LETTER

New Zealand Emergency Medicine Network (NZEMN): collaboration for acute care research in New Zealand

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Emergency Medicine (EM) is a relatively new specialty in Aotearoa New Zealand that has come a long way in a short time. The Australasian College for Emergency Medicine (ACEM) was founded in 1984 and the first New Zealand Fellowship of the College was awarded in 1989. EM was formally recognised as a specialty by the New Zealand Medical Council in 1995 and now there are almost 200 specialists providing and supervising care to over one million patients per year. In parallel to the development of the medical workforce the nursing workforce has also embraced the specialty; the Emergency Nurses Section of the New Zealand Nursing Organisation started in 1993 and became the College of Emergency Nurses (New Zealand) in 2001.

The initial focus of any new specialty is the establishment of adequate clinical capacity and associated training. However knowledge generation, academic development, and scholarship are the true hallmarks of specialty maturation. The first Chairs of EM were conferred in 2000 at the University of Otago, Christchurch Clinical School and in 2011 at the University of Auckland, School of Medicine. Alongside formal teaching the development of research in EM has been a relatively recent phenomenon. The first article relevant to EM was published in the NZMJ in 1968. Since then there has been a steady rise in the number of articles to around 10 per year. Most of these articles have been opinion pieces, descriptive studies or non-randomised comparative studies. To date, few have been randomised controlled trials (RCT) and most of these have been small, single-centre studies. More recently, EM specialists have lead multicentre RCTs and obtained major research grants from the Health Research Council and from the National Health and Medical Research Council (Australia) to conduct research either within New Zealand, or across EDs in Australia and New Zealand.

It is now time for New Zealand’s EM community to develop a high quality evidence base for acute care through collaborative multicentre research within an established research network. This will help overcome the barriers to research and knowledge translation in emergency settings such as the balance between service delivery and research, consent, data quality, and delays in translating findings.

With this in mind a group of EM specialists with a shared vision convened the inaugural meeting of NZEMN on 6/11/2013. At this meeting the core principles of the network which form our Vision and Values were adopted (Box). The NZEMN is based on a voluntary collaboration of committed people and local champions with national representation, working together in good faith to answer questions that would be possible otherwise. While such an egalitarian structure is perhaps less stable than a central coordinating centre run by permanent staff, it is more flexible financially and more nimble from a research content perspective.

First projects

At the inaugural meeting steering committee members were asked to table ideas for projects that may be considered by the group. Twenty-one ideas were tabled, ranging from descriptive studies of the demographics and type of care provided in New Zealand emergency departments to quality and standardisation of care and studies.
After a formal selection process, two studies were chosen to be the first project for the NZEMN:

- **Project A. The New Zealand Emergency Department Airway Registry**—This project will establish the current state of airway management in New Zealand’s EDs, reporting the first pass success and adverse event rates and evaluating and promoting adherence to best practice for emergency intubations, with the aim of standardizing care across the country.

- **Project B. The Pain Relief in New Zealand Emergency Departments Study (PRiZED 1)**—The timely and adequate relief of pain has been identified as one of the most important facets of quality of care in the ED. The PRiZED 1 study will explore the timeliness and adequacy of analgesia in NZ EDs from 2006-2012 and explore the influence on the Shorter Stays in Emergency Departments target on this aspect of quality of care.
Initial funding for NZEMN has come from established departments of EM research at Christchurch, Starship and Auckland hospitals, and from the University of Auckland Lion Foundation Chair in EM. The PRiZED 1 study is funded by the Health Research Council as part of the Shorter Stays in Emergency Departments National Research Project (10-588). In the future, specific funding for projects will come primarily through competitive research grant applications and charitable trusts.

The Network has a focus on public good research and knowledge translation and will not serve as a vehicle for pharmaceutical or diagnostic company research. In order to sustain research capacity and continued growth, NZEMN will seek out broad collaborative relationships with government bodies, health boards, registered charities, and academic entities both domestic and abroad.

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