

Triage Re-Education: Impact on Accuracy of Acuity and Care Provision

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Background

- Triage is the process of sorting and prioritizing patients requiring medical treatment.
- A primary goal is to identify high-risk or life-threatening situations.
- Emergency Severity Index (ESI) is a validated method to assign an acuity level from Level 1 (emergent) to Level 5 (non-urgent).
- ESI handbook states competency is vital to the success and accuracy of the ESI tool & requires periodic assessment of RNs participating in triage.
- The Emergency Nurses Association (ENA) reports only 60% accuracy in assigning acuity.

Purpose

The aim of this evidence-based practice project was to determine compliance with triage standards and provision of initial care before and after an educational update.

Methods

- Audited EHR for ESI Level 4 patients who required admission to hospital to identify accuracy of assigned acuity and provision of immediate care.
- Focused on over/under triaged and implementation of Triage Standardized Procedure.
- Provided additional education on ESI in February 2023 to improve acuity accuracy and encourage use of nurse-initiated orders (NIOs).
- Continued audits post intervention.

Results

- SJO ECC baseline acuity accuracy of ESI Level 4 patients who required admission was 44%.
- 100% of inaccurate ESI Level 4 patients who required admission were 'under-triaged'.
- 4-month post education saw increase to 60% average accuracy of identifying ESI Level 4 patients who required admission, with highest accuracy in June at 80%.

Discussion

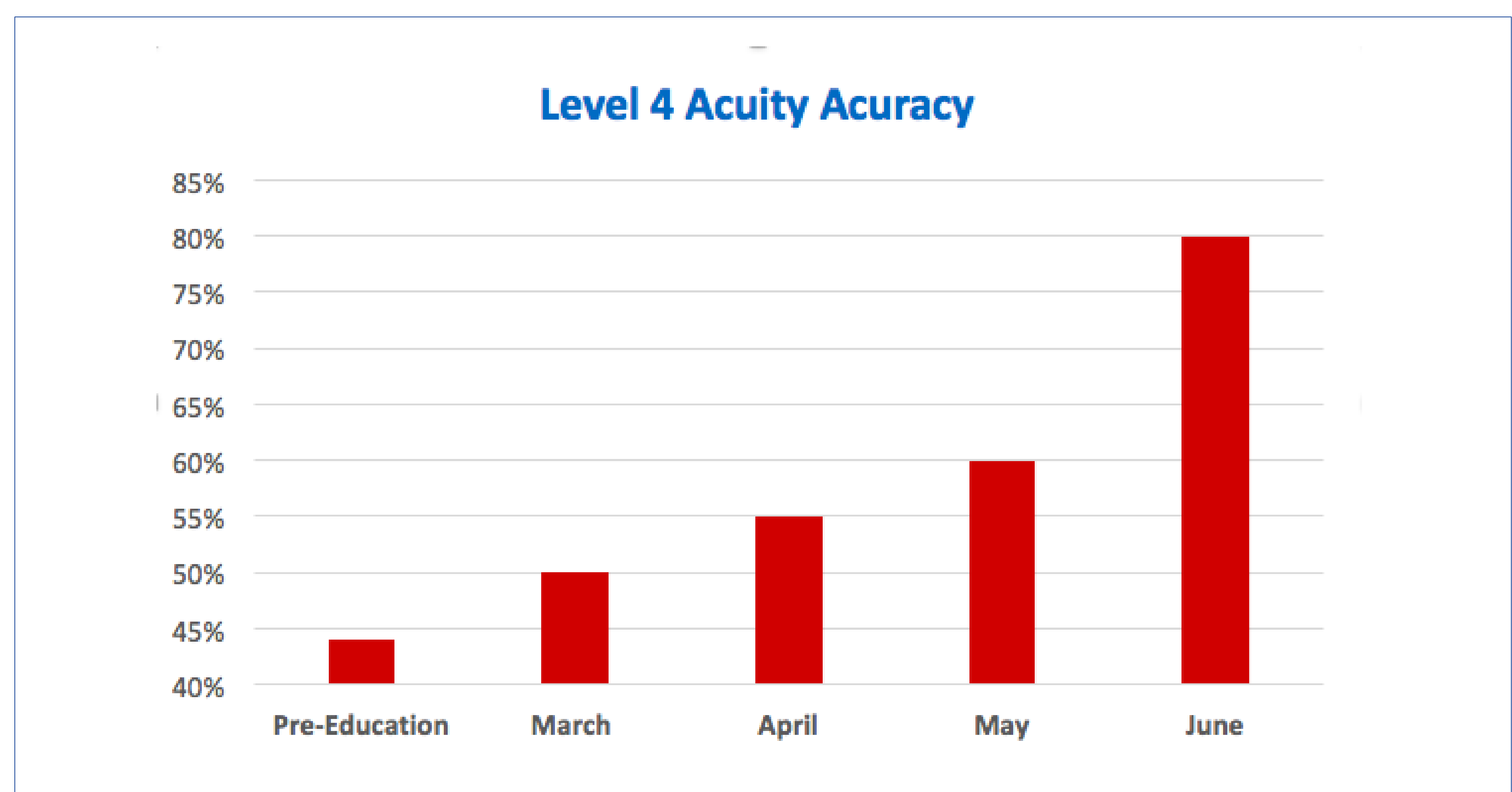
- Education and feedback from audits lead to improvement in ESI accuracy.
- Provider in Triage during high census times may reduce use of NIOs.

Implications for Practice

- New RNs need support to ensure accurate acuity assignment and use of NIOs.
- Periodic re-education for triage is necessary for ensuring high accuracy and implementation of care.

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References available upon request.