White Paper
Medical Answering Services and Telephone Triage

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Doctors in the United States began using answering services in the 1920s to inform physicians of patient emergencies. At that time, operators were basic message-takers who passed patient messages and contact information to the doctor.

Today's medical answering services provide a much wider range of services to lighten the administrative workloads of medical offices and assist doctors, surgeons, hospice and home health, dentists and orthodontists, and even large healthcare systems. Medical organizations that use an answering service can experience increased appointment setting rates, better patient-doctor communication, improved patient satisfaction, and provide their patients with reliable access to care 24 hours a day, 7 days a week.

Some medical answering services can even provide telephone triage if they employ licensed professional staff members who are trained to accurately assess a patient caller's concerns.
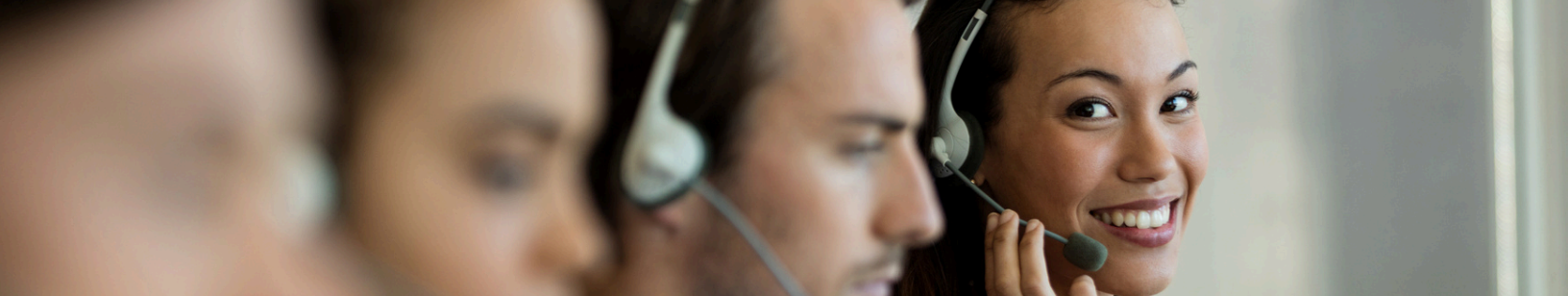
Telephone Triage

The use of triage originated during World War I to avoid focusing resources on victims with fatal injuries. In the early 1970s, health maintenance organizations (HMOs) instituted telephone advice services, which led to hospital emergency departments establishing 24-hour telephone advice programs. Telephone triage is now a sophisticated practice usually performed by nurses and other highly trained medical personnel.

Before reading more about telephone triage, a few definitions may be helpful. Telehealth, telemedicine, and telephone triage may all sound similar, but each is very different. Telehealth is focused on the actual delivery of care (both preventative and curative), and telemedicine involves the diagnosis of a patient's health complaint and recommended treatment by a physician via any form of telecommunication. Telephone triage is the assessment of a patient's symptoms, and the urgency needed to connect that patient with the correct doctor or department.

Telephone Triage Communication Model

Effective communication is critical in telephone triage. Typical models of communication include three parts:

- **Data collection**: The answering service agent gathers data about the problem from the patient caller and asks open-ended questions to encourage more information about the symptoms.
- **Confirmation**: The agent repeats the information using some medical terminology but in a way that the patient can understand. The patient confirms and redefines the symptoms if necessary.
- **Disposition**: The agent may advise about treating symptoms, but the primary outcome is to quickly connect the patient caller with an appropriate doctor, clinic, or hospital department.

It is common for operators to use a mnemonic device called OLD CART to assist them with remembering which questions to ask during the assessment:

O (onset of symptoms): When did the symptom(s) first occur? Has it happened before?
L (location): Where is the symptom occurring on the body?
D (duration): How long has the symptom(s) been present? Is it constant, or does it come and go?
C (characteristics): Describe what the symptom(s) feels like.
A (associated factors): Do any other signs and symptoms occur?
R (relieving factors): Does anything make it feel better or reduce the severity?
T (treatments tried): What has been tried to relieve the symptom? Has anything worked?

Advantages and Disadvantages of Telephone Triage

Many studies have been published about telephone triage and how it helps reduce a healthcare organization's costs while helping patients experience better health and greater satisfaction. BMC Health Services Research conducted a review of the existing body of research about telephone triage and advice services (TTAS) and found that "TTAS was examined either alone or as part of a primary care service model or intervention designed to improve primary care… Patient satisfaction with TTAS was generally high and there is some consistency of evidence of the ability of TTAS to reduce clinical workload. Measures of the safety of TTAS tended to show that there is no major difference between TTAS and traditional care."

The primary disadvantage of telephone triage is liability. If a patient call is mishandled, lawsuits can be filed. For example, if an adverse health outcome is attributed to a miscommunication, a long hold time, or a lack of information about the patient.

Suppose the situation is serious enough and becomes a legal issue. In that case, the courts may even hold a doctor responsible if they find the person assisting the patient via telephone triage lacked skill or training. In the unfortunate event of a serious medical problem or patient death because of mistakes made by a triage service, a patient or their family could sue anyone connected with the case (e.g., nurses, physicians, other medical personnel, the healthcare organization, the patient's health plan).

Importance of Call Center Software Effective Telephone Triage

Medical answering services offering telephone triage systems can safeguard against liabilities for themselves and their medical clients using a robust call center software suite. All-inclusive, highly interoperable contact center software can integrate with electronic medical record (EMR) systems, ensure operators are talking to the correct patient, and offer critical call priority to improve emergency call routing.

Customized scripting ensures operators ask and give the correct information. Effective contact center software also provides a customizable reporting function to keep track of metrics that enhance accountability related to calls, messages, screen captures, and other call center data. Risk management departments at healthcare organizations often require that call and screen recordings be kept on file for a set number of years in case a litigious situation arises to help protect themselves, staff, and patients.

Medical answering services often run their call center software in a virtual server environment or in the <u>cloud</u> to enable their staff to work from home. The software turns any personal computer into a professional agent workstation, and the virtual agent has access to all the tools used by an agent in a medical answering service call center.

Secure Messaging and Telephone Triage

A secure mobile <u>messaging app</u> can help keep medical answering service providers and their healthcare clients HIPAA-compliant if an agent needs to contact on-call medical personnel about a patient caller.

If an agent determines a patient's doctor needs to be <u>notified</u> immediately about a critical situation, a secure messaging app integrated with the agent's call center and on-call software can quickly contact the correct physician. End-to-end encryption ensures all communications are protected.

Persistent alert settings can be set so important messages won't be missed, and full reporting functions available via the app keep track of messaging histories, including whether a message was received, opened, and replied to.

With today's technological advances and secure HIPAA-compliant communication options, medical answering services can provide outstanding telephone triage services that result in better patient care while protecting against liability issues.