INFORMATICS:  
TeleTriage

PRESENTERS:
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QSEN Definition: Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

- Apply technology and information to support safe care
- Document and plan patient care in EHR
- Use information management tools to monitor outcomes of care
- Protect confidentiality of EHR

Recognized by the ANA as a specialty for registered nurses in 1992.

Care and attention of information began with Florence Nightingale, 1873.

- Organization of information could help decide questions.
- Show how money was being spent.
- Determine what good was really being done.
**PROBLEM: Overuse of the ED**

- Insured patients over utilizing the ED with non-emergent medical problems

- **Habitual users:** chronically ill, medical insured

- 80% of non-emergent cases treated at ED
  - Acute respiratory infections
  - Acute bronchitis
  - Otitis media
  - Acute pharyngitis
  - Headache
  - UTI
  - Lower back pain
Why is this important?

- Average wait time SBC/Riv Co 3.5hrs
- Lower quality of care especially for chronically ill
- ED visits use up financial resources
- ED beds delay holds up ambulances
- Lack of education and resources provided on primary care options
<table>
<thead>
<tr>
<th>Four key factors in driving avoidable users to ED</th>
<th>Possible strategies for reducing excess use of ED</th>
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<tbody>
<tr>
<td>i. Lack of access to medical care outside of ED</td>
<td>i. Improving access to PCP, urgent care, nurse advice lines, sources of regular care</td>
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<td>ii. Lack of advice from physicians on how to handle sudden medical conditions</td>
<td>ii. Expanding hours of service and access to primary care into evenings and weekends</td>
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<td>iii. Lack of alternatives to the ED</td>
<td>iii. Improve processes in order to handle patients more efficiently</td>
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<td>iv. Positive attitudes toward the ED</td>
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Suggestions for change

Tele-Medicine

Tele-Health

Tele-Triage Nursing
What is triage?

- Sorting of patients according to the urgency of their need of care.
- Clinical risk management.
- Patient flow begins at triage.

Three stages of triage

i. Pre-hospital

ii. Triage at scene by first responder

iii. Arrival at hospital in the ED
Potential for success

- Consult-a-nurse healthcare.
- Intervention to help alleviate overcrowding within the ED.
- Personable service to the community
- Assessment tools and guidelines
- Experienced and trained nurses
Perception of an quality care encounter is perceived as good when the staff is friendly, supportive, respectful, composed. Compliance and acceptance of the advice was increased when the caller was allowed to take an active part in the consultation. (Strom, Marklund, & Hildingh, 2009)
INTERDISCIPLINARY TEAM

- Project Manager
- Medical Staff Representative
- Department Managers
- Information Technology Representative
- Financial Officer
- Human Resource Representative
- Legal Representative
- Quality Improvement Representative
- Implementation: 6 months
- Evaluation: 1 year
- Fiscal Budget: $830,000
  - Staff
  - Training cost
  - Documentation forms
  - Standard-based protocols

- Tele-Triage Nurse Training:
  - 3-days training for 30 hours CE units
  - 2-4 weeks one-on-one training with the unit preceptor
Expert Tele-triage nurse

- Qualification:
  - A well-trained RN who excels in process skills; clinical knowledge; critical thinking; and listening skills.
  - About 5-10 years of clinical experience in medical-surgical, pediatric, or other specialty units to cover the range of patients.
  - Salaries: The cost of retaining a tele-triage is estimated at $65,804 - $78,190 in the San Bernardino county (salary.com)
MARKETING STRATEGIES

- Brochures in Doctors Office / Public Health Organizations / Schools
- Print-Advertising (Billboard & Newspaper)
- Media (Radio / Social Media)
- Addition to RCH Web Site in a banner style
- Creating partnership with medical providers / PHN
Integrate current systems and departments to add an tele-triage program to enhance hospital services within our community.

- Alternative approaches and probabilities for future use:
  - Upgrade to video and utilize modern technology such as cell phones (FaceTime) and computers (skype)
  - Interdisciplinary approach: Social workers, public health nurses....
Evaluation of consequences

A - Overuse, overcrowding concern
D - Misuse of the ED for non emergent cases results in overcrowding and waste of hospital resources.
P - Tele triage will enable immediate attention to more severe cases to the ER
I - One year of implementation

• For our one year evaluation, we will use AAPIE
CHANGE THEORY: HOW PLANNED CHANGE BECOMES PART OF A SYSTEM

- Within all aspects of change:
  - Driving forces (facilitators)
  - Restraining forces (barriers)

Diagram:
- Unfreeze stage: Ensures that employees are ready for change
- Change stage: Execute the intended change
- Refreeze stage: Ensures that the change becomes permanent
Unfreezing

People become discontented enough with status quo to support change

- Data gathering
- Assessing/diagnosing problem
- Decide if change is necessary
- Make others aware of the need for change
Identifies, plans, and implements strategies

- Develop a plan (team-based, inclusive)
- Set goals/objectives
- Identify areas of support and resistance
- Confront resistance
- Evaluate change
- Modify change, if necessary
Stabilize change so it becomes the new normal

- 3 - 6mos for change to cement
- Requires support and positive reinforcement of new behaviors
Nursing tele-triage

The future is NOW.....
References


