



Remote Triage Report Haygarth/Crickhowell Practice August 2020

Following the implementation of the successful scheduled Triage service in the Haygarth practice, the next phase was to look at ways to expand the service within the cluster and the current compliment of Triage Nurses. The aim of providing remote access across sites is to demonstrate that assistance can be available to provide sustainability support to practices, or to enable gap fill within the current triage systems.

Remote Triage

Both the Haygarth and Crickhowell practices have supported Red Kite with the implementation and pilot of remote Nurse Triage within the cluster for on the day unscheduled patient requests. Nurses based in the Haygarth practice have access to the clinical system in the Crickhowell practice and are able to triage the patients from base. Nurses have access via telephone to a daily Duty Doctor for clinical advice and support.

Remote Triage follows the same principles of the conventional Triage models ensuring that each patient ALWAYS sees the most appropriate clinician within a suitable timescale and that patients are:

- given a routine appointment with a GP where necessary
- treated and/or given advice by the nurse
- encouraged to self-manage
- directed to a pharmacist (practice or community)
- directed to Optician, Physiotherapist or other healthcare professional

Preliminary work

Work and analysis was undertaken by Red Kite prior to implementation of the service to ensure a smooth and safe service for patients. This included:

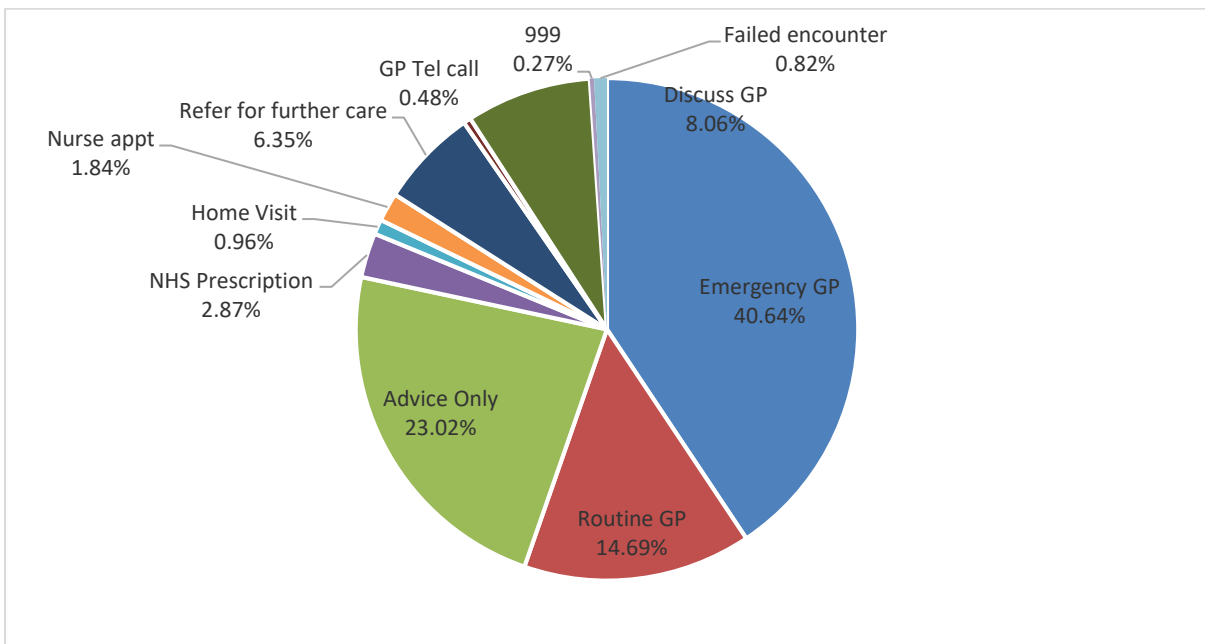
- Several meetings between practices and Red Kite to formulate conditional plans
- A service library that would be available to Nurses undertaking the Triage to safely signpost patients
- Nurse visits

- Set up and provision of EMIS templates and clinical access
- Nurse training
- Shared care agreements, patient information and GDPR
- Collation of reports, outcomes and clinical review by both practices

Outcomes

1,464 instances relating to **1,415 patients** have been recorded during the pilot and 100% of outcomes have been recorded for these patients

23.02%	337	Advice only
1.84%	27	Nurse appointment
14.69%	215	Routine GP appointment
40.64%	595	Emergency appointment with GP
2.87%	42	NHS prescription
6.35%	93	Referral for further care (e.g. optician, bloods etc.)
0.96%	14	GP Home Visit
0.48%	7	GP Tel call
8.06%	118	Discuss GP
0.27%	4	Advised 999
0.82%	12	Failed Encounter
Total:	1,464	Clinical Outcomes



Results

Evaluation of the clinical outcomes has shown that **59.36%** of all patients requesting to see a GP urgently have been signposted to other appropriate services other than an emergency GP appointment. **23.02%** of patients requesting an appointment have required **ADVICE ONLY** from the Nurse, with **14.69%** requiring a routine GP appointment.

Positives

- Increased capacity to the host practice, improving access for patients requesting on the day care
- Outcomes are in line with conventional triage services, showing that base has little impact on triage outcomes
- Improving cluster relationships between practices
- Opportunity to offer sustainability to support within a cluster and beyond
- Winter pressures – Potential for service to be set up ready to be implemented quickly to practices facing increased pressure of staffing issues
- Potential as a future model for out of hours' service provision
- Positive feedback from across the cluster regarding the outcomes and success of the pilot

Negatives

- Current limited resources in terms of trained staff who can supply the service and inability to increase capacity
- Face to face patient contact for the triage Nurses is not possible with this model

Summary

The Nurses supplying the REMOTE TRIAGE have developed and responded to the challenge of providing cover practice to practice magnificently. They continue to be motivated to self-learn, build relationships across the cluster and deserve the recognition for their hard work, dedication and contribution to the success of the pilot.

The Nurse Triage pilot has allowed the practices to introduce the concept of telephone first appointments and an alternative way of working compared to the traditional appointment system within primary care. The collection of clinical outcomes has proved invaluable in assessing the success of the Nurse triage Powys.

The introduction of **Telephone First Triage** in to the South locality and in particular the successful introduction of total and remote triage has significantly improved patient access, patient care and the sustainability of primary care services in South Powys. We have been able to show that remote triage services are able to support and sustain current practices, and also show the potential for offering help and support within other areas in addition to on the day services. Practices report that they are experiencing less abusive behavior from patients and GP's are able to provide continuity of care and appropriate, timely follow-up. The Triage Nurses have embraced the changes, are able to use a wider range of their clinical skills and are enjoying their extended roles.

In conclusion, the evidence has shown that telephone first Triage in all forms is a fundamental part of the Wales Primary Care Model.