

Nationwide survey reveals healthcare 'postcode lottery' for older people in Scotland

March 23 2022



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The standard and availability of healthcare for older adults in Scotland differs significantly depending on where they live, according to research led by the University of Aberdeen.

The Scottish Care of Older People (SCoOP) national audit project, was carried out in 2019 to assess whether and to what extent the provision of geriatric care, known as Comprehensive Geriatric Assessment (CGA) varied across the country.

The audit included 26 out of the 28 hospitals that provide acute care for [older people](#) in Scotland including remote and rural locations in the Highlands and Islands. The findings have been published in the journal *Healthcare*.

One of the primary findings of the report was that the largest Health Boards have proportionately higher provision and availability of care, which did not always correlate to the size of the population, meaning there is a disparity between Health Board regions.

The results also showed variations between the Health Boards across all key aspects studied: individual aspects of staffing, physiotherapy, [occupational therapy](#), psychiatry, pharmacy and [social work](#) as well as multidisciplinary team input.

This is the first time this kind of care provision for hospitalized older frail patients has been investigated in this way.

Catriona Young from the University of Aberdeen who co-led the study explains: "The 2019 SCoOP CGA audit highlights variations in the ways acute comprehensive specialist care is accessed, structured and staffed at the front door across the country and areas of CGA services that could be improved.

Dr. Christine McAlpine, co-chair of the SCoOP Steering group added: "This is an important finding. CGA is effective in producing better outcomes in older people and in the context of an increasing aging population with multimorbidity and frailty, it is important that hospitals

evaluate their CGA provision to ensure the highest standard of care for older people admitted to hospitals and optimal outcome."

Professor Phyto Myint, professor of medicine of old age at the University of Aberdeen and Co-Chair of the SCoOP Steering group added: "Our findings provide essential information for clinicians, service providers, [policy makers](#) and the public to improve their local services.

"Our results should offer a basis for opening discussion between services to learn from each other's expertise as we aim to work collaboratively to improve acute care for frail [older adults](#) in Scotland and shape Scottish Geriatric Medicine into a world-leading service.

A range of reasons exist for the variation in performance. Individual Boards have been informed of their data so that they can compare with other boards to drive improvement. We hope future published reports will include the Board names."

Dr. Rowan Wallace, chair of British Geriatrics Society Scotland added: "BGS Scotland fully supports the SCoOP report findings and how they powerfully highlight the variations in how CGA can be accessed, structured and staffed in [acute care](#) across Scotland by our older population."

More information: Catriona Young et al, Postcode Lottery in Healthcare? Findings from the Scottish National Comprehensive Geriatric Assessment in Secondary Care Audit 2019, *Healthcare* (2022). [DOI: 10.3390/healthcare10010161](https://doi.org/10.3390/healthcare10010161)

Provided by University of Aberdeen

Citation: Nationwide survey reveals healthcare 'postcode lottery' for older people in Scotland (2022, March 23) retrieved 26 April 2024 from <https://medicalxpress.com/news/2022-03-nationwide-survey-reveals-healthcare-postcode.html>

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