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Triage

Acknowledgment to Country

We are committed to supporting reconciliation between Indigenous and non-Indigenous Australian people. In keeping with the spirit of Reconciliation, we acknowledge the Aboriginal and Torres Strait Islander Peoples as the Traditional Owners of the lands. We wish to pay respect to their Elders – past, present and emerging – and acknowledge the important role Aboriginal and Torres Strait Islander people continue to play within our community.



PHN Acknowledgment

This webinar has been developed by Eastern Melbourne PHN on behalf of the Victorian PHN Alliance, which is the collective platform for the six PHNs in Victoria.

Eastern Melbourne PHN does not take responsibility arising from the use of, or reliance on, this webinar by a third party. Any such use or reliance is the sole responsibility of that party. This webinar does not constitute medical advice. If you require medical advice, please consult an appropriate medical professional.

Information contained in this presentation is current as at February 2017



Objectives

- Understand the importance of a safe and effective triage system
- Recognise the resources used for the triage process in the practice
- Recognise and consider high risk categories when triaging patients
- Understand the importance of communication and documentation in the triage process



What is triage?



Prioritising sick or injured people for treatment according to the seriousness of their condition or injury



Accreditation standards



RACGP Standards for general practices 4th edition

Criterion 1.1.1 Scheduling care opening hours

- Our practice has a flexible system that allows us to accommodate patient's clinical needs

Criterion 1.1.2 Telephone and electronic communications

- Patients of our practice are able to obtain timely advice or information related to their clinical care by telephone and electronic means (where in use) where a GP determines that this is clinically safe and that a face-to-face consultation is unnecessary for that patient

Criteria 3.2.3 Training of administrative staff

- Our administrative staff participate in training relevant to their role in the practice



Why do we need a triage system?

- How do you allocate urgent appointments in your practice?



Appointments are patient focused



A structured and consistent approach is used



Early notification of possible emergency



Decreases the risk for the practice



The right thing happens every time for every patient



Components of a triage system

- Documented policies and procedures
 - Guidelines for reception staff
 - Simple triage tool
 - Suggested actions to support management of patient
- Staff education
- Plan to review



Whole of practice approach

- An effective triage systems requires a whole team approach
- What are some examples that your team undertakes to ensure a whole team approach is taken?



Duty of care of a medical receptionist

NSW Supreme Court - Alexander vs Heise, 2001

Risk Management Tips:

- Have a P&P to support the work of receptionists when assessing patient needs
- Have clear guidelines for priority of appointments including when to refer to practice clinical staff or elsewhere for urgent treatment
- Provide staff training and regularly review triage system
- Comply with RACGP Standards on Triage
- Obtain comprehensive patient history to determine urgency
- Document relevant conversations especially if appointment made on behalf of another
- If concern about urgency or ability to accommodate appointment request, redirect to A&E or another medical practice



Triage tools

- POPGUNS
- Triage process and categories



Do you have an urgent problem?

YES

No / Don't know

The next available appt... is this ok?

NO

Record patients phone number
What is the **name** / **age** of the patient?
What is the **nature** of the problem?
What is the **duration** of the problem?
What is the **severity** of the problem?
Has the patient had any **previous major health problems**?

Select a category below

1

- Chest pain
- Breathing difficulties/trouble talking
- Facial swelling & rash
- Collapse/Altered consciousness
- Facial / limb weakness
- Extensive burns
- Sick patient you have concerns about

Call 000

Call GP / Nurse for help immediately
Retrieve patient file
Refer to Triage Support Handbook
Document

2

- Fitting
- Bleeding (persistent or heavy)
- Spinal or Head injury/trauma
- Snake Bite
- Heart Palpitations
- In labour / ruptured membranes
- Neck stiffness/altered consciousness

Go to casualty

Interrupt GP / Nurse immediately
Retrieve patient file
Refer to Triage Support Handbook
Document

3

- Unable to urinate
- Unwell Infant
- Poisoning/overdose
- Eye injuries / Chemical in the eye.
- Pain (Severe)
- Injured limb/possible fracture

Phone call through to GP / Nurse now

Advise GP / Nurse now
Retrieve patient file
Refer to Triage Support Handbook
Document

4

- Unwell child/elderly with fever, vomiting, diarrhoea or pain for >24 hours
- Pregnancy:
 - Pain or bleeding
 - reduced movement
- Abuse or assault
- Visual disturbance
- Patient or carer with extreme concern
- Psychological distress

Come to surgery now
Advise GP or nurse of call

Discuss with GP or Nurse
Retrieve patient file
Refer to Triage Support Handbook
Document

5

- Unwell child/elderly with fever, vomiting, diarrhoea or pain for <24 hours
- Rash (severe)
- Cut/Laceration
- Severe Flu like symptoms

Come to surgery today & call back if gets worse

Inform GP / Nurse within 30min.
Retrieve patient file
Refer to Triage Support Handbook
Document

6

- Adult with fever, but otherwise well
- Post-op problems
- Eye or ear infections/pain
- Adult with Continuous Vomiting and/or diarrhoea for >24 hrs

Make an appointment within 24 hours & call back if gets worse

Inform GP / Nurse
Retrieve patient file
Refer to Triage Support Handbook
Document

Consider the following:

- Bells!!! Past serious illness / Cancer, HIV, Cortisone patient/Litigation likely
- Consent For Ambulance / transfer of records
- Document Times, names, category, advice
- Elevate category if in doubt
- Safety to drive.
- Pandemic plan implementation

This guide must be used in conjunction with the Triage Support Handbook

Produced by South Eastern Health Providers Association (with acknowledgement to SENSW Popguns)

TRIAGE PROCESS & CATEGORIES

Determine Urgency by asking the following questions:

1. Who is calling? Is it the patient or someone calling on behalf of the patient?
2. Describe the problem
3. What are the symptoms?
4. How long has the person been unwell?

**THIS CHART IS
TO BE USED AS A
GUIDE ONLY**

All symptoms listed in the following table must be confirmed by the above triage process. If unsure refer the call to the doctor or nurse.

CATEGORY	ATTENTION	SYMPTOMS	ACTION – DOCTOR PRESENT	ACTION – DOCTOR NOT PRESENT
Category 1 Emergency (all ages)	IMMEDIATE	<ul style="list-style-type: none"> Person has been in serious accident Unconscious Fitting / Convulsions Breathing difficulty / respiratory distress Severe distress including chest pain or indigestion Major burn / Major injury / wound Collapse Severe and uncontrolled bleeding Looks or feels very unwell / grey / sweaty Suspected poisoning Severe allergic reaction – tongue swelling Unexpected death Acute psychiatric behaviour disorder Possibility of drug overdose 	<ul style="list-style-type: none"> Immediately refer the call to the doctor or nurse. Patient presenting in person: follow practice policy on removing patient from waiting room to treatment area. Notify doctor, do not leave patient alone. 	<ul style="list-style-type: none"> Immediately call an ambulance '000' on behalf of the patient and provide the patient's location, telephone number and an indication of the condition. For an existing patient, retrieve the patient's file and document the action in the history. Contact the doctor and advise him or her of the emergency and the action that you have taken. If not an existing patient, document event and any instructions given.
Category 2 Urgent	5-20 Minutes	<ul style="list-style-type: none"> Severe abdominal pain Haemorrhage in pregnancy (at any stage) Urine retention in males Eye injury or severe eye pain Sudden onset altered vision Allergic reaction – itchy rash Physical or emotional distress 	<ul style="list-style-type: none"> Immediately refer the call to the doctor or nurse. Patient presenting in person: follow practice policy on removing patient from waiting room to treatment area. Notify doctor, do not leave patient alone. 	<ul style="list-style-type: none"> Immediately call an ambulance '000' on behalf of the patient and provide the patient's location, telephone number and an indication of their condition. For an existing patient, retrieve the patient's file and document the action in the history. Contact the doctor and advise him or her of the emergency and the action that you have taken. If not an existing patient, document event and any instructions given.
Category 3 Soon	2 Hours	<ul style="list-style-type: none"> Persistent / severe vomiting and diarrhoea Severe persistent headache or earache Persistent high fever Foreign body – ear or nose 	<ul style="list-style-type: none"> Advise the patient to come to the practice within a 2 hour period and in clinic time and they will be seen Inform the doctor or nurse of the patient's condition and expected time of arrival. 	<ul style="list-style-type: none"> Advise the patient to go to the nearest emergency department For an existing patient, retrieve the patient's file and document the action in the history. Contact the doctor and advise him or her of the emergency and the action that you have taken. If not an existing patient, document event and any instructions given.
Category 4 Today	Same Day	<ul style="list-style-type: none"> Severe sore throat Persistent / productive cough Pain when passing urine Physical or emotional distress Fevers and chills Vomiting and Diarrhoea Children under 8 or babies presenting as unwell 	Advise the patient to come to the practice as soon as is practicable and in clinic time or as reflected by practice policy	Advise the patient to come to the practice within clinic appointment time.
Category 5 Next day	1-2 days	<ul style="list-style-type: none"> Presence of undiagnosed lump or alteration in existing lump (evaluate level of distress) Regular screening & / or review Repeat prescriptions Vaccinations Other non-urgent matters 	Advise the patient to attend the practice within a 24-48 hour period.	Advise the patient to attend the practice within a 24-48 hour period and they will be seen.

Use of triage tool, symptom selection and categories

When customising the triage tool, a practice needs to determine:

- What presenting symptoms are to be included on tool
- A timeframe for the person to be seen in according to the urgency
- The recommended action, and the service that the person need to be referred to

It is essential that the clinical staff have input into the tool.

If not confident or unsure of your decision, always defer to your clinical team in your practice.



Triage process

The steps involved include:

- Screening questions, including face to face assessment
- Prioritise according to the medical need using triage tool
- General actions recommended
- Management of the patient
- Documentation
- Disclaimer



Screening questions

“In order for us to determine how to best assist you with a timely appointment, reception staff may need to ask you a few questions about your problem”



Screening questions

- Do you have an urgent problem?
- Who is calling?
- What is the age of the patient?
- What is the nature of the problem?
- What is the duration of the problem?
- What is the severity of the problem?
- Do you have any major health problems?



Verbal and non-verbal cues

Listen carefully and ask yourself:

- Does this person look unwell?
- Do they look different today?

Consider:

- Body language
- Facial expressions
- Speech
- Skin colour
- Behaviour



Communication skills & strategies

- Listen
- Verbal and non-verbal communication
- Angry callers
 - **Hear them out**
 - **Empathise**
 - **Apologise**
 - **Take action**
- Use of disclaimer



Closing the call and use of the disclaimer

“Please take action if any of your symptoms worsen or change. This may include calling back for an earlier appointment, going to emergency or calling 000”



Patients in the waiting room

Please notify reception if you are experiencing:

- Chest Pain
- Difficulty Breathing
- Dizziness
- Severe Pain



Recommended Actions

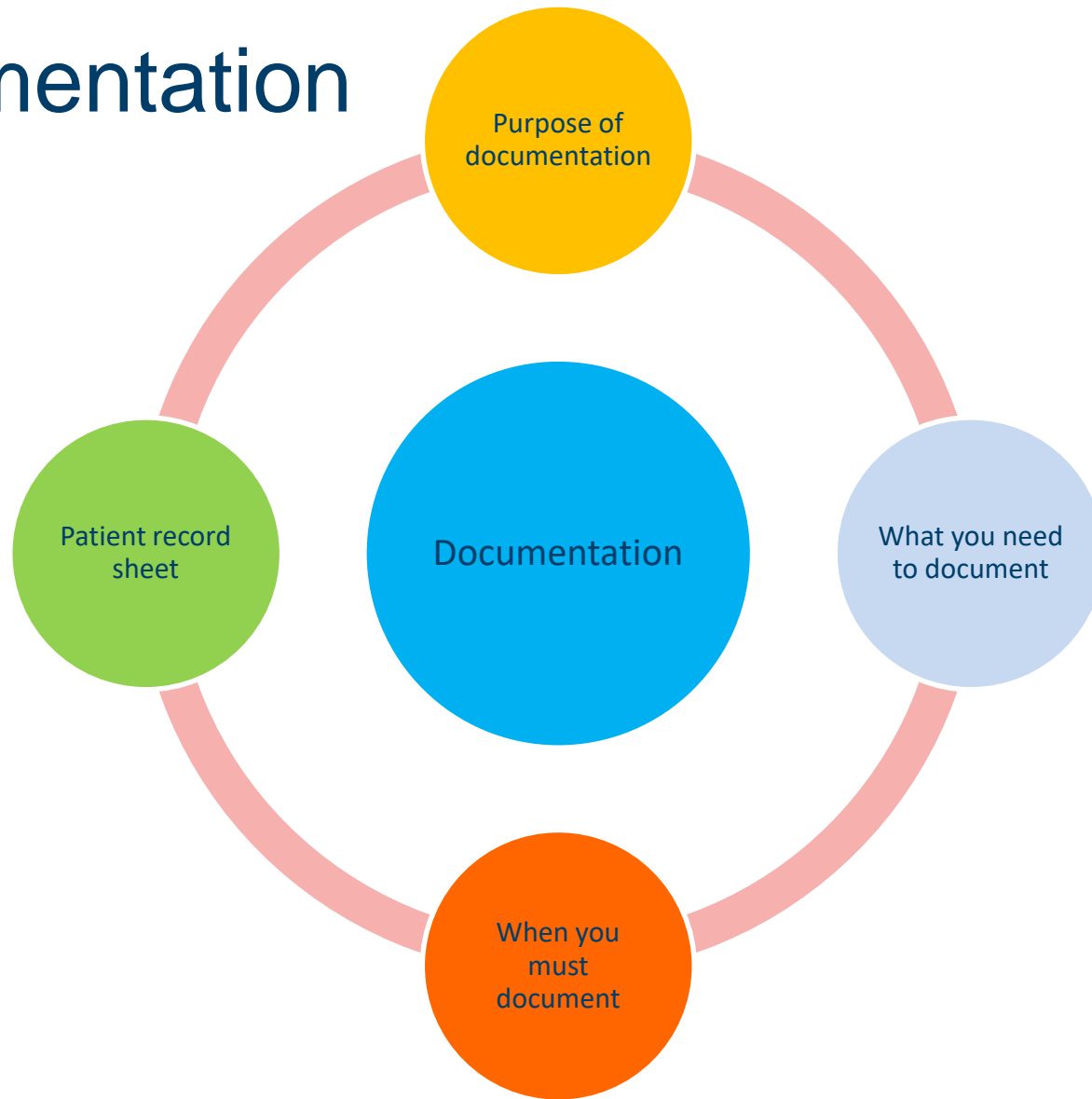
- Reflect the urgency of presenting symptoms. Such as:
- Calling an ambulance
- Directing a patient to the Emergency Department
- Discussing the problem with a GP or nurse immediately
- Discussion with the GP and/or nurse within 30 minutes
- Advising the patient to come to the practice now and informing the clinical staff when the patient arrives
- Making an appointment for the patient today
- Making an appointment for the patient within 24 hours.



Management of the patient



Documentation



Triage Patient Contact Template

[INSERT PRACTICE LETTERHEAD]		
Patient triage contact form		
Date of contact:	Time:	Staff who received contact:
Patient Name:		Patient D.O.B:
Patient Phone Number:		Regular patient: YES / NO
Patient address:		Emergency contact:
Patient: Telephoned <input type="checkbox"/> Presented <input type="checkbox"/>		
Symptoms described:		
Triage category assigned: Emergency / Urgent / Interrupt / Today / 24hrs		
Actions recommended:		
Further notes:		

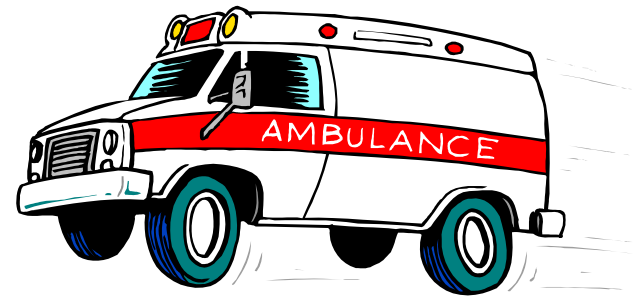
Vulnerable Patients

- Infants under 6 months
- Children: With a chronic illness; who have a history of prematurity; or who have failed to respond to treatment
- Older population (Stroke patients - FAST)
- Immunosuppressed patients (eg: Chemotherapy)
- Pregnant women
- Patients with unstable and stable chronic disease (eg: uncontrolled diabetes, COPD)
- Patients who have had recent surgery



Ambulance information

- **People covered by ambulance:**
 - Health Care Card and Pension Card Holders
 - Ambulance subscription
 - Private health cover which includes ambulance cover
 - DVA Gold card holders
- **Non- emergency transport:**
 - Stretcher 1300 366 313
 - Walker/wheelchair 1300 360 929



Confidentiality

- Remember confidentiality when speaking with patients
- Patients are more likely to provide you with more detail regarding their condition if they know their information is confidential



Stroke/Heart Foundation on line learning module information

- BeAWARE of warning signs of heart attack and stroke training -

<http://heartfoundation.org.au/professionals/online-learning>



Summary



Thank you for watching and listening

Feedback or further support regarding this webinar should be directed to your local PHN.

