



Guidance Document for New or Expanding Designated Vascular Programs

February 2024



Ontario Health
CorHealth Ontario

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Overview and Purpose

The purpose of this document is to provide the required guidance for a hospital to submit a proposal for a new or expanding designated vascular program in the province of Ontario. To achieve and maintain designation as a Level 1, 2, or 3 vascular program, an Ontario hospital must fulfill all the requirements associated with the desired Level.

Prior to completing the proposal, the hospital should review the [Ontario Designated Vascular Program Standards \(Program Standards\)](#). The *Program Standards* support standardized and timely access to vascular care for patients across Ontario, including life and limb saving care, and create designated vascular program accountability to Ontario Health – CorHealth Ontario and the Ontario health care system. The *Program Standards* lay the foundation for continuous quality improvement to achieve positive patient outcomes.

All proposals must be reviewed and endorsed by the required health system partners as outlined in the [Process Map for New/Expanding Designated Vascular Programs](#). All proposals must also include a signed *Acknowledgement Letter* to confirm hospital Chief Executive Officer (CEO), or designate, endorsement of the proposal for a new or expanding designated vascular program (Appendix).

Date: Click or tap here to enter text.

Proposal for: ☐ New Program ☐ Expanding Program

Name of Hospital: Click or tap here to enter text.

Ontario Health Region: Click or tap here to enter text.

Name and contact information of person completing this proposal:

Click or tap here to enter text.

Criteria

The following criteria will support hospitals with proposal submission. All criteria must be addressed within the proposal.

Criterion 1 – Vascular Program Designation Level

Each designated vascular program must coordinate and deliver the full continuum of vascular care services to patients including diagnosis, treatment, surgical intervention, rehabilitation, and disease management. The Program Standards define Level 1, 2, and 3 designated vascular programs and outline the roles and responsibilities, annual volumes, and infrastructure requirements for each Level. Each Level builds on a baseline of vascular care services (Level 3), and increases in the complexity of vascular care provided, where a Level 1 program provides the most comprehensive and complex array of vascular care.

Check the appropriate box below to indicate the Level of designated vascular program being proposed. Refer to the *Program Standards* for additional detail regarding each Level.

☐ Level 3

A Level 3 vascular program provides the full continuum of vascular care including a baseline of vascular interventions that include open surgical repair of abdominal aortic aneurysms (AAAs), carotid endarterectomy (CEA), and lower extremity revascularization (LER) by either open surgical and/or endovascular approach. Care is provided by a core specialized vascular care team, including both vascular surgery and interventional radiology, with expertise and demonstrated competence in the care of vascular patients. The team is available for vascular emergency call services 24 hours a day, 7 days a week to ensure patients with urgent/emergent vascular care needs receive timely access.

☐ Level 2

Building on the requirements of a Level 3 program, a Level 2 vascular program provides increasingly complex procedures including endovascular aneurysm repair (EVAR). The program has a dedicated inpatient unit for the care of vascular patients and should have a specialized advanced practice clinician (e.g., vascular nurse practitioner/physician assistant) on the care team. Some Level 2 programs may provide fenestrated EVAR procedures for juxtarenal abdominal aortic aneurysms (AAA) and must meet a minimum annual volume to provide this service. Some Level 2 programs may also provide thoracic EVAR (TEVAR) procedures and must have the ability to provide appropriate cerebrospinal fluid drainage, as necessary.

☐ Level 1

Building on the requirements of a Level 2 vascular program, a Level 1 vascular program provides comprehensive management of complex aortic disease involving the thoracoabdominal aorta and aortic arch in collaboration with a cardiac surgery program. Level 1 programs can provide the full spectrum of open surgical and endovascular interventions for all levels of aortic intervention.

Criterion 2 – Rationale

Describe a clear rationale for the need to expand the role of the hospital to deliver the specified Level of vascular care being proposed, including evidence of care/service gap(s) that cannot be met by existing regional vascular services or through formal partnerships with other regional designated vascular programs, including sufficient patient population to generate service volumes while ensuring clinical expertise.

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Criterion 3 – Provision of Patient Care and Services

Describe the proposed care/service delivery model, including procedures and anticipated volumes, to meet the requirements that align with the proposed designation as a Level 1, 2, or 3 vascular program as outlined in the Program Standards including:

1. Roles and responsibilities;
2. Annual volumes; and
3. Infrastructure.

Describe potential barriers that may impact the development or expansion of vascular care services to the proposed Level. Barriers should:

- Be well-defined and reflect the extent of program planning;
- Be analyzed in terms of risk to implementation and program growth (e.g., low, moderate, high); and
- Include mitigation solutions.

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Criterion 4 – Impact

Describe potential impacts on patient referral patterns and volumes at current designated vascular programs within and across the applicable Ontario Health Regions. Include evidence that existing designated vascular programs will be able to retain volumes sufficient to maintain the integrity of their programs despite the redistribution of patient cases that may occur with this proposed new/expanded vascular program.

Describe potential impacts on internal hospital resources and/or programs (e.g., critical care beds, diagnostic services, health human resources), and supporting evidence that internal capacity and resources are sufficient to meet anticipated utilization and demand.

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Criterion 5 – Consultation

Describe the engagement and/or consultation, in support of this proposal, with clinical experts or other relevant leaders in the hospital, community, and vascular health care system including, but not limited to:

1. Hospital administrative leadership;
2. Hospital medical leadership;
3. Vascular program administrators/medical directors at other designated vascular programs within the Ontario Health Region; and
4. Ontario Health Region leadership.

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Criterion 6 – Care Coordination

The *Program Standards* align with and support the concept of integrated regional care by ensuring designated vascular programs have a regional approach to provision of vascular care services in collaboration with their Ontario Health Region. Designated vascular programs are expected to coordinate and integrate vascular care services within their hospital and with community partners. Designated vascular programs are also encouraged to collaborate with other designated vascular programs within and across Ontario Health Regions to help inform and develop standardized approaches (where applicable) to ensure that all Ontarians have equitable access to vascular care services.

Describe the proposed plan to coordinate and integrate vascular care services within the hospital and with community and regional partners to meet patient needs. Include a description of the patient population catchment area that the vascular program will support.

Click or tap here to enter text.

Criterion 7 – Patient Outcomes and Quality Improvement

For hospitals proposing to develop a new designated vascular program, describe the proposed plan to measure, monitor, and evaluate vascular program performance through a continuous quality improvement program that incorporates:

- A regular review of mortality and morbidity, including avoidable amputations;

- Regular patient case conference rounds to discuss challenging, complex, or rare cases that may benefit from interprofessional team input; and
- Participation in a quality database such as the Ontario collaborative of the National Surgical Quality Improvement Program (NSQIP-ON) and Ontario Surgical Quality Improvement Network (ON-SQIN) or the Canadian Vascular Quality Initiative (CVQI). Participation in a quality database is not required but is strongly recommended.

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Criterion 8 – Capital and Operational Budget

Describe all proposed capital and operational investments (if applicable) including the projected costs of:

1. Renovations;
2. Expansion;
3. Equipment;
4. Information technology investments;
5. Decanting/moving costs;
6. Ancillary costs as defined in the Capital Planning Manual;
7. Human resources and education/training costs; and
8. Ongoing operational (base) costs.

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Criterion 9 – Implementation Plan

Describe the proposed implementation plan for development or expansion of vascular care services including:

1. High-level milestones (including activities); and
2. Anticipated timelines in months (e.g., first activity starting at date zero and the last activity when the proposed service is operational).

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Appendix – Acknowledgement Letter

New/Expanding Designated Vascular Program Proposal Acknowledgement Letter

This Acknowledgement Letter is to confirm hospital Chief Executive Officer (CEO), or designate, endorsement of this proposal for a new or expanding designated vascular program.

Upon review of the *Ontario Designated Vascular Program Standards* with clinical and administrative vascular leaders at the hospital, I hereby acknowledge that the vascular program meets the requirements that align with the proposed designation as a Level 1, 2, or 3 vascular program. The hospital is committed to designated vascular program accountability to Ontario Health – CorHealth Ontario and the Ontario health care system, and to providing the necessary resources to develop a new or expanded program and to maintain ongoing operational requirements. I acknowledge the hospital is committed to supporting the vascular program by ensuring a strong focus on continuous quality improvement to achieve positive patient outcomes.

Date: Click or tap here to enter text.

Name of Hospital: Click or tap here to enter text.

Proposed Designated Vascular Program Level: Click or tap here to enter text.

Name of Hospital CEO or designate: Click or tap here to enter text.

Signature: Click or tap here to enter text.