

Appendix to Stine Engebretsen, Olav Røise, Lis Ribu: Triage in Norwegian emergency departments.
Journal of the Norwegian Medical Association 2013; 133: 285-9.
This appendix is an addendum to the article and has not been processed editorially.



Questionnaire:

***Triage in Norwegian emergency departments
(EDs)***

Information on completion of the questionnaire

Assess the questions in the order in which they appear. Even though some questions may appear to be similar, it is important that you respond to all of them.

Please respond to each question by selecting one or several alternatives. Some of the questions are open-ended or have a field for entering comments; here you must respond by entering text. Instructions are provided in the questionnaire.

An estimated 15 minutes will be required to complete the form. The responses will be collected by telephone at a time to be agreed; this is estimated to require approximately 30 minutes.

If something appears unclear, this can be clarified during the telephone interview, or you can contact Stine Engebretsen by mobile telephone 41126253.

Thank you for taking the time to complete the questionnaire!

Questions concerning the EDs'/the hospital's demographics:

1. How many emergency patients did the ED receive in 2009 (or in 2008 if the figures for 2009 are not yet available)?

Write the number (if you are uncertain, write the approximate number): _____

2. How many of these were treated as outpatients or sent home from the ED? (If the ED operates its own outpatient clinic, please enter these figures separately)

Write the number (if you are uncertain, write the approximate number):

3. How many people live in the hospital's catchment area?

Write the number (if you are uncertain, write the approximate number): _____

4. What functions does the hospital fill?
(Cross all that apply)

- Local hospital
- University hospital
- Other function (please specify):

5. Does the ED perform tasks other than receiving emergency patients?

(Cross all that apply)

- Receiving waiting-list patients
- Operating an acute or injury outpatient clinic
- Operating a regular outpatient clinic
- Operating medical on-call services
- Operating an emergency medical dispatch centre
- Operating an observation ward
- Other roles (please specify):

Questions concerning assessment of level of urgency / prioritisation of patients:

6. On what basis are patients commonly assessed with regard to degree of urgency?

(Cross all that apply)

- No need for assessment of degree of urgency, all patients are seen by a doctor immediately
- Patients are not assessed with regard to degree of urgency
- Arrival time/waiting time
- Clinical assessment based on the patient's signs and symptoms
- Preliminary diagnosis / presenting complaint
- Other basis (please specify):

- Don't know

If the patients are not assessed with regard to their level of urgency, you need not answer any more questions. Thank you for your kind assistance!

7. Which term is used in your ED to denote assessment of patients with regard to their level of urgency?

(Cross all that apply)

- Triage
- Assessment of level of urgency
- Sorting
- Prioritisation
- Other term (please specify): _____
- No special term

In the following, the term “triage” will be used to denote assessment of patients with regard to their level of urgency.

8. Is triaging of patients undertaken systematically in your department?

(Cross one)

- Yes
- No
- No, but a systematic approach is being planned
- Don't know

Comments:

What is the reason for implementation of triage?

(Cross all that apply)

- An increasing number of patients relative to personnel resources
- An increasing number of patients relative to available space
- To ensure that the most ill patients are seen first
- To ensure equality in the approach to and assessment of all patients
- To achieve a better flow of patients
- To achieve better use of resources
- Experienced adverse events
- Shortcomings reported by the Board of Health Supervision after inspection
- Don't know
- Other reasons (please specify):

9. How many levels of urgency are being used for triage?

(Circle the appropriate number)

1 2 3 4 5 6 7 8 9 10 >10

10. Please describe in your own words the time aspect for each level of urgency (For example: level 1: immediate medical attention; Level 2: medical attention within 15 minutes etc):

11. How are the levels of urgency being documented?

(Cross all that apply)

- Not documented
- Figures
- Letters
- Colours
- Other (please specify):

12. Which triage scale is being used? (respond if relevant)

(Cross one)

Is used:

Is foreseen:

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Manchester Triage Scale (MTS) |
| <input type="checkbox"/> | <input type="checkbox"/> | Stavanger University Hospital's triage scale |
| <input type="checkbox"/> | <input type="checkbox"/> | Medical Emergency and Treatment Scale (METTS) |
| <input type="checkbox"/> | <input type="checkbox"/> | Emergency Severity Index (ESI) |
| <input type="checkbox"/> | <input type="checkbox"/> | Australasian Triage Scale (ATS) |
| <input type="checkbox"/> | <input type="checkbox"/> | Canadian Emergency Department Triage and Acuity Scale (CTAS) |
| <input type="checkbox"/> | <input type="checkbox"/> | Other scale (please describe briefly): |

13. Describe any changes that you have introduced to the triage scale (respond if relevant, also if any such changes are foreseen):

14. What experience has the ED had from the use of this scale? (respond if relevant)

Experience refers to, for example, user-friendliness, time use, degree of over- and under-triaging etc.

15. Does the personnel have access to other systems for decision-making support?

“Decision-making support” refers to, for example, guidelines or algorithms that can guide the staff members in making decisions regarding a patient’s level of urgency.

(Cross all that apply)

- Yes, on paper
- Yes, in electronic format
- No
- Don’t know

If yes, could you please briefly describe the kind of data that are embedded in the system for decision-making support?

Data refers to, for example, the patient’s signs and symptoms, the patient’s vital signs, the patient’s preliminary diagnosis/presenting complaint etc.

16. Does the department have any specific goals with regard to triage?

(Cross all that apply, add comments in the field provided as appropriate)

- No
- Don't know
- Yes, specification of how quickly after arrival the patient should be triaged
- Yes, specification of how long the triage should take
- Yes, a level of urgency should be documented for all patients
- Other goals (please specify):

Comments:

17. How does the department evaluate these goals?

(Cross one)

- Not relevant
- With the aid of statistics from the hospital's ICT systems (the administrative system for patients, patient records etc.)
- With the aid of manual measurement of data from paper-based patient records/other paper-based records
- Other methods (please specify):

18. Are there any guidelines as to the kind of personnel who should perform triage?

(Cross one)

- Yes, local guidelines
- Yes, regional guidelines
- Don't know
- No

19. Which personnel triages the following patients:

(Cross two or more)

“Walking” refers to patients who arrive at the ED by themselves, while “supine” refers to patients who arrive by ambulance.

Personnel	Mode of arrival	
	Walking	Supine
Doctor		
Nurse		
Assistant nurse		
Health secretary		
Other (specify in words)		

20. Which requirements does the department specify with regard to the training and experience of its triage personnel? (Cross all that apply. Specify with figures or text where appropriate)

Triage personnel	Years of experience (specify)	Years of ED experience (specify)	Triage training in the department	post-graduate training (specify)	Other (specify)
Doctor					
Nurse					
Ass. nurse					
Health secretary					
Others (specify)					

Comments:

21. What does the department's triage training consist of? (Respond if relevant)

(Cross all that apply, specify in text as appropriate. Please specify the duration of the training wherever relevant)

Triage personnel	Classroom training	Simulation/ Case practice	E-learning	Peer training	Other (specify)
Doctor					
Nurse					
Ass. nurse					
Health					

secretary					
Other					

Comments:

22. Is the ED at any time staffed with designated triage personnel?

“Designated triage personnel” refers to personnel who have been assigned the task of performing triage during the duty period in question.

(Cross one)

- Yes, they perform only triage during the duty period in question
- Yes, but they also perform tasks other than triage during the duty period in question
- No
- Don't know

23. At what times of the day is the ED staffed with designated triage personnel? (Respond if relevant)

(Cross all that apply and specify the number of staff)

Weekdays:

Triage personnel	Morning	Afternoon	Evening	Night
Doctor				
Nurse				
Assistant nurse				
Health secretary				
Others (Specify in text)				

Weekends:

Triage personnel	Morning	Afternoon	Evening	Night
Doctor				
Nurse				
Assistant nurse				
Health secretary				
Others (Specify in text)				

Comments:

24. Which physical triage facilities are available to the personnel?

(Cross all that apply, specify in text as appropriate. Add comments in the field provided as needed).

Triage personnel	Designated triage area/ room	Unoccupied examination room	Corridor/ hall	Temporarily available space	Other (please specify)
Doctor					
Nurse					
Assistant nurse					
Health secretary					
Other					

Comments:

25. What sort of equipment is available in the triage area? (Respond if relevant)

(Cross all that apply)

- Patient monitoring equipment
- Manual blood pressure gauge
- Oxygen saturation measurement device
- Temperature reading devices
- ECG
- Blood-sugar monitoring devices
- Bladder scanner
- Peripheral venous catheters
- IV fluids
- Urinary catheters
- Other (please specify):

- Slings
- Dressings
- Blood-sample equipment
- Underpads
- Emesis basins
- Personal computer
- Sink
- Hand disinfectants
- Gloves
- Masks

26. Which of the following tasks are the personnel performing as part of triage?

(Cross all that apply, specify in text as appropriate)

Tasks:	Secretary	Ass. nurse	Nurse	Doctor	Other (Spec.)
Examine main complaint					
Examine vital signs					
Suture					
Request blood samples					
Draw blood samples					
Perform bladder scans					
Request x-ray examinations					
Insert urinary catheters					
Insert PVC					
Take ECG					
Initiate IV fluid					
Administer analgesics					
Perform blood gas analysis					
Administer tetanus vaccine					
Initiate team response					
Other (specify)					

Thanks for taking the time to respond to the questionnaire!