In March 2012, the Emergency Care Improvement and Clinical Network (ECIICN) embarked on its fourth round of evidence-based improvement projects in Emergency Departments (EDs). The aim of these projects is to enhance the use of evidence-based care in EDs to reduce variation in clinical practice and to improve consistency of care.

Angliss Hospital Emergency Department selected ‘Improving the management of renal colic’ as the topic for improvement. Renal colic is a common condition at ED and causes great distress for patients. The project has presented the ED with the opportunity to improve management for patients suffering renal colic and to ensure uniformity in care of these patients.

**What we did**

- Performed an audit of management of renal colic patients prior to implementing change
- Developed protocols
- Promoted the change process through:
  - Posters
  - Handovers
  - Intra-departmental education sessions
  - Flyers
- Monitored the effectiveness by performing a mid-cycle audit
- Established the change
- Conducted an audit of management post process change and compared this with audit prior to change.

**What we achieved**

1. Non-steroidal agents within 60 minutes of ED presentation increased from 43% to 84% \((p<0.01)\)
2. Pain score \(<2\) at 60 minutes after ED presentation increased from 37% to 61% \((p=0.03)\)
3. Discharged on course of NSAID (unless have reduced renal function) increased from 30% to 86% \((p<0.01)\)
4. Has documented pain score, temperature measurement, renal function test, white cell count and MSU increased from 20% to 73% \((p<0.01)\)

**What we learnt**

- Change begins with the triage nurse
- Never underestimate the workforces ability to slip back into old habits
- Frequent reinforcement is mandatory

**What we would do differently next time**

- Most effective when renal colic suspected at triage – concentrate more on triage nurses
- Recruit more “champions” of change
- Identify and focus attention on slow adopters

**Impact on patient care, staff and ED**

- ‘Made me think about processes in the ED’
- ‘Improved access to urology ‘stone clinic’

**How we plan to sustain the improvements**

- Promote the success
- Continue to advertise
- Laminate the posters
- Include in medical orientation and nursing triage packages
- Adapt short stay unit protocol