

ESTIMATING THE BALANCE OF CARE

PSSRU

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CONTEXT

This work was commissioned by a local authority social services department. In the context of increasing budgetary pressures and changes consequent on the implementation of the community care legislation the authority sought to make changes in the nature of its service provision in the light of the best available information. The overall aim of this study, therefore, was to estimate the cost and feasibility of shifting the balance of care from residential to community support for different client need groups. Implicit in this is the recognition that the authority, like many others, had too little information about dependency and appropriateness of placement in long term care, and a lack of knowledge about the needs of service users who might be cared for at home and the cost of this.

DESIGN

The research strategy for the project concerned with estimating the balance of care had a number of components. Data were collected on admissions to care over a nine month period in such a way that comparison with national findings was possible. The local data were categorised in order to identify the characteristics of service users who were most likely to be admitted to long term care. Within each category a case was randomly selected and local practitioners and managers were involved in an expert panel exercise to estimate the cost of a community care package as an alternative to residential or nursing home care. On the basis of this, projections were made to estimate the cost of alternative care arrangements in the relevant authority.

FINDINGS

The findings of the balance of care project were apparent in three areas. Firstly, the local authority data was placed in a national context thereby providing key decision makers with the information to make strategic decisions about future residential and nursing home provision in line with other authorities. Secondly, the study provided information specific to the local context with regard to significant areas such as assessment of risk, the contribution of informal carers, and the discharge of people from hospital to long term care. Of particular salience in this context were comparisons of current patterns of domiciliary care and the remaining components of an intensive home care scheme previously evaluated by the PSSRU. Finally, using an evaluation of all case types which were seen as eligible for community support, a range of potential gains from a shift in the balance of care was calculated.

FURTHER INFORMATION

The PSSRU research staff conducting this study are David Challis, Jane Hughes, Faye McNiven, Karen Stewart at PSSRU, University of Manchester, and Robin Darton at PSSRU in Canterbury. The project administrator is Angela Worden (PSSRU Manchester).

The **PERSONAL SOCIAL SERVICES RESEARCH UNIT** undertakes social and health care research, supported mainly by the Department of Health, and focusing particularly on policy research and analysis of equity and efficiency in community care, long-term care and related areas — including services for elderly people, people with mental health problems and children in care. The PSSRU was established at the University of Kent at Canterbury in 1974, and from 1996 it has operated from three sites:

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