Healthdirect's After Hours GP helpline – a survey of patient satisfaction with the service and compliance with advice



Ling Li¹, Andrew Georgiou¹, Juan Xiong¹, Mary Byrne², Maureen Robinson², Johanna I Westbrook¹

- 1 Centre for Health Systems and Safety Research, Australian Institute of Health Innovation, Macquarie University
- 2. Healthdirect Australia







Centre for Health Systems and Safety Research

- Medication Safety and e-Health
- Communication and Work Innovation
- Human Factors & eHealth
- Pathology and Imaging Informatics
- Safety & Integration of Aged and Community Care Services
- Primary Care Safety and eHealth

Research Methods Development

Background

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HEALTH DIRECT'S AFTER HOUR GP HELPLINE



- Telephone Triage and Advice Services
 (TTAS) involve people with a health
 problem receiving assessment and advice
 over the telephone.
- Most common TTAS services are either nurse- or physician-led.
- In many countries these services have become an important part of delivering out-of-hours care e.g., Sweden, Denmark, Canada, United Kingdom and the US.

Healthdirect Australia



- Access to health advice and information using telecommunications and online technologies
- After hours GP helpline (AHGP)
 - Nurse-provided telephone triage and advice service
- Patient compliance with after hours GP advice an indicator of impact of services on health service utilisation and outcomes
 - Previous research has reported a 60-75% compliance rate with nurse triage telephone helplines



Aim



To assess patients' overall satisfaction and compliance with advice provided by the After Hours General Practice service and to identify potential factors associated with advice compliance.



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Methods





- Regular Computer-assisted Telephone Interview
 (CATI) surveys from Feb Sept 2013
- 2 types of compliance data:
 - Self-reported compliance
 - Matching of patient reported actions with recommended advice as documented by GPs in the Healthdirect database
- Satisfaction rate calculated as proportion of AGPH patients/callers who reported being satisfied or very satisfied with service
- Compliance rate calculated as proportion of patients whose reported actions were fully or partly compliant with recommended advice recorded by GPs

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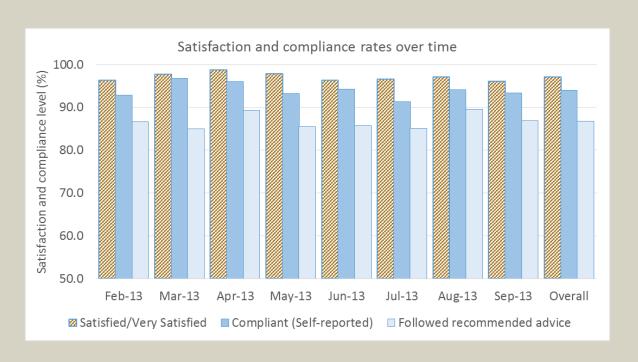
PATIENT AND CALL CHARACTERISTICS

Characteristics	Category	No. of calls (%)	Percentage of patients followed recommended advice*(n)	p-value
Calling-for	Self	1250 (50.3)	85.8 (1072)	0.1
	Other	1236 (49.7)	87.8 (1085)	
Age group	15-29 years	670 (27.0)	86.0 (576)	0.8
	30-59 years	1487 (59.8)	87.1 (1295)	
	60+ years	329 (13.2)	86.9 (286)	
Gender	Female	2018 (81.2)	86.8 (1752)	0.7
	Male	464 (18.7)	86.4 (401)	
Location	Metropolitan	2032 (81.7)	87.4 (1776)	0.09
	Rural	450 (18.1)	83.8 (377)	
Estimated severity	Did not know what to do	435 (17.5)	87.1 (379)	<0.0001
	Over-estimated	658 (26.5)	84.5 (556)	
	Under-estimated	193 (7.8)	76.2 (147)	
	Accurately estimated	1184 (47.6)	89.7 (1062)	
AGPH advice	ED or see GP immediately	851 (34.2)	74.4 (633)	<0.0001
	See GP/AH during business hour	1429 (57.5)	93.5 (1336)	
	Self-care only	206 (8.3)	91.3 (188)	
Satisfaction level	Dissatisfied/very dissatisfied	16 (0.6)	56.3 (9)	<0.0001
	Neural	55 (2.2)	69.1 (38)	
	Satisfied/very satisfied	2415 (97.1)	87.4 (2110)	

^{*} Includes full and partial compliance with advice received



SATISFACTION AND COMPLIANCE RATES OVER TIME





MEASURED COMPLIANCE AND CALL CHARACTERISTICS

- Compliance did not vary greatly (range from 84% - 88%) across age, gender and location
- Level of compliance was similar between calls being made by others on behalf of patients (87.8%) and calls made by the patient themselves (85.8%, p=0.1)
- Compliance was lowest in patients who under-estimated the severity of the condition (76.2%), and highest in patients who accurately estimated the severity of the condition (89.7%)





MEASURED COMPLIANCE AND CALL CHARACTERISTICS

- The highest level of compliance was achieved among patients who were advised to see a GP/AH professional during business hours (93.5%), followed by those advised to selfcare (91.3%).
- The lowest compliance was among those who were advised to visit an ED or immediately visit a GP (74.4%)
- Compliance for those patients who reported being satisfied or very satisfied was 87.4% while it was 69.1% and 56.3% respectively for those who felt neutral or dissatisfied with the service



Implications





- Satisfaction with the AHGP service high overall (97.1%)
- Self-reported compliance with AHGP advice was 94.0%, but actions only consistent with documented GP advice in 86.8% of clients

Implications





- Patients/callers who were satisfied or very satisfied with the telephone consultant services were more likely to follow the GP's advice; increasing satisfaction levels with the service may improve patient compliance
- Compliance was greatest among patients who accurately estimated the severity of their condition

Limitations



- Challenges in applying and interpreting the recommended advice
- Clinical record system only allowed for recording of one level of advice; GPs gave a spectrum of advice to cover any changes in health conditions



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Conclusions



- Patients/callers were generally satisfied with the AHGP helpline and most patients complied with recommended advice
- Non-compliance may be ascribable to resolution of health concern/s
- Compliance with the recommended advice varied depending on overall satisfaction with the service, type of AHGP advice, and the estimated severity of the condition/s.





Thank You

andrew.georgiou@mq.edu.au

Ling Li

ling.li@mq.edu.au