



KEY MESSAGES

REFinE-PHC: Patient Experiences of Primary Care

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Policy context

Given the significance of primary care in the delivery of health services to Australians, and new initiatives to develop Health Care Homes, it is important to assess consumers' views about it. However, there is no Australian survey that both captures elements such as perceptions of quality, costs and access and provides detailed individual level information about personal and health characteristics of respondents to enable analysis of the association between these characteristics, those of the practice and GP the individual consults, her or his experiences, out-of-pocket costs and what patients consider important attributes of general practice, including their perceptions about quality.

Key messages

- > Almost all respondents have a regular GP or regular practice. Eighty-nine percent of respondents reported that they usually visit the same practice when consulting a GP; 80% usually see the same GP. When respondents went to another practice, it was because their regular GP was not available (43%), for convenience in location or opening hours (28%), or for bulk billing (21%).
- > Bulk billed visits are not shorter or lower quality. There are no differences in perceptions of quality of care, including the length of the consultation, between bulk billed and non-bulk billed patients. Forty-two percent of respondents indicated that their general practice bulk billed some services or some patients; 41% indicated that their practice always bulk billed; 71% of respondents reported that they were bulk billed at their last visit. The mean OOP cost for those who were not bulk billed was \$34.09.
- > Few people have problems with the cost of care. A third of survey respondents reported that in the preceding 12 months, they needed to visit a GP but did not. Of these, 16% reported the reason as being an inability to afford the cost of the visit and/or follow-up care and 3% reported it as the cost of transport to the practice (3%).
- > Access to a GP has some effect on ED visits but the impact is small. Of the 19% of respondents who reported visiting an ED in the past 12 months, 23% indicated that this was because they could not get an appointment to see a GP. The probability of attending an ED is 8% lower for those who experience high quality GP care as perceived by the patient compared to those who experience low quality GP care.