

Volume 13, 06 November 2013

Publisher: Igitur publishing

URL: <http://www.ijic.org>

Cite this as: Int J Integr Care 2013; EFPC Conf Suppl; [URN:NBN:NL:UI:10-1-114881](https://nbn-resolving.org/urn:nbn:nl:ui:10-1-114881)

Copyright: 

Conference Abstract

Communicative Practices in Nurse vs. GP-Led Telephone Triage: A Comparative Investigation

Jamie Murdoch, University of East Anglia, United Kingdom

Rebecca Barnes, University of Bristol, United Kingdom

Jill Pooler, Exeter University, United Kingdom

Correspondence to: **Jamie Murdoch**, School of Nursing Sciences, Faculty of Medicine and Health Sciences, Edith Cavell Building, University of East Anglia, Norwich Research Park, Norwich, NR4 7TJm, Tel: +44 (0)1603 59070 E-mail: Jamie.murdoch@uea.ac.uk

Abstract

Purpose: This qualitative study compared communication between GP-led and nurse-led telephone triage in primary care for patients who had requested a same-day face-to-face appointment with a GP.

Theory: Understanding how clinicians interact with patients during telephone triage is central to managing the demand for primary and secondary care. We currently know very little about how telephone triage may be affecting the delivery of primary health care.

Methods: We applied conversation analytic methods to systematically compare clinician and patient behaviours in 51 consented audio recordings (22 Nurse, 29 GP) of telephone triage consultations and 10 linked video-recordings of nurses' use of computer decision support software (CDSS) used during triage.

Findings: Nurses asked patients an average of 15 questions about their problem vs. 5 by GPs, yet call length was similar across both arms (04:39 Nurse; 04:37 GP). The design of clinician questions, and the range of actions implemented through them, differed markedly between the two groups.

Discussion: GPs and nurses emphasised different aspects of the clinical assessment process. These different approaches to triage have potential implications for the type of information collected and recorded; patient experience of telephone triage; health outcomes; costs of care; and primary and secondary care workload.

Keywords:

communication, telephone triage, computer-decision support software, patient experience, information

Presentation available at: <http://www.euprimarycare.nl/istanbul/conference-programme-efpc-2013-istanbul-results>