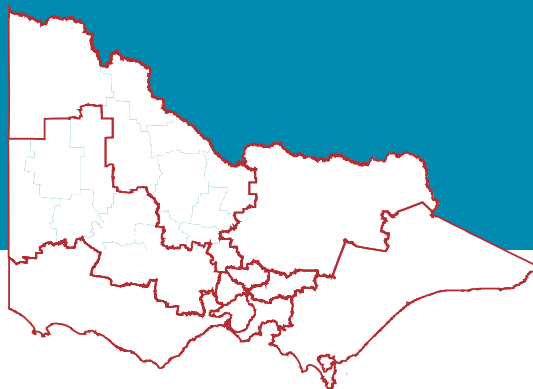


ACSC 2002–2003 Update

Victoria



Victorian Ambulatory Care Sensitive Conditions Study

Ambulatory care sensitive conditions (ACSCs) are those for which hospitalisation is thought to be avoidable if preventive care and early disease management are applied, usually in an ambulatory setting¹. In theory, access to timely and effective ambulatory care can reduce the risks of hospitalisation.

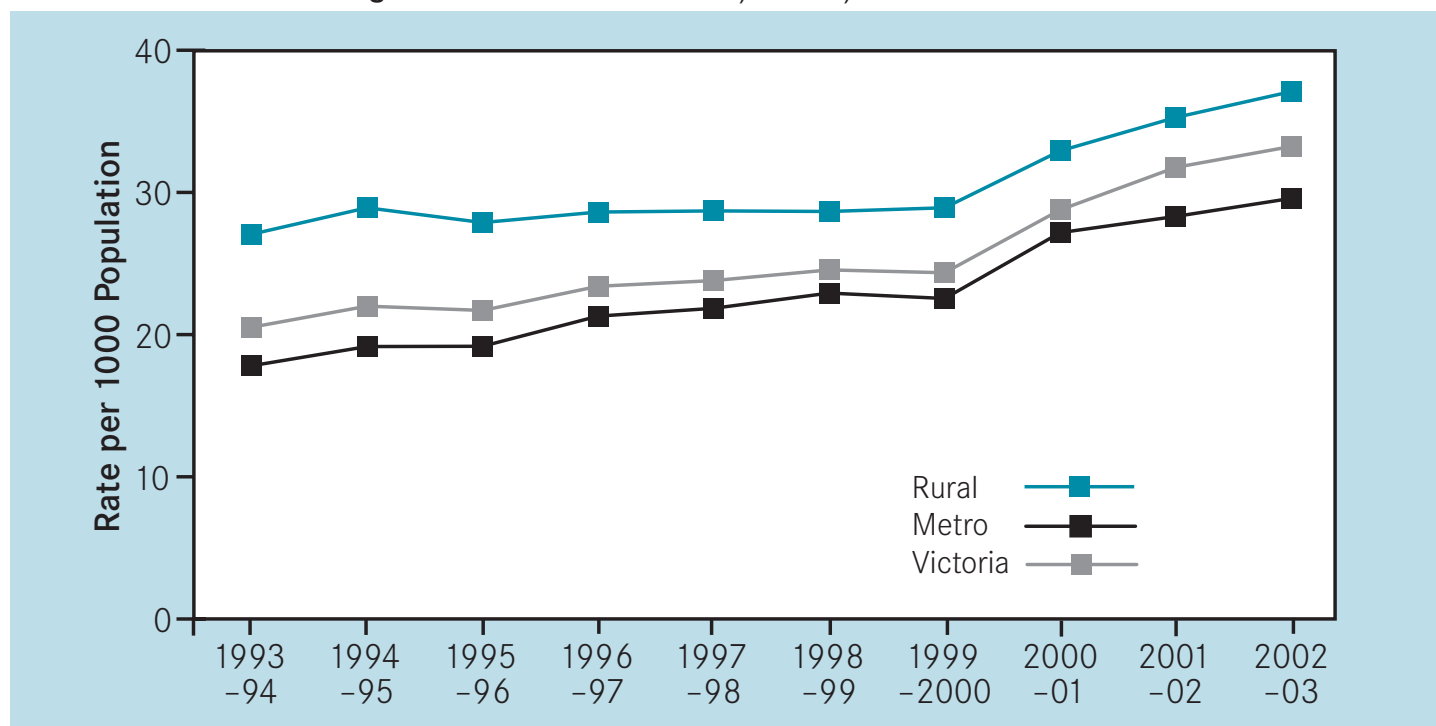
The Victorian Ambulatory Sensitive Conditions Study is updated annually by the Health Surveillance and Evaluation Section of the Department of Human Services (DHS). This fact sheet complements the other fact sheets in this series by providing an overview of analyses of ACSCs for Victoria based on the Victorian Admitted Episodes Dataset (VAED) from 1993–94 to 2002–03. The regional fact sheets present analyses of the trend in total ACSCs admissions, the number of admissions for the top 10 ACSCs in 2002–03, and admission rate ratios compared to the Victorian average. Each regional fact sheet also reports this information at the Primary Care Partnership (PCP) level. Rates of admission were age- and sex-standardised to the Victorian population (1996) using the direct method.

Contents

Variations in rates of ACSCs admissions, 1993–94 to 2002–03	1
Figure 1	1
Table 1	2
Table 2	2
Figure 2	3

Variations in rates of ACSCs admissions, 1993–94 to 2002–03

Figure 1: ACSCs admission rates, Victoria, 1993–94 to 2002–03



¹ Billings J, Zeitel L, Lukomnik J, Carey T, Blank A, Newman L. Impact of socioeconomic status on hospital use in New York City. *Health Affairs*, 1993, 12, 162–173.



There were 159,761 admissions for Ambulatory Care Sensitive Conditions (ACSCs) in 2002–03, with an average of 5.04 bed days. The rate of ACSCs admissions varied from 20.52 per 1,000 (20.39–20.65) in 1993–94 to 33.23 (33.07–33.39) in 2002–03. The admission rate for ACSCs in rural areas increased from 27.06 per 1,000 persons (26.78–27.34) in 1993–94 to 37.09 (36.78–37.40) in 2002–03. During the same period, the admission rate for ACSCs in metropolitan areas increased from 17.81 per 1,000 persons (17.67–17.96) to 29.58 per 1,000 persons (29.40–29.76).

Table 1: Top 10 ACSCs in Victoria, 2002–2003

ACSC	Number of admissions	Rate per 1000 persons	Lower CI	Upper CI	Average bed days	Total bed days
Diabetes complications	49,589	9.6161	9.53	9.70	7.12	352,905
Chronic obstructive pulmonary disease	14,767	2.8337	2.79	2.88	7.11	104,958
Dehydration and gastroenteritis	12,127	2.4238	2.38	2.47	2.56	31,095
Dental conditions	11,255	2.3826	2.34	2.43	1.15	12,981
Angina	11,993	2.2893	2.25	2.33	2.58	30,951
Congestive cardiac failure	11,526	2.1431	2.10	2.18	7.29	83,995
Pyelonephritis	9,876	1.9575	1.92	2.00	4.66	46,060
Asthma	8,486	1.8213	1.78	1.86	2.43	20,604
Convulsions and epilepsy	7,507	1.5789	1.54	1.62	2.95	22,165
ENT Infections	6,758	1.4875	1.45	1.52	1.65	11,166

The top 10 ACSCs admissions accounted for 90.06 per cent of the total ACSCs admissions for Victoria. The average bed days for the top ten ACSCs was 4.98.

The top ten ACSCs admissions were made up of both chronic and acute conditions. The highest number ($n = 49,589$) of admissions was for diabetes complications accounting for 34.64 per cent of the top ten ACSCs admissions.

Table 2: ACSCs in Victoria, 2002-03 admissions, length of stay and average length of stay by Primary Care Partnership (PCP)

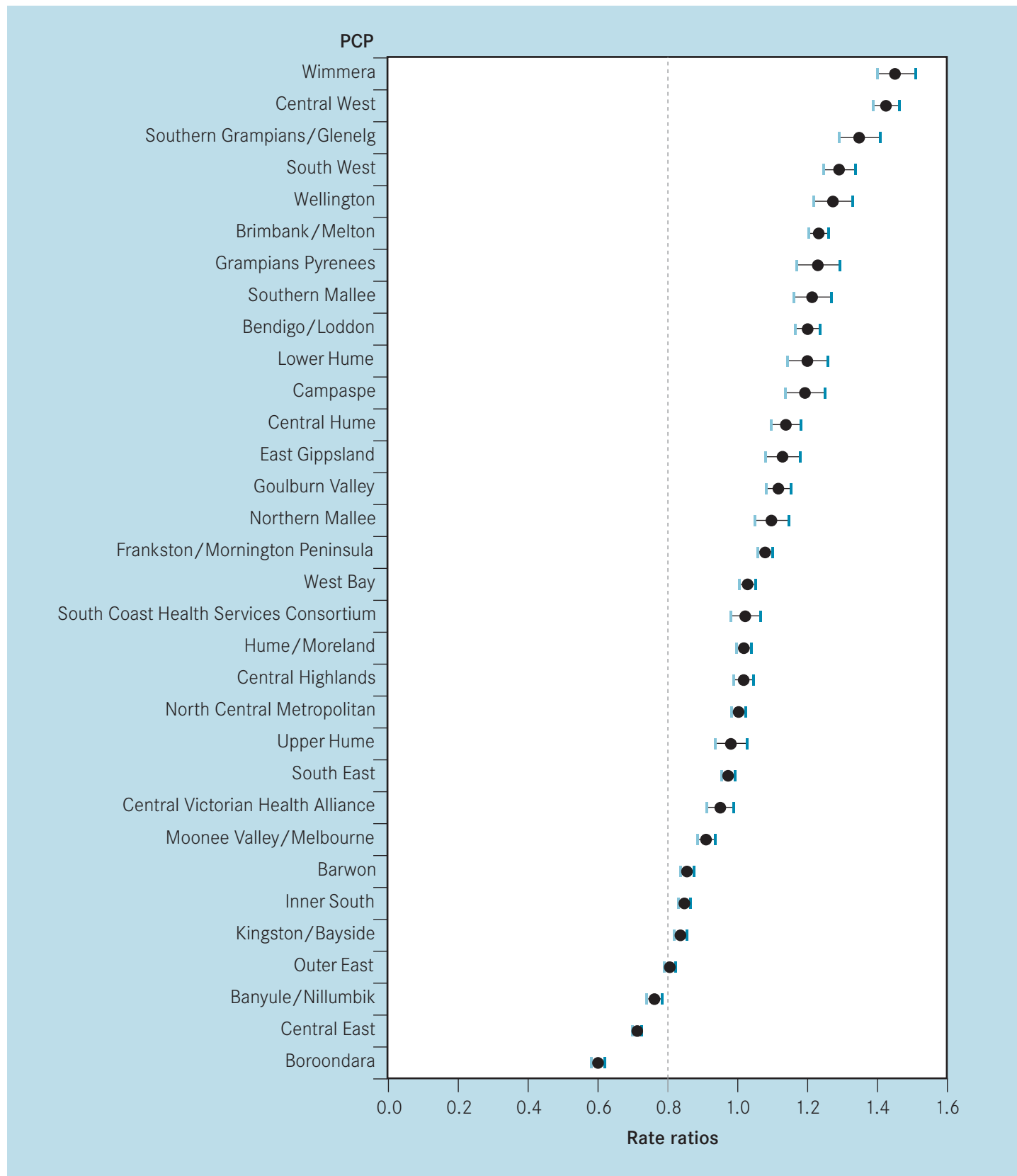
PCP	Number of admissions	Rate per 1000 persons	Lower CI	Upper CI	Average length of stay	Total length of stay
1. Southern Grampians/Glenelg	1982	45.28	43.33	47.32	4.79	9491
2. South West	2983	42.96	41.45	44.53	5.39	16088
3. Barwon	7576	28.39	27.76	29.04	5.41	40951
4. Boorondara	3752	20.24	19.61	20.90	5.24	19681
5. Outer East	9550	26.84	26.30	27.38	4.83	46135
6. Central East	11249	23.69	23.26	24.13	5.13	57697
7. Wimmera	2334	48.57	46.64	50.58	4.54	10585
8. Grampians Pyrenees	1506	41.06	39.03	43.18	4.40	6625
9. Central Highlands	4810	34.19	33.24	35.17	4.81	23159
10. Northern Mallee	1952	37.50	35.87	39.20	3.55	6924
11. Southern Mallee	1888	40.70	38.90	42.57	4.28	8080
12. Bendigo/Loddon	4344	40.19	39.01	41.40	4.90	21292
13. Campaspe	1696	40.33	38.45	42.29	4.31	7308
14. Central Victorian Health Alliance	2288	31.84	30.56	33.17	4.62	10566
15. Hume/Moreland	8786	33.43	32.74	34.14	5.21	45747
16. Banyule/Nillumbik	4524	25.51	24.78	26.26	5.31	24035
17. North Central Metropolitan	9955	32.78	32.15	33.43	5.52	54976
18. Inner South	9349	28.19	27.62	28.77	5.25	49055
19. Kingston/Bayside	7642	28.023	27.40	28.66	4.79	36635
20. South East	10112	32.00	31.39	32.64	4.51	45654
21. Frankston/Mornington Peninsula	10744	36.41	35.73	37.10	4.45	47826
22. Moonee Valley/Melbourne	4924	30.13	29.30	30.99	5.54	27263
23. Westbay	7430	33.72	32.97	34.50	5.40	40109
24. Brimbank/Melton	6856	39.91	38.97	40.86	4.64	31829
25. East Gippsland	2008	37.79	36.18	39.48	3.91	7854
26. Wellington	1935	41.97	40.14	43.88	4.27	8260
27. Central West	5460	47.80	46.55	49.08	4.11	22426
28. South Coast Health Services Consortium	2191	34.15	32.75	35.61	4.35	9536
29. Lower Hume	1635	40.00	38.11	41.99	5.45	8917
30. Goulburn Valley	3813	37.13	35.97	38.33	4.85	18477
31. Central Hume	2759	38.41	37.00	39.87	4.55	12559
32. Upper Hume	1728	32.15	30.67	33.71	4.73	8178



Table 2 summarises the rate of admissions for total ACSCs and average bed days in various Primary Care Partnerships (PCPs) in 2002–03. The admission rates in 2002–03 varied from 20.24 per 1,000 persons (19.61–20.90) in Borondara to 48.57 per 1,000 persons (46.64–50.58) in Wimmera. The average bed days during

the same period varied from 3.91 in East Gippsland to 5.54 in Frankston/Mornington Peninsula. There were 17 PCPs with admission rate ratios significantly higher than the Victorian average in 2002–03. Wimmera had the highest rate ratio at 1.45 (1.40–1.51) while Borondara had the lowest at 0.60 (0.58–0.62).

Figure 2: Total ACSCs admission rate ratios, by PCP (Victoria = 1), 2002–2003



These 17 PCPs with admission rates higher than the Victorian average were, from highest to lowest, Wimmera, Central West, Southern Grampians/Glenelg, South West, Wellington, Brimbank/Melton, Grampians Pyrenees, Southern Mallee, Bendigo/Loddon, Lower Hume, Campaspe, Central Hume, East Gippsland, Goulburn Valley, Northern Mallee, Frankston/Mornington Peninsula and West Bay.

These 17 PCPs accounted for about 38 per cent (n = 61,325) of all ACSCs in Victoria in 2002-03 and 36.31 per cent of total bed days for ACSCs admissions.

Suggested citation

Health Surveillance & Evaluation Section, Public Health, Department of Human Services (2004). *Ambulatory care sensitive conditions 2002-03 update: Victoria*. Melbourne, Victoria: Victorian Government.

Additional information

Full details of the methodology are available from earlier ACSC reports which can be downloaded from the Department of Human Services website at:

www.health.vic.gov.au/healthstatus

Contact details

Dr. Zahid Ansari
Health Surveillance & Evaluation Section
Email: Zahid.Ansari@dhs.vic.gov.au



ACSC 2002-2003 UPDATE

