagements with the ongoing support for implementation of the detailed action plans generated at hospital site visits. Individualized coaching team support and knowledge translation is carried out with participating hospitals via teleconference and Ontario's N.O.R.T.H. Network videoconferencing system on a monthly basis. Performance Improvement Coaches also had the opportunity to come together for a workshop here in Toronto (attended by Mr. Hugh MacLeod) on October 24 to continue planning for the next phase of their engagements and to discuss the evolution of the coaching team concept.

Sites Visited in October	Coaching Team
Rouge Valley Health System – Ajax Pickering Site	Intensivist Led Management Model
Rouge Valley Health System – Centenary Site	Intensivist Led Management Model
Northumberland Hills Hospital	Intensivist Led Management Model
Sudbury Regional Hospital	Intensivist Led Management Model
Royal Victoria Hospital – Barrie	Leadership & Teambuilding
Weeneebayko Hospital	Critical Care Service Appraisal
Kingston General Hospital	Patient Flow and Inter-unit Coordination

Key Targets for November 2006

- Inventory of Critical Care Services Report to be presented back to Ontario hospitals.
- Hospital allocations of the $7.5 M for new critical care beds to be announced.
- CCRT Alternate Model Demonstration Project decisions to be announced.
- Objective Structured Clinical Exam Developer application process closes November 13.

Provincial Tables

- Third meeting of the Critical Care LHIN Leaders to take place November 29

For more information, please contact:
Robert McKay
Manager, Critical Care Secretariat
Phone: (416) 550-0037
Email: Robert.McKay@moh.gov.on.ca

On the web: www.health.gov.on.ca/criticalcare

Ontario