HOME CARE SERVICES - Public Release File - Metadata

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Data collection – Background

Information on home care services has been collected by the Scottish Executive since the 1980's by means of an annual census. The census covers all home care services provided or purchased by Scottish Local Authorities. The census week is usually the week containing the 30th March.

An aggregated table return for the home care statistical collection was introduced in 1998, called the H1. Local authorities were asked to provide details of all home care services provided by their own staff, and in addition, services bought in from other local authorities, and private / voluntary organisations. Information on client age, for level and type of service was introduced to the collection in 2005.

The information collected in the home care census has been reviewed by the Home Care review group. A revised home care statistical collection was introduced in March 2010 which collects information on an individual basis for each home care client receiving home help services, meals services and community alarm / telecare services. Further information is available from http://www.scotland.gov.uk/hscuser and https://www.scotland.gov.uk/hscuser and https://www

Local authorities are asked to provide details of all Home Care Services provided by their own staff, and in addition, services bought in from other local authorities, and private / voluntary organisations.

The Home Care statistical collection asks for information to be returned on every person who receives/uses:

- Home Care Services (provided or purchased by the local authority) during the census week.
- Meals Services (provided or purchased by the local authority) during census week.
- A Community Alarm during census week.
- Other Telecare Services during census week.

In addition, a number of optional questions are asked in the collection of local authorities. A few examples are:

- Clients who receive Housing Support (provided or purchased by the local authority) during census week.
- Clients who receive Shopping Services (provided or purchased by the local authority) during census week.
- Clients who receive Laundry Services (provided or purchased by the local authority) during census week.

Definition - Home Care Service

Home care services are purchased or provided by the council and provided to people in mainstream housing (rented or owned), in sheltered accommodation, amenity housing and in supported accommodation.

Home care services are defined as:

- Practical services which assist the client to function as independently as possible and/or continue to live in their own homes.
- Routine household tasks within or outside the home (basic housework, shopping, laundry, paying bills)
- Personal care of the client; as defined in schedule 1 of the Community Care & Health Act 2002.
- Respite care in support of the client's regular carers, e.g Crossroads Care Attendance Schemes funded by the Local Authority.
- Overnight, live-in and 24 hour services
- Home care provided to clients living in sheltered housing or supported accommodation.

Full definitions can be found in the 'Home care services guidance notes' which can be found at: http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/HomeCareCensus.

Overview - Public release files

The homecare public release files contain data on social care clients who receive a homecare service. The data available within the files is at an individual level but has had certain characteristics either banded or removed to ensure the data is not disclosive. Data is only available for clients aged 18 and over. Currently two years worth of data are available.

2010 – 76,202 records **2011** – 142,466 records **2012** - 141,144 records

The files are available in CSV format with the variable names in the first row and contain the following information:

Local Authority funding support Age (banded) Gender Client group Hours of home care (banded)

Hours of personal care (banded)

Living arrangements
Staffing arrangements

Meals service (Hot or frozen meals)

Telecare (Community alarm or telecare) – From 2011 only

Housing type (Optional variable)

Shopping service (Optional variable)

Laundry service (Optional variable)

Indicator of Relative Need (IoRN) score (Optional variable)

Housing support (Optional variable)

TABLE 1 - List of Variables and Attributes

Variable Name	Description	Туре	Length	Codes
LACode	A three digit code to identify the Local Authority that is funding the home care service	Numeric	3 digits	100 = Aberdeen City 110 = Aberdeenshire 120 = Angus 130 = Argyll & Bute 150 = Clackmannanshire 170 = Dumfries & Galloway 180 = Dundee City 190 = East Ayrshire 200 = East Dunbartonshire 210 = East Lothian 220 = East Renfrewshire 230 = Edinburgh, City of 235 = Eilean Siar 240 = Falkirk 250 = Fife 260 = Glasgow City 270 = Highland 280 = Inverclyde 290 = Midlothian 300 = Moray 310 = North Ayrshire 320 = North Lanarkshire 330 = Orkney Islands 340 = Perth & Kinross 350 = Renfrewshire 355 = Scottish Borders 360 = Shetland Islands 370 = South Ayrshire 380 = South Lanarkshire 390 = Stirling 395 = West Dunbartonshire 400 = West Lothian
ClientID	Unique ID for client. Randomly created for use within the public release file only.	Alphanumeric	5 digits	

Variable Name	Description	Туре	Length	Codes
AgeGRP	Derived from the clients date of birth, which is converted into numerical age and then banded.	Numeric	1 digit	1 = 18-<65 2 = 65-<75 3 = 75-<85 4 = 85+ 5 = Unknown
GenderISO	Gender of client	Numeric	1 digit	1 = Male 2 = Female . = Blank
ClientGRP	Client group assigned to client. Please refer to ANNEX A for full client group definitions. In this dataset, where a local authority returned multiple client groups, in order to avoid double counting clients have been allocated to one client group. This has been based on the following methodology — Dementia - takes precedence over any other client group. Learning Disability - will take precedence over any other client group except Dementia and Physical Disability. If the person has a Learning Disability and a Physical Disability then the client grouping will be coded as Learning Disability. Mental Health Problems - takes precedence over Physical Disability and other. Infirmity due to age - takes precedence over Physical Disability and other. Other includes (list not exhaustive) - Addiction, Palliative	Numeric	2 digits	1 = Dementia & Mental Health 2 = Learning Disability 3 = Physical disability 4 = Infirmity due to age 5 = Other 99 = Not known . = Blank
LivingArr	Care & Carers Whether the individual lives alone or not.	Numeric	1 digit	1 = Client lives alone
LiviligAli	vviletilei tile ilitaivitutai lives altille til litt.	Numenc	i digit	2 = Other 9 = Not known

Variable Name	Description	Туре	Length	Codes
Staff	Whether the individual requires help/support from 2 or more staff at the same time.	Numeric	1 digit	0 = Does not require multiple staff 1 = Requires 2 or more members of staff.
meals	Whether the individual receives a meals service. This is derived from collected data for hot and frozen meal services.	Numeric	1 digit	0 = Does not receive a meals service 1 = Receives a meals service
bandHRSTT	Total weekly hours of home care which have been purchased by the local authority. If a local authority has provided scheduled and actual hours in the data return, then actual hours take precedence.	Numeric	1 digit	0 = Zero hours 1 = Less than 1 hour 2 = 1 hour to less than 2 hours 3 = 2 hours to less than 4 hours 4 = 4 hours to less than 6 hours 5 = 6 hours to less than 8 hours 6 = 8 hours to less than 10 hours 7 = 10 hours to less than 15 hours 8 = 15 hours to less than 20 hours 9 = 20 hours to less than 30 hours 10 = 30 hours to less than 40 hours 11 = 40 hours to less than 50 hours
bandHRSLA	Total weekly hours of home care which have been provided in-house by the local authority. If a local authority has provided scheduled and actual hours in the data return, then actual hours take precedence.	Numeric	1 digit	See bandHRSTT above
bandHRSpri	Total weekly hours of home care which have been purchased by the local authority from the private sector. If a local authority has provided scheduled and actual hours in the data return, then actual hours take precedence.		1 digit	See bandHRSTT above
bandHRSvo	Total weekly hours of home care which have been purchased by the local authority from the voluntary sector. If a local authority has provided scheduled and actual hours in the data return, then actual hours take precedence.	Numeric	1 digit	See bandHRSTT above
bandHRSPC	Total weekly hours of personal care which has been purchased by the local authority. In 2011, if a local authority has provided scheduled and actual hours in the data return, then actual hours take precedence.	Numeric	1 digit	See bandHRSTT above

Variable Name	Description	Туре	Length	Codes
communityalarmon	Please refer to ANNEX E for full definition. Whether an	Numeric	1 digit	0 = No
ly	individual only receives a community alarm.			1 = Yes
telecareonly	Please refer to ANNEX E for full definition. Whether an	Numeric	1 digit	0 = No
	individual only receives other telecare services.			1 = Yes
communityandtele	Please refer to ANNEX E for full definition. Whether an	Numeric	1 digit	0 = No
care	individual receives and community alarm and other telecare services.			1 = Yes
HousingType_OV	OPTIONAL VARIABLE from 2010. Representing an individual type of housing. Please refer to ANNEX B for full definition.	Numeric	1 digit	0 = Mainstream Housing 1 = Supported Housing 9 = Other
Laundry_OV	OPTIONAL VARIABLE from 2010. Whether an individual receives a laundry service.	Numeric	1 digit	0 = No 1 = Yes
Shopping_OV	OPTIONAL VARIABLE from 2010. Whether an individual receives a shopping service.	Numeric	1 digit	0 = No 1 = Yes
HousingSupport_O	OPTIONAL VARIABLE from 2010. Whether an	Numeric	1 digit	0 = No
V	individual receives housing support. Please refer to ANNEX C for full definition.			1 = Yes
IoRN_OV	OPTIONAL VARIABLE from 2010. Clients IoRN score. Please refer to ANNEX D for full definition.	Character	1 digit	A = Low SSA-IoRN Group B = Low SSA-IoRN Group C = Medium SSA-IoRN Group D = Low SSA-IoRN Group E = Medium SSA-IoRN Group F = High SSA-IoRN Group G = Medium SSA-IoRN Group H = High SSA-IoRN Group I = High SSA-IoRN Group
HCclient	Derived variable to indentify home care clients. Based on responses to the hours variables	Numeric	1 digit	0 = No 1 = Yes

ANNEX A - CLIENT GROUP DEFINITIONS

Dementia

Global deterioration of intellectual functioning. Normally a progressive condition resulting in cognitive impairment ranging from some memory loss and confusion to complete dependence on others for all aspects of personal care. Exclude confusion due to other causes e.g. medicines, severe depression. Does not have to have been medically diagnosed.

Mental Health Problems

Mental health problems are characterised by one or more symptoms including: disturbance of mood (e.g. depression, anxiety), delusions, hallucinations, disorder of thought, sustained or repeated irrational behaviour.

Include: persons assessed as having mental health problems whether or not the symptoms are being controlled by medical treatment.

Exclude: alcohol or drug related problems; dementia.

Learning Disability

A significant, lifelong condition which has three facets:

- significant impairment of intellectual functioning resulting in a reduced ability to understand new or complex information: and
- significant impairment of adaptive/social functioning resulting in a reduced ability to cope independently; and
- which started before adulthood (before the age of 18) with a lasting effect on the individual's development.

Physical Disability

Physical disabilities have many causes in chronic illness, accidents, and impaired function of the nervous system, which, in particular physical or social environments, result in long term difficulties in mobility, hand function, personal care, other physical activities, communication, and participation.

Include: visual impairment, hearing impairment, severe epilepsy; limb loss; severe arthritis; diseases of the circulatory system (including heart disease); diseases of the central nervous system (e.g. strokes, multiple sclerosis, cerebral palsy, spina bifida and paraplegia).

- Visual impairment. Blindness or partial sightedness (unless problems resolved by spectacles or contact lenses).
- Hearing impairment. Profound or partial deafness and other difficulties in hearing (unless problems resolved by a hearing aid).

Exclude: Acquired brain injury. These clients should be classified under 'other'.

Problems arising from infirmity due to age. These clients should be recorded in the separate category.

Addiction

Alcohol-related problems. Any person who experiences social, psychological, physical, or legal problems related to intoxication and/or regular excessive consumption and/or dependence as a consequence of his/her use of alcohol.

Drugs-related problems. Any person who experiences social, psychological, physical or legal problems related to intoxication and/or regular excessive consumption and/or dependence as a consequence of his/her use of drugs or chemical substances.

• **Palliative care** (as defined by the World Health Organisation)

Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. Palliative care:

provides relief from pain and other distressing symptoms;

- affirms life and regards dying as a normal process;
- intends neither to hasten or postpone death;
- integrates the psychological and spiritual aspects of patient care;
- offers a support system to help patients live as actively as possible until death;
- offers a support system to help the family cope during the patients illness and in their own bereavement;
- uses a team approach to address the needs of patients and their families, including bereavement counselling, if indicated;
- will enhance quality of life, and may also positively influence the course of illness;
- is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications.

Source: http://www.who.int/cancer/palliative/definition/en/

Carers

Where home care is provided to support a carer who is not a home care client in their own right and is caring for a dependent person of any age

Or carers of children, who receive home care to support their child care, where neither the carer(s), nor child, has a disability or any other problem described in the client groups previously. Please record only those family members who are regarded as clients.

Problems arising from infirmity due to age

Other vulnerable groups

Clients should be included in this client group if they do not fall under the other categories for example:

- Clients with HIV/AIDS.
- Acquired brain injury.

Multiple disabilities acquired after birth arising from damage to the brain through head injury, stroke, lack of oxygen, infection, or other causes. People with an acquired brain injury usually have a complex mixture of physical, cognitive, emotional, and behavioural, disorders or difficulties. This may affect how the person perceives the world and their abilities to remember, concentrate, reason and judge. The person's emotional state may be disturbed; personality, behaviour, communication and relationships are also frequently altered. Mobility, sensation, vision, hearing and balance, smell and taste, respiration, heartbeat, and bowel and bladder control may also be affected.

- Homeless people
- Women escaping domestic violence
- **Not known** If it is not known whether the person has been given a client group.

ANNEX B - MAINSTREAM HOUSING DEFINITION

Mainstream Housing

This is a private home (either owned/mortgaged or rented) which has not been adapted for special needs in any way.

Supported Housing

- Special housing: premises that have been adapted to meet the need of people with particular needs, e.g. wheelchair access.
- Amenity housing: a group of premises with special modifications for particular needs but not supported by a warden.
- Sheltered housing: self-contained premises linked to a warden who provides specialist support to tenants.
- Supported accommodation: A home where external support is put in place to help the tenants live as independently as possible.

Other

ANNEX C - HOUSING SUPPORT DEFINITION

Housing support services help people to live as independently as possible in the community. They can either be provided in your own home or in accommodation such as sheltered housing or a hostel for homeless people.

Housing support services help people manage their home in different ways. These include assistance to claim welfare benefits, fill in forms, manage a household budget, keep safe and secure, get help from other specialist services, obtain furniture and furnishings, and help with shopping and housework. The type of support that is provided will aim to meet the specific needs of an individual person.

Housing support services are mainly provided by local authorities, housing associations and voluntary sector organisations. They help a wide range of people to live independently in the community, by providing practical support and advice. People who may benefit from housing support services include:

- older people;
- homeless people;
- people with physical or learning disabilities;
- people with mental health problems;
- people with drug or alcohol problems;
- people with HIV or AIDS:
- care leavers; and
- women escaping domestic violence.

There are many different kinds of services. Examples include home adaptations for disabled people; visiting support to help with housework and shopping; resettlement support; and community alarms. Services can be provided in someone's own home or within temporary accommodation such as homeless hostels and refuges.

ANNEX D - INDICATOR OF RELATIVE NEED (IORN SCORE) DEFINITION

The Indicator Of Relative Need (IoRN) is a tool for categorising people, currently only older people, whose needs have been assessed, into nine groups (A to I) according to their level of need. It uses the answers to a carefully determined set of questions that cover the assessed person's need for support across activities for daily living, personal care, food and drink preparation, mental health and behaviour, and bowel management. The IoRN can be completed easily by a trained professional provided that they are familiar with the person's current health and social care needs. It is completed typically following a comprehensive assessment or SSA. It provides additional insight on a person's level of need and informs the care plan.

The IoRN was developed by ISD Scotland [www.isdscotland.org] on behalf of the Scottish Government.

More detail on the loRN is available at:

http://www.scotland.gov.uk/Topics/Health/care/JointFuture/SSAIoRN

Guidance on how to assign a client to an IoRN group can found in Appendix Two, starting on p57, of this document National Minimum Information Standards For All Adults In Scotland: http://www.scotland.gov.uk/Topics/Health/care/JointFuture/NMISAnnexA/Q/EditMode/on/ForceUpdate/on

ANNEX E - COMMUNITY ALARM & TELECARE DEFINITION

Information should be returned on every person who receives a community alarm/ telecare service during census week, it should not be property based. Where there is more than one person living within a house who has been identified as eligible for and requiring a community alarm/telecare service, individual information for each person should be provided.

Information should be provided on community alarms/telecare services purchased by the local authority from another provider e.g. Housing Association. This includes people living within amenity/sheltered/very sheltered/extra care housing where a community alarm (including a sheltered housing alarm) or telecare is included as part of the purchased or provided service.

People living within properties which have had alarms installed historically but which are no longer used to meet care and support needs should not be included.

Some telecare technologies may be installed in a person's home for a short period of time only to assist an assessment of need. This should be counted for the purpose of the return if the installation is in place during the period covered by the census.

The data provided should be accurate and up to date i.e. all closed and deceased service users should not be included.