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May 30, 2003

Communiqué

The following updates are provided for your information and appropriate action:

To ensure that the health care system can respond effectively over the short term, the following measures are being implemented:

1. **Emergency Department activity**

Paramedics with patients exhibiting respiratory signs and symptoms will be directed to transport the patient to the closest open emergency department of a hospital with admitted suspect or probable SARS.

2. **Long Term Care (LTC) capacity**

Additional LTC capacity will be made available for individuals from GTA acute and non-acute care hospitals. Community care access centres will assist in expediting transfers.

3. **SARS assessment clinics**

Additional SARS assessment clinics will be. The following sites are under development:

- Lakeridge Health Corporation – Oshawa site
- Southlake Regional Health Centre – Newmarket

4. **Public service announcement**

The public has been asked to limit visits to emergency departments whenever possible. In addition, visitors are being asked to reconsider their visits to hospitalized patients.

5. Resource teams

A team of nursing, medical and administrative personnel will support each of The Scarborough Hospital – Scarborough General Division, the William Osler Health Centre – Etobicoke General site and the North York General Hospital to fulfill their role as an alliance lead hospital.

6. Hospital Activity

A directive regarding acute care hospital activity is being provided under separate cover. Complex continuing care, rehabilitation and mental health facilities are expected to maintain their levels of activity.

7. SARS Clinical Advisory Team

A Clinical Advisory Team has been struck to support the SARS response. A description is attached.

SARS Clinical Advisory Team

To support the objectives of Toronto's Interim Healthcare Alliance, the Ministry of Health and Long-Term Care has appointed a SARS Clinical Advisory Team with broad based skill sets, including general medicine, emergency medicine, critical care medicine, respirology, public health, infectious diseases etc.

The Clinical Advisory Team [CAT] operates with the authority of Hugh MacLeod, Assistant Deputy Minister, and will work with the Ministry's SARS Operations Centre, in a systems approach to:

- Identify operational clinical principles that will facilitate a systems response to both SARS and non-SARS clinical activity.
- Identify and distribute clinical information that will assist in both the planning for and operations of the interim Healthcare Alliance system.
- Determine and assist in achieving the clinical human resources needed by the Interim Alliance system to achieve its objectives.
- Identify support services that may assist the clinical teams in achieving their objectives.
- Provide co-ordination and direction where necessary for the distribution of the clinical response amongst the interim Alliance Hospitals and the cluster hospitals.
- Provide clinical advice on other matters that may develop, to all of the MoHLTC, the Interim Alliance Hospitals and other "grouping" hospitals supporting the response to SARS in conjunction with the Science Group.

Principles

Using a systems approach:

1. Provide the best care possible for any SARS patient.
2. Protect the critical tertiary care case volumes [cardiac, cancer, trauma, etc].
3. Monitor and ensure appropriate activity for other clinical needs of the health system.
4. Provide all necessary clinical support for the SARS Alliance Hospitals [additional health human resources and other]

Enabling Processes

- Reporting to Hugh MacLeod, Assistance Deputy Minister
- Receiving information from: Public Health [Elizabeth Rael; Bill Mindell]; Physician-Leaders from each of the 4 SARS Alliance hospitals; Chair, regional clusters; and others as required

- Activities:
 1. Make recommendations as needed based on analysis from information received.
 2. Organize and deploy Action Teams to meet the clinical situation as needed.
 3. Develop and advise on clinical human resources capacity and recruitment, as needed.
 4. Provide clinical direction to the cluster hospitals in the GTA while the present situation continues.

- Members:

Dr. Robert Hyland
Physician in Chief, St. Michael's Hospital

Dr. Charlie Chan
Chief of Respiratory Medicine, University Health Network, Sunnybrook,
Mount Sinai Hospital

Marg Ferguson-Pare
VP, Professional Affairs

Dr. Tom Stewart
Chief Critical Care, University Health Network, Mount Sinai Hospital

Dr. Bill Sibbald
Physician in Chief, Sunnybrook & Women's College

Mark Loeb
Hamilton General, Infectious Disease Specialist

Andy McCallum
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