

Place That Patient: An alternative way to educate nurses

Theresa Crowell MSN, RN, CEN | McKenzie Williams MSN, RN, CEN, RN-BC



Synthesis of Evidence

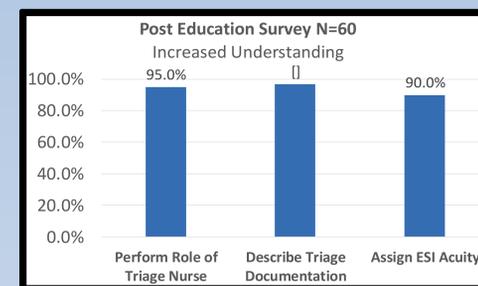
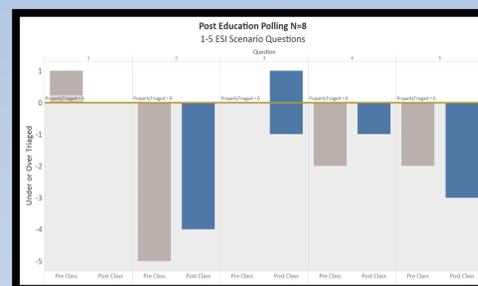
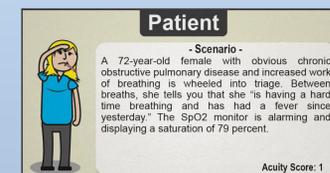
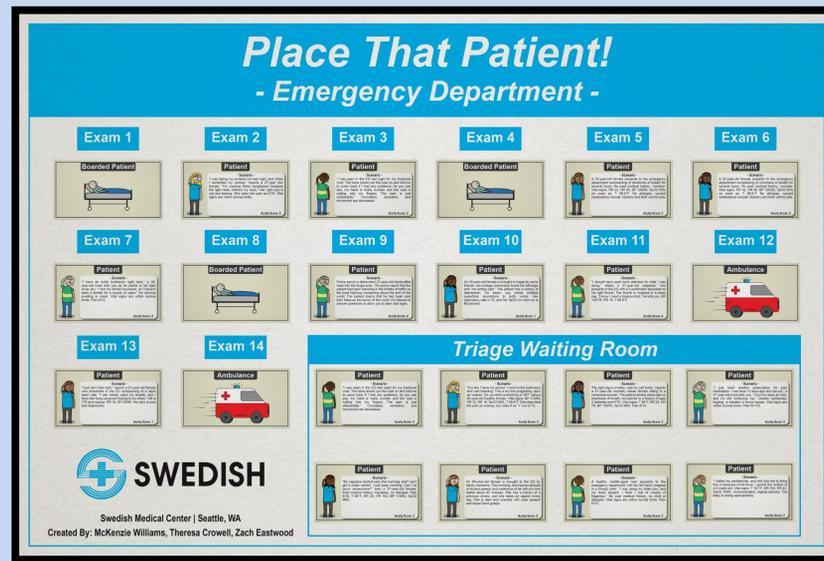
- The nature of triage in a busy emergency department (ED) is inherent with potential risks.
- Literature demonstrates comprehensive training ensures patients in need of care are prioritized, resources are delegated, and patients are placed in appropriate care areas leading to safer patient care.

Purpose

- The objective of the project is to facilitate triage education for experienced ED nurses across seven emergency departments.
- The training will support nurses in applying the principles of sorting, prioritizing, and utilizing the Emergency Severity Index (ESI) tool.

Design

- Nurses attend a two hour class composed of didactic teaching which is reinforced with an interactive triage game.
- Triage game: **Place That Patient!**
 - Nurses demonstrate acuity assignment
 - Patient placement & prioritization
 - Critical thinking
 - Interactive discussion
- Participants complete a pre/post survey looking at three separate categories: role of triage nurse, documentation, and Emergency Severity Index (ESI) a five-level triage algorithm.
- Ranking their confidence using a 5 point Likert scale:
 1. Representing no understanding
 2. Little understanding
 3. Moderate understanding
 4. Good understanding
 5. Complete understanding
- Participants answers five case studies using electronic polling pre and post class to evaluate learning.



Setting

- Pacific Northwest Healthcare Provider operating five community hospitals along with two stand-alone ED's in a metropolitan area.
- Combined ED visits for 2017 was 228,611

Results

- Nurse's gained confidence in documentation, ESI assignment, and the role of triage nurse.
- The number (N) of the polling is comparatively small to the N of nurses perceived understanding.
- Preliminary finding with pre/post polling demonstrates nurses are under-triaging.

Implications

- A gap exists between nurse's perception of understanding and demonstration of knowledge.
- Due to technical difficulties the electronic polling to gather objective data was delayed and the number (N) is small compared to the subjective N.
- Future cohorts will focus on increasing the N of the polling to see if the correlation between perceived and accuracy of ESI assignment is demonstrated.

References

Desseyne, P. (2017). Triage is a process, not a destination. *Journal of Emergency Nursing*, 43(4), 375-377. doi:10.1016/j.jen.2017.03.015

Gilboy, N., Tanabe, P. Travers, D., & Rosenau, A.M. (2012). *Emergency severity index (ESI): A triage tool for emergency department care (version 4): Implementation handbook*. Retrieved from <https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/systems/hospital/esi/esihandbk.pdf>

Stanfield, L. M. (2015). Clinical decision making in triage: An integrative review. *Journal of Emergency Nursing*, 41(5), 396-403. doi:10.1016/j.jen.2015.02.003

Stone, E., & Wolf, L. (2017). Triage qualifications and competency. (2017). *Journal of Emergency Nursing*, 43(6), 571-574. doi:10.1016/j.jen.2017.08.008

Terenzi, C. (2000). The triage game. *Journal of Emergency Nursing*, 26(1), 66-69. doi:10.1016/s0099-1767(00)90021-7

Questions contact
theresa.crowell@Swedish.org mckenzie.williams@Swedish.org