

OSCE

Candidate information

You have been asked by the Head of ED to meet with a reporter, who wishes to ask questions for an article they are writing on ED overcrowding. Your ED head thinks this would be a good opportunity to publicise the issues facing ED today.

Your ED is currently undergoing a quality improvement cycle in an attempt to reduce chronic overcrowding.

Please answer the reporter's questions regarding issues including access block and quality improvement.

Domain	%
Medical expertise	
Prioritisation and decision making	
Communication	30
Teamwork and collaboration	
Leadership and management	
Health advocacy	
Scholarship and teaching	
Professionalism	70

Access block quality improvement

Actor (Reporter) information

You have approached the head of ED to do an interview about ED overcrowding. You plan to write an article on access block, quality improvement and the like. The ED head has arranged for you to interview one of the consultants regarding these questions.

The ED is currently undergoing a quality improvement cycle in an attempt to reduce chronic overcrowding.

Questions:

- What is access block?
- How can access block be removed/reduced?
- What are the steps of a quality improvement cycle?
- What clinical indicators are used in ED to measure clinical care and outcomes?
- Why is quality improvement of value in the ED setting?

Marking:

Access block: the inability to move patients out of ED in a timely fashion (<8 hours) due to the lack of inpatient beds.

Quality improvement cycle steps:

- *Plan - the change*
- *Do - implement the change*
- *Check - monitor and review the change - audit*
- *Act - revise / review the plan and repeat the cycle*

Clinical indicators used in ED to measure clinical care and outcomes:

- *ATS Compliance*
- *% Access block*
- *STEMI - time to angio / thrombolysis*
- *Admission rates*
- *DNW Rates*
- *Number of deaths in ED*
- *Time to antibiotics*
- *Time to analgesia*
- *NEAT Compliance*
- *Trauma audits*
- *Satisfaction surveys - patients or staff*
- *Staff retention / sick leave*
- *Patient complaints audit*
- *Notes audits*
- *Occupational health and safety audits - staff injuries or needle sticks etc.*
- *Missed results audit*

Why is quality improvement of value in the ED setting?

- identification of safety issues/deficits in care of patients enabling measures to be instituted to rectify thus improving outcomes and quality of care provided
- comparison to other similar centres to see if performance is adequate or needs improving

	Mark
Defines access block	2
States steps of quality improvement cycle	2
Lists at least 3 clinical indicators used in ED to measure clinical care/outcomes	2
Gives reasons for quality improvement in ED	2
Structure of explanations	1
Gives examples of how to reduce access block *must include increased beds	1