

# Assessment of compliance with the Code of Practice for Official Statistics

## Statistics on Adult Social Care in England

*(produced by the Health and Social Care Information  
Centre)*

© Crown Copyright 2012

The text in this document may be reproduced free of charge in any format or medium providing it is reproduced accurately and not used in a misleading context. The material must be acknowledged as Crown copyright and the title of the document specified.

Where we have identified any third party copyright material you will need to obtain permission from the copyright holders concerned.

For any other use of this material please write to Office of Public Sector Information, Information Policy Team, Kew, Richmond, Surrey TW9 4DU or email: [licensing@opsi.gov.uk](mailto:licensing@opsi.gov.uk)

### **About the UK Statistics Authority**

The UK Statistics Authority is an independent body operating at arm's length from government as a non-ministerial department, directly accountable to Parliament. It was established on 1 April 2008 by the *Statistics and Registration Service Act 2007*.

The Authority's overall objective is to promote and safeguard the production and publication of official statistics that serve the public good. It is also required to promote and safeguard the quality and comprehensiveness of official statistics, and good practice in relation to official statistics.

The Statistics Authority has two main functions:

1. oversight of the Office for National Statistics (ONS) – the executive office of the Authority;
2. independent scrutiny (monitoring and assessment) of all official statistics produced in the UK.

### **Contact us**

Tel: 0845 604 1857

Email: [authority.enquiries@statistics.gsi.gov.uk](mailto:authority.enquiries@statistics.gsi.gov.uk)

Website: [www.statisticsauthority.gov.uk](http://www.statisticsauthority.gov.uk)

UK Statistics Authority  
1 Drummond Gate  
London  
SW1V 2QQ

# **Assessment of compliance with the Code of Practice for Official Statistics**

## **Statistics on Adult Social Care in England**

*(produced by the Health and Social Care Information Centre)*

## ASSESSMENT AND DESIGNATION

The *Statistics and Registration Service Act 2007* gives the UK Statistics Authority a statutory power to assess sets of statistics against the *Code of Practice for Official Statistics*.

Assessment will determine whether it is appropriate for the statistics to be designated as National Statistics.

Designation as National Statistics means that the statistics comply with the *Code of Practice*. The *Code* is wide-ranging. Designation can be interpreted to mean that the statistics: meet identified user needs; are produced, managed and disseminated to high standards; and are explained well.

Designation as National Statistics should not be interpreted to mean that the statistics are always correct. For example, whilst the *Code* requires statistics to be produced to a level of accuracy that meets users' needs, it also recognises that errors can occur – in which case it requires them to be corrected and publicised.

Assessment reports will not normally comment further on a set of statistics, for example on their validity as social or economic measures. However, reports may point to such questions if the Authority believes that further research would be desirable.

Assessment reports typically provide an overview of any noteworthy features of the methods used to produce the statistics, and will highlight substantial concerns about quality. Assessment reports also describe aspects of the ways in which the producer addresses the 'sound methods and assured quality' principle of the *Code*, but do not themselves constitute a review of the methods used to produce the statistics. However the *Code* requires producers to "seek to achieve continuous improvement in statistical processes by, for example, undertaking regular reviews".

The Authority may grant designation on condition that the producer body takes steps, within a stated timeframe, to fully meet the *Code's* requirements. This is to avoid public confusion and does not reduce the obligation to comply with the *Code*.

The Authority grants designation on the basis of three main sources of information:

- i. factual evidence and assurances by senior statisticians in the producer body;
- ii. the views of users who we contact, or who contact us, and;
- iii. our own review activity.

Should further information come to light subsequently which changes the Authority's analysis, it may withdraw the Assessment report and revise it as necessary.

It is a statutory requirement on the producer body to ensure that it continues to produce the set of statistics designated as National Statistics in compliance with the *Code of Practice*.

# Contents

Section 1: Summary of findings

Section 2: Subject of the assessment

Section 3: Assessment findings

Annex 1: Suggestions for improvement

Annex 2: Compliance with Standards for Statistical Releases

Annex 3: Summary of assessment process and users' views

# 1 Summary of findings

## 1.1 Introduction

1.1.1 This is one of a series of reports<sup>1</sup> prepared under the provisions of the *Statistics and Registration Service Act 2007*<sup>2</sup>. The Act requires all statistics currently designated as National Statistics to be assessed against the *Code of Practice for Official Statistics*<sup>3</sup>. The report covers the set of adult social care statistics<sup>4</sup> produced by the Health and Social Care Information Centre (HSCIC):

- *Community Care Statistics: Social Services Activity, England – provisional (Activity (p))*;
- *Community Care Statistics: Social Services Activity, England – final (Activity)*;
- *Personal Social Services Expenditure and Unit Costs – provisional (Expenditure (p))*;
- *Personal Social Services Expenditure and Unit Costs – final (Expenditure)*;
- and
- *Registered Blind and Partially Sighted People (RBPS)*.

1.1.2 The Act also allows departments to request an assessment of other official statistics in order for them to gain National Statistics status. In response to such a request this report also covers the sets of official statistics<sup>5</sup> reported in:

- *Personal Social Services Adult Social Care Survey, England – provisional (ASC (p))*;
- *Personal Social Services Adult Social Care Survey, England – final (ASC)*;
- and
- *Personal Social Services: Staff of Social Services Departments, England (Staff)*.

1.1.3 Section 3 of this report adopts an ‘exception reporting’ approach – it includes text only to support the Requirements made to strengthen compliance with the *Code* and Suggestions made to improve confidence in the production, management and dissemination of these statistics. This abbreviated style of report reflects the Head of Assessment’s consideration of aspects of risk and materiality<sup>6</sup>. The Assessment team nonetheless assessed compliance with all parts of the *Code of Practice* and has commented on all those where some remedial action is recommended.

1.1.4 This report was prepared by the Authority’s Assessment team, and approved by the Board of the Statistics Authority on the advice of the Head of Assessment.

---

<sup>1</sup> <http://www.statisticsauthority.gov.uk/assessment/assessment-reports/index.html>

<sup>2</sup> [http://www.opsi.gov.uk/Acts/acts2007/pdf/ukpga\\_20070018\\_en.pdf](http://www.opsi.gov.uk/Acts/acts2007/pdf/ukpga_20070018_en.pdf)

<sup>3</sup> <http://www.statisticsauthority.gov.uk/assessment/code-of-practice/index.html>

<sup>4</sup> <http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information>

<sup>5</sup> As footnote 4

<sup>6</sup> <http://www.statisticsauthority.gov.uk/assessment/assessment/guidance-about-assessment/criteria-for-deciding-upon-the-format-of-an-assessment-report.pdf>

## **1.2 Decision concerning designation as National Statistics**

- 1.2.1 The Statistics Authority judges that the statistics covered by this report are readily accessible, produced according to sound methods and managed impartially and objectively in the public interest, subject to any points for action in this report. The Statistics Authority confirms that the statistics published in *Activity*, *Activity (p)* and *Staff* can be designated as National Statistics.
- 1.2.2 The Statistics Authority further confirms that the statistics published in *Expenditure*, *Expenditure (p)* and *RBPS* are designated as National Statistics, subject to HSCIC implementing the enhancements listed in section 1.5 and reporting them to the Authority by August 2012, and has determined that the statistics published in *ACS* and *ACS (p)* can be designated as new National Statistics products, subject to HSCIC implementing the enhancements listed in section 1.5 and reporting them to the Authority by December 2012.
- 1.2.3 HSCIC has informed the Assessment team that it has started to implement the Requirements listed in section 1.5. The Statistics Authority welcomes this.

## **1.3 Summary of strengths and weaknesses**

- 1.3.1 HSCIC has undertaken a comprehensive review of information needs relating to adult social care and has published the outcomes of the associated consultations. It has established a web service to support the use of the wide range of statistics about adult social care by practitioners, researchers and other interested users.
- 1.3.2 The adult social care statistical releases provide detailed commentary, supported by summary charts and tables. The statistics are accompanied by some background and contextual information. The releases also provide detailed explanatory information, for example, describing issues affecting data collection and completeness and the reliability of the statistics.
- 1.3.3 HSCIC has developed a new Adult Social Care Survey to capture the views of service users. While ASC set out some ways that HSCIC attempted to minimise bias, it has not sufficiently addressed the challenges of collecting data from this group of vulnerable respondents.

## **1.4 Detailed recommendations**

- 1.4.1 The Assessment team identified some areas where it felt that HSCIC could strengthen its compliance with the *Code*. Those which the Assessment team considers essential to enable designation as National Statistics are listed in section 1.5. Other suggestions, which would improve the statistics and the service provided to users but which are not formally required for their designation, are listed at annex 1.

## 1.5 Requirements for designation as National Statistics

- Requirement 1** Provide an explanation of the nature and extent of revisions in *Expenditure* at the same time that they are released (para 3.1).
- Requirement 2** Extend the information about the quality of the statistics provided in *Expenditure* (para 3.2).
- Requirement 3** a) Take steps to minimise the impact of possible sources of bias on the statistics produced from the ASCS and publish information about the steps taken; and b) publish estimates of the main sources of bias (para 3.3).
- Requirement 4** Publish evidence to demonstrate the validity of the questions used in the ASCS and make clear the strengths and limitations of the statistics in relation to use (para 3.4).
- Requirement 5** Improve the commentary in *RBPS* so that it aids user interpretation of the statistics (para 3.6).

## 2 Subject of the assessment

- 2.1 The Health and Social Care Information Centre (HSCIC, formerly known as the NHS Information Centre for Health and Social Care (NHS IC)) is responsible for publishing statistics on different aspects of adult social care services across England. *Community Care Statistics: Social Services Activity, England (Activity)*, *Personal Social Services Expenditure and Unit Costs (Expenditure)* and *Personal Social Services: Staff of Social Services Departments, England (Staff)* present information about spending and staff resources for the 152 Councils with Adult Social Services Responsibilities<sup>7</sup> (CASSRs). Adult social care has fallen within the statutory remit of these local authorities<sup>8</sup> since the *National Assistance Act 1948*<sup>9</sup>. *Registered Blind and Partially Sighted People (RBPS)* presents statistics about people registered as blind or partially sighted, and *Personal Social Services Adult Social Care Survey, England (ASC)* reports on the experiences of adult social care service users collected in an opinion survey. HSCIC also publishes statistics from a survey<sup>10</sup> of carers in households which was the subject of an earlier Assessment<sup>11</sup>. It previously published information based on the registration of people who are deaf or hard of hearing<sup>12</sup> but ended this following a consultation<sup>13</sup> with users of the statistics in 2011. This decision was the subject of a Statistical Expenditure Report<sup>14</sup> by the Authority.
- 2.2 *Activity* provides statistics for England and by CASSRs on the numbers of people being referred for services, having their needs assessed and the type of care provided, based on data from two returns completed by CASSRs. *Activity* includes the number of adults receiving care in the community – living in their own homes – and the numbers receiving residential care. It also gives information about the support provided to carers. Information has been collected about residents supported in care homes since 1993/94, and on referrals and assessments for care since 1999/2000. However, changes to the returns mean that the statistics prior to 2004/05 are not directly comparable with subsequent figures. HSCIC releases a provisional version of the report in November, with headline results relating to the previous financial year. The main report is published in the following March.
- 2.3 *Expenditure* gives statistics on the money spent on adult social care for England and by CASSRs. It gives the expenditure in cash terms and real terms (adjusting for inflation) with statistics presented by client group and type of

---

<sup>7</sup> <http://www.adass.org.uk/>

<sup>8</sup> Unitary Authorities (55); Metropolitan Boroughs (36); London Boroughs (32); County Councils (27); the City of London Corporation; and the Council of the Isles of Scilly

<sup>9</sup> <http://www.legislation.gov.uk/ukpga/Geo6/11-12/29/contents>

<sup>10</sup> <http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/survey-of-carers-in-households--2009-10-england>

<sup>11</sup> Assessment report 90: <http://www.statisticsauthority.gov.uk/assessment/assessment/assessment-reports/index.html>

<sup>12</sup> <http://www.ic.nhs.uk/statistics-and-data-collections/social-care/adult-social-care-information/people-registered-deaf-or-hard-of-hearing--year-ending-31-march-2010-in-england>

<sup>13</sup> <http://www.ic.nhs.uk/services/social-care/news-and-events/consultation-on-national-adult-social-care-data-developments>

<sup>14</sup> Adult Social Care Statistics: <http://www.statisticsauthority.gov.uk/assessment/monitoring/statistical-expenditure-reports/index.html>

service provision (such as expenditure on residential care for older people). It also provides information about the grants provided by CASSRs to other independent sector agencies and the average unit costs<sup>15</sup> for England, for example, of nursing care for older people, and of residential care or home care, per person per week. Changes to CASSRs' accounting and recording practices affect the measurement of capital charges and the comparability of total cost over time. However a comparable time series is published for gross and net current expenditure from 1994/95 as these are unaffected by these changes. As for *Activity*, HSCIC publishes a provisional version of the report in November, followed by the main report in March.

- 2.4 *Staff* presents information about the numbers and characteristics of staff employed directly or indirectly by adult social services departments in the CASSRs in England. The statistics are derived from the National Minimum Data Set for Social Care<sup>16</sup>. The data have been collected from CASSRs on behalf of the Department of Health since 2006 by Skills for Care<sup>17</sup>. Published annually in March, it is based on data extracted in the September of the previous year. The Minimum Data Set replaced the return supplied by CASSRs as the data source for *Staff* in September 2011, following a public consultation<sup>18</sup>. In autumn 2010 the Strategic Improving Information Programme<sup>19</sup> launched a major review of adult social care data needs which supported the alignment of national data collection with service developments across the sector. This has now been replaced by the Outcomes and Information Board which has a similar remit in terms of national data collections.
- 2.5 *RBPS* is compiled from data submitted triennially by CASSRs from their registers of blind and partially sighted people. Registration with the CASSRs is voluntary but a person's registration as blind is a pre-condition for their receipt of certain financial benefits. The statistics give a count of the people on the registers by age group and the number of new registrations. Statistics are also given about those with additional conditions such as learning disabilities.
- 2.6 The Adult Social Care Survey (ASCS) was developed to help improve understanding of how well services overall meet user needs; it was run for the first time in 2010-11. Statistics from the survey are used at a local level to monitor and develop services and service standards. ASC reports the experiences of older people in residential care or living at home, as well as people receiving support for substance misuse, mental health conditions or learning disabilities. ASC is published annually in December; the statistics relate to the previous financial year. In November 2010 HSCIC commissioned the Office for National Statistics' (ONS) Methodology Advisory Service (MAS) to

---

<sup>15</sup> On the basis of gross total cost – that is including capital charges and before deducting clients' contributions

<sup>16</sup> <http://www.nmds-sc-online.org.uk/>

<sup>17</sup> <http://www.skillsforcare.org.uk/home/home.aspx>

<sup>18</sup> <http://www.ic.nhs.uk/services/social-care/news-and-events/social-care-workforce-information-consultation>

<sup>19</sup> Chaired by the Department of Health and the Association of Directors of Adult Social Services, with representation from HSCIC, Care Quality Commission and the Local Government Association

review<sup>20</sup> the survey methodology and questionnaire. The ASCS survey group published its response<sup>21</sup> to the recommendations.

- 2.7 The adult social care statistics are used by central government and the Care Quality Commission<sup>22</sup> to monitor the impact of social care policy and by local authorities to assess their performance in relation to their peers. *Activity* was used to inform the Commission of Funding of Care and Support published in July 2011<sup>23</sup>. Researchers also often look at CASSR performance, while service users and the public use the statistics to hold councils and government to account. HSCIC has established the National Adult Social Care Intelligence Service<sup>24</sup>, providing a range of resources to support the analysis of adult social statistics. It is open to all interested users but is primarily used by local authorities, NHS practitioners and researchers. *RBPS* statistics are used by the Advisory Group for Certifiable Visual Impairment Data and Information Management<sup>25</sup>.
- 2.8 The total costs to the HSCIC<sup>26</sup> of collecting and validating the returns and disseminating the statistics are estimated to be £378,000 (approximately 57 per cent for *Activity*, 28 per cent for *Expenditure*, 10 per cent for *Staff* and 5 per cent for *RBPS*). The cost of producing *ASC* is £150,000; this excludes the CASSRs' survey costs.
- 2.9 The Assessment team conducted this assessment mainly during the period that HSCIC was preparing the statistical releases. We were shown draft versions of several of the reports and we provided feedback to the producers on issues relating to compliance with the *Code*, so that the producers were able to address a number of issues in the published reports.

---

<sup>20</sup> <http://www.ic.nhs.uk/webfiles/Services/Social%20care/SSUG/16-02-11/Paper%204%20-%20ONS%20Review%20of%20Methodology%20for%20Adult%20Social%20Care%20Survey.pdf>

<sup>21</sup>

[http://www.ic.nhs.uk/webfiles/Services/Social%20care/SSUG/SSUSG\\_Response\\_to\\_ONS\\_Review.pdf](http://www.ic.nhs.uk/webfiles/Services/Social%20care/SSUG/SSUSG_Response_to_ONS_Review.pdf)

<sup>22</sup> <http://www.cqc.org.uk/public/news/our-third-state-care-report-published>

<sup>23</sup> <http://www.dilnotcommission.dh.gov.uk/our-report/>

<sup>24</sup> <https://nascis.ic.nhs.uk/>

<sup>25</sup> <http://ecvi.moorfields.nhs.uk/>

<sup>26</sup> This includes a cost of £5,000 to Skills for Care for assisting with production of the Staffing report but excludes CASSRs compliance costs.

### 3 Assessment findings

- 3.1 HSCIC publishes *Expenditure*, *Activity* and *ASC* in a provisional form, superseded several months later by final releases. Following advice from the Assessment team HSCIC provided explanations in *Activity* and *ASC* in an annex; however, *Expenditure* does not give the reason for the revisions, nor impact of the revisions on the statistics. As part of the designation as National Statistics, HSCIC should provide an explanation of the nature and extent of revisions in *Expenditure* at the same time that they are released<sup>27</sup> (Requirement 1). We suggest that HSCIC give the explanation for the revisions in *Activity* and *ASC* greater prominence in the releases, for example, by referring to the reasons for revisions in the executive summary.
- 3.2 Each of the releases, including the provisional releases, presents background information about the methods used to produce the statistics and their quality in an annex using the European Statistical System dimensions of quality<sup>28</sup>. Following advice from the Assessment team HSCIC provided comprehensive information in *Activity* and *Staff* about the completeness of the CASSR data returns, and methods used to estimate missing information, such as incomplete returns on the total number of jobs. *Expenditure* gives some information about the various changes made to the data collection returns and the methods used to estimate missing information. However fuller information could be given on the nature of the estimation methods and the impact of estimation on the statistics, as well as on the additional checks on the councils' expenditure data carried out by the Chartered Institute for Public Finance and Accountancy (CIPFA). As part of the designation as National Statistics, HSCIC should extend the information about the quality of the statistics provided in *Expenditure*<sup>29</sup> (Requirement 2).
- 3.3 *ASC* describes the quality of the statistics in relation to their use by CASSRs in monitoring performance against the Adult Social Care Outcomes Framework. It sets out some forms of potential bias and the steps taken by HSCIC to assure the quality of the survey data from CASSRs. HSCIC provides a guidance document to CASSRs on the way that the surveys should be run, highlighting mode issues<sup>30</sup> and emphasising self-completion wherever possible. It advises against the completion of questionnaires by the service user's own care worker but supports assistance from someone who knows the client well. The exception to this is if the service user is resident in a care home (research carried out during the survey development had shown that the care home staff were instrumental in ensuring that the questionnaires sent to residents were completed). *ASC* presents information about the proportion of respondents that received help from others to complete the questionnaire and whether that

---

<sup>27</sup> In relation to Principle 2, Practice 6 of the *Code of Practice*

<sup>28</sup> Relevance, accuracy, timeliness and punctuality, accessibility and clarity, comparability and coherence

<sup>29</sup> In relation to Principle 4, Practice 2 and Principle 8, Practice 1 of the *Code of Practice*

<sup>30</sup> Research evidence suggests responses to survey questions may differ between modes of data collection. Mode is more than the distinction between undertaking a survey face-to-face, by telephone or self-completion. It is a combination of a number of factors, including question characteristics (such as format, difficulty and sensitivity, and aural or visual presentation), respondent characteristics, and whether or not an interviewer is present during the interview.

<http://survey methodology.eu/conferences/lausanne-2011/sessions/257/>

person was their care worker. Around two thirds of respondents received help from another person. For 16 per cent of the service users, the help was from their care worker (mainly due to care home residents receiving help from staff). HSCIC identifies one possible source of bias as being the care workers unduly influencing the service users to respond more positively than they would otherwise. HSCIC attempted to address these concerns by emphasising in the questionnaire that the results would not be used for inspection purposes. It also compared the levels of satisfaction of residents by care home inspection ratings; these were found to be broadly in line. However, other sources of bias – social desirability<sup>31</sup> and satisficing<sup>32</sup> (which partly reflect the respondent's ability and motivation, as well as the presence or absence of an interviewer or helper) – highlighted by MAS in its review of the survey method (see paragraph 2.6) are not adequately addressed. This review states that the need to use a mixed mode system (both self and interviewer administered) for this survey is clear. MAS also recommended that guidance be provided regarding the assistance interviewers can provide – this guidance also being provided to people assisting with self-completion. HSCIC does not make clear whether those assisting with the self-completion received guidance. As part of the designation as National Statistics, HSCIC should a) take steps to minimise the impact of possible sources of bias on the statistics produced from the ASCS and publish information about the steps taken; and b) publish estimates of the main sources of bias<sup>33</sup> (Requirement 3).

- 3.4 The ASCS includes some double questions<sup>34</sup>. MAS recommended that these questions be revised as subjects may feel differently about the two aspects. The survey group chose not to revise the questions as ASCOT indicators<sup>35</sup> would be affected. The indicators are combined to produce a composite outcome measure, the Social Care Related Quality of Life. This measure is part of the Government's *Adult Social Care Outcomes Framework*<sup>36</sup>, which supports local benchmarking for CASSRs with social responsibilities. As part of the designation as National Statistics, HSCIC should publish evidence to demonstrate the validity of the questions used in the ASCS and make clear the strengths and limitations of the statistics in relation to use<sup>37</sup> (Requirement 4).
- 3.5 *RBPS* includes information about the coherence with certification statistics and provides links to statistics for the other UK countries. We understand that the Scottish Government is undertaking a review of its Registered Blind and

---

<sup>31</sup> Social desirability – when respondents give answers that they believe are more favourable or positive eg projecting a good image of self to interviewer/researchers, wanting to please/not wanting to offend care providers, not wanting to worry relatives

<sup>32</sup> Satisficing – when respondents minimise their cognitive effort in answering survey questions, for example through acquiescence, selecting the first choice that appears reasonable, endorsing the status quo instead of change, selecting 'don't know' instead of expressing an opinion, avoiding responses that might prompt follow up questions

<sup>33</sup> In relation to Principle 4, Practices 1 and 2 of the *Code of Practice*

<sup>34</sup> For example: 'Thinking about your personal care, by which we mean being clean and presentable in appearance, which of the following statements best describes your situation?' 1: 'I feel clean and am able to present myself the way I like'; 2: 'I feel adequately clean and presentable'; 3: 'I feel less than adequately clean or presentable'; 4: 'I don't feel at all clean or presentable'

<sup>35</sup> ASCOT – Adult Social Care Outcomes Toolkit: <http://www.pssru.ac.uk/ascot/>

<sup>36</sup> [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_133334](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_133334)

<sup>37</sup> In relation to Principle 4, Practices 1 and 2 of the *Code of Practice*

Partially Sighted Statistics which includes a comparison with the statistics for the other UK countries. We suggest that HSCIC consider this report when available and include information on comparability with the equivalent statistics for the other UK countries in *RBPS*.

- 3.6 Each of the final releases consists of commentary supported by summary charts and tables. The provisional releases present a summary of the main findings from the statistics, supported by detailed background information. HSCIC provides some contextual information for the social care statistics. Following advice from the Assessment team HSCIC expanded the contextual information in *Activity*, *Expenditure* and *Staff* to describe the uses and broader social care setting of the statistics. *RBPS* states that the statistics are based on registration information held by CASSRs but it gives only general explanations of how these statistics are used by local or central government; more detailed information about use by the voluntary sector is presented in an annex. *RBPS* highlights a fall in the numbers of registrations but does not provide any comment on the factors that might have led to the fall. As part of the designation as National Statistics, HSCIC should improve the commentary in *RBPS* so that it aids user interpretation of the statistics<sup>38</sup> (Requirement 5). We suggest that HSCIC consider the points detailed in Annex 2 for ways of further improving the presentation of the statistics.

---

<sup>38</sup> In relation to Principle 8, Practice 2 of the *Code of Practice*

## Annex 1: Suggestions for improvement

A1.1 This annex includes some suggestions for improvement to HSCIC’s adult social care statistics, in the interest of the public good. These are not formally required for designation, but the Assessment team considers that their implementation will improve public confidence in the production, management and dissemination of official statistics.

- |                     |                                                                                                                                                                                                                                                    |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Suggestion 1</b> | Give the explanation for the revisions in <i>Activity</i> and <i>ASC</i> greater prominence in the releases, for example, by referring to the reasons for revisions in the executive summary (para 3.1).                                           |
| <b>Suggestion 2</b> | Consider the Scottish Government’s <i>Review of Registered Blind and Partially Sighted Statistics</i> when available and include information on comparability with the equivalent statistics for the other UK countries in <i>RBPS</i> (para 3.5). |
| <b>Suggestion 3</b> | Consider the points detailed in Annex 2 for ways of further improving the presentation of the statistics (para 3.6).                                                                                                                               |

## **Annex 2: Compliance with Standards for Statistical Releases**

- A2.1 In October 2010, the Statistics Authority issued a statement on *Standards for Statistical Releases*<sup>39</sup>. While this is not part of the *Code of Practice for Official Statistics*, the Authority regards it as advice that will promote both understanding and compliance with the *Code*. In relation to the statistical releases associated with HSCIC's adult social care statistics, this annex comments on compliance with the statement on standards.
- A2.2 In implementing any Requirements of this report (at paragraph 1.5) which relate to the content of statistical releases, we encourage the producer body to apply the standards as fully as possible.

### **Appropriate identification of the statistics being released**

- A2.3 Each of the releases has a title that reflects the coverage and reference period of the statistics. ASC uses the name of the survey as its title; however, it would be more accurate to label it as a report presenting statistics from the survey. The releases include the logos for National Statistics and for the organisation. The introductions make clear the frequency of the releases. The name of the responsible statistician and contact information is given at the rear of each release. Each release includes an outline of its content, including the information given in the appendices.

### **Include commentary that is helpful to the non-expert and presents the main messages in plain English**

- A2.4 Each release (including the provisional releases) has a summary that appropriately outlines the main findings. The language in each release is straightforward, with explanations of the main terms. The releases focus on the changes in the measures over time. These are supported by analyses by characteristics of the service users, such as age, ethnicity, type of disability, and dimensions of care, such as type of service and referral status. The descriptions in the final releases are supported by clear summary charts and tables. *Activity*, *Expenditure*, *Staff* and *ACS* each have a helpful summary that describes the basis for the report and explains the main findings by bringing together information across the report.

### **Use language that is impartial, objective and professionally sound**

- A2.5 The commentary in each release is impartial and evidence-based. ASC does not sufficiently describe the main sources of potential bias. It also has no discussion of the highly skewed distribution of the Social Care Related Quality of Life measure (the main benchmark for comparing CASSRs) and the impact on the statistics.

---

<sup>39</sup> <http://www.statisticsauthority.gov.uk/news/standards-for-statistical-releases.html>

## **Include information about the context and likely uses**

A2.6 Most of the releases include some description of relevant policy and operational issues. For example, *Staff* refers to the shift from CASSR-provided care towards out-sourced care which affects direct staffing levels. *ASC* sets out the social care policy context and how the statistics will be used nationally and locally. *Activity* places the CASSR-supported care in the context of the care paid for privately from other providers. It also highlights that responsibility for child services lies with the Department for Education and provides a link to its statistics. *RBPS* gives information from several voluntary sector organisations about their uses of the statistics; however, little information is given about use of the registration statistics by central and local government. *RBPS* does not sufficiently explain the policy and operational context for the statistics. For example, *RBPS* could set out what benefits are associated with registration and certification and whether there have been any changes; how many of these benefits are universal and how many at the discretion of the CASSRs. It would also be helpful for the statistics to be set in the context of estimates of the population, such as from government surveys.

## **Include, or link to, appropriate metadata**

A2.7 Each release (including the provisional releases) has a data quality document that summarises quality issues. Each of the reports also includes an appendix with information about data collection, including any changes to the returns, and quality issues. Most of the releases give at least a broad indication of the completeness of the CASSR returns and the data quality. *Expenditure* explains the quality assurance process and highlights that estimation is used but gives no information of the impact on or the reliability of the statistics. *RBPS* explains the limitations of the statistics in relation to voluntary registration. *ASC* provides overall response rates, as well as for different client groups. It also gives confidence intervals for the council level statistics, together with an explanation of what they mean. It outlines the steps taken to investigate one potential source of bias.

A2.8 The releases provide links to other relevant information, including links to similar statistics for the devolved administrations.

A2.9 HSCIC releases provisional statistics for most of the releases which it explains are superseded by the final statistics published in the main reports. *Expenditure* doesn't explain whether there have been changes in the statistics or the nature and extent of the revisions. *ASC* and *Activity* provide explanations for the revisions in the background material at the rear of the reports.

## Annex 3: Summary of assessment process and users' views

A3.1 This assessment was conducted from September 2011 to April 2012.

A3.2 The Assessment team – Celia Macintyre, Penny Babb and Iain Russell – agreed the scope of and timetable for this assessment with representatives of HSCIC in September. The Written Evidence for Assessment was provided on 20 September. The Assessment team subsequently met HSCIC during November to review compliance with the *Code of Practice*, taking account of the written evidence provided and other relevant sources of evidence.

### Summary of users contacted, and issues raised

A3.3 Part of the assessment process involves our consideration of the views of users. We approach some known and potential users of the set of statistics, and we invite comments via an open note on the Authority's website. This process is not a statistical survey, but it enables us to gain some insights about the extent to which the statistics meet users' needs and the extent to which users feel that the producers of those statistics engage with them. We are aware that responses from users may not be representative of wider views, and we take account of this in the way that we prepare Assessment reports.

A3.4 The Assessment team received 15 responses from the user consultation. The respondents were grouped as follows:

Local authority data suppliers	7
Central government	4
Academia	2
Voluntary sector	1
NHS	1

A3.5 User and data supplier feedback was mainly positive displaying a large degree of consistency about the ways in which the statistics are used and the helpfulness of the statistics team. Some typical comments were that the publications are 'user-friendly' and provide an 'easily digested summary'.

A3.6 Some data suppliers reported that the data required for some returns was out of step with the new approach to the provision of social care. These changes in approach can result in some data suppliers having to convert their internal data into a format which satisfies HSCIC's requirements. There were suggestions for more and better guidance about some data returns that might help moderate some of the differences between LAs in their compilation of the data. Some users found difficulties in accessing the publications. Some users also reported that they would like the statistics to be available more frequently and in a more timely manner.

### Key documents/links provided

Written Evidence for Assessment document





