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WORLD ASSOCIATION FOR DISASTER AND EMERGENCY MEDICINE

CS46: EMERGENCY HEALTHCARE DEMAND

DR SAM TOLOO

Prof. Gerry FitzGerald, Dr Sam Toloo, Dr Joanna Rego
Queensland University of Technology, Brisbane, Australia





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CS46: EMERGENCY HEALTHCARE DEMAND

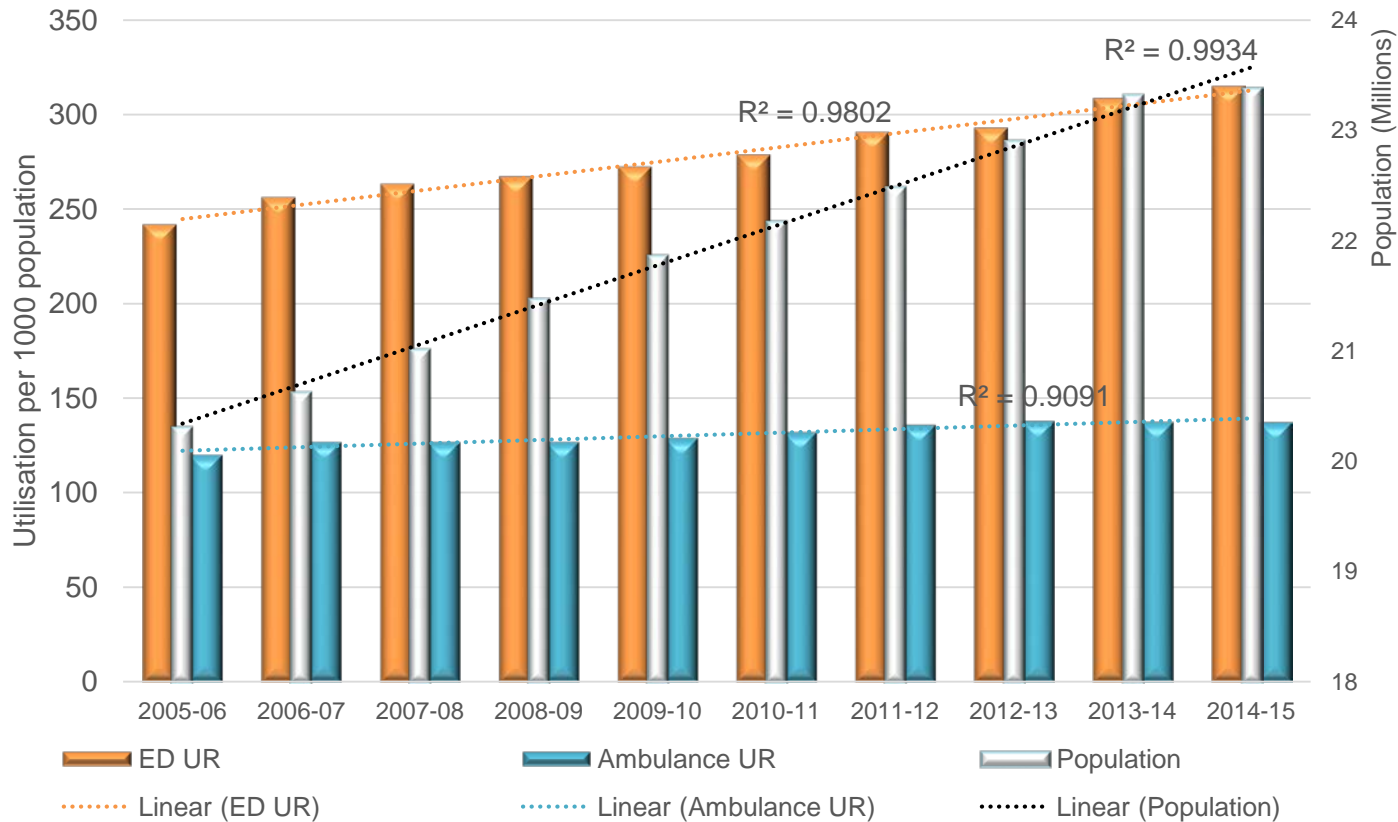
DISCLOSURE INFORMATION

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Trends in demand for Emergency Health Services in Australia: 2005-06 to 2014-15



Annual growth

- Public ED: 3%
- Ambulance: 1.5%
- Population: 1.6%





Where is the growth?

- In high urgency categories (ATS 1–3)
- Across all diagnostic groups, mainly Injury & Poisoning, Respiratory, Digestive, Infections, Circulatory, Mental disorders
- All ages, but higher in very young (<10 yo) and elderly (>60 yo)
- Male and female

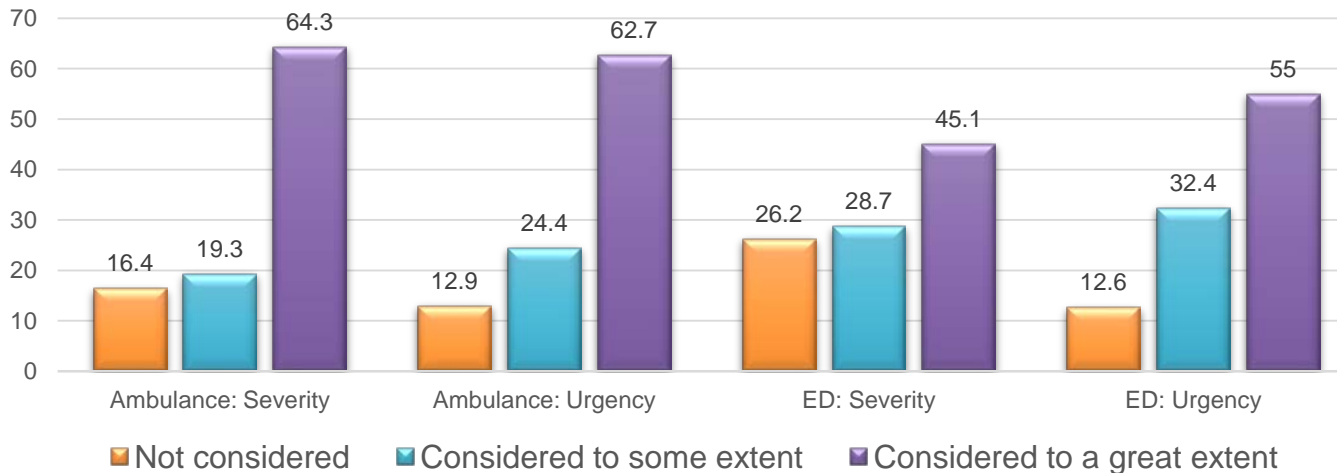
Demand ⇨ Congestion ⇨ Consequences



Are they “inappropriate” users?

- Not from patients’ perspective

Perceived Severity and Urgency as Reasons for Using EHS



~90% use EHS for urgent care

- They need medical care, many urgently
- 1 in 4 low acuity (ATS 4–5) is admitted





We need to manage demand

- **Improved primary and secondary prevention** to lower the rate of acute health crises. Requires extensive system wide strategies
- **Treatment in-situ:** information provision, using technology to monitor status from afar and provide assurance, treat and not transport by ambulance and primary care options (e.g. mobile GPs)
- **Diversion** to an alternative service, e.g. primary care, private ED etc





What works and what doesn't?

- ☺ Prevention: healthier people
- ☹ Telephone & Nurse Advisory services
- ☹ General practitioner (GP)
- ☹ Other Primary Healthcare
- ☹ Private sector
- Expanded paramedic role
 - ☺ In-situ treatment; Diversion
 - ☺ Extra pressure on ambulance
- Patient's **perceived need for urgent care** is the key.

Fragmented system





Coordinated Approach to Acute Care

- To identify and provide access to safe and cost-effective alternatives to meet the patients' needs
- System-wide coordination of pathways to EDs and inpatient care
- Coordinated approach to information and advice:
 - Utilising existing ED, ambulance dispatch, and telephone and nurse advisory services
 - Working in partnership and supported by medical advice
- Service provision including primary care and community services facilitated by nurse / advisory systems
- Enhanced education and scope of paramedics' practice to facilitate primary evaluation and deferral or fast-tracking to appropriate services
- Coordinated approaches to data collection, sharing and analysis to facilitate system-wide evaluation





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**See you in Brisbane,
Australia in 2019!**





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Thank
you!

