## **PVCC Program Model**

## **INPUTS** Resources

## **OUTPUTS**

Target/ Participants

**OUTCOMES-IMPACT** 

Medium Term Long Term

1) People -Referring and consulting sites' Critical Care physicians, RTs, RNs, educators, OTN support 2) Technology – OTN, NEODIN

Referring and consulting sites to be:

Informed

**Activities** 

- Trained
- Get access to PVCC

Critical Care physicians, SPOT RTs and **SPOT RNs** 

1) Share pediatric expertise 2) Increase interdisciplinary collaboration

Short Term

3) Improve educational opportunities and knowledge translation

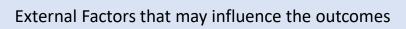
**Future** opportunity to expand services to other sites within LHIN, Baffin Island and Quebec

1) Improve Morbidity and Mortality 2) Improve patient outcomes 3) Potential for child to receive care closer to home



## **Assumptions**

- 1) Access to PVCC service 24/7
- 2) Staff have access to OTN, NEODIN, and training is completed
- 3) Technology works without interruption



- 1) Staff may perceive increased workload and time
- 2) The initial process may be complicated for some staff
- 3) Technology and advice may delay transfer time

