



Use of Home and Community Care Services in The 45 and Up Study

Mr Scott Walter



The 45 and Up Study: met and unmet needs for home and community care in NSW

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Background

- Home and Community Care (HACC) data primarily designed to count service volumes and costs.
- Very little research has been done using HACC data
- Linking to ***45 and Up*** and hospital data dramatically enriched possibilities for policy-relevant research*

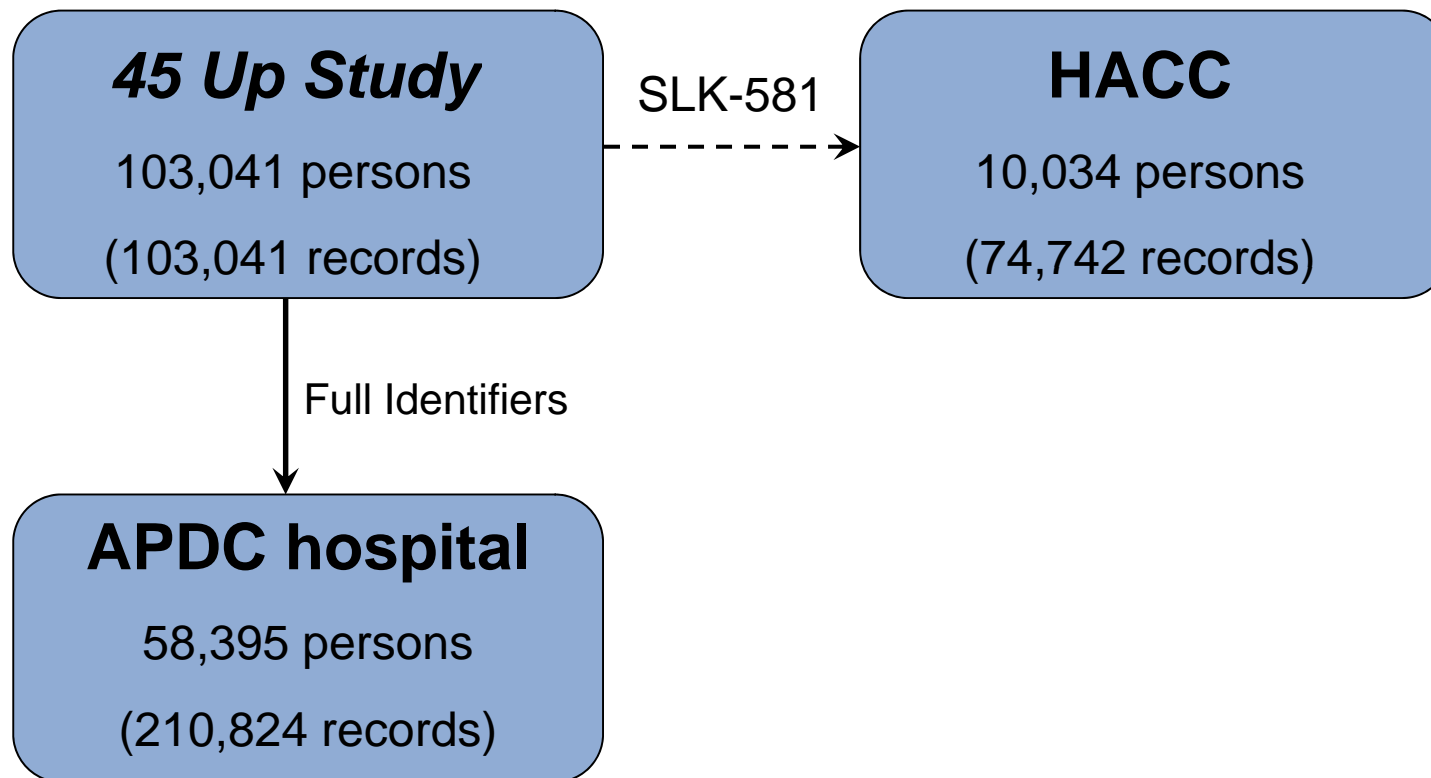


Data sources

- ***The 45 and Up Study***
 - January 2006 – July 2008
- **Home and Community Care (HACC) Data**
 - Financial years 02/03 – 07/08 (20 quarters)
- **Admitted Patient Data Collection (APDC)**
 - Financial years 02/03 – 07/08



Linkage of datasets





Research questions

- 1) Within ***45 and Up*** participants, how do HACCC service users and non users differ?
- 2) How do hospitalisation rates differ between HACCC users and non-users?
- 3) Among HACCC users, how are services used?



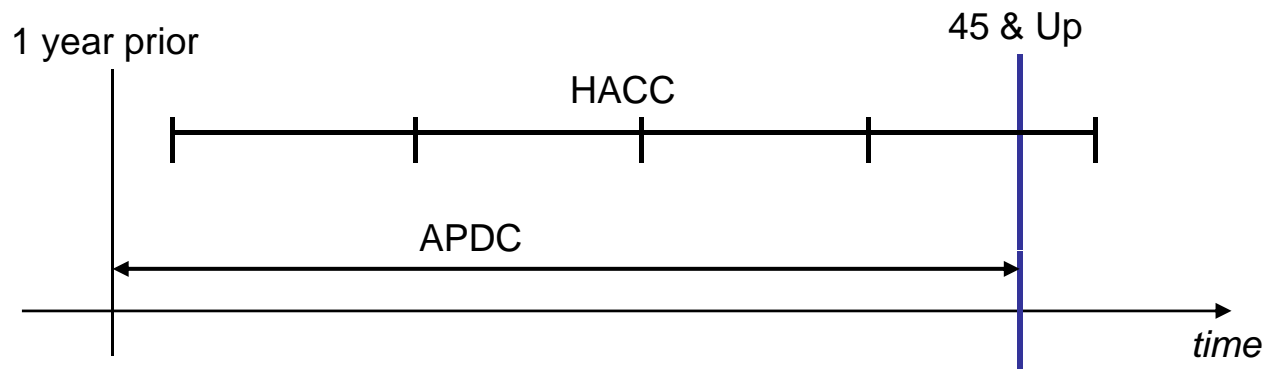
Preliminary results - Data

- Analysis limited to persons receiving HACC service **up to a year prior** to the ***45 and Up Study*** entry (N = 4978)



Preliminary results - Data

- HACC data restricted to the quarter of 45 & Up questionnaire and the 3 prior quarters
- APDC data restricted to 365 days prior to 45 & Up questionnaire date





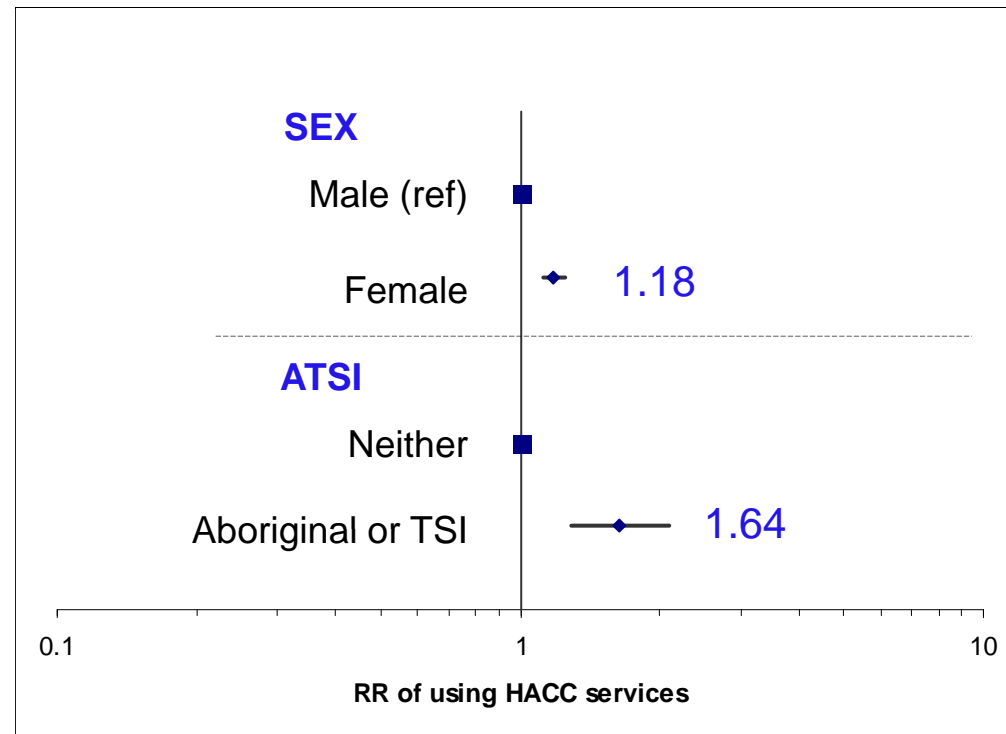
Research Question 1

- Within 45 and Up participants, how do HACCC service users and non users differ?
- 45 and Up variables
 - Demographics
 - Lifestyle Factors
 - Health Conditions



Relative Risk of using HACC services

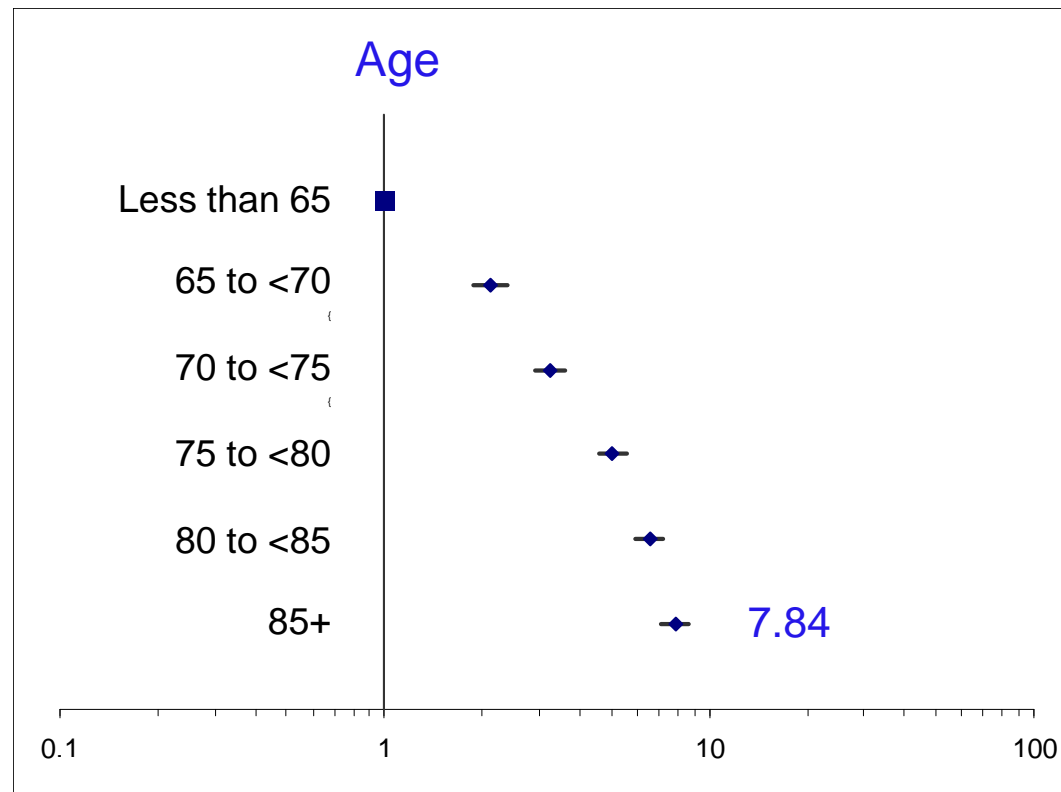
Adjusted for age, (sex) and functional capacity, relationship status and income*





Relative Risk of using HACC services

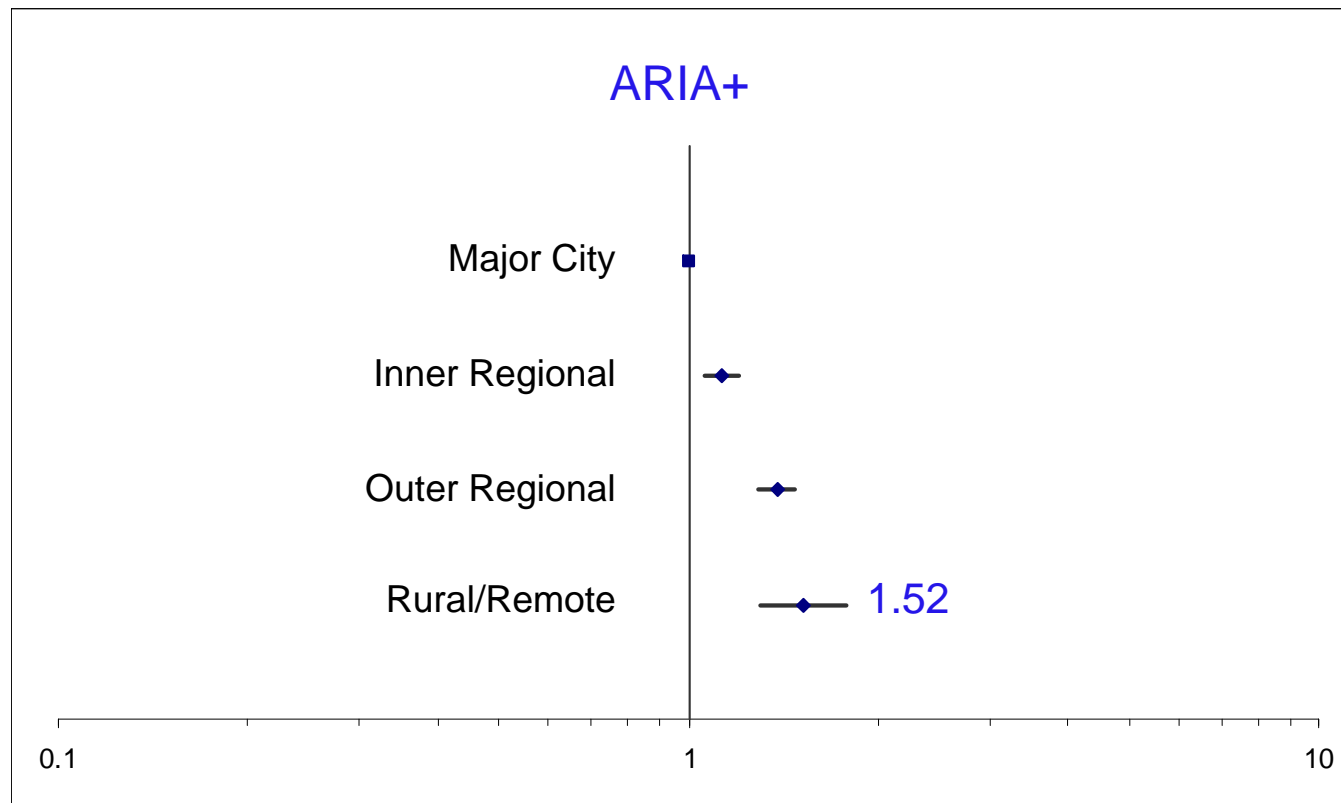
Adjusted for sex, and functional capacity, relationship status and income





Relative Risk of using HACCC services

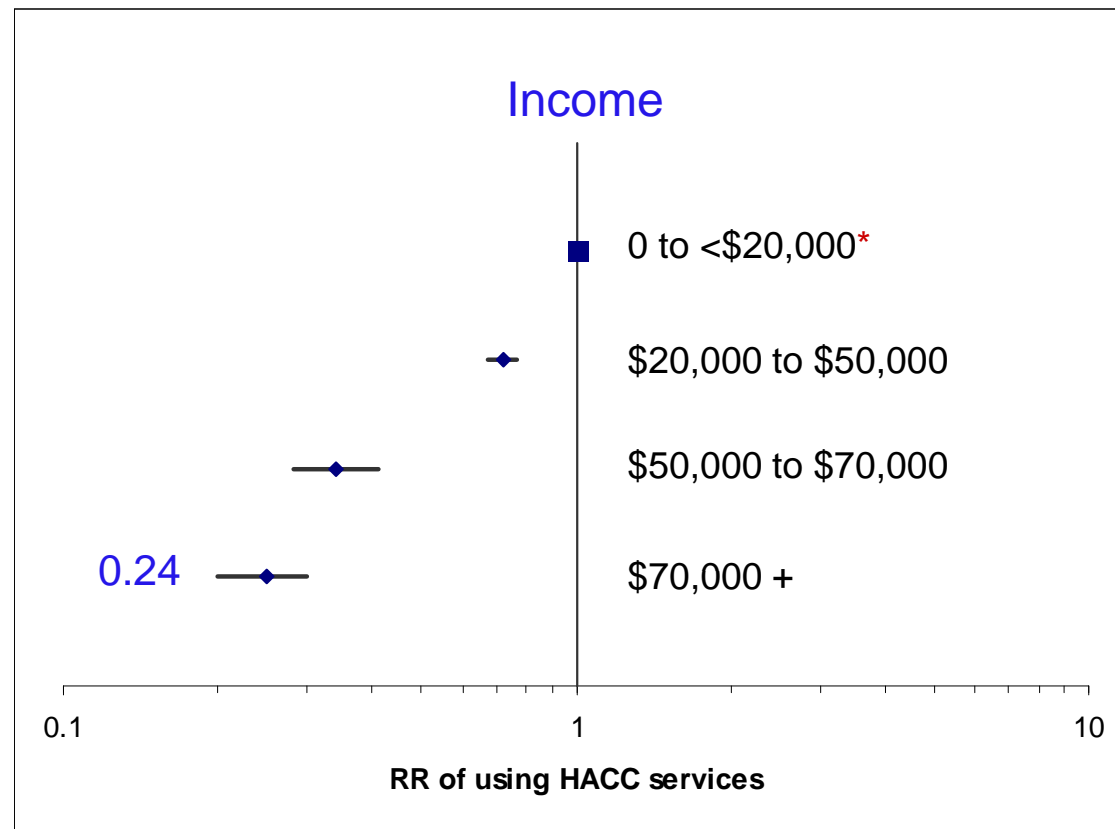
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Relative Risk of using HACCC services

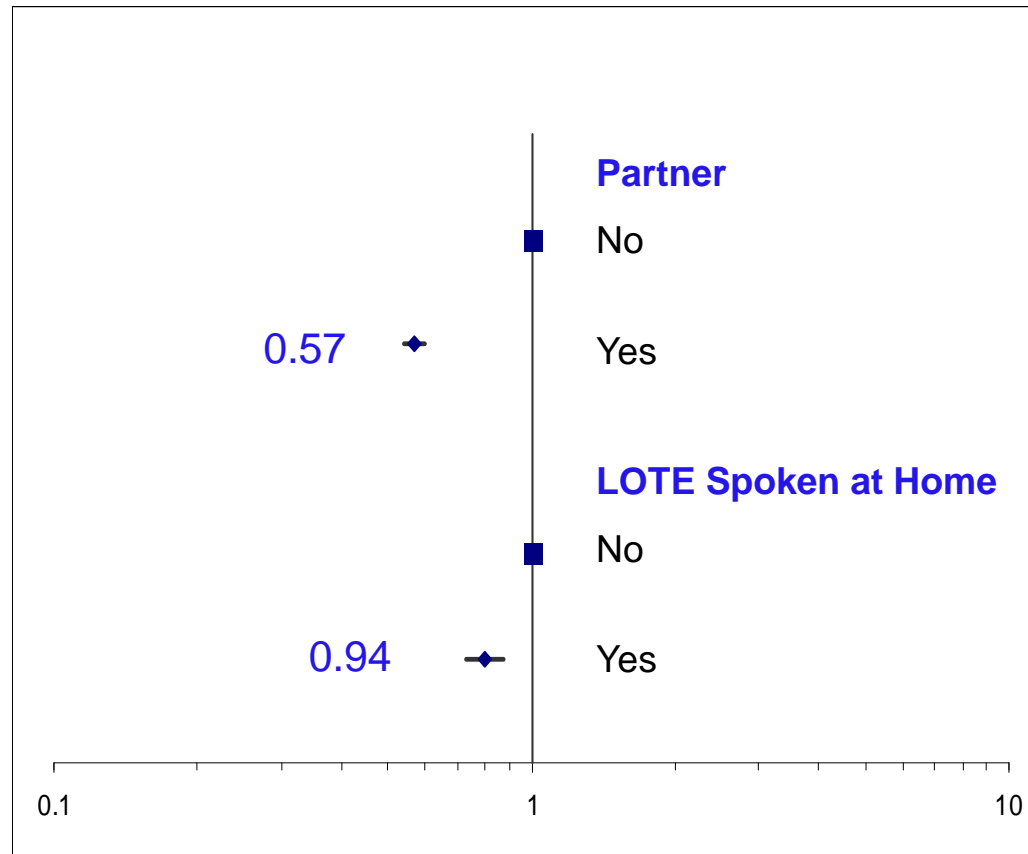
Adjusted for age, sex and functional capacity and relationship status





Relative Risk of using HACC services

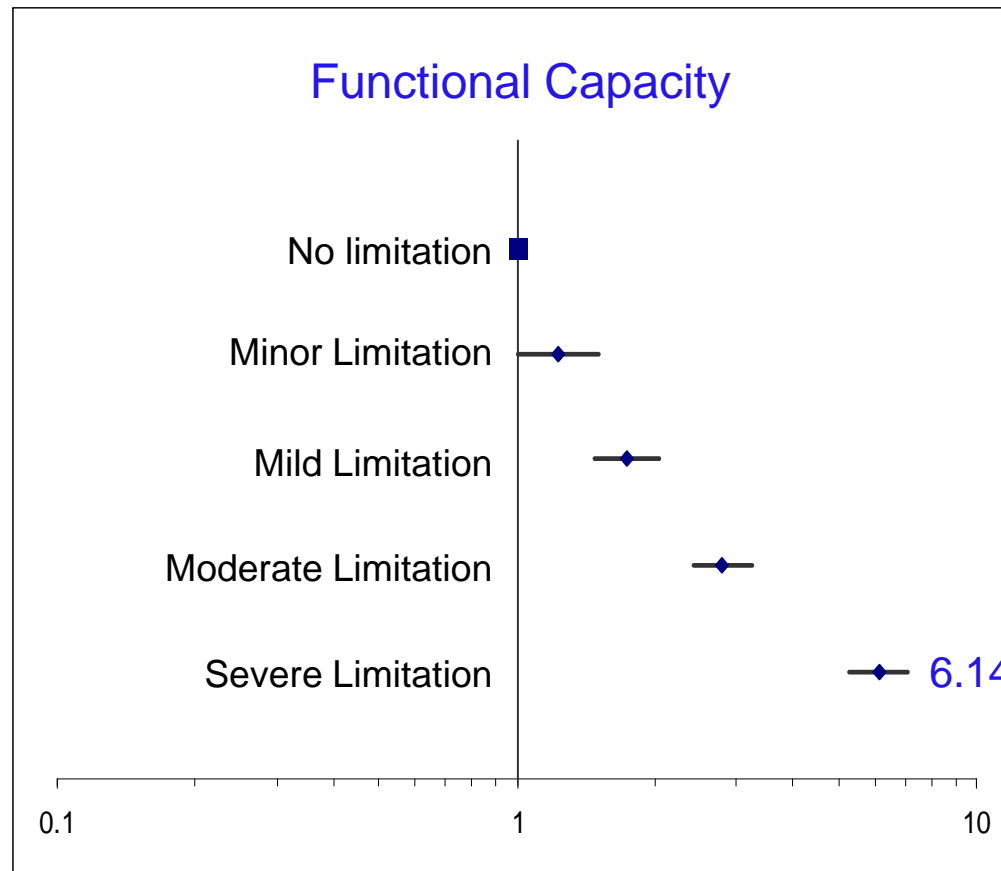
Adjusted for age, sex and functional capacity, (relationship status) and income





Relative Risk of using HACC services

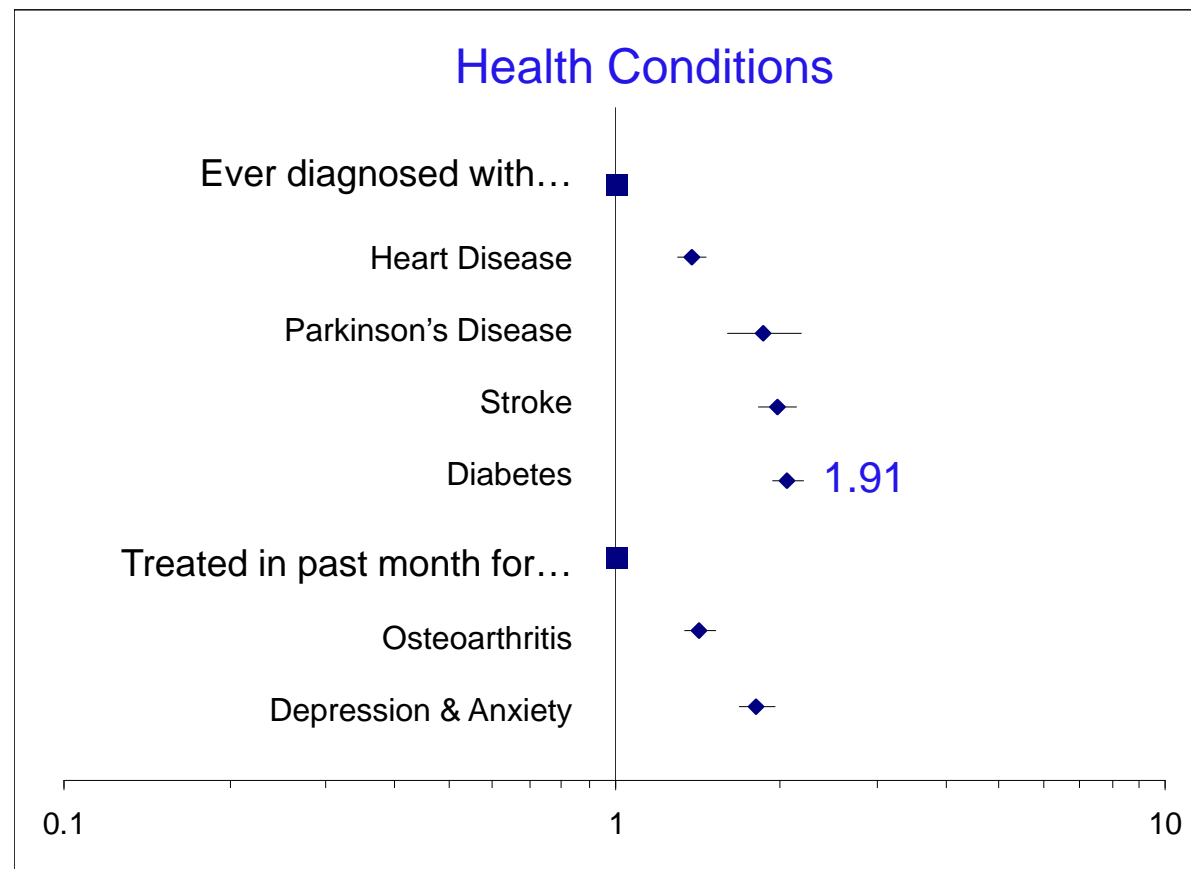
Adjusted for age, sex and relationship status and income





Relative Risk of using HACC services

Adjusted for age, sex and relationship status and income





Other factors associated with HACCC use

- Not in paid work (retired)
- Underweight or obese
- Smoking
- Not drinking
- Physical inactivity
- Low intake of fruit and veg
- High levels of anxiety and depression
- Generally poorer health and functional capacity



Research Question 2

- How do hospitalisation rates differ between HACC users and non-users?



Hospitalisations

- People hospitalised for any condition

	<u>N</u>	<u>%</u>
HACC users	2561	(51.5%)
Non users	22524	(23.0%)

- HACC users are approx. **2.5*** (2.31, 2.62) times more likely to have been hospitalised compared to non users
- HACC users more likely to have been hospitalised for **almost all** conditions

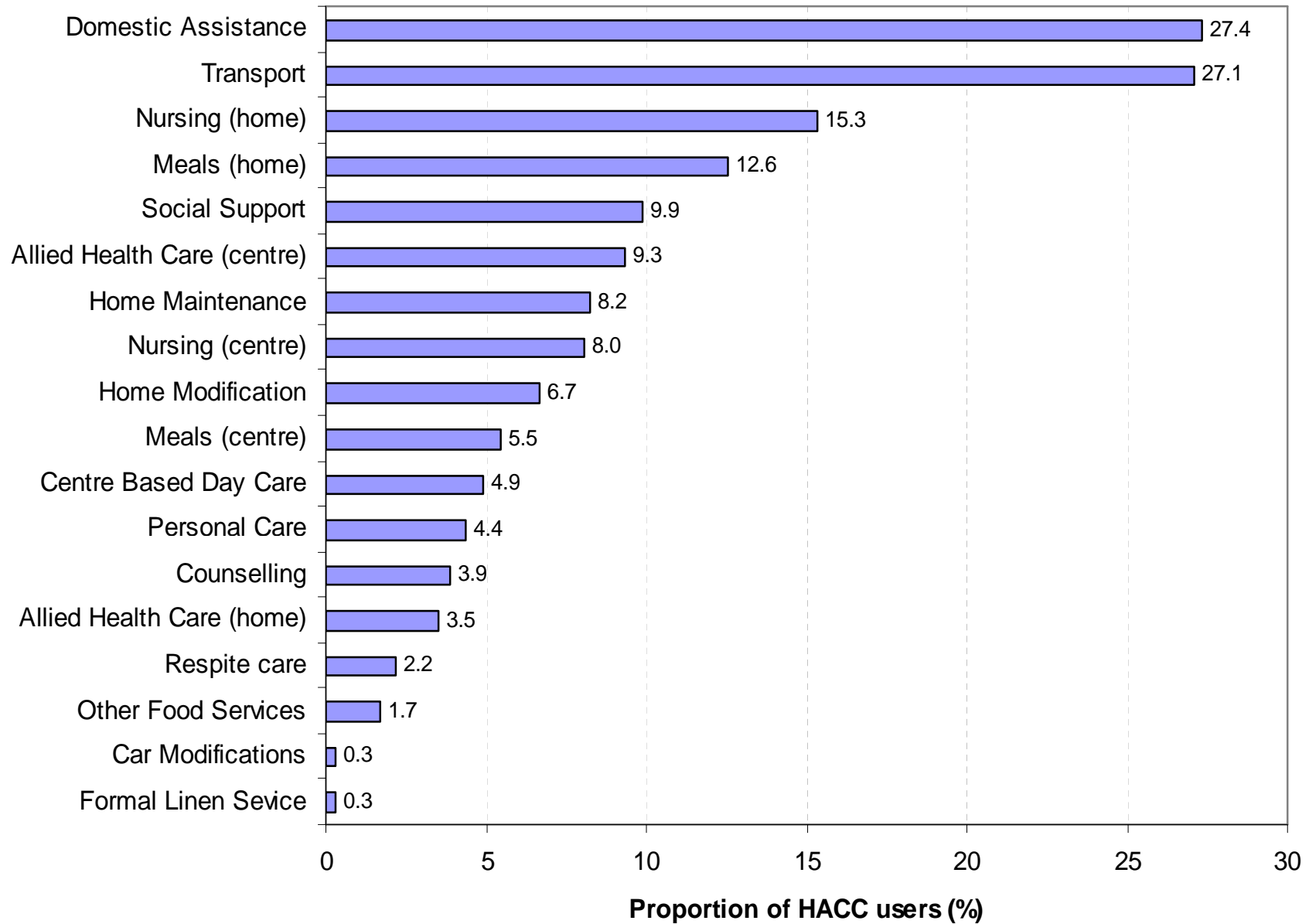
*Adjusted for age and sex



Research Question 3

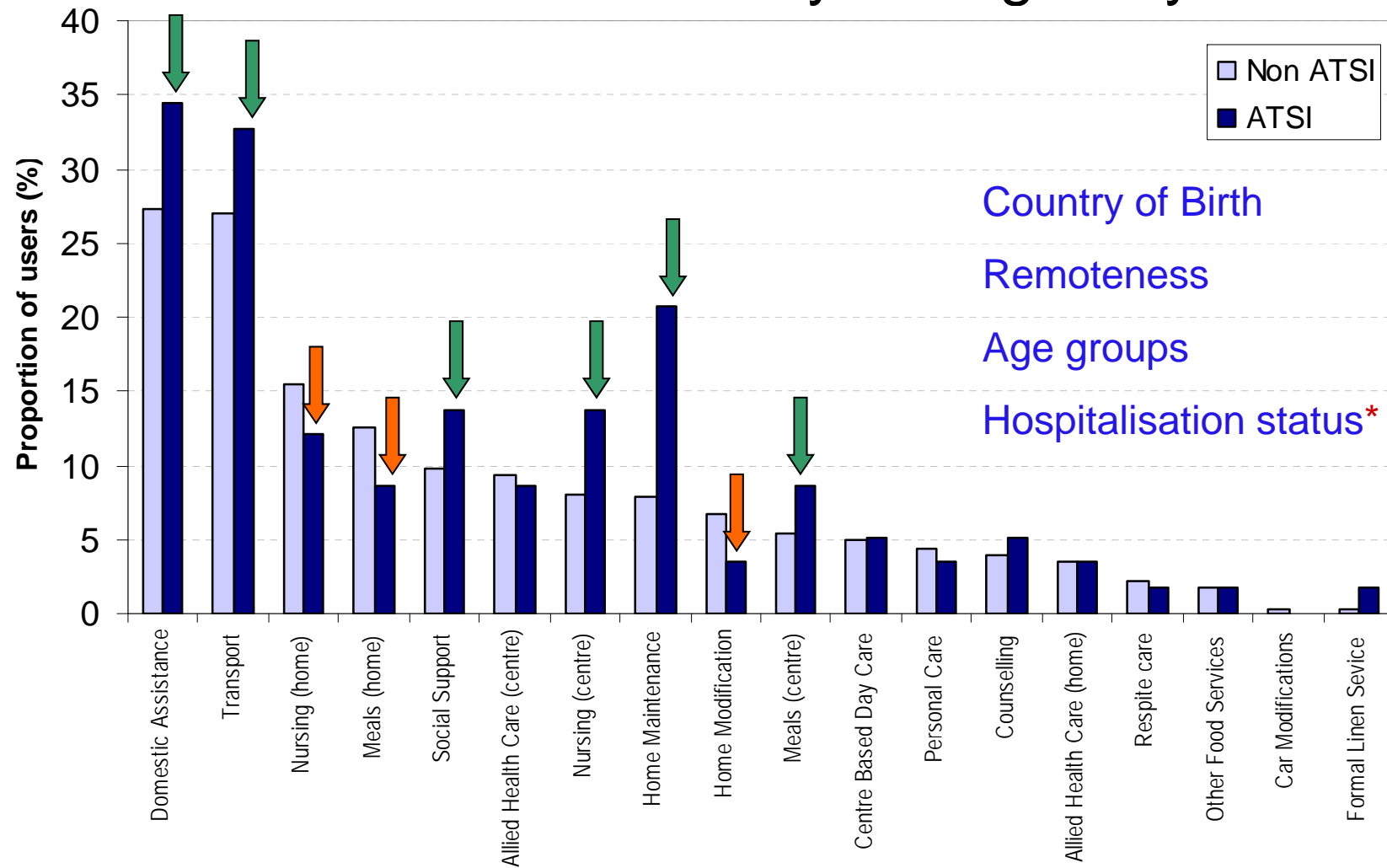
- Among HACCC users, how are services used?

HACC Service use





HACC service use by Aboriginality





Policy implications

- Potential for health promotion and early intervention
 - 21% of HACC clients have **diabetes**
 - 27% of HACC clients have **heart disease**
 - 15% of HACC clients report **no activity sessions**
 - 57% of HACC clients report **falling** in past 12 months



Lessons

- The linkage of HACCC data and the ***45 and Up Study*** offers extensive aging-related research potential
- There is much more to do!
 - establish ongoing linkage with HACCC MDS
 - establish linkage with other aged care datasets
 - explore trajectories of service use



Acknowledgements



CHReL Centre for Health Record Linkage



DADHC Department of Ageing, Disability and Home Care