# Emergency Department Return Visit Quality Program

# Narrative Template

Release date: November 2023

## Background

The Narrative document is your opportunity to elaborate upon quality improvement (QI) activities you are working on in your emergency department (ED). The Narrative document typically focuses on QI initiatives that address issues identified through the ED Return Visit Quality Program. Our goal with this document is to collect information on the QI initiatives that you have implemented this year and the results of these initiatives — both positive and negative. Reviewing and learning from approaches that did or did not work is an important part of the QI process, and your learnings can be very valuable to other sites participating in this program. Your contribution here and the details that you provide will help to transfer knowledge across the province.

**We will contact you for permission before we share any stories that you include in this section in our reports or other program materials.**

## Questions

**Question 1**

In last year’s submission (based on 2022 audits), you shared your QI priorities and initiatives for the year. In this section, please provide an update on the status of 1–2 of these initiatives by providing the following information:

1. Describe the QI initiative(s).

1. What is your aim for this (these) initiative(s)? What outcomes are you trying to achieve?

1. Was (were) the QI initiative(s) implemented within your ED or hospital? Why or why not?

1. What barriers did you experience?

1. What enablers did you experience?

1. Describe the impact or effectiveness of the QI initiative(s) (include data/graphs as separate attachments if possible).

**Question 2**

Based on your ED return visit audits conducted in 2023, please respond to the following questions:

1. What types of cases are you focusing your audits on? For example, are you selecting random return visit cases, or are you selecting specific diagnoses or themes (e.g., mental health and addictions, radiology)?

1. What QI issues were identified via this year’s return visit audits?

1. What QI initiatives are you prioritizing to address these issues?

**Question 3**

How is your ED connecting Pay-for-Results (P4R) with the ED Return Visit Quality Program? More specifically, how are you leveraging P4R data and incentives to support ED quality and vice versa (e.g., alignment of resources, identification of QI priorities)? As an example, some sites have created an ED Quality scorecard through which they regularly review their P4R metrics along with their return visits (i.e., number of audits completed, number of adverse events or quality issues identified, number of patients who left without being seen [LWBS] who returned and were admitted) or track their return visit rate over time as a balancing measure to their P4R metrics.

**Question 4**

Do you have any questions for other sites participating in the ED Return Visit Quality Program or for the ED Return Visit Quality Program leadership team?

## Contact Information

Please identify the primary contact if we have questions about this submission or if there are any changes planned for your site contact in 2024.

Primary contact name: ­­­­­­­­­­

Primary contact email:

Do you consent to the ED Return Visit Quality Program team sharing this contact information with other program participants to facilitate discussion about the initiatives you have described?

[ ]  Yes

[ ]  No

If you have any questions, please contact us at EDQuality@OntarioHealth.ca

## CEO Sign-off

CEO Name:

