

5 The encounters

This chapter includes details about the encounters in general practice from each of the 10 years of the BEACH study from 1999–00 to 2008–09. The direction and type of change from 1999–00 to 2008–09 is indicated for each result in the far right column of the tables: \uparrow/\downarrow indicates a statistically significant linear change, \uparrow/\downarrow indicates a marginally significant linear change, § indicates a non-linear significant or marginal change, and – indicates there was no change.

Significant linear changes can be extrapolated to estimate the national increase or decrease in the content of encounters between 1999–00 and 2008–09. An example of an extrapolated change is given for each table. The method used to extrapolate to national change estimates is described in Chapter 2, Section 2.8.

5.1 Content of the encounters

Table 5.1 provides an overview of the changes over time for data collected in BEACH between 1999–00 and 2008–09. As the table shows, many changes have occurred over the 10-year period, representing the changes occurring in Australian general practice over this time.

The number of reasons for encounter given by the patient and recorded by the GP increased significantly over the decade, from 148.5 RFEs per 100 encounters to 156.5 per 100 encounters. Changes in types of RFEs are investigated in Chapter 6.

A significant increase in the rate of problems managed was first detected in 2007–08 and continued to rise in 2008–09 to a rate of 154.6 problems managed per 100 encounters. The rate in 1999–00 was 146.7 per 100 encounters, indicating an additional 24.7 million problems managed in general practice in 2008–09 compared with a decade earlier.

Reflecting the increase in problems managed was an increase in the rate of chronic problems managed, which shows a linear increase between 1999–00 and 2008–09, from 47.2 chronic problems per 100 encounters to 55.1 per 100 encounters. This represents an estimated additional 14.0 million chronic problems managed in general practice nationally in 2008–09 compared with 1999–00.

There was also a significant increase in the rate of new problems managed, from 45.3 per 100 encounters to 57.4 per 100 encounters, representing an increase of 18.5 million new problems managed over the 10-year period.

Although there was no change since 1999–00 in the overall rate of medications recorded, changes in the form of supply of medications occurred. There was a significant decline in the rate of medications prescribed to patients, representing 1.8 million fewer prescriptions written in 2008–09 than in 1999–00. However, the rate of GP-supplied medications increased from 6.9 per 100 encounters to 11.0 per 100, indicating an additional 5.3 million medications supplied by GPs to patients in 2008–09. More detailed analysis of these results can be found in Chapter 9.

Other areas that demonstrated an increase over time included procedures, referrals (overall, and to specialists and allied health professionals), pathology and imaging orders, and orders

for other investigations (Table 5.1). These changes are reported in more detail in their respective chapters.

As a proportion of all Medicare/DVA-claimable encounters recorded in BEACH, long surgery consultations decreased, from 8.7% in 1999–00 to 7.3% in 2008–09 (Table 5.2). This was primarily due to a decrease in long surgery consultations from 2007–08 (9.9%) to 7.3% in 2008–09. Home visits also decreased as a proportion of MBS-claimable encounters, from 1.5% in 1999–00 to 0.9% in 2008–09. This equates to approximately 510,000 fewer home visits in 2008–09 than 10 years earlier.

In the subsample study for length of consultation that included start and finish times for A1 Medicare/DVA-claimable encounters, there was no significant change in mean length of consultation between 2000–01 and 2008–09. There was also no significant change in mean consultation length when all encounters with a GP Medicare item number were considered (Table 5.3).

Table 5.1: Summary of morbidity and management, BEACH, 1999-00 to 2008-09

Variable	Rate per 100 encounters (95% CI)										2008-09 (n = 96,688)	↑ ↓ ^(a)
	1999-00 (n = 104,856)	2000-01 (n = 99,307)	2001-02 (n = 96,973)	2002-03 (n = 100,987)	2003-04 (n = 98,877)	2004-05 (n = 94,386)	2005-06 (n = 101,993)	2006-07 (n = 91,805)	2007-08 (n = 95,898)	2008-09 (n = 96,688)		
Reasons for encounter	148.5 (146.7-150.2)	151.0 (149.2-152.8)	149.2 (147.4-150.9)	150.9 (149.0-152.7)	150.2 (148.4-152.0)	149.6 (147.8-151.5)	150.3 (148.4-152.2)	150.8 (148.9-152.7)	153.0 (151.1-154.8)	156.5 (154.7-158.2)	↑	
Problems managed	146.7 (144.9-148.6)	144.5 (142.8-146.3)	143.4 (141.7-145.2)	144.9 (143.0-146.8)	146.3 (144.4-148.2)	145.5 (143.6-147.4)	146.2 (144.2-148.2)	148.5 (146.4-150.6)	151.3 (149.2-153.4)	154.6 (152.6-156.5)	↑	
New problems	45.3 (43.6-46.9)	47.4 (45.7-49.0)	55.1 (53.8-56.5)	57.0 (55.6-58.3)	55.9 (54.5-57.3)	55.2 (53.8-56.5)	56.9 (55.5-58.2)	56.5 (55.1-57.9)	57.7 (56.3-59.1)	57.4 (56.0-58.7)	↑	
Chronic problems	47.2 (45.5-49.0)	46.9 (45.3-48.4)	48.0 (46.4-49.5)	47.7 (46.1-49.4)	50.4 (48.6-52.1)	50.4 (48.7-52.1)	50.6 (48.8-52.5)	50.6 (48.8-52.5)	52.4 (50.5-54.3)	55.1 (53.4-56.8)	↑	
Work-related	3.2 (2.9-3.5)	3.3 (3.1-3.5)	3.0 (2.7-3.2)	NAV	NAV	3.1 (2.8-3.5)	2.8 (2.6-3.1)	2.9 (2.6-3.1)	2.8 (2.6-3.1)	2.8 (2.6-3.0)	-	
Medications	110.1 (107.8-112.4)	108.2 (105.7-110.6)	104.5 (102.2-106.9)	103.8 (101.4-106.2)	104.4 (102.1-106.7)	101.5 (99.3-103.8)	104.4 (101.8-107.0)	101.5 (99.2-103.9)	102.7 (100.3-105.0)	106.3 (104.0-108.5)	-	
Prescribed	93.8 (91.5-96.2)	92.3 (89.9-94.7)	88.0 (85.6-90.4)	84.3 (81.8-86.9)	86.0 (83.6-88.5)	83.4 (81.2-85.5)	85.8 (83.3-88.4)	83.3 (81.0-85.5)	82.4 (80.3-84.6)	86.4 (84.1-88.6)	↔	
GP-supplied	6.9 (6.0-7.7)	6.9 (5.9-7.9)	7.6 (6.6-8.7)	9.3 (8.0-10.6)	8.6 (7.6-9.6)	8.1 (7.3-8.8)	8.8 (8.2-9.5)	8.9 (8.2-9.6)	10.1 (9.5-10.7)	11.0 (10.2-11.8)	↑	
Advised OTC	9.4 (8.7-10.1)	9.0 (8.2-9.7)	8.9 (8.2-9.6)	10.2 (9.3-11.1)	9.8 (9.0-10.5)	10.1 (9.2-10.9)	9.8 (9.0-10.5)	9.4 (8.7-10.1)	10.1 (9.3-10.9)	8.9 (8.3-9.4)	-	
Other treatments	46.0 (44.1-47.8)	49.4 (47.1-51.7)	51.9 (49.5-54.2)	51.8 (49.3-54.3)	51.4 (48.9-53.8)	54.7 (52.1-57.3)	43.6 (41.5-45.8)	44.7 (42.3-47.0)	51.2 (48.9-53.6)	50.7 (48.5-52.9)	↑	
Clinical	33.5 (31.8-35.2)	37.2 (35.1-39.3)	38.1 (36.1-40.1)	37.2 (35.0-39.4)	36.6 (34.5-38.8)	39.2 (37.1-41.4)	29.2 (27.3-31.1)	29.5 (27.6-31.4)	34.5 (32.5-36.5)	34.0 (32.1-35.9)	-	
Procedural	12.5 (11.9-13.0)	12.2 (11.6-12.8)	13.8 (13.1-14.5)	14.6 (13.9-15.3)	14.7 (14.0-15.5)	15.5 (14.6-16.4)	14.4 (13.7-15.1)	15.2 (14.4-16.0)	16.7 (15.9-17.5)	16.7 (16.0-17.5)	↑	

(continued)

Table 5.1 (continued): Summary of morbidity and management, BEACH, 1999–00 to 2008–09

Variable	Rate per 100 encounters (95% CI)										^(e)
	1999–00 (n = 104,856)	2000–01 (n = 99,307)	2001–02 (n = 96,973)	2002–03 (n = 100,987)	2003–04 (n = 98,877)	2004–05 (n = 94,386)	2005–06 (n = 101,993)	2006–07 (n = 91,805)	2007–08 (n = 95,898)	2008–09 (n = 96,688)	
Referrals	11.1 (10.7–11.6)	10.4 (10.0–10.8)	10.5 (10.1–10.9)	11.1 (10.7–11.6)	11.6 (11.1–12.1)	11.5 (11.1–12.0)	12.0 (11.5–12.5)	12.2 (11.7–12.7)	12.5 (12.0–13.0)	13.7 (13.2–14.2)	↕
Specialist	7.3 (7.0–7.6)	7.4 (7.1–7.7)	7.3 (7.0–7.6)	7.7 (7.3–8.0)	7.9 (7.5–8.2)	7.7 (7.4–8.0)	8.2 (7.8–8.5)	8.0 (7.7–8.4)	8.0 (7.6–8.3)	9.0 (8.7–9.3)	↕
Allied health services	3.1 (2.9–3.3)	2.3 (2.2–2.5)	2.3 (2.1–2.4)	2.5 (2.3–2.7)	2.6 (2.4–2.8)	2.7 (2.5–2.9)	2.9 (2.7–3.1)	3.1 (2.9–3.3)	3.4 (3.2–3.7)	3.9 (3.6–4.1)	↕
Hospital	0.7 (0.6–0.8)	0.5 (0.4–0.6)	0.4 (0.4–0.5)	0.6 (0.5–0.6)	0.6 (0.5–0.6)	0.5 (0.4–0.5)	0.4 (0.3–0.4)	0.4 (0.3–0.5)	0.4 (0.3–0.5)	0.3 (0.3–0.4)	↘
Emergency department	0.1 (0.1–0.1)	0.1 (0.1–0.1)	0.1 (0.1–0.2)	0.1 (0.1–0.2)	0.2 (0.1–0.2)	0.2 (0.1–0.2)	0.2 (0.2–0.2)	0.2 (0.1–0.2)	0.2 (0.2–0.3)	0.2 (0.2–0.2)	↕
Other referrals/other medical services ^(b)	0.0 [†] (0.0–0.0)	0.2 (0.1–0.2)	0.4 (0.3–0.4)	0.3 (0.2–0.3)	0.4 (0.4–0.5)	0.4 (0.4–0.5)	0.4 (0.3–0.4)	0.5 (0.5–0.6)	0.5 (0.4–0.6)	0.3 (0.2–0.4)	↕
Pathology ^(c)	NAV	29.7 (28.4–30.9)	31.0 (29.7–32.4)	32.9 (31.5–34.4)	35.2 (33.7–36.7)	36.7 (35.2–38.2)	38.6 (36.9–40.3)	42.4 (40.7–44.2)	43.2 (41.3–45.0)	45.6 (43.8–47.4)	↕
Imaging ^(d)	NAV	7.7 (7.3–8.0)	7.9 (7.6–8.2)	8.6 (8.2–9.0)	8.2 (7.8–8.6)	8.3 (8.0–8.6)	8.8 (8.4–9.2)	9.0 (8.6–9.3)	9.5 (9.2–9.9)	9.8 (9.4–10.2)	↕
Other investigations ^(d)	NAV	0.6 (0.5–0.7)	0.9 (0.8–1.0)	1.0 (0.9–1.1)	1.0 (1.0–1.1)	1.1 (1.0–1.2)	1.0 (0.9–1.1)	1.1 (1.0–1.2)	1.0 (0.9–1.1)	1.0 (0.9–1.1)	↕

(a) The direction and type of change is indicated for each result: ↕ indicates a statistically significant change, and — indicates there was no change.

(b) Other referrals and other medical services have been reported together for comparability. The 'other medical services' group was introduced in 2003–04. Previously these were grouped with 'other referrals'.

(c) In the 2000–01 BEACH year the data collection and data coding system for pathology changed. Changes over time are calculated using the 2000–01 data to ensure comparability.

(d) In the 1999–00 BEACH year 'imaging' and 'other investigations' were grouped and reported together.

† Rates are reported to one decimal place. This indicates that the rate is < 0.05 per 100 encounters.

Note: CI—confidence interval; NAV—not available; OTC—over-the-counter.

Table 5.2: Type of encounter, summary of annual results (most frequent events), BEACH, 1999-00 to 2008-09

MBS/DVA consultation category	Percentage distribution of Medicare/DVA-claimable encounters (95% CI)											(a)
	1999-00 (n = 93,698)	2000-01 (n = 82,113)	2001-02 (n = 84,196)	2002-03 (n = 89,068)	2003-04 (n = 86,244)	2004-05 (n = 81,582)	2005-06 (n = 89,011)	2006-07 (n = 79,847)	2007-08 (n = 83,376)	2008-09 (n = 86,069)		
Short surgery consultations	1.4 (1.1-1.8)	1.6 (0.3-2.0)	1.1 (0.9-1.3)	1.2 (1.0-1.4)	1.2 (0.9-1.4)	1.0 (0.8-1.3)	1.0 (0.8-1.1)	1.1 (0.9-1.4)	1.2 (1.0-1.4)	1.5 (1.3-1.8)	—	
Standard surgery consultations	84.1 (83.2-84.9)	83.9 (82.9-84.9)	84.1 (83.1-85.0)	82.8 (81.8-83.9)	82.4 (81.2-83.6)	82.3 (81.0-83.5)	83.7 (82.7-84.7)	83.4 (82.4-84.3)	82.1 (80.1-83.3)	79.8 (78.9-80.8)	↘	
Long surgery consultations	8.7 (8.0-9.3)	8.8 (8.2-9.5)	8.7 (8.0-9.3)	9.6 (8.9-10.2)	9.7 (9.0-10.4)	10.5 (9.7-11.2)	9.8 (9.1-10.5)	10.0 (9.3-10.6)	9.9 (9.2-10.5)	7.3 (6.8-7.8)	§	
Prolonged surgery consultations	0.6 (0.5-0.7)	0.7 (0.5-0.8)	0.7 (0.5-0.8)	0.8 (0.6-0.9)	0.7 (0.6-0.9)	0.8 (0.6-0.9)	0.7 (0.5-0.8)	0.6 (0.5-0.7)	0.7 (0.5-0.8)	0.4 (0.3-0.6)	—	
Home visits	1.5 (1.3-1.7)	1.5 (1.2-1.9)	1.6 (1.3-1.9)	1.3 (1.1-1.6)	1.4 (1.0-1.8)	1.0 (0.8-1.2)	1.2 (0.9-1.5)	0.9 (0.7-1.1)	1.0 (0.6-1.4)	0.9 (0.7-1.0)	↘	
Hospital	0.5 (0.3-0.7)	0.2 (0.1-0.3)	0.2 (0.1-0.3)	0.4 (0.2-0.6)	0.4 (0.3-0.5)	0.2 (0.1-0.3)	0.2 (0.1-0.3)	0.2 (0.1-0.3)	0.2 (0.1-0.2)	0.2 (0.1-0.3)	↘	
Residential aged care facility	1.0 (0.8-1.2)	0.7 (0.5-1.0)	1.0 (0.7-1.3)	1.2 (0.9-1.6)	1.2 (0.9-1.4)	1.2 (0.8-1.6)	1.3 (0.9-1.6)	1.3 (1.0-1.6)	1.2 (0.9-1.5)	1.2 (0.9-1.5)	—	
Chronic disease management	N/A	0.0 [†] (0.0-0.0)	0.1 (0.1-0.3)	0.1 (0.1-0.1)	0.1 (0.1-0.2)	0.2 (0.1-0.2)	0.3 (0.2-0.4)	0.4 (0.3-0.5)	0.5 (0.4-0.6)	0.9 (0.8-1.0)	↗	
Case conference	N/A	0.0 [†] (0.0-0.0)	0.0 [†] (0.0-0.0)	0.0 [†] (0.0-0.0)	0.0 [†] (0.0-0.0)	0.0 [†] (0.0-0.0)	0.0 [†] (0.0-0.0)	0.0 [†] (0.0-0.0)	0.0 [†] (0.0-0.0)	0.0 (0.0-0.0)	—	
Health assessment	0.0 [†] (0.0-0.0)	0.1 (0.1-0.1)	0.1 (0.1-0.2)	0.1 (0.1-0.2)	0.2 (0.1-0.2)	0.2 (0.1-0.2)	0.2 (0.1-0.2)	0.3 (0.2-0.3)	0.3 (0.3-0.4)	0.3 (0.3-0.4)	↗	
Incentive payments	N/A	N/A	N/A	0.1 (0.1-0.1)	0.1 (0.1-0.1)	0.1 (0.1-0.2)	0.2 (0.1-0.2)	0.2 (0.1-0.2)	0.2 (0.1-0.2)	0.2 (0.1-0.2)	↗	
GP mental health care	NAV	NAV	NAV	0.0 (0.0-0.0)	0.0 (0.0-0.0)	0.0 (0.0-0.0)	0.0 (0.0-0.0)	0.4 (0.3-0.5)	0.8 (0.7-0.9)	1.0 (0.8-1.1)	↗	
Other items	2.3 (2.0-2.6)	2.5 (2.0-3.0)	2.5 (1.9-3.0)	2.4 (1.8-3.0)	2.7 (2.0-3.5)	2.6 (1.7-3.4)	1.6 (1.3-1.8)	1.4 (1.1-1.7)	2.0 (1.5-2.4)	1.5 (1.2-1.8)	↘	

(a) The direction and type of change is indicated for each result. ↗↘ indicates a statistically significant change, ↗↘ indicates a marginally significant linear change, § indicates a non-linear significant change, and — indicates there was no change.

† Rates are reported to one decimal place. This indicates that the rate is < 0.05 per 100 encounters.

Note: Includes encounters that were recorded as claimable through the Department of Veterans' Affairs (DVA). CI—confidence interval; MBS—Medicare Benefits Schedule; N/A—not applicable; NAV—not available.

Table 5.3: Consultation length (minutes), BEACH, 2000–01 to 2008–09

Variable	Consultation length (minutes)									
	2000–01	2001–02	2002–03	2003–04	2004–05	2005–06	2006–07	2007–08	2008–09	
A1 Medicare/DVA items (A,B,C,D)^(a)	(n = 30,961)	(n = 35,104)	(n = 34,886)	(n = 31,844)	(n = 30,683)	(n = 32,830)	(n = 33,756)	(n = 29,956)	(n = 33,025)	
Mean	14.8 (14.5–15.1)	14.9 (14.7–15.2)	14.8 (14.5–15.1)	15.0 (14.7–15.3)	15.1 (14.8–15.4)	14.9 (14.6–15.1)	14.9 (14.7–15.2)	14.8 (14.6–15.1)	14.4 (14.2–14.6)	
Median	13.0	13.0	13.0	13.0	13.0	13.0	13.0	13.0	13.0	
Mode	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	
Range	1–106	1–155	1–165	1–120	1–120	1–110	1–155	1–110	1–120	
All Medicare/DVA-claimable encounters (GP items)	(n = 31,734)	(n = 36,142)	(n = 35,861)	(n = 32,839)	(n = 31,510)	(n = 34,111)	(n = 35,201)	(n = 31,722)	(n = 34,783)	
Mean	14.9 (14.6–15.2)	15.0 (14.8–15.3)	14.9 (14.6–15.2)	15.1 (14.9–15.4)	15.2 (14.9–15.5)	15.0 (14.7–15.2)	15.1 (14.8–15.3)	15.1 (14.8–15.3)	14.6 (14.4–14.9)	
Median	13.0	13.0	13.0	14.0	13.0	13.0	13.0	13.0	13.0	
Mode	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	10.0	
Range	1–150	1–180	1–165	1–175	1–180	1–110	1–155	1–110	1–120	

(a) A1 Medicare items—Group A includes: 3, 4, 13, 19, 20; Group B includes: 23, 24, 25, 33, 35; Group C includes: 36, 37, 38, 40, 43; Group D includes: 44, 47, 48, 50, 51.

Note: DVA—Australian Government Department of Veterans' Affairs. Results for the 1999–00 BEACH year are not presented, as data are not comparable for this year.