Objective:

To ensure patient safety and efficient flow in the Emergency Department (ED) by utilizing the CEDOCS (Emergency Department Overcrowding score) and Emergency Severity Index (ESI) triage levels (ESI 1 to ESI 5).

Scope:

This policy applies to all staff in the Emergency Department, including physicians, nurses, and administrative personnel involved in patient triage and management.

Definitions:

-**CEDOCS Score:** A tool used to estimate crowding levels in the ED, influencing decision-making for patient boarding (a "boarded patient" is defined as a patient who remains in the emergency department after the patient has been admitted or placed into observation status at the facility, but has not been transferred to an inpatient or observation unit)

- **ESI Triage System:** A five-level emergency department triage algorithm that categorizes patients based on the severity of their conditions and resource needs:

-ESI 1: Immediate life-saving intervention required.

- ESI 2: High risk, or confused/lethargic/disoriented, or severe pain/distress.

- ESI 3: Multiple resources needed & vital signs stable.

- ESI 4: One resource needed.

- ESI 5: No resources needed, examination only, OPD patient

Policy:

1. Triage and Initial Assessment:

- Upon arrival, all patients will be assessed and triaged using the ESI system.

- Frequent CEDOCS scoring will be conducted to determine crowding levels in the ED especially when no ED bed is vacant

2. Patient Boarding Guidelines Based on ESI and CEDOCS Score:

- ESI 1 and ESI 2:

- Patients must be taken to the resuscitation or critical care area immediately, regardless of the CEDOCS score.

- Continuous monitoring and rapid intervention are mandatory.

- ESI 3:

- If the CEDOCS score indicates low to moderate crowding, patients will be assigned to available treatment spaces.
- During high crowding (CEDOCS score > threshold), prioritize patients based on clinical judgment, with critical cases given precedence.
- ESI 4 and ESI 5:
  - Under low crowding conditions, patients can be seen in regular examination areas.
  - Under moderate to high crowding, consider implementing fast-track protocols or redirecting to appropriate outpatient services.

3. Response to High CEDOCS Scores:

- Activate the ED crowding protocol, including:
  - Review of all patients in the ED for potential safe discharge or transfer.
  - Reallocation of staff to critical areas to manage high-acuity patients.
  - Communication with inpatient units for expedited transfer of admitted patients from the ED.
  - Use of overflow areas if available and safe.
- Regular re-assessment of the CEDOCS score and ESI levels to dynamically manage patient flow.

4. Monitoring and Re-assessment:

- Continuous monitoring of the ED environment, with frequent re-evaluation of the CEDOCS score.
- Re-triage of patients as needed based on changes in their clinical status.
- Documentation of all triage decisions and actions taken in response to CEDOCS scoring.

5. Staff Training and Competency:

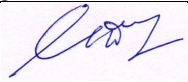
- All ED staff will receive training on the ESI triage system and the use of CEDOCS scoring.
- Regular competency assessments to ensure adherence to the policy and accurate application of triage and crowding management protocols.

6. Quality Assurance and Review:

- Regular audits of triage accuracy, patient outcomes, and adherence to the policy.
- Monthly review meetings to discuss crowding incidents, patient safety concerns, and opportunities for process improvement.

Responsibility:

- The ED Head and Quality Head will oversee the implementation and compliance with this policy.

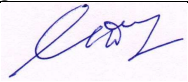
Recommended By	Signature	Approved By	Signature
Dr. Hrishikesh Kalgaonkar		Dr. S.S. Deepak	
Chief Medical Administrator		Chairman & Managing Director	

- All ED staff & the floor manager are responsible for adhering to the guidelines and ensuring patient safety.

Review:

This policy will be reviewed annually and updated as necessary based on feedback, audit results, and changes in best practices.

This policy aims to optimize patient safety and flow in the Emergency Department by effectively utilizing both the CEDOCS score and ESI triage levels to manage patient boarding and care.

Recommended By	Signature	Approved By	Signature
Dr. Hrishikesh Kalgaonkar		Dr. S.S. Deepak	
Chief Medical Administrator		Chairman & Managing Director	