

00039 Factors Associated With A&E Attendances and Hospitalisation in a Singaporean Public Rental Flat Population

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Aims: In Singapore, more than 80% of the population stays in public housing estates and the majority (90%) own their own homes. For the needy, public rental flats are available. Staying in a public rental flat is associated with higher hospital readmission rates and poorer access to health services. We sought to examine sociodemographic factors associated with hospital admissions and A&E attendances amongst public rental flat residents.

Methodology: We surveyed all residents aged ≥ 60 years in a public rental housing precinct in central Singapore in 2016. Residents self-reported their number of A&E attendances, as well as hospitalisations, in the past 6 months. We obtained information on residents' sociodemographic characteristics, medical, functional and social status via standardised questionnaires. We used chi-square to identify associations between A&E attendances/hospitalisations and sociodemographic characteristics, on univariate analysis; and logistic regression for multivariate analysis.

Result: A total of 928 residents participated in our study. Around 9% (83/928) of patients had attended the A&E in the last 6 months; while 10.5% (100/928) had been admitted to hospital in the past 6 months. Impaired functional status, presence of medical comorbidities, and history of falls were independently associated with A&E attendances and hospitalisation in the past 6 months ($p < 0.05$). Additionally, those professing a religious belief had lower odds of attending the A&E in the past 6 months (adjusted odds ratio, aOR=0.55, 95%CI=0.33-0.91), while those who were hospitalised in the past 6 months had lower odds of working (aOR=0.47, 95%CI=0.26-0.83). Being on regular follow-up with a Western medical practitioner was associated with lower odds of A&E attendances in the past 6 months (aOR=0.55, 95%CI=0.33-0.90).

Conclusion: In this public rental flat population, impaired functional status, medical comorbidities, and history of falls were independently associated with A&E attendances and hospitalisation. Residents who were seeing a Western medical practitioner regularly had lower odds of attending the A&E.