

Lay Summary

The influence of primary care quality on hospital admissions for people with dementia in England: a regression analysis

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Dementia is a major cause of disability and affects an increasing number of older people. Dementia has a huge impact, not only on the person with dementia but also on their carers and families. Emergency hospital admission can be a defining moment in the life of someone with dementia and often heralds an avoidable downward health spiral, with individuals at increased risk of delirium, dehydration, falls, health care associated infections and death. Studies have shown that dementia care is often poor and that the links between care provided by General Practitioners (GPs), hospitals and the social care sector can be weak.

Under a pay-for-performance system – the Quality and Outcomes Framework (QOF) – GPs are paid to identify which of their patients have dementia and offer them an annual health check-up. In this review, the GP discusses the support needs of the patient and their carer; examines the patient's mental and physical health; asks the carer about the impact caring is having on them; and makes sure care services are co-ordinated across different parts of the system. In theory, the review could help prevent emergency admissions, for example by detecting and treating health or care problems before they become too serious.

Our research investigated whether GP practices that review comparatively more of their dementia patients also have fewer emergency hospital admissions for these patients. We looked at admissions for dementia and for physical illnesses that good quality GP care can control or even prevent. The research used a range of statistical methods to analyse data that are collected routinely from all GP practices and hospitals in England, and took account of other factors that can affect admissions.

We conclude that undertaking QOF reviews for people with dementia may indeed be associated with fewer emergency hospital admissions, but that any impact is very small. However, given the health burden of the disease for both patients and carers, the pressure on hospital beds and the associated healthcare costs, even such a small effect may be valuable.

Full paper available at (TBC)

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The Economics of Social and Health Care Research Unit is a joint collaboration between the Centre for Health Economics (CHE) at the University of York and the Personal Social Services Research Unit (PSSRU) at the London School of Economics and the University of Kent. ESHCRU is supported by a grant awarded by the English Department of Health: Policy Research Unit in Economics of Health and Social Care Systems.







