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Workstreams

80

Core projects

27

Responsive projects

40

Journal articles

110

Presentations

50

Discussion papers

What does ESHCRU do?

Economics is about how to use scarce resources – staff, equipment and buildings – to achieve particular objectives.

The Economics of Social and Health Care Research Unit, **ESHCRU**, uses Economics to inform policy making in the health and social care system.

Workstream 1 How services can be financed fairly and efficiently and in a way that supports the coordination of health and social care services:

- How the costs of providing long-term care will be met in future.
- The relationship between informal and formal care.
- Determinants of health care expenditure at the end of life.

Workstream 2 The best ways of organising the health care and social care systems:

- The impact on quality and costs of having care providers from both the public and private sectors.
- The potential for competition to improve overall performance.
- How different configurations of markets affect prices, outputs, quality and outcomes.

Workstream 3 How to measure whether the services provided are high quality, are allocated fairly, and make the best use of public funds:

- How providers respond to financial incentives.
- The relationship between social care workforce characteristics and quality of care.
- The relationship between quality of health care and use of social care.

Responsive Workstream – selected projects

- Adult social care expenditure projections to 2065.
- Costs of introducing national needs eligibility criteria.
- Dilnot Commission.
- Effect of the Care Bill on care markets.
- GP Practice mortality.
- Integrated personal commissioning.
- Efficiency frontier for locally priced services.
- National survey of local targeting arrangements.
- Social care costs for older people with long term conditions.
- Specialised Top Ups.

Hospital Coordination and Integration with Social Care in England: The effect on post-operative length of stay

Jose-Luis Fernandez, Alistair McGuire, Maria Raikou

Available online 17 February 2018

<https://doi.org/10.1016/j.jhealeco.2018.02.005>



Highlights

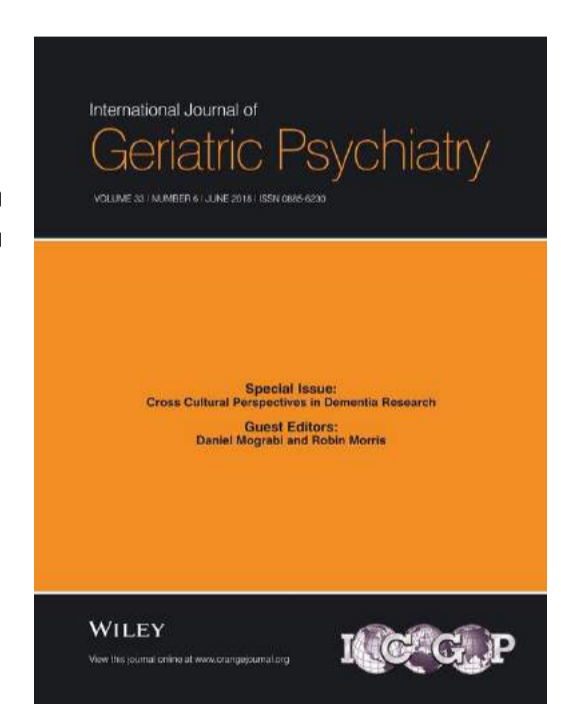
- This paper presents a queuing model applied to the hospital discharge process.
- Hip replacement discharge coordination across hospitals and social care providers is examined empirically.
- Post-operative hospital stay is higher the greater the number of social care organisations engaged with.
- Post-operative stay is higher the greater the volatility in the number of social care organisations engaged with.
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Investigating the Impact of Primary Care Payments on Underdiagnosis in Dementia: A difference-in-differences analysis

Anne Mason, Dan Liu, Panagiotis Kasteridis, Maria Goddard, Rowena Jacobs, Raphael Wittenberg, Gerard McGonigal

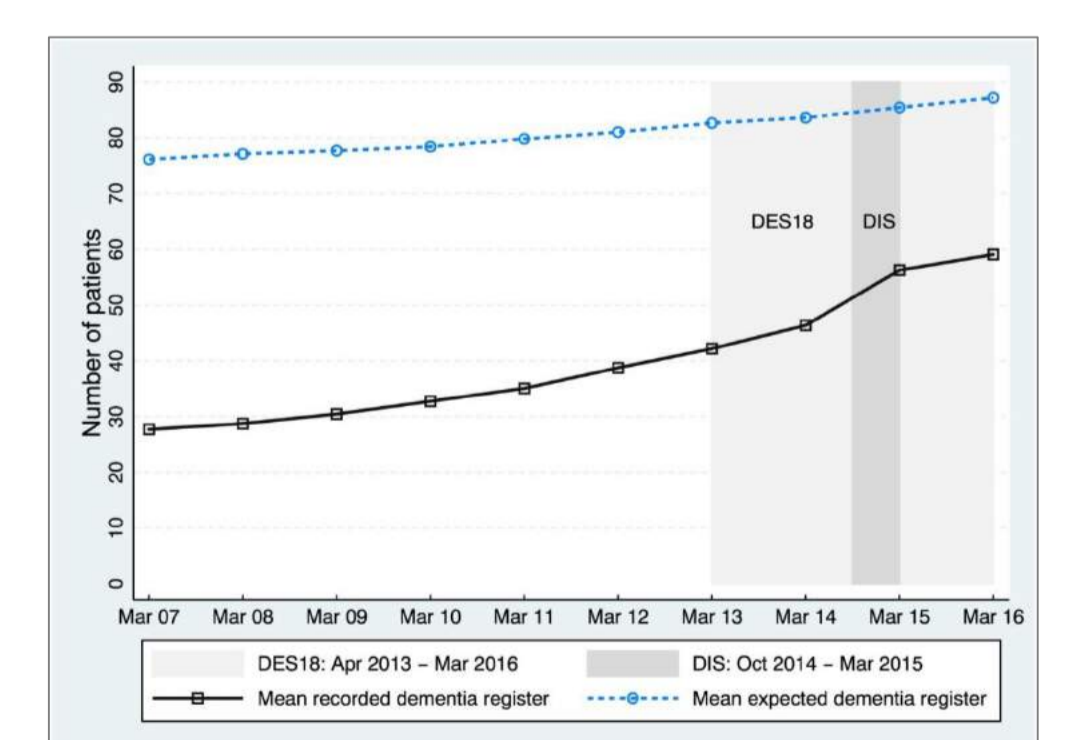
First published: 30 May 2018

<https://doi.org/10.1002/gps.4897>



Highlights

- A timely dementia diagnosis can allow patients and their carers to access appropriate care, prevent avoidable health crises, and plan ahead more effectively.
- The combined effect of two incentive schemes was to increase GP dementia registers nationally by around 40 000 cases.
- This figure would have been almost 50 000 had all practices taken part.



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<http://eshcru.ac.uk/>

