

Abstract

Development and Implementation of Ontario Critical Care Clinical Practice Rounds

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Abstract

Background: The COVID-19 pandemic brought unprecedented challenges to health care systems across the world. Health care professionals were burdened with time constraints as they balanced care for a large number of patients while managing crippling resource shortages. In the pandemic's early stages, it was challenging for health care providers to provide evidence-based therapies due to the novel nature of COVID-19. There were also pressures to adopt unproven, yet highly touted treatments based on media reports and social media postings. These challenges were identified by Critical Care Services Ontario (CCSO), a provincial health organization that ensures the integration of the critical care system in Ontario, Canada. Since traditional methods of knowledge translation were inaccessible during the pandemic, CCSO created a webinar series titled Ontario Critical Care Clinical Practice Rounds (OC3PR) to share evidence-based practices with critical care professionals.

Objective: We sought to develop and implement a webinar series to connect critical care professionals with the best available evidence and clinical expertise during the COVID-19 pandemic. We were also interested in gathering attendee perceptions of OC3PR as an educational tool.

Methods: CCSO collaborated with 5 regional critical care leaders in Ontario to develop and implement OC3PR. This committee identified presentation topics based on perceived urgency and demand and selected presenters with expertise on their respective discussion topic. To promote accessibility, OC3PR was facilitated on the Zoom platform, live simulcasted on Youtube, and subsequently posted on Youtube for asynchronous viewing. Attendees also had the opportunity to share inquiries in live questions-and-answers sessions facilitated by the presenters. Finally, to gather the perceptions of and experiences with OC3PR, we invited attendees to partake in a web-based questionnaire at the end of each session.

Results: In total, 19 webinars were presented from November 26, 2020, to December 2, 2021, with 1481 registered unique attendees from within Canada and internationally and 17,533 Youtube visits. OC3PR presentation topics centered on resource rationing, patient therapies, staffing challenges, infection control, and vaccination. In addition, 22 follow-up questionnaires yielded 408 responses from attendees, which were composed of physicians (32%), registered nurses (15%), and other health care professionals. Our survey results suggest that OC3PR is beneficial to professionals as the majority of the respondents strongly agreed that it was of acceptable quality, enhanced their knowledge, relevant to their practice, and allotted appropriate timing for interactive components. Most (98%) respondents also reported that they would attend another OC3PR session.

Conclusions: The success of OC3PR as an accessible educational tool made it evident to CCSO that it would continue this forum in a postpandemic context. Although the webinar series was created for critical care professionals, it can be adapted by other health organizations to improve the integration of their health networks and enhance the support they provide for their workers.

Conflicts of Interest: None declared.

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KEYWORDS

webinar series; COVID-19; critical care support; health care best practices; critical care integration; teaching and learning; education; knowledge translation

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