Website Summary

Project / Research Overview Form (PROF)

Emergency Care Institute
NEW SOUTH WALES

This form is designed to assist the ECI consider all research and project proposals in a consistent and transparent manner. While not all fields in this form need to be completed the more information you can provide on your proposal the easier it will be for the ECI to understand and consider your proposal. Not providing sufficient information may result in your application being rejected. Applicants are encouraged to also read the *Guidelines for collaborative projects / research with the ECI*.

For more information and to submit all completed forms please contact Vanessa Evans on (02) 9464 4674 or vanessa.evans@aci.health.nsw.gov.au.

Part 1: Introduction (all fields must be completed)

1a. New research ☑	1b. New project / QI activity ☐	1c. Evaluation / review ☐

1d. Name of research / project	Evaluation of 'over-census' patient transfers from ED to the ward.
1e. Project / research synopsis (max 200 words).	Lack of access to ward beds for admitted Emergency Department patients is a major contributor to ED bed-block and is associated with increased clinical errors, prolonged hospital length of stay and increased hospital mortality. In August 2012, Liverpool hospital introduced an 'over census' policy as one means of facilitating transfer of admitted ED patients to the ward, even when no ward bed was immediately available. Each non-critical care hospital ward was required to accept one additional patient above their usual bed numbers at 8am each weekday morning. Suitable patients were identified in the ED by senior medical staff and had already been accepted by an admitting team and were clinically stable. Since the introduction of this policy, up to 15 patients per day have been transferred from the ED to wards without an identified empty bed. This has been associated with a significant reduction in ED 'bed block' and an improvement in ED waiting times and length of stay. The purpose of this project will be to evaluate the safety of the 'over census' process (measured by the number of adverse events) and to prospectively evaluate the flow of 'over census' patients once they reach the ward.
1f. Anticipated outputs	The findings of this study will be presented at relevant Emergency Medicine and Patient safety conferences, and published in relevant journals such as Emergency Medicine Australasia.
2b. Chief investigator / project lead*	Assoc Professor Anna Holdgate is a practicing emergency physician with extensive experience in Emergency Medicine research. She has over 50 peer-reviewed publications and has been principal investigator for many research projects including multi-centre randomised trials,

systematic reviews and collaborate nursing and medical studies. She is familiar with all aspects of managing research including methodological design, ethics committee liaison, subject recruitment, data management, statistical analysis, manuscript development and publication.

Dr Richard Cracknell is the Director of Emergency at Liverpool Hospital and the Network Emergency Director for SWSLHD. He has a long held interest in the development and implementation of new models of care in Emergency Department, including piloting the PECC project and introducing Technical Assistants and Physiotherapy practitioners into ED. He is on the management and steering committees for the CEC Sepsis Kills Project and is the site supervisor for the T3 Stroke Trial.

Carlie Tighe BN, MNurs (Emergency) practicing emergency clinical nurse consultant. She has been the facility clinical lead for multiple national and state wide quality improvement projects.

2c. ECIs role* (see guidelines for these definitions)	☐ Broker	☐ Partner
	☐ Referral	☑ Collaborator
	☐ Chief investigator / Project lead	

ACI   ECI: part of the Agency for Clinical Innovation