

National Healthcare Agreement: PI 19—Selected potentially avoidable GP-type presentations to emergency departments, 2021

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National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2021

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Progress measure
Short name:	PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2021
METEOR identifier:	725791
Registration status:	Health , Standard 16/09/2020
Description:	Attendances at public hospital emergency departments that could have potentially been avoided through the provision of appropriate non-hospital services in the community.
Indicator set:	National Healthcare Agreement (2021) Health , Standard 19/11/2020
Outcome area:	Primary and Community Health Health , Standard 07/07/2010

Collection and usage attributes

Computation description:	<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">• was allocated a triage category of 4 (Semi-urgent: within 60 minutes) or 5 (Non-urgent: within 120 minutes) and• did not arrive by ambulance, or police or correctional vehicle and• was not admitted to the hospital, not referred to another hospital, or did not die. <p>The scope for calculation of this indicator is all hospitals reporting to the Non-admitted Patient Emergency Department Care (NAPEDC) National Minimum Data Set (NMDS) 2019–20 and the NAPEDC National Best Endeavours Data Set (NBEDS) 2019–20.</p> <p>Analysis by state and territory, remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) is based on usual residence of the person.</p> <p>Presented as a number.</p>
Computation:	Numerator only.
Numerator:	Number of potentially avoidable GP-type presentations to emergency departments.
Numerator data elements:	Data Element / Data Set

[Emergency department stay—transport mode \(arrival\), code N](#)

Data Source

[National non-admitted patient emergency department care database](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Emergency department stay—transport mode \(arrival\), code N](#)

Data Source

[National non-admitted patient emergency department care database](#)

NMDS / DSS

[Non-admitted patient emergency department care NBEDS 2019–20](#)

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 2019–20](#)

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 NBEDS 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Emergency department stay—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 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Emergency department stay—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 NBEDS 2019–20](#)

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 2019–20](#)

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 NBEDS 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Disaggregation:

2019–20—State and territory.

Nationally by 2016 SEIFA IRSD deciles (not reported this cycle).

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

- Indigenous status
- remoteness (Australian Statistical Geography Standard (ASGS) 2016)
- 2016 SEIFA IRSD quintiles
- peer group and triage category.

Some disaggregations may result in numbers too small for publication.

Disaggregation data elements:**Data Element / Data Set**

[Establishment—organisation identifier \(Australian\), NNX\[X\]NNNNN](#)

Data Source

[National non-admitted patient emergency department care database](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Used to derive hospital peer group

Data Element / Data Set

[Establishment—organisation identifier \(Australian\), NNX\[X\]NNNNN](#)

Data Source

[National non-admitted patient emergency department care database](#)

NMDS / DSS

[Non-admitted patient emergency department care NBEDS 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Used for disaggregation by state/territory, remoteness and SEIFA IRSD

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 2019–20](#)

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 NBEDS 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Person—area of usual residence, statistical area level 2 \(SA2\) code \(ASGS 2016\) N\(9\)](#)

Data Source

[National non-admitted patient emergency department care database](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Used for disaggregation by state/territory, remoteness and SEIFA IRSD

Data Element / Data Set

[Person—area of usual residence, statistical area level 2 \(SA2\) code \(ASGS 2016\) N\(9\)](#)

Data Source

[National non-admitted patient emergency department care database](#)

NMDS / DSS

[Non-admitted patient emergency department care NBEDS 2019–20](#)

Guide for use

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

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 2019–20](#)

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](#)

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NMDS / DSS

[Non-admitted patient emergency department care NBEDS 2019–20](#)

Guide for use

Data source type: Administrative by-product data

Comments:

Most recent data available for 2021 National Healthcare Agreement performance reporting: 2019–20.

This definition of 'potentially avoidable GP-type presentation' is a refinement of the definition of a primary care patient in an emergency department, as discussed in the [Booz Allen Hamilton study of emergency department care in NSW](#).

Note that for the 2016 and previous reports the scope for the calculation of this indicator was limited to public hospitals in Peer groups A and B, using the peer group classification method as reported in [Australian hospital statistics 2010–11](#), with the addition of emergency department activity at the Mersey Community Hospital.

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](#)

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

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

Source and reference attributes

Reference documents: Australian Institute of Health and Welfare 2012. Australian hospital statistics 2010–11. Health Services Series No. 43. Cat. no. HSE 117. Canberra: AIHW. Viewed 28 May 2020, <https://www.aihw.gov.au/reports/hospitals/australian-hospital-statistics-2010-11/contents/table-of-contents>

Booz Allen Hamilton 2007. Key Drivers of Demand in the Emergency Department. Sydney: New South Wales Department of Health. Viewed 29 May 2020, https://webarchive.nla.gov.au/awa/20080627063427/http://pandora.nla.gov.au/pan/86401/20080627-1631/www.health.nsw.gov.au/pubs/2007/pdf/booz_allen_report.pdf

Relational attributes

Related metadata references: Supersedes [National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2020](#)
Health, Standard 13/03/2020

Has been superseded by [National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2022](#)
Health, Standard 24/09/2021

See also [National Healthcare Agreement: PI 12–Waiting times for GPs, 2021](#)
Health, Standard 03/07/2020

See also [National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: proportion seen on time, 2021](#)
Health, Standard 16/09/2020

See also [National Healthcare Agreement: PI 21b–Waiting times for emergency hospital care: proportion of patients whose length of emergency department stay is less than or equal to four hours, 2021](#)
Health, Standard 16/09/2020