Background
The Scottish Government 20/20 vision (2011) set out its strategic vision for achieving sustainable quality in the delivery of healthcare services across Scotland. Within NHS Ayrshire and Arran, a new Emergency Department (ED)/Combined Assessment Unit (CAU) opened transforming the delivery of unscheduled care and enabling the appropriate patients to be seen in the appropriate department, thus improving delivery of emergency care. Within the ED this transitional period was a suitable time to develop and introduce a framework for ongoing continuous clinical improvement.

Improved Staff confidence/competencies to assess deteriorating patients
Our aim here was to develop new structured documentation within the resus bay to support nursing staff to carry out an A-E assessment of deteriorating patients. This is currently being tested in the ED. Additionally we carried out a confidence score to identify staff learning needs.

Results/Outcomes
Improved Staff confidence/competencies to assess deteriorating patients
We collected baseline data which has identified the need for improvement:

- It is our vision that the introduction of both our new structured documentation and our new ‘buddy’ system will increase the compliance with patients having a documented A-E assessment and improve staff confidence and competency in assessment of the deteriorating patient.

Improved Care of Septic Patients
The LNA identified areas in which nursing staff felt they would need additionally training/competencies to be able to successfully initiate a nurse led sepsis 6 bundle.

Unsurprisingly these were aspects of the bundle that are normally carried out by medics in the ED.

Aims
We aimed to establish and maintain a continuous quality improvement (QI) programme. Identified priorities for improvement were:

- Improved staff confidence/competencies to assess deteriorating patients
- Improved care of deteriorating/septic patients
- Improved imaging process for out-of-hours patients

Methodology
Using improvement methodology we devised a driver diagram defining our improvement plan.

PDSA (plan, do, study, act) methodology was used to carry out small tests of change and identify further areas for improvement.

Improved Care of Septic Patients
Our aim here was to introduce a nurse led sepsis 6 bundle. Again we indentified staffs learning needs by carrying out a learning needs analysis (LNA).

Following this we devised a competency framework and process to allow nurses to carry out all aspects of the sepsis 6 bundle within the ED.

Results/Outcomes
Improved Care of Septic Patients
Early signs of improvement have been noted since the introduction of staff competency framework/training. This is an on-going programme with many staff still to complete.

Conclusion
This is still very much ‘work in progress’ within the ED. Staff attitudes have changed with many embracing quality Improvement as part of our ‘daily business’. We plan to continue to support and develop a framework for improvement which will be inclusive for all staff. By doing so we will be able to deliver the high quality healthcare that the people of Ayrshire and Arran expect and deserve.