Phase I: Identification of current triage process and potentials for risk and patient outcome concerns.
- Onsite meeting with ER manager, medical director and other pertinent members of administrative team. Tour of physical layout of ED
- Finalizing organizational goals related to triage/patient flow in ED
- Review of current triage policies, procedures, guidelines
- Survey of staff and patient/families to gather data representing their perceptions to serve as a benchmark for post implementation analysis
- Compiling of recommendations to ensure compliance with standards of care. Discussion of recommendations with administrative team onsite

Phase II: Preparation for implementation of triage process that meets current standard of care and minimizes risk related to triage/waiting area.
- Development of validation and resource tools to support new triage process (policy, guidelines, quality review)
- Emergency Triage Toolbelt – one 16 hour session (held over two days) of comprehensive triage education for nursing staff which will include review of new procedures
- EMTALA education for unlicensed ED staff, registration, and other staff that interact with ED patients
- Training of onsite Triage Trainer(s) to sustain project
- Schedule for “go live” for transition to new five level triage

Phase III: Transition to new five level triage processes
- Conference call, email, Webinar support as needed for preparations
- Two days of onsite support for day and night shift staff during “Go Live"
- Evaluation

Phase IV Sustaining New Processes
- Ongoing support to sustain new processes and assist with outcomes and quality review
- Unlimited conference call/email support for Triage Trainer(s)

Project Investment Call for fees
Project Sustainability $1500 Annually - Triage Trainer Program

Health Resources Unlimited 888-654-3363 educate@hru.net