

# Risk of hospital admissions could be reduced with better general practice strategies

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Hospital admission rates are 55 per cent higher in some areas than in others because of a greater prevalence of conditions such as diabetes, alcoholism, dementia and socioeconomic deprivation. According to research published today, those admission rates could be reduced if GPs were better supported to provide more specialist care for chronic conditions and difficult-to-reach groups.

The study, carried out by the University of Bristol's School of Social and Community Medicine, measured how much admission rates varied between the 8,000 general practices in England during 2011/12, and included 1.8 million admissions.

This study focused on ambulatory care sensitive conditions (ACSCs) such as diabetes, alcoholism, asthma and dementia, where the provision of better care outside hospital, by GPs and other healthcare professionals, can potentially reduce the need for admission.

Overall, researchers found that admission rates in some practices were 55 per cent higher than others. Chronic conditions such as diabetes, schizophrenia and hypertension tended to be much more variable than acute conditions such as strokes and hip fractures, as were those that disproportionately affect deprived communities, such as alcoholism.

Dr John Busby, lead author of the study, published today in the *British Journal of General Practice*, said: "Admission rates for some of the conditions in our study, including alcoholism, schizophrenia and

diabetes, were over three times higher in some practices than others. Clearly, this raises important questions about why these differences exist and what can be done to standardise care around best practice.

"Existing mechanisms, such as the quality and outcomes framework and NICE guidelines, aim to ensure that patients receive a consistent quality of primary care across all practices in England. Our results suggest that these might not be working effectively and that new strategies are required."

Previous studies have looked at the variation in admission rates for some of these conditions. However, they have tended to focus on a small number of health conditions and have used different methodologies, making it almost impossible to draw comparisons across studies.

This latest study from Bristol applied the same methods to a broad range of conditions, enabling researchers to make more accurate comparisons and to identify which conditions the NHS could focus on in order to improve care.

"Substantial differences in admission rates among [general practices](#) could mean that some patients are receiving suboptimal care," added Dr Busby. "Our research suggests that differences in the way GP care is delivered across England could have an important impact on patient health. This could include sub-optimal management of chronic disease which puts patients at higher risk of hospital admission, but also overly-cautious referrals to hospital, or a lack of alternatives to treat patients in the community. Clearly this matters to patients as most would prefer not to be admitted to hospital if it can be avoided, but it is also extremely important to the NHS finances as unplanned hospital admissions are expensive and can disrupt other care."

Researchers now intend to explore why such large variations exist

between practices for some [conditions](#), and how those reasons might help improve care. A follow-up investigation is being carried out to assess how the characteristics of a general practice are related to admission rates. This includes factors such as the distance to the nearest A&E, how easy it is to see a GP, how often patients can see their preferred GPs, and how many hospital beds are available in the local area.

Dr Busby added: "Given the results of this study, it will be interesting to see if the importance of each of these factors differs by condition. The way in which primary care is delivered is evolving rapidly, it is important that these changes are informed by good-quality evidence."

**More information:** 'Opportunities for primary care to reduce hospital admissions: a cross-sectional study of geographical variation.' By John Busby, Sarah Purdy and William Hollingworth. *British Journal of General Practice*

Provided by University of Bristol

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