

Accuracy of Triage in Service in The Emergency Department (Literature Review)

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ABSTRACT

Service accuracy is the minimum standard of service that must be achieved by nurses in the emergency room, so that proper triage implementation is needed. Triage is the classification of patients based on the level of emergency by prioritising actions on airway (A), breathing (B), and circulation (C) disorders by considering facilities, human resources and the probability of patient life. The literature search in this literature review uses six databases with high and medium quality criteria, namely scient driect, IEEG, cedekia, Sci-hub, ProQuest, Pubmed. For previous studies using correlational analytics with a cross-sectional study approach, descriptive: combination (mixed methods) with sequential explanatory design. cross sectional. Check Prisma to guide this review. Titles, abstracts, full text and methodology were assessed for study eligibility. Data were tabulated and analysed narratively. Results: Nine journal literature met the inclusion criteria, with the major theme of triage accuracy in the Emergency Department. There were three journals analysing the accuracy of triage implementation, and four journals relating to triage accuracy. Factors that often appear in triage accuracy include nurses' understanding of triage, motivation and workload. Knowledge is one of the most important factors in the accuracy of triage implementation. Proper implementation of triage can reduce morbidity, disability, and mortality so as to improve service quality and customer satisfaction.

Keywords: Accuracy of triage.

INTRODUCTION

Speed and accuracy of service is the minimum standard of service that must be achieved by officers, especially nurses in the emergency room. For this reason, the implementation of triage is needed. Triage is the classification of patients based on the level of emergency by prioritising the action of disturbances in airway (A), breathing (B), and circulation (C) by considering facilities, human resources and the probability of patient life. The triage process must be fast and short. The aim of this process is to gather enough information about the patient to make a triage decision. The ultimate goal is for the patient to receive an initial triage assessment within 5 minutes of arrival at the ED. If the triage nurse finds life-threatening problems; Airway, breathing, circulation, the nurse immediately initiates the necessary actions and the patient is transferred to the treatment room

(kurniaty Amelia, ddk, 2018). Emergency services are said to be late if the service to emergency patients and / or emergency is served by Hospital Emergency Room officers > 15 minutes, causing poor service quality (Hospital KPPGD Figures, 2012). Factors that affect the accuracy of triage such as internal factors (reflecting nurse skills and personal capacity) and external factors (reflecting the work environment, including high workload, shift arrangements, patient's clinical condition, and patient's clinical history). If these factors are ignored, then the implementation of triage is not optimal so that it can cause errors in decision making, and result in disability and even permanent disability for patients (Gerdtz & Bucknall, 2000) cited in (Ainiyah, Ahsan, Fathoni, 2015).

METHOD

The literature search in this literature review uses six databases with high and medium quality criteria, namely scient direct, IEEG, cedekia, Sci-hub, ProQuest, Pubmed. For previous studies using correlational analytics with a cross-sectional study approach, descriptive, : combination (mixed methods) with sequential explanatory design.cross sectional. Check Prisma to guide this review. Title, abstract, full text and methodology were assessed for study eligibility. Data tabulation and narrative analysis of the research findings were conducted.

RESULTS

Nine journal literature met the inclusion criteria, with the major theme of the accuracy of triage implementation in the Emergency Department. Three journals analysed the accuracy of triage implementation, four journals analysed the relationship between triage accuracy. Factors that often arise in the accuracy of the implementation of triage in the implementation of triage are also influenced by various factors including nurses' knowledge of triage, work motivation and workload. Knowledge is one of the most important factors in the accuracy of triage implementation Syarifah, Siti, 2018.

DISCUSSION

Factors that often arise in the accuracy of triage implementation are also influenced by various factors including nurses' knowledge of triage, work motivation and workload. Knowledge is one of the most important factors in the accuracy of triage implementation (Syarifah, Siti, 2018).

Knowledge is one of the most important factors in the accuracy of triage implementation Syarifah, Siti, 2018. In decision making, there are factors that influence nurses in carrying out triage, including internal factors including psychomotor abilities and personal capacity of nurses, while external factors are the work environment in the emergency room which tends to be overcrowded (Gerdtz And Bucknall, 2001) cited in (Ardiyani, 2019).

The results of an interview with the deputy head of the room said that the problem that often arises during triage is an error in determination such as a patient who should have a red mark but is given a yellow mark, this occurs due to inaccurate data in the

assessment and also due to fatigue factors with the large number of patients who come to the emergency room (Syarifah, Siti, 2018). Uptriage is carried out when a patient's condition suddenly worsens or when there is doubt in determining the level of severity (triage). In doing triage, mistakes have occurred, especially in many patient visits, but these mistakes were immediately carried out uptriage (Ardian Amri, Menkher Manjas, Hardisman, 2019). The optimal implementation of triage, seen in terms of the quality of nurses, all of whom have attended BTCLS, and PPGD, then the equipment factor is related to the optimal implementation of triage with the availability of good facilities and infrastructure (Syarifah, Siti, 2018). In addition, years of work experience and nurses with the highest level of education are also skilled in triage (Saeed Abdulaziz Bin. Dkk, 2017). . In decision making, there are factors that influence nurses in carrying out triage, including internal factors including psychomotor abilities and personal capacity of nurses, while external factors are the work environment in the emergency room which tends to be overcrowded (Gerdtz And Bucknall, 2001) cited in the journal (Ardiyani, 2019).

Triage in every hospital should use SNAR 2018 but it is not yet valid in all hospitals. patient classification is in accordance with the theoretical study because it is based on the level of emergency by providing 4 levels of triage based on triage categories so that disturbances in airway (A), breathing (B), and circulation (C) can be handled quickly and appropriately. Emergency services have now begun to develop a new development model in terms of triage. Initially, hospital triage developed based on disaster triage, using colours. But now, the use of triage in hospitals is developing using a number scale, such as the Australian Triage System (ATS), Canadian Triage System (CTAS), Manchester Triage System (MTS), Emergency Severity Index (ESI), South African Triage System (SATS), and Patient Acuity Category Scale (PATS) (Khairina I, Malini H, Huriani E, 2018).

CONCLUSION

Proper implementation of triage can reduce morbidity, disability, and mortality so as to improve service quality and increase patient satisfaction. The implementation of triage in Indonesia has been carried out precisely, quickly and carefully. Initially, hospital triage was based on disaster triage, namely the Simple Triage and Rapid Treatment (START) Method. But now it uses 5-level triage

SUGGESTIONS

For Health Institutions

It is expected that in the implementation of triage when serving patients with yellow or green triage, there are patients who come with red triage / P1 health workers still carry out therapeutic communication and explain triage procedures to patients so that patients do not judge the performance of health workers.

For Educational Institutions

It is hoped that a literature review study guidebook will be made so that researchers do not find it difficult to compile chapters 3 and 4.

For Further Researchers

Due to the covid-19 pandemic so that researchers cannot make direct observations for the implementation of triage so it is hoped that future researchers will examine the accuracy of the implementation of triage in the emergency room and therapeutic communication in triage so as to increase patient satisfaction.

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