



## Annual Report 2022

**Contains reports from:**

Austria  
Canada  
Germany  
Mexico  
New Zealand  
Norway  
Portugal  
Slovakia  
Spain  
Switzerland  
UK

[www.triagenet.net](http://www.triagenet.net)

For further information contact [manchestertriage@alsg.org](mailto:manchestertriage@alsg.org)

# Introduction

## Welcome to our newly formatted Triage annual report

This year's annual report looks at some of the Triage activity that has happened around the globe this year and details the hard work that has taken place in the background to bring the latest developments to all of the tools.

Also included are the successes and challenges from some of our participating countries, as well as highlighting achievements that have worked well and ones that were more challenging. We would like to thank the IRG members who contributed to this report, it is fantastic to hear how MTS is making a difference across the world.

This report also contains information from members of the Group about their region or country and their future plans in the development of triage. As you are aware, triage is an ever-evolving tool and as a Group, there are some interesting future plans.

We hope you enjoy this new format and, as always, we would like to hear your feedback.

**Kevin Mackway-Jones and Jill Windle**  
Chairs of IRG

## Purpose and vision

The MTS is a clinical risk management tool used by clinicians and healthcare workers worldwide to enable them to safely manage patient flow when clinical need far exceeds capacity. Tried and tested around the globe, it is a professional, systematic process which is intended for use by healthcare personnel, regardless of role or experience, to establish the correct and safe care pathway.

## Audit

Of the figures submitted for this report, audit number range from **300** tracked audits, to **173**, down to **two** audits. Audit is variable across countries and can depend on how triage is audited locally.

Other IRG members register complaints or ongoing investigations in other ways and do not audit formally, however this practice is useful to understand what works, and what may not be so effective within a particular country.

- Audits are run in Asturias, Spain every six months and in Madrid's SUMMA-112 **TTA**, a total of **515 nurses** have been audited since **TTA** began in 2021.
- Germany undertook **173** audits in hospitals.
- Within the UK each Trust or Service relies on their Instructor faculty to carry out audits to the minimum standards, as well as supervision and sign off periods prior to anyone using the tools independently.

## **Development**

### **Emergency Triage (ET) 3<sup>rd</sup> Eds version 3.8**

The Mental Health updates were published by Wiley in April 2023 after a significant delay by the publishing house.

To aid the updates an Excel spreadsheet, that is a clear mapping document, has been produced so IRGs and their respective software developers can use this document to make the required changes quickly and accurately.

### **Emergency Triage 4<sup>th</sup> Edition**

Work is progressing to complete the 4<sup>th</sup> Edition publication with a provisional release date of early 2024. The delay in publishing is a result of the work for ET 3.8 and TTA 1.7.

### **Telephone Triage & Assessment (TTA) 1<sup>st</sup> Eds version 1.7**

The Mental Health discriminators have been agreed by the TTA Advisory group and the proofs sent for publication in July 2023.

### **Telephone Triage & Assessment (TTA) 2<sup>nd</sup> Edition**

A TTA working party is currently developing the tool into a 5-tier system which will be the background work for 2<sup>nd</sup> Edition.

## **Pathfinder**

The Pathfinder Advisory Group have reviewed and discussed the addition of the Mental Health discriminators and have developed a further Mental Health Pathfinder chart to complement the Medical and Trauma charts. The charts were launched in July 2023.

## Facts and statistics from 2022

Austria	Canada	Spain	New Zealand	Switzerland	UK
75 hospitals	120 hospitals	91 hospitals	7 Trainers	12 hospitals	ET 238 TTA 27 NaRT 306 Pathfinder 4
25 trainers	6 trainers	345 trainers		4 trainers	ET 893 TTA 166 NaRT 765 Pathfinder 6
3,500 providers	32 providers	6,192 providers	80 providers	350 providers	ET 13,000 TTA 1,000 NaRT 2,000 Pathfinder 100
1.5m triaged in 2022	6,517 triaged in 2022	753,000 triaged in 2022  16 ET courses and 5 TTA courses in Madrid	from 1 Nov 21-31 Oct 22 23,152 total triaged incidents 13,936 onsite / 9,216 remotely	4 provider courses 2 updated courses on Emergency Triage	ET 2,000,000 TTA 500,000 NaRT 6,000 Pathfinder 20,000

Mexico	Norway	Slovakia	Germany	Portugal
15 hospitals	8 hospitals 22 emergency clinics	10 hospitals	500 hospitals	In Portugal the MTS is fully implemented in all public, military and private hospitals across the country.
5 trainers	210 trainers	1 trainer	72 trainers	
250 providers	900 providers	104 providers	157 triage courses mostly online due to the persistence of Covid-19	
c.30,000 triaged in 2022	21 sites across the country carried out emergency triage  2 face-to-face courses with 32 participants	143,156 triaged in 2022		

## Updates from around the world

The impact of Covid-19 still prevails and has seen an increase in workload yet a decrease in capacity due to staffing pressures. As such, it has been even more important to provide care in the community and be able to safely refer patients to the most appropriate care pathway.

Many in the IRG have adapted and innovated to accommodate the increased patient numbers and reduced staffing levels and now offer staff the ability to work remotely and to undertake secondary triage when using TTA.



### New Zealand (TTA)

New Zealand found secondary triage to be so successful, it has launched Remote TeleHealth (RTH) which is now embedded into daily workload and is particularly useful in remote areas with a large geographical spread.

Some ambulance stations in New Zealand are now being used for triage which has proved helpful for patients who are waiting for long periods of time for an ambulance and who are now able to receive a clinical assessment. No clinical incidents have arisen, nor complaints received by the RTH, so a very positive development.

It is great to see how New Zealand, as part of its Covid strategies, was able to develop a method for staff to work remotely and provide a safe triage

service.

New Zealand anticipates a further two to three trainers are required. There are 80 providers and as a country, it recently trained 100 members of staff in remote areas and tweaked the training to involve role play scenarios over the phone, with experienced staff giving feedback and coaching. Participants' feedback was very positive.

New Zealand has remote stations across the country and due to Covid-19, has introduced further innovations by assigning cases and performing secondary triage which has boosted capacity, as well as exposing staff to clinical incidents.

### Canada (TTA)

Currently, 10 dedicated secondary triage clinicians are based in the Vancouver dispatch centre, with 22 other paramedic specialist clinicians who may perform secondary triage if time allows. The team monitors the queue designated for low acuity 911 events and initiate call backs for secondary telephone triage and advice.

In January, a dedicated secondary triage team was recruited and trained in areas such as professional standards, understanding the importance of auditing, and utilising the computer system to record data, as well as practising a range of scenarios.

Later in the year, the team, had additional videoconferencing and telephone training which included practicing emergency telephone simulations with conditions such as unconsciousness, cardiac arrest and seizures.





## Portugal and Spain (TTA)

The MTS Portuguese Group held a meeting for friends and colleagues to reconnect with one another following the aftermath of Covid-19. It was an opportunity to share experiences and discuss what has worked effectively and exploring opportunities for 2023.



Furthermore, Portugal and Spain's TTA group have both recognised the value in the two neighbouring countries working cohesively together on Triage. It has also signed a newly revised protocol with the Azores for TTA, having undertaken an audit and implementing new methods of working.



## United Kingdom (TTA)

Telephone Triage Activity within the UK is currently being carried out by some Ambulance Trusts as well as a growing number of out of hours and urgent care services.

There has been a decrease in the number of Ambulance services using MTS due to the introduction of PaCCS. (Pathways Clinical Consultation Support) which is provided by the NHS as a tool to support clinicians performing remote consultations, and which signposts clinicians towards a recommended route for the patient.

Many services are now utilising NHS Pathways and PaCCS as it is an NHS Pathways product that integrates with the Directory of Services. Whilst some services have chosen to go with PaCCS completely, others are using a mix of MTS and PaCCS.

Education with MTS continues, and each Trust or Service has their own instructors.



## Working towards goals in 2023



**Translations:** The Nursing and Residential Triage Tool (NaRT) is being translated into Dutch by ALSG. Other countries have cited that the MTS is not translated or available in their language which is something to consider for the future.

**Software:** Some IRG members are adding MTS into a software format which will make future auditing easier and will use with Patient Priority Matrix PPM in the area where the patient is located. Ideally other software platforms will be linked so as to create cohesion and integration.



**New Zealand:** is investigating the feasibility of a paramedic call handler to answer 111 calls, and it has been decided MTS would be the triage tool of choice. It is envisaged that a paramedic's clinical and service background, insights and

professionalism will assist in deciphering the patient's most appropriate care pathway.

**Norway:** plans to introduce e-learning courses, as well as developing their home page to incorporate this. Norway is implementing a digital audit tool so as to make recording of the data much simpler.



Norway also plans to focus on psychiatry in 2023.



**Mexico:** is planning to develop different MTS tools such as telephone triage, Nursing and Community Triage, as currently it only has a license for Emergency Triage.

**Austria:** Austria's IRG plans to establish the MTS as the standard throughout the country and in 2023 anticipates it will be rolled out within the next two to three years. In addition, the Nursing triage tool (NaRT) is also being implemented in order to reduce numbers at emergency departments, as well as causing minimal stress for elderly patients.



**Slovakia:** is hoping to recruit another trainer and instigate online education as well as introducing a mechanism for regular auditing.

**Switzerland:** In the coming year Switzerland intends to run 4-6 provider courses and 1-2 updated courses in Emergency Triage.



**Canada:** proposes to increase staffing levels in its call centre to allow for 32 Secondary Triage members which will be embedded alongside the existing 22 Paramedic specialists.

**Spain:** intends to implement the use of Emergency Triage in most emergency departments. The Spanish IRG has agreed MTS is the Triage System to be used in all public hospitals which will submit information to the Spanish MTG



There are 19 different health services across Spain, so unifying the country to utilise the latest version will bring consistencies to the triage process.

A future goal for is for Spain to promote the value of audits in every hospital, as currently it is on an ad hoc basis. Spain also intends to analyse the data from their call centre in Madrid which takes circa 100,000 calls per annum and this will help identify areas for development such as hospitals not going via the IRG to receive proper training.



**Germany:** will implement Telephone Triage during 2023 and it is awaiting a decision from the Ministry of Health for Standards as to whether to implement the MTS which was planned for 2022 but has been postponed by the Ministry. However, the German IRG continues to participate in the Expert Group advising the Government. It also intends to start TTA (Telephone Triage & Advice).



**Portugal:** is implementing a new audit tool which gathers information and whereby hospitals can download and upload all their documents which will commence in January 2023.



**Manchester  
Triage  
System**

**UK:** There has been a significant increase in demand for ET instructor training with large numbers attending bi-monthly courses. The activity to review and sign-off IT systems, from both IT companies and end-users, has dramatically increased, this is a positive outcome and results in improved offer and adherence to standards. We have also seen the first of our EDs successfully accredited. Increase demand and roll out of TTA for urgent care services.



Increased demand and roll out of Pathfinder across Jewish Ambulance Services.  
Undertake work on the Community Triage Tool and introduce it as a Pilot within the Jewish Ambulance Service Manchester.  
There will be updates to all tools with Mental Health and provide easy to read update logs for each tool on the website.  
Complete review and update of all training materials including e-modules.

**Netherlands:** plans to visit the UK in 2023 to undertake training for the TTA and would like to reduce travelling across its country and would like to implement audits which will reduce travel times. It will also be updating its website in order to offer more information online.



**Brazil:** Will try to increase membership numbers to the IRG, as well as working closely with Portugal. It hopes to implement TTA in the near future.

## Conclusion

This report has highlighted some of the successes and the various approaches to triage to fit with each country's local requirements. In particular, it reveals the importance and value of Telephone Triage during a crisis such as a pandemic. It is heartening to learn that certain countries are now implementing a dedicated team to deliver Telephone Triage.

Clearly auditing remains an area which to be progressed, as understanding the data would provide greater insights into further developments of the triage tools currently available, as well as uncovering patterns which again may help with the advancement of the MTS.

It is encouraging that some IRG members are increasing their number of trainers to deliver triage, and excellent news that MTS is recognised and implemented across an entire country.

Thank you to everyone who took part in providing information for this report and may it hopefully help and inspire every member of the IRG for next year's 2023 report.