clinical teams believes is feasible and meaningful in the practice setting.

In this presentation, a pathway to introducing QI into a number of different clinical settings will be discussed. The barriers and facilitators to implementation will be discussed along with successes and failures to date in a growing corporate group of practices. The clinical example of approaching how to reduce antibiotic use in practice will be used to demonstrate how the concepts can be turned into reality.

QI is not boring, it is vital to practice and makes the job more interesting.

KEY LEARNING OBJECTIVES

- Explain the concept of quality improvement (QI) from a clinical perspective
- Produce a plan for starting QI activities in your clinical setting
- Describe the difference between audit and QI

MULTIPLE CHOICE QUESTIONS

1. What is quality improvement?
 - (A) The same as clinical audit
 - (B) Purely a clinical governance activity
 - (C) Boring
 - (D) A route to improving clinical care
2. Who are the people that can use QI to advance patient outcomes?
 - (A) Owners
 - (B) Veterinary surgeons and nurses
 - (C) Practice managers
 - (D) All of the above
3. What does QI in practice need to be?
 - (A) Recognized
 - (B) Recorded
 - (C) Rewarded
 - (D) All of the above

Anaesthesia: what to do when things go wrong

Elizabeth Leece and Pam Mosedale

When things go wrong under anaesthesia, the results can be catastrophic for the patient and colleagues. However, if an adverse event occurs or problems become commonplace it can be easy to neglect resolving the issues that may have resulted in the problem. Veterinary surgeons and veterinary nurses should be working together to report adverse events and conduct analysis of these events and identify potential causes. The aim can then be to eliminate future events by the introduction of changes in case management, development of guidelines in certain situations and inclusion of checklists into the daily routine to minimize adverse event occurrence and improve patient outcome. We will consider some commonly encountered problems experienced during or following anaesthesia and work through the quality improvement process to introduce simple steps to improve patient management.

This session will describe an anaesthetic significant event incident in a practice, which led to the practice looking at the evidence base and consulting specialist anaesthetists in order to learn and respond to particular anaesthetic emergencies. We will discuss the effectiveness of quality-improvement tools, their implementation in practice and barriers to their use.

KEY LEARNING OBJECTIVES

- Recognize and address clinical problems associated with anaesthesia and analgesia
- Work through quality improvement including reporting, discussion and problem solving
- Introduce guidelines and checklists to minimize the occurrence of such anaesthesia-related problems and evaluate the improvements achieved

MULTIPLE CHOICE QUESTIONS

1. How should checklists be used?
 - (A) Only for anaesthetic procedures
 - (B) Only for surgical procedures
 - (C) For any procedure where missing out steps can have consequences for patient safety
 - (D) Only for very complex procedures
2. It is the responsibility of whom to try to continuously improve the quality of care provided in the practice?
 - (A) The veterinary surgeon
 - (B) The veterinary nurse
 - (C) The practice manager
 - (D) All of the team
3. What can using a checklist achieve?
 - (A) Prevent all surgical complications
 - (B) Improve team communication
 - (C) Eliminate all human errors
 - (D) Prevent complaints