

Multiple presentations to the emergency department: A conceptual framework

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Objective

To present an understanding of what contributes to emergency department (ED) presentations by people with chronic illness who present on multiple occasions.

Methods

Qualitative descriptive study using semi-structured interviews with 34 people who had presented six or more times to the ED over the previous 12 months. The last presentation had to be for either chronic respiratory or for mental health reasons. Interviews captured details about participants' health as well as events preceding ED presentations, while at the ED and following presentations.

Lessons learned

Most participants had presented to the ED for one or more reasons, with the main reason being respiratory, mental health or chronic pain. Participants had between 1-6 chronic health conditions and all had a general practitioner (GP). Prior to attending the ED participants usually engaged in activities to avoid going to ED and many sought advice from family, GPs and specialist teams. Events in the ED and inpatient stays following included positive and negative experiences. Four trajectories about the likely ongoing presentations to ED emerged. These were sustained use, increased use, decreased use because of improved health status and decreased use because of increased health and social input.

Implications

To address the issue of multiple presentation to the ED a multi-pronged approach is required that includes helping people to address their personal health and social circumstance to support their lives in the community, changing practice regarding assessment and management in individual presentations both within ED and the inpatient setting, and developing integrated continuous service arrangements.