HEALTH SERVICES UTILISATION IN THE UK, COMPARISON WITH FIVE OTHER EUROPEAN COUNTRIES


Keele University1 and Tipping the Balance Collaboration

Introduction

Tipping the Balance is an international collaboration committed to the promotion of primary care services. Part of its work has included a health service utilisation survey which was conducted as a baseline from which strategies for service development and health improvement could be planned logically.

Methodology

Four and half thousand older people were chosen at random from population registers for face to face interviews. The centres were in: West Glamorgan, North Staffordshire and Dudley, UK; SE Eire; Oostersund, Sweden; Porvoo, Finland; Istra, Croatia; Andalusia and Barcelona, Spain. The results in those aged 70-94 and who did not live in long term care facilities are presented here.

Results

In the previous 12 months the range in those attending hospital as an in-patient was 15.9% to 23.9%, those attending as an out-patient was 3.6% to 10.1%. There was a wide variation in GP visits from 0.25 visits in past 4 weeks in Finland to 1.3 in Andalusia. Marked differences in other services were recorded: receiving physiotherapy in last 4 weeks (1-7%), having their vision (33-70%) or hearing tested (12-34%) in previous 3 years, wearing glasses (65-97%) or hearing aids (2-14%). Medication use was however broadly similar 2.1-2.9 drugs/day.

Discussion

These differences obviously reflect policies and practices as well as availability of services. The impact of these differences on the health and well being of older people remains to be determined.

THE SF-36 IN OLDER EUROPEANS


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Introduction

Subjective perception of health is important as an outcome measure alongside objective variables. We have used one such measure, the SF-36, to provide baseline information on older people’s health.

Methodology

SF-36 was administered to 4500 older residents chosen at random from population registers in 9 areas in 6 European countries: UK (3), Eire, Sweden, Finland, Spain (2) and Croatia. Residents with dementia were excluded.

Discussion

These differences obviously reflect policies and practices as well as availability of services. The impact of these differences on the health and well being of older people remains to be determined.

Conclusion

Wide differences in perceived health were found. No consistent ranking of centres was found but for most domains the lowest scores were found in Andalusia (ESP 2) and Croatia (CRO). These results form a baseline against which other populations and interventions might be compared.

References


