



How good primary care can prevent emergency department visits for people with developmental disabilities

What is the research about?

Individuals with developmental disabilities are more likely to visit the emergency department compared to the general population. Efforts to reduce emergency department visits have focused on primary care (e.g., family physicians) as they are often the patient's first point of contact with the health care system. One factor that may reduce emergency department visits is seeing the same primary care provider over time, this means that the provider is familiar with the patient's health issues and there can be greater coordination, monitoring and reporting of those issues. Having high continuity of care may be particularly important for patients with complex health care needs. This research examines the relationship between the level of continuity of primary care (i.e., the extent to which patients see the same provider over time) and subsequent emergency department visits in individuals with and without developmental disabilities.

What did the researchers do?

Scientists from the Health Care Access Research and Developmental Disabilities (H-CARDD) program and the Institute for Clinical Evaluative Sciences compared the rates and causes of emergency department visits in a sample of 66,484 individuals with intellectual disabilities and 2,760,670 individuals without intellectual disabilities from across Ontario. The researchers also examined how continuity of care related to

What you need to know

Individuals with developmental disabilities were 1.5 times more likely to visit the emergency department compared to individuals without. Increasing the continuity of primary care patients' receive may help to reduce emergency department visits more for people with developmental disabilities than for others.

emergency department visits in these two populations.

What did the researchers find?

The researchers found that individuals with developmental disabilities were 1.5 times more likely to visit the emergency department than individuals without developmental disabilities. For individuals with developmental disabilities, the top 3 reasons for emergency department visits were classified as "Symptoms, signs and abnormal clinical and laboratory findings", "Mental, behavioral disorders" (psychiatric issues) and "Injuries, poisoning". Overall, the proportion of visits due to psychiatric issues was at least twice as high in the group with developmental disabilities compared to the group without. In the group without developmental disabilities, psychiatric issues were not even among the top 5 presenting issues.

Individuals with developmental disabilities were more likely to have high continuity of primary care compared to individuals without.

About H-CARDD

Health Care Access Research and Developmental Disabilities (H-CARDD) is a research program with the primary goal of enhancing the overall health and well-being of people with developmental disabilities through improved health care policy and services. H-CARDD research is conducted by dedicated teams of scientists, policymakers, and health care providers.

This research was supported by a Partnerships in Health Systems Improvement grant from the Canadian Institutes of Health Research (CIHR) using data provided by the Ontario Ministry of Health and Long-Term Care (MOHLTC) and Community and Social Services (MCSS), to the Institute for Clinical Evaluative Sciences. The opinions, results and conclusions reported are those of the authors and do not necessarily represent the funding sources and data providers. No endorsement by the CIHR, MOHLTC, MCSS or ICES is intended or should be inferred.

Keywords

Emergency department visits, developmental disabilities, primary care, continuity of care

Individuals with and without developmental disabilities who had high continuity of care were less likely to visit the emergency department. This relationship between continuity of care and emergency department visits was stronger for those with developmental disabilities than for those without.

How can you use this research?

We know that adults with developmental disabilities are more likely to visit the emergency department than other adults. The results of this study suggest that having better continuity of care may decrease future emergency department visits for individuals with and without developmental disabilities. The protective effect of seeing the same doctor over time is stronger for individuals with developmental disabilities and may be an effective strategy to reduce emergency department visits in this population. It is important to educate patients and care providers about the benefits of seeing the same provider over time.

About the researchers

This study was lead by **Anna Durbin** from the Li Ka Shing Knowledge Institute of St. Michael's Hospital with the help of **Robert Balogh**, from the Faculty of Health Sciences at UOIT, **Elizabeth Lin**, from the Provincial System Support Program at CAMH, **Andrew Wilton** from the Institute for Clinical Evaluative Sciences and **Yona Lunsky**, from the Adult Neurodevelopmental Services at CAMH.

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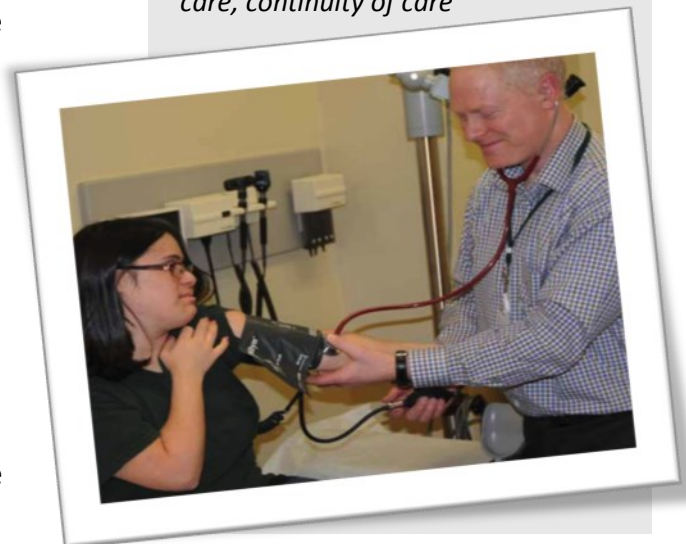
Do you want to know more/additional resources?

You can find more information about this research at www.hcardd.ca.

Resources for healthcare Providers: The [Emergency Care](#) and the [Primary Care](#) toolkits were developed to improve the care of patients with developmental disabilities.

Resources for patients and families: [Click here](#) for tools to help prepare for emergency department visits.

Citation: Durbin, A., Balogh, R., Lin, E., Wilton, A.S., Lunsky, Y. (2018). Emergency Department Use: Common Presenting Issues and Continuity of Care for Individuals With and Without Intellectual and Developmental Disabilities. *J Autism Dev Disord*. doi: [10.1007/s10803-018-3615-9](https://doi.org/10.1007/s10803-018-3615-9)



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