Who uses NHS Direct?

Investigating geographical and socio-demographic characteristics of NHS Direct users

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Background

NHS Direct was introduced as part of ‘The New NHS’ white paper aiming to modernise the NHS. NHS Direct provides people in England with 24/7 expert based health care advice and information so they can care for themselves at home or access appropriate healthcare. The core telephone service (0845 4647) is operated within 32 contact centres and serves nearly 5 million calls per year².

Previous research has suggested that the highest users of NHS Direct are predominantly females and calls on behalf of children of <5 with this service mainly utilised by men⁴, older people⁵, ethnic minorities⁶ and less advantaged social groups⁷ This research builds on existing research and aims to investigate the socio-demographic characteristics of NHS Direct users to determine equity of use.

Methodology

Four ‘one month’ periods of data was collected (July, 2010, October, 2010, January 2011 and April 2011) from the NHS Direct Clinical Assessment Service for all 0845 4647 calls. This research presents preliminary analysis of one month of call data (July 2010; N=359,758). The results may vary when all data is analysed. All calls were evaluated for age, sex and ethnicity of patient using descriptive statistics. Postcode was then linked to Indices of deprivation scores (ID, 2007) to determine usage in relation to deprivation which was analysed using ANOVA analysis.

Results

Gender

Figure 1 highlights that 38.6% (N=139,004) of calls were males or on behalf of males and 56.3% females (N=202,659) within the month period of July 2010. In 5% of calls gender was not specified (N=18,095). It appears that males used NHS Direct less than females; however, this is a pattern similarly found in the utilisation of primary health care⁸.

Deprivation

In contrast to previous research Anova statistical analysis confirmed that deprivation increased use when analysed for ID score (F=438.772, df=2, p<.001) and ID rank (F=510.418, df=2, p<.001).

Age

The highest call pattern is observed in the 0-4 and 20-29 year age group accounting for 30% of all calls. Lower use is seen in the 5-14 age group and from the age of 40+. Figure 2 shows the gender/age distribution of calls. The results suggests gender distribution is more differentiated in young and middle years but not in older groups where similar levels of lower utilisation are seen.

Figure 2: Percentage of patients by age and sex who used NHS Direct in July 2010

Ethnicity

White British females and males contributed to 76.2% and 77% of the total calls respectively. Female and male mixed ethnic groups respectively contributed to 17% and 15.8% of the total calls made. Male Indian, Pakistani, Bangladeshi accounted for 4.5% of all calls made with 4% for females. African and Caribbean males contributed to 1.2% of calls made and 1.5% for females, with Chinese patients only accounting for 0.2% of the total calls made. This suggests that White British patients used NHS Direct the most. The next largest group being mixed ethnic groups, with Asian and Black ethnic subgroups utilising NHS Direct the least.

Conclusion

Results suggest that the highest users of NHS Direct are females and on behalf of children <5. Deprivation increased use when analysed for ID score. The results however suggest that minority ethnic groups and older people are the lowest users of NHS Direct who are well represented in the utilisation of primary health care⁹. Further research should explore the underlying factors that contribute to low utilisation in these groups to shape future targeted promotional campaigns in line with broader campaigns about use of health services.

References