

MEASURING GENERAL PRACTICE APPOINTMENT AVAILABILITY: THE USE OF AN AUTOMATED QUERY

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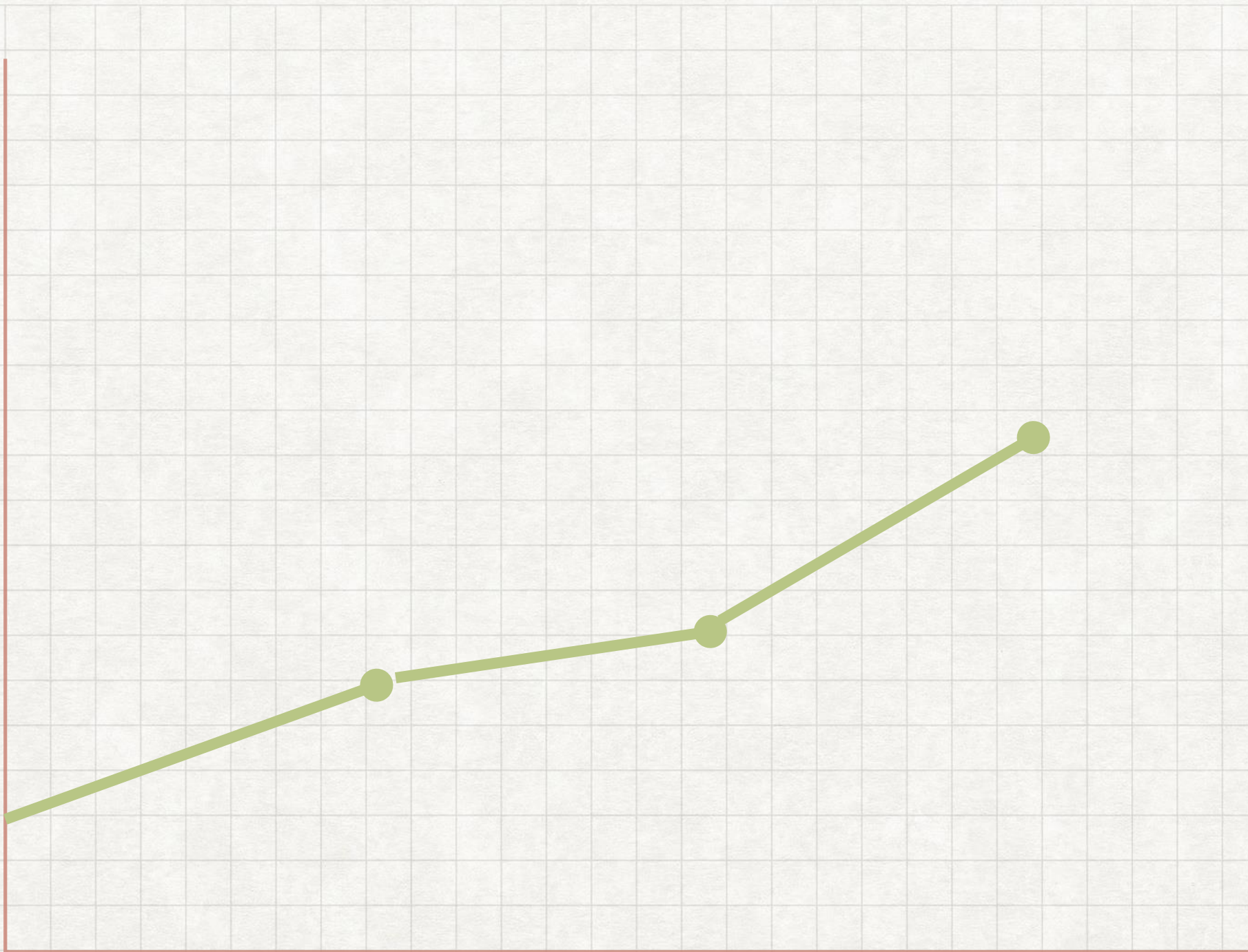
INTRODUCTION

IMPROVING ACCESS

IMPROVES HEALTH OUTCOMES

Health outcomes

Access



THE BURDEN OF DISEASE

UNCOVERED BY GOOD ACCESS TO PRIMARY CARE



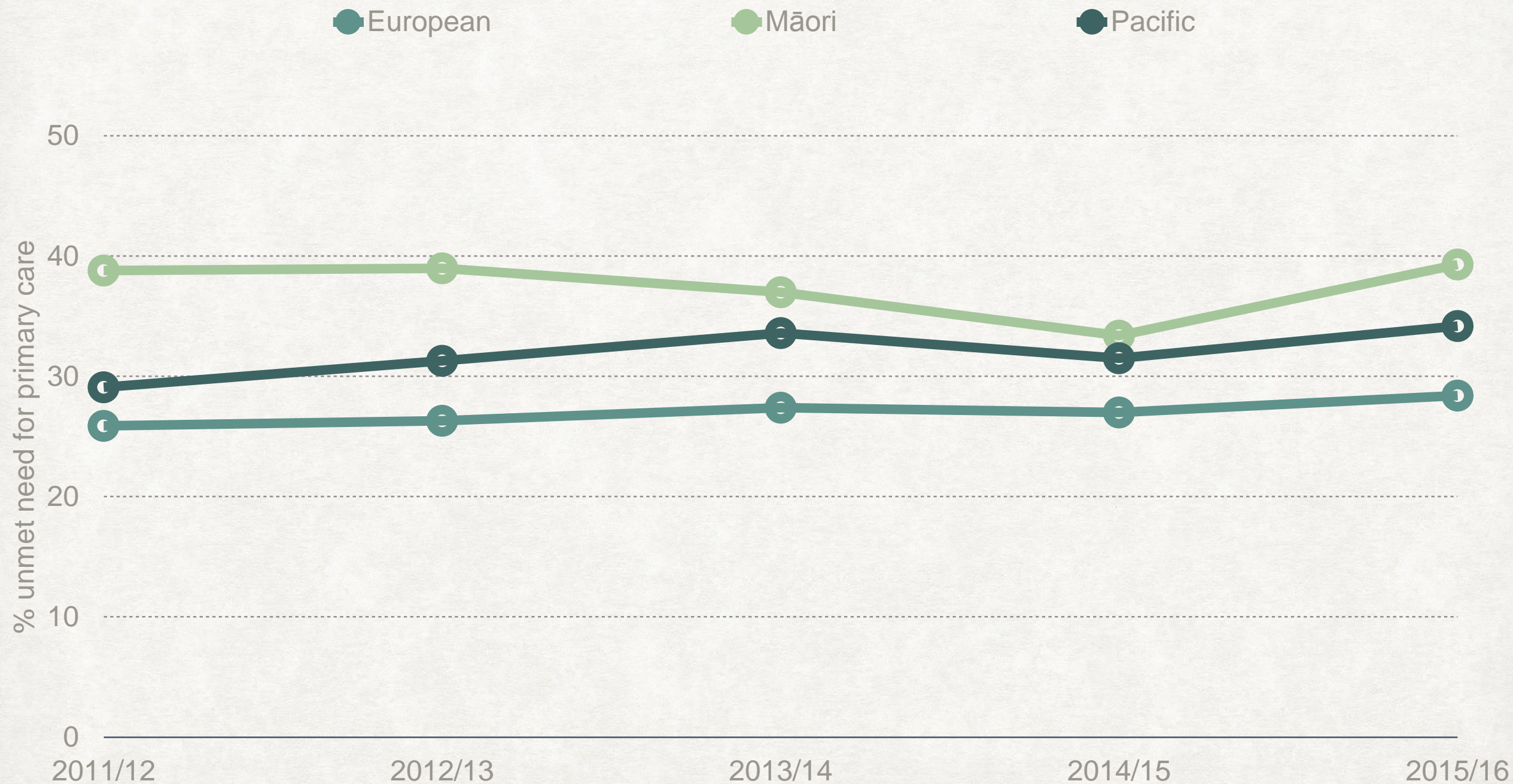
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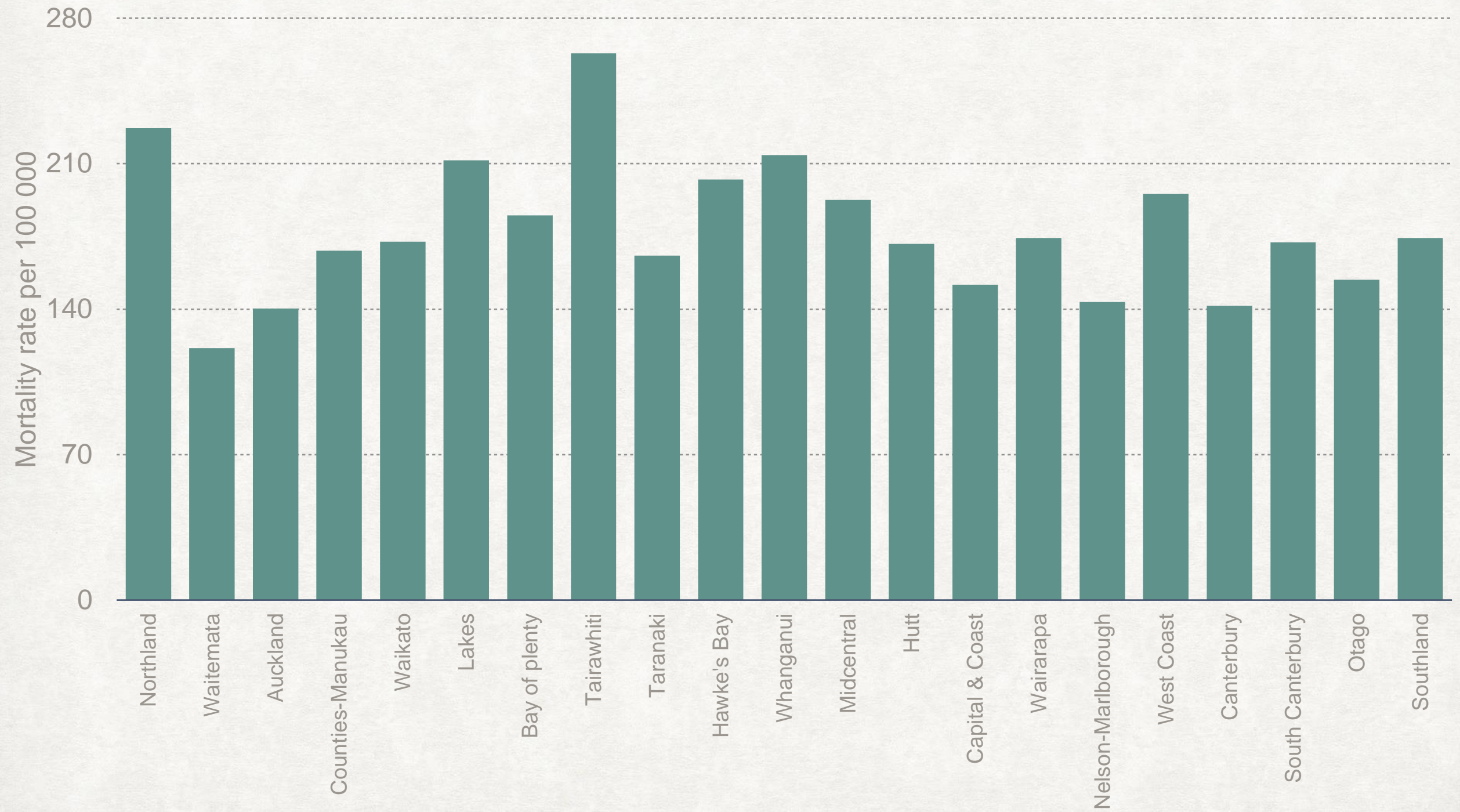
THE PROBLEM OF ACCESS IN NZ

RESULTS FROM THE NZ HEALTH SURVEY



THE PROBLEM OF ACCESS IN NZ

LINKED TO AMENABLE MORTALITY



BROAD CONCEPT OF ACCESS

Accommodation

Affordability

Availability

Accessibility

Acceptability

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TYPES OF APPOINTMENT MAKING



Traditional



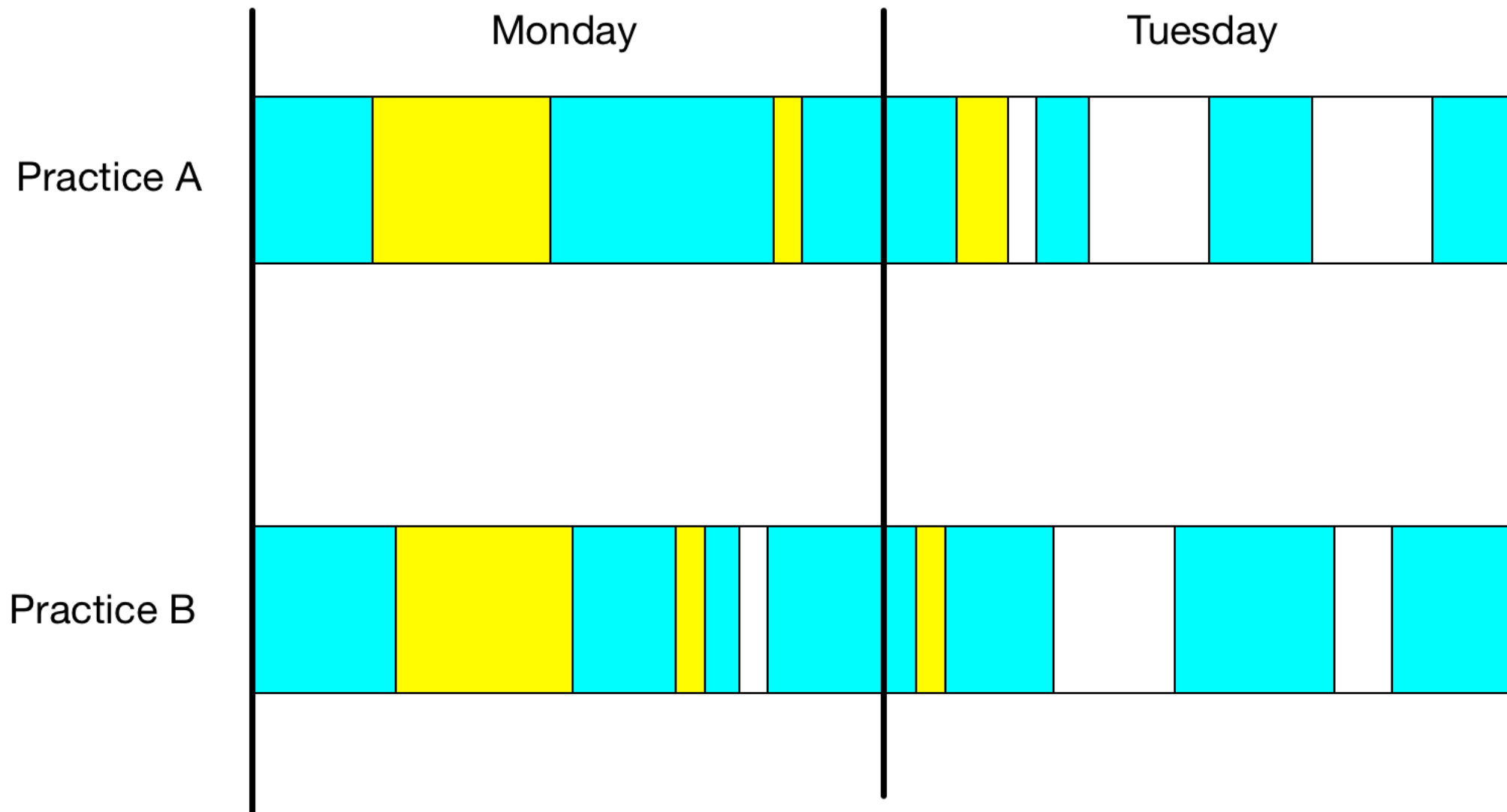
Carve out



Advanced access

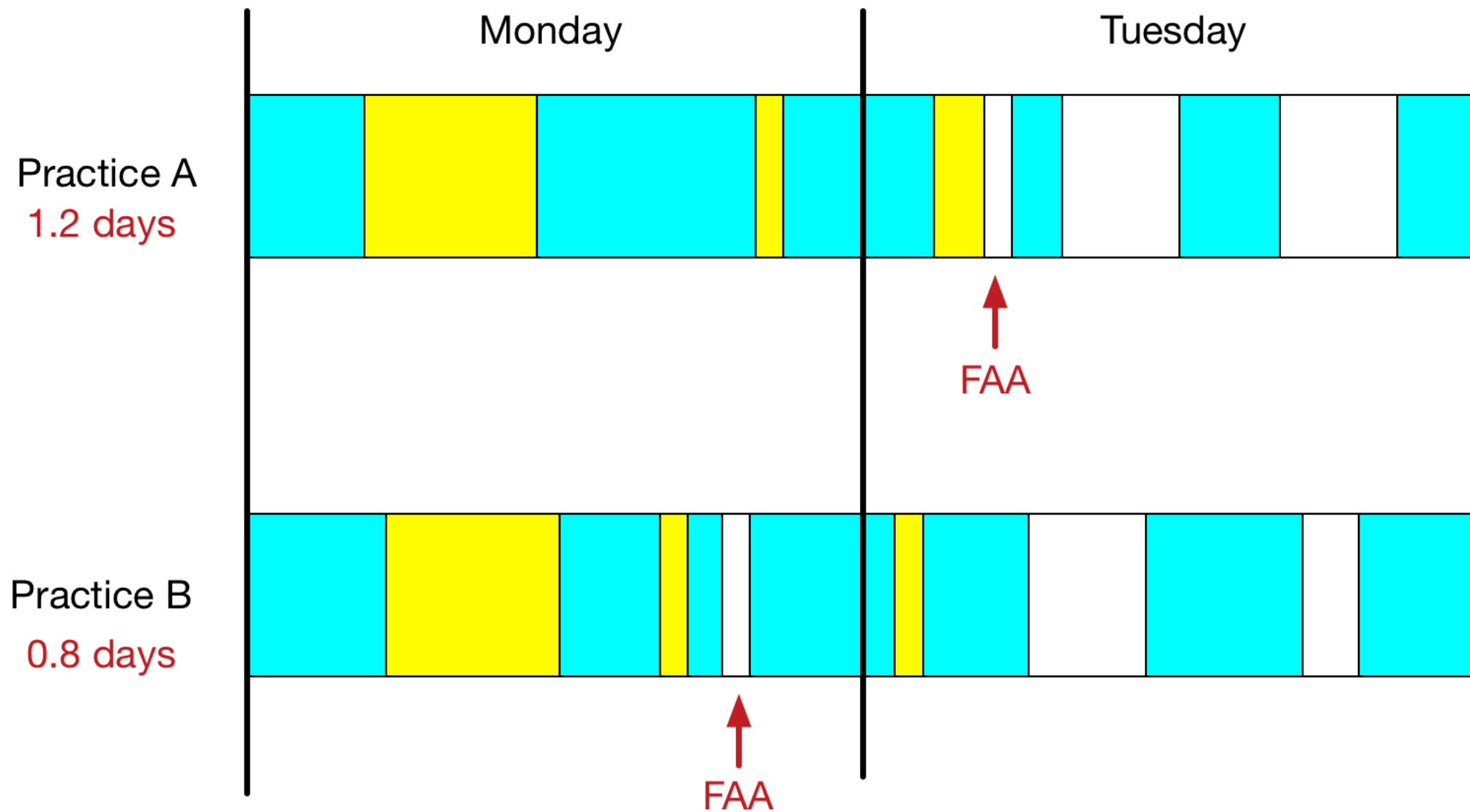
HOW TO MEASURE AVAILABILITY

A TYPICAL MONDAY IN TWO PRACTICES



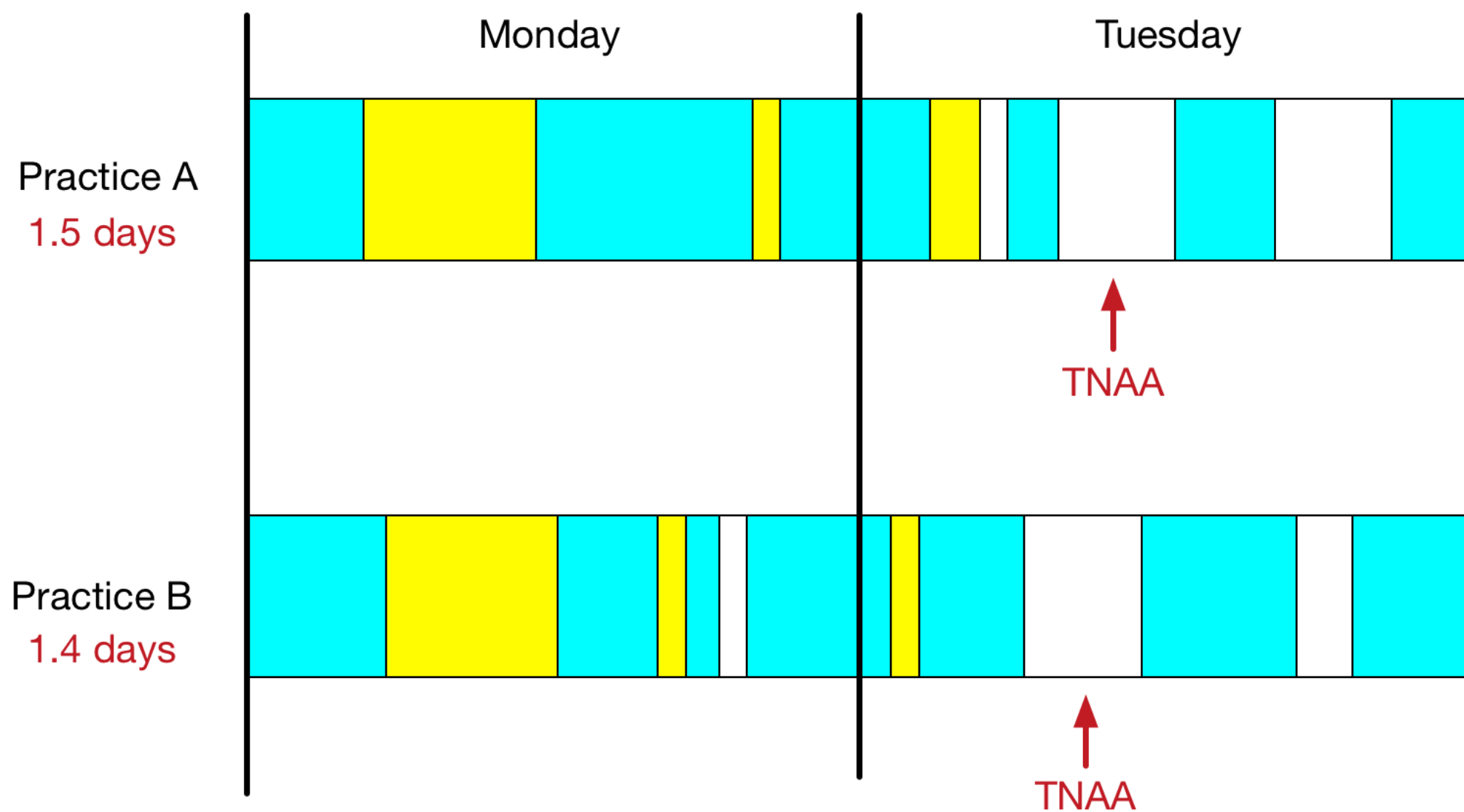
HOW TO MEASURE AVAILABILITY

USING THE FIRST AVAILABLE APPOINTMENT MEASURE



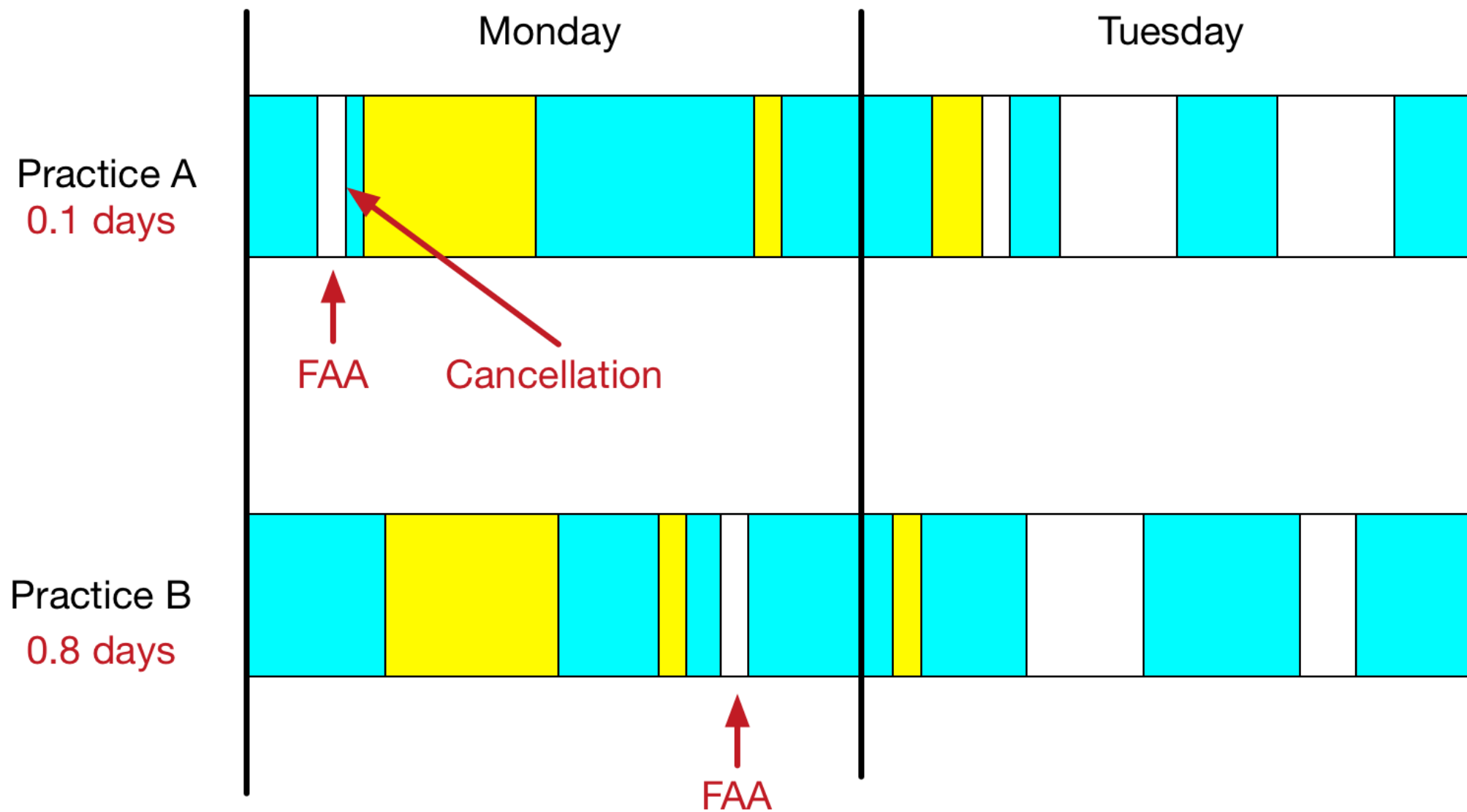
HOW TO MEASURE AVAILABILITY

USING THE THIRD NEXT AVAILABLE APPOINTMENT MEASURE



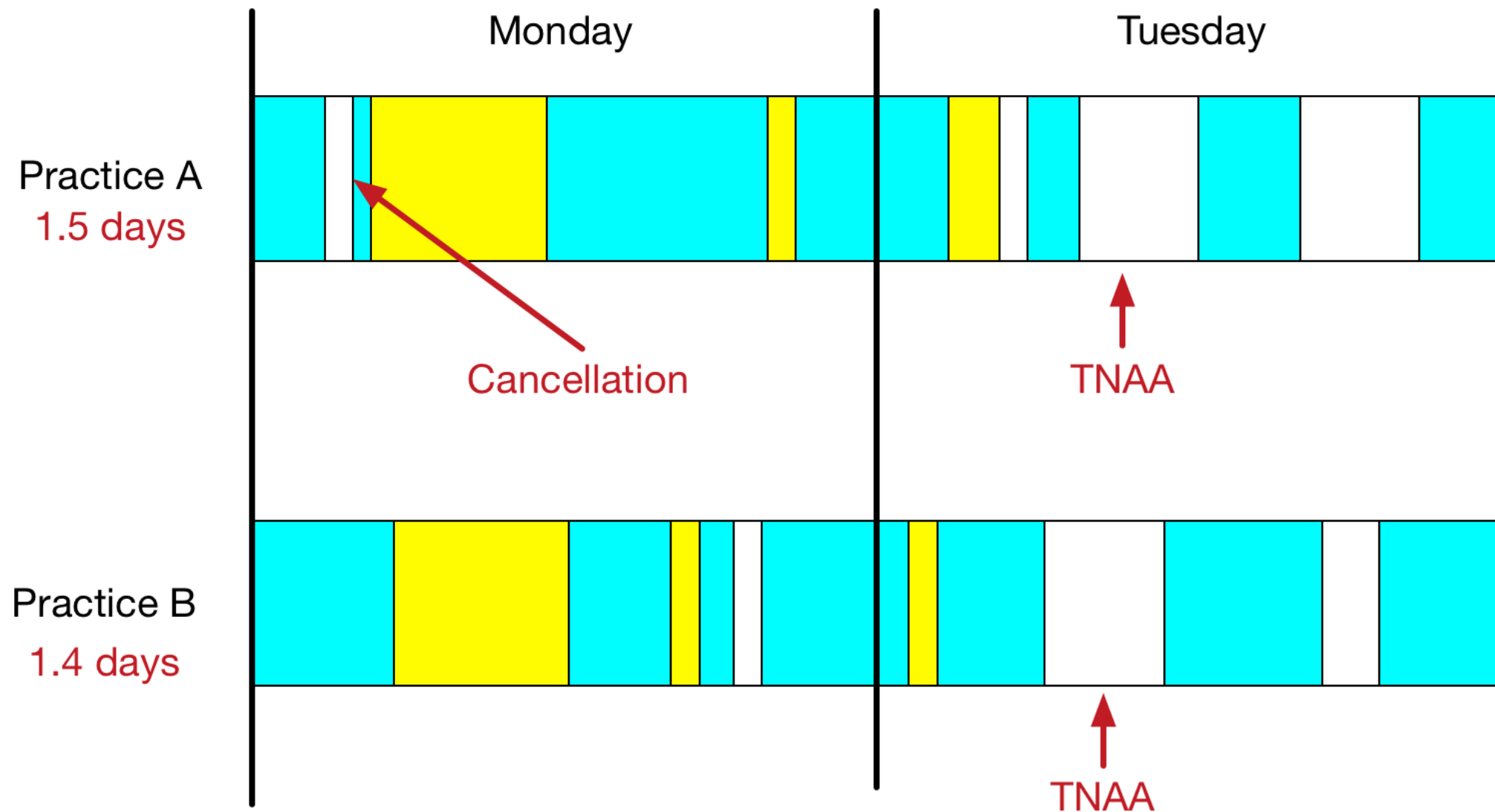
HOW TO MEASURE AVAILABILITY

RANDOM EFFECTS IMPACT ON FAA



HOW TO MEASURE AVAILABILITY

RANDOM EFFECTS IMPACT ON TNAA



AIMS

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- Determine if appointment pressure exists in Northland
- Provide practices with a suite of tools to use in the Neighbourhood Healthcare Home model

METHODS

PRACTICE ELIGIBILITY

- MedTech
- Not reliant on locums
- Total of 34 practices eligible

DR INFO

AN AUTOMATED QUERY

- FTE calculated for GPs practice
- Days away and standard working days collected
- Query run weekly on different days of week over five weeks
- Approximate time for audit was 1min
- Third next available appointment calculated for each GP in each practice
- Practice average calculated, adjusting for FTE and days away

RESULTS

AVERAGE TNAA FOR NORTHLAND

2.5 days
(95% CI 2.1-2.8)

AVERAGE TNAA

DEPRIVATION AND WALK-IN CLINICS

Deprivation	N practices	Rural %	N walk-in clinics	TNAA days (95% CI)
Least deprived	10	50%	1	2.8 (2.4-3.2)
Less deprived	9	33%	0	1.9 (1.7-2.2)
More deprived	6	33%	4	3.1 (1.8-4.3)
Most deprived	8	100%	3	2.4 (1.6-3.1)

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- TNAA does not offer a measure of access to urgent appointments
- TNAA provides one picture of access – is not a complete picture
- Possibility to use TNAA as an outcome measure in models of care