

Date:

Memo November 16, 2020

Title: Creation of Regional Hospital Incident Management Systems

To: Ontario Hospitals

**From:** Matthew Anderson, President and CEO, Ontario Health

Hospitals across Ontario are facing increasing capacity challenges and mounting pressures due to the COVID-19 pandemic. In some parts of the province, these pressures have reached critical levels, and there is an urgent need to enable a solution that allows for hospital bed capacity to be viewed and managed at a system level.

In support of this objective, I immediately authorize the creation of regional Hospital IMS structures as a tool to be used in regions as needed to support the movement of patients and protect the integrity of the hospital system. Regional Hospital IMS structures will have the authority to move patients across hospitals as per an established IMS framework and under the leadership of an Incident Command Lead.

The regional Hospital IMS is a single regional decision-making body with the authority to:

- Monitor hospital critical capacity needs across the region in real time
- Respond in a timely manner, commensurate and relevant to the pace of capacity issues
- In response to established triggers, provide necessary executive direction and decision making to facilitate movement of patients, equipment, and supplies amongst hospitals based on need

The IMS authority to facilitate movement of patients applies to all acute and non-acute (e.g. rehabilitation, complex continuing care, etc.) beds in all hospitals that are part of the regional Hospital IMS structure. In some regions, this may be a new structure. In other regions, the regional hospital IMS structure would formalize authority for existing collaborative structures between hospitals. For example, in Northern Ontario, established mechanisms such as the OH North COVID-19 Regional Steering Committee will fulfill this function, until such time as the regional co-chairs determine that a different IMS structure is required.

The IMS structure is intended to be time-limited and will be in place until the immediate pressure or risk posed by the pandemic is declared over by the IMS structure. It will specifically address pressures in hospitals at critical capacity, where the ability to provide safe care to patients is at risk; it is not intended to address hospital capacity at a general level.

As we collectively battle the pandemic, we need to creatively look at solutions to challenging issues. Thank you for your ongoing commitment and collaboration.