Aboriginal people presenting to emergency departments (EDs) face unique experiences. This group are consistently over reported in urban data looking at those people who either did not wait to see the medical officer or discharged themselves against medical advice from EDs. The anecdotal explanation of this phenomenon given by health professionals is that “they just don’t like to wait”. This is however, a simplistic and complacent view of a significant and complex issue.

**Aim:** Using Emergency Department Information System Data (EDIS) from four hospitals in the North Coast Area Health Service during the period 1st January to 31st December 2006 this study aims to examine the relationship between the variables did not wait, discharge against medical advice, the assignment of the Australasian Triage Category and the variable Aboriginal status to see if urban trends are replicated in rural areas.

**Findings:** This study revealed that:
- Aboriginal people were 1.5 times more likely to leave EDs prior to being seen by the medical officer than non-Aboriginal people.
- Aboriginal people presenting to EDs at Port Macquarie Base Hospital and Kempsey District hospital are 2.5 times more likely to discharge against medical advice from the ED than non-Aboriginal people.
- Those Aboriginal people who do not wait to see the medical officer were more likely to be young children or young adults, female, arrived by ambulance, presented on a Monday, Tuesday, or Sunday, and had presented during the early evening or afternoon.
- There was very strong evidence to support a difference in the number of Aboriginal people triaged as a category 3 at Port Macquarie Base Hospital who did not wait to see the medical officer when compared to non-Aboriginal people. Those people triaged to a category 3 have been assessed as having a potentially life-threatening condition requiring treatment within 30 minutes. Aboriginal people in triage category 3 were 2.7 times more likely to leave prior to being seen by the medical officer or commencement of treatment than non-Aboriginal people at this facility.
- Analysis of triage category distribution at all four sites revealed no relationship difference between triage category assignment and Aboriginal status.

**Recommendations:** To achieve the goal of creating a better experience for Aboriginal people using health services, it is proposed that a range of options are adopted:
- Formation of partnerships with local Aboriginal communities and Aboriginal Medical Services to identify barriers and improve access and cultural safety in EDs.
- Continued monitoring of Aboriginal people utilising EDs in the NCAHS including did not wait and discharge against medical advice rates to ensure improvement in efficacy, access, and outcomes.
- Urgent investigation into the disproportionate number of Aboriginal people from category 3 at Port Macquarie Base Hospital who did not wait.
- Notification and involvement of the Aboriginal Liaison Officer at both Kempsey District Hospital and Port Macquarie Base Hospital in all transfers of Aboriginal people to assist with support for personal and social issues that may impact on Aboriginal peoples decision to leave prior to being seen by the medical officer.
- Investigation into the phenomena of discharge against medical advice at both Kempsey District hospital and Port Macquarie Base hospital specifically looking at morbidity, and adverse outcomes for this group.
- The provision of culturally appropriate information regarding triage and discharge against medical advice acknowledging lack of alternative health options and encouraging people to return to emergency departments if required.
- Review of current allocation of resources to EDs, in an attempt to match allocation of resources to periods of high patient volumes in the EDs.

For the full report on this project visit our website, follow the link to the Rural Research Capacity Building Program and click on ‘view completed projects’

Leanne is a Nurse Practitioner who works in the Emergency Department and has worked in Kempsey, Wauchope and Port Macquarie during the period of this study.