# Access to emergency appointments for new patients in Quebec, Canada: a simulated patient study

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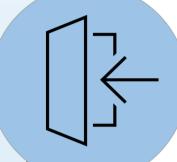
# Introduction



- Optometric therapeutic privileges since 2018
- Primary eye care providers, including eye emergency consultations



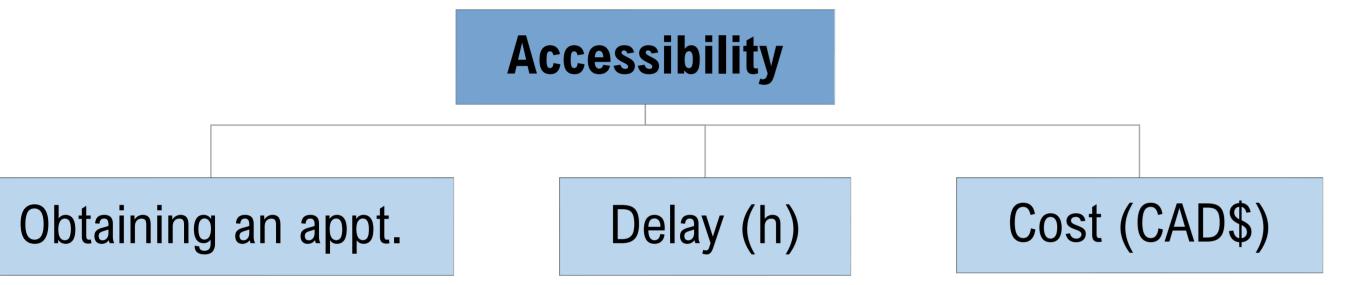
- Emergency appointment fees covered by Québec Health Insurance Plan (RAMQ)
- Treatment fees at the expense of the patient



- Disparities exist in
  - internal clinic policies
  - •geographical distribution of optometrists in Quebec

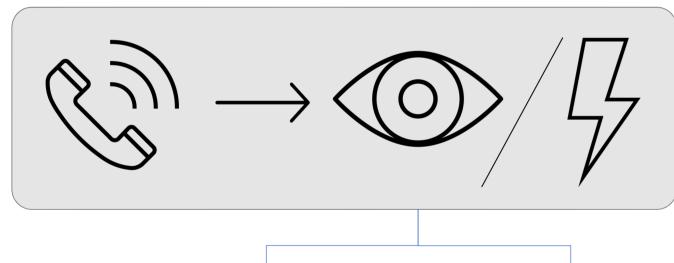
# Objective

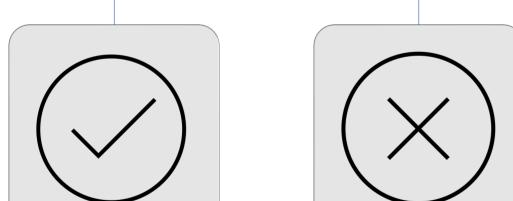
To describe the accessibility of ocular emergency appointments for new patients in optometry practices throughout Quebec, Canada, according to morbidity and region.

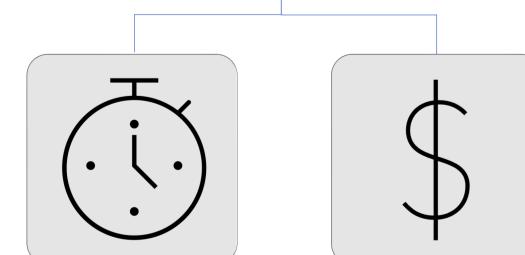


# Method

Cross-sectional study, conducted in 89 randomly selected optometry clinics across Quebec, divided between urban, semi-urban and rural areas







- Simulated patients calls, taking the role of a new patient seeking an eye emergency appointment
- One call for a low morbidity emergency (acute red eye), and one call for a high morbidity emergency (recent onset of flashes)
- Comparisons using parametric (chi squared) or nonparametric tests (Fisher's exact test, Wilcoxon signed-rank test, Kruskal-Wallis H test)

# References

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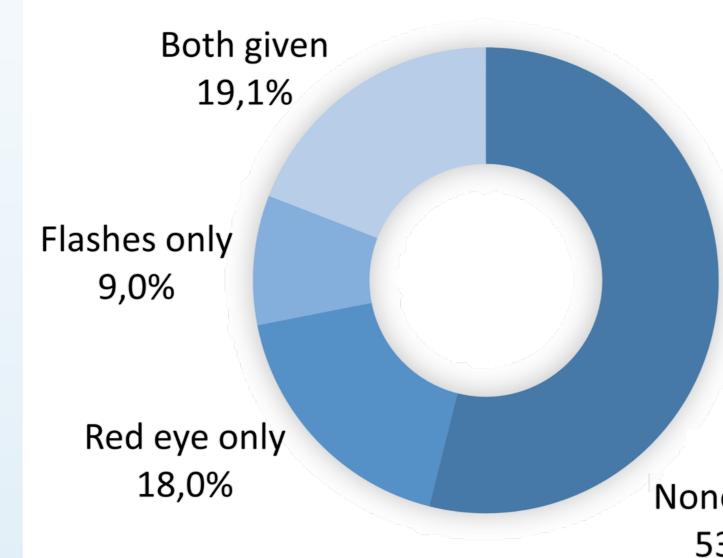
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7. Picture 1 : Cindy Montague / EyeRounds.org, The University of Iowa 8. Picture 2 : Sruilk/Shutterstock.com

Results

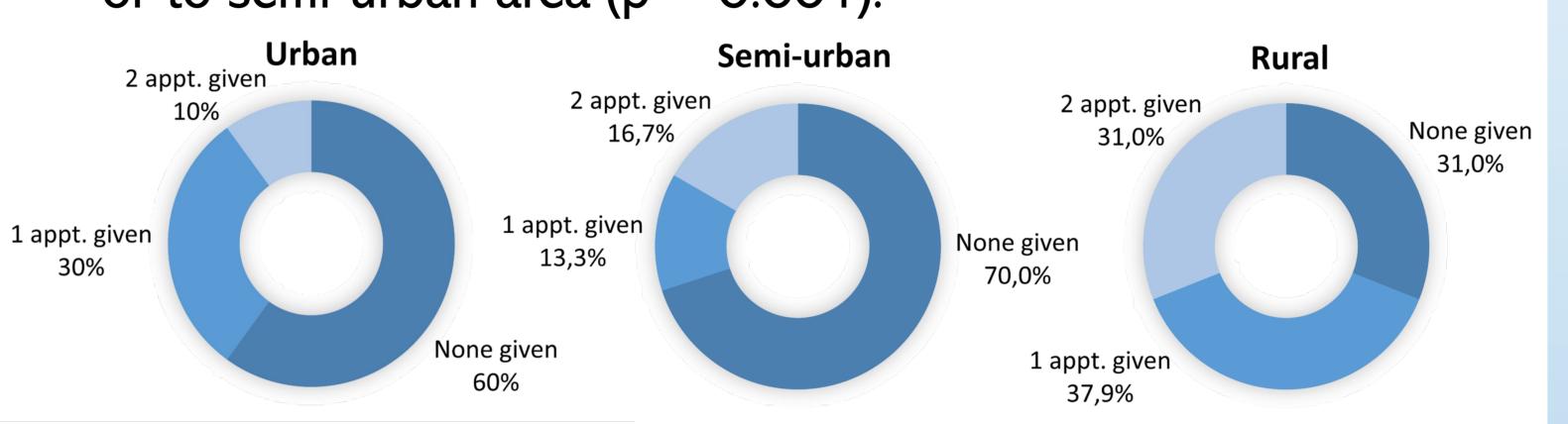
# **Appointment obtention**



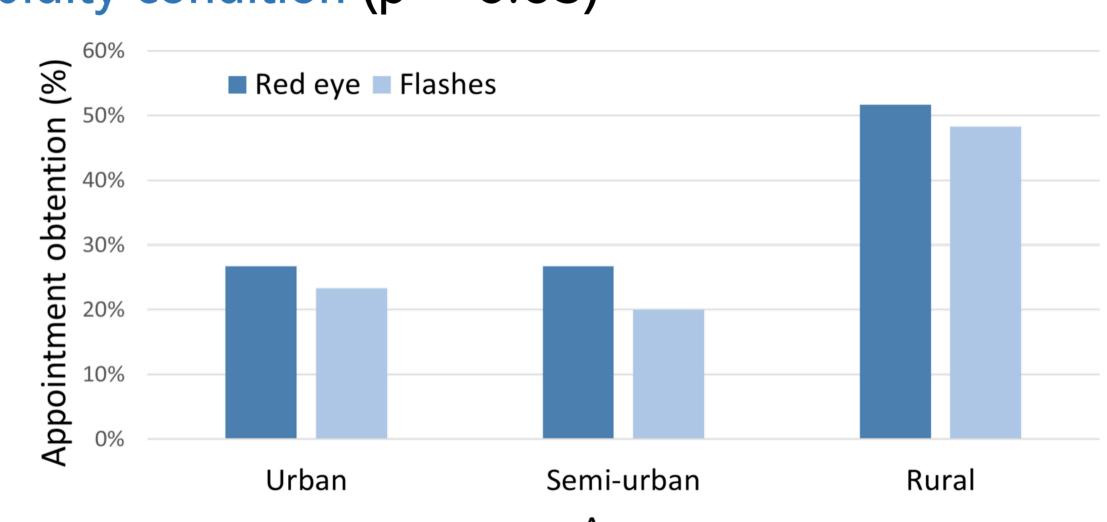
The proportion of clinics that granted at least one eye emergency appointment was 46.1%, with differences according to areas (p = 0.008).

None given 53,9%

Obtaining at least one type of appointment was more probable in rural areas compared to urban areas (p = 0.004), or to semi-urban area (p = 0.001).

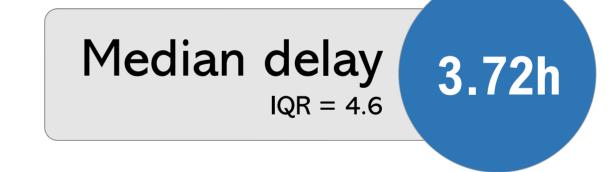


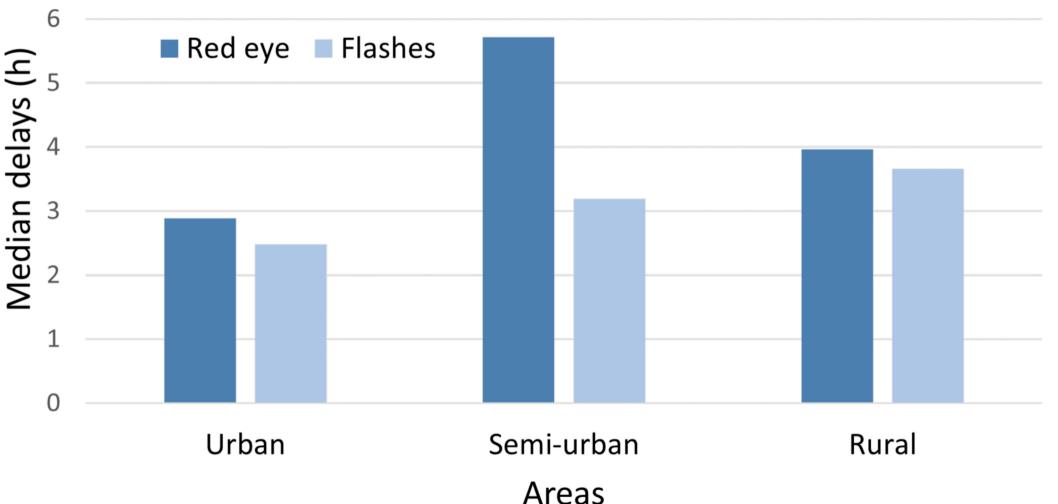
Patients with a high morbidity condition did not yield better chances of obtaining an appointment than those with a low morbidity condition (p = 0.63)



# **Delay**

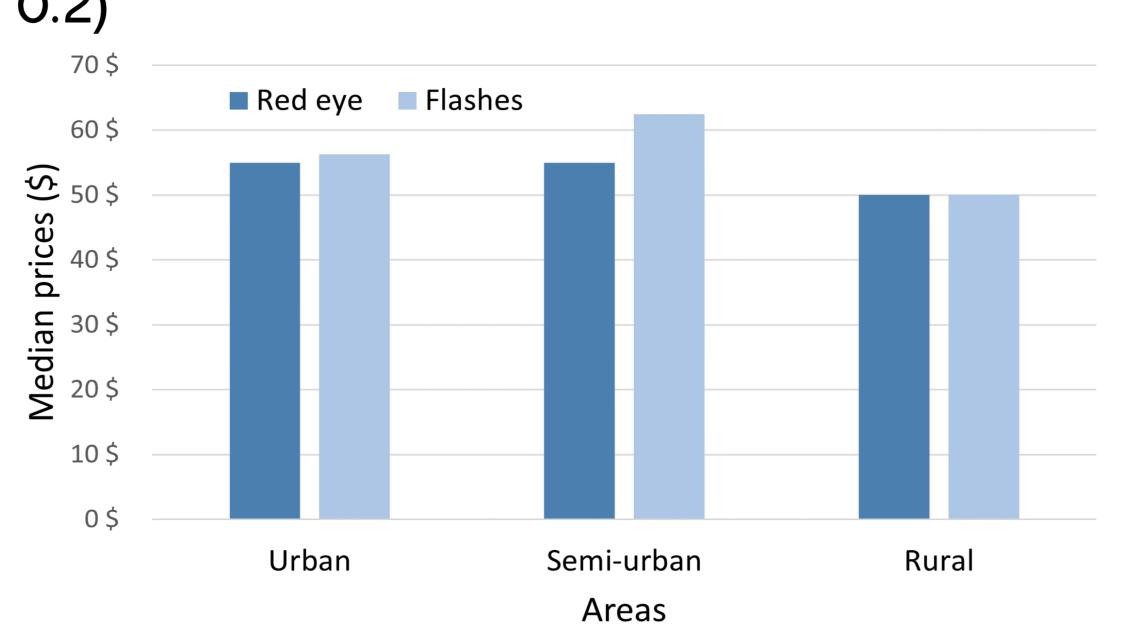
No differences between areas (p = 0.3), nor between morbidity (p = 0.78)





Cost No differences between areas (p = 0.17), nor between morbidity (p = 0.2)





# Discussion

# **Appointment obtention**

- Easier in rural areas: limited access in ophthalmology, giving more responsibility to optometrists as primary eye care giver
- Appointment demand exceeding offer: many requests were denied because of an already full schedule or other emergencies already booked
- General trend : more emergencies booked for a red eye than for flashes. Longer chair time because of dilation?

#### **Delay**

 Trend: faster for flashes and faster in urban areas

## Cost

• Trend: uniform across Quebec and in adequation with Québec's Optometrists Association (AOQ) price range recommendation for eye emergencies (50-75\$ at the time of the study)

## TAKE HOME MESSAGE

- Median delays and costs of an eye emergency appointment seem uniform across Quebec regardless of morbidity
- The proportion of optometry clinics offering emergency appointments to new patients is <u>uneven</u>, <u>favoring rural</u> practices
- Obtaining an appointment is <u>impossible</u> in more than half of the cases.