A new era for emergency care services in Ireland

Susanna Byrne and colleagues review the contribution of nurses to the development of a national emergency medicine programme strategy

Abstract
The National Emergency Medicine Programme Strategy is a comprehensive plan to improve and develop emergency care in Ireland. It recommends significant changes in how emergency care is organised and delivered so that patients can be confident that they will receive high quality, safe and timely care. Emergency nurses were involved in developing aspects of the strategy document and will play a crucial role in its implementation to ensure that patient outcomes and satisfaction with emergency care services in Ireland are improved.

Keywords
Emergency care delivery, strategy, patient outcomes

THE AIMs of the National Clinical Programmes of the Health Service Executive (HSE) in Ireland are to enhance the quality, access to and value of health care for all citizens of Ireland. Staff on the programmes work with medical training bodies, the HSE’s Office of the Nursing and Midwifery Services Directorate (ONMSD) and with the Therapy Professionals Committee to define a best-practice clinical strategy and identify models of care in each participating specialty.

In July 2010, staff on one of these programmes, the emergency medicine programme (EMP), began to draw up a strategy for the development of emergency services in Ireland. The specific aims of the strategy are to ensure that:
- All emergency departments (EDs) and emergency care network service units are part of a single national emergency care system to ensure that patients receive the same high standards of emergency care wherever they access services.
- Patients are assessed and discharged or admitted within six hours of their arrival at an ED.
- Patients’ experiences of emergency care are measured and that the results inform the further development of services.
- The most up-to-date, evidence-based treatments are made available to patients according to national clinical guidelines and protocols.
- Emergency care network services are measured and improved continuously to preserve patient safety and the quality of care they receive.

A multidisciplinary EMP working group was set up to develop this strategy. The group comprises four consultants in emergency medicine, two emergency nurse managers, an advanced nurse practitioner (ANP), a nurse service planner, an allied health professional and a programme manager. The group lead is a consultant in emergency medicine.

The nursing membership on the working group was selected through a nomination process operated by the ONMSD. The four nurses remain in their substantive posts and their employers release them one day a week to participate in the group.

Leadership and guidance
The four lead nurses report formally to the ONMSD through a clinical programme liaison officer. The ONMSD director and staff offer the nurses leadership and advice, and the director is an advocate for the EMP at a senior level of the HSE. Leadership and guidance, particular in issues concerning nursing and midwifery, clinical governance and patient safety, are also offered by the Directors of Nursing and Midwifery Strategic Reference Group, a forum for senior nurse and midwife managers.
The four lead nurses on the EMP engage with nurses on the other National Clinical Programmes, particularly those concerned with asthma, acute coronary syndrome, acute medicine, care of older people, chronic obstructive pulmonary disease, critical care, diabetes, stroke and telemedicine.

Emergency nurses who work with the leads on these programmes are informed of, and can contribute to, other programmes. For example, emergency care staff liaised with Ireland’s national asthma programme and contributed to an education programme to improve the management of asthma patients nationally. This programme will be delivered to emergency nurses all over the country to standardise how asthma patients are treated in EDs.

Early in the development of the EMP, the wider emergency care community was consulted through six best-practice workshops around Ireland. Emergency nurses, clinical nurse managers and support staff who attended these workshops were asked to share their visions of the future of emergency care and the results of local innovations with the EMP working group.

As a result, nurses were confident that they would be involved in the development of the EMP strategy from the beginning of the process, and links between the working group and nurses remained strong.

Many of the local initiatives showcased at these workshops have since been adapted or standardised for national implementation. For example, a children’s triage system developed in two children’s hospitals in Dublin has been piloted for future implementation in all EDs across the country.

Nursing forum

After the four lead nurses had been selected, they found that emergency care staff from around the country wanted to become involved with the EMP, so they established a forum to allow all emergency nurses in Ireland to contribute to the development of strategy.

By joining the forum, called the emergency nursing interest group (ENIG), emergency care staff can express their views and offer insights, and thereby influence the development of their profession in Ireland.

Nurses from all 38 EDs in Ireland take part in the ENIG and all contribute to the work of the EMP, which consists of work streams including:

- Implementing a national standardised triage system.
- Developing Ireland’s first dedicated children’s triage system.
- Formulating a healthcare-acquired infection algorithm to identify patients who require immediate isolation.
- Developing the role profiles of nurses on each grade.
- Standardising a mental health decision tool for the monitoring of patients with mental health conditions.
- Collaborating with the Pre-Hospital Emergency Care Council, an independent statutory agency responsible for standards and training in pre-hospital emergency care services in Ireland, in the development of an ambulance handover protocol.
- Developing an ED monitoring protocol for adult patients.
- Administering a workforce review covering staff roles in all 38 EDs in Ireland.
- Developing a strategy to implement ANP services across the country.
All members of ENIG meet face to face about once every six weeks, and communicate regularly through email and teleconferences. They encourage constructive debate and develop expertise on a range of nursing issues, particularly those pertaining to the delivery of high quality, safe, timely and cost-efficient emergency care. Meanwhile, by drawing on their clinical and professional experience, and on evidence from nursing literature and international best practice, they influence the strategic direction of the EMP.

The ENIG members provide a link between the EMP working group and emergency nursing colleagues nationally. As a result, information is circulated between them and the views of ED nurses are kept at the forefront of all discussions about the emergency care strategy. As the strategy is implemented nationally, the ENIG will have a greater role in recruiting local champions to implement it.

Meanwhile, an EMP programme manager with skills in change management was appointed to help implement important elements of the strategy, and ensure ENIG and other groups involved in implementation of the strategy set and meet deadlines. The programme manager also monitors strategic objectives and achievements to ensure that all change initiatives add value to local practice.

**Implementation**

After the EMP strategy document, A Strategy to Improve Safety, Quality, Access and Value in Emergency Medicine in Ireland, was published in June 2012, the four lead nurses began to implement its recommendations.

As well as implementing the programme recommendations, the EMP working group and ENIG continue to develop innovations in best practice to improve patient care in EDs. For example, new role profiles for different grades of emergency nursing staff are being developed to ensure that all emergency nurses can achieve practice competencies appropriate to the changed clinical environment of EDs. These profiles should be standardised by the end of this year.

Ireland’s first national children’s triage system is being piloted and tested, and the development of an ED monitoring protocol for adult patients is being finalised. Both of these tools should be ready for use by the end of the year, while the development of tools for assessing dependency in older patients and for managing alcohol withdrawal will begin in 2013.

Another stream of work involves supporting experienced emergency nurses become ANPs who care for patients with injuries and illnesses that do not threaten life or limb. This will allow such patients to be managed more efficiently and effectively, and contribute to the EMP strategy.

The lead nurses on the EMP working group continue to advocate for emergency nursing and support the implementation of the EMP strategy across EDs. The effectiveness and speed with which the quality, safety, accessibility and cost effectiveness of emergency care are improved depends on the efforts of emergency nurses nationally.

Not all emergency nurses and emergency nursing managers have the skills necessary to manage change so an extensive training curriculum is being drafted to help them find new ways of working, implement initiatives and meet the strategy’s key performance indicators.

**Summary**

Development of Ireland’s EMP strategy for emergency healthcare provision is informed by the varied clinical and professional experiences of the lead nurses on the EMP working group.

The success of the strategy at local level will depend largely on its acceptance by patients and staff. As the largest cohort of staff in emergency care teams, emergency nurses are therefore crucial to any change that takes place in EDs, and the lead nurses on the EMP working group recognise that consultation, communication and collaboration with emergency nurses and senior nursing management are essential to gain their trust. As such, the lead nurses ensure that the lines of communication and clinical links that were made early in the EMP programme’s development are maintained and reinforced.

The collaborative approach of emergency nurses, medical practitioners and allied health professionals in developing the EMP strategy has been crucial. If implementation of the strategy is to succeed, ED nurses must also continue to become agents of change for a new era of emergency services in Ireland.

**Find out more**

The 2012 National Emergency Medicine Programme report, A Strategy to Improve Safety, Quality, Access and Value in Emergency Medicine in Ireland, can be downloaded from http://tinyurl.com/lbrso9h

Details of all of the Health Service Executive’s National Clinical Programmes are available at www.hse.ie/eng/about/Who/clinical/natclnprog