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Canada West Health Leaders  
CONFERENCE

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#CWHLC2024



## Synergies in action: The power of collaboration

# Collaborative strategies for addressing healthcare systems surges

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CANADIAN COLLEGE OF  
HEALTH LEADERS



COLLÈGE CANADIEN DES  
LEADERS EN SANTÉ



## Commitment to Truth and Reconciliation



We acknowledge our historical role in colonialism, discrimination and harm done to Yukon First Nations and all Indigenous Peoples by governments, organizations and institutions, including our hospitals.

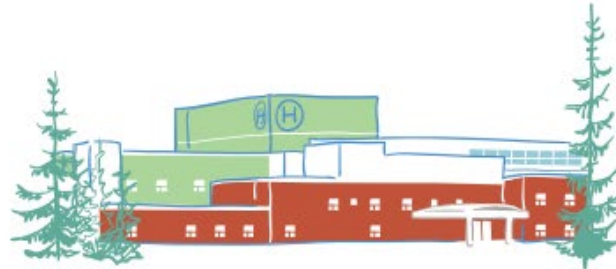
We understand that we have much work to do to address racism, advance reconciliation and build meaningful partnerships with Yukon First Nations. We recognize that everyone has the right to the best care every time, but that not everyone is able to safely access health care when they need it.

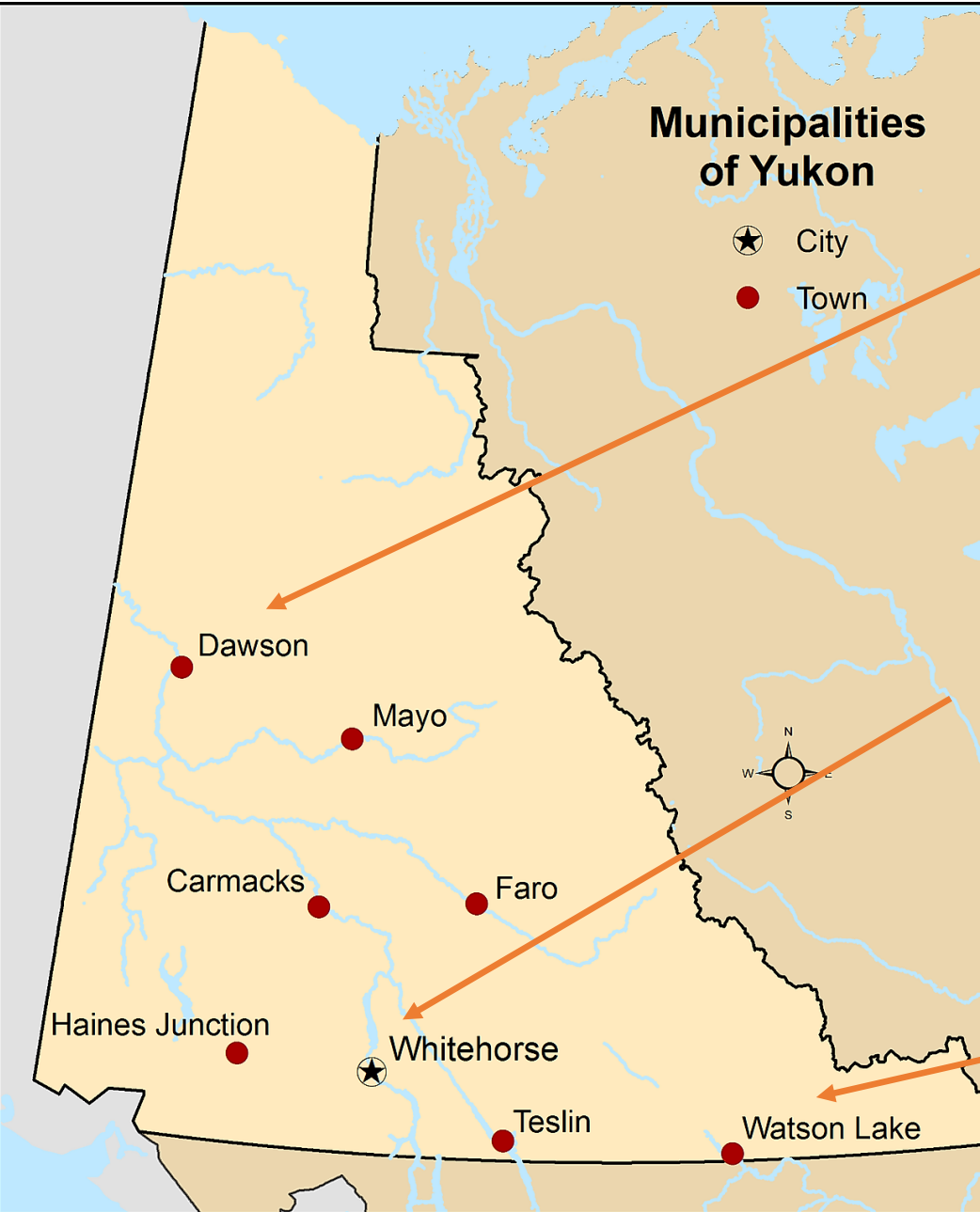
**Our intention is to be fair and just, remove barriers, and provide the right supports to deliver the best care every time to all Yukoners.**



# Outline

- Overview of hospital flow and overcapacity
- Overview of system level surge and surge planning
- Interactive activity
- Addressing root causes



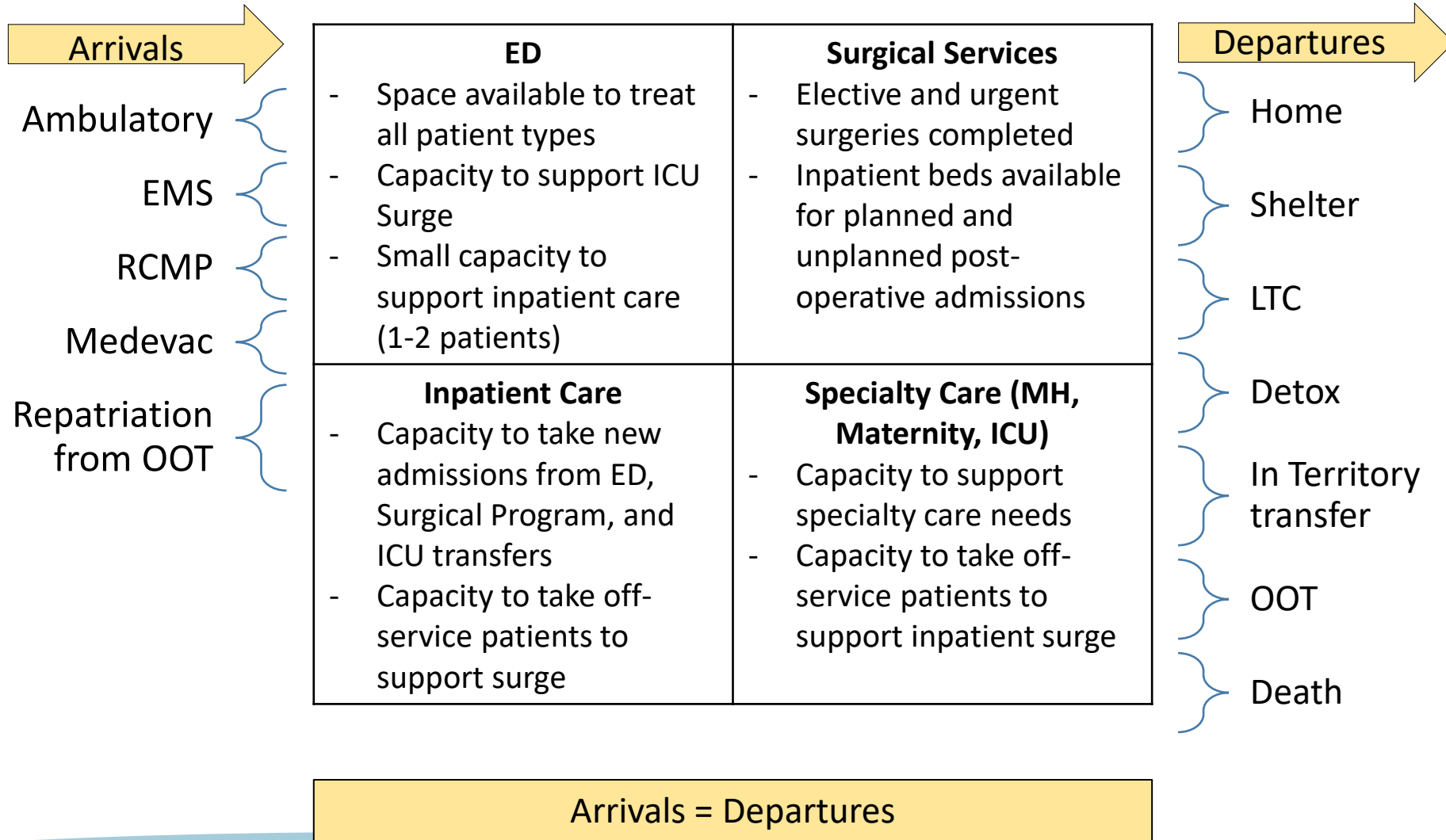


# Hospital Flow and Capacity

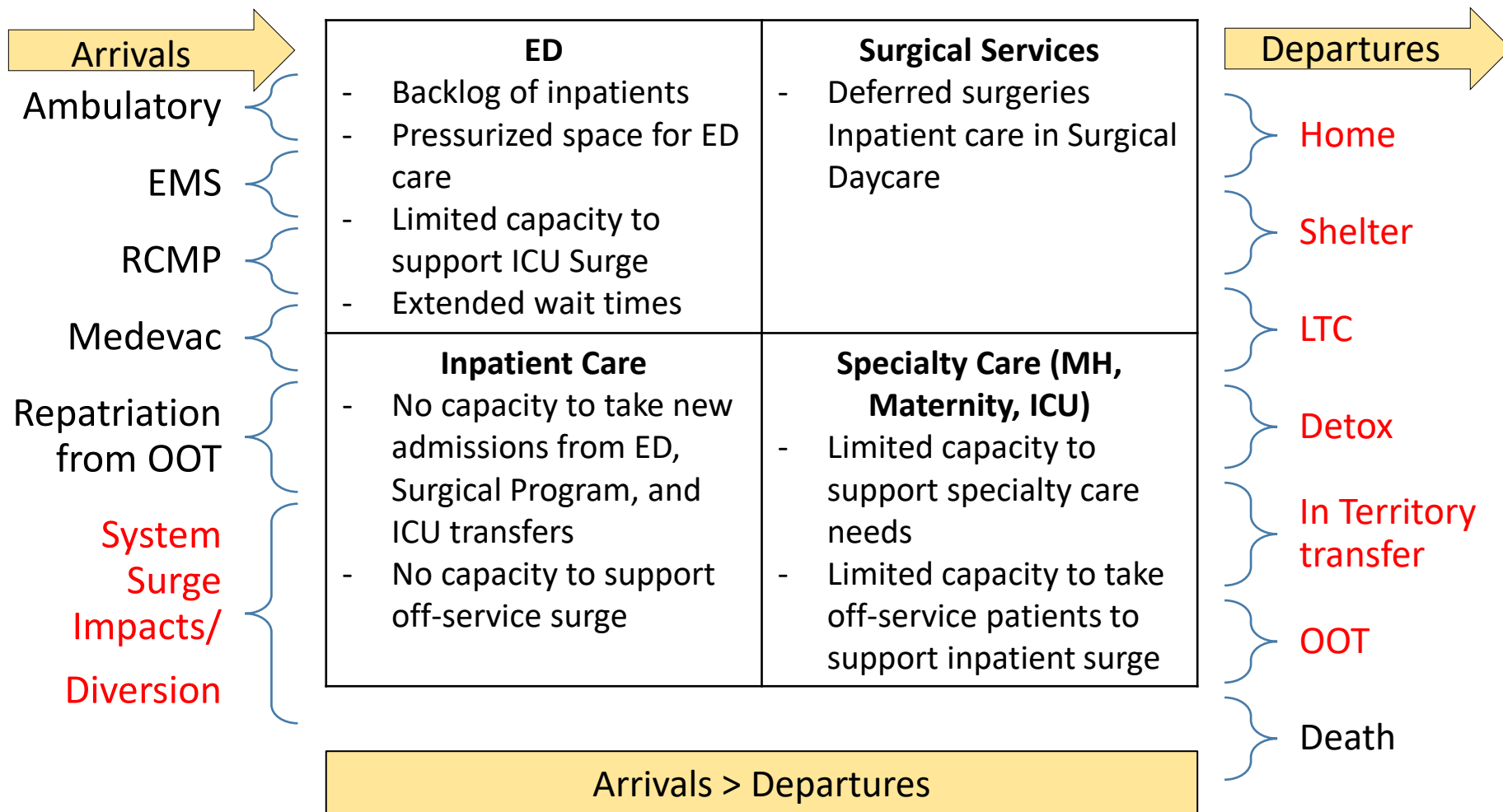


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# Hospital Flow – Ideal

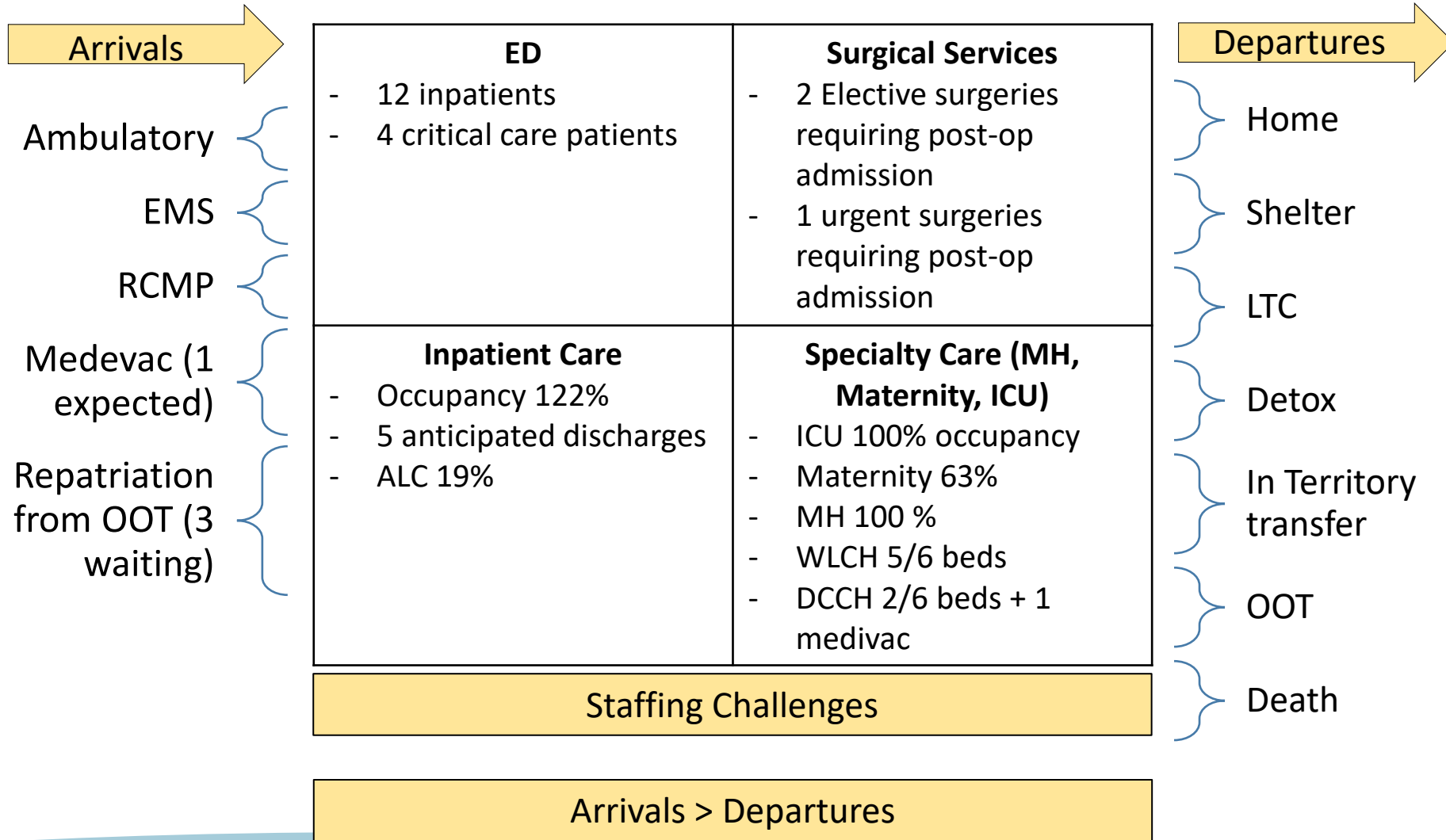


# Hospital Flow – Not ideal





# Case Study





# Impacts of Hospital Overcapacity

- Negative patient outcomes related to constant state of hospital overcapacity:
  - Deferral of surgeries
  - Lack of privacy and increased risk of healthcare associated infections due to inpatient care occurring in non-traditional spaces (e.g. SDC and ED)
- Strain on resources continues:
  - Healthcare workers may experience increased stress, fatigue, and burnout when faced with the demands of a surge in patient volume
  - Long hours, emotional strain, and high patient loads can contribute to decreased morale and job satisfaction among healthcare staff, impacting the quality of care they are able to provide
- System and community impact:
  - Health system surges disrupt normal routines and can have broader impacts on system partners and the community as a whole. The end risk is negatively affecting public trust in the healthcare system

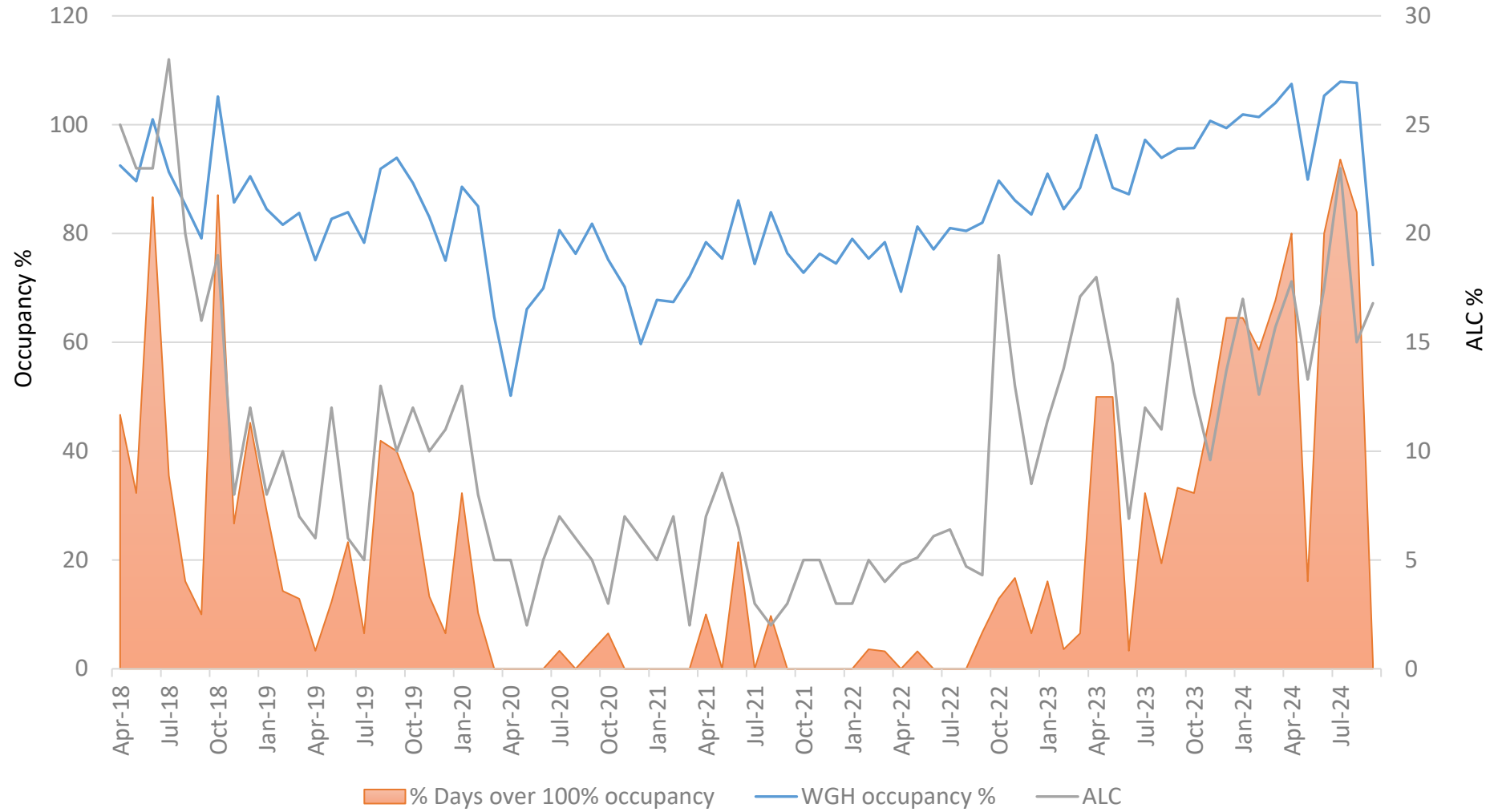
# Monitoring Access, Flow, and Overcapacity

Metric	Description	2021/22	2022/23	2023/24	2024/25 Q2 YTD	Trend
Average Daily Patient Census	Overall demand for inpatient hospital care	48	50	57	64	Increasing
Average Daily Admission	Number of new inpatient admissions per day on average	10.2	10.6	10.8	11.8	Increasing
% ALC Patients – WGH	% of patients who could be supported in a different model of care	8.2%	9.5%	13.3%	16.5%	Increasing
Surgeries deferred, day of surgery, due to hospital capacity	Impact of overcapacity on the surgical program and patient impact	0	18	14	14	Increasing
Re-admission Rate	Balancing metric monitored to ensure we are not discharging patients too soon	9.9%	9.0%	11.0%	10.2%	Increasing
ED Visits Best Managed Elsewhere	Monitor the % of ED visits that could be managed in another care model	6.7%	8.5%	8.5%	-	Increasing

Pressures are rising across Yukon Hospitals

# WGH Occupancy

April 2018- September 2024



# System Level Surge Response/ Planning



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# Problem - Health System Surge

- Multiple areas of the health system are in surge on a regular basis
  - For most areas of the health system the surge plan involves diversion to Yukon Hospitals
  - This creates added pressure on the acute care system and requires capacity within acute care to support
- Health system surge is managed on an ad hoc basis including communication and resource coordination
- Health system surge is occurring more frequently which suggests actions need to be taken to increase baseline capacity
  - Number of near miss events have occurred

# Health System Surge

- There are three distinct types of health care surge
- It is possible that an organization or the system could experience all of these types of surge at once

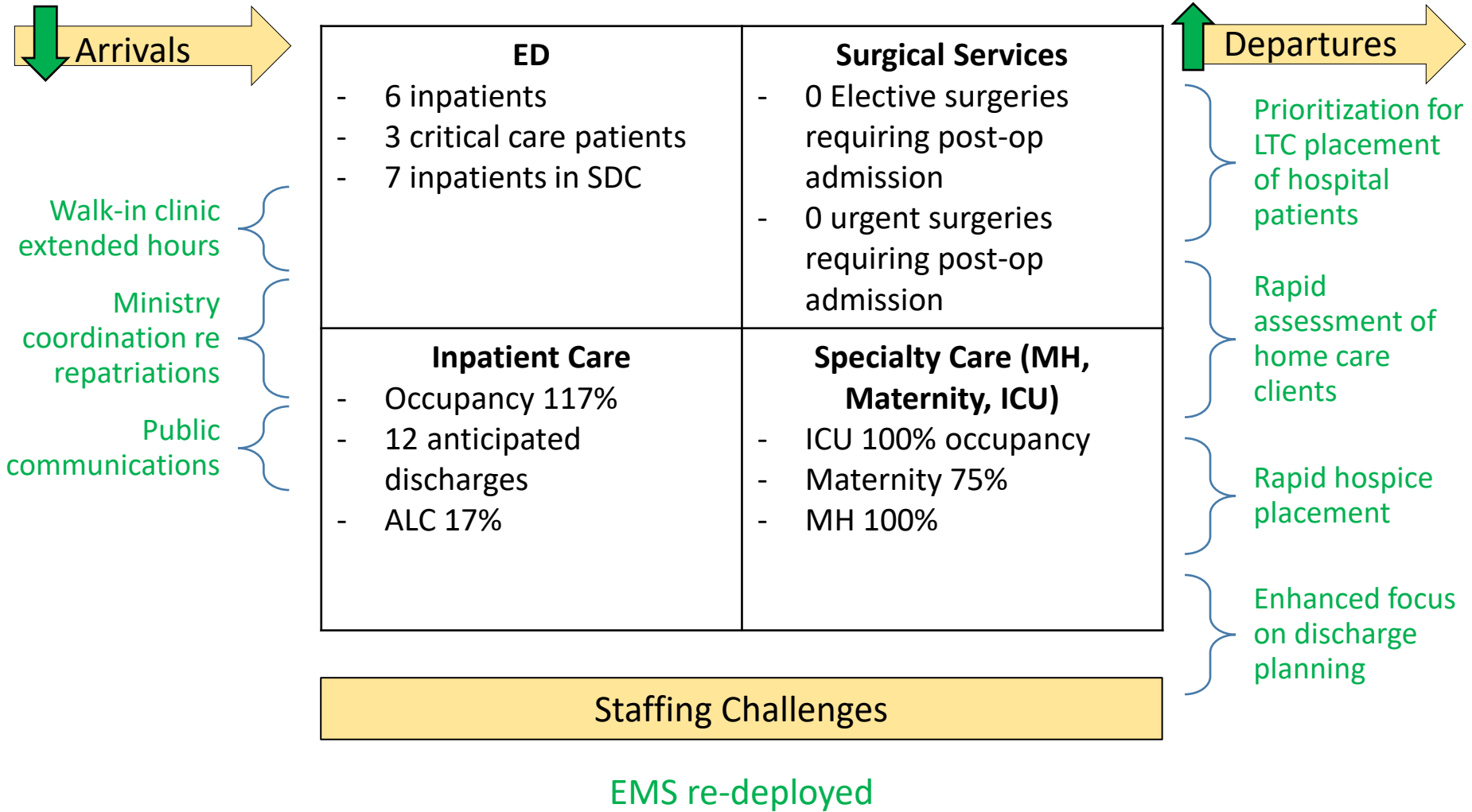
Type	Cause
Volume	When the number of individuals seeking/requiring care overwhelms baseline resources
Acuity	When the number of individuals seeking/requiring care have higher acuity needs, overwhelming baseline resources
Resources	When resources required to support baseline needs are insufficient to meet demand. Includes: staff, physicians, medical supplies, equipment, pharmaceuticals, beds, etc

# Activity

- We will divide you into :
  - Emergency Department
  - Surgery
  - Inpatient Care
  - Continuing Care
  - EMS
  - Other System Partners
- In your groups consider the case study scenario and prepare your strategy for the Gridlock Meeting
  - Additional context will be provided to your group
- Choose one member from your group to be your representative at the Gridlock Meeting
- The outcome of the Gridlock Meeting is to define a plan of action
- Group debrief/discussion



# Case Study cont'd



# Health System Surge Management - Short Term

- Develop a health system surge plan which includes reallocation of resources across the system
- Address short and long term bed capacity
- Build communication plan
- Build supportive policies and procedures
- Transitions and Flow

# Health System Surge Management - Medium/Long Term

- Coordinated systems level planning approach
- Establish system level metrics and targets for patient flow
- Advance system integration
- Increase comfort with risk
- Increase access to primary care
- Coordinated approach to discharge and care planning
- Continue to advance home first initiatives

# Summary

- Yukon Hospitals are routinely experiencing overcapacity
- Other health services in the Yukon are experiencing similar challenges with rising demand for services and limited resources
- Development of a health system surge plan is underway to ensure that resources are coordinated across the system
- Most health service surge plans involve diversion to Yukon Hospitals
- A key component to the success of system level surge plans is hospital capacity
- Plans have been developed for how hospital capacity could be increased, using a phased approach, over the next 12 months

Thank you Merci Gwänaschis Másı Gùnètchîsh  
Másı Sógá sénlá Gunalchîsh Mähsi' Mähsi' Tsin'ij