

Perceptions of need: Why consumers seek urgent primary care

Dr Kathryn Dwan, Ms Kathryn Briant and Ms Darlene Cox, Health Care Consumers' Association

Background

After-hours care is an essential component of our health care system. Consumers don't always experience good health. Even with excellent health, occasional illness and injury are unavoidable. Health care can be needed at any time or day of the week.

There is no definitive research on which after-hours service or combination of services is best placed to reduce pressure on emergency departments. All of these after-hours care options offer a valuable service to the ACT community. This research explored consumer reasons for choosing to use after-hours primary care in the ACT.

After-hours services in the ACT include:

- 2 Emergency Departments
- A commercial and a not-for-profit medical deputising service
- A national and a local telephone triage service
- 2 nurse-led walk-in centres
- 55 pharmacies
- A handful of extended hours general practices

Method

A three-stage approach was used for this research:

1. Scoping interviews
2. Consumer survey
3. In-depth qualitative interviews

Ethical clearance was not required, and the research was conducted in line with the National Statement on Ethical Conduct in Human Research (2007).

Conclusions

Life happens outside of standard working hours!

Consumers choose a service based on their circumstances.

Reassurance plays an important role in after-hours care.

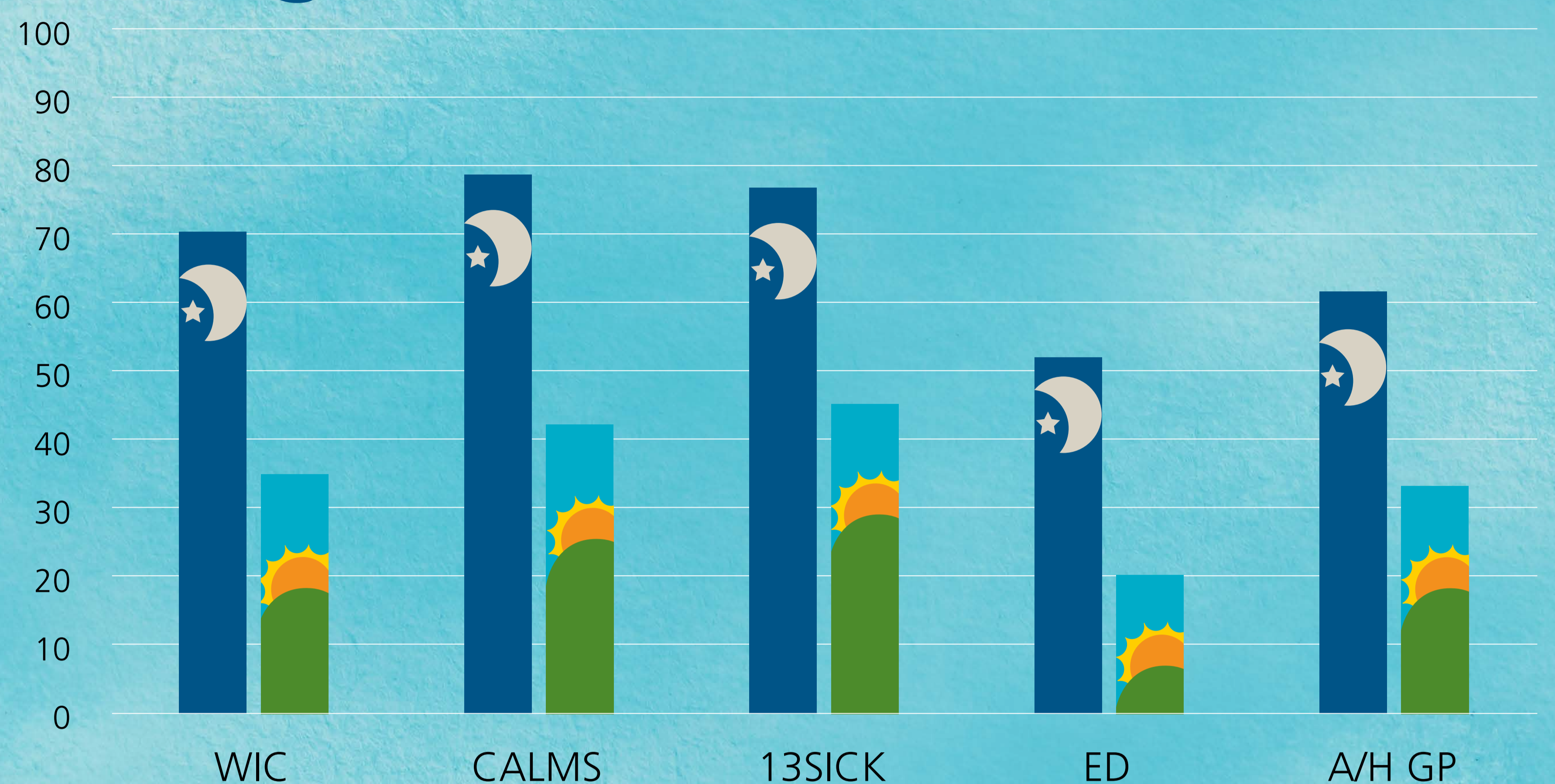
Better health literacy both at the individual and environmental level may reduce ED presentations.

Health literacy is the combined knowledge, skills, confidence and motivation used to make sound decisions about one's health in the context of everyday life. Health literacy is not the sole responsibility of individuals. Health care services and providers also play a role. By partnering with consumers, they can improve communication and build positive relationships, leading to better outcomes.¹

¹ ACT Health, Policy and Government Relations, funded and supported this project.

HCCA Health Literacy Position Statement, Health Care Consumers' Association, Canberra, 2017 <https://bit.ly/2NNgixB>

Findings



The most common reasons for choosing to use after-hours primary care services



THE ISSUE ARISES AFTER-HOURS

Overwhelmingly, the most common reason for using after-hours services is that the event precipitating care occurs outside standard working hours. This challenges a possible misconception that consumers who use after-hours services are seeking an alternative to general practice, and it is consistent with the literature.



CONSUMERS DON'T WANT TO WAIT UNTIL THE NEXT DAY

Most consumers indicated that they are using after-hours services out of necessity and this drives their decision.



FACTORS AFFECTING CONSUMER DECISIONS

Consumers value the convenience provided by after-hours services. The desire for convenience can depend on a range of factors.

The benefits of the home doctor service were that they came to my house...trying to take a sick child out in the middle of winter in Canberra is tough. Participant G
[Using an after-hours service means] we can sort out care arrangements for the next day and be ready to roll at 7.30 the next day knowing who is going where rather than waking up, making the GP appointment, then not going to work anyway, but then you might have been able to go to work. Participant H



Perceptions of urgency vary among consumers.

So recently my son was having asthma attacks [that required steroids and oxygen]. We went to Emergency... that's one of those situations where you don't think about where you are going, you just go straight to the hospital." Participant M
To be honest, my husband is a real stressor, especially about health... so he's more of the "We needed it right now" attitude, whereas I'm a bit more "Oh, we could wait." Participant A



Reassurance is highly valued by consumers, but not always provided.

Anytime I have called, it's very, "Oh yep, she's under six months, she's got gastric, this is the action,"... I said, "I don't want to take her to the hospital, I think she's okay. She's alert, she's not lethargic, she's just vomiting." There was no follow-up of... what to do if I didn't want to take her to the hospital... I think I would have appreciated that maybe "We can give you a call in an hour and see how she's going" or "This is what we want you to do". There was no flexibility in the treatment. Participant G