

An example of how considering different ways of framing the problem can help to clarify the problem: Improving emergency department performance - Cameroon

Background

There is widespread dissatisfaction with the service patients receive in emergency departments (EDs) in Cameroon. This is due to the poor quality of the care provided, problems with access, overcrowding, and unnecessarily prolonged stays. The Ministry of Health (MoH) is considering options for addressing this problem. This policy brief will describe the size of the problem and its causes, options for addressing the problem, barriers to implementing those options, and strategies to address those barriers.

[The following text was added after considering alternative ways of framing the problem, as shown in the table below.]

It is important to note that emergency departments are only one part of emergency medical services, which include emergency services provided by primary care providers, referrals to emergency departments, and transportation to emergency departments. We have elected to focus specifically on dissatisfaction with emergency department services in this policy brief because it is an important and well-documented problem and there are viable options to address this problem. It should not, however, be assumed that this is the only problem with emergency medical services or that the options for addressing this problem will, by themselves, address other problems with the emergency medical system.

Alternative ways of framing the problem

Framing	Advantages	Disadvantages
Dissatisfaction with ED services	This problem came to attention as a result of dissatisfaction. Data are available. This issue will resonate with the MoH and the public and blame will not be placed anywhere in particular.	Some health workers might disagree with this framing and argue instead that EDs should not be looked at in isolation from the rest of the emergency health services system. Is it possible that some important causes of the problem may not be identified if they are outside the EDs? The dissatisfaction may not be directly related to the issues that are most important.

Performance of EDs	The MoH's goal is to improve ED performance.	This focus may alienate those who work in EDs or are responsible for EDs. The issue may be even narrower than the framing above.
Quality of care provided by EDs	More focused.	Probably too narrowly focused.
Inadequate financial arrangements and organisational structures for EDs	Framing focuses attention on what may be the fundamental underlying problem	This is based on a diagnosis of the underlying factors that may not be correct; others may not have the same understanding. May leave out other important underlying factors. Options to address this may not be easy to implement.
Performance of health workers in EDs	Focuses attention on the need to improve health worker performance <i>and</i> availability of equipment and supplies in EDs. May be more tractable.	This focus may alienate those who work in EDs or who are responsible for EDs.
Poor access to EDs	Will focus attention on the need to address problems through financial arrangements and organisational structures. May make it more transparent/clear what the problem is, compared to the more general category of 'dissatisfaction'.	Leaves out other reasons for dissatisfaction. May also include other issues and be a different problem to the one the MoH has identified as the problem.
Overcrowding of EDs	May be more transparent or clearer than the more general framing of problem of 'dissatisfaction' and may be more obviously important because of the association between overcrowding and mortality.	Omits other reasons for dissatisfaction (e.g. the quality of care delivered by ED health workers, costs of care, and abuse).

Inadequate emergency services	Focuses attention on the whole system and not just EDs. Some important concerns lie outside EDs; addressing these problems may improve ED performance. Could be perceived as a bigger problem and therefore more important.	Pre-ED services are another issue and may draw attention away from ED performance. May be too big a problem to take on and it may be more difficult for the MoH to implement options to address these broader problems.
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ED = Emergency Department; MoH = Ministry of Health

Conclusions

- It was decided to frame the problem as dissatisfaction with emergency department service
- It is important to clarify in the background section why there is dissatisfaction, e.g. because of poor quality of care, overcrowding, poor access
- It should also be noted in the background section why the focus is on the issue of dissatisfaction with emergency department services rather than with inadequate emergency health services more broadly. Also, note the implications of this should be noted (as outlined in the table above)