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Most innovative use of routine data
Alison Porter, Associate Professor,
Swansea University Medical School
04 TIMELY SOCIAL CARE AND EMERGENCY HOSPITAL
ADMISSIONS
Alison Porter,1 Martin Bardsley,2 David Ford,1 John Grenfell,3 Martin Heaven,1
Sian Morrison-Rees,1 Judith Oades,4 Bernadette Sewell,1 Karen Tingay,1
Alan Watkins1. 1Swansea University; 2The Nuf fi eld Trust; 3City and County of
Swansea; °SUCCESS Service User Group
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**Background** Appropriate and timely social care can potentially
delay or avoid the need for interventions such as emergency
hospitalisation. Routine data provides scope to examine the
relationship between emergency hospital admissions in Wales
and local authority-supported social care for people aged
65 and over.

**Methods** This observational study employed mixed methods
for data collection and analysis covering the period January
2006 to December 2012. We used interrupted time series ana-
lyses to study overall trends in the use of social care and
unplanned use of secondary care across Wales. Within one case
study area, we used the SAIL database to link health and
social care data anonymously, to examine service use at an
individual level.

**Results** At an all-Wales level, we observed no relationship
between trends in health care and social care for older people.
In our case study area, we examined data on ‘qualifying emer-
gency admissions’ (QEAs), that is, the first emergency admission
to hospital in the study period for a person aged 65 or over.
Over the study period, about four-fifths of all the people receiv-
ing social care (n=10,864) also had a QEA.

We compared those receiving social care before the QEA
(n=3362) with those who received social care only after their
QEA (n=7478). Those receiving social care before the QEA
were likely to:
▸ have fewer subsequent admissions (1.4 v 2.9, p<0.01).
▸ have a shorter length of stay for all subsequent admissions
(41.5 v 66.4 days, p<0.01)

**Conclusions** Anonymously linking health and social care data
for research is feasible and has potential for being taken further.
Linked data reveals more about the relationship between health
and social care use than unlinked data sets.

Social care appears targeted appropriately at the frailest older
people, and seems to have a protective effect in reducing emer-
gency admissions and length of stay following an admission.