ED Utilization Tracking Document B:

For ED Measure 3 (Process)

**Step 1:** List the names of the residents who had an ED visit in the month in Column 1(Repeat from Tracking Document 1: Outcomes)

**Step 2:** Indicate “Yes” if the resident was at “high risk” for an ED visit (see definition of high risk for an ED visit) in Column 2

**Step 3:** Of the high risk residents (those with “Yes” in column 2), indicate “Yes” if a change in condition was documented on the Shift to Shift report in the 24 hours prior to the ED visit (Column 3)

**Data for the month of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Organization/Unit Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Column 1** | **Column 2** | **Column 3** |
| **Name of each LTC home resident who had an ED visit in the month** | **Resident identifiable as “high risk” for an ED visit****Yes/ No** | **Of the high risk residents (“Yes” in Column 2), those with change in condition documented on the Shift to Shift report in the 24 hours prior to ED visit****Yes/ No** |
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| **Column 1** | **Column 2** | **Column 3** |
| **Name of each LTC home resident who had an ED visit in the month** | **Resident identifiable as “high risk” for an ED visit****Yes/ No** | **Of the high risk residents (“Yes” in Column 2), those with change in condition documented on the Shift to Shift report in the 24 hours prior to ED visit****Yes/ No** |
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| Total residents with an ED visit: | Total residents identifiable as “High risk” for an ED visit: | Total number of residents with change in condition on Shift to Shift report:  |