Outcomes and costs of community living: semi-independent living and fully staffed group homes

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Record Status
This is a critical abstract of an economic evaluation that meets the criteria for inclusion on NHS EED. Each abstract contains a brief summary of the methods, the results and conclusions followed by a detailed critical assessment on the reliability of the study and the conclusions drawn.

CRD summary
The objective was to compare the costs and quality of life outcomes of semi-independent living with fully staffed group homes for adults with intellectual disabilities. The authors concluded that semi-independent living could offer cost-effective lifestyle advantages if sufficient attention was given to health, living and financial well-being. Although there were a few limitations to the study, on the whole, the methodology seems appropriate and was clearly and transparently reported. The conclusions reached by the authors appear to be appropriate.

Type of economic evaluation
Cost-effectiveness analysis

Study objective
The objective was to compare the costs and quality of life outcomes of semi-independent living versus fully staffed group homes for adults with intellectual disabilities.

Interventions
Fully staffed group homes were defined as those in which there was staff presence during waking hours at all times when the service users were present. Semi-independent living settings were defined as partially staffed or having no paid staff support for at least 28 hours per week when the service users were awake and at home. These living settings had no regular night time support or sleepover presence.

Location/setting
England and Wales/community care.

Methods
Analytical approach:
The effectiveness data were derived from a single observational study. The authors did not report the study perspective.

Effectiveness data:
The effectiveness data came from a matched-pairs, cross-sectional, study which compared 35 participants in fully staffed group homes with 35 in semi-independent living. The analysis was adjusted for differences in adaptive and challenging behaviour between the two groups. The outcomes were assessed by a survey of participants and staff members. The primary outcomes were money management, health indicators and social activity or integration.

Monetary benefit and utility valuations:
None.

Measure of benefit:
The primary measures were money management, health indicators and social activity or integration.

Cost data:
The costs of accommodation (including direct staffing) and non-accommodation costs (daytime services and hospital and community-based services) were included in the analysis. The resource use data for non-accommodation service use were assessed using the Client Service Receipt Inventory. The accounts of the agencies providing housing related
care for each participant were used to provide accommodation resource use and cost data. The costs of non-
accommodation inputs (day services and professional input) were calculated from the service usage data by applying
unit costs for the financial year 2003 to 2004 from a publicly available national compendium (Curtis et al 2004, see
'Other Publications of Related Interest' below for bibliographic details). The price year was 2003 to 2004 and the costs
were reported in US dollars ($) using a purchasing power parity exchange rate of £1 equals $1.4306.

Analysis of uncertainty:
The authors did not conduct an analysis of uncertainty.

Results
Participants in semi-independent living received poorer health care in terms of lifestyle and threats to health compared
with participants in fully staffed group homes.

There were no differences in the proportion of participants who were underweight, overweight or obese, the extent to
which participants took moderate or vigorous physical exercise or would be defined as inactive, and their access to a
general health, blood pressure, or dental check in the preceding year, or a hearing test in the previous two years.

Participants in semi-independent living undertook more community activities independently and exercised greater
choice.

The total costs for semi-independent living were less than those for fully staffed homes. The average weekly cost for a
participant in a fully staffed home was $1,534 compared with $542.1 for semi-independent living.

Authors' conclusions
The authors concluded that semi-independent living could offer certain cost-effective lifestyle advantages provided that
sufficient attention was given to health, living and financial well-being.

CRD commentary
Interventions:
Both interventions were well described and represent legitimate alternatives in the authors' setting.

Effectiveness/benefits:
The effectiveness evidence was obtained from a matched pairs comparison study. Participants were matched on
adaptive behaviour, challenging behaviours and mental health status. While differences between the groups in
behaviour were identified and controlled for in the analysis, a randomised controlled study design would have been a
superior approach because it could control for both identified and unidentified differences between the groups.

Costs:
The authors did not report a study perspective, so it is not clear if the appropriate cost categories were included. The
source of the costs and other details of the analysis (price year and exchange rate) were reported. However, neither the
unit costs nor resource quantities were reported, which makes it difficult to generalise the results to other settings.

Analysis and results:
No synthesis of the effectiveness and cost data was carried out; in effect, a cost-consequence analysis was performed.
Nevertheless, the study results were clearly reported. The very large amount and variety of the outcomes makes it
difficult to draw a conclusion from the results. The impact of uncertainty on the study parameters was not investigated
which makes it difficult to assess the robustness of the results. The authors acknowledged some limitations to their
analysis.

Concluding remarks:
Although there were a few limitations to the study, on the whole, the methodology of the study seems appropriate and
was clearly and transparently reported. The conclusions reached by the authors appear to be appropriate.
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Other publications of related interest

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