

Partnerships with Gastrointestinal Endoscopy Quality-Based Procedure Hospitals for Backlog Recovery

Proposal for Temporary Non-Health System Funding Reform (HSFR) Hospitals and/or Out-of-Hospital Premises (OHP) Partnership

Introduction

Ontario Health (Cancer Care Ontario) maintains agreements with hospitals participating in the Gastrointestinal (GI) Endoscopy Quality-Based Procedure (QBP) to provide quality GI endoscopy procedures in Ontario.

In response to the COVID-19 pandemic and Chief Medical Officer of Health's Directive #2 for healthcare providers¹, non-essential services, including cancer screening and associated diagnostic services, such as colorectal cancer screening and GI endoscopy, ramped down to preserve hospital capacity for patients with COVID-19. To help address the backlog of GI endoscopy procedures resulting from restrictions in the healthcare system while also supporting the completion of allocated volumes, temporary (time-bound) partnerships between HSFR hospitals, known as the 'QBP partner hospital'², and non-HSFR hospitals and/or OHPs, known as the 'satellite site', will be considered. Such partnerships would result from an agreement between Ontario Health (Cancer Care Ontario) and the QBP partner hospital whereby the QBP partner hospital would transfer funding to the satellite site for the completion of an agreed upon volume of procedures. This temporary partnership is intended for fiscal year 2020/21 and/or 2021/22, however, it may extend beyond this timeline depending on the impacts due to the COVID-19 pandemic.

Completion of this template is required for Ontario Health (Cancer Care Ontario) to consider a potential partnership between an existing QBP hospital and satellite site for the purpose of collaboratively providing GI endoscopy services for backlog recovery.

¹ http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/RHPA_professionals.pdf

² HSFR (QBP) hospital is defined by the Ministry as a hospital with greater than 2,700 acute and day surgery cases for any two of the prior three years

Note: *The purpose of this proposal is to help address the backlog of GI endoscopy procedures resulting from restrictions in the healthcare system due COVID-19. QBP partner hospitals looking to establish a longer-term partnership with a non-HSFR hospital(s) for the purposes of improving access to care, reducing wait-times and improving GI Endoscopy QBP system efficiencies (i.e., not related to backlog recovery) should contact the Screening Inbox (cancerscreening@ontariohealth.ca) for more information on this process.*

Guiding Principles for Partnerships

Partnership proposals will be assessed based on alignment to the following guiding principles. The proposed partnership:

- Responds to an inability for the QBP hospital to fulfill its expected fiscal year 2020/21 and/or 2021/22 allocation
- Aligns with a region's overall approach to delivery of endoscopy services
- Promotes the conversion of low-yield (e.g., average risk colonoscopy, persons with a history of low risk adenomas) to high-yield (e.g., symptomatic, FIT-positive) endoscopy
- Includes a commitment to managing referral patterns and monitoring volumes at each partner facility
- Prioritizes patient access to high quality and timely care
- Promotes optimization of endoscopy utilization at both sites

Instructions

1. Please complete the partnership template and include any relevant supporting documentation. A complete proposal is required for Ontario Health (Cancer Care Ontario) to review and process.
2. Please review the GI endoscopy hospital partnership requirements outlined in [Appendix A](#) prior to completing this template.
3. Please ensure that the partnership is aligned with regional goals and gather the necessary approval signatures from the Regional Cancer Program (RCP), including your Regional Colorectal Screening/GI Endoscopy Lead (RCSGIEL), to support this partnership. If you are unaware of contacts at your RCP, please contact the Screening Inbox (cancerscreening@ontariohealth.ca).
4. Please submit the completed template and any supporting documentation to the Regional Vice President (RVP) at your RCP. Your RCP will submit your completed template to Ontario Health (Cancer Care Ontario). **Note:** *Once the proposal has been received from the RCP, Ontario Health (Cancer Care Ontario) will follow up regarding a decision on this partnership. Ontario Health (Cancer Care Ontario) may need to contact the applicants for clarifications or further information upon review of this proposal.*

Proposal

Please complete all the following sections of the template. If you have any questions related to the information being requested, please contact the Screening Inbox (cancerscreening@ontariohealth.ca).



IMPORTANT: All sections are mandatory

Request Details

It is important that Ontario Health (Cancer Care Ontario) has up-to-date and accurate information about the QBP partner hospital and the satellite site in order to support you through the proposal. Please complete this section in its entirety.

General Information	
The RCP (including Regional Vice President (RVP) and RCSGIEL) supports the proposed partnership	<input type="checkbox"/> Yes <input type="checkbox"/> No
The QBP partner hospital and the proposed satellite site have completed the 2020 Colonoscopy Quality Facility Survey	<input type="checkbox"/> Yes – The QBP partner hospital and satellite site have both completed the survey <input type="checkbox"/> No – The QBP partner hospital and/or satellite site has/have not completed the survey. However, the facilities are willing to provide this information as part of this proposal. Contact the Screening Inbox (cancerscreening@ontariohealth.ca) for any questions or to obtain a copy of the 2020 Colonoscopy Quality Facility Survey <i>Note: Ontario Health (Cancer Care Ontario) will follow up for additional details, as required.</i>
(If applicable) The proposed OHP has received a pass from the College of Physicians and Surgeons of Ontario (CPSO) Out-of-Hospital Premises Inspection Program (OHPIP).	<input type="checkbox"/> Yes <input type="checkbox"/> No

QBP Partner Hospital Information	
Legal QBP Hospital Name:	Click here to enter text.

QBP Partner Hospital Information			
Primary Contact's Name:	Click here to enter text.	Secondary Contact's Name:	Click here to enter text.
Primary Contact's Phone Number:	Click here to enter text.	Secondary Contact's Phone Number:	Click here to enter text.
Primary Contact's E-mail Address:	Click here to enter text.	Secondary Contact's E-mail Address:	Click here to enter text.
RCP Name:	Click here to enter text.		

Satellite Site Information			
Legal Non-HSFR Hospital or OHP Name:	Click here to enter text.		
Primary Contact's Name:	Click here to enter text.	Secondary Contact's Name:	Click here to enter text.
Primary Contact's Phone Number:	Click here to enter text.	Secondary Contact's Phone Number:	Click here to enter text.
Primary Contact's E-mail Address:	Click here to enter text.	Secondary Contact's E-mail Address:	Click here to enter text.
RCP Name:	Click here to enter text.		

Business Case

Please complete this business case section in its entirety. This template should be completed in consultation with your RCP, including the Regional Colorectal Screening / GI Endoscopy Lead.

Table 1: Business Case Details
Request and Rationale: Outline the goals and objectives of this request and how it aligns with the guiding principles (refer to section “Guiding Principles for Partnerships”).
Click here to enter text.
Current State: Describe the challenges and limiting factors the QBP hospital and/or region(s) is currently facing as it relates to the delivery of endoscopy services. Provide details, including existing volumes and projected volumes as well as the QBP hospital’s estimated GI endoscopy backlog.
Click here to enter text.
Partnership Objectives (1): a) Describe how the proposed partnership will address the current state challenges described above, and what monitoring will be put in place to ensure the objectives of decreasing the GI endoscopy backlog are achieved. b) If the partnership is established, what potential challenges might be faced?
Click here to enter text.
Partnership Objectives (2): a) Describe the processes that are planned to ensure appropriate prioritization and referral patterns between the QBP hospital and the satellite sites (e.g., based on case complexity and patient access considerations), including patient flow between sites. b) Describe the strategies that will be used to promote the conversion of low-yield (e.g., average risk colonoscopy, persons with a history of low risk adenomas) to high-yield endoscopy.
Click here to enter text.

Table 1: Business Case Details

Risks and Issues:

- a) What potential risks and issues might occur if the partnership is established? Please share any mitigation plans.
- b) Describe the level of engagement of endoscopists at the QBP hospital in the proposal development and demonstrate that equitable access to endoscopy time has been considered.
- c) Will any of the QBP hospital endoscopists be at risk of not meeting minimal colonoscopy volumes as a result of the partnership agreement?

Click here to enter text.

Volume Summary (1):

Identify proposed volumes, by procedure type and indication, to be transferred from the QBP partner hospital to the satellite site to address the backlog. **Note: Please use one table per satellite site. Add additional tables, as required.**

Procedure	Indications										
	Symptomatic		FIT-positive		Surveillance		First degree relative		TOTAL		
	Min	Max	Min	Max	Min	Max	Min	Max	Min	Max	
Colonoscopy	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Gastroscopy	Click here to enter text.	Click here to enter text.							Click here to enter text.	Click here to enter text.	
Dual colonoscopy + gastroscopy	Click here to enter text.	Click here to enter text.							Click here to enter text.	Click here to enter text.	

Volume Summary (2):

Indicate the number of endoscopists practicing at the satellite site, and provide information about colonoscopy volumes performed in ALL facilities where endoscopists have practiced in 2019 (**Note: do not identify physicians**).

Table 1: Business Case Details

Total number of endoscopists performing endoscopy procedures at satellite site	Number of endoscopists that performed <200 colonoscopies in 2019	Number of endoscopists that performed 200 or more colonoscopies in 2019	Total colonoscopies performed by all endoscopists in 2019
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

Volume Summary (3):

Indicate the volume of procedures performed at satellite site in 2019. Specify by indication, if possible. *Note: Please use one table per satellite site. Add additional tables, as required.*

Procedure	TOTAL	Indications (if possible)				
		Symptomatic	FIT-positive	Surveillance	First degree relative	Average risk screening
Colonoscopy	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Gastroscopy	Click here to enter text.					
Dual colonoscopy + gastroscopy	Click here to enter text.					
All other endoscopy procedures	Click here to enter text.					

Volume Summary (4):

Describe how the satellite site will be able to manage these additional volumes (e.g., increased hours, decreasing average risk screening colonoscopies).

Table 1: Business Case Details

Click here to enter text.

Resource Summary - Expertise:

Please provide details on endoscopist experience and staffing expertise at the satellite site and if applicable, how will these resources be coordinated between facilities participating in the proposed partnership.

Click here to enter text.

Resource Summary - Equipment:

Does the satellite site have the equipment required to provide the volume and types of endoscopy proposed? Please refer to the [FIT-positive Colonoscopy: Facility-level Guidance](#) document if the satellite site is proposing to perform FIT-positive colonoscopies.

Click here to enter text.

Proposed Start Date of Partnership

Please note once received Ontario Health (Cancer Care Ontario) will follow up to confirm timelines.

Click here to enter text.

Requirements Confirmation

This partnership meets or will meet the requirements outlined in [Appendix A](#) by the outset of the partnership.

Table 1: Business Case Details

Yes – This partnership meets or will meet the requirements outlined in [Appendix A](#)

No – This partnership does not meet the requirements outlined in [Appendix A](#)

Provide additional information, if required

[Click here to enter text.](#)



Sign-Off

All proposals require sign-off from the facilities' Chief Executive Officer (CEO) as well as from RCP leadership.

Signatures demonstrate that the proposal contents are accurate and complete.

QBP Partner Hospital Sign Off		
Hospital CEO	Name:	Click or tap here to enter text.
	Title:	Click or tap here to enter text.
	Signature:	
	Date:	

Satellite Site Sign Off		
Hospital/OHP CEO	Facility Name:	Click or tap here to enter text.
	Name:	Click or tap here to enter text.
	Title:	Click or tap here to enter text.
	Signature:	
	Date:	

Signatures confirm a complete review of this proposal. It means there is full support of and approval for this new partnership request from the RCP. Should the partnership cross RCPs, please ensure both have signed off, by completing the additional table below:

Regional Cancer Program Sign-Off		
Regional Vice President	Name:	Click or tap here to enter text.
	Signature:	
	Date:	
Regional Colorectal Screening / GI Endoscopy Lead	Name:	Click or tap here to enter text.
	Signature:	
	Date:	

Appendix A

Category	Partnership Requirements
<p>Endoscopy Procedures and Indications</p>	<ul style="list-style-type: none"> • The following procedures (and associated indications) are in-scope to receive funding from Ontario Health (Cancer Care Ontario) for the purposes of this partnership agreement: <ul style="list-style-type: none"> ○ Colonoscopy (indications: family history of colorectal cancer in a first degree relative, surveillance, FIT-positive*, symptomatic indications), gastroscopy, dual colonoscopy & gastroscopy ○ The satellite site(s) must have processes in place to prioritize high-yield procedures in alignment with Ontario Health (Cancer Care Ontario)'s <i>COVID-19 Tip Sheet #09 - Guidance for Increasing GI Endoscopy Services</i> during the pandemic. Contact the Screening Inbox (cancerscreening@ontariohealth.ca) to obtain a copy. ○ Cases defined as priority classification D** will not be in-scope for funding. <p><i>Note: Ontario Health (Cancer Care Ontario) reserves the right to audit patient charts, if required</i></p> <p>*The satellite site must demonstrate alignment with Ontario Health (Cancer Care Ontario)'s Fecal Immunochemical Test (FIT)-Positive Colonoscopy: Facility-Level Guidance in order to be approved for funding for FIT-positive colonoscopies (with the exception of data submission to the GI Endoscopy Data Submission Portal (DSP) for OHPs)</p> <p>**Classification D is defined as:</p> <ul style="list-style-type: none"> • Colorectal cancer (CRC) screening for people at average risk (i.e., no first-degree relatives diagnosed with CRC) • CRC screening for people with a history of small hyperplastic polyp(s) in rectum or sigmoid colon • CRC screening for people with a history of low risk adenoma(s) (LRA)
<p>Volumes and Funding</p>	<ul style="list-style-type: none"> • Ontario Health (Cancer Care Ontario) will determine volumes for the partnership based on the business case details provided in this proposal and, if applicable, discussions with the Regional Cancer Program and facilities participating in the partnership

Category	Partnership Requirements
Quality and Safety	<ul style="list-style-type: none"> • The satellite site must have in place a process to refer complex polyps for adjudication at the QBP hospital or regional network, as applicable • Satellite site physicians should be credentialed at a hospital that is close to the satellite site, preferably the GI Endoscopy QBP partner hospital • The satellite site should follow Ontario Health (Cancer Care Ontario) clinical guidelines outlined in the GI Endoscopy QBP Clinical Handbook • OHPs must maintain full accreditation of the Ontario College of Physicians and Surgeons’ Out-of-Hospital Premises Inspection Program (OHPIP). Ontario Health (Cancer Care Ontario) must be provided with copies of accreditation reports upon request • The satellite site must use the Global Rating Scale (GRS) for endoscopy and Ontario Health (Cancer Care Ontario) must be provided an annual report on GRS activities upon request • The QBP partner hospital and satellite site must adhere to COVID-19 guidelines outlined in: <ul style="list-style-type: none"> ○ Ontario Health (Cancer Care Ontario)’s <i>COVID-19 Tip Sheet #09 - Guidance for Increasing GI Endoscopy Services during the pandemic</i>. Contact the Screening Inbox (cancerscreening@ontariohealth.ca) to obtain a copy ○ Ontario Health and Ministry of Health’s guidance for resuming services during COVID-19 ○ Existing infection prevention and control (IPAC) requirements within each facility. The QBP hospital should work with the OHP to review IPAC processes to ensure alignment with Ministry, public health or other requirements. • The QBP partner hospital and satellite site should participate in regional COVID-19 tables, as applicable, to support regional alignment and resumption of services <p>Note: <i>The QBP partner hospital and satellite site are responsible for establishing a common understanding regarding personal protective equipment supply management at and/or between the sites</i></p>
Processes	<ul style="list-style-type: none"> • The QBP partner hospital and satellite site must document and implement processes to ensure referral and re-direction of: <ul style="list-style-type: none"> ○ patients with higher complexity to the GI Endoscopy QBP partner hospital; and ○ patients with milder symptomatology or lower comorbidities, directed to the satellite site • There is an agreed upon approach and process to managing where gastroscopies are performed

Category	Partnership Requirements
	<ul style="list-style-type: none"> • There is an agreed upon process in place to ensure post-procedure patient follow up is planned, as indicated
Data and Reporting	<ul style="list-style-type: none"> • Data submission must comply with Ontario Health (Cancer Care Ontario) requirements for all GI endoscopy procedures performed at the partner and satellite site • If a non-HSFR hospital is involved in the partnership: <ul style="list-style-type: none"> ○ all data related to the GI endoscopy procedures performed at the non-HSFR hospital must continue to be submitted to Ontario Health (Cancer Care Ontario) via the GI Endoscopy DSP as per requirements outlined in Schedule “C” of their existing agreement ○ all data related to the GI endoscopy procedures performed at the non-HSFR hospital must be submitted to CIHI NACRS and DAD reporting systems as per established CIHI standards as per requirements outlined in Schedule “C” of their existing agreement • If an OHP is involved in the partnership: <ul style="list-style-type: none"> ○ data requirements for satellite sites may be updated over time to align with data collection from hospitals to support funding and quality reporting. Satellites sites are expected to work with Ontario Health (Cancer Care Ontario) on strategies to enhance data collection when requested ○ the following data for each colonoscopy must be submitted^{1,2} to Ontario Health (Cancer Care Ontario) on a monthly basis, by the 15th day of the following month: <ul style="list-style-type: none"> ▪ College of Physicians and Surgeons of Ontario (CPSO) number ▪ Patient Identifiers (Health Card Number, Last Name, Date of Birth) ▪ Date of receipt of referral to colonoscopy ▪ Patient self delay ▪ Date of colonoscopy procedure ▪ Primary indication ▪ Secondary indication ▪ Cecal intubation ▪ Bowel preparation quality ▪ American Association of Anesthesiologists (ASA) grade

Category	Partnership Requirements
	<ul style="list-style-type: none"> ▪ Abnormal findings present ▪ Total polyps removed <5.9mm ▪ Total polyps removed 6mm - 2.9cm ▪ Total polyps removed ≥3cm ▪ Any diagnostic/therapeutic procedure(s) performed ▪ Prior inadequate/incomplete colonoscopy <ul style="list-style-type: none"> ○ Volumes for each dual colonoscopy + gastroscopy and gastroscopy must be submitted¹ to Ontario Health (Cancer Care Ontario) on a monthly basis, by the 15th day of the following month ○ Aggregate reporting of quality indicators for all colonoscopies in keeping with the types of indicators hospitals report to Ontario Health (Cancer Care Ontario)¹. <p>¹ Method for data submission, data definition and values for each element and/or indicator will be discussed if/when the partnership proposal is approved. Ontario Health (Cancer Care Ontario) will provide the data submission template.</p> <p>² If an OHP is involved in the partnership and the data will be submitted jointly with the QBP partner hospital, data should be submitted per GI Endoscopy DSP and CIHI specifications. The hospital and OHP are expected to work with Ontario Health (Cancer Care Ontario) on strategies to delineate OHP data from QBP partner hospital data</p>
Agreements	<ul style="list-style-type: none"> • If approved, Ontario Health (Cancer Care Ontario) will create a contract with the QBP partner hospital to outline approved volumes and requirements for the purposes of the partnership. • If approved by Ontario Health (Cancer Care Ontario), the QBP partner hospital and the satellite site must enter into a shared services agreement, memorandum of understanding, or some other written agreement. This agreement should articulate the scope of service delivery responsibilities shared between the facilities engaged in the partnership as well as the funding arrangements that have been established. A copy of this agreement shall be provided to Ontario Health (Cancer Care Ontario) upon request. • The partnership and the associated requirements outlined in this document will be included in the QBP partner hospital and satellite sites' agreement with Ontario Health (Cancer Care Ontario) • The ongoing need for the partnership will be assessed annually prior to the completion of the QBP partner hospital's new agreement with Ontario Health (Cancer Care Ontario)