

# 5 The encounters

This chapter includes details about the encounters in general practice from each of the 10 years of the BEACH study from 1998–99 to 2007–08. The direction and type of change from 1998–99 to 2007–08 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,  $\S$  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 other treatments provided between 1998–99 and 2007–08. 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 2.4.

## 5.1 Content of the encounters

Table 5.1 provides an overview of the changes over time for data collected in BEACH between 1998–99 and 2007–08. As the table shows, many changes have occurred over the 10-year period of the BEACH study, 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 has increased significantly between 1998–99 and 2007–08, from 146.3 RFEs per 100 encounters to 153.0 per 100 encounters. Changes in types of RFEs are investigated in Chapter 6.

Having remained steady for the first eight years of the BEACH study, the rate of problems managed increased in 2007–08 to a rate significantly higher than those reported in each of the first eight years. In 2007–08, problems were managed at a rate of 151.3 per 100 encounters, compared with 145.3 per 100 encounters in 1998–99. This represents an increase of 12.8 million problems managed over the 10-year period.

The increased rate of problems managed is reflected in the rate of chronic problems managed, which shows a linear increase between 1998–99 and 2007–08, from 46.1 chronic problems per 100 encounters to 52.3 per 100 encounters. This represents an estimated additional 8.7 million chronic problems managed in general practice nationally in 2007–08 compared with 1998–99.

In contrast to the increasing rate of chronic problems managed, the rate of work-related problems has declined over the 10-year period, from 4.0 per 100 encounters in 1998–99 to 2.8 per 100 in 2007–08.

The overall rate of medications prescribed, advised or supplied by the GP declined significantly between 1998–99 and 2007–08. This was reflected in the declining rate of prescriptions, with about 7.9 million fewer prescriptions written by GPs nationally in 2007–08 than in 1998–99. More detailed analysis of these results can be found in Chapter 9. In contrast, the rate at which medications were supplied by the GP over the same period increased significantly, from 7.3 per 100 encounters to 10.1 per 100. This equates to an additional 3.3 million medications supplied by the GP in 2007–08 compared with 1998–99.

Other areas that demonstrated an increase over time included procedures, overall referrals, 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 have increased, from 7.7% in 1998–99 to 9.9% in 2007–08 (Table 5.2). Home visits have decreased as a proportion of MBS-claimable encounters, from 1.9% in 1998–99 to 1.0% in 2007–08. This equates to approximately 880,000 fewer home visits in 2007–08 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 length of consultation between 2000–01 and 2007–08 at a mean length of 14.8 minutes, and median length of 13.0 minutes. There was also no significant change in consultation length when all encounters with a GP Medicare item number were considered over time, with the mean length equalling 14.9 minutes in 2000–01, and 15.1 minutes in 2007–08 (Table 5.3).

Table 5.1: Summary of morbidity and management, summary of annual results, BEACH, 1998–99 to 2007–08

Variable	Rate per 100 encounters (95% CI)							<sup>a</sup>			
	1998–99 (n = 96,901)	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)	
Reasons for encounter	146.3 (144.6–148.0)	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)	↑
Problems managed	145.3 (143.5–147.2)	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)	↑
New problems	54.5 (53.0–56.0)	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)	↑
Chronic problems	46.1 (44.5–47.6)	47.2 (45.5–49.0)	47.0 (45.4–48.5)	48.0 (46.5–49.6)	47.8 (46.1–49.4)	50.4 (48.7–52.1)	50.4 (48.7–52.1)	50.6 (48.8–52.5)	51.8 (50.1–53.4)	52.3 (50.4–54.1)	↑
Work-related	4.0 (3.7–4.3)	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)	↓
Medications	109.7 (107.4–112.0)	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)	↓
Prescribed	93.6 (91.2–96.1)	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)	↓
GP-supplied	7.3 (6.5–8.1)	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)	↑
Advised OTC	8.8 (8.1–9.5)	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)	—
Other treatments	43.2 (41.3–45.1)	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)	↑
Clinical	31.4 (29.7–33.0)	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)	§
Procedural	11.8 (11.2–12.5)	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)	↑

(continued)

Table 5.1 (continued): Summary of morbidity and management, summary of annual results, BEACH, 1998–99 to 2007–08

Variable	Rate per 100 encounters (95% CI)						
	1998–99 (n = 96,901)	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)
Referrals	11.1 (10.7–11.6)	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)
Specialist	7.4 (7.1–7.7)	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)
Allied health services	3.0 (2.8–3.2)	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)
Hospital	0.7 (0.6–0.8)	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)
Emergency department	0.1 (0.0–0.1)	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)
Other referrals/other medical services <sup>(b)</sup>	0.0 <sup>f</sup> (0.0–0.0)	0.0 <sup>f</sup> (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 (0.3–0.4)
Pathology <sup>(c)</sup>	NAV	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)
Imaging <sup>(d)</sup>	NAV	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)
Other investigations <sup>(d)</sup>	NAV	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)

(a) The direction and type of change is indicated for each result: ↑/↓ indicates a statistically significant or marginal 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 third year of BEACH, 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 first 2 years 'imaging' and 'other investigations' were grouped and reported together.

F 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, 1998–99 to 2007–08

MBS/DVA consultation category	Percentage distribution of Medicare/DVA-claimable encounters (95% CI)											
	1998–99 (n = 82,816)	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)	↑ <sup>(a)</sup>	↓
Short surgery consultations	1.5 (1.3–1.7)	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)	1.2 (0.8–1.3)	1.0 (0.8–1.1)	1.0 (0.9–1.4)	1.1 (0.9–1.4)	1.2 (1.0–1.4)	—
Standard surgery consultations	84.6 (83.7–85.4)	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)	↓	↑
Long surgery consultations	7.7 (7.1–8.3)	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)	9.9 (9.2–10.5)	↑
Prolonged surgery consultations	0.6 (0.4–0.8)	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)	0.7 (0.5–0.8)	0.6 (0.5–0.7)	0.7 (0.5–0.8)	—
Home visits	1.9 (1.7–2.2)	1.5 (1.3–1.7)	1.5 (1.2–1.9)	1.5 (1.3–1.9)	1.6 (1.1–1.6)	1.3 (1.0–1.6)	1.4 (1.0–1.8)	1.0 (0.8–1.2)	1.2 (0.9–1.2)	0.9 (0.7–1.1)	1.0 (0.6–1.4)	↓
Hospital	0.4 (0.3–0.6)	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)	0.4 (0.1–0.3)	0.2 (0.1–0.3)	0.2 (0.1–0.3)	0.2 (0.1–0.3)	0.2 (0.1–0.2)	↓
Residential aged care facility	0.9 (0.7–1.1)	1.0 (0.8–1.2)	0.7 (0.5–1.0)	1.0 (0.7–1.3)	1.0 (0.9–1.6)	1.2 (0.9–1.4)	1.2 (0.8–1.6)	1.2 (0.9–1.6)	1.3 (1.0–1.6)	1.3 (1.0–1.6)	1.2 (0.9–1.5)	—
Chronic disease management	N/A	N/A	0.0 <sup>†</sup> (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)	0.2 (0.1–0.2)	0.3 (0.2–0.4)	0.4 (0.3–0.5)	0.5 (0.4–0.6)	↑
Case conference	N/A	N/A	0.0 <sup>†</sup> (0.0–0.0)	—								
Health assessment	N/A	N/A	0.0 <sup>†</sup> (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 (0.2–0.4)	↑
Incentive payments	N/A	N/A	N/A	N/A	0.1 (0.1–0.1)	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)	—
GP mental health care	NAv	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)	0.0 (0.0–0.0)	0.4 (0.3–0.5)	0.8 (0.7–0.9)	↑
Other items	2.4 (2.1–2.7)	2.3 (2.0–2.6)	2.5 (2.0–3.0)	2.5 (1.8–3.0)	2.4 (2.0–3.5)	2.7 (1.7–3.4)	2.6 (1.3–1.8)	1.6 (1.1–1.7)	1.4 (1.5–2.4)	2.0 (1.5–2.4)	§	§

(a) The direction and type of change is indicated for each result: ↑ indicates a statistically significant change, ↓ 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), summary of annual results, BEACH, 2000–01 to 2007–08**

Variable	Consultation length (minutes)							
	2000–01	2001–02	2002–03	2003–04	2004–05	2005–06	2006–07	2007–08
<b>A1 Medicare/DVA items (A,B,C,D)</b>								
Mean	(n = 30,961)	(n = 35,104)	(n = 34,886)	(n = 31,844)	(n = 30,683)	(n = 32,830)	(n = 33,756)	(n = 29,956)
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)
Median	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
Range	1–106	1–155	1–165	1–120	1–120	1–110	1–155	1–110
<b>All Medicare/DVA-claimable encounters (GP items)</b>								
Mean	(n = 31,734)	(n = 36,142)	(n = 35,861)	(n = 32,839)	(n = 31,510)	(n = 34,111)	(n = 35,201)	(n = 31,722)
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)
Median	13.0	13.0	13.0	14.0	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
Range	1–150	1–180	1–165	1–175	1–180	1–110	1–155	1–110

Note: 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.  
DVA—Australian Government Department of Veterans' Affairs. Results for 1998–99 and 1999–2000 are not presented, as data are not comparable for these years.