Adult Social Care Activity and Finance: Data Quality Statement

England, 2017-18

Published 23 October 2018

Information and technology for better health and care

Contents

Purpose

This data quality report aims to provide users with an evidence-based assessment of the quality of the 2017-18 statistical output from the Short and Long Term (SALT) activity collection and the Adult Social Care Finance Return (ASC-FR), reporting against the nine European Statistical System (ESS) quality dimensions.

It provides final 2017-18 information for Adult Social Care activity and expenditure in England on adults aged 18 and over for Councils with Adult Social Services Responsibilities (CASSRs) - referred to throughout this report as local authorities for ease of reading. The data are derived from the SALT and ASC-FR returns which local authorities in England submitted to NHS Digital.

This report provides information on the known data quality issues within the 2017-18 Adult Social Care Activity and Finance report and accompanying data, to allow the reader and users of the data to understand any limitations of the data. This document should be used in conjunction with the publication's data quality summary, report and associated data files which are available at: http://digital.nhs.uk/pubs/ascactfin1718

The SALT and ASC-FR collections are concerned with adults, defined as those aged 18 or over, and relate to adult social care services. Children's social services are not covered in these returns, and nor are services provided to adults on behalf of children (e.g. Section 17 payments). Some local authorities are known to continue with children's services for a few clients aged 18 or over; these clients should be included within the adult returns. There is a mixture of mandatory and voluntary items included in the returns.

Each return holds the following separate worksheets:

SALT	ASC-FR
- Requests for support received - Sequels to short term to maximise independence (ST-Max) (new clients) - Sequels to ST-Max (existing clients) - Hospital discharges with 91-day follow-up - Long term support (during the year) - Long term support (at year-end) - Long term support for more than 12 months - Long term support during the year who received and unplanned review - Long term support for more than 12 months with an unplanned or planned review - Carer support provided - Accommodation / employment status	- Expenditure on long term support - Expenditure on short term support - Non-SALT and Other services - RO3 Summary[1] - Activity data - Unit Costs - Unit Costs Summary

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[1] The RO3 is another finance collection, and the RO3 summary data are included in ASC-FR for data validation purposes and these are not released as part of this publication.

The guidance and a copy of the tables for each collection are available on the NHS Digital website[2].

Relevance

The degree to which the statistical product meets user needs in both coverage and content

The report covers activity and expenditure for local authorities in England on services for adults aged 18 and over, by service provision and primary support reason. Information on a number of accounting categories is also included such as income from the NHS, grants provided to voluntary organisations and gross and net expenditure. A number of the measures within Adult Social Care Outcome Framework (ASCOF) draw on data from the SALT collection.

Further details on the collections, and the relationship between SALT and ASCOF, can be found here: https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/social-care-collection-materials-2018

The data are used by central government and by local authorities to assess their performance in relation to their peers. It is also available for use by researchers looking at local authority performance and by clients and the public to hold local authorities and government to account. It has also been used previously by the Care Quality Commission (CQC) for their Annual Performance Assessment (APA), by Age UK, by the Office for National Statistics (ONS) and the National Audit Office (NAO).

Accuracy and reliability

The proximity between an estimate and the unknown true value

The accuracy of the SALT and ASC-FR data is the responsibility of the local authorities who submit the data to NHS Digital. Both returns are aggregate collections taken from administrative systems. As NHS Digital does not have access to the individual records behind the aggregate counts, we are reliant on local authorities to assess their own data quality.

In many instances, assessing reliability depends on local knowledge, as each local authority determines the approach taken in their area. What may be an anomaly in one area could be considered standard practice elsewhere. However, a range of activities are undertaken (outlined in more detail below) to check and improve data quality. Discussions with local authorities have provided useful anecdotal information about distributions and trends.

The submission and validation process for each collection is carried out as follows:

1. The local authority collates the data for submission in the relevant collection form. This form includes inbuilt validations to allow local authorities to check their data for common issues prior to submission.
2. Local authority submits data by the mandated deadline.

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[2] A copy of the guidance and tables is available at: https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/social-care-collection-materials-2018

3. All local authorities who met this deadline receive a data quality report covering critical validations and providing some derived totals allowing local authorities to confirm their data is correct.
4. NHS Digital reviews the quality of all files submitted and may provide additional support to local authorities with significant data quality issues.
5. Local authorities can resubmit data to amend any identified quality issues.
6. Final deadline for submission.
7. Following the final deadline NHS Digital will carry out analysis of the quality of final data. Although local authorities cannot resubmit data after this point, they may be contacted for additional clarification or context.

The validation checks carried out throughout this process included:
- Checks for missing data items.

- Checks for instances of recorded activity without associated expenditure and vice versa.

- Comparing the unit costs with those from other local authorities and flagging outliers.

- Validations across worksheets to check figures across different tables that store the same data.

- In ASC-FR, planned Better Care Fund expenditure was provided to local authorities to compare their Income from Better Care Fund value against.

The final validation stage consisted of looking at the responses to the validation checks mentioned above to see if there are clear instances where data submitted is implausible or local authorities have submitted data not in line with the guidance for the data collection.

We approached local authorities for additional context where outliers or inconsistencies were identified. Not everyone was able to respond and so the data quality summary reflects all explanations received from local authorities, either at the point of submission or in response to our follow-up queries.

Common issues local authorities advised us of include:

In SALT

- Limitations with case management systems for reporting of some data items, particularly new items introduced this year around full cost clients and outcomes to Short Term support to maximise independence (ST-Max) for existing clients.

- A number of local authorities have mentioned difficulties obtaining and/or quality assuring data from third party organisations such as mental health or carer data.

In ASC-FR

- Allocating expenditure by Primary Support Reason (PSR) in the ASC-FR can be challenging as many finance systems are not configured to collect this data.

- The allocation of Better Care Fund (BCF) expenditure in the ASC-FR has improved in 2017-18 compared to previous years so care should be taken when comparing to historic data.

Full details of issues that NHS Digital are aware of are included in the accompanying Data Quality Summary.

Information on the number of local authorities returning data at the mandated and final deadlines across both collections is available on the completeness tab of the accompanying Data Quality Summary.

Missing Local Authorities

All 152 local authorities submitted a data return.

Timeliness and punctuality

Timeliness refers to the time gap between publication and the reference period. Punctuality refers to the gap between planned and actual publication dates

The SALT and ASC-FR data collections will be undertaken annually, and a report will be published each year. This report relates to the financial year 2017-18 and is being released seven months after the period to which the data relates.

This publication has been released in line with the pre-announced publication date and is therefore deemed to be punctual.

Accessibility and clarity

Accessibility is the ease with which users are able to access the data, also reflecting the format in which the data are available and the availability of supporting information. Clarity refers to the quality and sufficiency of the metadata, illustrations and accompanying advice

Reference data tables are available to download from the NHS Digital website in Excel (.xlsx) and comma-separated values (.csv) format to allow the user access to the underlying data. Also provided through the publication pages are a Power BI interactive dashboard and supporting information to help the user understand the data more.

For SALT, the numbers in the csv and data tables are rounded to the nearest five and data values between 0 and 4 have also been suppressed, for disclosure reasons.

ASC-FR does not collect counts of people and as such is not subject to suppression.

Coherence and comparability

Coherence is the degree to which data that are derived from different sources or methods, but refer to the same topic, are similar

Coherence

SALT is a statutory data collection to collect Short and Long Term (SALT) support information across England; there are no current alternative sources of this data with which these can be compared.

ASC-FR analyses expenditure by type of service and type of expenditure and income and complies with the 2017-18 Service Reporting Code of Practice (SeRCOP). The SeRCOP guidelines provide details of what should be included within each of the ASC-FR reporting lines. More details about SeRCOP can be found on the CIPFA website at: www.cipfastats.net/sercop

The Ministry for Housing, Communities and Local Government (MHCLG) publish information on expenditure collected from local authorities via the RO3 return. Expenditure on social care can be seen in the report entitled 'Local authority revenue expenditure and financing England: 2017 to 2018 provisional outturn' which can be accessed via the GOV website at: https://www.gov.uk/government/statistics/local-authority-revenue-expenditure-and-financing-england-2017-to-2018-provisional-outturn

Part of the ASC-FR return includes an RO3 Comparison to help assure local authorities that the ASC-FR is consistent with their RO3 returns.

Comparability

There are few changes compared with the last collected data.

In SALT, several voluntary data items have been made mandatory, including data items relating to prisons, 100% NHS funded care, deceased clients, and full cost clients. The total number of clients in tables in STS001 and STS002a/b can be recorded for the first time. New routes of access relating to self-funders, and new sequels have been added to STS001 and STS002a/b. As a result of these new sequels, it is not advised to compare outcomes in 2017-18 against those reported in 2016-17. The number of full cost clients in LTS001b/c is now split by support setting, as is the number of reviews in LTS002a/b

In ASC-FR, the Better Care Fund cell is now mandatory. Voluntary data relating to age bands 65 to 74, 75 to 84 and 85 and over have been removed, as has bridging year data.

Trade-offs between output quality components

Trade-offs are the extent to which different aspects of quality are balanced against each other.

For the 2017-18 reporting period, two submission periods were made available for local authorities. This was consistent with last year's return. Data Quality reports and support were made available to those local authorities who submitted by the first deadline. Local authorities were able to make updates to their data during the validation period.

Assessment of user needs and perceptions

The processes for finding out about users and uses, and their views on the statistical products

Working Groups were established with the aim to manage the development of both data collections to reflect the requirements of users and policy. The group includes representatives from NHS Digital, Department of Health and Social Care, local authorities, and for ASC-FR, CIPFA and MHCLG.

Following closure of the data submission window, local authorities had the opportunity to complete an online user survey to provide feedback on all Adult Social Care data collections and reporting processes hosted by NHS Digital for 2017-18. The results are currently being analysed and NHS Digital will use the feedback provided to help inform future collections and publications.

User feedback on the format and content of the 2017-18 Adult Social Care Activity and Finance report, as well as on the SALT and ASC-FR collections, is invited; please send any comments to enquiries@nhsdigital.nhs.uk

Information about the Social Care collection materials 2018 is available at: https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/social-care-collection-materials-2018

Changes to upcoming collections can be seen in the most recent September letter, available at: https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/social-care-collection-materials-2019

Performance, cost and respondent burden

The data collection process used in this publication is subject to assurance by the Data Standards Assurance Service (DSAS) (previously known as the Challenging Burden Service (CBS)). This is to ensure that data collections do not duplicate other collections, minimise the burden to all parties and have a specific use for the data collected. Further information on DSAS can be found at: https://digital.nhs.uk/services/the-challenging-burden-service.

The burden of the SALT and ASC-FR collections has been assessed and approved, and the burden of any changes to the collection are similarly assessed to ensure that they do not create undue burden for local authorities.

Confidentiality, transparency and security

The procedures and policy used to ensure sound confidentiality, security and transparent practices

All statistics are subject to a standard NHS Digital risk assessment prior to issue. The risk assessment considers the sensitivity of the data and whether any of the reporting products may disclose information about specific individuals. Methods of disclosure control are discussed and the most appropriate methods implemented. As a result of this process, finance data is unsuppressed and unrounded whilst activity data is rounded to the nearest five.

NHS Digital aims to be transparent in all its activities. A description of the collection process and any issues with the quality of the 2017-18 activity and finance data are documented in the Accuracy and Reliability section of this report.

SALT and ASC-FR data is submitted to NHS Digital through a secure electronic file transfer system called Strategic Data Collection Service (SDCS). The submitted files are transferred from SDCS and stored on a secure network with restricted access folders.

Please see links below for more information about related NHS Digital policies:

Statistical Governance Policy:
https://digital.nhs.uk/binaries/content/assets/website-assets/publications/publications-admin-pages/related-documents/statistical-governance-policy.pdf

Freedom of Information Process:
https://digital.nhs.uk/article/253/Freedom-of-Information

Data Access Request Service:
https://digital.nhs.uk/services/data-access-request-service-dars

Privacy and data protection:
https://digital.nhs.uk/article/364/Looking-after-information

Small Numbers Procedure:
https://digital.nhs.uk/services/supporting-open-data-and-transparency