

Nurse triage

Careworks' 24/7 nurse triage solution ensures injured employees receive the right care, helping them to recover quickly and return to work safely.

Delivering early and appropriate healthcare to injured employees is crucial to effectively manage lost workdays and medical costs associated with workers' compensation claims. Careworks' nurse triage service helps determine the appropriate medical care when an occupational injury occurs.

Each registered nurse is trained on occupational injuries, and the team is available 24/7/365, ready to refer any injured employee to the highest quality network provider or client-preferred provider.

The right care, right from the start

With our integrated service and customized options, our nurse triage team can:

- Accurately recommend the appropriate medical care for the employee (e.g., in-person care, telemedicine, self care).
- Provide necessary forms to the employee and provider for initial treatment and employer-selected ancillary services, if medical care is needed.

Designed for efficiency and quality

After assessing the employee, a registered nurse provides care recommendations based on the Schmitt-Thompson guidelines, the industry's best standard for triaging medical conditions.

These evidence-based guidelines provide safe, effective triage that directs injured employees to the most appropriate level of care.

The 300+ guidelines are reviewed and updated annually, with input from a panel of call center medical directors, emergency physicians, nursing practice consultants and physician specialists.

Evaluation

The nurse screens the caller for triage eligibility based on best practices and client preferences, and evaluates the symptoms against the guidelines. Questions are posed in a logical sequence based on the individual case; each one is linked to specific healthcare advice. The guidelines will direct the nurse to the appropriate care recommendations for the injured employee.

Careworks reviewed client programs that moved from a triage company using in-house guidelines to one that uses the Schmitt-Thompson guidelines for self-care or treatment recommendations. Our analysis showed that 10-15% of the cases receiving self-care recommendations that ultimately became a claim had 20-50% higher average temporary total disability days. Inaccurate front-end self-care recommendations cost the employer – and the employee.

Referrals and post-triage questioning

Care recommendations for the injured employee may include first aid/self care, telemedicine or provider referral. If provider care is recommended, the nurse selects a physician based on the employee's location, the client's PPO affiliation or preferences, and initial treatment facilities.

The nurse calls the clinic while the employee is on the phone to coordinate care and provides any paperwork necessary to facilitate treatment. The nurse triage service helps reduce unnecessary urgent-care visits and ensures employees receive clear clinical direction from the onset of their injury or symptoms.

After the call, the nurse sends the following paperwork to the injured employee, client designated contacts and/or provider based on care recommendations:

- Self care
 - Clinical consultation nurse report, care advice and clinical team contact information
- Telemedicine and provider care
 - Clinical consultation nurse report, care advice, provider and clinical team contact information
 - Provider referral form with information on billing, ancillary service contacts, utilization review contact and the client's return to work program
 - Return to work physician form
 - Pharmacy First Fill form
 - Client forms

Disposition

The disposition of care includes emergency services (911), emergency-room care, physician care within four hours (minor medical/urgent care), physician care within 24 hours, physician care within three days, telemedicine, and first aid or self care.

Physician referral

- Nurse locates available network clinic/provider near employee's location; selection is based on injury type, location, hours and network affiliation.
- Nurse will fax/email employee and clinic/physician a list of appropriate ancillary service providers, utilization review protocols and notice of the client's return to work program.

Telemedicine

Our telemedicine services are fully integrated with our nurse triage solution and include:

- Guidance to telemedicine through careful triage of the employee's treatment needs and technology access.
- On-screen care provided by a network physician who specializes in occupational medicine and is trained for the telemedicine experience.
- Immediate treatment with all appropriate care facilitated with a stay-at-work focus.

First aid/self care

Our nurses provide first aid and self-care recommendations per physician protocols, avoiding unnecessary provider visits and ensuring the employee receives clear clinical direction at the time of injury. The clinical team will also:

- Provide the employee with a nurse triage callback number and instructions if the condition worsens.
- Send a nurse-triage report to the employer contact and employee with call details and recommendations.

Employees will receive a follow-up call within 24-48 hours via interactive voice response. The calls include survey questions that will:

- Assess the employee's compliance with care recommendations.
- Provide the option to speak with a nurse for worsening symptoms or follow-up questions.
- Assess their nurse care experience.

Post-acute referral process

The triage nurse report is stored in Careworks' proprietary triage system. Calls are recorded and stored for 90 days.

Implementation and training

When implementing a nurse triage service, our dedicated implementation managers work directly with clients to ensure a smooth process. Implementation includes an efficient system training program with wall cards for worksite managers.

Results

Benefits of our nurse triage service include:

- 25% lower average incurred
- 96% employee satisfaction rate
- 40% fewer claims initially treated at ER (compared to those without clinical consultation)
- 85% of claims treated by 4- or 5-star network providers (compared to 78% for non-clinical consultation claims)
- 20% fewer claims with lost time
- 37% fewer claims with litigation
- 26% lower average medical incurred
- 23% of cases resolved with self care/first aid
- Increased use of ancillary service networks

Reporting

Employers will receive monthly, quarterly and annual reports that include utilization statistics and the results of each call, individually and summarized by outcome and cost savings. These reports demonstrate the program's impact, and help to identify areas where improvement and compliance is needed.

Our team provides the following triage reports and program information for clients:

- **Summary report:** monthly
- **Detail report:** monthly
- **Dashboard:** quarterly
- **Stewardship:** annually

About Careworks

At the heart of any organization are its people. When one of your employees is out of work for illness or injury, Careworks is there, ready to help them on their return to health, work and productivity. By providing the right care and coordination solutions — from clinical case management to networks and support — along with the best treatment and cost oversight, we're driving better outcomes for your injured workers. And that means better outcomes for you.

To learn more about our integrated and customized solutions, visit [CAREWORKS.COM](https://careworks.com)
