



**National end of life care
INTELLIGENCE NETWORK**



*National End of Life
Care Programme*

Improving end of life care



Social Care Indicators

Summary of identified issues in the data available
for National End of Life Care Profiles for Local
Authorities

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List of initial Social Care Indicators:

Social care (SC)

- 41. Persons (aged 65+) discharged from hospital per 100,000 aged 65+.
- 42. Average user experience score (max. score 24), persons aged 65+
- 43. Persons (65+) receiving Self Directed Support (per 100,000 aged 65+)
- 44. Delayed transfers of care: persons (all ages, per 100,000 aged 65+)
- 45. Delayed transfers of care: days (all ages) (per 100,000 aged 65+)
- 46. Persons (65+) with completed assessment (per 100,000 aged 65+)
- 47. Persons (65+) with care package delivered (per 100,000 aged 65+)
- 48. Carers (65+) who received social care support (per 100,000 aged 65+)
- 49. Persons (65+) who received social care support (per 100,000 aged 65+)
- 50. Persons (65+) entitled to Carer's Allowance (per 100,000, aged 65+)

SC Expenditure

(Average annual £'000s per 100,000 aged 65+)

- 51. Gross residential and nursing care (£'000s per 100,000 aged 65+)
- 52. As indicator 51, less NHS section 256 (£'000s per 100,000 aged 65+)
- 53. Home care (£'000s per 100,000 aged 65+)
- 54. Direct payments (£'000s per 100,000 aged 65+)
- 55. Day care or day services (£'000s per 100,000 aged 65+)
- 56. Meals (£'000s per 100,000 aged 65+)

General comments

There are currently no specific indicators for provision of social care to people at end of life. These are therefore preliminary and developmental indicators. We expect them to change in the future. There have been significant changes in the data streams available.

Caution should be applied when comparing data historically (or if attempting to construct indicators for earlier years) as there have been a number of changes to the data sources as detailed for each indicator. In some cases, it will not be possible or is not recommended at all.

National End of Life Care (NEOLC) indicators are often derived from part of a national indicator (NI) for people aged 65 and over. Sometimes the numerator of the source NI is used, sometimes the denominator. Care needs to be taken, therefore, not to confuse the NEOLC and NI definitions.

The NEOLC indicators are usually calculated as a rate per 100,000 population aged 65 and over. (This differs from the denominator of NIs)

This document provides some more detail about identified issues arising from use of present social care data to create the National End of Life Care indicators at the time of their initial construction for Local Authority National End of Life Care Profiles in 2012. It is organised in the following sections:

- Notes on inclusion of social care indicators
- General Social Care Indicators 41- 50
- Social Care Expenditure Indicators 51- 56

Please note the indicator metadata guide introductory section, which is as follows:

Notes on inclusion of social care indicators

These Profiles include social care indicators for the first time. These notes highlight their main limitations and strengths and provide context for understanding the data.

While there are clear limitations with the social care data, we hope that including them will provide helpful context for those working in end of life care, particularly in terms of giving an overview of the social care landscape. We hope, also, that they spark debate and highlight the urgent need for end of life care-specific indicators in social care data collections.

Defining an end of life cohort in social care data

No specific markers are currently available in the national social care datasets for people approaching the end of life. We have therefore decided to present social care indicators for people aged 65 and over, to make them as relevant as possible to end of life care. We have done this as:

1. Most people die over the age of 65
2. The data is available for this age group.

Of course, there are younger people who receive social care or end of life care but, due to the limitations of the data they are not measured by this set of indicators.

Limitations of social care expenditure data

Owing to the limitations of the data (HSCIC), it has not been possible to construct simple indicators showing net spend on social care for people aged 65+ attributable solely to Local Authorities. The HSCIC gross expenditure data includes:

- money from individuals paying for part or all of their own care who have been assessed by the LA
- NHS Section 256 contributions, and
- money from other providers, including third sector organisations.

Where local authorities are coterminous with PCTs, they may wish to look at the PCT End of Life Care Profile indicators for PCT-reported expenditure on End of Life Care. See:

http://www.endoflifecare-intelligence.org.uk/end_of_life_care_profiles/primary_care_trust_profiles.aspx

Changes to relevant social care data collections

Social care provision and the collection of social care data is currently under review. Latest developments include:

- 2010/11 was the last year of the National Indicator Set (NIS)
- the Social Care and Mental Health indicators have been replaced by the Adult Social Care Outcomes Framework (ASCOF) from 2011/12 onwards
- Release of the 2011/12 ASCOF return is imminent, but not yet available publicly
- Former National Indicators NI 125, NI 127, NI 130, NI 145, NI 146, NI 149 and NI 150 will appear in the new framework, although there will be some small changes to the definitions. For more information, see: <http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/social-care-and-mental-health-indicators-from-the-national-indicator-set--2010-11-final-release>
- Although some of the NIS indicators are being discontinued, they have been included in these Profiles as they are the best available at the current time. It is also worth noting that, during production of the Profiles, a zero-based review of social care returns was carried out jointly by the Department of Health (DH) and the Association of Directors of Adult Social care (ADASS). As a result, there have been further proposals to change or discontinue some returns, which may affect some of the indicators presented here. The consultation on these proposals is due to close in August 2012 and the new social care collections to take effect from 2013/14.

Therefore, in the future, the social care indicators in these profiles will change. However, the information they currently offer is an opportunity to:

- gather the best available information reflecting the social care needs and issues affecting people near the end of life, and their carers
- facilitate future improvements in end of life care for those most in need
- provide a discussion framework from which to build future understanding
- stimulate development of improved information gathering and sharing where appropriate
- provide some continuity between old and new national data sets to assist decision makers and care leaders.
- Acknowledgements
- We are grateful to colleagues in social care and the Health and Social Care Information Centre (HSCIC) for their advice on how best to present the social care indicators.

General Social Care Indicators 41 - 50

41. Persons (aged 65+) discharged from hospital per 100,000 aged 65+

Defining NEOLC Indicator 41

- NEOLC Indicator 41 is about promoting independence and choice for people aged 65 and over. It provides an indication of the rate of persons aged 65 and over requiring social care rehabilitation from hospital in the local authority population
- NEOLC Indicator 41 is defined as the crude rate of people aged 65 and over, discharged from hospital to their normal place of residence, between October and December 2010/11, with the intention of rehabilitation (i.e. it includes all those intended for rehabilitation, not just those still at their usual place if residence after 91 days) per 100,000 population aged 65 and over.
- NEOLC Indicator 41 uses the denominator from NI125 (which is the number of people aged 65 + discharged from hospital with the intention of rehabilitation through social care).
- NEOLC Indicator 41 is not the same type of rate as NI 125. NI125 measures the proportion of people aged 65+ who were intended to have social care rehabilitation following discharge from hospital and who were still at their normal place of residence 91 days following discharge (with some exceptions) as a rate of those originally intended for rehabilitation, whereas NEOLC Indicator 41 measures the rate of people over 65 who required rehabilitation in the over 65 population as a whole.
- NEOLC Indicator 41 is calculated by using the denominator from NI125 as a numerator, dividing it by the number of people aged 65+ in the population, and converting this to a rate per 100,000 population aged 65+ for each geographical area, i.e.

*No. people aged 65+ discharged from hospital
With the intention of rehabilitation through social care* X 100,000
*No. of persons aged 65 years and over
ONS mid-year estimated population 2010)*

- A higher value of NEOLC Indicator 41 could imply a greater demand for rehabilitative social care for persons over 65 years in recovery.
- About the NEOLC Indicator 41 source data
- The National Indicator (NI) from which NEOLC indicator 41 is derived is NI 125- Achieving independence for older people through re-enablement, rehabilitation and intermediate care
- NI 125 is defined as the proportion of older people aged 65 and over discharged from hospital to their own home or to a residential or nursing care home or extra care housing bed for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting) who are at home or in extra care housing or an adult placement scheme setting three months after the date of their discharge from hospital. Those who are in hospital or in a registered care home (other than for a brief episode of respite care from which they are expected to return home) at the three month date and those who have died within the three months are not

reported in the numerator. 3 months is defined as 91 days. In 2008-09 the collection of the denominator was over a three month period with a three month follow-up for the numerator. In 2009-10, the collection of the denominator was over a six month period, with the collection of the numerator beginning three months in. To reduce the burden of collection, in 2010-11 the collection of the denominator reverted to being over a three month period as in 2008-09. (Numerator Source: ASC-CAR Table I1 row 1, column 9 (Overall total), Denominator Source: ASC-CAR Table I1 row 2, column 9 (Overall total))

- Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release reported that NI 125 was 36,610 of which 30,000 (82.0%) were still at home after 91 days, compared to 81.2 per cent in 2009-10. This percentage is lower for older clients; 78.6 per cent for those aged 85 and over compared to 87.2 per cent for those aged 65-74.

(Source: *Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.*

http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

Identified issues for NEOLC indicator 41

- Unfortunately source data from NI 125 was only collected for patients admitted to hospital between October and December of the collection year, in this case (Q3 (2010/11)). This differs for some of the previous years of NI 125 collection (see Identified issues for NEOLC Indicator 41 trend analysis below). Since hospital activity varies seasonally and according to other factors relevant to end of life care such as diagnosis, age group and whether/ what sort of elective intervention was required, a simple quadrupling of the result is not a good estimate of annual activity. A rough analysis of some recent hospital data showed that this sort of activity was likely to be highest in Q3 each year. Quadrupling a Q3 figure might result in over estimation of the annual activity. Therefore we have used the NI125 denominator as supplied, without adjustment as a Q3 rate only.
- We believe that while those who died following such hospital discharges are not included in the numerator of NI 125, they are counted in the denominator. Providing this is the case then indicator 41 can be used to represent a measure of the need for rehabilitation. However not enough is known about the data quality in this regard.
- NEOLC Indicator only provides a rate regarding known need for rehabilitation and does not measure the effectiveness of any rehabilitation provided. A further sub indicator would be required to measure the effectiveness of rehabilitation using the numerator for NI 125 and the ONS midyear estimated (MYE) 65+ population for comparison with indicator 41.
- Although a correlation might be expected, none has yet been found for the NEOLC indicator 41 Q3 rate and Indicators 44 and 45 (which are annual rates). NEOLC Indicator 41 only refers to social care rehabilitations. Indicators 44 and 45 refer to delays in transfers of care owing NHS, Social Care or both. Further sub-indicators for delayed transfers of care would be necessary to highlight delays owing to each of these subcategories (delays owing to NHS, Social Care or Both).
- NI 125 source data is rounded.
- No NI125 data was available for Rutland UA

Identified issues for NEOLC Indicator 41 trend analysis

- There is inconsistency in the way that the denominator for NI 125 has been collected over time.
 - For 2008-09 the collection of the NI 125 denominator was a three month period (1st October 2008 to 31st December 2008) with a three month follow-up for the numerator.
 - In 2009-10, the collection of the denominator was over a six month period (1 July 2009 to 31 December 2009) with follow up for the numerator from October 2009 to March 2010;
 - In 2010-11 this changed back to the 2008-09 definition.

(Source: *Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.*

http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

42. Average user experience score (max. score 24), persons aged 65+

Defining NEOLC Indicator 42

- NEOLC Indicator 21 is about capturing user experience. It provides an indication of the reported satisfaction level of social care users aged 65 and over.
- NEOLC Indicator 42 is defined as the average score for social care user experience survey respondents aged 65 and over, as represented by an average score (out of a maximum of 24).
- NEOLC Indicator 42 is derived from National Indicator NI127. It uses the numerator and denominator from NI 127, but only for people aged 65 and over.
- NEOLC Indicator 42 is not the same as NI 127. NI 127 is an average user score for adult users of social care of all ages, whereas NEOLC Indicator 41 is an average user score for social care users aged 65 and over.
- NEOLC is calculated as

*Sum of the scores for each respondent aged 65+ based on their answers to questions 3 to 9 and 11.
Number of respondents aged 65+ that have answered questions 3, 9 and 11.*

- A higher value of NEOLC indicator 42 suggests greater satisfaction with social care received by people over 65 years.
- About the NEOLC Indicator 42 source data
- The National Indicator (NI) from which NEOLC Indicator 42 data is derived is NI 127.
- Only where respondents aged 65 and over replied to questions 3, 9 and 11 of the Adult Social Care Survey were their scores for these questions included in the average user score total. Responses were not included where respondents completed replies to only one or two of those questions:

Qn	Question	Domain
3	Which of the following statements best describes how much control you have over your daily life?	Control
9	Which of the following statements best describes how you spend your time?	Occupation
11	Thinking about the way you are helped and treated, and how that makes you think and feel about yourself, which of these statements best describes your situation?	Dignity

(Source: Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.

http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

Identified issues for NEOLC indicator 42

- The average user experience score is based on a survey and therefore can only provide an estimate assuming that those who replied to the survey represent the same type of population and likely response as the wider population.
- Sampling variation needs to be taken into account when analysing these indicator values as they are only based on a random sample of service users receiving services..
- Unlike other social care indicators where we have reported as a rate per 100,000 population aged 65+, NEOLC Indicator 42 is provided as an average score for persons aged 65+ who responded to all three relevant survey questions, including published 95% confidence intervals, as published by HSCIC.
- What does an average score of between 18 and 19 out of 24 maximum mean in terms of quality of life for people receiving social care and known to be near the end of life? (The scoring methodology is described more fully in a copy of the HSCIC notes at the end of this document.)
- We have noted that there is little variation in the results for NEOLC indicator 42 across the country. What might this tell us about the way the original survey is conducted?
- People reaching end of life may not have wished to take part in the adult social care survey. Or they may not have been deemed by the local authorities who were collecting the information to have had the capacity to take part. This means that the survey results may not be representative of the opinions of those known to be nearing end of life. HSCIC also point out regarding survey coverage that
 - o “The population sample was defined as those people receiving services on 30 September 2010 who had the capacity to consent to take part in the survey. Care was taken to remove people who had died or moved away.
 - o The Isle of Scilly and City of London were exempt from the survey as the number of service users within their area who met the eligibility criteria was too small to produce statistically significant responses. Richmond-upon-Thames decided to not take part in the survey.
 - o 61,115 out of a sample of 150,860 recipients of care and social care services responded to the survey which is a response rate of 41 per cent.”

The final comment relates to responses from adults of all ages receiving social care, including the subset for data of respondents aged over 65, but we do not know how the response rate may have varied for this age group.)

(Source: Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.
http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

Identified issues for NEOLC Indicator 42 trend analysis

- NI127 - This survey was conducted for the first time in 2010-112 and the format of the indicator calculation is different to 2009-10. Therefore the indicator value for 2010-11 is not comparable with 2009-10.
- 2010-11 is the last year of the NIS indicators and the Social Care and Mental Health indicators are being replaced by the Adult Social Care Outcomes

Framework for 2011-12 onwards. NI127 will appear in the new framework although there will be some small changes to the definitions.

- Elsewhere HSCIC point out other changes to the NI 127 data for 2010-11 which mean that it would be unwise to try to construct a similar indicator for data from earlier years:

“The data source for NI 127 is the Personal Social Services Adult Social Care Survey, which was run for the first time in 2010-11. NI 127 this year is a composite indicator calculated using a combination of questions in the Adult Social Care Survey which cover 8 different outcome domains relating to quality of life. It will not be comparable with data for 2009-10.”

(Source: *Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.*

http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

43. Persons (65+) receiving Self Directed Support (per 100,000 aged 65+)

Defining NEOLC Indicator 43

- NEOLC Indicator 43 is about promoting independence and choice for people aged 65 and over. Self Directed Support (direct payments and individual budgets) are intended to offer social care clients and carers greater flexibility and independence in how support is provided and to ensure that their care and support package is directly responsive to their individual needs and wishes.
- NEOLC Indicator 43 is defined as the crude rate of persons aged 65 and over who were reported as social care clients and/ or carers getting a direct payment and/or personal budget, per 100,000 population aged 65 and over.
- NEOLC Indicator 43 data is derived from National Indicator (NI 130). The numerator for NI130 measures the number of adults and carers receiving self directed support and/or direct payments. NEOLC Indicator uses a subset of the NI 130 numerator for adults and carers aged 65 and over only.
- NEOLC Indicator 43 is not the same as NI130. NI130 measures the rate of adults and carers of all ages who received self-directed support and/or direct payments as a proportion of all adults receiving community based services and carers receiving respite and / or other carer specific services, whereas NEOLC Indicator 43 measures the rate of persons aged 65+ who received self-directed social care support and/or direct payments as a rate of people aged 65 and over in the population.
- NEOLC Indicator 43 is calculated as

$$\frac{\text{No. of adults (aged 65+) and carers (aged 65+) receiving self directed support and/or direct payments} \times 100.000}{\text{No. of persons aged 65 years and over (ONS mid-year estimated population 2010)}}$$

- We believe that the carers in this calculation could have been caring for a person of any age.
- Higher rates of NEOLC Indicator 43 may indicate greater need for services or a more developed use of self-directed support or better access to services.
- About the NEOLC Indicator 43 source data
- The National Indicator from which NELOC Indicator 43 is derived is NI 130: Social care clients receiving self directed support
- NI 130 is defined as the number of adults (aged 18 or over), older people and carers (aged 16 or over but caring for an adult aged 18 or over) receiving self-directed support in the year to 31st March as a percentage of clients (aged 18 or over) receiving community based services and carers receiving carer's specific services aged 18 or over. To be counted, the person (adult, older person or carer) must: be getting a direct payment; or have in place another form of personal budget.

NI 130 Numerator Source:

RAP: Table SD1, Page 1, line 10 (Total 18 and over), column 5 (total) & RAP Table SD3, Page 1, line 6, column 5

NI 130 Denominator Source:

RAP: Table P2f, page 1, line 11, column 1 & RAP: Table P2f, page 3, line 11, column 1 & RAP: Table C2, page 1, line 5, column 1

- Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release reported that NI 130 - 29.2 per cent of all adults and carers receiving CASSR funded services received them via self directed support, compared to 13.0 per cent in 2009-10. 37.2 per cent of carers who received services were given self directed support compared to 26.6 per cent of adults aged 18-64 and 28.9 per cent of those aged 65 and over.

(Source: *Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.*

http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

Identified issues for NEOLC indicator 43

Source calculation method for NI130 has changed slightly over time, (see 'Identified issues for NEOLC Indicator 43 trend analysis' below please).

- Source data was rounded
- No data was available in NI130 for Cornwall, Lincolnshire or Walsall

Identified issues for NEOLC Indicator 43 trend analysis

- Source calculation method for NI130 has changed slightly over time:
 - "In 2009-10 the definition of NI130 expanded to include those clients and carers receiving directed payments and/or a personal budget. Therefore, the indicator value for 2008-09 is not directly comparable with later years."
 - "In 2010-11 the definition for Direct Payments in the P2s and P2f tables reverted back to the 2008-09 definition as data on the Self Directed Support process was already collected on the SD forms which were introduced in 2009-10 to collect information on the number clients and carers receiving Self Directed Support. However, these changes to the P forms do not impact on the calculation of the National Indicators as the data source for NI 130 was changed to be SD1 and SD3."

(Source: *Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.*

http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

44. Delayed transfers of care: persons (all ages) (per 100,000 aged 65+)

Defining NEOLC Indicator 44

- NEOLC Indicator 44 is about improving patient experience and using NHS resources more efficiently. It is closely related to NEOLC Indicator 45 and less closely to NEOLC Indicator 41.
- NEOLC Indicator 44 focuses on reducing unnecessary delays in transfers of care so that
 - o people who have completed their hospital treatment and are ready can return to their normal place of residence (or other appropriate setting) as soon as possible, and
 - o NHS hospital beds and resources become available more efficiently to treat others, thus enabling more people to receive their treatment in a timely manner which promotes better recovery rates.
- NEOLC Indicator 44 is defined as the average of the number of persons whose transfers of care were delayed on the day of each monthly census in 2011/12, per 100,000 persons aged over 65 years. (The numerator comprises persons of all ages, all settings, all reasons for delay; NHS and or Social Care, or both, but only on the day of monthly census.)
- NEOLC Indicator 44 data is derived from Department of Health Monthly Situation Report on Acute and Non-Acute Delayed Transfers of Care (SITREP) returns.
- NEOLC Indicator 44 is calculated as

$$\frac{\text{Average no. of persons whose transfers were recorded as delayed at each monthly census (2011/12)}}{\text{No. of persons aged 65 years and over (ONS mid-year estimated population 2010)}} \times 100,000$$

- Higher rates of NEOLC Indicator 44 may indicate greater need or possibly poorer access to other NHS or social care services in an area. Although there is no marker in the data set for patient age, nor any marker for patients known to be receiving end of life care, most hospital admissions and discharge delays are experienced by people aged over 65 years.

About the NEOLC Indicator 44 source data

- Department of Health Monthly Situation Report on Acute and Non-Acute Delayed Transfers of Care (SITREP) returns are published for local authorities with full guidance here:

<http://www.dh.gov.uk/en/Publicationsandstatistics/Statistics/Perfomancedataandstatistics/AcuteandNon-AcuteDelayedTransfersofCare/index.htm>
- Monthly SITREP reports for 2011/12 were combined for NEOLC Indicator 44 to calculate the average monthly number of persons reported as experiencing delayed transfers of care on the day of monthly census during the reporting year, for each local authority.

Identified issues for NEOLC indicator 44

- It is not possible to report the actual number of people aged 65 and over whose transfers of care were delayed. This is because the monthly SITREP source data available is collected for all persons in all settings (on the day of census). However, we know from other data sources (e.g. Hospital Episode Statistics) that most hospital admissions are for people aged 65 and over. Although the source data may include a very small number of younger people, it is likely that NEOLC Indicator 44 does actually indicate a rate which is very close to the rate for persons aged 65 and over nationally. We suspect this is also likely to be the case at local authority level, but expect that some local authorities may also wish to satisfy themselves that there are no reasons why an unusually high number of younger people may be experiencing delays of transfers of care in their area.
- It is not possible to report or calculate a rate based on the actual number of people whose transfers of care were delayed in a whole year because only those affected on the monthly day of census are reported for the monthly SITREP returns. We can however use the available data to calculate an average number of people (all ages) delayed on the day of monthly census for the whole reporting year. We have presented this as a rate per 100,000 population aged 65 and over.
- The average number of persons delayed at monthly census was calculated for all delay reasons, (whether the delay was due to NHS, Social Care or both).
- No data was available for Isles of Scilly

Identified issues for NEOLC Indicator 44 trend analysis

- NI 131 upon which this indicator might have been based if it had existed prior to 2011/12 has been discontinued nationally. , and in addition the SITREP data collection used to construct NEOLC Indicator 44 has changed a great deal since 2009/10.

45. Delayed transfers of care: days (all ages, per 100,000 aged 65+)

Defining NEOLC Indicator 45

- NEOLC Indicator 45 is about improving patient experience and using NHS resources more efficiently. It is closely related to NEOLC Indicator 44 and less closely related to NEOLC Indicator 41.
- NEOLC Indicator 45, like NEOLC Indicator 44, focuses on reducing unnecessary delays in transfers of care so that
 - o people who have completed their hospital treatment and are ready can return to their normal place of residence (or other appropriate setting) as soon as possible, and
 - o NHS hospital beds and resources become available more efficiently to treat others, thus enabling more people to receive their treatment in a timely manner which promotes better recovery rates.
- NEOLC Indicator 45 is defined as the average number days of delay in transfers of care in each month as a crude rate per 100,000 population aged 65 and over. (The numerator comprises days of delay for persons of all ages, in all settings, and all reasons for delay; NHS and or Social Care, or both, throughout the month and not just on the day of monthly census.)
- NEOLC Indicator 45 data is derived from Department of Health Monthly Situation Report on Acute and Non-Acute Delayed Transfers of Care (SITREP) returns.
- NEOLC Indicator 44 is calculated as

Average monthly no. of days of delay for all persons whose transfers delayed (2011/12) x 100,000

No. of persons aged 65 years and over (ONS mid-year estimated population 2010)

- Higher rates of NEOLC Indicator 45 may indicate greater need or possibly poorer access to other NHS or social care services in an area. Although there is no marker in the data set for patient age, nor any marker for patients known to be receiving end of life care, most hospital admissions and discharge delays are experienced by people aged over 65 years.

About the NEOLC Indicator 45 source data

- Department of Health Monthly Situation Report on Acute and Non-Acute Delayed Transfers of Care (SITREP) returns are published for local authorities with full guidance here:

<http://www.dh.gov.uk/en/Publicationsandstatistics/Statistics/Perfomancedataandstatistics/AcuteandNon-AcuteDelayedTransfersofCare/index.htm>

- Monthly SITREP reports for 2011/12 were combined for NEOLC Indicator 45 to calculate the average monthly number of days of delay for persons reported as experiencing delayed transfers of care. All reported days of delay are included, (not just those for persons counted on the day of monthly census) during the reporting year, for each local authority.

Identified issues for NEOLC indicator 45

- It is not possible to report the actual number of days of delay only for people aged 65 and over whose transfers of care were delayed. This is because the monthly SITREP source data available is collected for all persons in all settings. However, we know from other data sources (e.g. Hospital Episode Statistics) that that most hospital admissions are for people aged 65 and over. We have therefore made the assumption that most days of delay affect people aged 65 and over. We think we can assume that the number of days of delay reported for people younger than 65 is likely to be very small at national level, and therefore that it is likely that NEOLC Indicator 45 does actually indicate a rate of days of delay which is very close to the rate for persons aged 65 and over nationally. We suspect this is also likely to be the case at local authority level, but expect that some local authorities may also wish to satisfy themselves that there are no reasons why an unusually high number of younger people may be experiencing delays of transfers of care in their area, and that the number of days of delay experience by them, if any, is not disproportionate.
- As with NEOLC Indicator 44 we have used the available data to calculate an average monthly number of days of delay (all persons, all ages all settings) for the whole reporting year, but presented this as a rate per 100,000 population aged 65 and over.
- The average monthly number of days of delay was calculated for all delay reasons, (whether the delay was due to NHS, Social Care or both).
- No data was available for Isles of Scilly

Identified issues for NEOLC Indicator 45 trend analysis

- NI 131, upon which this indicator might have been based prior to 2011/12 has been discontinued nationally, and in addition the SITREP data collection used to construct NEOLC Indicator 44 has changed a great deal since 2009/10.
- NI 131 upon which this indicator might have been based if it had existed prior to 2011/12 has been discontinued nationally. , and in addition the SITREP data collection used to construct NEOLC Indicator 44 has changed a great deal since 2009/10.

46. Persons (65+) with completed assessment (per 100,000 aged 65+)

Defining NEOLC Indicator 46

- NEOLC Indicator 46 is related to NEOLC Indicator 47.
- NEOLC Indicator 46 is about providing a measure of demand for, and access to, social care new client assessment, for people aged 65 and over.
- NEOLC Indicator 46 is defined as the crude rate of new social care clients, aged 65 and over, who had a completed assessment of their social care needs, per 100,000 population aged 65 and over.
- NEOLC Indicator 46 data is derived from Referrals Assessments and Packages of Care (RAP) Table A7, in the style of the denominator of previous NI 132, but selecting only the subset of data for people aged 65 and over only and disregarding timescale for completion.
- NEOLC Indicator 46 is not the same as NI132. NI 132 calculates the proportion of adults (all ages) with completed social care assessments as new clients within 4 weeks, as a rate of the total number of people (all ages) who had a completed social care assessment (any timescale). Whereas NEOLC Indicator 46 looks at people aged 65 and over who have had a completed assessment as a new social care client, regardless of the timescale taken to complete the assessment, and presents this as a rate per population aged 65 and over.
- NEOLC Indicator 46 is calculated as

No of people aged 65+ who have had a completed assessment at a new social care client (any timescale) X 100,000
No. of persons aged 65 years and over
(ONS mid-year estimated population 2010)

- Higher rates of NEOLC Indicator 46 may indicate greater need and/or possibly better access to local authority social care services in an area. (It does not measure timeliness of assessment, i.e. those whose assessments were completed within 4 weeks or less.)

About the NEOLC Indicator 46 source data

- National Indicator (NI) 132 has been discontinued nationally. Some relevant Referrals Assessments and Packages of Care (RAP) data for 2010/11 is however still available through the National Adult Social Care Intelligence System (NASIS). This was used to calculate the number of people aged 65 and over who had a completed social care assessment of need.

Identified issues for NEOLC indicator 46

- We have estimated the NEOLC indicator 46 based on the best available 2010/11 data.
- No data was available for Cornwall, Lincolnshire or Walsall.
- It is not clear whether the removal of a mandate for NI132 has resulted in changes in data quality.

- Owing to rounding, suppressions and estimation of data within NASCIS OLAP data, indicators 46 and 47 have been constructed as estimates only.
- NEOLC Indicator 46 is not a measure of timeliness in completion of new social care assessments, but may indicate the level of demand for, or access to, social care services for those people who have not already been sign-posted elsewhere at referral.
- It is not possible to directly compare NEOLC Indicator 46 to NEOLC Indicator 47 selecting only data for persons who were new social care clients. Therefore it is not possible to gauge the range of variation in delivery of packages of care to new clients versus existing clients between local authorities from this data. This arises because national social care data is collected in silos rather than at individual record level.

Identified issues for NEOLC Indicator 46 trend analysis

- It is not clear whether the discontinuation of NI 132 has resulted in a reduction in data quality available through the NASCIS OLAP tool in the latest data.

47. Persons (65+) with care package delivered (per 100,000 aged 65+)

Defining NEOLC Indicator 47

- NEOLC Indicator 47 is related to NEOLC Indicator 46.
- NEOLC Indicator 47 is about providing a measure of supply of social care packages to people aged 65 and over.
- NEOLC Indicator 47 is defined as the crude rate of persons who were social care clients (new and existing), aged 65 and over, and who had at least one package of care, (any timescale).
- NEOLC Indicator 47 data is derived from Referrals Assessments and Packages of Care (RAP) Table A8, in the style of the denominator of previous NI 133 (now discontinued), but selecting only the subset of data for people aged 65 and over only and disregarding timescale for completion.
- NEOLC Indicator 47 is not the same as NI133. NI 133 calculates the proportion of adults (all ages) who had packages of care delivered within 4 weeks, as a rate of the total number of people (all ages) who had packages of care (any timescale), whereas NEOLC Indicator 47 looks at people aged 65 and over who had packages of care (new and existing clients), regardless of the timescale taken to deliver them, and presents this as a rate per population aged 65 and over.
- NEOLC Indicator 47 is calculated as

$$\frac{\text{No of people aged 65+ (new and existing clients) who have had a package of care (any timescale)} \times 100,000}{\text{No. of persons aged 65 years and over (ONS mid-year estimated population 2010)}}$$

- Higher rates may indicate greater need and/or possibly better access to local authority social care services in an area. It does not measure timeliness of delivery of packages of care.

About the NEOLC Indicator 47 source data

- National Indicator (NI) 133 has been discontinued nationally. Some relevant Referrals Assessments and Packages of Care (RAP) data for 2010/11 is however still available through the National Adult Social Care Intelligence System (NASCIS). This was used to calculate the number of people aged 65 and over who had package(s) of care delivered (regardless of timescale).

Identified issues for NEOLC indicator 47

- We have estimated the NEOLC indicator 47 based on the best available 2010/11 data
- NEOLC Indicator 47 is not a measure of timeliness in delivery of packages of care, but may indicate the level of need for, or access to, social care services for those people who have not already been sign-posted elsewhere at referral.

- No data was available for Cornwall, Lincolnshire or Walsall.
- It is not clear whether the removal of a mandate for NI133 has resulted in changes in source data quality.
- Owing to rounding, suppressions and estimation of data within NASCIS OLAP data, indicators 46 and 47 have been constructed as estimates only.
- It is not possible to directly compare NEOLC Indicator 46 to NEOLC Indicator 47 selecting only data for persons who were new social care clients. Therefore it is not possible to gauge the range of variation in delivery of packages of care to new clients versus existing clients between local authorities from this data. This arises because national social care data is collected in silos rather than at individual record level. Scarcity of resources for social care is likely to have an impact on the ability of new clients to access them, but it is not currently possible to assess empirically this simply using the national data available.

Identified issues for NEOLC Indicator 47 trend analysis

- It is not clear whether the discontinuation of NI 133 has resulted in a reduction in data quality available through the NASCIS OLAP tool in the latest data.

48. Carers (65+) who received social care support (per 100,000 aged 65+)

Defining NEOLC Indicator 48

- NEOLC Indicator 48 is about providing an alternative measure for the number of carers aged 65 and over. It could be compared to NEOLC Indicator 50 (Carers aged 65 and over entitled to Carers Allowance), and to NEOLC Indicator 49 (Persons aged 65 and over receiving social care services).
- Support for carers is a key part of support for vulnerable people, including those at the end of life. Support for carers enables them to continue with their lives, families, work and contribution to the community.
- NEOLC Indicator 48 is defined as the crude rate of carers aged 65 and over, whose needs were assessed or reviewed by the council in a year, and who received a specific carer's service or advice and information in the same year
- NEOLC Indicator 48 data is derived from a subset of the numerator of NI135 for carers aged 65 and over.
- NEOLC Indicator 48 is not the same as NI 135. NI 135 presents people who were adult carers of any age as a percentage of all adults who received community based social care services, whereas NEOLC Indicator 48 measures carers who were aged 65 and over as a rate per 100,000 population aged 65 and over.
- NEOLC Indicator 48 is calculated as

$$\frac{\text{No. of carers aged 65 and over receiving different types of services provided as an outcome of an assessment or review}}{\text{No. of persons aged 65 years and over (ONS mid-year estimated population 2010)}} \times 100,000$$

- Higher rates of NELOC Indicator 48 may indicate greater need or possibly greater access to local authority social care services in an area for carers aged 65 and over.

About the NEOLC Indicator 48 source data

- The National Indicator from which NEOLC Indicator 48 is derived is NI 135 (Carers receiving needs assessment or review and a specific carer's service, or advice and information).
- NI 135 is defined as the number of carers whose needs were assessed or reviewed by the council in a year, who received a specific carer's service or advice and information in the same year, as a percentage of people receiving a community based service in the year.

NI135 Numerator Source: RAP, Table C2, Page 1, line 5, column 1 + 2

NI135 Denominator Source: RAP, Table P2f, Pages 1 + 3, line 11, column 1

Identified issues for NEOLC indicator 48

- Only measures carers aged 65+ who were completely assessed as new social care clients, or who were completely reviewed as existing social care clients and received a social care service. Therefore newly assessed carers who did not receive a service are excluded, and existing carers who were already receiving social care services but who were not fully reviewed may also have been excluded. Existing carers already receiving services during the year but whose services were reduced or removed during the course of the year as a result of changes in circumstances or review are still likely to appear in the annual total however.
- Does not differentiate between carers who were caring for someone who was also aged 65 or over, and those caring for someone aged under 65.
- For NEOLC indicator 48, the carers counted were aged 65+ but the person being cared for could be of any age.
- NEOLC indicator 48 provides a measure for the number of carers aged 65 and over and received social care services. See also indicator 50 Carers aged 65 and over who were entitled to Carer's allowance. These two groups may overlap but are not identical. Neither measure the rate of Carers aged 65+ in receipt of Carers Allowance.
- Source data was rounded
- No data was available for Cornwall, Lincolnshire or Walsall

Identified issues for NEOLC Indicator 48 trend analysis

- NEOLC Indicator 48 uses the numerator of new NI 135. Previously NI 136 (now discontinued) was used to report the number of persons who received social care support. Guidance indicates that there were known double counting issues with NI136 numerator. NI135 numerator is calculated in a different way We have used a subset of the NI135 numerator to count those carers aged 65+.
- HSCIC also noted that the data definitions for NI 135 changed in 2008/9 as follows
- "NI135 - The guidance regarding Carers' Services was revised in 2008-09 and so caution should be taken when comparing this indicator over time. The definition of Information and advice has been tightened. A "package of information and advice" must be provided to the carer - the information and advice given must be person centred and specifically tailored to the individual needs of the carer. A "package of information and advice" could comprise a number of leaflets and telephone numbers provided in response to an individual carer's particular needs. Provision of telephone numbers or distribution of one or more leaflets indiscriminately cannot be counted as Information and Advice as the RAP return is aiming to build up a picture of what is provided to clients and carers in response to an assessment of their individual needs."

(Source: *Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.*

http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

49. Persons (65+) who received social care support (per 100,000 aged 65+)

Defining NEOLC Indicator 49

- NEOLC Indicator 49 is about providing a measure for people aged 65 and over who received [community based] social care services. It could be compared to NEOLC Indicator 48 (Carers aged 65 and over who received social care services).
- NEOLC Indicator 49 is defined as the crude rate of persons aged 65 and over, who were assisted directly through social services per 100,000 population aged 65+.
- NEOLC Indicator 49 data is derived from a subset of the denominator of NI135 for carers aged 65 and over (The number of adults aged 65 and over receiving a community-based social service during the year).
- NEOLC Indicator 49 is not the same as NI 135. NI 135 presents people who were adult carers of any age as a percentage of all adults who received community based social care services, whereas NEOLC Indicator 48 measures adults who were aged 65 and over who received social services (as carers and/or clients) as a rate per 100,000 population aged 65 and over.
- NEOLC Indicator 48 is calculated as

$$\frac{\text{No. of people aged 65 and over receiving different types of services provided as an outcome of an assessment or review}}{\text{No. of persons aged 65 years and over (ONS mid-year estimated population 2010)}} \times 100,000$$

- Higher rates of NELOC Indicator 49 may indicate greater need or possibly greater access to local authority social care services in an area for carers aged 65 and over.

About the NEOLC Indicator 49 source data

- The National Indicator from which NEOLC Indicator 48 is derived is NI 135 (Carers receiving needs assessment or review and a specific carer's service, or advice and information).
- NI 135 is defined as the number of carers whose needs were assessed or reviewed by the council in a year, who received a specific carer's service or advice and information in the same year, as a percentage of people receiving a community based service in the year. However, we use the denominator of NI135, which is the number of adults aged 65 and over receiving a community-based social service during the year, as the numerator of NEOLC Indicator 49

NI135 Numerator Source: RAP, Table C2, Page 1, line 5, column 1 + 2

NI135 Denominator Source: RAP, Table P2f, Pages 1 + 3, line 11, column 1

Identified issues for NEOLC indicator 49

- Only measures people aged 65+ who were completely assessed as new social care clients, or who were completely reviewed as existing social care clients and received a social care service.
- Source data was rounded
- No data was available for Cornwall, Lincolnshire or Walsall

Identified issues for NEOLC Indicator 49 trend analysis

- NEOLC indicator 49 uses the denominator of relatively new NI 135.
- Previously NI 136 was used to report the number of persons who received social care support. Guidance indicates that the denominator of NI 136 was an end of year snapshot figure (STOCK), and so would not have included all people who received services at any time during the year. We have not used NI 136 data, but this factor needs to be borne in mind if analysts wish to construct indicators for earlier years. Using the denominator of NI135 provides a more accurate count of all persons who received social care support through the year (FLOW). We have used a subset of this group to count only those aged 65+.
- HSCIC also noted that the data definitions for NI 135 changed in 2008/9 as follows

“NI135 - The guidance regarding Carers' Services was revised in 2008-09 and so caution should be taken when comparing this indicator over time. The definition of Information and advice has been tightened. A "package of information and advice" must be provided to the carer - the information and advice given must be person centred and specifically tailored to the individual needs of the carer. A "package of information and advice" could comprise a number of leaflets and telephone numbers provided in response to an individual carer's particular needs. Provision of telephone numbers or distribution of one or more leaflets indiscriminately cannot be counted as Information and Advice as the RAP return is aiming to build up a picture of what is provided to clients and carers in response to an assessment of their individual needs.”

50. Persons (65+) entitled to Carer's Allowance (per 100,000, aged 65+)

Defining NEOLC Indicator 50

- NEOLC Indicator 50 is about providing an alternative measure for carers aged 65 and over. See also indicator 48. (Carers aged 65+ receiving social care support)
- Support for carers is a key part of support for vulnerable people, including those at the end of life. Support for carers enables them to continue with their lives, families, work and contribution to the community.
- NEOLC Indicator 50 is defined as the crude rate of persons aged 65 and over known by the Department of Work and Pensions (DWP) to be entitled to Carer's Allowance, per 100,000 population aged 65+.
- NEOLC Indicator 50 is derived from publicly available data from the department of Work and Pensions (DWP) Tabulation Tool,
- NEOLC Indicator 50 is not the same as NEOLC Indicator 48. It also does not measure the rate of carers aged 65+ who are in receipt of Carers allowance.
- NEOLC Indicator 50 is calculated as

$\frac{\text{No of Carers aged 65+ entitled to Carer's Allowance (known to DWP caseload)}}{\text{No. of persons aged 65 years and over (ONS mid-year estimated population 2010)}} \times 100,000$

- Higher rates may indicate greater need or possibly better awareness of or access to Carer's Allowance in an area.
- About the NEOLC Indicator 50 source data
- DWP Carer's Benefit data (entitlement caseload), subset for people aged over 65 years. Source: Carer's Allowance - all entitled cases Caseload (Thousands) : Local Authority of claimant by Age of claimant, August 2011 extract, latest available snapshot downloaded from DWP Tabulation Tool (May 2012):

http://83.244.183.180/100pc/ca_ent/tabtool_ca_ent.html

Identified issues for NEOLC indicator 50

- NEOLC indicator 50 is a measure of the DWP entitlement caseload (Carer's Allowance, persons 65+yrs) rather than of the actual rate of people who may be entitled in an area. (It may exclude people who would be entitled but are not known to DWP caseload). In addition, not all of those known to be entitled are necessarily in receipt of payment.
- See also indicator 48 (Carers aged 65 + who received social care support.) These two groups may overlap but are not identical. Neither of these indicators measure the rate of Carers aged 65+ and in receipt of Carers Allowance.

Identified issues for NEOLC Indicator 50 trend analysis

- Trend analysis will need to take account of any changes in entitlement and caseload rules.

Social Care Expenditure Indicators 51 - 56

Social Care Expenditure Indicators

Levels of expenditure on aspects of social care may provide an indication of access to these social services. These snapshots of social care expenditure are for persons aged 65 and over, not all of whom will be the near end of their life, as reported through local authorities in 2010/11,

Expenditure rates may also indicate the level of supportive funding for social care which LAs are able to gather from other sources outside their own allotted funds.

- None of these social care expenditure indicators show the net spending from Council finding only.

The gross figures include all funding that has washed through the council accounts including contributions from

1. People who pay fully or partly for their own care (but only if they are known to the council system, for example because they have had a social care needs assessment).

2. Contributions from NHS Section 256 (this does not necessarily cover all NHS contributions)

3. Contributions from other providers such as charitable organisations or donations.

- Some end of life care funding is provided through PCTs. This is described in the National End of Life Care Profiles for PCTs, indicator 42.

http://www.endoflifecare-intelligence.org.uk/end_of_life_care_profiles/primary_care_trust_profiles.aspx

- The publication used to provide the numerators for each calculation is Disaggregated_NIS_201011_Final.xls from HSCIC. We chose only a selection of the subsections available for persons aged 65 and over.

51. Gross residential and nursing care (£'000s per 100,000 aged 65+)

Defining NEOLC Indicator 51

- NEOLC Indicator 51 is about gross expenditure rates on residential and nursing care for older people.
- NEOLC Indicator 51 is defined as the average annual crude rate of gross total cost for residential and nursing care for older people (65+) during year ended 31 March 2011 (£'000s) per 100,000 people aged 65+.
- NEOLC Indicator 51 is derived from Personal Social Services Expenditure Unit Costs data, published by HSCIC.
- NEOLC Indicator 51 is not the same as the published unit cost rates.
- NEOLC Indicator 51 rate is calculated for all of the population aged 65 and over in an area as

Gross total cost for residential and nursing care for older people during year ended 31 March 2011 (£000's, 2011/2012) x 100,000
No. of persons aged 65 years and over
(ONS mid-year estimated population 2010)

- Variation in rates of expenditure can arise for many and complex reasons.

About the NEOLC Indicator 51 source data

- Personal Social Services Expenditure Unit Costs Final_Council_Level_Unit_Costs_Data_2010_11.xls can be found within the reporting suite for personal social services expenditure and unit costs available at the following web link:

<http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/personal-social-services-expenditure-and-unit-costs-2010-11-final-release>

- Only sections relevant to older people were selected for the expenditure indicators.
- Gross total cost for residential and nursing care for older people during year ended 31 March 2011 (£000's) applies to residential and nursing care and the reported total includes income from
 - o joint arrangements,
 - o own provision residential care (including full cost paying and preserved rights residents)
 - o NHS for older people wholly supported by the NHS under Section 256 [formerly Section 28a]
 - o Other NHS arrangements and
 - o Other income (for example charitable donations).

Identified issues for NEOLC indicator 51

- A true net figure highlighting expenditure set aside solely and directly from local authority budgets is not available.

Identified issues for NEOLC Indicator 51 trend analysis

- Trend analysis of the social care expenditure indicators will need to take account of any changes in guidance for the Unit Costs collections managed by HSCIC.

52. Gross residential and nursing care (£'000s per 100,000 aged 65+), less NHS section 256 contributions (£'000s per 100,000 aged 65+)

Defining NEOLC Indicator 52

- NEOLC Indicator 52 is about gross expenditure rates on residential and nursing care, less NHS section 256 contributions, for older people.
- NEOLC Indicator 52 is defined as the average annual crude rate of gross total cost (less income from joint arrangements, Income from NHS (Section 256) and other income), on residential and nursing care for older people (65+) during year ended 31 March 2011 (£'000s) per 100,00 persons aged 65+
- NEOLC Indicator 52 is derived from Personal Social Services Expenditure Unit Costs data, published by HSCIC.
- NEOLC Indicator 52 is not the same as the published unit cost rates
- NEOLC Indicator 52 is calculated as

<p><i>Gross total cost (less income from joint arrangements, Income from NHS and other income) for residential and nursing care for older people during year ended 31 March 2011 (£'000's)</i></p>	<p><i>x 100,000</i></p>
<p><i>No. of persons aged 65 years and over (ONS mid-year estimated population 2010)</i></p>	

I.e. The numerator includes contributions from full cost paying and preserved rights residents but excludes contributions for those wholly supported by the NHS under Section 256 [formerly Section 28a]

About the NEOLC Indicator 52 source data

- Personal Social Services Expenditure Unit Costs data, Final_Council_Level_Unit_Costs_Data_2010_11.xls can be found within the reporting suite for personal social services expenditure and unit costs available at the following web link:

<http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/personal-social-services-expenditure-and-unit-costs-2010-11-final-release>

- Only sections relevant to older people were selected for the expenditure indicators.
- Includes full cost paying and preserved rights residents but excludes those wholly supported by the NHS under Section 256 [formerly Section 28a]

Identified issues for NEOLC indicator 52

- NHS contributions to social care may extend beyond those categorised as section 256 contributions, and are negotiated locally.

Identified issues for NEOLC Indicator 52 trend analysis

- Local agreements regarding NHS contributions can vary frequently over time

- Trend analysis of the social care expenditure indicators will need to take account of any changes in guidance for the Unit Costs collections managed by HSCIC.

53. Home care (£'000s per 100,000 aged 65+)

Defining NEOLC Indicator 53

- NEOLC Indicator 53 is about gross expenditure on home care for older people
- NEOLC Indicator 53 is defined as the annual average crude rate of gross total cost for home care (£'000s) per 100,000 persons aged 65+
- NEOLC Indicator 53 is derived from the Personal Social Services Expenditure Unit Costs data, published by HSCIC.
- NEOLC Indicator 53 is not the same as the published unit cost rates
- NEOLC Indicator 53 is calculated as

Gross total cost for home care to older people during year ended 31 March 2011 (£000's) x 100,000
No. of persons aged 65 years and over
(ONS mid-year estimated population 2010)

About the NEOLC Indicator 53 source data

- Personal Social Services Expenditure Unit Costs data, Final_Council_Level_Unit_Costs_Data_2010_11.xls can be found within the reporting suite for personal social services expenditure and unit costs available at the following web link:

<http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/personal-social-services-expenditure-and-unit-costs-2010-11-final-release>

- Only sections relevant to older people were selected for the expenditure indicators.
- For the numerator we used the gross total cost for home care to older people during year ended 31 March 2011 (£000's)

Identified issues for NEOLC indicator 53

- The available national data cannot be broken down by source of contribution.

Identified issues for NEOLC Indicator 53 trend analysis

- The impact of changes in policy regarding the contribution sources for home care cannot be tracked over time in national data. Variation between local authorities in this regard cannot be studied empirically using available national data.
- Trend analysis of the social care expenditure indicators will need to take account of any changes in guidance for the Unit Costs collections managed by HSCIC.

54. Direct payments (£'000s per 100,000 aged 65+)

Defining NEOLC Indicator 54

- NEOLC Indicator 54 is about gross expenditure rates for direct payments (monitoring the extent to which local authorities may be moving towards facilitating personal choice older people receiving social care through the use of direct payments).
- NEOLC Indicator 54 is defined as the annual average crude rate of gross total cost for direct payments to older people during year ended 31 March 2011 (£000's) per 100,000 persons aged 65+.
- NEOLC Indicator 54 is derived from the Personal Social Services Expenditure Unit Costs data, published by HSCIC.
- NEOLC Indicator 54 is not the same as the published unit cost rates
- NEOLC Indicator 54 is calculated as

*Gross total cost for direct payments
to older people during year ended 31 March 2011 (£000's) x 100,000
No. of persons aged 65 years and over
(ONS mid-year estimated population 2010)*

About the NEOLC Indicator 54 source data

- Personal Social Services Expenditure Unit Costs data, Final_Council_Level_Unit_Costs_Data_2010_11.xls can be found within the reporting suite for personal social services expenditure and unit costs available at the following web link:

<http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/personal-social-services-expenditure-and-unit-costs-2010-11-final-release>

- Only sections relevant to older people were selected for the expenditure indicators.

Identified issues for NEOLC indicator 54

- There is known to be wide variation in the extent to which direct payments are being implemented by local authorities.
- There is concern that the differential between rates paid for direct and no-direct payments for services may result in those local authorities which may be experiencing greater pressure on financial resources moving more quickly to direct payments without adequate monitoring of how the payments are used or whether they are having their intended effect, and whether they are proven to be beneficial in meeting the social care needs of the recipients adequately. It is possible that if this is the case such authorities may be those where there are more people resident in deprived populations, and more need for social services.

Identified issues for NEOLC Indicator 54 trend analysis

- Trend analysis of the social care expenditure indicators will need to take account of any changes in guidance for the Unit Costs collections managed by HSCIC.

55. Day care or day services (£'000s per 100,000 aged 65+)

Defining NEOLC Indicator 55

- NEOLC Indicator 55 is about gross expenditure rates on day care or day services for older people.
- NEOLC Indicator 55 is defined as the annual average crude rate of gross total cost for day care or day services for older people during year ended 31 March 2011 (£000's), per 100,000 persons aged 65+.
- NEOLC Indicator 55 is derived from the Personal Social Services Expenditure Unit Costs data, published by HSCIC.
- NEOLC Indicator 55 is not the same as the published unit cost rates
- NEOLC Indicator 55 is calculated as

*Gross total cost for day care or day services
for older people during year ended 31 March 2011 (£000's) x 100,000
No. of persons aged 65 years and over
(ONS mid-year estimated population 2010)*

About the NEOLC Indicator 55 source data

- Personal Social Services Expenditure Unit Costs data, Final_Council_Level_Unit_Costs_Data_2010_11.xls can be found within the reporting suite for personal social services expenditure and unit costs available at the following web link:

<http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/personal-social-services-expenditure-and-unit-costs-2010-11-final-release>

- Only sections relevant to older people were selected for the expenditure indicators.

Identified issues for NEOLC indicator 55

- In-house analysis has confirmed that the total cost of day care and day services for all local authorities is met entirely through contributions from social care clients' own provision (63%) and provision by others (37%; for example charitable organisations). This is a total of £365,410, 000 nationally.

Identified issues for NEOLC Indicator 55 trend analysis

- It is expected that in the near future more emphasis will be placed on enabling people to stay in their own homes for longer and therefore that the need for day care and day services will be much greater. Comparisons with expenditure rates for residential and nursing care will not necessarily show opposite trends however because of the ageing population.

56. Meals (£'000s per 100,000 aged 65+)

Defining NEOLC Indicator 56

- NEOLC Indicator 56 is about gross expenditure rates for provision of meals for older people.
- NEOLC Indicator 56 is defined as the annual average crude rate of gross total cost for providing meals to older people during year ended 31 March 2011 (£000's) per 100,000 persons aged 65+.
- NEOLC Indicator 56 is derived from the Personal Social Services Expenditure Unit Costs data, published by HSCIC.
- NEOLC Indicator 56 is not the same as the published unit cost rates
- NEOLC Indicator 56 is calculated as

*Gross total cost for providing meals to
older people during year ended 31 March 2011 (£000's) x 100,000
No. of persons aged 65 years and over
(ONS mid-year estimated population 2010)*

About the NEOLC Indicator 56 source data

- Personal Social Services Expenditure Unit Costs data, Final_Council_Level_Unit_Costs_Data_2010_11.xls can be found within the reporting suite for personal social services expenditure and unit costs available at the following web link:

<http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/personal-social-services-expenditure-and-unit-costs-2010-11-final-release>

- Only sections relevant to older people were selected for the expenditure indicators.

Identified issues for NEOLC indicator 56

- The available national data cannot be broken down by source of contribution.

Identified issues for NEOLC Indicator 56 trend analysis

- Trend analysis of the social care expenditure indicators will need to take account of any changes in guidance for the Unit Costs collections managed by HSCIC.

Appendices:

HSCIC guidance

(Source: Social Care and Mental Health Indicators from the National Indicator Set – 2010-11 - Final Release.

http://www.ic.nhs.uk/webfiles/publications/009_Social_Care/NIS_201011/NIS_2010_11_Final.pdf)

And

<http://www.ic.nhs.uk/pubs/finalsocmhi1011>

Edited portions of HSCIC guidance relevant to the NEOLC profiles are copied below:

Coverage

- In 2010-11 not all councils were able to provide a full set of data for the social care indicator values and estimates have been made for those with missing data. The exception is NI 127 which is based on 149 councils as three councils did not complete the survey. The Isle of Scilly and City of London were exempt from the survey as the number of service users within their area who met the survey eligibility criteria was too small to guarantee statistically robust results, and Richmond upon Thames chose not to participate in this survey.

Data Sources

- Caution should be taken when comparing data historically as there have been a number of changes to the data sources as detailed in the section on notes to bear in mind when analysing the data.

Adult Social Care Combined Activity Return (ASC-CAR)

- The data in 2010-11 and 2009-10 for the numerators of NI 145 and NI 146 was collected over 12 months as opposed to 6 months and grossed up as in 2008-09. The number of discharges (NI 125) has been collected for a three month period (October to December 2010); this information has not been grossed up and is quoted within the report as reported by the councils for the 3 month period with a three month follow up period. In 2009-10 discharges over a 6 month period were included but the collection period for 2008-09 was also 3 months.

Referrals Assessments and Packages of Care Return (RAP)

- This collection has been collected since 2001, although the collection has undergone some changes during this period. The proformas used to collect the information that feeds into the indicator calculations are P2f, C2, SD1 and SD3. These proformas have undergone little change over the last two years and the most relevant recent changes are listed here:

- In 2009-10 the definition for Direct Payments in the P2s and P2f tables was expanded to include existing and new direct payments and personal budgets.
- In 2010-11 the definition for Direct Payments in the P2s and P2f tables reverted back to the 2008-09 definition as data on the Self Directed Support process was already collected on the SD forms which were introduced in 2009-10 to collect information on the number clients and carers receiving Self Directed Support. However, these changes to the P forms do not impact on the calculation of the National Indicators as the data source for NI 130 was changed to be SD1 and SD3.
- Revised Guidance on recording Information and advice within the "C Tables" (2008-09).

Adult Social Care Survey, England 2010-11 (UES)

- The population sample was defined as those people receiving services on 30 September 2010 who had the capacity to consent to take part in the survey. Care was taken to remove people who had died or moved away.
- The Isle of Scilly and City of London were exempt from the survey as the number of service users within their area who met the eligibility criteria was too small to produce statistically significant responses. Richmond-upon-Thames decided to not take part in the survey.
- 61,115 out of a sample of 150,860 recipients of care and social care services responded to the survey which is a response rate of 41 per cent.

The publication of the results from the 2010-11 survey can be found at www.ic.nhs.uk/pubs/adultsocialcaresurvey1011

[HSCIC]Notes to bear in mind when analysing the data

NI125 – For 2008-09 the collection of the denominator was a three month period (1st October 2008 to 31st December 2008) with a three month follow-up for the numerator. In 2009-10, the collection of the denominator is over a six month period (1 July 2009 to 31 December 2009) with follow up for the numerator from October 2009 to March 2010; in 2010-11 this changed back to the 2008-09 definition.

NI127 - This survey was conducted for the first time in 2010-11 and the format of the indicator calculation is different to 2009-10. Therefore the indicator value for 2010-11 is not comparable with 2009-10. Sampling variation needs to be taken into account when analysing these indicator values as they are only based on a random sample of service users receiving services.

NI130 - In 2009-10 the definition of this indicator expanded to include those clients and carers receiving self a direct payment and/or a personal budget. Therefore, the indicator value for 2008-09 is not directly comparable with later years.

NI135 - The guidance regarding Carers' Services was revised in 2008-09 and so caution should be taken when comparing this indicator over time. The definition of Information and advice has been tightened. A "package of information and advice" must be provided to the carer - the information and advice given must be person centred and specifically tailored to the individual needs of the carer. A "package of information and advice" could comprise a number of leaflets and telephone numbers provided in response to an individual carer's particular needs. Provision of telephone numbers or distribution of one or more leaflets indiscriminately cannot be counted as Information and Advice as the RAP return is aiming to build up a picture of what is provided to clients and carers in response to an assessment of their individual needs.

Edited portions of HSCIC guidance regarding Nis relevant to the NEOLC profiles are continued below:

Indicator Definitions

The then Secretary of State for Communities and Local Government announced a new set of national indicators for English local authorities and local authority partnerships. The Health and Social Care Information Centre collects information on 8 of the indicators which relate to social services and the care packages provided, and mental health services. The definitions [relevant to NEOLC profile indicators]... are provided below.

NI 125: Achieving independence for older people through re-enablement, rehabilitation and intermediate care

This is the proportion of older people aged 65 and over discharged from hospital to their own home or to a residential or nursing care home or extra care housing bed for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting) who are at home or in extra care housing or an adult placement scheme setting three months after the date of their discharge from hospital. Those who are in hospital or in a registered care home (other than for a brief episode of respite care from which they are expected to return home) at the three month date and those who have died within the three months are not reported in the numerator. 3 months is defined as 91 days. In 2008-09 the collection of the denominator was over a three month period with a three month follow-up for the numerator. In 2009-10, the collection of the denominator was over a six month period, with the collection of the numerator beginning three months in. To reduce the burden of collection, in 2010-11 the collection of the denominator reverted to being over a three month period as in 2008-09.

Numerator Source: ASC-CAR Table I1 row 1, column 9 (Overall total)

Denominator Source: ASC-CAR Table I1 row 2, column 9 (Overall total)

NI 127: Self reported experience of social care users

This is based on answers to a combination of questions in the Adult Social Care Survey which cover 8 different domains which are related to quality of life. These questions and the domain they cover are shown in the following table:

Qn	Question	Domain
3	Which of the following statements best describes how much control you have over your daily life?	Control
4	Thinking about your personal care, by which we mean being clean and presentable in appearance, which of the following statements best describes your situation?	Personal Care
5	Thinking about the food and drink you get, which of the following statements best describes your situation?	Food
6	Which of the following statements best describes how clean and comfortable your home is?	Accommodation
7	Which of the following statements best describes how safe you feel?	Personal Safety
8	Thinking about how much contact you've had with people you like, which of the following statements best describes your social situation?	Social Life
9	Which of the following statements best describes how you spend your time?	Occupation
11	Thinking about the way you are helped and treated, and how that makes you think and feel about yourself, which of these statements best describes your situation?	Dignity

Numerator

Each respondent is assigned a score based on their answers to questions 3 to 9 and 11. Each of the questions has four answers which are equated with having either no needs in a specific life area or domain, having no needs with help, having low level needs or high level needs. The scores are assigned as follows:

High needs (the last answer option for each question) = 0

Low level needs (3rd answer option) = 1

No needs with help (2nd answer option) = 2

No needs (1st answer option) = 3

The numerator is then a sum of the scores for all respondents who have answered questions 3 to 9 and 11.

Those respondents who were sent an LD questionnaire will be treated in the same way as the LD questionnaire has been designed to be equivalent to the non-LD version.

Denominator

The number of respondents who answered all the questions 3 to 9 and 11.

Exclusions

Any respondents who failed to answer all the questions 3 to 9 and 11 are excluded from the calculation of the indicator. For example, a respondent who answered questions 3 to 8 and 11 but did not answer Q9 will be excluded from the indicator calculation.

NI 130: Social care clients receiving self directed support

Number of adults (aged 18 or over), older people and carers (aged 16 or over but caring for an adult aged 18 or over) receiving self-directed support in the year to 31st March as a percentage of clients (aged 18 or over) receiving community based services and carers receiving carer's specific services aged 18 or over. To be counted, the person (adult, older person or carer) must: be getting a direct payment; or have in place another form of personal budget.

Numerator Source:

RAP: Table SD1, Page 1, line 10 (Total 18 and over), column 5 (total) & RAP Table SD3, Page 1, line 6, column 5

Denominator Source:

RAP: Table P2f, page 1, line 11, column 1 & RAP: Table P2f, page 3, line 11, column 1 & RAP: Table C2, page 1, line 5, column 1

NI 135: Carers receiving needs assessment or review and a specific carer's service, or advice and information

The number of carers whose needs were assessed or reviewed by the council in a year who received a specific carer's service, or advice and information in the same year as a percentage of people receiving a community based service in the year.

Numerator Source: RAP, Table C2, Page 1, line 5, column 1 + 2

Denominator Source: RAP, Table P2f, Pages 1 + 3, line 11, column 1

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