

Fact Sheet 6: Tiers of Service Terminology

Term	Definition
24/7	Unless otherwise stated, refers to 24 hours a day, 7 days a week, 365 days per year.
Access / accessible	Ability to utilize a service (either located on-site or off-site) or skills of a suitably qualified person (who may be either on-site or off-site) without difficulty or delay via various communication mediums including but not limited to face-to-face, telehealth and/or outreach.
Acuity	Urgency and potential seriousness of a presenting complaint. Categorized as low, medium, and high for the purpose of the modules.
Available	Ability to obtain advice and on-site presence of a suitably qualified person within specified hours. Person may be on-site or may be on-call and available on-site as needed.
Best Practice	A practice that has been shown by research and experience (including lived and living experience) to produce optimal results and that is established or proposed as a standard suitable for widespread adoption.
Business hours	Commonly defined as 9 am to 5 pm Monday to Friday or as determined by the individual service.
Case management	Activities to ensure coordination of health care services required by a patient. Involves a collaborative process to assess, plan, implement, coordinate, monitor and evaluate the options and services that a patient requires.
Child and family-centred care	Services are delivered in line with the principles of the UN Convention on the Rights of the Child. Children and their families are actively involved in healthcare planning. Information is provided about care options in a way in which children and their families can understand. Chronological and developmental age of the child is considered in the provision of care and information. Families are actively encouraged to participate in the care.
Clinical or care pathway	Standardized, evidence-based interdisciplinary management plan which identifies an appropriate sequence of clinical interventions, time frames, milestones and expected outcomes for a homogenous patient population.
Collaboration	Process of two or more people or organizations working together in the interests of children and their families.
Enhanced pediatric skills	In-depth knowledge and skills in a specific area of clinical care for children (e.g., respiratory diseases, sexual assault, diabetes, wound management, etc.).
Facility	Physical structure in which a number of services of similar or differing capability levels are situated.
Medical complexity	Chronicity, stability and systemic impact of an underlying disease. Categorized as low, medium and high for the purpose of the modules.
Notable criteria	Important criteria which assist with planning and operating at a given tier.

Term	Definition
On-site	Staff, services and/or resources physically located within a health facility.
Operational planning	Planning for the creation of an efficient and well-organized health service. Involves defining the needs of the population which will be accessing the service and utilizing the Tiers framework to develop a service which aligns with those needs.
Provincial service	Province-wide service accessible to children/families and/or health care providers throughout the province. Usually provided from one service base.
Pediatric skills	Broad knowledge and skills related to the care of children. e.g., growth and development, common pediatric conditions and their management, psychological impact of care provision at different developmental stages and effective ways to communicate and work in partnership with children and their families.
Rural & remote	<p>There is no single definition for rural & remote in BC. Tiers of Service documents are guided by the definitions in the Rural, Remote, First Nations and Indigenous COVID-19 Response Framework (2020).¹</p> <ul style="list-style-type: none"> • Rural: Community & catchment area 1,000 – 20,000 (small rural is considered 1,000 – 3,500) • Remote: 0 – 1,000 <p>Note: The term remote is more fluid and considers distance and accessibility in its definition.</p>
Safe pediatric bed	The provision of care to a child in a physically safe and psychologically comfortable environment. Staffing levels are appropriate to the needs of the child and staff has the required knowledge and skills. Pediatric emergency equipment and supplies are in close proximity.
Safety plan	A plan that is completed in collaboration between service provider(s) & the child/youth/family with a focus on keeping (selves & others) safe. Includes description of warning signs that indicate worsening mental status &/or increasing behavioural issues (i.e., things child/youth says or does, increased isolation, increased conflict, decreased self-care), coping skills unique to child/youth &/or actions to prevent escalation (i.e., going for a walk, creating art, listening to music, phoning a friend, having a snack, having a rest), who social supports are (i.e., friends, family member, spiritual/cultural community), & identified professional supports to contact (i.e., MH clinician, school counselor, PCP, 911, crisis lines). Also identifies potential risks in the home/residential environment such as medications & sharp objects and plans to eliminate the risks.
Service	May be a clinical or clinical diagnostic and therapeutic service. Multiple services of similar or differing tier levels may be provided within a single facility.
Service planning	System or operational planning for a specific service e.g., emergency department, pediatric medicine, pediatric surgery and child and youth mental health.
Subspecialist	Physician subspecialist: A specialty-trained medical doctor who has completed additional education and training in a specific area. Depending on the subspecialty, certification from the Royal College of Physicians and Surgeons of Canada (RCPSC) may be required.

¹ Rural, Remote, First Nations and Indigenous COVID-19 Response Framework, BC Ministry of Health, May 26, 2020.
<https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/emergency-preparedness-response-recovery/gdx/rural-and-remote-covid-19-response-framework.pdf>

Term	Definition
	<ul style="list-style-type: none"> The Royal College of Physicians and Surgeons of Canada (RCPSC) recognizes the following pediatric subspecialties: pediatric critical care medicine, pediatric cardiology, pediatric gastroenterology, pediatric infectious diseases, pediatric hematology/oncology, pediatric respirology, pediatric palliative care medicine, pediatric emergency, pediatric surgery, pediatric radiology and child development and rehabilitation. RCPSC-certification requires completion of a two-year residency program and the RCPSC examination. Subspecialty training for other pediatric subspecialties occurs through fellowships which range from 1 to 4 years in length. RCPSC examination is not required. <p>Non-physician subspecialist: A regulated health care provider who works exclusively or almost exclusively with children and who has completed additional education and training in a subspecialty area. Where formal education is not available, the provider has completed a mentorship and has had extensive experience in the subspecialty area. e.g., pediatric diabetes educator, pediatric wound care nurse, pediatric seating specialist.</p>
System planning	Strategic planning for the creation of an efficient and well-organized health system. Involves defining the needs of a population and utilizing the Tiers framework to develop a system of services which align with those needs.
Tier defining criteria	<p>To align at a specific tier:</p> <ul style="list-style-type: none"> 100% must be met <p>AND</p> <ul style="list-style-type: none"> Creates a patient safety risk² or system risk³ if not met; OR Is unique to a given tier AND essential to providing services at that tier (service cannot function at that tier if the criterion is not met) <p>AND</p> <ul style="list-style-type: none"> Are observable (tangible) and easily measured
Telehealth	Use of telecommunications and information technology to provide access to health assessment, diagnosis, intervention, consultation, supervision, and information sharing across distance. Telehealth may include but is not limited to telephones, live interactive video links and remote patient monitoring devices.
Wise Practices	Are strengths-based actions, tools, principles, or decisions that are culturally appropriate and community driven. Wise practices recognize the wisdom in each Indigenous community and in the community's own stories of achieving success. The concept of wise practices recognizes that culture matters. ⁴

Acknowledgement: Queensland Services Capability Framework v3.2

² Patient safety risk = risk that preventable harm may occur to a patient during the process of health care if criterion is not met. Reference: World Health Organization. Patient safety 2020. www.who.int/teams/integrated-health-services/patient-safety (accessed May 14, 2021).

³ System risk = risk that service provision or the role of the service within the relevant network may be severely disrupted if criterion is not met. References: (1) Provincial Health Services Authority. PHSA Integrated Risk Management Framework Document. Vancouver. 2019; (2) Al-Zuheri A, Amer Y, Vlachos I. Risk assessment and analysis of healthcare system using probability-impact matrix.: Nur Primary Care; 2019. p. 1-4.; (3) Government of Western Australia. Clinical Risk Management Guidelines for the Western Australian Health System. Information Series No 8. East Perth 2019.

⁴ Reference: Provincial Health Services Authority. Indigenous-specific Racism and Discrimination for PHSA Staff Policy. Sept. 2023. <http://shop.healthcarebc.ca/phsa/PHSAPOD/Indigenous%20Health/C-99-11-20256.pdf>