Why 'Primary Care' Patients go to Emergency Departments - demographic profile and reasons for presentation

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‘Primary Care’ presentations at EDs have received much attention in recent years.

What is their age & sex profile?
  – compare to other ED presentations

Do reasons for presentation differ by age & sex?

Are subgroups likely to respond to diversionary strategies?
Data & Methods

- NSW ED administrative data (EDIS) for 2005
  - presentations and presentation rates by age and sex
- Survey of 397 potential ‘primary care’ patients in Illawarra, 2004
  - “Why did you come to the Emergency Department (ED) today rather than a General Practitioner (GP) or medical centre?”
  - analyse by age and sex
Definition of Potential ‘Primary Care’ (PPC) Presentation

Must meet all of the following criteria:

◆ Triage 4 or 5;
◆ Did not arrive by ambulance;
◆ (Self referred);
◆ New episode of care;
◆ Not (expected to be) admitted.

(in survey definition only)
Presentations (‘000s) by PPC status & age, 2005
PPC presentations rates (per 1000 people) by sex & age
Non-PPC presentations rates (per 1000 people) by sex & age
Reasons for presentation: key points

◆ Regardless of age & sex, reasons most chosen:
  – Self-assessed urgency
  – Being able to see doctor & have tests done in same place; and
  – Self-assessed seriousness or complexity
◆ No significant difference by sex for any of these reasons
◆ These are sensible reasons
Selected results by age (% very important or moderately important)
Conclusion

◆ Age profile of PPC presentations very different to other presentations, especially for elderly
◆ Elderly PPC presentations increasing at fastest rate
◆ Elderly least likely to identify GP affordability or availability problems as reasons for presentation
◆ Main reasons for presentation do not vary by age or sex and these are sensible
Policy and practice implications

◆ An important distinction between:
  – clinically-assessed triage category and
  – self-assessed urgency and complexity.

◆ Patients will act on their own judgments.

◆ Primary care patients at ED perceive that they need to be there.

◆ Implications for design of ED services and the likely success of diversionary strategies.
References
