Does having a triage nurse change our practice?

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Background
As patient's live longer with multi-dimensional health and end of life care needs, palliative care provisions is becoming increasingly complex. Demands on our community outreach team are increasing; therefore new models of care are needed.

Aim
To assess the impact a triage nurse role would have on the quality of service delivered by our community outreach team.

Method
A time and motion study to capture the team's activities in a typical working week
The secondment of an experienced nurse from our inpatient unit to work with the outreach team as a triage nurse
Repeat the time and motion study two months after the introduction of the triage nurse role
Questionnaires were sent to, and completed by, hospice colleagues and members of the community team

Results
A reduction in time spent on the phone facilitated:
- Regular case reviews to prioritise care
- Opportunity to explore research
- Opportunity to provide additional research
- Recognised boost to staff welfare

It was demonstrated that following the review and restructure of the service we were able to respond to patient needs the same day enabling patients to remain at home

Conclusion
Triage is the process of prioritising patient care based on the severity and complexity of their situation and has been found to enable services to respond promptly to patient demand. Feedback from the questionnaires was universally positive.

Examples
"Really nice to hear a voice, not an answer phone" - patient
"Response is immediate, confident and knowledgeable, very helpful" - social worker

This study has demonstrated that the addition of a triage nurse working with the hospice outreach team has changed practice and enabled the beginnings of a uniformed, structured approach - enhancing channels of communication; developing professional relationships whilst being flexible enough to meet the ever-changing needs of the local population.

References