



Guidance for Nursing Staff Managing the Care and Comfort of Patients Awaiting Treatment in the Emergency Department

1. Guiding Principles

The purpose of this guideline is to maintain minimum nursing practice standards for the care and comfort of patients awaiting treatment in all WA Country Health Service (WACHS) emergency facilities and act as a prompt to determine if additional comfort needs are required.

Compassionate care is a fundamental aspect of nursing, and is an important value embedded in nurses' professional standards and code of practice. Comfort is defined as a state of physical ease, pain control and the easing of a person's distress which promotes a state of feeling better.

NOTE: The care and comfort of all patients in emergency facilities is of paramount importance at ALL times.

2. Guideline

2.1 Triage

- Each patient presenting to the emergency facility is given an initial triage assessment and the nature of the patient's illness and comfort needs must be assessed as part of the triage process according to the WACHS [Triage, Assessment and Management in the Emergency Department Clinical Practice Standard](#) (CPS).* (see ref below)
- Triage assessment identifies and prioritises patients who require urgent attention. Less urgent presentations to the emergency facility may have to wait and be cared for * (see ref below)
- All patients who are waiting to be medically reviewed after being triaged must be re-assessed by the Triage Nurse once the triage time has expired (Department of Health [Emergency Triage Education Kit \(ETEK\)](#) * (see ref below)

Patients who have uncontrolled pain or who are distressed with their discomfort may require nursing review and intervention to actively manage the uncontrolled pain or discomfort. Patients may require to be re-assessed and an appropriate ATS determined. Where clinically indicated, a patient is transferred to a bed / trolley to optimise their comfort whilst awaiting treatment (See [section 2.5](#) for capacity management)

- Nurse initiated care must incorporate appropriate pain relieving measures in accordance with WACHS [Medication Administration Policy](#).

* Ref: WACHS Triage, Assessment and Management in the Emergency Department Clinical Practice Standard.

2.2 Patient Privacy and Dignity

- Endeavour to maintain patient privacy and dignity at all times and where possible the area in which the waiting patient is placed must provide privacy whilst allowing ongoing monitoring.

2.3 Patient Observations

- Nursing care and observation is initiated as per the WACHS Triage, Assessment and Management in the Emergency Department CPS and commenced on a WACHS [Observations and Response Chart \(ORC\) MR140 series](#) appropriate to age.
- The Triage nurse or midwife is to ensure that regular estimates of waiting times are provided to the patient and their family.
- Any change in clinical condition while in the waiting room is to be documented in BOSSnet or the [MR1](#) and the patient must be re-assessed and concerns escalated as per the WACHS Triage, Assessment and Management in the Emergency Department CPS within the emergency facility.

2.4 Ongoing Care Needs

- Where a patient requires ongoing care but not admission and the emergency facility remains at capacity, a decision may be made in consultation with the emergency department senior medical clinician and the senior nurse on duty to move a patient to an appropriate clinically safe area to optimise comfort using local escalation processes where appropriate. This may require Code Yellow activation as per the local business continuity plan.

2.5 Capacity Management and Escalation

- In the event of unavailability of beds or chairs for patients attending the emergency facility, the following actions should be taken:
 - The Triage Nurse must review all patients waiting in the emergency facility to determine if any patients can be discharged or accommodated in a chair freeing up a bed.
 - The shift coordinator ultimately has responsibility for the management and oversight of capacity and patient flow within the emergency department.
 - If no solution can be found, the senior nurse on duty must escalate as per local process to the appropriate hospital manager in conjunction with medical staff, to initiate an appropriate organisational business continuity response.
 - Consideration of activation of Code Yellow within local business continuity response.

3. Definitions

ORC	Observation and response chart
Triage	The process of sorting patients into five categories according to the urgency of their need for care using the Australasian Triage Scale (ATS)

4. Roles and Responsibilities

This guideline applies to all WACHS nursing and midwifery staff working in the Emergency facilities.

All Staff are required to work collaboratively. Nurses and midwives must ensure that care needs are met and other disciplines are involved in a timely manner.

5. Compliance

Failure to comply with this guideline may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Employment Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (HSA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

6. Records Management

All WACHS records must be stored in the approved Electronic Documents and Records Management System (see [Records Management Policy](#) and [Health Record Management Policy](#)).

7. Evaluation

Monitoring of compliance with this document is to be carried out by Regional Nursing and Midwifery Directors / Operations Managers as per the facility audit schedule [Recognising and Responding to Acute Deterioration Audit Specific to Emergency Department Patients](#).

8. Standards

[National Safety and Quality Health Service Standards](#) (Second edition 2017):

Standard 2: Partnering with Consumers: 2.1 Integrating clinical governance

Standard 5: Comprehensive Care: 5.4 Designing systems to deliver Comprehensive Care

Standard 6: Communicating for Safety: 6.1 Integrating Clinical Governance

[EQuIP National Standards](#):

Standard 11 Service Deliveries

Standard 12 Provision of care

Standard 15 corporate systems and safety

[Aged Care Accreditation Standards](#):

Standard 1: Consumer dignity and choice

Standard 2 Ongoing assessments and planning with consumers

Standard 3: Personal care and clinical care

Standard 5: Organisation's service environment

Standard 8: Organisational governance

National Standards for Mental Health Services:

Standard 10: Delivery of Care: 10.3 Entry, 10.4 Assessment and review, 10.5 Treatment and support

National Standards for Disability Services:

Standard 1: Rights
Standard 5: Service access
Standard 6: Service management

9. References

Department of Health [Emergency Triage Education Kit \(E TEK\)](#)

10. Related Forms

Observation and Response (ORC) Charts:

[MR140A Adult Observation and Response Chart \(A-ORC\)](#)

[MR140B Maternal Observation and Response Chart \(M-ORC\)](#)

[MR140C Additional Maternal Observation Chart](#)

[MR140D Paediatric Observation and Response Chart \(N-ORC\)](#)

[MR140E Paediatric Observation and Response Chart \(P-ORC - under 3 months\)](#)

[MR140F Paediatric Observation and Response Chart \(P-ORC - 3-12 months\)](#)

[MR140G Paediatric Observation and Response Chart \(P-ORC - 1-4 yrs\)](#)

[MR140H Paediatric Observation and Response Chart \(P-ORC - 5-11 yrs\)](#)

[MR140I Paediatric Observation and Response Chart \(P-ORC - 12+ yrs\)](#)

11. Related WACHS Policy Documents

[Triage, Assessment and management in the Emergency Department – Clinical Practice Standard \(2017\)](#)

[Clinical Escalation of Acute Physiological Deterioration including Medical Emergency Response policy \(2018\)](#)

[Clinical observations and Assessments Clinical Practice Standard \(physiological \(vital signs\), neurovascular, neurological and fluid balance\) 2017](#)

[Medication Administration Policy](#)

12. Policy Framework

[Clinical Governance, Safety and Quality Policy Framework](#)
[Information Management policy Framework](#)

This document can be made available in alternative formats on request for a person with a disability

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