

# Community Care Statistics 2015-16

## Supporting Information

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## Introduction

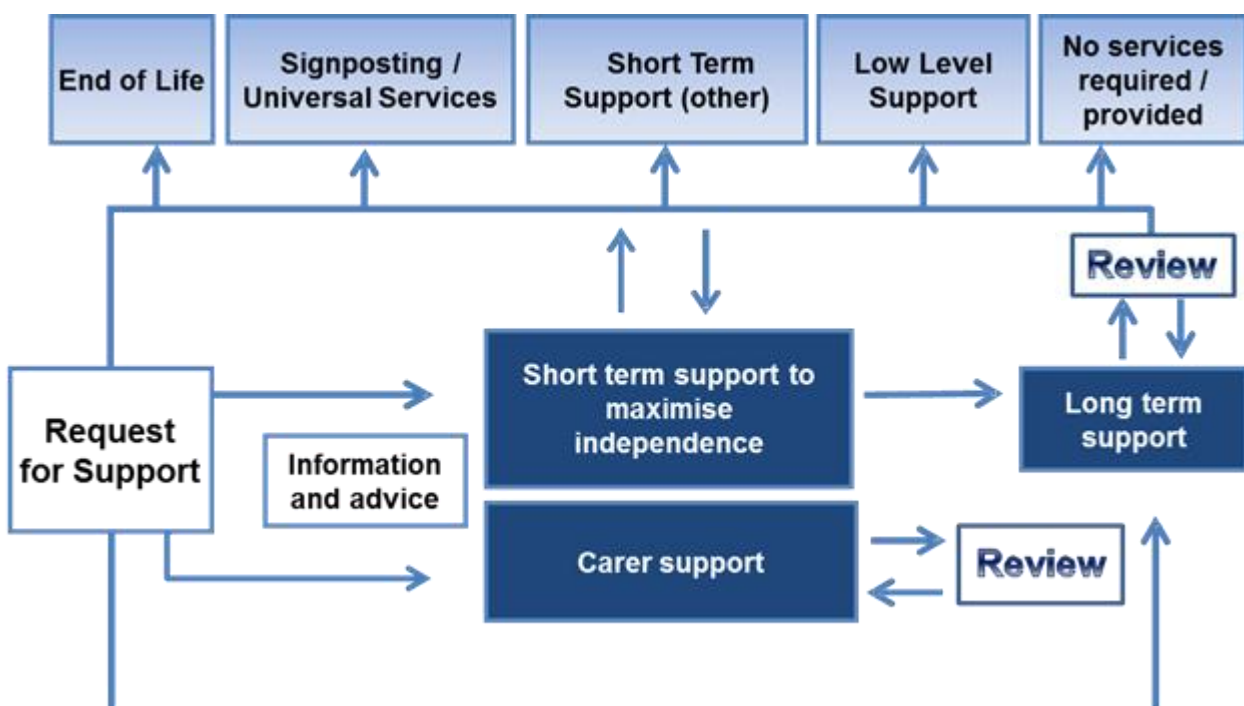
NHS Digital publishes a suite of reports on adult social care in England. In addition to this report, NHS Digital publishes reports which cover:

- Expenditure - amount spent by CASSRs carrying out their social care activity including service unit costs
- Experience - surveys of service users and carers which include questions on satisfaction with services received and quality of life of the individual
- Workforce - the number and characteristics of staff employed by adult social services departments
- Safeguarding - information on referrals to adult social care safeguarding teams.

This is a report on the social care activity of Councils with Adult Social Services Responsibilities (CASSRs) in England. It contains information taken from council administrative systems used to record the process of assessing eligibility to state funded social care and providing services where people are eligible.

Data is taken from the Short and Long Term Services (SALT) collection; this replaced both the Referrals, Assessments and Packages of Care (RAP) return and the Adult Social Care Combined Activity Return (ASC-CAR), as a result of the Zero Based Review (ZBR). These changes were announced in May 2013, and the Department of Health provided implementation funding to councils. The SALT stakeholder group (which included representatives from NHS Digital (formerly known as the Health and Social Care Information Centre, HSCIC), the Department of Health, local authorities in England and system suppliers), working alongside colleagues in the Adult Social Care Finance Return (ASC-FR) and Equalities and Classifications (EQ-CL) Framework groups, used the ZBR consultation responses to help produce the final SALT collection.

SALT tracks client journeys through the social care system, starting with an initial request for support.



After each key event, what happened next is then considered (referred to within the collection as a 'sequel'). Following a request for support, clients may be provided with a period of short term support designed to maximise their independence (e.g. a reablement service) or be referred directly for Long term support (e.g. an emergency care home admission) or receive support such as ongoing low level support (e.g. an item of assistive equipment). Short Term Support to Maximise Independence is intended to be time-limited with the aim of ensuring clients become as independent as possible, ending with a formal assessment or review to determine what will follow. Long term support encompasses support provided with the intention of maintaining quality of life for an individual on an ongoing basis. Some clients will already be receiving this; some new clients may receive this as a result of a request for support; others further to ST-Max as mentioned above.

Under the Care Act 2014, for the first time, carers will be recognised in the law in the same way as those they care for. Carer data is available in both the short term and long term tables, whilst Carer Support also has its own measure.

From 2014-15 onwards, the Community Care Statistics report includes people who pay entirely for their own care. Self-funding clients are reported in SALT during their initial contact with the council, however full-cost clients are counted in all measures. A full-cost client is one who pays the full direct costs of the services they receive but whose support is arranged by the CASSR e.g. regular reviews, support planning.

Changes were made to the 2015-16 return to collect voluntary data on transitions, prisoners and carers. Changes to future collections (2016-17 and 2017-18) were announced in September 2016 and further detail is available here:

<http://content.digital.nhs.uk/socialcarecollections2017>

Across the return, there are also further levels of breakdown to capture more detail on routes of access and outcomes. It is recommended that this report is read alongside the SALT guidance to support understanding, available at:

[http://content.digital.nhs.uk/media/20911/SALT-Guidance-2015-16-v17/pdf/SALT\\_Guidance\\_2015-16\\_v1.7.pdf](http://content.digital.nhs.uk/media/20911/SALT-Guidance-2015-16-v17/pdf/SALT_Guidance_2015-16_v1.7.pdf)

The change in data source, from RAP and ASC-CAR to SALT, meant an interruption to time series analysis in all but one data item: STS004, Proportion of Older People (65 and over) who were still at home 91 days after discharge from hospital into Reablement / Rehabilitation Services. This was previously ASC-CAR Table I1. For all other metrics, time series analysis is only available from 2014-15 onwards. The [Methodological Change Notice](#) details the changes between RAP, ASC-CAR and SALT.

Data are no longer available on service users whose only services are the provision of equipment, professional support or short term residential care. Data on voluntary work carried out by working age adults with learning disabilities is no longer collected in the SALT data return. The home care services section which was in the RAP return is no longer split out into its own section in the SALT return. Home care would be recorded as a community-based service to the client.

Some of the data used in this report will be used to populate the following Adult Social Care Outcomes Framework (ASCOF) <sup>1</sup> measures:

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<sup>1</sup> ASCOF definitions can be seen at <https://www.gov.uk/government/publications/the-adult-social-care-outcomes-framework-2012-to-2013>

- 1C: Proportion of people using social care who receive self-directed support, and those receiving direct payments
- 1E: Proportion of adults with learning disabilities in paid employment
- 1G: Proportion of adults with learning disabilities who live in their own home or with their family
- 2A: Long-term support needs met by admission to residential and nursing care homes, per 100,000 population
- 2B: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement or rehabilitation services.
- 2D: The outcome of short term services: sequel to service

These outcomes are reported in the “*Measures from the Adult Social Care Outcomes Framework, England - 2015-16 Final Release*”.

## Data Sources

This report uses data from the Short and Long Term return (SALT) which was new for 2014-15. There are twelve main measures within the SALT data collection.

## STS – Short Term Support

**STS001** Requests for support for new clients broken down by the different sequels

STS001 captures the level of demand for social care services from new clients by recording the number of requests for support and the sequel of those requests. This will help determine (in conjunction with measures STS002a and STS002b) whether reablement type interventions help prevent further demands on social care services and gives basic details of the nature of ongoing support required.

**STS002a** Short Term Support to Maximise Independence sequels for NEW clients

This measure tracks the sequel to a limited period of Short Term Support and will provide some indication of the outcomes of services intended to maximise the independence of new clients. Tracking the sequels to short term services will give an idea of the effectiveness of preventing longer-term reliance on social care.

**STS002b** Short Term Support to Maximise Independence sequels for EXISTING clients

This measure tracks the sequel to a limited period of Short Term Support and will provide some indication of the outcomes of services intended to maximise the independence of existing clients.

**STS003** Snapshot Short Term Support to Maximise Independence

This measure indicates how much Short Term Support to Maximise Independence is provided at any given time. STS003 contains an estimate of what proportion of clients in receipt of Short Term Support to Maximise Independence would have previously been included in the RAP return.

**STS004** Proportion of older people (65+ who were still at home 91 days after discharge from hospital into reablement / rehabilitation)

This measure collects data on the benefit to clients from reablement / rehabilitation services following a hospital episode. It captures the joint work of social services and health staff and services commissioned by joint teams as well those commissioned by social services only.

## **LTS – Long Term Support**

**LTS001a** Long Term Support anytime in the year

This is a 'through the year' measure of supported clients where the support is long term. Long Term Support encompasses services provided with the intention of maintaining quality of life for an individual on an ongoing basis. This measure is broken down by age and primary support reason. This 'through the year' measure helps identify the turnover of clients in receipt of Long Term Support.

**LTS001b** Long Term Support at year end

This is a snapshot of supported clients at year end where the support is long term. Long Term Support encompasses services provided with the intention of maintaining quality of life for an individual on an ongoing basis. This measure is broken down by age and primary support reason.

**LTS001c** Long Term Support for 12+ months at year end

This is a snapshot measure of supported clients at the year end where the support is long term and has been in place for at least 12 consecutive months.

**LTS002a** Clients in receipt of Long Term support (Unplanned reviews and Planned reviews leading to a care home admission)

This measure tracks the sequel to an unplanned review of Long Term Support as well as recording planned reviews leading to a care home admission.

**LTS002b** Clients in receipt of Long Term support for more than 12 months at the year end (LTS001c) with a review during the year and the sequel to that review

Those clients receiving Long Term Support for more than 12 months at the year end (LTS001c), for whom an unplanned or planned review of care needs took place during the year and the sequel to that review.

**LTS003** Carer support

Carer support provided during the year, broken down by the age of the carer, Primary Support Reason of the client (cared-for) and the type of support provided.

**LTS004** Accommodation and employment status of working age clients with a Primary Support Reason of Learning Disability

This measure collects information regarding the accommodation and employment status of working age clients whose Primary Support Reason is a Learning Disability.

## Editorial Notes

### Background Notes

This report is based on an analysis of information relating to the year 1st April 2015 to 31st March 2016. The publication also contains revised 2014-15 data to reflect the fact that local authorities had the opportunity to restate their Year One SALT data. It uses data from the Short and Long Term (SALT) data collection, and the information presented here is based on final data.

Community care is the process by which requests for social care support (made to CASSRs) are translated, via assessment and care planning into appropriate services.

The SALT return is concerned with adults (defined as those aged 18 or over) and relates to adult social services. Children's social services are not covered in these returns, nor are services provided to adults on behalf of children (e.g. Section 17 payments) though voluntary tables concerning Transition in STS001 may include data on children who are preparing to transition to adult social services.

### Content of the SALT tables for 2015-16

Most of the SALT tables seek data for the full year, but a few forms relate to a snapshot on the last day of the period (i.e. as at 31st March). The only tables that are an exception to this is STS004 which seeks data for the period between 1st October and 31st December with a 91 day follow up, and STS001 tables 2a and 2b which cover the six month period between 1<sup>st</sup> October and 31<sup>st</sup> March. The tables are concerned with adults aged 18 and over and relate to adult personal social services. The LTS003 table relates to carers of adults, some of whom may be aged under 18 but are caring for an adult aged 18 or over. Some information is collected by gender, ethnicity, age group and primary support reason. Definitions of primary support reasons and activity data can be found in the [glossary](#) within this document.

The SALT data return collected data on both short term support (STS tables) and long term support (LTS tables). This is available on the NHS Digital website, along with full guidance on how to complete the tables, at:

<http://content.digital.nhs.uk/socialcarecollections2017>

### Reference Tables – Table conventions

#### Layout

The table number indicates the name of the SALT table from which the data comes. The source is also given again at the foot of each table. The title describes what the table contains and gives details of how the information is broken down.

All tables present information for adults aged 18 or over except for table LTS003 which contains data on carers aged under 18 and voluntary tables in STS001 which contains data on transition clients.

#### Rounding

All figures presented in the Annex Tables are rounded to the nearest five and figures may not add to totals because of rounding.



## How are the statistics used? Users and Uses of the Report

This section contains comments based on responses from the users listed. All these users have found the information in previous editions of this report useful for the purposes set out.

### Department of Health

- Inform policy monitoring;
- Speeches and briefings for Ministers and senior officials;
- PQs and Prime Minister's Questions;
- Media Enquiries and other correspondence.

### Councils with Adult Social Services Responsibilities

Different councils use the report in different ways but there will be some commonality between them. NHS Digital collect information on local authority use of data via our feedback survey<sup>2</sup>. Ways in which councils may use the report include:

- Answering Freedom of Information requests
- Benchmarking against other councils;
- Measuring/monitoring local performance;
- Service development, planning and improvement;
- Management information, local reporting, accountability.

### National Audit Office (NAO)

- To prepare reports and briefings for Parliament, typically around Value for Money

### Unknown Users

The activity report is free to access via the NHS Digital website and the majority of users will access the report without being known to NHS Digital.

It is therefore important for us to try to understand how these users are using the statistics and also to gain feedback on how we can make the data more useful to them. We welcome feedback from report users, ideally covering the following points:

- How did you find out about this publication?
- How useful did you find the content in this publication?
- What type of organisation do you work for?
- What did you use the report for?
- What information was the most useful?
- Were you happy with the data quality?
- To help us improve our publications, what changes would you like to see (for instance content or timing)?
- Would you like to take part in future consultations on our publications?

Please send any feedback to [enquiries@nhsdigital.nhs.uk](mailto:enquiries@nhsdigital.nhs.uk)

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<sup>2</sup> [http://content.digital.nhs.uk/media/22429/SALT-Feedback-survey-Sept-16/pdf/SALT\\_Feedback\\_survey\\_Sept\\_16.pdf](http://content.digital.nhs.uk/media/22429/SALT-Feedback-survey-Sept-16/pdf/SALT_Feedback_survey_Sept_16.pdf)



## Glossary

These are taken from the 2015-16 EQ-CL framework, available at:

[http://content.digital.nhs.uk/media/15062/EQ-CL-Framework/pdf/EQ-CL\\_2015-16\\_Framework\\_v1.2.pdf](http://content.digital.nhs.uk/media/15062/EQ-CL-Framework/pdf/EQ-CL_2015-16_Framework_v1.2.pdf)

Item	Definition
<b>Accommodation status</b>	An indication of the type of accommodation that a client currently has. This should be based upon the client's main or permanent residence.
<b>Acute / long term healthcare or residential facility or hospital</b>	Utilised within SALT reporting of accommodation status, this category describes a range of hospital settings and can include specialist rehabilitation settings.
<b>Age</b>	Age is calculated as at the last day of the reporting period. If a client dies during the period, their age should be recorded as their age at death.
<b>Approved premises for offenders released from prison or under probation supervision (e.g, probation hostel)</b>	Utilised within SALT reporting of accommodation status, this category describes premises intended for individuals released from prison or other types of custodial detention, who are usually ordered to stay there as part of their release from prison, or as a condition of bail or a Community Order.
<b>Carer</b>	<p>The definition of a carer is taken from the <i>Carers and Disabled Children Act 2000</i><sup>3</sup> which utilises the following description: “<i>Carers (aged 16 and over) who provide or intend to provide a substantial amount of care on a regular basis for another individual aged 18 or over</i>”. Although the Act only refers to carers aged 16 and over, younger carers of adults should be included in this return. The Act excludes from the definition of a carer, paid care workers and volunteers from a voluntary organisation.</p> <p>It is possible for a client to have more than one carer, and for a carer to additionally be a client in his or her own right.</p>
<b>CASSR</b>	Council with Adult Social Services Responsibility. The terms ‘council’ and ‘local authority’ if used in the EQ-CL and other documentation refer to CASSRs.

<sup>3</sup> [http://www.legislation.gov.uk/ukpga/2000/16/pdfs/ukpga\\_20000016\\_en.pdf](http://www.legislation.gov.uk/ukpga/2000/16/pdfs/ukpga_20000016_en.pdf)

Item	Definition
<b>CASSR commissioned support only</b>	A client with a package of services provided by the CASSR but not within a personal budget, with no cash payments.
<b>CASSR managed Personal Budget</b>	A client in receipt of a personal budget where none of their personal budget is being taken as a direct payment.
<b>Child and Adolescent Mental Health Service (CAMHS)</b>	Specialist NHS children and young people's mental health services.
<b>Children's social services</b>	Social services support, care and protection for vulnerable children and young people. This is the most common route of transition to Adult Social Care.
<b>Client</b>	Customers of the CASSR who are 'on the books' for an assessment, a review or the receipt of services.
<b>Community / Other route</b>	Utilised within the SALT collection, this route of access reflects requests from clients (or on behalf of clients) based in the community, residential / nursing care or any other route of access not specified elsewhere.
<b>Direct Payment</b>	Direct payment describes a payment <i>process</i> where support is given via the issue of monetary payments by local CASSRs directly to adult clients who have been assessed as needing certain services. Examples here could be: the issue of a personal budget solely via direct payment of funds to the recipient, or the issue of a grant payment to support a carer.
<b>Discharge from Hospital</b>	Utilised within the SALT collection this route of access relates to clients who are being referred for support following a planned or an emergency admission to hospital.
<b>Diversion from hospital services</b>	This relates to requests for support relating to clients who are being referred as a means of preventing admission to hospital. Diversion will include some kinds of falls prevention and falls response services, as well as reablement type services aimed at avoiding hospital admission. It is intended to pick up those referrals made specifically to prevent admission to hospital. CASSRs will have well-defined programmes for preventing admissions, such as reablement.
<b>Early cessation of service (NOT leading to long term support)</b>	A period of short term support that was cut short in an unplanned way (e.g. because of a health issue, client moving out of the local area etc.) and does not result in long term support provision.
<b>Early cessation of service (sequel of long term support)</b>	A period of short term support ceased unexpectedly before the planned end date but this resulted in provision of long term services.

Item	Definition
<b>Educational Institution</b>	A place of learning which may have fully catered for the needs of young people (e.g. those with autism) but where on leaving the educational institution, these needs must be met in some other way. This is a possible route of transition to Adult Social Care.
<b>End of life</b>	End of life (EOL) care is considered to be any episode of social care support provided as part of palliative care, and which is intended to support the individual until the care is no longer required.
<b>Ethnicity</b>	Defined as the ethnic group that the individual considers themselves to be.
<b>Full cost paying clients</b>	A full cost paying client is one who pays the full direct costs of the services they receive but whose support is arranged by the CASSR which includes regular reviews, support planning etc.
<b>Gender</b>	Defined as the gender the individual considers themselves to be. This is either male or female, and in the case of transgender, it should be recorded as the preference of the individual concerned.
<b>Health funding</b>	Only services provided or commissioned by social services (or the health partner under section 75 arrangements) should be included. If health are paying for the provision of social care services for a client (outside of a section 75 agreement) and there is no resource cost to the CASSR then these clients should not be included.
<b>Hospital Episode (Planned)</b>	Utilised within the SALT collection this significant event relates to reviews carried out after an admission to or treatment in hospital. Even when a hospital admission or treatment was known about in advance, the result of medical treatment may be unexpected and result in a request for a review to the CASSR.
<b>Hospital Episode (Unplanned)</b>	Utilised within the SALT collection this significant event relates to reviews carried out after an unplanned admission to hospital. If an unexpected admission to hospital or treatment in hospital is required, this may result in the care needs of a client changing when they are due to return home.
<b>Information, Advice and Other Universal Services / Signposting</b>	Utilised within the SALT collection this is one of the classifications of support provided direct to carers. It is utilised if no costed support is given following screening / assessment but some form of advice or information (in the form of leaflets, verbal discussion with the carer) or other provision is made. This includes where specific recommendations are made or appointments set up with other organisations (e.g. in the voluntary sector).
<b>Jointly with the cared-for person</b>	Utilised within the SALT collection this classification is used to report the circumstances of the assessment of the carers needs. Here the carer was assessed jointly with the cared-for person. The level of client involvement will vary, case by case and between councils. Nevertheless, if the cared-for person is known, linked to the carer on the client database and was involved in a significant way in the assessment / review of the carer, this should be included under this classification.

Item	Definition
<b>Long term support</b>	Any service or support which is provided with the intention of maintaining quality of life for an individual on an ongoing basis, which has been allocated on the basis of eligibility criteria/policies (i.e. an assessment of need has taken place) and is subject to regular review.
<b>Mechanism of service delivery (for SALT collection)</b>	The method utilised to purchase the care package for clients. This classification is utilised within the Short and Long Term (SALT) collection. It is distinct from the Community Based Support – Mechanism of delivery utilised within the Adult Social Care Finance Return (ASC-FR).
<b>Method of assessment (in relation to carers)</b>	The method CASSRs use to assess carers' needs varies. EQ-CL distinguishes between carers' needs that are 'assessed jointly' and those that are 'assessed separately'. In addition it is acknowledged that some support may be offered without a full assessment of the carer. Further guidance is provided in the section 'Method of Assessment of Carers' of this document.
<b>Method of Assessment or Review</b>	Utilised within the SALT collection, this category is used to report contextual detail relating to how the assessment or review of carers' needs was carried out during the reporting period. Additionally this category is used to record when no review was carried out in the reporting period.
<b>Mobile accommodation for Gypsy / Roma and Traveller communities</b>	Utilised within SALT reporting of accommodation status, this refers to mobile accommodation (for example caravans) utilised by the Gypsy, Roma and Traveller communities, irrespective of whether the accommodation is on a permanent, semi-permanent or transient site.
<b>New client</b>	Clients not in receipt of long term support at the time the contact was made.
<b>Night Shelter / Emergency Hostel / Direct Access Hostel</b>	Utilised within SALT reporting of accommodation status, this refers to temporary accommodation for the homeless that may be accessed via self-referral
<b>No review or assessment during the year</b>	Utilised within the SALT collection this classification allows reporting of carers provision where no review or assessment was carried out during the reporting period
<b>No services provided</b>	The client may have low-level needs which cannot be supported by the CASSR either following a formal Community Care Assessment or other eligibility criteria for short term support, and there is no universal service which will help them. Selecting this sequel should not be seen as reflecting negatively on the local authority but more as a statement about the type of request for support that was made.
<b>No services provided – needs identified but self-funding</b>	Clients for whom it can be identified that they or their carer(s) intend to purchase support privately.

Item	Definition
<b>Not in Paid Employment (not actively seeking work / retired)</b>	Utilised within the SALT collection this classification of employment relates to service users (at present learning disabled adults in age band 18-64) who are not in paid employment and who are not seeking work. In addition it includes clients who are aged 64 or under but have retired.
<b>Not in Paid Employment (seeking work)</b>	Utilised within the SALT collection, this classification of employment relates to clients who are not currently in paid employment but who are seeking work. The review or first assessment of a client with Learning Disabilities Support should allow determination of whether employment is being sought.
<b>Ongoing low level support</b>	<p>'Low level' long term support should be used where a CASSR is providing a minor, ongoing service such as the provision of a minicom line, but no other service needs have been identified. Such services will be based in the community.</p> <p>Daily living equipment which may or may not have ongoing costs for maintenance and safety checks also fits into this category.</p>
<b>Other temporary accommodation</b>	Utilised within SALT reporting of accommodation status, this category is intended to capture temporary accommodation that does not fit in with any of the other categories of temporary accommodation.
<b>Owner occupier</b>	Utilised within SALT reporting of accommodation status, this refers to individuals who both own and occupy their home (with or without a mortgage).
<b>Part Direct Payment</b>	Part Direct Payment describes a payment process where some of the support is given via the issue of monetary payments by CASSRs directly to adult clients. It differs from a Direct Payment as only some of the support comes through the provision of a cash payment or cash personal budget. This might be, for example, where a one-off payment is given to help a carer purchase some equipment and in addition, respite services are arranged by the council on an ongoing basis.
<b>Personal Budget</b>	Describes a mechanism of delivery of personalised care, with the following characteristics: the client (or their representative) has been informed about a clear, upfront allocation of funding, enabling them to plan their support arrangements. There is an agreed support plan making clear what outcomes are to be achieved with the money. The client (or their representative) can use the money in ways and at times of their choosing.
<b>Placed in temporary accommodation by the council</b>	Utilised within SALT reporting of accommodations status, this category describes accommodation commissioned by CASSRs as a short term solution, such as resettlement for the homeless.
<b>Planned entry</b>	See entry for 'Transition' below.
<b>Planned / unplanned reviews</b>	The SALT Guidance document contains detail on the definition of planned and unplanned reviews.

Item	Definition
<b>Primary Support Reason</b>	The Primary Support Reason describes why the individual requires social care support; the primary disability / impairment impacting on the individual's quality of life and creating a need for support and assistive care. The primary support reason should be identified and recorded at the point of assessment, and then any changes recorded during subsequent reviews. Examples and descriptions of the Primary Support Reason categories are provided earlier within this framework.
<b>Prison</b>	This has the same meaning as in the Prison Act 1952 (Section 53-1), and so does not include a naval or air force prison, nor approved premises.
<b>Prison / Young Offenders Institution / Detention Centre</b>	Utilised within SALT reporting of accommodation status, these categories describe custodial accommodation.
<b>Refuge</b>	Utilised within SALT reporting, this describes specialist accommodation for individuals at risk and in acute need, for example (but not limited to) accommodation specific to those at risk of domestic violence.
<b>Registered care home / registered nursing home</b>	Describes residential and nursing homes that provide health and social care services and are registered with the Care Quality Commission (CQC) under the <i>Health and Social Care Act 2008</i> .
<b>Reported Health Condition</b>	An illness, disability or condition affecting the client - and diagnosed by a healthcare professional - that contributes to the client's need for aid or services.
<b>Respite or Other Forms of Carer Support delivered to the cared-for person</b>	Utilised within the SALT collection, this is one of the classifications of support provided direct to carers. It is utilised if any support is delivered to the client for the benefit of the carer. Note that direct payments made to the client's account for carer support are NOT included here - they should already have been counted in the direct payment categories.
<b>Review</b>	<p>A review is an examination of an existing client's needs and services (the care plan where it exists); it must include a (formal) reassessment, irrespective of whether it was a scheduled or unscheduled review. A scheduled review may be undertaken at regular intervals or by a predetermined date. A review, to be valid for these returns, must have been carried out or commissioned by the CASSR.</p> <p>A review by an independent sector organisation, unless commissioned by the CASSR, is not valid for inclusion.</p>
<b>Rough sleeper / squatter</b>	Utilised within SALT reporting of accommodation status, this category describes accommodation where the individual is either homeless and not accessing any form of temporary accommodation (rough sleeper) or resides in a squat. This category is distinct from 'temporary accommodation for homeless people' and 'staying with family / friends as a short term guest'.
<b>Route of access</b>	The client's route of access, pathway, or source of referral to CASSR services.



Item	Definition
<b>Route of transition</b>	The organisation supporting the needs of young people who are transitioning to Adult Social Services, e.g. children's social services, educational institution, young offenders' institution.
<b>Self-funded clients</b>	Clients paying the full direct cost of the services they receive and not taking up any offer of support planning/care management (e.g. regular reviews) offered by the local authority.
<b>Separately with the cared-for person</b>	Utilised within the SALT collection, this classification is used to report the circumstances of the assessment of the carers needs. If there was no significant client involvement (e.g. where the carer specifically requests a separate assessment) then it should be counted under this classification.
<b>Sequel to request for support</b>	<p>This is the sequel identified as the result of an initial screening/assessment with the client/representative before any type of support is provided. This encompasses decisions to by-pass short term interventions and provided long term services immediately, as well as issuing equipment or signposting to universal or voluntary sector services.</p> <p>Note that this measure is about the sequels to requests for support and therefore the longer-term care pathways for these clients may not be known until much later. To be counted in this measure only the immediate sequel to the request need be known. Any clients whose request was made in the previous reporting year but where the response was only determined this year, should be included.</p>
<b>Sequel to review</b>	Immediate sequel of a review of long term support.
<b>Sequels to short term services</b>	This is the sequel identified as the result of a client receiving a short term service.
<b>Settled mainstream housing with family / friends (including flat sharing)</b>	Utilised within SALT reporting of accommodation status, this category describes housing where an individual lives with either their family or friends, but does not hold a formal tenancy agreement.
<b>Shared Lives scheme</b>	Formerly known as 'adult placement' Shared Lives offers people (predominantly those with a learning disability, but also older people and people with mental health problems) a flexible form of accommodation and person-centred support, which is provided by ordinary individuals or families (adult placement carers) in the local community.
<b>Shared ownership scheme</b>	Utilised within SALT reporting of accommodation status, this describes housing where the individual owns part of their home with the remainder being owned by a housing association. Rent is paid on the latter portion.
<b>Sheltered housing / extra care housing / other sheltered housing</b>	Utilised within SALT reporting of accommodation status, this category describes housing, typically provided in multiple property settings, where support is provided by a warden who may live-in or offsite. Additional support may be provided by the provision of telecare and / or alarm systems. Such care settings may also include communal areas accessible to all residents such as a residents lounge.



Item	Definition
<b>Short term support to maximise independence</b>	<p>Short term support to maximise independence is terminology introduced in the EQ-CL framework to describe a range of services that are of short duration (typically being provided for a few weeks) and that have the explicit aim of trying to minimise the person's use of ongoing social care services.</p> <p><i>Maximising independence</i> implies that the improved level of independence should continue after the service is removed. This distinguishes this care from ongoing support such as the provision of equipment and adaptations where the provision needs to remain in place to deliver the benefits for the client. At the end of the support a formal assessment will be undertaken to determine what will follow.</p>
<b>Short term support (OTHER)</b>	<p>All / any episodes of support provided that are intended to be time-limited without intending to maximise independence/reduce need for ongoing support.</p> <p>An example of this might be a short term intervention for a younger adult with impaired mobility recovering from an operation, and who is expected to make a full recovery without any additional 'reablement' type intervention.</p> <p>Emergency support provided for all new (including returning former clients) should be included in this category, while emergency support provided to existing clients should be excluded, as this will be part of ongoing Long Term support.</p>
<b>Significant event</b>	<p>An event in a person's life that has triggered an unplanned review of their social care needs. Examples include an unscheduled hospital episode and a change of residence.</p>
<b>Signposted to other services</b>	<p>Signposting indicates that the client cannot be supported by the CASSR either through a formal Community Care Assessment or other eligibility criteria for short term support, and there is no universal service which will help them. Details are therefore given of other organisations (e.g. in the voluntary sector) that might be able to provide assistance.</p>
<b>Staying with family / friends as a short term guest</b>	<p>Utilised within SALT reporting of accommodation status, this category describes temporary accommodation where the individual is staying with family or friends where the arrangement is of a short term, temporary nature and does not involve any form of tenancy or intention as a long term residence.</p>
<b>Support setting</b>	<p>Primary setting of services received by clients.</p>
<b>Support from carer</b>	<p>Whether the client is cared for or supported by another unpaid individual, or not.</p> <p>This includes support from family, friends and neighbours where the client has identified 'there is someone who helps me.' Paid care workers funded by direct payments or provided as part of a commissioned service are excluded.</p>
<b>Support to carer</b>	<p>This relates to a carer who is supported in their role as a carer. A carer who is receiving a service to primarily meet their own personal needs rather than to support them in their role as a carer should not have Support to Carer as their primary support reason.</p>

Item	Definition
<b>Supported accommodation / lodgings / group home</b>	<p>Utilised within SALT reporting of accommodation status, this category describes long term accommodation intended to provide support to individuals with social care needs who remain resident in the community as opposed to those within CQC registered residential or nursing care.</p> <p>Various types of support are offered with some residences being for a small group of residents, others for smaller numbers of residents. Support may be provided by resident care workers or on a shift basis. This type of accommodation is often characterised by the presence of tenancy-type arrangements between the provider and resident(s).</p>
<b>Supported living</b>	<p>Describes a method of delivery of social care, typically home care type services, to individuals within their own homes. It is characterised by flexibility in provision to best meet the individual's needs and wishes, rather than a traditional package of care which tends to be more prescriptive in terms of details of the care such as hours and visits.</p>
<b>Temporary accommodation for homeless people</b>	<p>Utilised within SALT reporting of accommodation status, this category describes temporary accommodation for the homeless such as shelters, refuges. Accommodation of this nature may be for as short a time as overnight or for slightly longer periods, but does not represent ongoing permanent housing provision.</p>
<b>Tenant (including local authority, arm's length management organisations, registered social landlord, housing association)</b>	<p>Utilised within SALT reporting of accommodation status, this category describes tenancies which are not held with a private landlord. A tenancy describes an arrangement where an individual rents a house owned by another individual or organisation.</p>
<b>Tenant (private landlord)</b>	<p>Utilised within SALT reporting of accommodation status, this category describes tenancies which are held with a private landlord. A tenancy describes an arrangement where an individual rents a house owned by another individual or organisation.</p>
<b>Transition</b>	<p>Describes the process of change for young people with disabilities as they move from childhood to adulthood. This period may involve additional interdisciplinary work and planning between involved agencies (for example: collaboration may occur between a children's social care service and an adult social care service within some CASSRs).</p>
<b>Transition assessment</b>	<p>The process of identifying and assessing the needs of a young person or young carer at the point of transition.</p>
<b>Universal services</b>	<p>Universal services describe community facilities and services available to everyone within their community such as transport, leisure, education, housing and access to information and advice.</p>
<b>Unknown</b>	<p>Utilised within SALT reporting of accommodation status, this category is utilised for individuals whose accommodation status cannot be identified.</p>

Item	Definition
<b>Working Age / Adults</b>	a) Those aged 18 to 64 years old inclusive.
<b>Young carer</b>	Someone under 18 with significant caring responsibilities. For SALT, this refers to someone under 18 with significant caring responsibilities for an adult.
<b>Young offender institution</b>	The youth custodial estate who may have catered for the needs of young people but where on leaving the institution, these needs must be met in some other way. This is a possible route of transition to Adult Social Care.

## Primary Support Reason: its classifications and sub-classes

There are six PSR categories; the section below gives descriptions and examples of them and their sub-classes.

### 1) Physical support

The classification Physical Support contains two sub-classes, with the intention of differentiating between support with access and mobility only and the more intensive support described as 'personal care support' (which includes support *with* access and mobility).

#### Access and Mobility Only

The sub-class of 'Access and Mobility Only' refers to services provided to allow clients to live as independently as possible and to perform day-to-day tasks. Examples of these could include:

- Getting in and out of chairs and beds
- Getting up and down stairs
- A 24-hour response service

#### Personal Care support

This sub-class may include support with access and mobility, and uses the following definition of personal care:

- a) *Physical assistance given to a person in connection with:*
- i. *Eating or drinking (including the administration of parenteral nutrition);*
  - ii. *Toileting (including in relation to menstruation);*
  - iii. *Washing or bathing;*
  - iv. *Dressing;*
  - v. *Oral care, and*
  - vi. *The care of skin, hair and nails (with the exception of nail care provided by a chiropodist or podiatrist), and*

- b) *Where needed the prompting and supervision of a person to do any of the types of personal care listed above, where that person is unable to make a decision for themselves in relation to performing such an activity without such prompting and supervision.*

## 2) Sensory support

The classification Sensory Support contains three sub-classes in order to differentiate between visual impairment, hearing impairment and dual sensory impairment.

### Support for Visual Impairment

These are services provided to assist clients living with visual impairment. Examples of the types of support offered could include:

- Rehabilitation
- Training in practical and coping skills
- Equipment and adaptations
- Mobility and safer travel

### Support for Hearing Impairment

These are services provided to assist clients with tasks that are made difficult because of hearing difficulties. As with visual impairment, examples of the types of support offered could include:

- Rehabilitation
- Training in practical and coping skills
- Equipment and adaptations

### Support for Dual Impairment

These are services for clients with a combination of hearing and visual impairments as defined above.

## 3) Support with Memory and Cognition

The classification Support with Memory and Cognition relates to support and services for clients with conditions affecting their thinking, knowing, awareness and remembering processes. The types of processes requiring support for the client, identified by the Alzheimer's Society as commonly affected in cognitive impairment, are:

- day-to-day memory
- planning
- language
- attention
- visuospatial skills ('visuo' referring to eyesight and 'spatial' referring to space or location), which give a person the ability to interpret objects and shapes

The degree of impairment requiring support can range from very subtle to very severe.

Support with Memory and Cognition is associated most often with conditions such as dementia or physical causes such as an acquired brain injury.

## 4) Learning Disability support

The classification Learning Disability Support should be utilised in relation to services provided to assist individuals with understanding new or complex information and learning and applying new skills. Learning Disability Support covers a very wide spectrum. The following list gives examples of types of support that could be included in this classification:

- help to keep safe and free from harm or neglect
- assistance to live independently
- support with social and educational activities
- help with communication
- support for work or training

An individual may have a learning disability but would not be recorded under Primary Support Reason 'Learning Disability support' if their primary reason for support identified at assessment is identified as falling under one of the other classifications.

### Learning Disability support

Learning Disability Support has one sub-class 'Learning Disability support' which acknowledges that given the wide range of support that could possibly be required, no further sub-classes are recommended for collection. CASSRs may wish to collect more detailed data within their own local recording.

## 5) Mental Health support

This classification covers a very wide range of support for mental health and mental illnesses. The following types of support provide illustrative examples of the type of care that may be provided. Councils and mental health partners will have a better understanding of local provision. EQ-CL is not prescriptive in this regard as we wish to capture the range of innovative care in this sector.

- Support with living independently in their own home, or having support to improve their home
- Support to go out, (perhaps with a personal assistant)
- Support to keep them motivated
- Someone to confide in, so they could talk over problems
- Support to travel independently

### Mental Health support

Mental Health Support has one sub-class 'Mental Health Support' which acknowledges that given the wide range of support that could possibly be required, no further sub-classes are recommended for collection. CASSRs may wish to collect more detailed data within their own local recording.

## 6) Social support

The classification Social Support covers a range of support arising from circumstances not referenced in the other classifications. There are sub-classes which are intended to capture support provided for distinct areas of social care provision.

### Substance Misuse support

These are services or interventions for clients who have regular and problematic intoxication through excessive consumption of and / or dependence on psychoactive substances. It includes the use of both legal and illegal drugs and includes alcohol.

Examples of the types of services offered for substance misuse include:

- Community drug & alcohol services
- Rehabilitation
- Harm reduction interventions

### Asylum Seeker Support

These are services or interventions for registered asylum seekers.

Examples of the types of support offered to asylum seekers could include:

- Supported access to health, housing or education services
- Language/interpreter support
- Providing Advice & Information
- Access to legal advice

### Support for Social Isolation / Other

This includes support provided with the intention of reducing the social isolation of individuals, such as sitting and befriending services.

This sub-class should also be used to capture any support services that do not easily sit within any other primary support reason sub-classes. It is not anticipated that many clients will be reported within this sub-class.

## Related Publications

This publication can be downloaded from the NHS Digital website at

<http://content.digital.nhs.uk/pubs/commcaressa1516>

Publications relating to social care activity, finance, staffing and user experience surveys can be found from the Adult Social Care publication page of the NHS Digital website at

<http://content.digital.nhs.uk/socialcare/collections>

### Last year's publication

*“Community Care Statistics: Social Services Activity, England – Councils with Adult Social Services Responsibilities tables, final, 2014-15”* is available at

<http://content.digital.nhs.uk/catalogue/PUB18663>

### Adult Social Care Outcomes Framework (ASCOF)

The 2014-15 final report, *“Measures from the Adult Social Care Outcomes Framework, England, 2014-15, Final Release”* is available at

<http://content.digital.nhs.uk/catalogue/PUB18657>

### Other Social Care Reports

*“Personal Social Services: Expenditure and Unit Cost, England, 2014-15, Provisional Release [NS]”* is available at

<http://content.digital.nhs.uk/catalogue/PUB18445>

*“Personal Social Services Adult Social Care Survey, England, 2014-15, Final Release”* is available at

<http://content.digital.nhs.uk/catalogue/PUB18642>

*“Personal Social Services Survey of Adult Carers in England, 2014-15, Final”* is available at

<http://content.digital.nhs.uk/catalogue/PUB18423>

*“Personal Social Services Staff of Social Services Departments at 30 September 2014, England. [NS]”* is available at

<http://content.digital.nhs.uk/catalogue/PUB16834>

*“Safeguarding Adults in England 2014-15: Experimental Statistics, Final Report”* is available at

<http://content.digital.nhs.uk/catalogue/PUB18869>

*“Guardianship under the 1983 Mental Health Act, England, 2014-15”* is available at

<http://content.digital.nhs.uk/catalogue/PUB18009>



*“Mental Capacity Act 2005, Deprivation of Liberty Safeguards, England, Annual Report 2014-15”* is available at

<http://content.digital.nhs.uk/catalogue/PUB18577>

*“Registered Blind and Partially Sighted People, England, Year ending 31 March 2014”* is available at

<http://content.digital.nhs.uk/catalogue/PUB14798>

### **Data for Child Social Services**

Information on social care for children is available at

<https://www.gov.uk/childrens-services/childrens-social-care>

### **Data for the UK**

Information within this report relates to England data, similar publications for Wales, Scotland and Northern Ireland can be found via the following links:

#### ***The Welsh Assembly Government***

<http://wales.gov.uk/topics/health/publications/socialcare/reports/?lang=en>

#### ***The Scottish Government***

<http://www.scotland.gov.uk/Publications/Recent>

#### ***Department of Health, Northern Ireland***

<https://www.health-ni.gov.uk/publications>

## **Further Information**

### **Comments**

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