

10<sup>th</sup> June 2014.

**IAEM response to the HIQA Report of the review of the governance arrangements as reflected in the safety, quality and standards of services at UL Hospitals. June 2014.**

*“The single most significant risk observed by the Authority in ULH during the course of this review was the persistent overcrowding in the Emergency Department (ED). The overcrowding impacted negatively on patients (adults and children) and on staff. It impeded access to patients for care and observation, reduced privacy and dignity, increased the risk of transmission of infection and prevented adequate cleaning of the department”.*

Two years after the HIQA Tallaght report, and numerous warnings from IAEM and others, we still see the above statement in a report on a major Emergency Department. The reality is that similar findings could be made in almost all departments and is an indictment of the disgraceful lack of engagement with, and failure to resolve, this issue by hospital management, the HSE and Department of Health.

IAEM is grateful to HIQA for reviewing the implementation status of the recommendations in the Tallaght report. It is unfortunate that its statutory remit does not extend to enforcement in this instance; however continued focus on a problem may engender a response.

Ambulance delays at EDs (as highlighted in recent media coverage) is but one negative impact of overcrowding. Other negative effects, as clearly outlined in the above excerpt from the HIQA report, can and do lead to adverse patient outcomes and to stress and low morale for staff.

There is no doubt that overcrowding also plays a role in the recruitment crisis facing many departments and recently highlighted by IAEM. Staff shortages will further contribute to ambulance delays, prolong patient times in EDs and aggravate overcrowding.

These issues are interlinked and have the potential to create a “perfect storm” within the

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How many warning bells are needed? What disaster needs to happen to get an effective response?