

What is the effectiveness and cost effectiveness of at-home time-limited reablement service for improving an individual's independence and health outcomes and reducing the need for long term care? A rapid review.

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Background

Frailty is becoming more prevalent with our aging population and puts individuals at risk of adverse health outcomes.

Reablement services could have the potential to **reduce the impact of frailty** on an individual and **prevent further deterioration** of their health to maintain independence.

Previous research studied post-hospitalisation reablement, instead of its potential as a **preventive proactive intervention** reducing the risk of hospitalisation.

Study Aim

To understand the effectiveness and cost-effectiveness of at-home reablement programmes for **improving an individual's independence and health outcomes by reducing the need for long-term care.**



What are reablement services?

Assessments and interventions provided to people in their home (or care home) aiming to help them **recover skills and confidence to maximise independence.**

Evidence Base

This review included studies up to Dec 2024.
18 relevant studies were identified, including:

15 primary studies of clinical effectiveness

3 economic evaluations

Participants were individuals with an **identified need** for care and support or **at risk of functional decline due to frailty.**

Key Findings

This review identified a significant amount of evidence on the effectiveness of reablement interventions on person and service related outcomes.

Strong international evidence indicates reablement interventions are **effective at improving** outcomes associated with:



- Mobility
- Activities of Daily Living (ADLs)
- Quality of Life (QoL)



What are Activities of Daily Living?

The basic **self-care** tasks an individual does on a day-to-day basis.

Moderate international evidence suggests reablement is **effective in reducing** the need for **long-term home care services**.

Weak international evidence indicates reablement interventions may be **effective** at:



- Preventing falls
- Reducing risk of mortality
- Reducing hospital admissions
- Reducing community care service use
- Reducing social care service use
- Reducing emergency department visits



3 economic evaluations
(with limited certainty of findings)
found that reablement services were
cost-effective compared to standard at-home care.

Evidence Gaps

There is a **need for further research** into the effectiveness and cost-effectiveness of reablement services, particularly from a UK perspective.

Policy and Practice Implications



These findings support investment in proactive, time-limited reablement services due to **better outcomes** and as a **cost saving alternative** to long-term care.

Economic Considerations

Frailty has a sizeable impact on healthcare resource use in the UK.

Total additional costs of **frailty-related healthcare resource use** are **£8 billion per year** when adjusted to 2025 prices.

The full rapid review is available to view here:

<https://www.medrxiv.org/content/10.1101/2025.06.13.25329562v1>

