Accuracy of Triage Scores Using the Five-Level Triage System
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Problem:
Making correct decisions with minimal information in a timely manner is an ongoing challenge for emergency center (EC) triage nurses. The Emergency Severity Index (ESI) Five-Level Triage tool is used by EC nurses to assist with decision-making to streamline patient admissions to the most appropriate setting for emergency treatment. Triage nurses understand that although triage is not exact science, it is imperative that they make the best possible decisions when using the ESI to achieve the best outcomes. Incorrect ESI assignment has been identified as a primary cause of barriers to EC throughput. Most importantly, when triage levels are not assigned appropriately an increased risk for undesirable patient outcomes in presented.

Evidence:
Implementation of an evidence based practice (EBP) guideline for accurate supports patient safety and EC throughput.

Strategy:
A workgroup conducted an EBP project to evaluate the accuracy of scoring by triage nurses using ESI during initial assessment at a Level 3 Trauma Center. A process chart and a cause and effect diagram were created to evaluate current triage practices. A literature review was conducted and evidence summary tables were developed to identify current best practice recommendations for triage nursing.

Practice Change:
Based on new evidence, a guideline was developed to include an additional triage level at ESI 3. Assessment criteria were developed for Levels accuracy of patients triaged at Level 3A and 3B and the new system was implemented. Admissions for patients assessed at Level 3A are prioritized over Level 3B assessments.

Evaluation:
Triage records and medical record reviews were conducted to determine the accuracy of triage assignments.

Results:
Accuracy of triage assignments made prior to implementation of the new guideline was at 66%, compared to 85% post implementation.

Recommendations:
Understanding and utilizing the EBP process is essential to success when implementing a practice change.
Lessons Learned:
Implementation of an EBP guideline supported improvement of current nursing triage practices and supported achievement of best possible patient outcomes.

Bibliography: