

Disparities in Patients who Leave Without Being Seen from the UCSF Parnassus Emergency Department

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Background and Purpose

- Patients who present to the Emergency Department (ED) but leave without being seen (LWBS) are at risk for adverse outcomes
- Between 2017-2022, 6% of patients at the UCSF Parnassus ED LWBS
- We sought to characterize the LWBS patient population at the UCSF Parnassus ED and to identify if there are disparities in LWBS rates between groups of patients

Methods

- We conducted a cross-sectional, retrospective review of all adult patient visits to the UCSF Parnassus ED from 2017-2021
- We extracted demographic and clinical data for each visit from the electronic medical record. Each visit was classified as seen or LWBS.
- We used chi-squared tests to compare the LWBS rate among patients by race/ethnicity (selected by patients on registration), language, expected payor, and estimated severity index (ESI) assigned at triage.
- We further analyzed LWBS rates by race/ethnicity controlling for language, payor and ESI

Results

	ED Patients	LWBS Patients	LWBS Rate	p-value
Total	212,903	12,950	6.08%	
<u>Race/Ethnicity</u>				<0.001
White or Caucasian	92,528	5,382	5.82%	
Black or AA	33,169	2,686	8.10%	
Asian	39,244	1,320	3.36%	
Hispanic or Latino	26,774	1,479	5.52%	
Other*	4,104	216	5.26%	
Null/Unknown	17,084	1,867	10.93%	
<u>Language</u>				<0.001
English	185,422	11,546	6.23%	
Non-English	25,649	718	2.80%	
Null/Unknown	1,832	686	37.45%	
<u>Estimated Severity Index (ESI)</u>				n/a
1 - Life Threatening	1,058	-	0.00%	
2 - Emergent	40,955	255	0.62%	
3 - Urgent	125,895	6,176	4.91%	
4 - Immediate	36,504	3,194	8.75%	
5 - Non-Urgent	4,053	811	20.01%	
Null/Unknown	4,438	2,514	56.65%	
<u>Expected Payor</u>				<0.001
Medicare	72,473	2,846	3.93%	
Medi-Cal/HealthNet	61,097	4,835	7.91%	
Commercial	64,318	2,200	3.42%	
Uninsured/Unknown	15,015	3,069	20.44%	

* Includes Alaska Native, American Indian, Native Hawaiian, Other Pacific Islander.

Results

- By race/ethnicity, LWBS rates were highest among Black/AA patients (8.10%) vs. White patients (5.82%). Black/AA patients represented 16% of all ED patients but 21% of ED patients LWBS
- Among insured, English-speaking patients with ESI level 3 (Urgent) complaints, Black/AA patients remained more likely to LWBS vs. White patients (5.43% vs. 4.08%, $p < 0.001$)

Conclusions & Future Directions

- Our findings suggest that there are significant demographic differences in patients who LWBS from the UCSF ED that may increase the risk of serious health outcomes for patients who do not receive timely emergency care
- Our next step is to conduct an expanded multivariate regression analysis to further assess for confounding factors
- The results of this study can inform interventions to reduce LWBS in the UCSF Parnassus ED and disparities in ED care by targeting the highest risk groups