



Interprovincial Partnerships: The Western Canadian Children's Heart Network

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WCCHN



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Acknowledgements

❖ Ministry of Health:

- ◆ British Columbia
- ◆ Alberta
- ◆ Saskatchewan
- ◆ Manitoba

❖ Western Canadian Children's Heart Network Partners:

- ◆ BC Children's Hospital
- ◆ Alberta Children's Hospital
- ◆ Winnipeg Children's Hospital
- ◆ Royal University Hospital
- ◆ Stollery Children's Hospital



Objectives

- ❖ Who is the WCCHN?
- ❖ Goals, Objectives and Accomplishments of the WCCHN to date.
- ❖ Discuss the Interprovincial Partnership that has been established amongst the WCCHN centres



Who is the WCCHN?

- ❖ Established in 2000
- ❖ Hired a full-time coordinator in 2002.
- ❖ Home office of the WCCHN: Capital Health (Edmonton)



Clinical Ops Committee:
Multi-centred clinician group.



Alberta Children's Hospital





Why was the WCCHN set up?

- ❖ Four of five centres had pediatric cardiac surgery programs (pre-2001)
- ❖ Limited numbers of patients requiring pediatric cardiac surgery.
- ❖ Need for all children to have access to optimal pediatric cardiac care in all centres.



Current Services Provided

- ❖ Pediatric Cardiac Surgery (2 centres)
- ❖ Pediatric Cardiac Transplant surgery (1)
- ❖ Pediatric Electrophysiological Services (3 centres)
- ❖ Pediatric Cardiac Catheterization (Diagnostic & Interventional): All centres.
- ❖ Follow-up care pediatric cardiology clinics:
 - ◆ On site services and partnership clinics
- ❖ Cardiac MR – 3 dedicated, 2 others shared.



Goals of the WCCHN

1. Share Clinical Results
2. Collaborate on Complex Cases
3. Education
4. Share Patient/Family Resources
5. Collaborate on Research
6. Share/Discuss Plans




1. Share Clinical Results

- ❖ Various databases in use at this time.

- ❖ Establishment of an Interprovincial Pediatric Cardiology Database.
 - ◆ Multi-centered Info System Teams
 - ◆ Multi-centred Privacy Officer Committee.

Information System



**Western Canadian
Children's Heart
Network**

Patient Information

Exit WCCHN

2. Collaborate on Complex Cases

- ❖ Multiple forums exist to do this.
 - ◆ Cardiac Surgical Conference hosted by the Stollery occurs every Tuesday for discussion of patients referred for surgery or general discussion of challenging patients to examine other options.
 - ◆ Surgical Discussions: Vancouver and Victoria (Mondays).
 - ◆ Pediatric Cardiac M & M rounds bi monthly.
 - ◆ Clinicians have been “practicing” at other centres
 - ◆ Transplant Clinic; Cardiac Cath, Electrophysiological studies
 - ◆ Surgeon collaboration.





Case Conferencing (Patients referred to the Stollery)



Every Tuesday Afternoon

Attendance:

- All WCCHN centres
pediatric cardiology staff,
pediatric cardiac surgeons.

- Review of Patient
History; Cardiac MRIs
Echocardiograms,, cardiac
catheterizations



Outcomes:

- ❖ Discussion with all members of the team related to next steps:
 - ◆ Surgery candidate.
 - ◆ Wait / Reassessment required.
- ❖ Patient prioritized for surgery.
- ❖ Patient placed onto the waiting list.



Improving Patient Flow:

- ❖ Patients are contacted with regards to the outcome of the discussion by:
 - ◆ Local cardiologist
 - ◆ Cardiac Surgery Coordinator

- ❖ Pre-Admission is booked day before surgery.



Afterwards:

- Patient updates provided to all centres at next conference.



Adult Congenital Care

- ❖ January 2006
- ❖ Frequency: bimonthly basis.
- ❖ Similar set up to pediatric case conference.

- ❖ Additional centres that provide care to adult congenital cardiac patients also participate
 - ◆ St. Paul's (Vancouver); Peter Lougheed Centre (Calgary); Regina General Hospital (Regina, SK).



3. Education

- ❖ Sharing of educational opportunities at the pediatric cardiology residency training programs (All centres participate in giving sessions).
- ❖ Allied health sessions to provide educational information related other areas of pediatric cardiology (unit practices, blood transfusions, etc.....).
- ❖ Telehealth
 - ◆ Main method of communication regarding patient care.



4. Share Patient/Family Resources

- ❖ Sharing of Family Resources for teaching.
- ❖ Clinical Practice Guidelines being reviewed/developed at the physician level.
- ❖ Echocardiography Protocols developed collaboratively.
- ❖ Multi-centred commitment to developing pediatric cardiac transplant resources for clinicians and families.



5. Collaborate on Research

- ❖ Nursing: Multi-centre Family Satisfaction Survey has been completed.
- ❖ Other initiatives being planned.



Quality Improvement: Focus on Access to Services

- ❖ Saskatoon: Additional partnership clinics to increase access to pediatric cardiology services in Southern SK.
- ❖ Edmonton: Murmur clinic
- ❖ Pre-Admission Clinic (Stollery): increased family awareness of process through development of a video which is sent out to families prior to their appointment.



6. Share/Discuss Plans

- ❖ Goal to maintain good communication amongst sites.



Building the Partnership

Standing Committees:

- ❖ Steering Committee
- ❖ Clinical Operations Committee
- ❖ Nursing Coordinators Committee
- ❖ Family Advisory Committee
- ❖ Adult CV Committee
- ❖ Allied Health Sessions
- ❖ Public Relations Committee

Database Focused:

- ❖ IT Steering Committee
- ❖ IT Integration Committee
- ❖ Privacy Officers

Ad hoc/Integrated with Other Committees:

- ❖ Website Committee
- ❖ Telehealth/AV Coordinators



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Questions ?



Thank You!

