

## Evaluation of Accident and Emergency Triage at a University Teaching Hospital in Kigali, Rwanda

Janet Niwenkunda<sup>1</sup>, Christine Uwineza<sup>1</sup>, Chance Delphine Mukakamali<sup>1</sup>, Jean-Claude Byiringiro<sup>1</sup>, Jessica Tsuchiya<sup>1</sup>, Stephanie Lukas<sup>1</sup>

<sup>1</sup>University Teaching Hospital of Kigali, Rwanda

### Background

The triage process at a University Teaching Hospital in Accident & Emergency room started in April 2013 using adapted version of the evidenced-based South African Triage Scale (Emergency Medicine Society of South Africa, 2012). It was started to improve patients' prioritization according to acuity to reduce chaotic situation in emergency department.

### Objectives

The purpose of this audit was to evaluate the implementation of this triage process.

### Methods

The retrospective chart audit was done for a period of five months from September 2013 to January 2014. During this five month period, 65 patients from emergency were selected randomly: 50 adults and 15 children. February and March were used to collect and analyze the data. April, May and June results were shared with stakeholders and interventions were put in place.

### Results

Data showed that 29% of patients had no triage form in their files. Before the audit, the triage form was kept separately from the file and placed loosely in the file at a later time. After the audit, it was decided that every file in the emergency department will get a triage form stapled into it prior to being used for the patient. This project was implemented in May 2014.

Data also showed that out of the 53 patients who had triage forms there was a 0% compliance rate for ages 0-2, 86% for ages 3-12 and 100% for ages 12 and above. Because of these findings a new triage form was developed and implemented for the 0-2 age group that was in line with the South African Triage Scale (EMSSA, 2012). Accident & Emergency started using this form in June 2014.

### Conclusions

Because of the data collected, Accident and Emergency room was able to improve their documentation and prioritize better patient care. The triage process was improved, which is vital for a functioning of Accident & Emergency room.

**Key words:** triage process, documentation, implementation, emergency, prioritization