

Lay Summary

The impact of primary care incentive schemes on care home placements for people with dementia by Panos Kasteridis, Dan Liu, Anne Mason, Maria Goddard, Rowena Jacobs, Raphael Wittenberg, Daniel Howdon

General practitioners (GPs) are rewarded financially for providing an annual health check for their dementia patients. The annual review covers patients' physical and mental health, how well their carer is supported and how well health and care services are coordinated. It is plausible that the type of care provided in the annual health check could prevent or delay a person entering a care home. This is because the patient could be better supported and the needs of a carer addressed in a timely way.

We analysed electronic medical records from a GP dataset known as ResearchOne, which has details on over 30,000 people with dementia. The dataset has information on care received from the GP practice and from hospitals, as well as data on whether and when a person entered a care home and whether and when they died. We used statistical methods to test whether the annual check affected care home admissions. We used another GP dataset, the Clinical Practice Research datalink (CPRD), to find out what types of care GPs provided on the day of the review and up to a month afterwards.

The study did not find evidence of any link between having an annual dementia review and the chance of entering a care home. Rather, females, older people and people having chronic illnesses such as epilepsy or stroke, were more likely to be admitted to a care home. Admission to a care home also depended on which part of England people lived and their personal circumstances – the poorest people were less likely to enter a care home.

In general, GPs provided the right sorts of care – examining their patients, ordering tests and referring them for further care, all signals of good co-ordination of care. There was also plenty of evidence that GPs provided substantial follow up care for their patients in the weeks after the review. However, information on the details of carers was scant and there were other challenges in using the data. These are important gaps that need to be addressed.

Full paper available at

https://www.york.ac.uk/media/che/documents/papers/researchpapers/CHERP164 care-home placements dementia.pdf

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