



MINISTRY OF HEALTH MALAYSIA

Key Findings

UNDERSTANDING PUBLIC PERCEPTION TOWARDS THE USE OF EMERGENCY DEPARTMENT SERVICES

IN HOSPITAL TENGKU AMPUAN RAHIMAH, KLANG



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DEPARTMENT SERVICES IN HOSPITAL TENGKU AMPUAN RAHIMAH, KLANG -
KEY FINDINGS

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Institute for Health Behavioural Research
National Institutes of Health, Ministry of Health Malaysia

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UNDERSTANDING PUBLIC PERCEPTION TOWARDS THE USE OF EMERGENCY DEPARTMENT SERVICES IN HOSPITAL TENGKU AMPUAN RAHIMAH, KLANG – KEY FINDINGS

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Disclaimer

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Background of Study

The increasing demand for emergency and urgent care services has caused significant congestion, higher costs, and longer waiting times in emergency departments (EDs) globally. Factors such as an aging population, more chronic diseases, and changes in healthcare-seeking behaviors contribute to this issue, which delays diagnosis and treatment. Many patients choose EDs over primary care for non-emergency issues due to a lack of confidence in primary care, perceived urgency, convenience, cost, and accessibility. Understanding the multifaceted nature of ED in Malaysia is essential for devising effective interventions and improving overall healthcare delivery.

Objective

To identify public's perception of emergency department services and to identify the knowledge, reasons of usage and communication channel & information needed among visitors in Hospital Tengku Ampuan Rahimah (HTAR), Klang.

Methodology

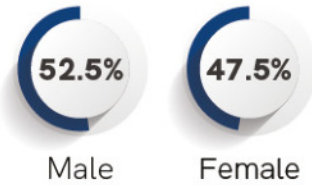
Study design	Cross sectional study using self-administered survey with minimal guidance
Study population	ED attendance in green zone HTAR
Sample size	382 respondents (Based on population ED attendance = 53,360 at green zone HTAR in 2022)
Sampling technique	Convenience sampling
Inclusion criteria	All visitors attended the emergency department age 18 and above) including patients/caregiver/friends/employer, sign inform consent form



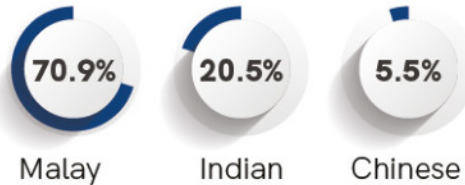
Demographic profile

Total respondents: 381

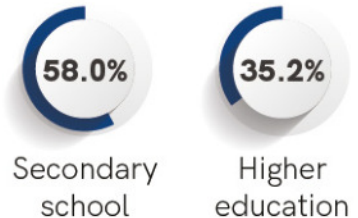
GENDER



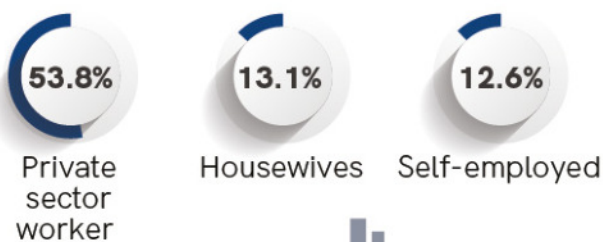
RACE



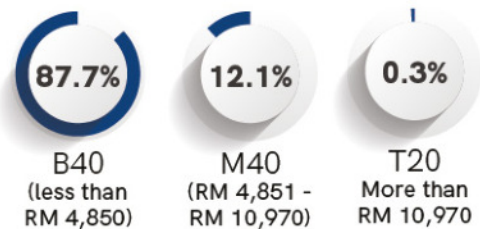
EDUCATION LEVEL



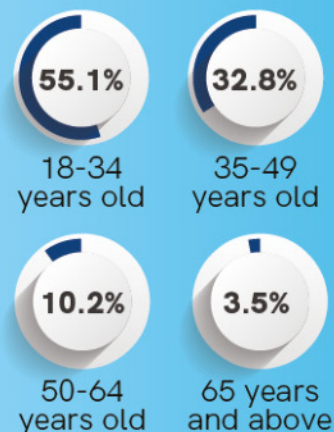
OCCUPATION



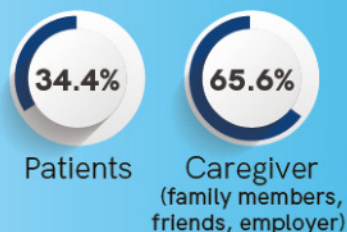
HOUSEHOLD INCOME



AGE GROUP



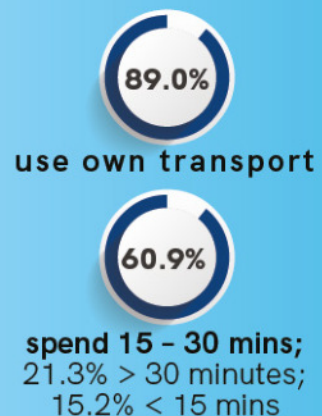
TYPE OF RESPONDENTS



INSURANCE STATUS



HOW THEY GO TO ED?



12.1 km

Average distance from house to hospital

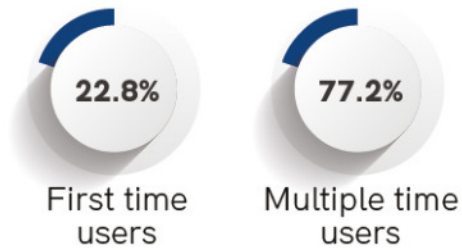
HOSPITAL

EMERGENCY

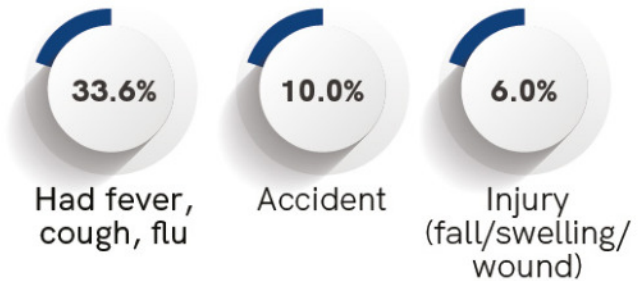
H

History of Emergency Department Visits

TYPE OF USERS



COMMON HEALTH PROBLEMS



DURATION OF ILLNESS ONSET BEFORE SEEKING TREATMENT AT THE ED



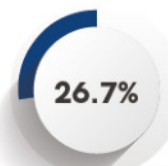
ED EXPERIENCED PAST 12 MONTHS



192.57 (3.2 hours) waiting time



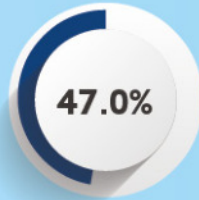
Comes 1 - 3 times



Wait too long and leave unattended



Patterns in Emergency Department Service Utilization



seek alternative services before go to ED

Prior treatment before visiting the ED



Get treatment from private clinics



Get treatment from government clinics



Bough medicine at pharmacy



Using medicine in stock



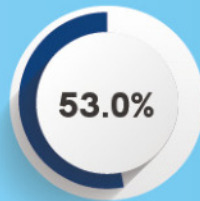
Try traditional medicine



Others



Patterns in Emergency Department Service Utilization



go to ED straightly when experiencing illness

WHY THEY DID NOT SEEK ALTERNATIVE SERVICES?



Having difficulties with government clinics after office hours



Expensive treatment at private clinic



Most of government clinics closed after 9.30 pm and only have ED as option



Government clinics need appointment



No diagnose facility at private clinic/government clinics



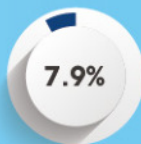
Long waiting time at government clinics



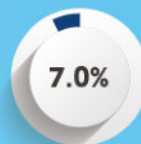
Government clinics close during weekend/holidays



Did not get a queue number because government clinic stopped accepting patients by the time of arrival



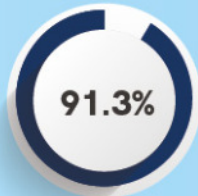
Government clinics far from house



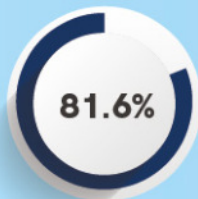
Not confidence with private services



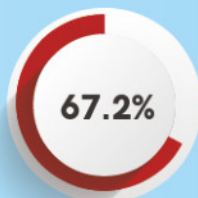
Understanding Emergency Department Functions and Zones



Know that cases of accidents, heart attacks, chronic asthma, shortness of breath, and health problems that can harm life need immediate treatment in the ED



Know that the patient will be screened and categorized according to zone, and treatment will be given according to the seriousness/severity of the disease



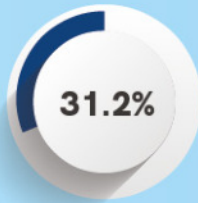
Though initial screening is not a requirement before patient receives any treatment in the ED



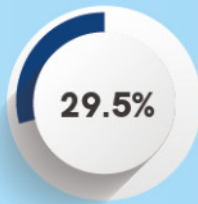
Though flu, coughs, dizziness/headaches, and common fevers will receive immediate treatment in the ED



Zones in Emergency Department



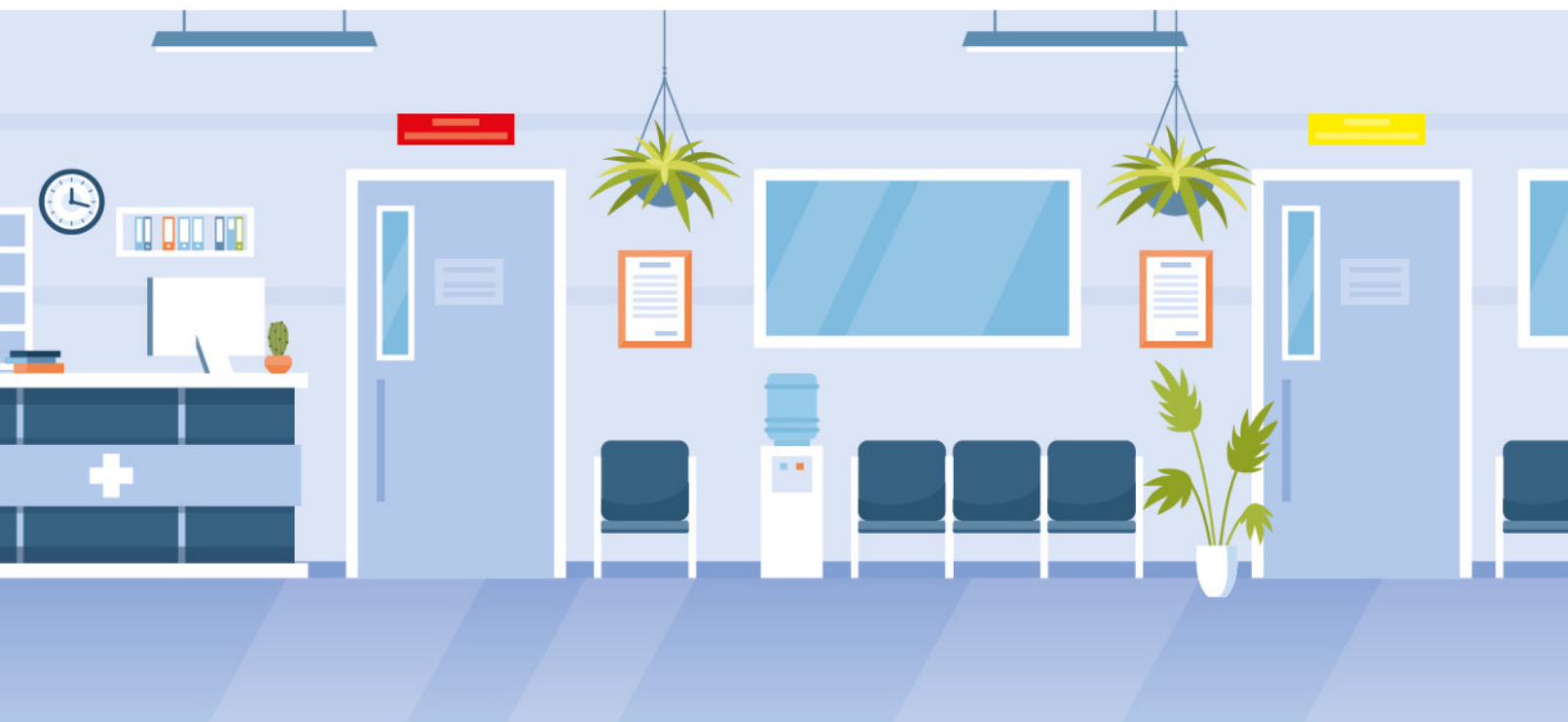
Do not know the function of Green Zone for non-critical case



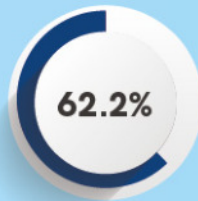
Do not know the function of Yellow Zone for semi-critical case



Do not know the function of Red Zone for critical case



Public Knowledge of Extended Hours Clinics



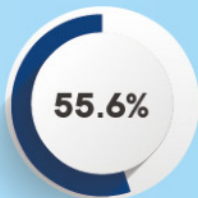
62.2%

do not know on extended hours clinics



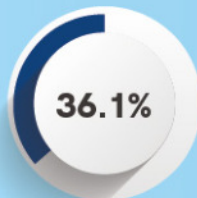
37.8%

who knows stated that:



55.6%

the clinic nearby to house



36.1%

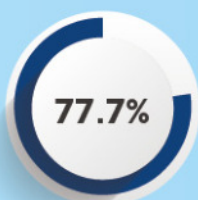
the clinic far from house



8.3%

do not know the clinic in nearby or not

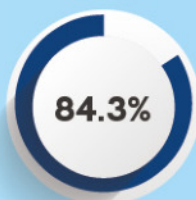
Public Willingness for Health Clinic Referral



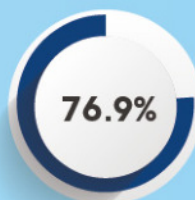
77.7%

willing to be referred to the Health Clinic if the screening results at the Triage - Emergency Department indicate a non-emergency case

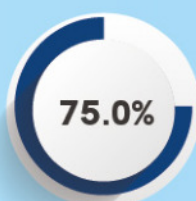
Understanding Public Perceptions Towards Emergency Department Services



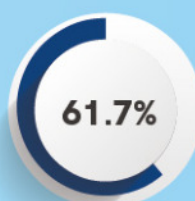
Usually, treatment at the ED is prioritised based on the severity of the illness



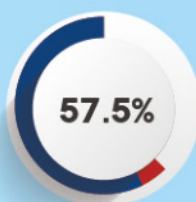
ED has the right expertise and facilities to provide treatment



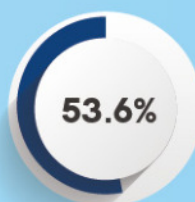
Due to my concern about my health, I had no other choice but to go to the ED for treatment



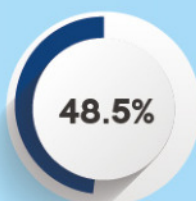
ED is first line centre to provide treatment



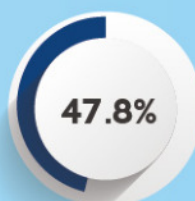
Treatment in ED is effective than others



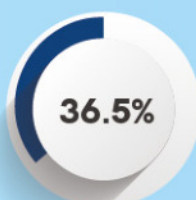
The presence of non-emergency cases is the cause of congestion and treatment delays in the ED



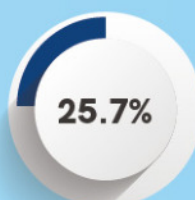
ED services faster than others



Still go to ED even though know the ED functions for emergency cases



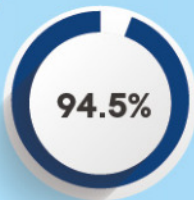
Willing to wait a long time to received treatment



ED receive patients at selected time only

***The percentage (%) refer to those who agreed with the statement

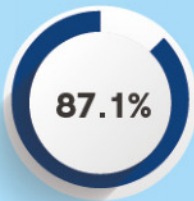
Unveiling the Reasons Behind Emergency Department Utilization



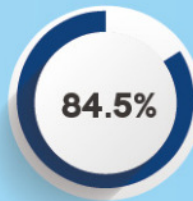
24 hours operation



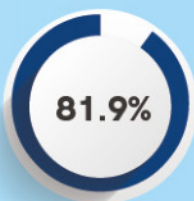
Treatment cost is cheap



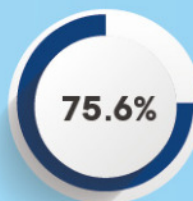
Confidence with the quality of treatment



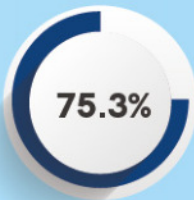
To ensure level of health appropriately



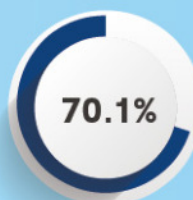
Disease experienced is severe and need urgent treatment



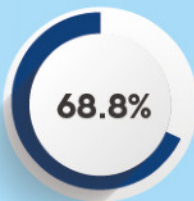
Staff hospitality is satisfactory



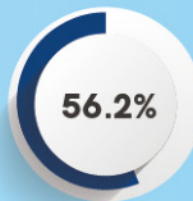
No referral letter needed



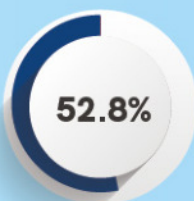
Nearby to house



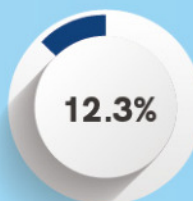
Not confidence in managing pains



Family members/ friends' advice to getting treatment in ED if having health problems



Habits for me and family getting treatment in ED if having health problems



Family members/friends work in ED

***The percentage (%) refer to those who agreed with the statement

Preferred Channels for Accessing Emergency Department Information



74% SOCIAL MEDIA



56% TELEVISION/
RADIO



47% PRINTED MATERIAL



34% SMS

Essential Information Users Seek from the Emergency Department



74.3%

Situation update
time to time



51.4%

Type of treatment
offer



44.1%

Screening/Triage/
Zone



36.7%

Others alternatives
services

Public's Expectation from Emergency Department



***Based on open ended questions*





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