Emergency Department Return Visit Quality Program

Report on the 2019 Results

SEPTEMBER 2020

Ontario Health Quality

Overview of the ED Return Visit Quality Program

The ED Return Visit Quality Program was started in April 2016 to bring focus on quality of care and build a culture of continuous quality improvement in Ontario's EDs.

- This program is an Ontario-wide audit and feedback program involving routine analysis of return visits

- Where quality issues are identified, steps are taken to address their root causes

- Participation is mandatory for all hospitals participating in the Pay-for-Results (P4R) Program and voluntary for other hospitals

How it works

Data Reports
Hospitals receive data reports quarterly from Ontario Health identifying return visits involving their site.
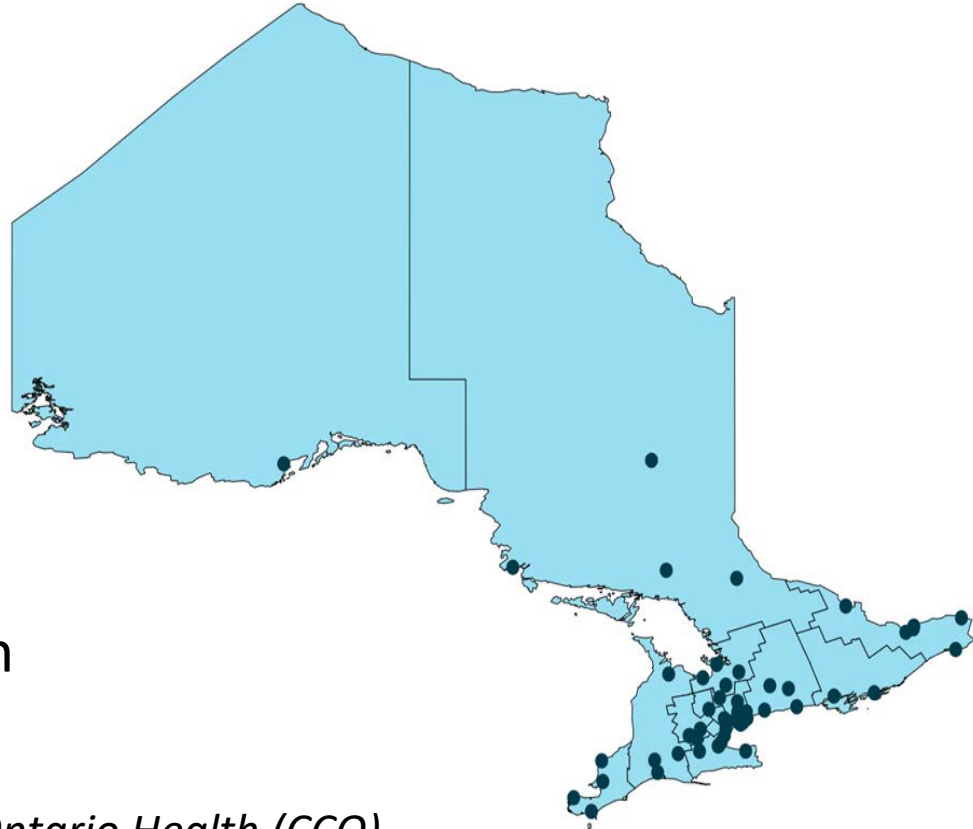
Audits
Hospitals audit a set number of these return visits to identify potential quality issues/AEs

Submission
Each January, hospitals submit the results of their audits as well as a completed narrative template in which they answer a set of questions about the program to Ontario Health.

Participation across the province in 2019

- 79 EDs participated in the ED Return Visit Quality Program in 2019
    - 73 P4R EDs
    - 6 non-P4R EDs
- Together, these hospitals received 83% of ED visits in Ontario*

Data provided by Access to Care, Ontario Health (CCO)

4

Results from chart audits

- A total of **4,954** audits were completed in 2019 (year 4 of the program), leading to a program cumulative total of **17,806** charts audited

- The three most common themes identified in the AEs/quality issues were patient risk profile (22%), physician cognitive lapses (22%), and imaging/testing availability (8%)

- The three most common intervention types described were education and training (52%), rules and policies (19%), and simplification and standardization (10%)

- These findings are generally consistent with those of previous years

Audits conducted in 2019

Return visit type	# of audits	# of audits that identified AEs	Percentage
All-cause 72-hour return visits	4,657	1,159	23%
Return visits within 7 days for any sentinel diagnoses	294	119	40%
Acute myocardial infarction	215	83	39%
Subarachnoid hemorrhage	30	17	57%
Paediatric sepsis	49	20	41%

Narrative Question 1: QI Initiatives

"Where applicable, please describe at least one QI initiative with demonstrable results your site has implemented as a result of the opportunities for improvement identified in your audits. Please submit any supporting materials, such as data, algorithms, or policies."

Results: Narrative Question 1 (QI Initiatives)

- 91% of sites described at least one QI initiative

- QI initiatives addressed the following themes (from most common to least common):

  - Imaging/testing availability
  - Discharge planning/community follow-up
  - Documentation
  - Handovers/communication among providers

  - Elder care
  - Left without being seen/left against medical advice
  - Vital signs
  - Physician cognitive lapses
  - Patient risk profile

Refer to previous reports from the ED Return Visit Quality Program to learn more about these themes

Strategies used by hospitals to address most common areas of focus

Imaging / testing availability

- Increased access to diagnostic imaging (DI) outside of regular hours

- Increased access to point-of-care ultrasonography in the ED

- Collaborative QI projects between ED and DI to improve transfer delays

- Increased access to stress testing in ambulatory care

Discharge planning / community follow-up

- Standardization of discharge summaries and discharge instructions

- Implementation of a discharge planning nursing role

- Discharge follow-up phone calls for at-risk populations

- Collaboration with home and community care to ensure ongoing community support

Documentation

- Implementation of electronic medical record (EMR) system

- EMR optimization; use of flags and risk scores

- Force functions for tests in certain populations (e.g., patients >65 years of age)

- Education surrounding writing legibility and charting assessments, discharge, and order times

Handovers / communication among providers

- Improvement of call-back system for positive blood work in collaboration with lab

- Development of protocols for review of positive blood work and timely follow-up

- Guidelines on communication and sign-off roles and responsibilities when acting in supervising role

- Development of process to ensure complete documentation for patients who are being transferred

QI Initiative: Imaging/testing availability

" *Currently, an ED Intensive working group comprised of the Quality and Performance representative, the ED Medical Chief and Clinical Manager as well as the DI Medical Chief and Clinical Manager is focusing on improving timely access to imaging for ED patients. Patients requiring follow-up imaging will be prioritized and given earlier time slots with a quicker turnaround time for obtaining results and reports."*

— Hôpital Général de Hawkesbury & District General Hospital

QI Initiative: Documentation

" *"We conducted a Failure Mode & Effects Analysis to better understand where we can improve our system related to the processing of patient charts before all documentation, such as discharge diagnosis, was complete. Based on the analysis, variability in the process for filing charts was addressed in collaboration with Health Records and ED administration. The resulting action is for charts to no longer be processed until the discharge diagnosis <u>and</u> physician signature are on the chart."*

– Georgian Bay General Hospital – Midland Site

QI Initiative: Handovers/communication between providers

"

Protocol developed for review of positive microbiology cultures by ED MDs working at the time of reporting by the lab. All positive blood cultures are called directly to the MD by lab staff."

– Timmins and District Hospital

QI Initiative: Elder care

" *The program identified the need to ensure frail elderly have appropriate assessment of ambulation prior to discharge. As a result, we are now trialing a full-time physiotherapist to assist with this need.* "

– Southlake Regional Health Centre

13

Narrative Question 2: Culture of Quality

"How has this program impacted or influenced the culture of quality in your emergency department?"

Participants reported that the program has fostered a culture of quality by:

Leading to the **identification** of quality issues / opportunities for improvement

Leading to **discussion** of audit findings/areas for improvement

Generating **buy-in** to QI approaches or specific QI initiatives

Fostering **collaboration** (e.g., on QI projects or through shared responsibility for audits)

Promoting **non-punitive** reflection and discussion

Enabling **self reflection**

Culture of Quality

" *After attending the February 2019 ED Return Visit Quality Program Webinar, I decided to completely revamp our program this year. Now, I have developed a small group session that focuses on:*

- *Teaching emergency physicians how to review patients' charts*
    - *Guiding how to identify, classify, and analyze quality improvement issues*
- *Reviewing common pearls and pitfalls found of chart review and documentation*
- *Discussing any challenging cases as a small group*
- *Debriefing what it's like to 'make a mistake', with emphasis on recognizing system errors and reviewing the Reason approach to separating blameless errors from system errors, negligence and abuse"*   *– Brant Community Healthcare System*

Read more about how participants at Brant Community Healthcare System revamped their approach to this program on Quorum.

Culture of Quality

"*The ED return visit program has strengthened our department's focus on quality improvement in two important ways. First, at the departmental level, in **identifying cases** where care can be improved. These cases are presented to a multidisciplinary and cross-specialty audience at educational rounds, where discussion leads to positive change. Second, at the individual physician level, in providing high-impact substance to **self-reflective practice**.*"

— St Joseph's Health Centre (Unity Health Toronto)

Culture of Quality

"

*This program allows a more **education-based approach** to quality of care as opposed to what is perceived as more punitive with other avenues regarding case reviews […] It has heightened an awareness of looking at, thinking about, and acting on quality issues.*

*– **Health Sciences North – Ramsey Lake Health Centre***

"

*The transparency of reviewing cases with our interprofessional team and PFAC members helps to promote **trust and teamwork** within the department."*

*– **Royal Victoria Regional Health Centre***

Culture of Quality

"

*The chart audit review process included ED staff participation, which created a **culture of transparency** and allowed staff to be directly involved in changes that improve the quality of care in their workplace. Staff were **motivated to participate** in this program because their efforts lead to demonstrable improvements."*

– Thunder Bay Regional Health Sciences Centre

Summary

The 2019 results of the ED Return Visit Quality Program demonstrate many excellent examples of quality improvement initiatives in Ontario's EDs.

The program has helped foster a culture of quality in participating sites. Participating sites continue to evolve and learn from the program to support and complement their quality improvement work.

We thank you all for your efforts and participation in this program.

A note on COVID-19 and 2020 requirements

- We recognize that 2020 has been an unprecedented year in Ontario's health care system, and while the need for quality and reflective practice has not diminished, we acknowledge that all sites face urgent challenges due to the pandemic.

- We have adjusted the requirements for 2020, and we value everyone's continued participation in the program. Learn more [here](#).

- We look forward to hearing from you at year end to know how you have continued to foster a culture of quality and hope that the ED Return Visit Quality Program complements your work to face the challenges of the day.

What's Next?

- The ED Return Visit Quality Program Working Group continues to explore options to evolve and improve the program (e.g., considering new sentinel diagnoses that may provide unique learnings)

- Stay tuned for news of upcoming webinars and other learning opportunities from EDQuality@ontariohealth.ca

Where to go for more information

- The ED Return Visit Quality Program website includes links to all past reports, webinars, and program materials:

  https://hqontario.ca/ed-return-visit

- Email the ED Return Visit Quality Program team with any questions, feedback or comments:

  EDQuality@ontariohealth.ca

Ontario Health
Quality