

# National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2014

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# National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2014

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator
<b>Indicator type:</b>	Progress measure
<b>Short name:</b>	PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2014
<b>METEOR identifier:</b>	517646
<b>Registration status:</b>	<a href="#">Health</a> , Superseded 14/01/2015
<b>Description:</b>	Attendances at public hospital emergency departments that could have potentially been avoided through the provision of appropriate non-hospital services in the community.
<b>Indicator set:</b>	<a href="#">National Healthcare Agreement (2014)</a> <a href="#">Health</a> , Superseded 14/01/2015
<b>Outcome area:</b>	<a href="#">Primary and Community Health</a> <a href="#">Health</a> , Standard 07/07/2010
<b>Data quality statement:</b>	<a href="#">National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2014 QS</a> <a href="#">Health</a> , Superseded 14/01/2015

## Collection and usage attributes

<b>Computation description:</b>	<p>Potentially avoidable general practitioner (GP)-type presentations are defined as presentations to public hospital emergency departments with a Type of visit of <i>Emergency presentation</i> where the patient:</p> <ul style="list-style-type: none"><li>• was allocated a Triage category of 4 or 5 and</li><li>• did not arrive by ambulance or police or correctional vehicle and</li><li>• was not admitted to the hospital, not referred to another hospital, or did not die.</li></ul>
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Limited to public hospitals in Peer Groups A and B.

To ensure comparability over time, emergency department activity at the Mersey Community Hospital is reported with Peer Group B hospitals for National Healthcare Agreement purposes. Whilst it is currently not a Peer Group A or B hospital, in the baseline year (2007-08) Mersey was a campus of the Peer Group B North West Regional Hospital and its emergency department activity was included in the baseline.

Analysis by state and territory, remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socioeconomic Disadvantage (IRSD) is based on usual residence of person.

Presented as a number.

<b>Computation:</b>	Numerator only.
<b>Numerator:</b>	Number of potentially avoidable GP-type presentations to emergency departments.
<b>Numerator data elements:</b>	<b>Data Element / Data Set</b>

Hospital peer group

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Non-admitted patient emergency department service episode—transport mode \(arrival\), code N](#)

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Non-admitted patient emergency department service episode—type of visit to emergency department, code N](#)

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Non-admitted patient emergency department service episode—episode end status, code N](#)

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Non-admitted patient emergency department service episode—triage category, code N](#)

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

**NMDS / DSS**

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data

**Disaggregation:**

Nationally by Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socioeconomic Disadvantage (IRSD) deciles (not reported this cycle).

2011–12 (updated for peer group), 2012-13—State and territory.

State and territory, by (all not reported this cycle):

- Indigenous status
- remoteness (Australian Standard Geographical Classification Remoteness Structure)
- SEIFA IRSD quintiles
- peer group and triage category

Some disaggregations may result in numbers too small for publication.

Disaggregation by peer group is limited to Peer Groups A and B, as this is the scope of the collection, and coverage varies for other hospitals by state and territory.

**Disaggregation data elements:**

**Data Element / Data Set**

Hospital peer group

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

**NMDS / DSS**

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Person—Indigenous status, code N](#)

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

**NMDS / DSS**

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Non-admitted patient emergency department service episode—triage category, code N](#)

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

**NMDS / DSS**

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data

**Data Element / Data Set**

[Person—area of usual residence, geographical location code \(ASGC 2011\) NNNNN](#)

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

**NMDS / DSS**

[Non-admitted patient emergency department care NMDS 2012-13](#)

**Guide for use**

Data source type: Administrative by-product data  
Used for disaggregation by state/territory, remoteness and SEIFA IRSD

**Comments:** Most recent data available for 2014 Council of Australian Governments (COAG) Reform Council (CRC) report: 2012–13.

This definition of 'potentially avoidable GP-type presentation' was used in the Booz Allen Hamilton study of emergency department care in NSW, and is considered to be a reasonable starting approximation of the population that should be receiving service in the primary care sector.

Indicator specification under review by the NHISSC Emergency Data Development Working Group (EDDWG).

## Representational attributes

**Representation class:** Count  
**Data type:** Real  
**Unit of measure:** Episode  
**Format:** NN[NNNNN]

## Indicator conceptual framework

**Framework and dimensions:** [Accessibility](#)

## Data source attributes

**Data sources:**

**Data Source**

[National Non-admitted Patient Emergency Department Care Database](#)

**Frequency**

Annual

**Data custodian**

Australian Institute of Health and Welfare

## Accountability attributes

**Reporting requirements:** National Healthcare Agreement

**Organisation responsible for providing data:** Australian Institute of Health and Welfare

**Benchmark:** [National Healthcare Agreement performance benchmark and National Partnership on Taking Pressure Off Public Hospitals performance benchmark:](#)

By 2012–13, 80 percent of emergency department presentations are seen within clinically recommended triage times as recommended by the Australian College of Emergency Medicine.

[National Partnership on Taking Pressure Off Public Hospitals performance benchmark:](#)

By 2013–14, 95 per cent of hospitals with an ED report to the non-admitted emergency care national minimum data set collection.

[National Partnership Agreement on Taking Pressure Off Public Hospitals output measures:](#)

Output: A nationally accepted definition of what a non emergency GP type presentation is based on emergency department DRGs by June 2012.

Joint Roles: D10 Commonwealth and States to develop a nationally consistent DRG based definition of a non emergency primary care presentation.

**Further data development / collection required:** Specification: Substantial work required, the measure requires significant work to be undertaken.

## Relational attributes

### Related metadata references:

Supersedes [National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2013](#)  
[Health](#), Superseded 30/04/2014

Has been superseded by [National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2015](#)  
[Health](#), Superseded 08/07/2016

See also [National Healthcare Agreement: PI 12-Waiting times for GPs, 2014](#)  
[Health](#), Superseded 14/01/2015

See also [National Healthcare Agreement: PI 21a-Waiting times for emergency hospital care: Proportion seen on time, 2014](#)  
[Health](#), Superseded 14/01/2015

See also [National Healthcare Agreement: PI 21b-Waiting times for emergency hospital care: Proportion completed within four hours, 2014](#)  
[Health](#), Superseded 14/01/2015