



Alzheimer's Society analysis of NHS England's Hospital Episode Statistics dataset 2012/13 to 2017/18

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Alzheimer's Society conducted analysis of NHS England's Hospital Episode Statistics dataset 2012/13 to 2017/18, in order to assess prevalence and duration of emergency admissions for people with dementia in hospitals in England.

The shocking results reveal the strain on the NHS of people with dementia unnecessarily ending up in hospitals and left there for long stays, confused and scared.

While the ageing population may be accountable for some of the increase, Alzheimer's Society blames much of the rise on the scarcity of appropriate care support, and the paucity of care home places able to provide specialist dementia care.

On release of the figures, Alzheimer's Society is today demanding £8bn per year allocated in the spring budget, and for cross-party talks to begin immediately so agreement can be reached for free universal care, funded like schools and the NHS to give people with dementia the dignity, security and fundamental care they deserve.

Key findings

- Admissions of people with dementia have increased 35% or by 100,000
 - 379,004 in 2017/18, 279,265 in 2012/13.
- Over 40,000 people with dementia were in hospital between a month and a year. This is a 6% rise since 2012/13.
 - Note: HES said a small number were in hospital for more than a year but that they could not be sure the numbers were reliable, so we have excluded these.
- 412 people were in hospital over 6 months (and less than a year). This is an increase of 18% since 2013/14.
- Of these admission, 245,935 individual people aged 30+ with dementia or 237,881 over 65 were in treatment following an emergency admission.
- We estimate over half of people with a diagnosis of dementia in 2017/18 were admitted to hospital.
 - Note: 237,881 is 54.6% of the 435,600 people who had a diagnosis of dementia in 2017/18.
- Over half of people admitted to hospital in 2012/13 to 2017/18 were admitted more than once. 2,335 people were admitted over 10 times in the five-year period.

All data taken from Alzheimer's Society analysis of NHS England's Hospital Episode Statistics dataset. This database contains details for all admissions A&E attendances and outpatient appointments at NHS hospitals in England. Annual figures for 2012/13 to 2017/18 were used. 2017/18 is the most recent year for which complete figures are available from HES.

Costs

- The total spend for the NHS of the increase in emergency admissions of people with dementia in 2017/18 is over £280 million. Mean length of stay in 2017/18 was 11.4 days. This was multiplied by 99,739 and then NHS Improvement Reference Costs for non-elective excess bed days for people with dementia were utilised for estimating cost.^[ii]
- Cost to the NHS of 40,000 people spending between a month and a year stranded in hospital in 2017/18 is over £165 million. Utilising stays by duration, with episodes set at the minimum to be included in each segment, we estimate people with dementia spent 665,335 days in hospital over a month (2017/18), and applied costs.

By spell duration	Number	Min days in set	Days over 28	Additional days
29-35 days (5 weeks)	12116	29	1	12115.90611
36-42 days (6 weeks)	7813	36	8	62503.51562
43-49 days (7 weeks)	5331	43	15	79964.3803
50-56 days (8 weeks)	3778	50	22	83115.35588
57-63 days (9 weeks)	2595	57	29	75254.4168
64-180 days (2-6 months)	8038	64	36	289365.7575
181-365 days (7-12 months)	412	181	153	63035.5115
Total	40,083			665,355

Background

- NHS Digital's Hospital Episode Statistics database provides data on inpatient admissions at NHS hospitals in England.
- Emergency admissions refers inpatient admissions to hospital, not A&E attendance. Emergency admissions may be via A&E or dental casualty department, GP, bed bureau, consultant clinic, transfer from another hospital provider, or Mental Health Crisis Resolution Team.
- Data was extracted for 2012/13 to 2017/18 on dementia using ICD10 codes F00-F03, G30, and G31, referring to "dementias and Alzheimer's disease".
- Emergency admissions with a mention of dementia (30+, counting unique spell identifiers) increased 99,741 or 35% from 279,265 (2012/13) to 379,004 (2017/18).
- Finished Admission Episodes is not equivalent to individual patients, as a person may have multiple periods of care.
- Emergency admissions (counting unique personal identifiers, as a proxy for individuals) increased from 190,176 (2012/13) to 245,935 (2017/18), an increase of 55,759 or 29.3%.
- 237,881 were 65+, representing 54.6% of the 435,600 people with a dementia diagnosis.^[i]
- 50.83% of patients admitted between 2012/13 and 2017/18 were admitted more than once.
- 2,335 were admitted 10+ times during the five-year period.
- 40,083 admissions lasted 29-365 days (2017/18), 10.4% of the total, up 6% from 37,832 (2012/13).



- 14.25% of stays were zero days. 365+ day episodes (0.02%) may refer to long-term care facilities and were excluded.
- 412 episodes were 6-12 months, up 18% from 359 (2012/13).

Policy recommendations

With reform of social care on the political agenda for 2020, Alzheimer's Society is calling on the government to commit to three critical steps to Fix Dementia Care.

1. Immediate investment of £8bn to stabilise the social care system

After decades of underinvestment and neglect of increasing demandⁱ, adult social care is on the brink of collapse. Annual funding is £700m below 2010/11 levelsⁱⁱ, resulting in many councils facing significant funding pressures, with family carers having to pick up more and more of the support previously provided by care professionals.

In 2019, the House of Lords Economic Affairs Committee called for £8 billion in extra funding for adult social care in England by 2020/21, to restore access to 2009/10 standards.ⁱⁱⁱ Alzheimer's Society estimates that £2.65bn of that money could be spent on care for people living with dementia, to improve the devastating financial and emotional impact they and their families face when accessing care.

Immediate investment on this scale in the March Budget is an essential measure to improve the quality and access of social care for those who need it and will allow the Government to get the system on an even setting ahead of fundamental long-term reform.

2. Radical reform of care funding

The Prime Minister has committed to bring forward a plan on care funding reform in 2020. Alzheimer's Society supports the [Care and Support Alliance's call](#) that "care should be free at the point of use" and "risk must be pooled on a compulsory whole (adult) population basis, funded through taxation".

With universal free care, people with dementia could be confident that they will receive the care they need, when they need it, without risk of extra costs. Many people already anticipate that dementia care is available for free. Additionally, universal free care would empower unpaid carers and reduce the impact on their own mental and physical health.

These reforms should be complemented by more targeted activity around prevention and early intervention of dementia which would reduce the need for crisis support, and ultimately contribute to cost savings in the long term.

Cross-party consensus is desirable but must not lead to further delays in addressing the social care crisis. Within its first 100 days the government must set out a clear process and timeline for reform and commit to involving people affected by dementia.

3. A social care system that recognises the unique injustice of dementia and delivers demonstrable improvements in people's lives

Alzheimer's Society research has found that dementia care is on average 15% more expensive than standard social care.^{iv} Reform of adult social care must recognise the complex care needs of dementia and the debilitating costs currently being borne by families.

To ensure that proposed reforms work effectively for people living with dementia, the additional costs of complex care needs to be addressed. Equally, access to care, and the care that is provided must meet the standards that we would expect for our own loved ones. Families living with dementia need to see that things have significantly improved in their lives.

There are nearly 200,000 people with moderate dementia with care needs in England. 93,100 receive unpaid care only and 43,000 receive no care.^v New eligibility thresholds and assessments should be set nationally and enable people with moderate needs to receive support. Proposed solutions must not tighten eligibility criteria or reduce access.

Background data

- If £8 billion is invested to restore access to 2009/10 levels, £2.65 billion may support people with dementia.
- Council spend data^[iii] shows a 51.4:48.6 split between older and working age adults.
- 337,400^[iv] of the 650,800 people with dementia in England 65+ receive social care support (community or residential).
- ASC-FR shows 668,335 over 65s received some level of long/short term support from councils, indicating up to 50.4% of people with dementia access support.
- Of the 37,500 younger adults with dementia, we estimate 28,900 access care, representing 15.1% of the 190,980 working age adults receiving support (ASC-FR).
- Assuming the same allocation, £8bn would result in £4.1bn for older adults and £3.8bn for working age adults. Applying the estimated proportion with dementia sums to £2.65 billion.

^[iii] NHS Improvement (2018) Reference Costs, available online: <https://improvement.nhs.uk/resources/reference-costs/#rc1718>

^[i] NHS Digital, *Recorded Dementia Diagnosis*, available: www.digital.nhs.uk/data-and-information/publications/statistical/recorded-dementia-diagnoses/2017-18

^[j] King's Fund (2019) Social Care 360, available at: www.kingsfund.org.uk/publications/social-care-360/access

^[ii] King's Fund (2019) Social Care 360, available at: www.kingsfund.org.uk/publications/social-care-360/expenditure

^[iii] Economic Affairs Committee (2019) *Social care funding in England inquiry*. Available: www.parliament.uk/social-care-funding-in-england

^[iv] Alzheimer's Society (2019) *Fix Dementia Care: The case for the Dementia Fund*, London: Alzheimer's Society. Available online at: <https://www.alzheimers.org.uk/sites/default/files/2019-05/Dementia%20Fund%20Report.pdf>

^[v] Wittenberg, R. et al (2019) "The costs of dementia in England", *International Journal of Geriatric Psychiatry*, vol. 34, Issue 7, available online at: <https://onlinelibrary.wiley.com/doi/full/10.1002/gps.5113>

^[iii] NHS Digital (2019) *Adults Social Care Activity and Finance*, available: www.digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-activity-and-finance-report/2018-19

^[iv] Wittenberg, R. et al (2019) *ibid.*