


Primary Care: keeping people out of hospital

Primary health care is vital in preventing, identifying and managing health in local populations. The Federal Department of Health's PHN Program Performance and Quality Framework includes two indicators of hospital activity that are potentially preventable if primary health care is effective:


Rate of potentially preventable hospitalisations (PPHs) can be used to indicate admitted hospital activity that may be preventable in the primary care setting.

Across Australia in 2017-18, around 7% of public and private hospital admissions were considered potentially preventable and nearly 10% of bed days.


PPH rates are higher for some populations and these gaps may be widening:




Indigenous people



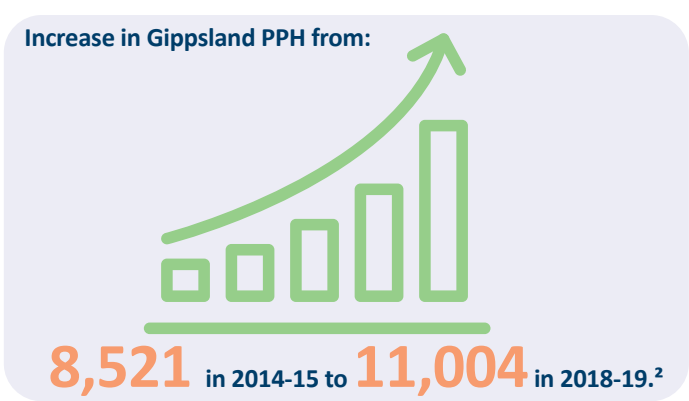
Regional and remote areas



Areas with more socio-economic disadvantage



Older adults, with a smaller peak in young children



The number of PPHs and bed days by Local Government Area (LGA)¹

LGA	PPHs Admissions	PPHs Per 1,000 Persons
Baw Baw	1,762	29.6
Latrobe	2,915	34.2
East Gippsland	1,721	29.2
Gippsland South Coast	2,414	28.7
Wellington	1,419	27.4
Gippsland	10,231	30.1
Victoria	184,986	27.0

Top 12 conditions for Gippsland	Number of potentially preventable hospitalisations	Average bed days
1. Chronic Obstructive Pulmonary Disease	1360	4.76
2. Cellulitis	1277	4.64
3. Iron deficiency anaemia	1275	1.23
4. Diabetes complications	1212	4.33
5. Congestive cardiac failure	992	5.80
6. Urinary tract infections, including pyelonephritis	873	3.78
7. Dental conditions	823	1.14
8. Angina	678	2.25
9. Convulsions and epilepsy	558	2.65
10. Ear, nose and throat infections	511	1.45
11. Pneumonia and influenza	381	7.83
12. Asthma	353	1.82

Average cost per weighted inpatient episode in Victoria was \$4,563³



The total cost of Gippsland potentially preventable hospitalisations³



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Rate of low urgency presentations to emergency departments

This can indicate activity that could have been managed in primary care. They include triage category 4 and 5 (semi-urgent and non-urgent) presentations, excluding arrivals by ambulance and those admitted to hospital.

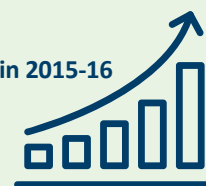
Five funded emergency departments (ED) in Gippsland :

Bairnsdale Regional Health Service | Bass Coast Regional Health | Central Gippsland Health Service | Latrobe Regional Hospital | West Gippsland Healthcare Group

Gippsland activity 2018-19	Lower urgency presentations	Lower urgency presentation rates per 1,000 people
Baw Baw	9,061	174
Latrobe	16,285	217
Gippsland South Coast	8,494	131
East Gippsland	8,275	176
Wellington	9,271	211
Gippsland	51,386	182
Australia	2,878,835	117

Lower urgency ED presentations in Gippsland⁴

Increase from **48,496** in 2015-16 to **51,386** in 2018-19



42% of all ED presentations (35% for Australia)

76% of all category 4 and 5 presentations

47% were in the after-hours period (same as Australia)



Children aged 0-4 years most likely age group to present (people aged 75 or over least likely)

Gippsland PHN investments and activities



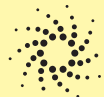
Place Based Flexible Funding – allied health services supporting people to manage chronic disease.



Integrated Team Care (care coordination and supplementary services) for Aboriginal and Torres Strait Islander people.



Primary Mental Health Care for people experiencing mild, moderate or severe mental illness.



Latrobe Health Innovation Zone project -

a project focusing on stopping smoking, improving chronic disease and cancer screening and risk assessment.



Digital health – My Health Record, referrals and discharge as connections between acute and primary care.



POLAR and risk prediction, quality improvement projects, planning.



After-hours – supporting the reduction of presentations to EDs

References:

1. AIHW, Disparities in Potentially Preventable Hospitalisations across Australia 2012-13 to 2017-18, Feb 2020
2. Victorian Health Information Surveillance System; Ambulatory Care Sensitive Conditions, online reporting; <http://vhiss.reporting.dhhs.vic.gov.au/ViewContent.aspx?TopicID=1>
3. IHPA, National Hospital Cost Data Collection (NHCDC) Round 22 Fact Sheet, 2017-18. Accessed: 28/04/2020 https://ihpa.govcms.gov.au/sites/default/files/publications/round_22_nhcdc_infographics_admitted.pdf
4. AIHW; Use of emergency departments for lower urgency care: 2015–16 to 2018–19