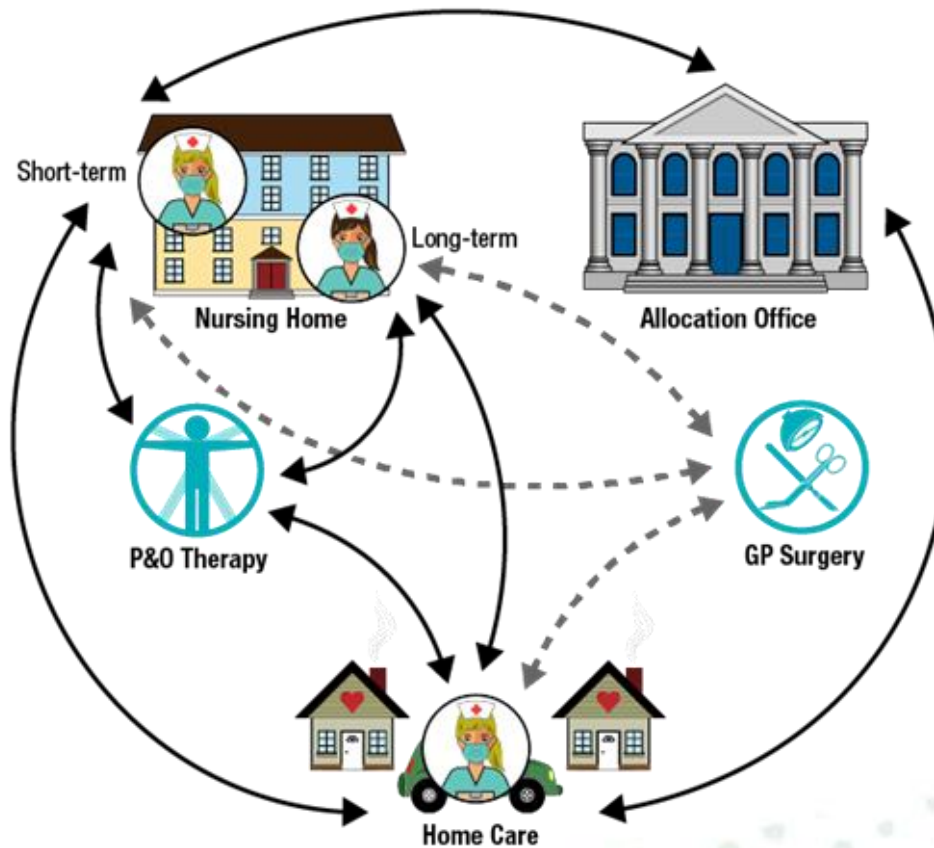


# Long-term care service use among elderly care recipients in Norway

Maren Sogstad & Marianne Sundlisæter Skinner



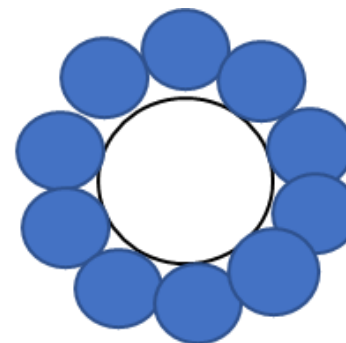
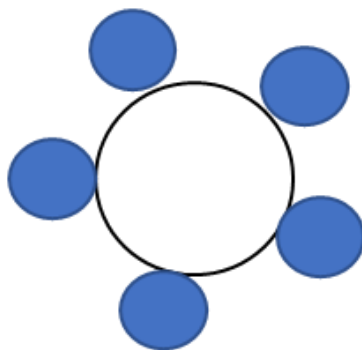
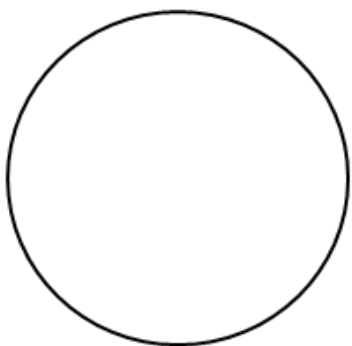
# The Healthcare System in The Municipality



# The care service ladder



# Bakgrunn



Generalist  
approach

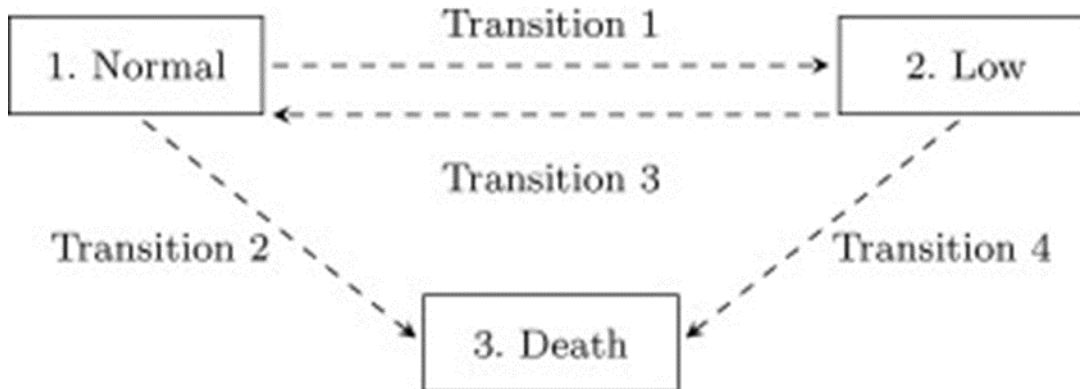
Specialized  
approach

# Objectives

To explore elderly persons' (80 +) use of long-term care services and how they move between different types of services. Further to explore differences between municipalities and gender in the use of services.

# Methods

Register data on all care service recipients 80 + were retrieved from the Norwegian IPLOS registry and linked with data on municipality size from national statistics. A multistate model (mstate in R) was used to analyse the movement of patients between different services.



Dead
Nursing home
Short-term stay
Residential care, staffed
Residential care
Homecare
No service

# Use of long-term care services

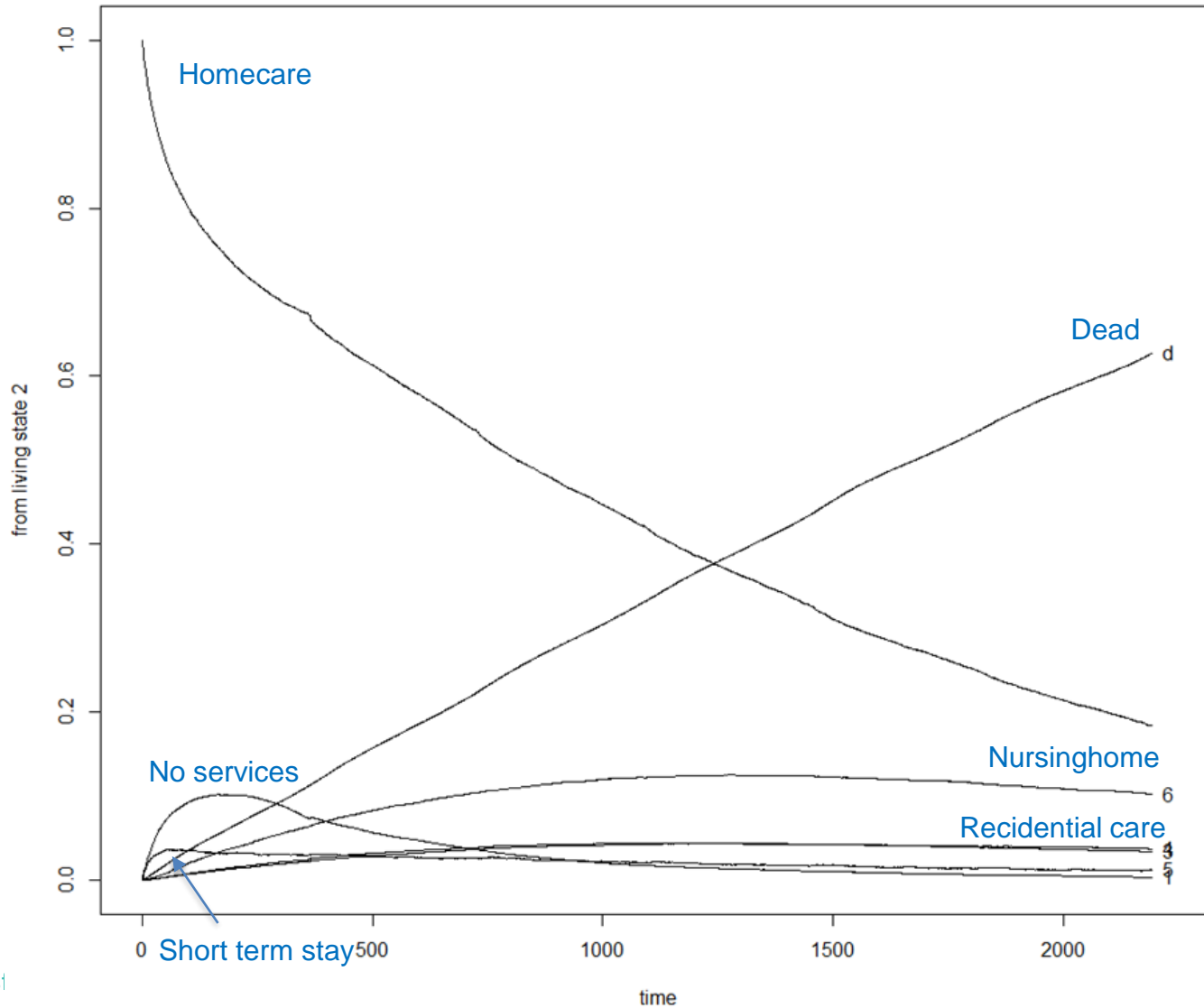
Age	Number	% of population
0 - 17	19000	2 %
18 - 49	84038	4 %
50 – 66	54015	5 %
67 – 79	79070	13 %
80 – 89	93658	35 %
90 +	49698	75 %

Type of trajectories	Number of transfers	%
Alternate		1
Short and intensive	$\geq 6$	0,1
Short	$\leq 5$	9
Long highly intensive	12 and more	3
Long intensive	6 - 11	14
Long	3 - 5	26
Long and calm	0 - 2	46

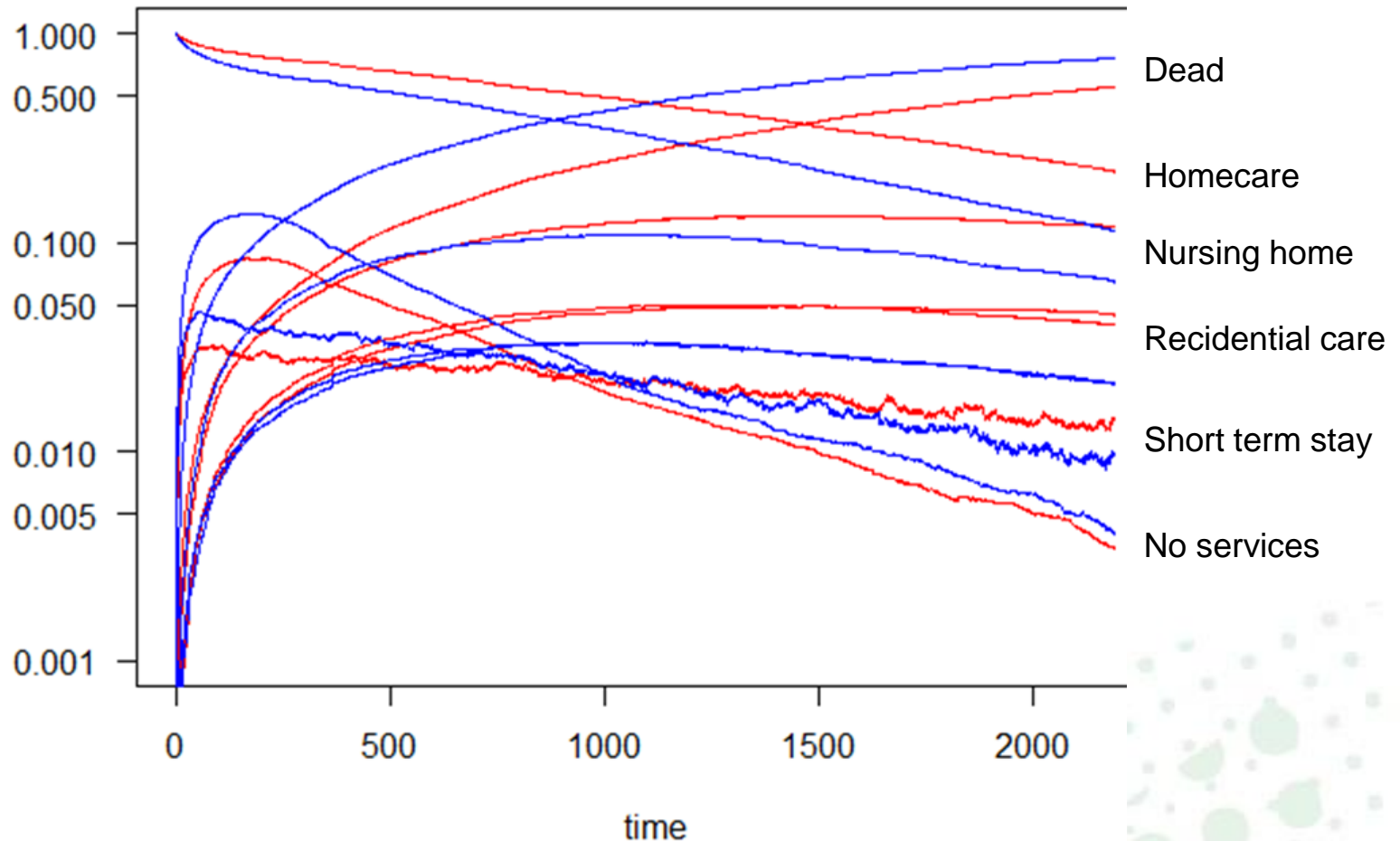


# Probability of care services

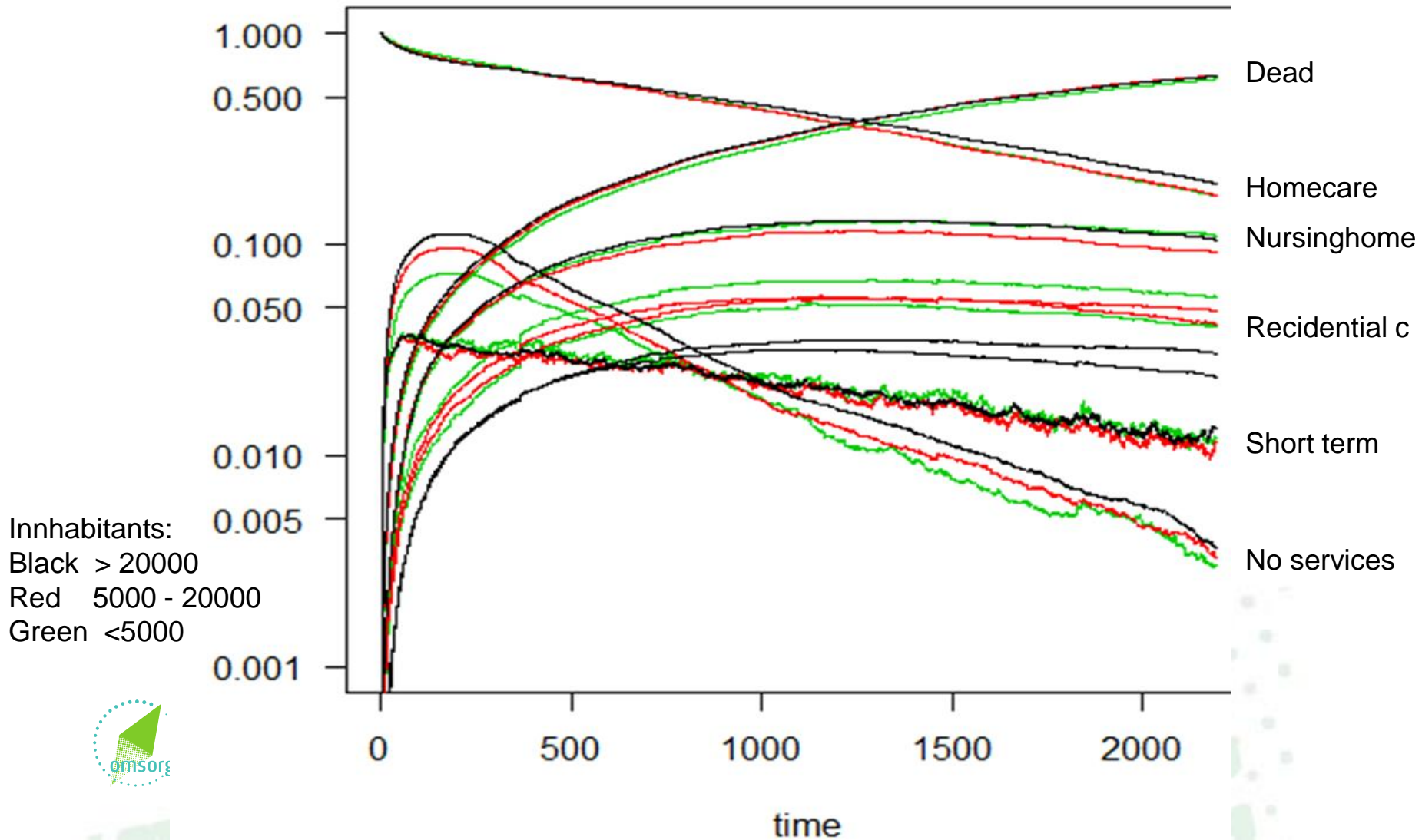
## - starting point homecare



# Difference between genders - startingpoint homecare, log scale



# Difference between municipalities of different size



# Conclusion

- Most elderly people receiving care services remain with homecare services until the end of life
- Short-term stays appear most frequent at the start of the care trajectory
- There are some small and expected gender differences in use of services, women having a higher probability to remain in homecare for longer and live longer in nursing homes.
- Municipality size has limited influence on patient trajectories in long-term care.