



A new pathway for minor injury patients referred to the
Emergency Department by their General Practitioner

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Emergency Department

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Background. The Injury Unit.

- Seven days per week - 08.30 to 2030
- Primarily run by Advanced Nurse Practitioners
- In 2017 > 7000 patients was seen by the ANPs
- Adults and Children
- Self referred and GP referred patients

All Patients went through Triage

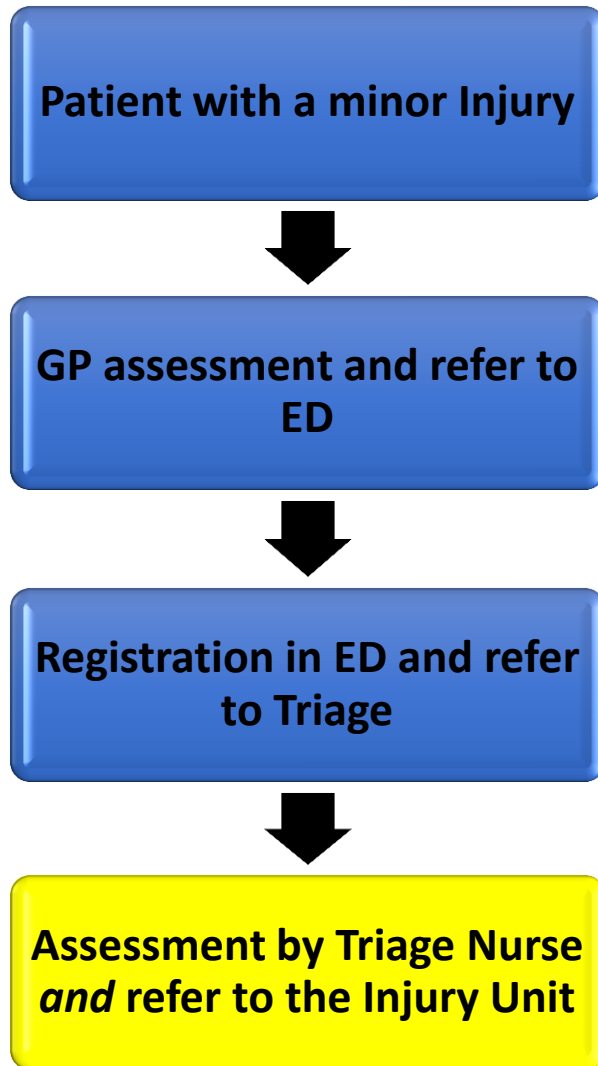




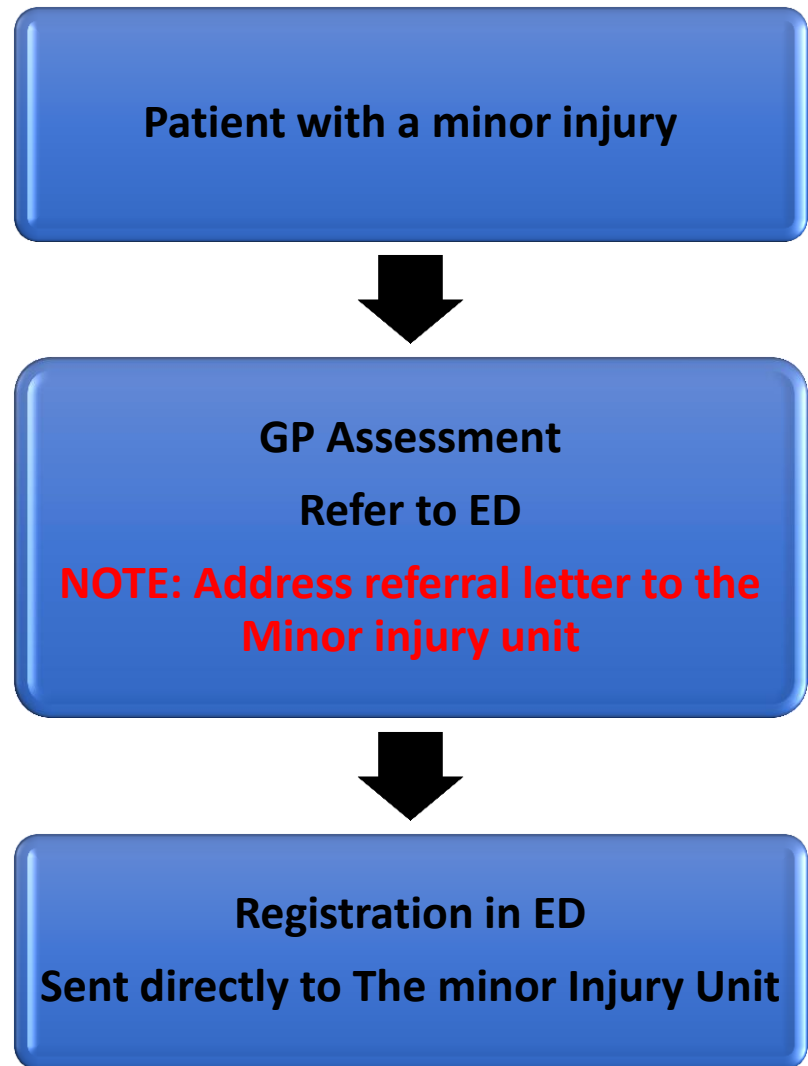
Problem

GP Referred minor injury patients in a queue for Triage

Old Pathway



New Pathway



Expected outcomes

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graph TD; A([Expected outcomes]) --> B([Decrease patient waiting time]); A --> C([Improve patient flow]); A --> D([Impact on triage nurse workload]);
```

Decrease
patient
waiting
time

Improve
patient
flow

Impact on
triage nurse
workload

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graph TD; Audit((Audit)) --> Numbers((Numbers)); Audit --> WaitingTimes((Effect on Waiting Times)); Audit --> Workload((Effect on Triage Nurse workload));
```

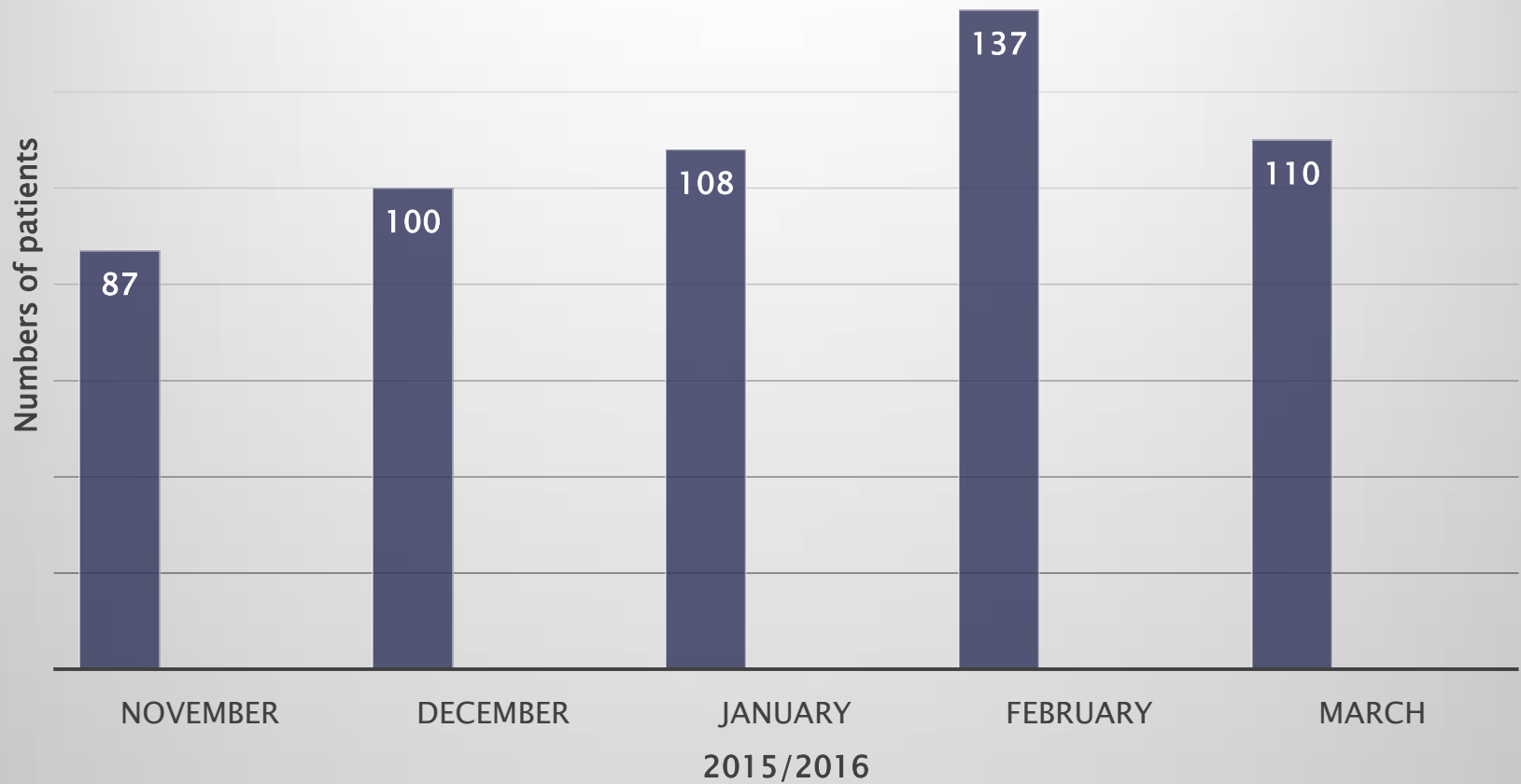
Audit

Numbers

Effect on
Waiting
Times

Effect on
Triage Nurse
workload

Number of GP referred patients direct to MIU



Numbers following GPMIU

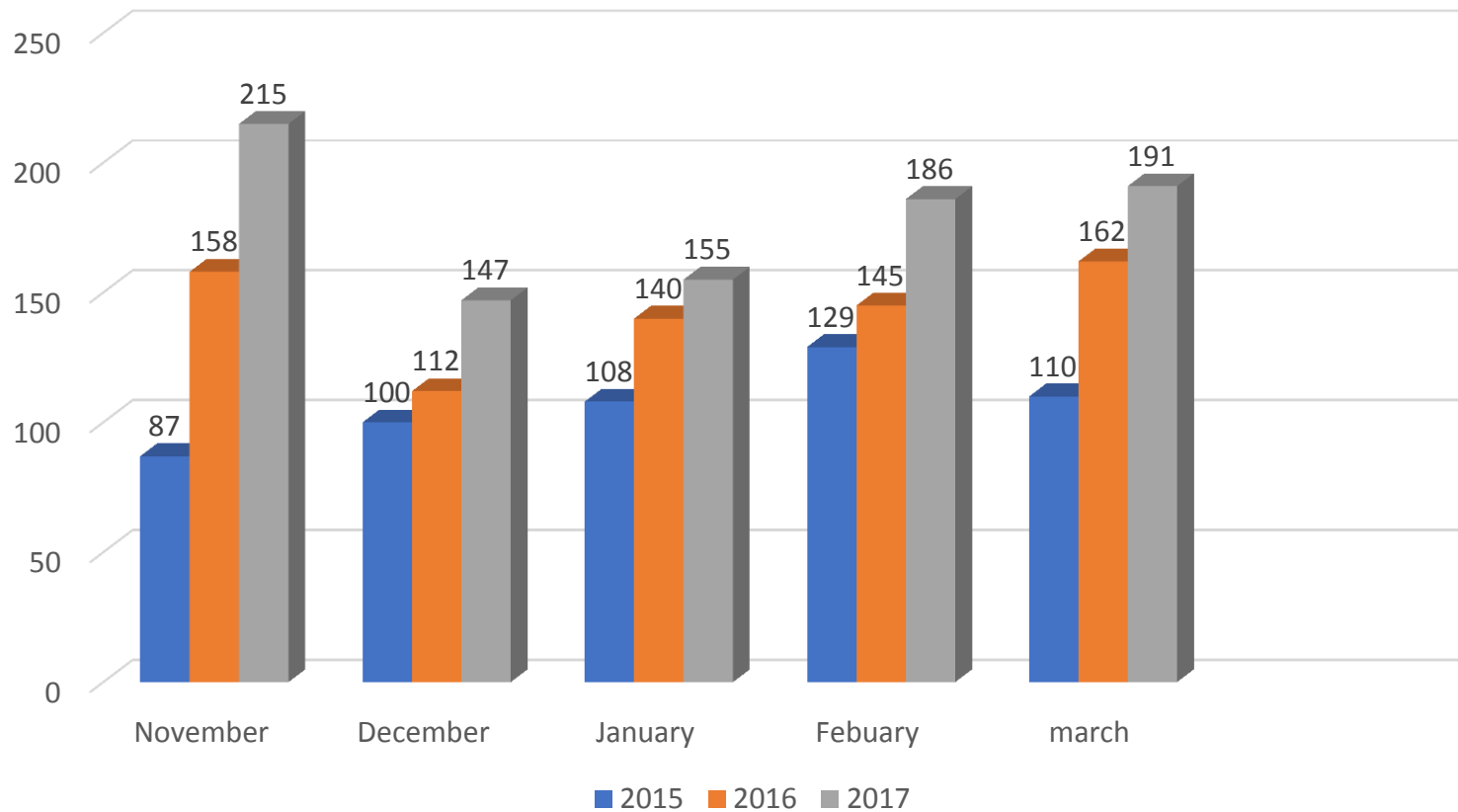


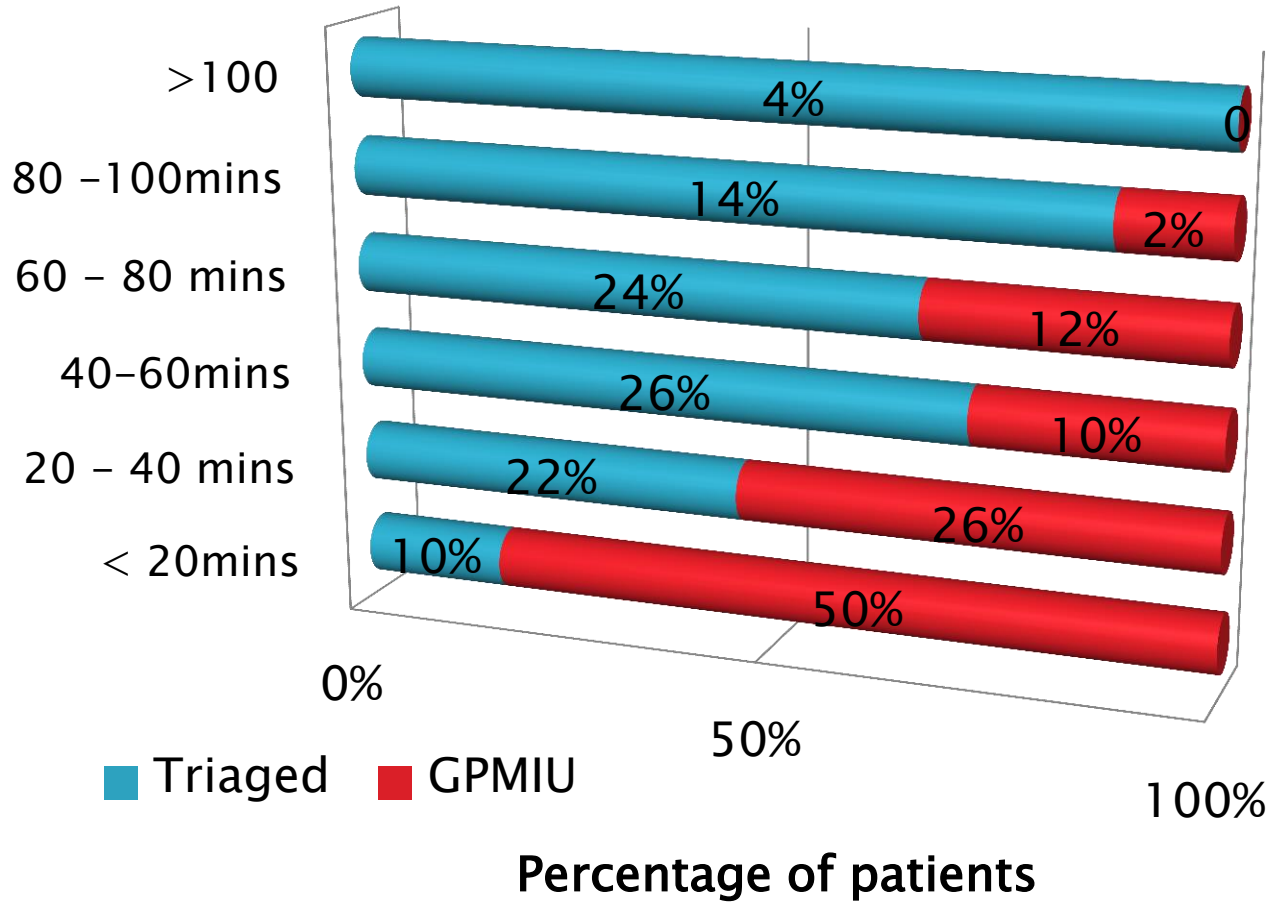
Fig 3: Average time patients waited from registration time until time seen



■ Triaged GP referrals in 2014/2015

■ GP referrals direct to miu 2015/2016

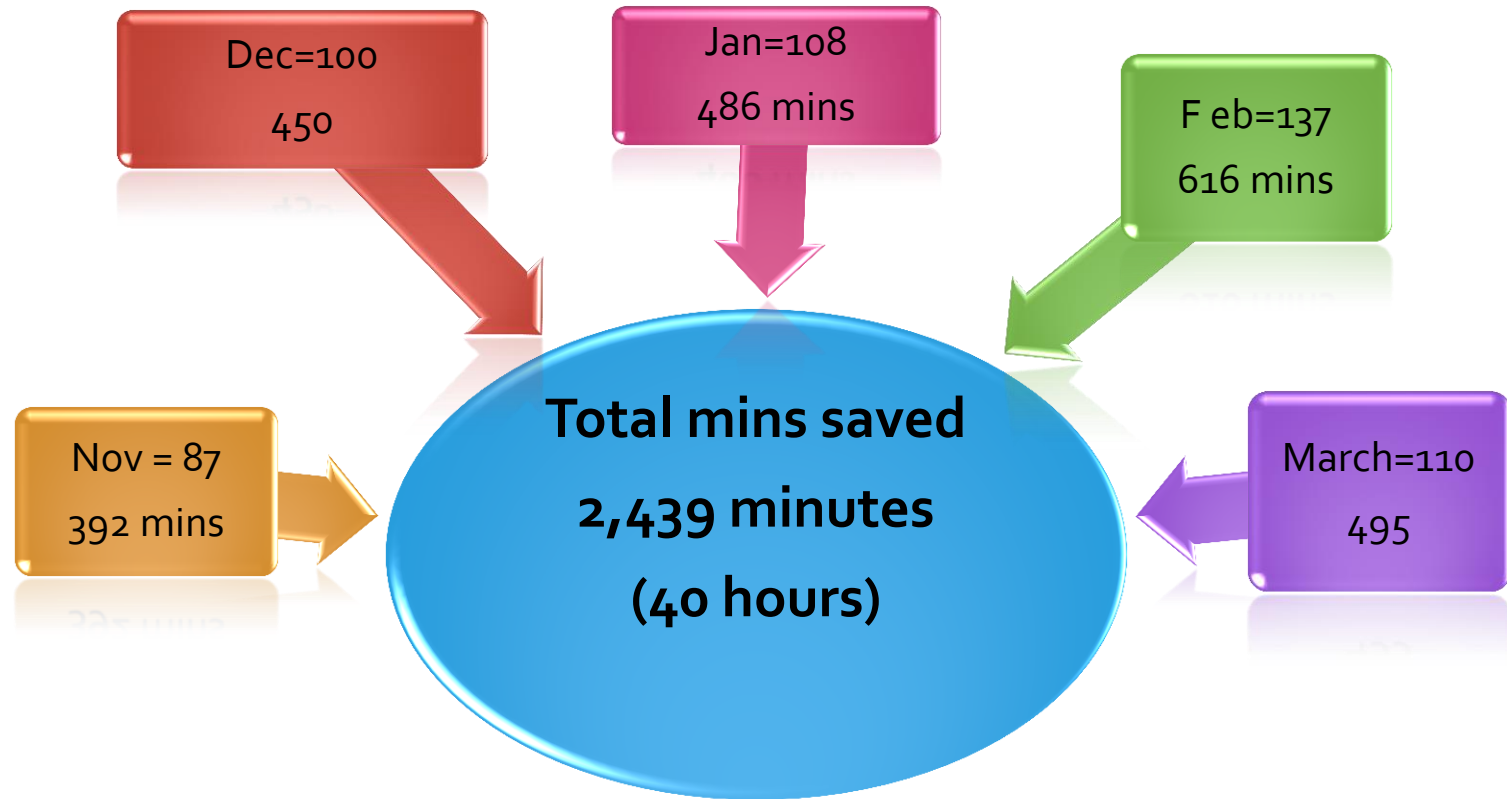
Time from registration to time
seen



Effect on Triage Workload

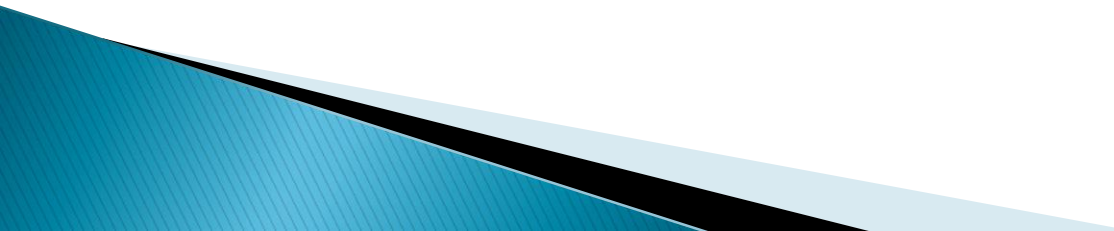
- ▶ Estimate time for triage episode
 - Four triage nurses x Five episodes = 20 episodes
 - Estimate = 4.5mins

Time saved for Triage Nurse



Conclusion

Expected outcome achieved

- ▶ Patients seen faster
 - ▶ Avoid the bottleneck at triage
 - ▶ Improve patient flow
 - ▶ Reduce workload Triage nurse
 - ▶ More prompt assessment of urgent cases
- 

Question
everything

