CLICK HERE for all SHA information on the Tiers of Service



CLICK HERE for further information on the **Critical Care** service line, including fillable checklists

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Facility/Team Name:	
Checklist completed by:	
Checklist completed on (date):	

Critical Care - Tier 6 Checklist

	Available here?	Notes / Improvement Measures:
Clinical Services		
Provide comprehensive critical care, including complex multi-system life support for an indefinite period of time		
Access to all sub-specialty care		
Written care plan reviewed on multi-discliplinary rounds every 24 hours		
Written criteria for when escalation of care is required and consideration of transport to a higher tier is necessary		
Review and documentation of patient's Goals of Care with each ICU admission and as needed when condition changes.		
Processes and equipment to meet patient and family spiritual needs (I.e. virtual communication devices, protocols for accommodating ceremonies, etc)		
6 IMV capacity in 100% of beds		
§ Emergent or planned establishment of tracheostomy		
S Long term IMV weaning - stable ICU patient requiring protocols to wean from ventilator support and mutlidisciplinary team to manage care	m	
Bronchoscopy (includes bedside bronchoscopy)		
4 Tracheostomy care after first trach change		
Acute non-invasive ventilation		
Stable long-term invasive mechanical ventilation patient waiting for placement other than ICU		



	Available here?	Notes / Improvement Measures:
	nere.	Notes / Improvement Measures.
Chest tube insertion, maintenance and removal		
Ultrasound guided thoracentesis		
High Flow Oxygen Therapy (AIRVO or OptiFlow)		
Prone positioning, chest physiotherapy, cough assist		
Massive Transfusion protocol with capacity to secure the necessary blood products and access to stat lab testing		
Sepsis management of unstable patients		
Management of infection disease requiring negative pressure room and the ability to ventilate within ventilator bed capacity		
Management of diseases requiring a private room for isolation		
Unstable angina/arteriosclerotic heart disease requiring Cardiology services		
Post cardiac surgery management		
Intra-aortic balloon pump		
6 ECMO		
Pulmonary artery catheter monitoring		
⑤ Temporary transvenous pacing		
Code Blue for all patient populations (including pediatrics patients to stabilize and transfer) with ACLS level care (defib, cardioversion, transcutaneous pacing)		
Post cardiac arrest management, stabilize and transfer to Tier 5 or 6 as required		
Arterial and central line insertion and pressure monitoring		
Single or multiple vasoactive/inotropic infusions		
Unstable angina/arteriosclerotic heart disease with known disease, no new management options required		
Temporary transcutaneous pacing		
Continuous cardiac monitoring		
Intermittent pneumatic compression (calf compressors)		
Protocols and pharmaceuticals available for care of STEMI and Non-STEMI with tenecteplase, in consultation with Cardiology		
Cooling/warming, targeted temperature management		



	Available	Notes (Income and Manager
	here?	Notes / Improvement Measures:
Invasive intra-cranial pressure monitoring		
Management of increased ICP - requiring Neurology intervention		
External ventricular drain management		
Surgical management of stroke		
Access to intermittent of continuous EEG bedside monitoring, Neurologist on site follow up		
Management of traumatic brain injury requiring increased monitoring due to potential for rapid deterioration		
Non-invasive intra-cranial pressure monitoring (i.e. GCS, pupils)		
Management of increased ICP with medications in consult with Nerologist		
Non-surgical management of stroke in consult with Neurologist (i.e. administration of tPA)		
Train of Four monitoring		
IV infusion of paralytic medications		
TPN- initiate and continue specialty compounding of solutions 7 days per week		
Intra-abdominal pressure monitoring (bladder)		
Esophageal tamponade tube insertion and management		
Management of DKA/hypoglycemia		
Management of diabetes insipidus requiring hourly intake/output monitoring and adjustment of IV fluids/medications		
4 Insulin infusion - ICU protocols		
Initate and manage tube feeding including standardized protocols for nutritional management		
◆ Fecal management system		
NG/OG insertion in an unconscious patient		
⑤ CRRT		
• Hemodialysis		
• Nursing to manage established peritoneal dialysis when patient/family are unable to with support from Nephrology and provincial kidney program as needed (support may be virtual)		
⑤ Care of burns requiring specialized wound care		
Pressure injury prevention and management, including access to specialty mattresses and pressure relieving devices		
Negative Pressure Wound Therapy with support from wound care nurse as required	_	



Available	
here?	Notes / Improvement Measures:
	Available here?

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	Available here?	Notes / Improvement Measures:
RT on site 24/7, participate in rounds daily		
Critical Care trained RN - ability to meet 1:1 nurse to patient ratio if care needs require it. Supernumary charge RN.		
Minimum 2 RNs present in the unit at all time when a patient is admitted to unit. Local Clinical Nurse Educator/Clinical		
Resource Nurse and front line Critical Care team in Tier 4 ICUs will have access to Critical Care Outreach Coordinators for educational support		
SLP & OT available 5 days per week, participate in rounds as able/needed		
6 Clinical Pharmacist with Advanced Degree available M-F		
§ TPN- initiate and continue specialty compounding of solutions 7 days per week		
Pharmacy dept to provide some pre-mixed medications to the ICU prioritizing high risk medications		
Pharmacy technician time - 30 minutes per ICU bed		
Pharmacist dedicated to support ICU 7 days per week, on call after hours; 1 Pharmacist FTE:12 ICU beds		
Thrombolytic components for tPA or TNK and medications used for massive transfusion protocols (i.e. tranexamic acid)		
Automated medication system available to support medication safety (i.e. Pyxis)		
6 Provide comprehensive range of core laboratory services		
Markers of heart function or damage: NT-proBNP		
9 Blood product supply on site to support Massive Transfusion Protocol		
④ Lab services available 24/7 for ICU support		
Metrics of renal function and dehydration: electrolyes, urea, creatinine		
Markers of heart function or damage: Troponin		
Blood gases		
Metrics of coagulation: D-dimers or equivalent		
Metrics of inflammation: lactate or procalcitonin		
Markers of blood cell status: Hb, WCC, etc		
Microbiology: processes in place to support cultures off site		
4 Access to ECG 24/7		
6 MRI services		
1 Interventional radiology - i.e trauma, neuroradiology, vascular (stents, angioplasty, etc)		
Access to urgent echocardiography 7 days per week		
Portable ultrasound		
Access to PET services		



	Available	Notes (Incompany Managers
	here?	Notes / Improvement Measures:
Basic digital subtraction angiography (DSA) suite for interventional services		
S EEG available 5 days per week		
Portable x-ray		
Ultrasound		
CT services		
Fluoroscopy		
Modified barium swallowing		
6 ICP monitoring device		
Access to bronchoscope		
Pulmonary artery pressure monitor		
Temporary transvenous pacing device		
S EEG monitoring device		
Ventilators, intubation supplies, NIV/HFNC devices, suction (including portable for transport of patients outside of ICU)		
Cardiac bedside monitors with the ability to support continuous cardiac and hemodynamic monitoring (ART line and CVP), Respiratory measurements such as Sp02 and EtCO2)		
Temporary transcutaneous pacing device		
Intermittent pneumatic compression devices		
Train of Four monitor		
Cooling, warming devices		
Tube feed pump		
Rapid infuser		
Pressure relieving devices (specialty mattresses, cushions, boots, etc). Mobility devices. Mechanical percussor/vibration, cough assist machine.		
Access to vac dressing pumps		
⊙ Intra-aorta balloon pump		
6 ECMO equipment and supplies		
Intra-abdominal pressure monitor		
CRRT, hemodialysis devices and supplies		
Blood warmer		
Virtual communication devices for patient and family. Recliners or other comfortable sitting for visitors.		

		Available here?	Notes / Improvement Measures:
		nore.	Hotes / Improvement Measurest
47	Computer for each bed plus additional workstations for physicians, charge nurse and unit support staff. A computer on wheels.		
4 [Desk for each bed (build in or mobile)		
4 1	wo bedside tables per bed		
4 9	Supply cart for each patient room		
6 F	Requirements for Dialysis hook up for water and drainage supply		
4	Commode		
4	Negative pressure room(s) for isolation. Private rooms that allow for isolation precautions		
4 \	/ideo monitoring system for patient rooms and doorways		
4 (Ceiling tracks and lifts including some with bariatric weight capacity		
	Oxygen and medical gas outlets available for each side of the bed, and sufficient oxygen and medical gas capacity for acility overall given bed/IMV/NIV capacity		
4	Adequate suction capacity for each patient room - should be available on each side of the bed		
49	3 - 4 emergency back up power outlets for each bed or if at possible Uninterupted Power Supply outlets for emergency equipment such as ventilators		
	Physical space in room that is adequate to perform care		
47	Hand washing capacity wihtin the room or very near by. Adequate ability to dispose of patient blood and body fluids - noppers, toilets etc		
4 L	ighting to suit both task and ambient. Blinds, curtains or electric glass for privacy.		
Leg	end:		
	Services or requirements expected for teams/facilities providing Tier 4 or higher services		
9	Services or requirements expected for teams/facilities providing Tier 5 or higher services		
6	Services or requirements expected for teams/facilities providing Tier 6 services		
	Director review of completed checklist by:		
	Date of review:		
<i> </i>	Notes:		