

Critical Care Strategy

Improving Access, Quality and System Integration

Monthly Update November 2006

Strategy Highlights:

CritiCall Strategic Planning and Advisory Committee Established

Under the direction of Dr. Bernard Lawless, Provincial Lead, Critical Care and Trauma, the CritiCall Strategic Planning and Advisory Committee is being established to provide leadership, insight and strategic direction for the implementation and delivery of the CritiCall service. The Committee, Chaired by Tony Woolgar, CEO, South West Local Health Integration Network, and comprising senior Ministry, hospital and critical care clinicians, will meet frequently to guide the strategic and operational plans to support the evolving role and mandate of CritiCall, which includes transfer of responsibility for the Critical Care Information System to CritiCall in early 2007.

Critical Care Service Inventory

The Critical Care Services Inventory completed by hospitals, under the leadership of the Critical Care LHIN Leaders and Ontario hospitals, has now been compiled into a detailed report which is currently being reviewed by Ministry of Health and Long-Term Care senior managers. The Report provides information that will support the planning and implementation of the Critical Care Strategy initiatives. In addition, the Inventory highlights opportunities for improved information and data that will be addressed in large part, by the implementation of the Critical Care Information System.

Strategy Wins ACE Award

On November 27, 2006, Ontario's Critical Care Strategy, together with the Wait Time Strategy, received an ACE Award for Stakeholder/Partner Relations from the Ministry of Health and Long-Term Care. The Ace Award is presented to those individuals or groups whose achievements over the past year, stood out among the excellent work performed by Ministry staff across Ontario. The Critical Care Strategy and Wait Time Strategy received the award for their outstanding work in developing mobile coaching teams of experts to work with hospitals across the province to improve the flow of patients, eliminate inefficiencies and prioritize improvement initiatives.

Other Progress:

Ethical Issues of Access to Host Workshop

On January 31, 2007 the Critical Care Strategy is hosting a one-day workshop for health professionals on *Cultural and Religious Perspectives of Patient Care in the ICU*. The workshop will include a series of presentations and discussions on the cultural and religious beliefs regarding end-of-life practices, technology utilization and organ donation specific to patients in acute care settings that will support the research activities currently underway. For more information, or to register, please contact Nathalie.Danjoux@uhn.on.ca, 416-340-4800 Ext. 2764. Registration is free and lunch will be provided.

\$4.5 M Annual Critical Care Nurse Training Fund Applications

The application process for this year's Critical Care Nurse Training Fund provided an opportunity for hospitals to consider ways to improve the quality of their training programs for critical care nurses in light of the new provincial standards. Applications are currently being reviewed based on the eligibility and evaluation criteria included in the Application Guidelines (released September 28, 2006). Priority is being given to nurses newly hired to work in the critical care unit that was identified by each hospital as having the greatest need for financial support for critical care training. The response to the application process was overwhelming, with requests for over \$22M received from 85 hospitals. Hospitals will be informed about funding decisions later this year, pending Ministry approval.

CCRT Retreat Demonstrates System Collaboration at its Best

On October 24, fifty-four hospital representatives, representing hospitals across Ontario who have been funded to implement a CCRT in their organization, including members of the 22 already operational Critical Care Response Teams (CCRT), came together to attend an inspirational and interactive pre-'go live' retreat hosted by the Critical Care Secretariat. The retreat enabled CCRT sites that were part of the original demonstration project and currently provide the service 24/7, to share experiences, review outcomes and identify lessons learned in both the implementation and operation of the CCRTs with hospitals who were one week away from Phase II of their CCRT implementation. Phase II is a preceptorship for the team members during which the service is provided 40 hours per week. A Q and A session followed the presentations and exemplified the collaboration that has developed among this group through six months of regular discussion, and the sharing of documentation templates and other resources among the sites. Dr. Peter Smyth from the Counseling Institute and a member of the Leadership and Team Building Coaching Team spoke to the group about the Concepts of Change and the individual responses and interpersonal aspects of change.

Allocation of \$7.5M for New Critical Care Beds

Following the Minister's October announcement of \$7.5M for new critical care beds as part of the Ministry's broader Emergency Room strategy to ease pressure on emergency departments, the Critical Care LHIN Leader Committee met to review hospital applications for funding and to develop recommendations for the allocation of the new beds. Having just completed the province-wide Critical Care Service Inventory, this group was well informed on advising where some of the true pressures exist on a system wide level. Their recommendations are based on system level demands and have now gone forward to the Minister for consideration.

Coaching Teams Update

The MoHLTC Critical Care Coaching Teams have now completed their site visit schedule to all 40 participating hospitals and the site Action Plans are being finalized. The development of these plans is a collaborative effort between the site and the Coaching Team and will serve as a prioritized "improvement road map" for the units, including specific objectives, timelines and measurement indicators.

On October 24, the Coaching Team members came together for a half-day "check-in" meeting. This is the first time that Coaches have been able to meet and exchange information since their training workshop in the spring. The meeting was designed to give them the opportunity to share their experiences with the participating hospitals and to discuss barriers and enablers that they encountered and overcame in the process. Overall progress of the program and administrative information were also covered to reinforce the goals and objectives of the program.

For more information, please contact:

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