

INFORMATION
ANALYSIS
DIRECTORATE



Statistics on Community Care for Adults in Northern Ireland 2019 – 2020



Department of
Health

An Roinn Sláinte

Máinnystrie O Poustie

www.health-ni.gov.uk

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Target Audience	Social Services Directors, Directors of Adult’s Services, Chief Executives of HSC Board and Trusts in Northern Ireland, health care professionals, academics and social care stakeholders.
Main Uses of Document	Data presented in this publication helps to meet the information needs of a wide range of internal and external users. Within DoH these figures are used to monitor community services activity, to help assess HSC Trust performance, for corporate monitoring, to inform and monitor related policy, for Ministerial briefing and to respond to Private Office enquiries or parliamentary/assembly questions. As a compendium report, this publication presents trend analysis of a variety of adult social care activity. While trends support contextual understanding of the service activities, readers should be mindful of individual caveats as noted.
Copyright	This publication is Crown copyright and may be reproduced free of charge in any format or medium. Any material used must be acknowledged, and the title of the publication specified.
Price	Free

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A National Statistics Publication

The United Kingdom Statistics Authority (UKSA) has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics. National Statistics status means that our statistics meet the highest standards of trustworthiness, quality and public value, and it is our responsibility to maintain compliance with these standards. The assessment report 220 was published on 28 June 2012 and can be found on the UKSA website.

The continued designation of these statistics as National Statistics was confirmed in March 2019 following a compliance check by the Office for Statistics Regulation.

Since the latest review by the Office for Statistics Regulation, we have made the following improvements while maintaining compliance with the Code of Practice for Statistics, and have:

- a) The introduction of new topics into the publication, such as audiology, domiciliary care, and re-ablement. While previously reported for internal service performance management, key high level metrics have been deemed to be of robust quality for wider publication.
- b) Improve graphic presentation of data to improve the user experience.

National & Experimental Statistics

National Statistics are produced to high professional standards as set out in the National Statistics Code of Practice. They undergo regular quality assurance reviews to ensure that they meet customer needs. All statistics in this publication, with the exception of re-ablement data, have been assessed as meeting National Statistics standards. Re-ablement statistics are described as experimental statistics. These are series of statistics that are in the testing phase, and while considered robust and of sufficient quality to be reliable, they should be treated with caution as ongoing evaluation may mean they are subject to future methodological change. Both National and Experimental Statistics are produced free from any political interference.

If you have any comments on this publication, please send these to cib@health-ni.gov.uk or contact Deborah Kinghan (Tel: 028 905 22342).

About Us



Statistics and research for the **Department of Health, Social Services and Public Safety** is provided by the Information and Analysis Directorate (IAD). IAD is responsible for compiling, processing, analysing, interpreting and disseminating a wide range of statistics covering health and social care.



The statisticians within IAD are outposted from the Northern Ireland Statistics & Research Agency (NISRA) and the statistics are produced in accordance with the principles and protocols set out in the Code of Practice for Official Statistics.

<https://www.health-ni.gov.uk/topics/doh-statistics-and-research>

IAD comprises four statistical sections: Hospital Information, Community Information, Public Health Information & Research and Project Support Analysis.

This publication is produced by Community Information Branch.

Our Vision and Values

- *Provide up-to-date, quality information on children and adult social services and community health;*
- *to disseminate findings widely with a view to stimulating debate, promoting effective decision-making and improvement in service provision; and*
- *be an expert voice on social care information.*

About Community Information Branch

The purpose of Community Information Branch (CIB) is to promote effective decision making in children and adult social services by providing quality information and analysis. We collect, analyse, and publish a wide range of community information that is used to help monitor the delivery of personal social services policy. Information collected by CIB is used to assess HSC Trust performance, for corporate monitoring, policy evaluation, and to respond to parliamentary/assembly questions. Information is widely disseminated through a number of regular key statistical publications and ad hoc reports, details of which are available online.

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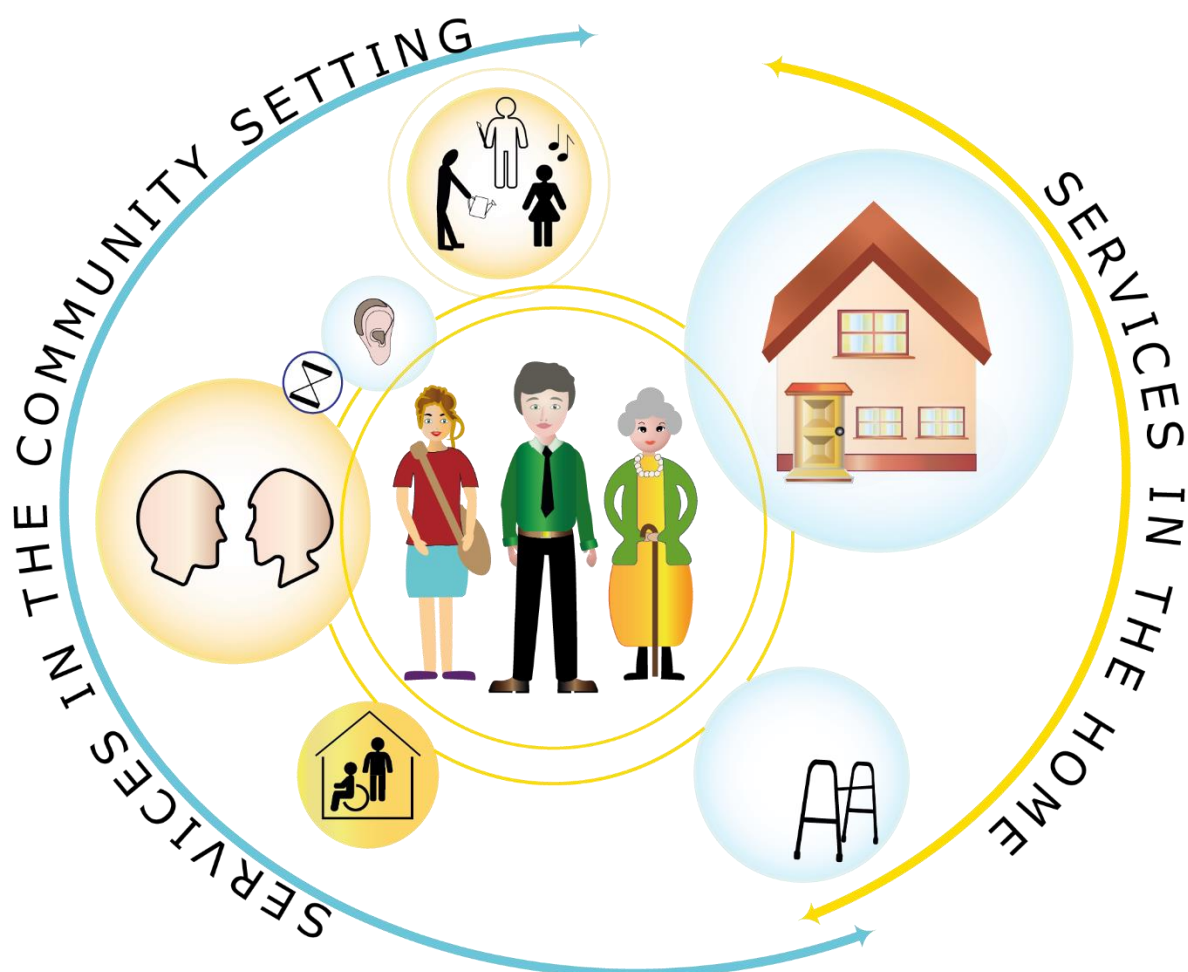
Introduction - What is Community Care?

Community care describes the wide range of services and support which enable individuals to live in their own home or in community settings. It is designed to maintain and promote the independence and well-being of disabled and older people, and has as its overriding objective, the aim to enable people to live as full a life as possible, in whatever setting best suits their needs.

Community care services should respond flexibly and sensitively to the needs of individuals as well as the relatives and friends who care for them. Wherever practicable it should offer users a range of options and intervene no more than is necessary to foster independence.

What is included in this publication?

This is the annual publication of **Statistics on Community Care for Adults in Northern Ireland**. It presents analyses on a range of community activity gathered from HSC Trusts including: domiciliary care, re-ablement, meals on wheel, audiology service, daycare, and accommodation services.



Health & Social Care Northern Ireland (NI)

KEY STATISTICS

1

23,425

persons receive domiciliary care, on average, each week in 2018/19



2

276,188

domiciliary care hours delivered, on average, each week in 2018/19



3

just over **2 in 5** persons (46%) discharged from the reablement services required no ongoing care package / occupational therapy across NI in 2019/20



4

454

persons, on average, were starting reablement service each month across NI in 2019/20

5

Received 'Meals on Wheels' in 2019/20
1,486 persons

6

335

hearing aids for adults, on average, were fitted each week across NI in 2019/20 by the statutory health services



7

6,552

registered day care attendance across NI at March 2020



8

482

care homes registered in NI at 30th June 2020



9

8,191

nursing packages in effect in NI as at 30th June 2020



10

3,617

residential packages in effect in NI as at 30th June 2020

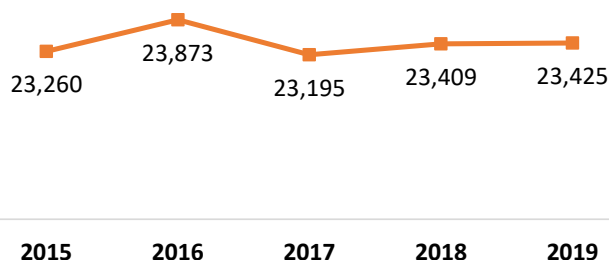




Domiciliary care is defined as the range of services put in place to support an individual in their own home. Please see below for an overview of key domiciliary care trends observed during the domiciliary care survey week 2015 - 2019. Further detail is available in the '[Northern Ireland Domiciliary Care Services for Adults 2019](#)' publication. **Source: 'DoH CC7b Survey'**

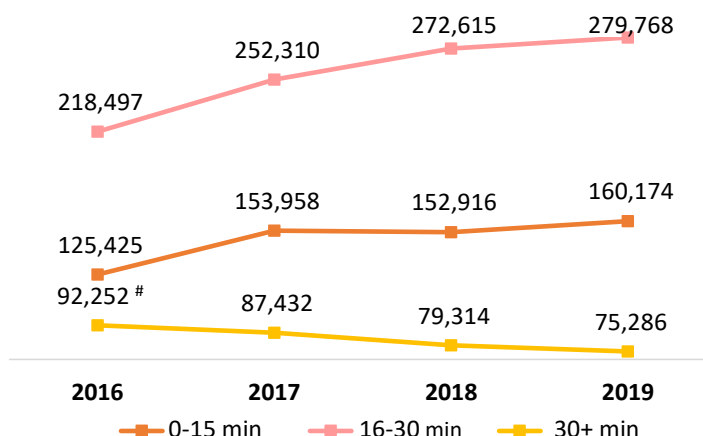
Number of Domiciliary Care Recipients 2015-19

On average, **23,425** clients, receive domiciliary care during the survey week. This has remained relatively constant over the last 5 years.



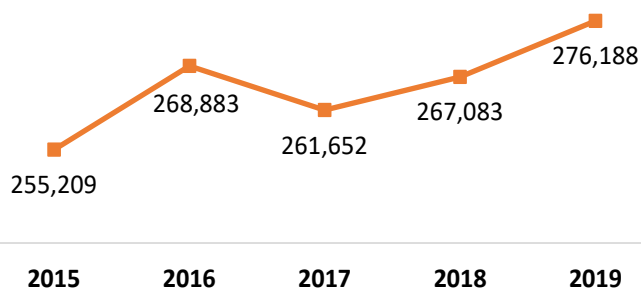
Number of Visits Delivered 2015-19

Trend analysis in the 2019 NI Domiciliary Care Annual Survey publication presents an increasing pattern of '0-15', and '16-30' min visits, and decreasing trend in '30+' min visits.



Number of Hours Delivered During Survey Week 2015-19

An **8% increase** was observed in the number of regional domiciliary care hours delivered in 2019 compared to 2015.



*The 2016 total visits figure includes an estimate for the number of statutory visits greater than 30 minutes in length for the Northern HSC Trust.

Domiciliary Care – September Survey Week

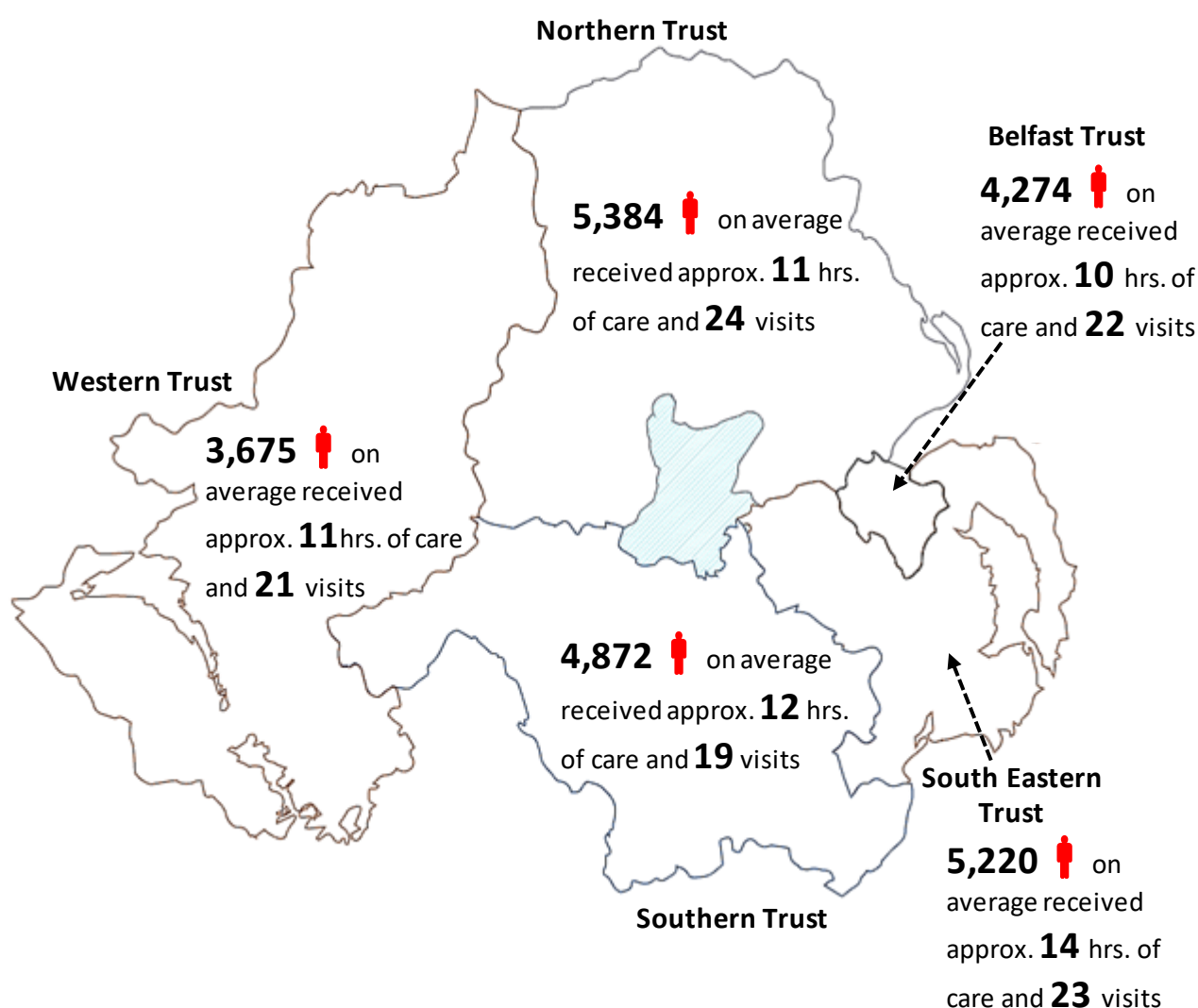


HOME SERVICES

23,425 recipients were estimated to receive domiciliary care during the 2019 September survey week, ranging from 5,843 to 3,675 recipients in Northern and Western Trusts, respectively. During the survey week, an average of 11.8 domiciliary care contact hours and 22 domiciliary care visits were provided per client.

A Trust breakdown is set out below. Further detail is available in the ‘Domiciliary Care Services for Adults in Northern Ireland 2019’ publication.

Breakdown of Domiciliary Care Delivered in a Survey Week, 8th – 14th September 2019, across Northern Ireland Health Trusts



Source: DoH CC7b Survey

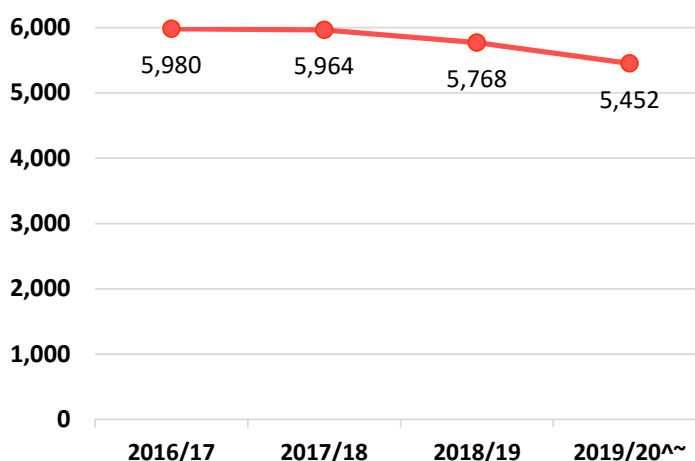


Re-ablement is a planned and time-limited service, lasting 6 weeks or less, designed to enable people aged 65+ to gain or regain their confidence, ability, and necessary skills to live independently within their own home, after experiencing a health or social care crisis, such as illness, deterioration in health or injury.

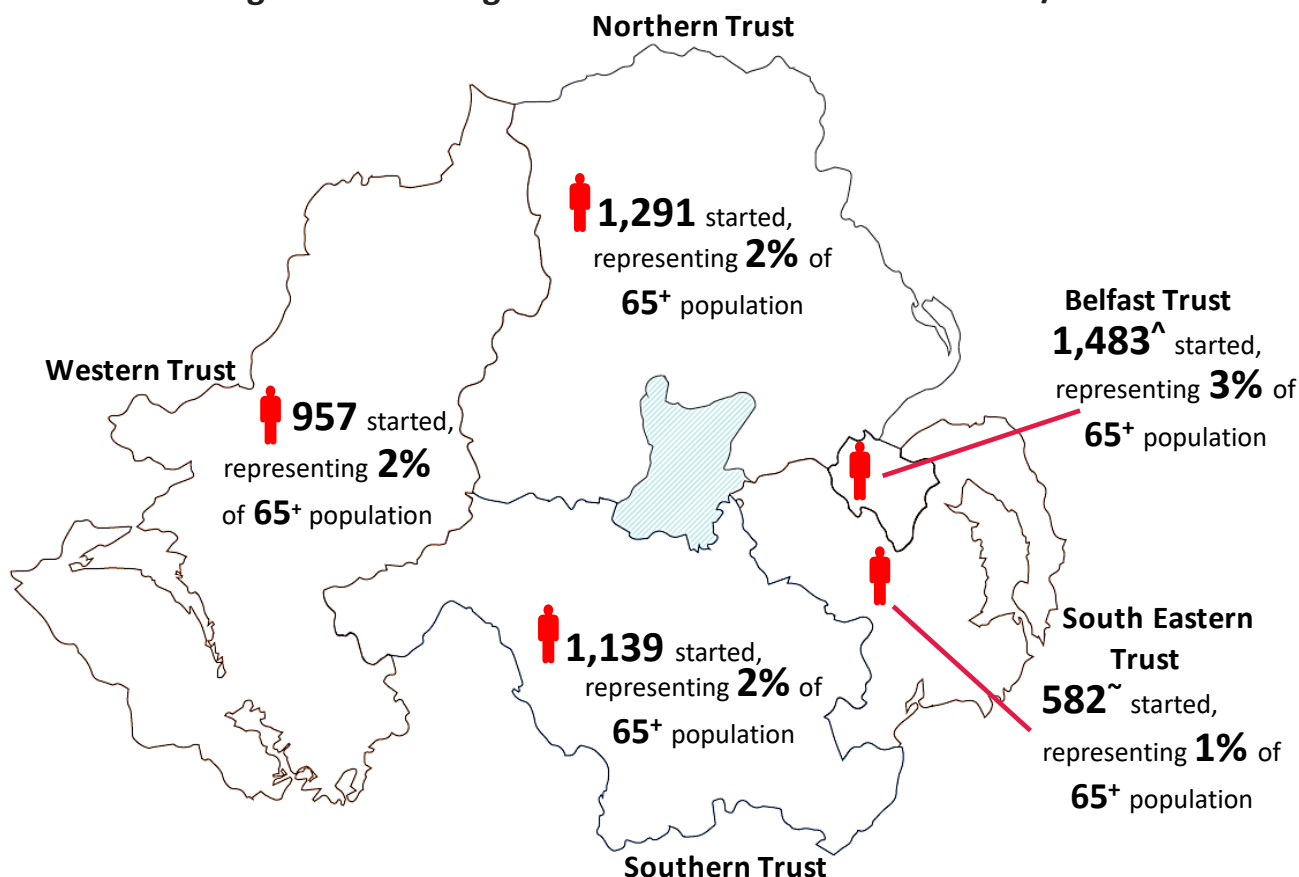
Persons Starting Re-ablement 2016/17-2019/20^{^^}

On average **5,791** persons have availed of re-ablement services, over the last 4 years.

In 2019/20, around **454[^]** persons, each month, started the service. A similar rate of uptake was observed across each of the HSC Trusts, representing 1-3% of the 65+ population within each Trust.



Persons Aged 65+ Starting Re-ablement across Trusts in 2019/20^{^^}



[^] Belfast HSC Trust had no activity during March 2020, as the service was temporarily re-configured to support COVID/ palliative care in the community.

[~]South Eastern HSC Trust present lower figures for 2019/20 due to revised screening protocol.

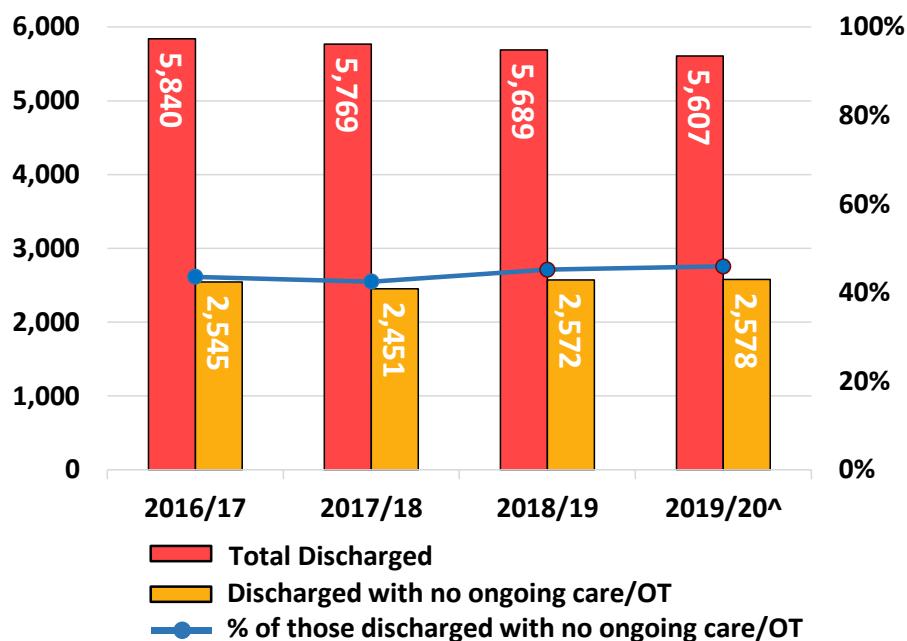
^{*}Estimated 2019 mid-year population age breakdown can be found on page 28.



Activity for re-ablement services, and associated client outcomes are an important component of Indicator 9, Outcome 8 of the Programme for Government 2016-21. An overview of the performance of Indicator 9 is published on the [Departmental website](#).

Overview of Regional Client Outcomes on Discharge 2016/17-19/20[^]

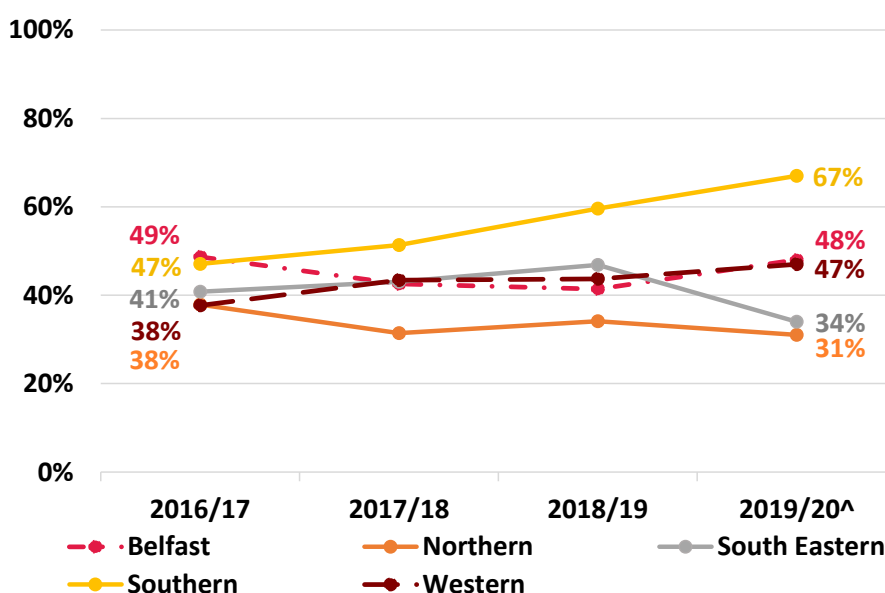
46%, is the regional average in 2019/20 for clients discharged with no ongoing care/OT therapy. This is in line with previous years.



The highest (67%), and lowest rate (31%) of clients discharged with no ongoing care package was observed in the Southern and Northern Trusts, respectively.

It is important to recognise that the Northern Trust has a higher proportion of service users admitted to hospital or passing during a period of reablement. A rate similar to the Northern Ireland average (46%) was observed in the remaining Trusts.

Client Outcomes on Discharge by Trust 2016/17-2019/20[^]



[^]Belfast HSC Trust had no activity during March 2020, as the service was temporarily re-configured to support COVID/ palliative care in the community. Changes to screening procedures are a potential factor in the South Eastern Trust trend change.

Meals on Wheels



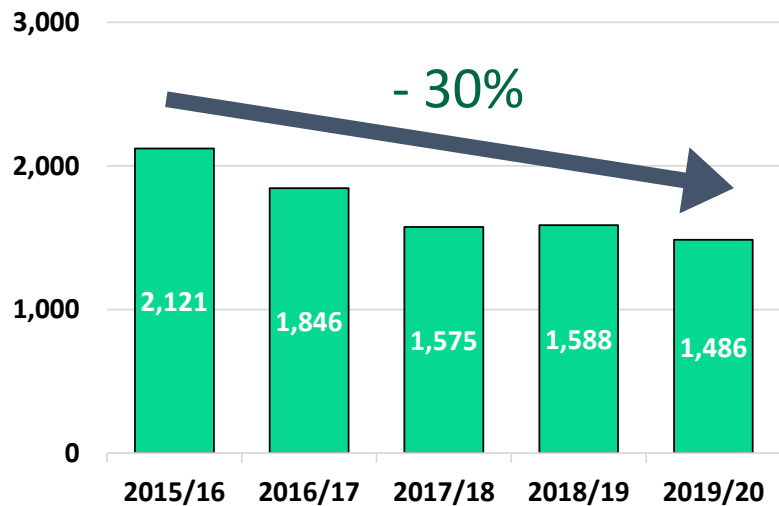
HOME SERVICES

Meals on wheels are nutritional meals delivered to people who are unable to, or find it difficult to, prepare a meal for themselves. A range of meals are produced, taking into account people’s cultural and religious requirements, personal preferences and dietary needs.

Source: NI Direct

Persons Receiving Meals on Wheels March 2015/16-19/20

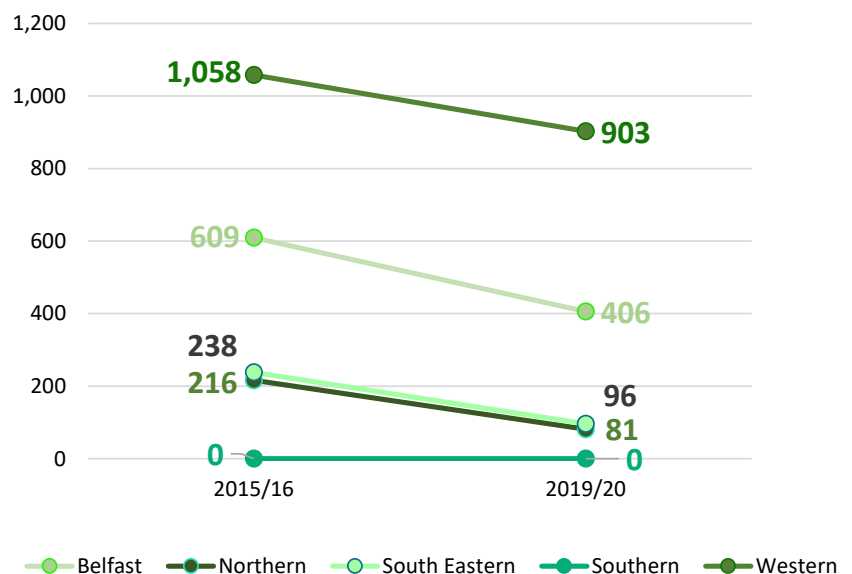
A **30%** drop, in the regional number of clients receiving meals has been observed over the last 5 years.



Trust Breakdown of Persons Receiving Meals on Wheels March 2015/16-19/20

While a trend of decreasing clients receiving meals is observed across all Trusts, the sharpest decline is observed in Belfast Trust.

The decline of the service may be due to a number of factors, such as commercially available meals, provision of re-ablement service, and /or the uptake of self-direct support (SDS).




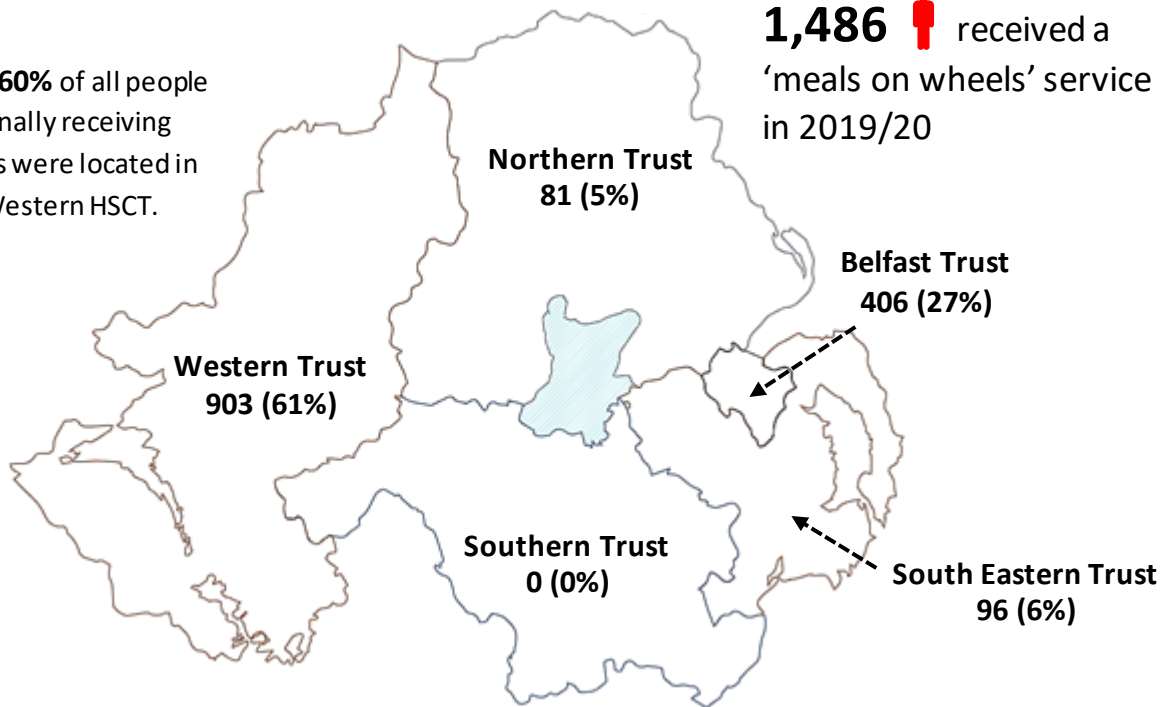
Source: DoH KMW2 Return
Page 12



Persons Receiving Meals on Wheels 2019/20

Over **60%** of all people regionally receiving meals were located in the Western HSCT.


1,486  received a 'meals on wheels' service in 2019/20

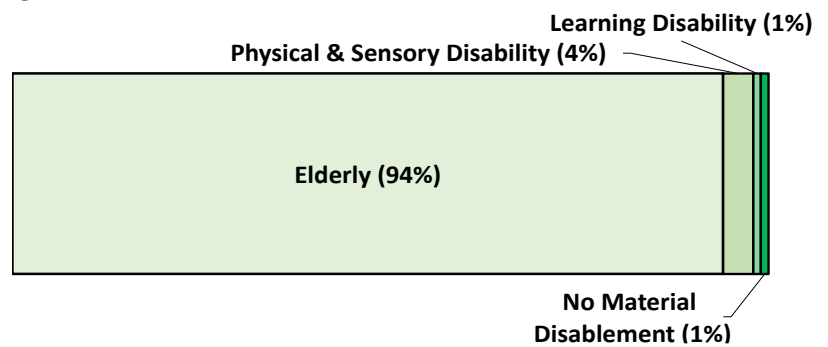


Persons Receiving Meals on Wheels:

See Page 25 for definitions

1. By Client Group 2019/20*

1,395*  receiving 'meals on wheels' whose age was known:



2. By Age Group 2019/20*



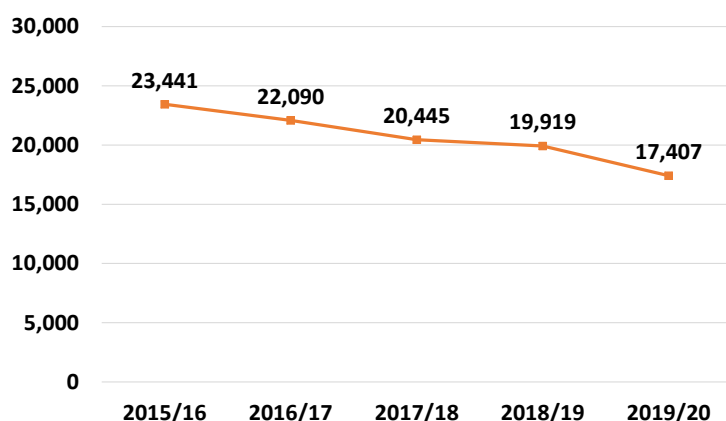
0% 25% 50% 75% 100%

*Excludes South Eastern HSC data as the Trust were unable to provide an age breakdown as per infographic age-bands.



Community audiology services provide treatment and equipment in a community setting for people with hearing defects. For example, the provision of hearing aids, a small amplifying device which fits on the ear and is worn by a person who is hard of hearing. Please note technical guidance on page 48 when interpreting these data.

Statutory Adult* Hearing Aids Fitted 2015/16 to 2019/20



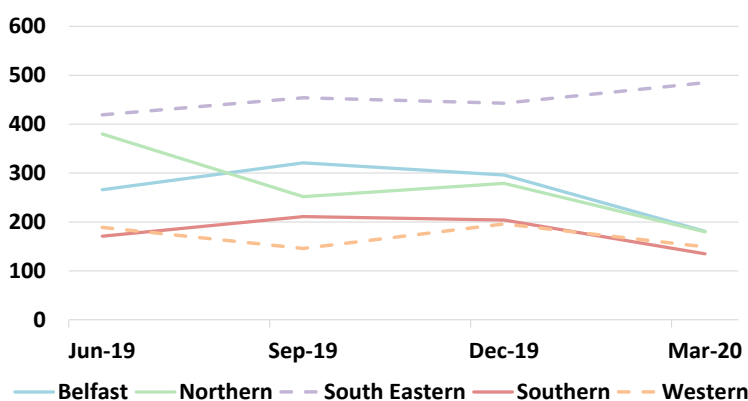
A **26%** decrease is observed in the total number of adults* fitted with hearing aid by the statutory sector in the last 5 years. Please note that in recent years there has been an increasing uptake in persons availing of “see and fit” diagnostic assessment appointments to have a hearing aid fitted, and they would not be reflected in these figures. In addition, persons may be utilising the growing number of independent retailers offering hearing aid testing/fitting services.

Statutory Adult* Hearing Aids Fitted by Trust 2019/20

17,407 hearing aids were fitted by the statutory sector in 2019/20, representing 1% of the total Northern Ireland population[^].

This is similar to the 1% statutory hearing aid fitting rate observed in England.

The number of adult* statutory hearing aids fitted ranged from 5,588 in the South Eastern Trust to 2,356 in the Western Trust.



*Northern HSC Trust figures reflect mainly activity for adult services, with some small activity for paediatric services also included. The Trust are not able to provide adult service only figures.

[^]Estimated 2019 mid-year population figures can be found on page 28.

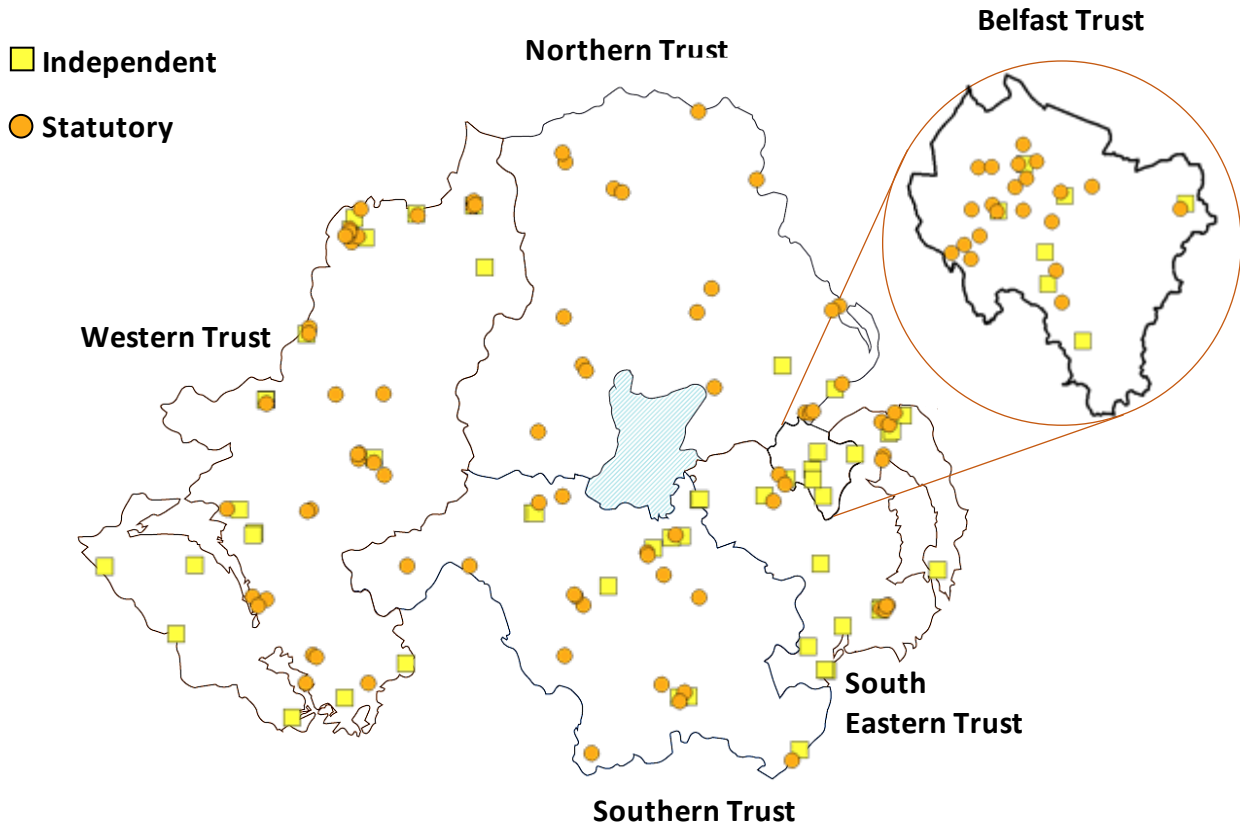
Day Care Services



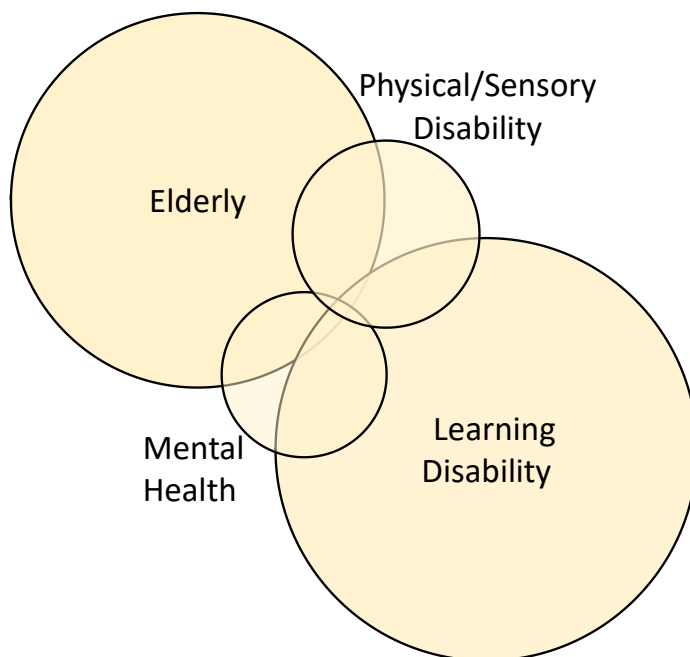
COMMUNITY SERVICES

Day care services are designed to meet the assessed needs of individuals for care, support, supervision or rehabilitation, providing social stimulation for the individual and respite for their carers.

Registered Day Care Facilities across HSC Trusts at March 2020



Proportion of Registered Day Care Facilities by Client Group at March 2020



Based on RQIA registration data and HSC Trust websites, day centres have been assigned a 'primary' client group which they provide support services for. Please note that this is not exclusive, as day centres often offer services for a range of groups, and only intended to provide an illustrative indication of the proportion of day centre facilities for different client groups across the region.

Day Care Services



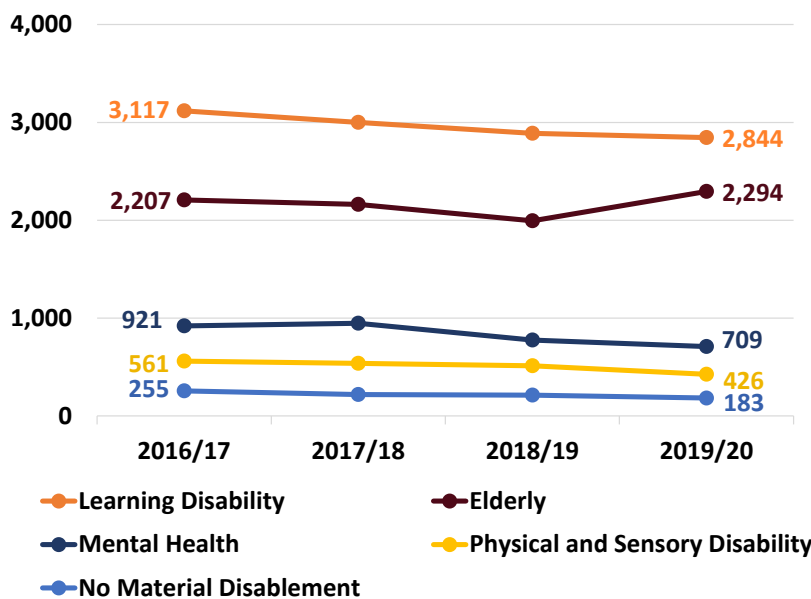
COMMUNITY SERVICES

6,552  were


registered to attend Day Care Services at 31 March 2020

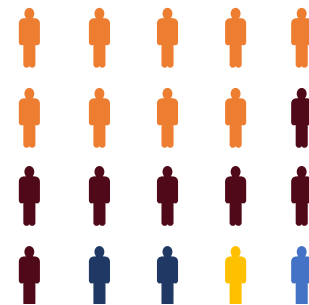
See Page 25 for definitions

Client Groups Registered to attend Day Care Services by at 31 March 2020

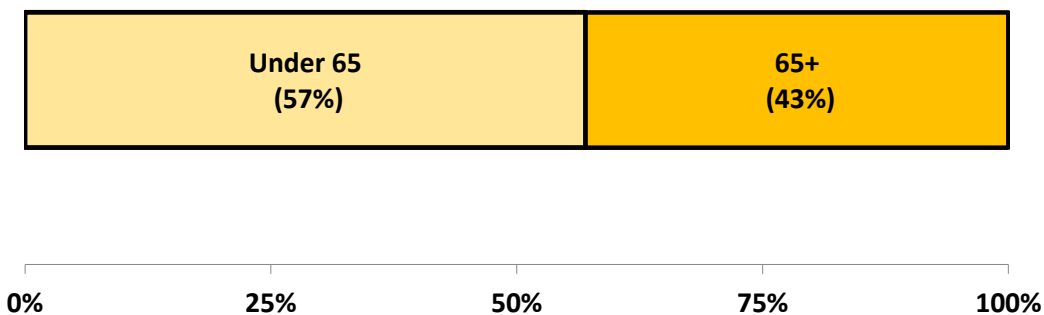


Of these, the client group was known for **6,456** service users. Almost half (44%) were registered in the learning disability group, with nearly one third (36%) in the elderly group. Just over 1 in 10 (11%), and nearly 1 in 14 (7%) were registered in the mental health and physical/sensory groups, respectively. A small proportion, approx. 1 in 30 (3%), were registered in the no material disablement group. An illustrative schematic is set out below.

6,234*  registered to attend Day Care whose age was known:



Day Care Service Users by Age Group at 31 March 2020*



*Please note the above graphic represents 95% of registered persons attending daycare whose age-band was known.

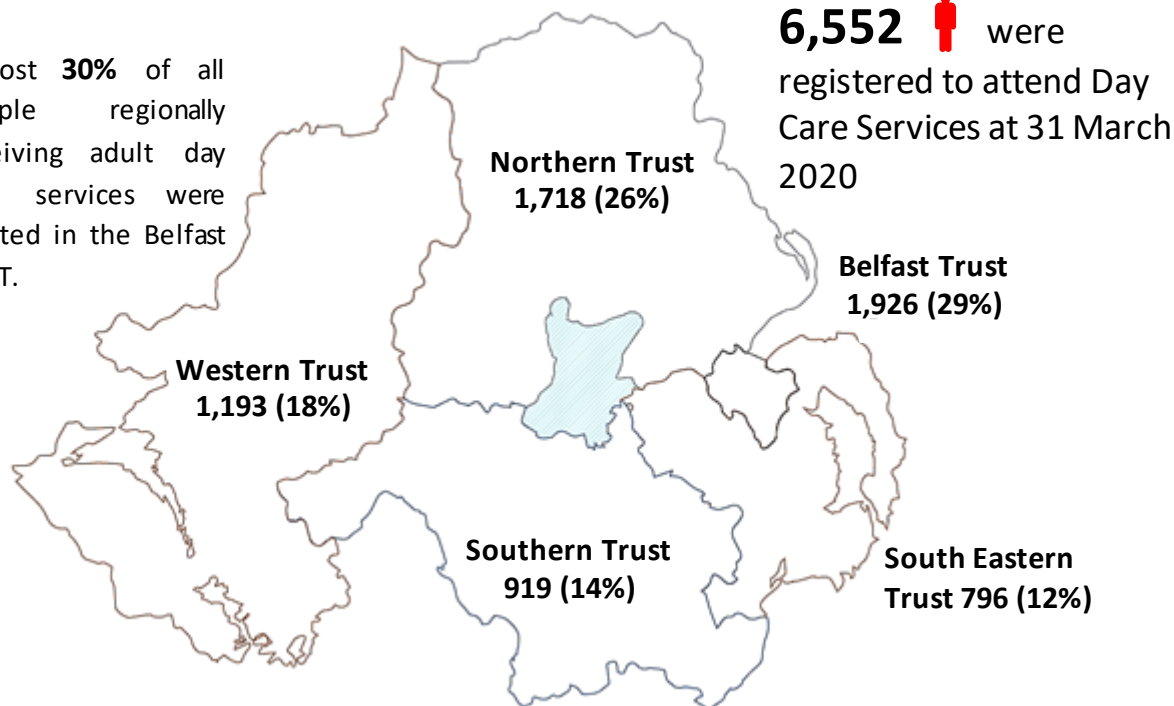
Day Care Services



COMMUNITY SERVICES

Persons Registered to attend Day Care Services at 31 March 2020

Almost **30%** of all people regionally receiving adult day care services were located in the Belfast HSCT.



6,552 were registered to attend Day Care Services at 31 March 2020

6,234* registered to attend Day Care whose age was known:

Persons Registered to attend Day Care Services at 31 March 2020 by Age Group and Setting*

Adult Training/ Social Education Centres & Workshops	Under 65 (1,531)		65+ (161)
	Under 65 (2,038)	65+ (2,504)	

* Please note the above graphic represents 95% of registered persons attending daycare whose age-band was known.



Residential home care takes place in either statutory, voluntary or private residential care homes. They are staffed 24 hours a day, providing board and general personal care to the residents. Such premises are provided for those who require ongoing care and supervision in the circumstances where nursing care would normally be inappropriate.

Nursing home care takes place in nursing homes. They are residential facilities providing nursing care 24 hours per day.

Source. *'Article 10 of the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order*

To note, the RQIA is leading on a process to address historically recognised 'dual' categorised care homes, i.e. a care home with nursing home registration status, but carrying both residential and nursing care beds. 'Dual' nursing homes will be asked to action one of the 3 options below:

- Discontinue their residential places;
- Retain a temporary registration for named residents who are already accommodated in the home on the condition that these beds will eventually revert to nursing;
- Register their residential care beds under a separate residential care home registration

This may result in:

- A decrease in the number of nursing homes with residential beds;
- A rise in the overall number of independent residential care homes
- In real terms, a negligible change in the number of registered residential and nursing beds, as the process affects classification of the facility that houses the beds, rather than the type of bed they are.

A **care package** is the form of care recommended through care management. The term care management is used to describe the whole concept which embraces the key functions of assessing need; care-planning; and managing, co-ordinating and reviewing services. HSC Trusts carry out care management assessments to identify a person's needs and determine the best form of care to meet those needs i.e. a care package. The services provided in each care package for each individual client differ in terms of intensity and length.

Registered Care Home Location Maps

Please note, it has not been possible, due to software technical difficulties, to update the location data for registered residential and nursing care facilities as at June 2020. The location data maps in this topic chapter reflects the position as at June 2019, and are representative of the position as at June 2020.

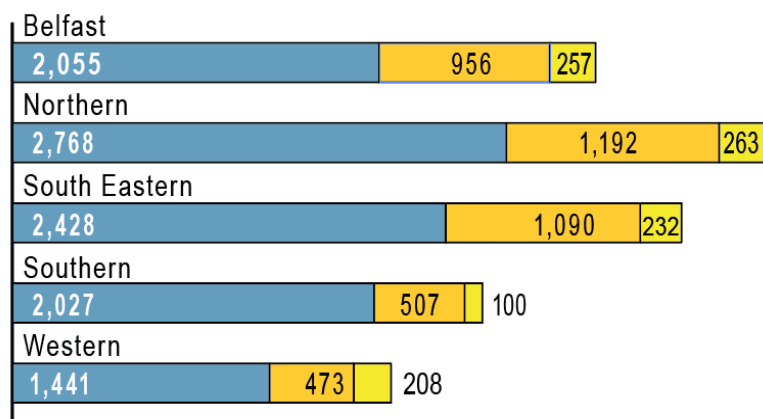
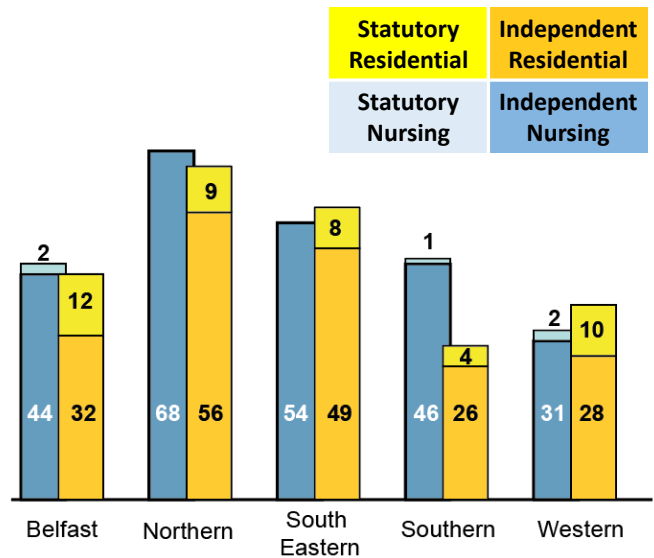


Residential & Nursing Care Snapshot as at 30 June 2020



482 facilities were registered at 30 June 2020.


Similar proportions of residential (234, 49%) and nursing (248, 51%) care homes were registered in June 2020. This is similar to numbers registered as at June 2016. The small rise in residential facilities can be attributed to the ongoing RQIA registration status work outlined on the previous page.

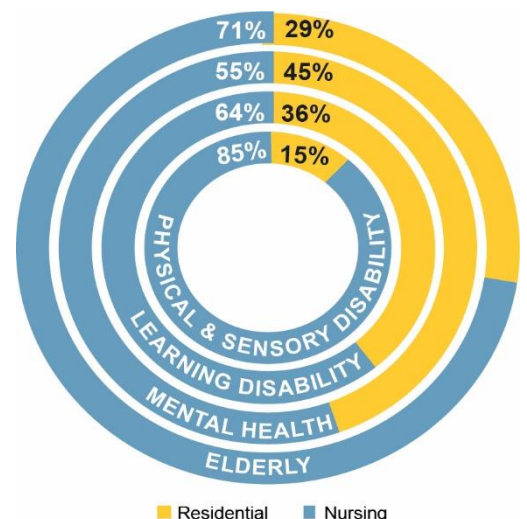


16,080 care home beds were registered at 30 June 2020.

2 in 3 of these were registered as Nursing, with 5,278 available as residential and 10,802 available as nursing.

*Individual figures will not sum to 16,080, as Trust breakdown values for some sector type beds are too small to display clearly in the graphic. Please see Table 17, page 38, for detail.

11,808 care packages  were in effect with 96% of those delivered by the independent sector. Over two thirds of all care packages are Nursing (8,191, 69%). An illustrative breakdown of residential and nursing care packages by POC is shown across.



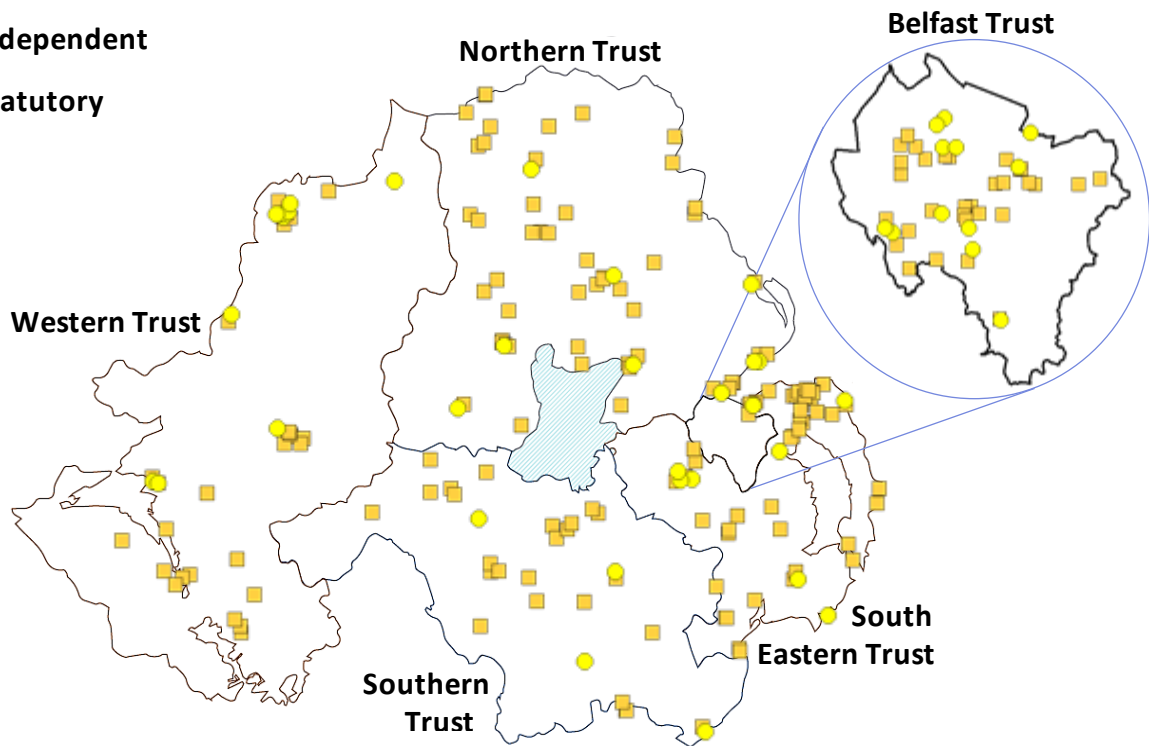
Residential & Nursing Care



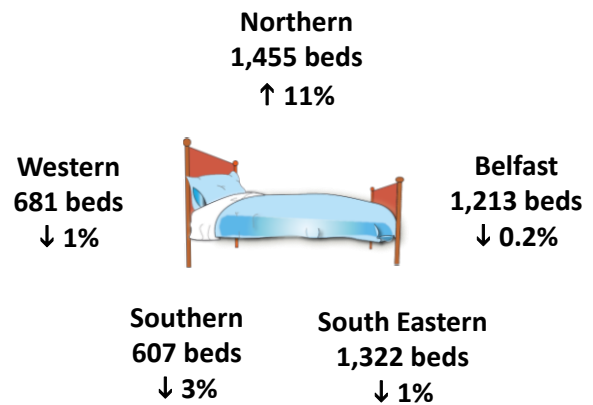
COMMUNITY SERVICES

Registered **Residential Facilities** across HSC Trusts at June 2019

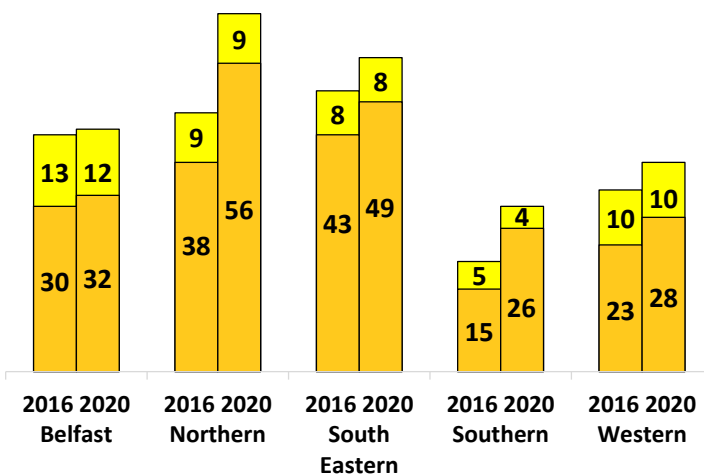
- Independent
- Statutory



Change in Trust Residential Beds, QE June 2016 - 2020



Residential Facilities 2016-2020



Please interpret, with care, trend changes of registered facilities, as recent figures will be impacted by the RQIA led process outlined at the start of the topic chapter.

*2016 figures can be found in *Statistics on Community Care for Adults in Northern Ireland 2015/16*.

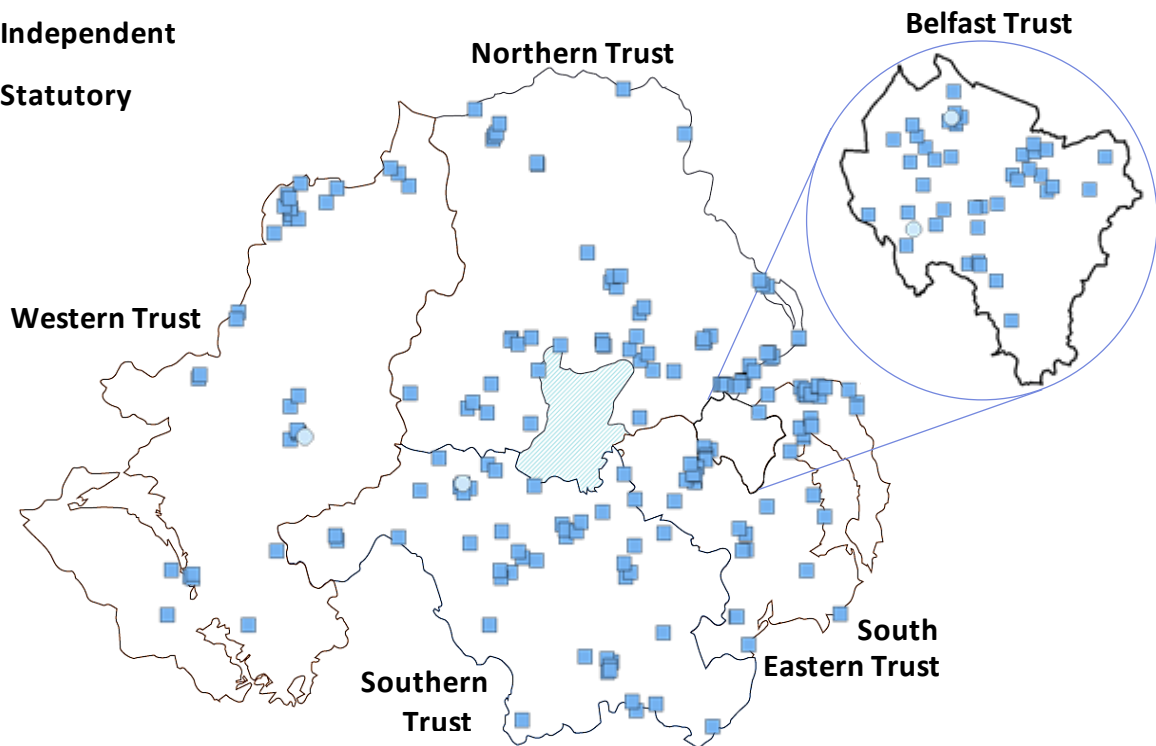
Residential & Nursing Care



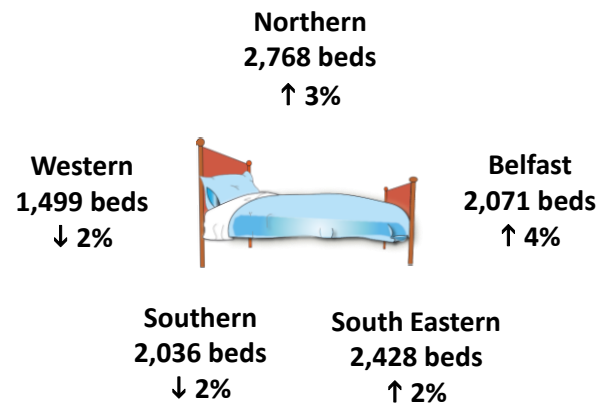
COMMUNITY SERVICES

Registered **Nursing Facilities** across HSC Trusts at June 2019

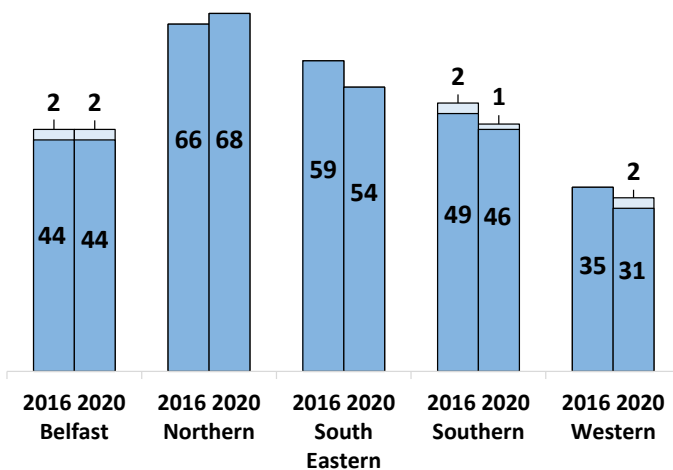
- Independent
- Statutory



Change in Trust Nursing Beds, QE June 2016 - 2020



Nursing Facilities 2016-2020



Please interpret, with care, trend changes of registered facilities, as recent figures will be impacted by the RQIA led process outlined at the start of the topic chapter.

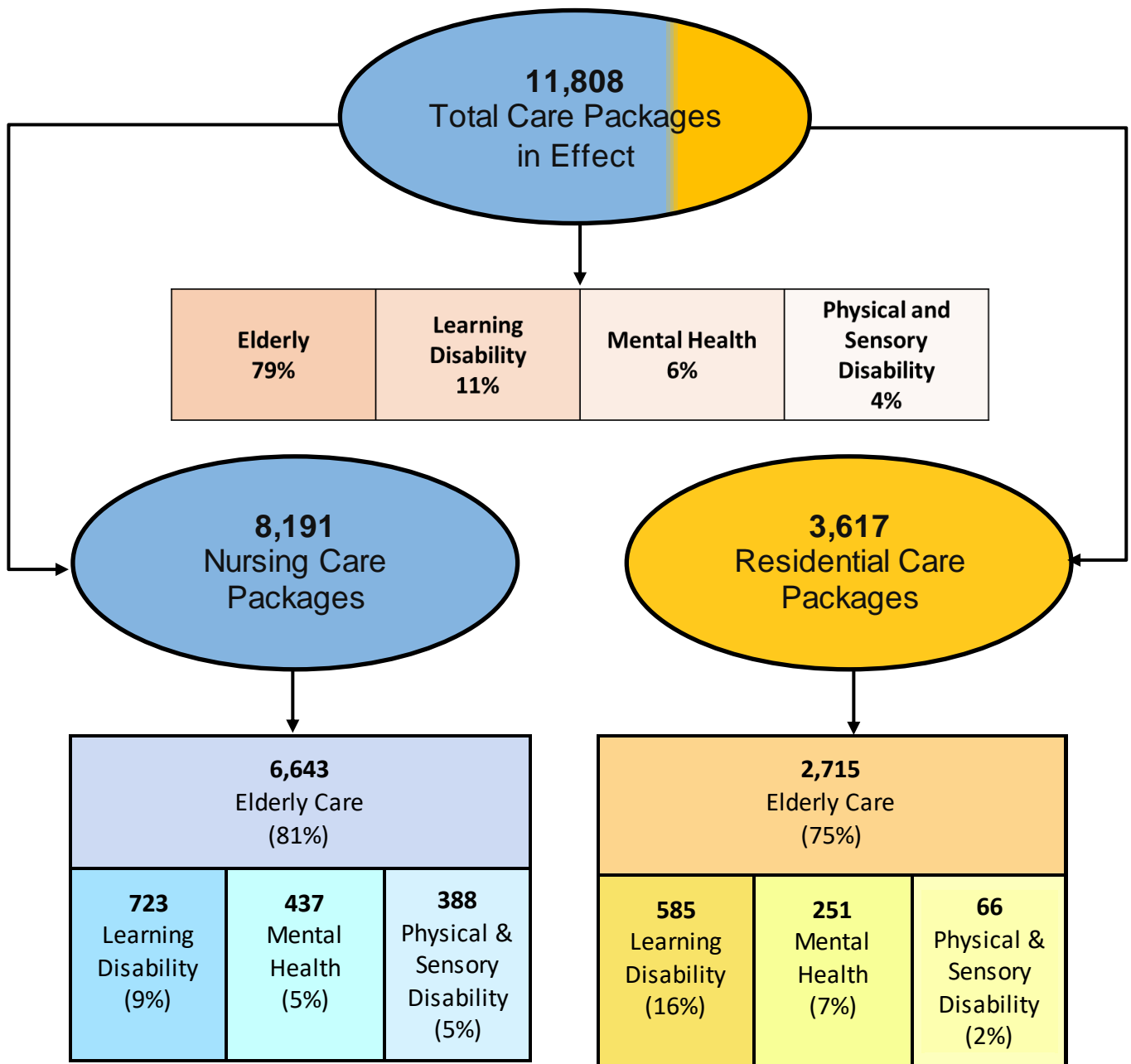
*2016 figures can be found in *Statistics on Community Care for Adults in Northern Ireland 2015/16*.

Residential & Nursing Care

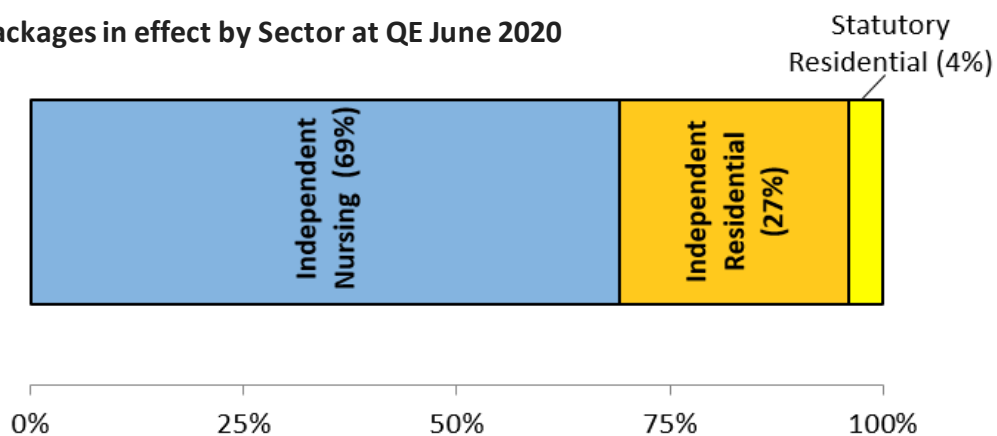


COMMUNITY SERVICES

Care Packages in Effect at June 2020



Care Packages in effect by Sector at QE June 2020



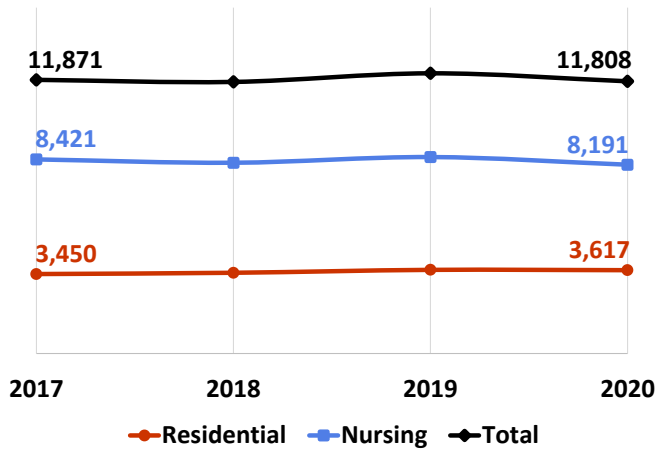
Source: DoH CC7 Return

Residential & Nursing Care

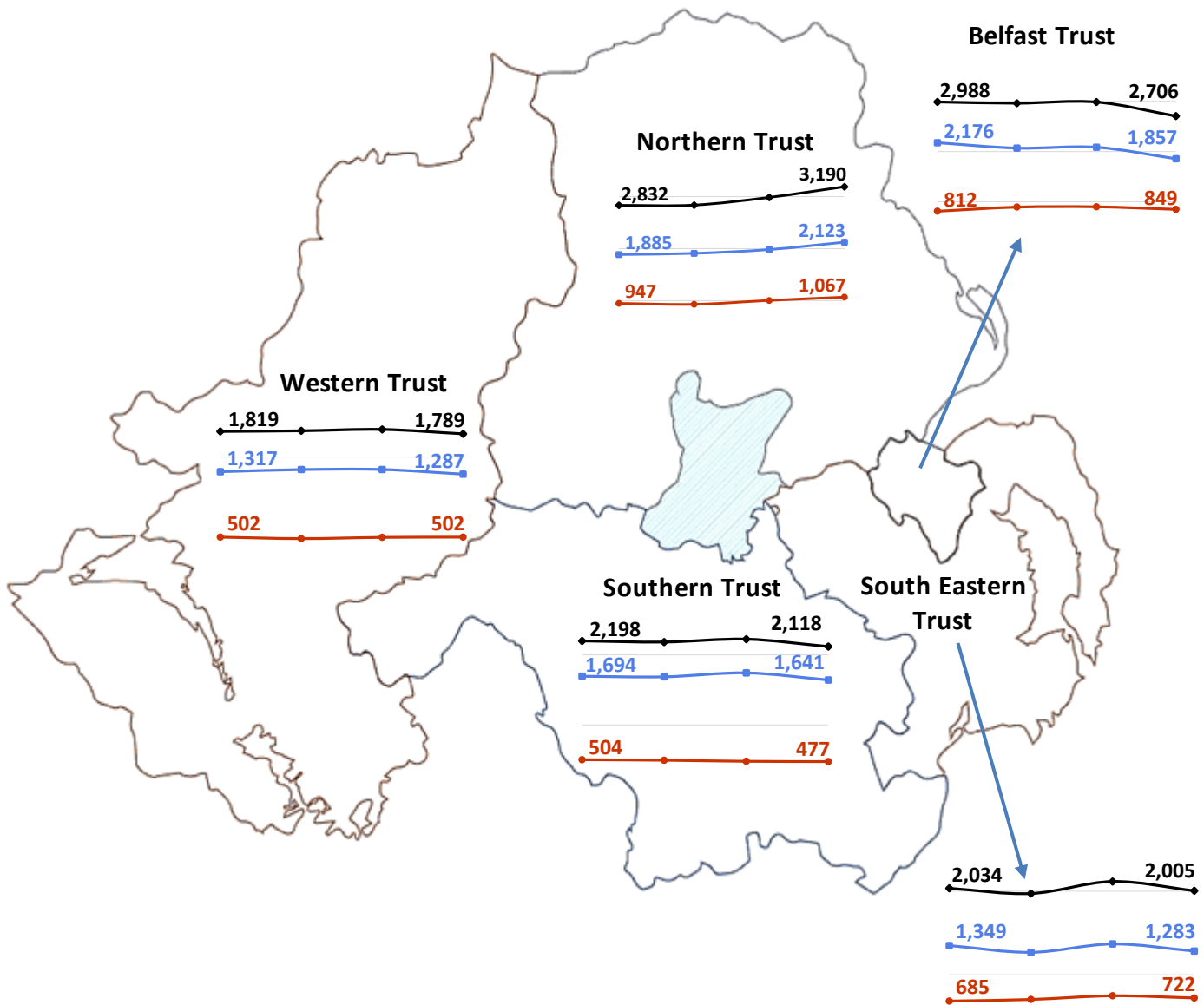


COMMUNITY SERVICES

Regional Care Packages in effect at QE June 2017-2020



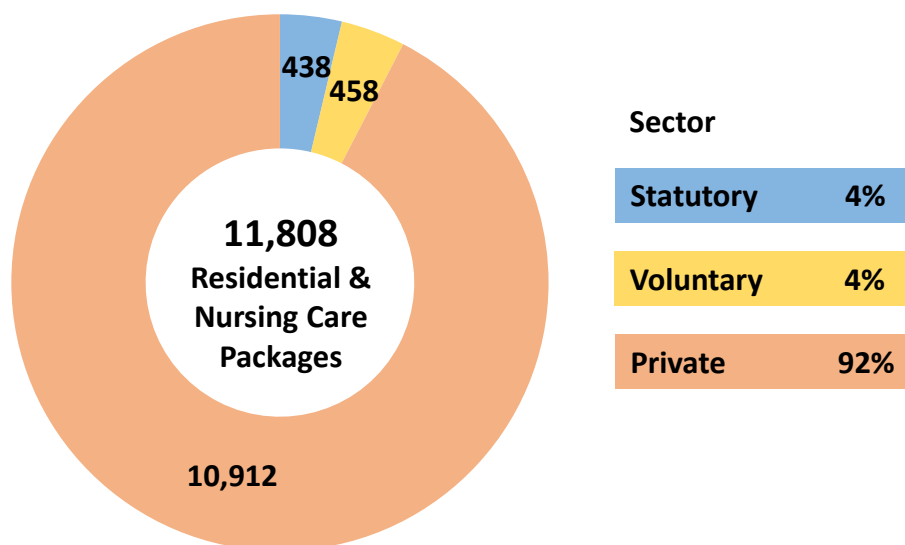
Care Packages in effect by Trust at QE June 2017-2020



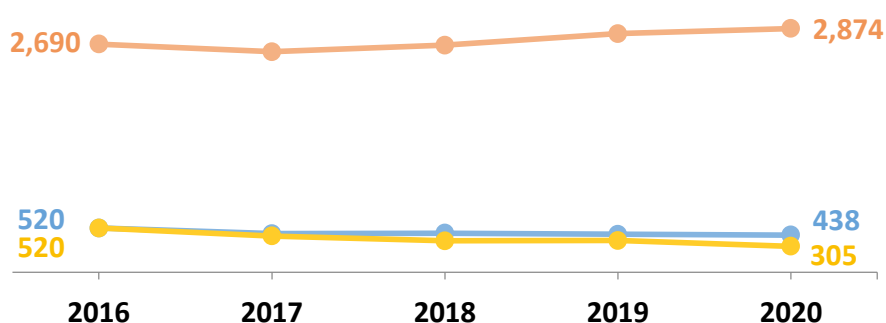
Source: DoH CC7 Return



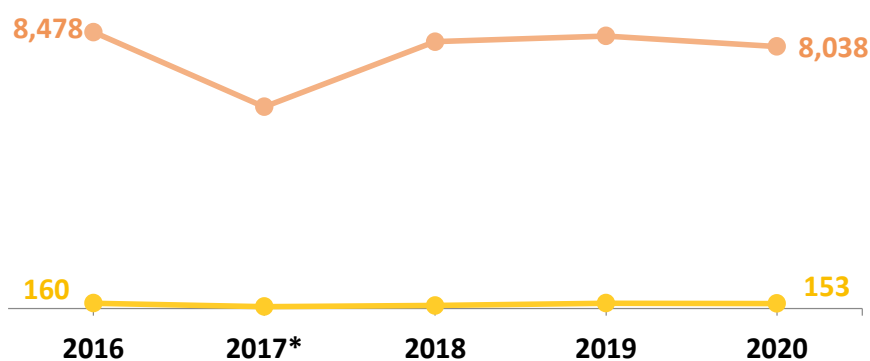
Residential & Nursing Home Care Packages in Effect at 30 June 2020, by Sector



Residential Home Care Packages in Effect at 30 June 2016 - 2020*, by Sector



Nursing Home Care Packages in Effect at 30 June 2016 - 2020*, by Sector



*Sector breakdown was not available for Belfast HSC Trust June 2017 figures.

Source: DoH CC7 Return

Appendix A: Definitions of Terms

Financial Year - a year defined with respect to accounting/ financial purpose, and runs 1st April to 31st of the following year. For example 1st April 2019 to 31st March 2020.

Calendar Year – the period of 365 days defined from 1st January to the 31st December.

Health Social Care (HSC) Trusts – authorities which manage and administer integrated health and social care services across Northern Ireland: They are Belfast HSC Trust, Northern HSC Trust, South Eastern HSC Trust, Southern HSC Trust, and Western HSC Trust. It is important to note that in a minority of cases the community service provided by the HSC Trust may have taken place in a hospital setting. When comparing data at HSC Trust level with earlier years it is important to note that due to a reorganisation of facilities within some HSC Trusts the comparison may not be on a like with like basis.

Sector – describes the type of organisation delivering the service. Three sector types are referenced in this publication: **statutory, independent, or voluntary**. Services delivered by the HSC Trust are described as statutory. Services provided by private organisations are described as independent. The voluntary sector describes **non-profit organisations and non-governmental**.

Client Group are categories into which persons are classed dependent on their disability / impairment.

Elderly	<p>Refers to persons who are aged 65 years or more on the Physical & Sensory and No Material Disablement returns.</p> <p>For 'Persons Receiving Meals on Wheels', the elderly client group is defined as the sum of the persons aged 65+, within the registrable physical disability and not materially handicapped groups, on the KMW2 return.</p> <p>For 'Persons Registered to attend Daycare Facilities', the elderly client group is defined as the sum of the persons aged 65+ on the KDC2(iii) and KDC2(iv) returns, respectively.</p>
Designated Mentally Ill	<p>Refers to persons who in the professional opinion of a doctor - GP or Psychiatrist - are suffering from a mental or psychiatric illness. Mental illness means a state of mind which affects a person's thinking, perceiving, emotion or judgement to the extent that he/ she requires care or medical treatment in his/ her own interests or in the interests of other people.</p>
Learning Disabled	<p>Refers to persons who have a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning. To be</p>

	included in this group a person must be on the Trust's register of learning disabled people.
Physically Disabled / Sensory Impaired	Refers to persons who are substantially and permanently disabled by illness, or otherwise, including the chronically sick. This group will include the following groups: blind, partially sighted, deaf with speech, deaf without speech, hard of hearing and general classes (i.e. those whose primary disablement is neither visual nor auditory).
Severely Sight Impaired	Describes persons in receipt of a Certificate of Vision Impairment (CVI) - Severely sight Impaired
Sight Impaired	Describes persons in receipt of a Certificate of Vision Impairment (CVI) - Sight Impaired
Visually Impaired	Describes persons who have not met a diagnostic clinical threshold of sight impairment/ are not in receipt of Certificate of Vision Impairment (CVI), but require support from the sensory team to navigate their daily life.
Deaf	persons who are culturally Deaf i.e. persons who use British Sign Language
deaf	persons who cannot hear
Hard of hearing	persons with mild-to-moderate hearing loss, not including tinnitus
Without Material Disablement	Refers to those persons, without a physical or mental impairment or learning disability, who have not been included in other client groups.

Programmes of Care (POC's) are divisions of health care, into which activity and finance data are assigned, as to provide a common management framework to support strategic planning. While there are 9 POC groups, only 5 are set out below which fall within the community setting.

PoC	Group	Definition
4	Elderly	<ul style="list-style-type: none"> -Include all community contacts to those aged 65 and over except where the reason for the contact was because of mental illness or learning disability. -Include all community contacts where the reason for the contact was dementia, regardless of the client's age. (However, Down's syndrome clients who develop dementia should remain in POC 6 for any dementia related care or treatment). -Include all physical and/or sensory disabled clients aged 65 and over. -Include all work relating to homes for the elderly, including those for the Elderly Mentally Infirm.
5	Mental Health	<ul style="list-style-type: none"> -Exclude all community contacts where the reason for the contact was dementia. (Dementia activity should be allocated to POC 4. However, Down's syndrome clients who develop dementia should remain in POC 6 for any dementia related care or treatment). Exclude all activity relating to residential accommodation for the Elderly Mentally Infirm. (This activity should be included in POC 4).

6	Learning Disability	-Include all community contacts where the primary reason for the contact was learning disability, regardless of age. -Include community contacts with Down's syndrome clients who develop dementia.
7	Physical & Sensory Disability	Include all community contacts where the primary reason for the contact was physical and/or sensory disability, except those aged 65 and over. (These contacts should be allocated to POC 4 upon reaching 65).
9	Primary Health & Adult Community	Include community clients aged between 16 and 64, for whom the primary reason for the contact is other than mental illness, learning disability, dementia or physical and sensory disablement should be allocated to POC 9 i.e. clients aged 16 to 64 with no material disablement.

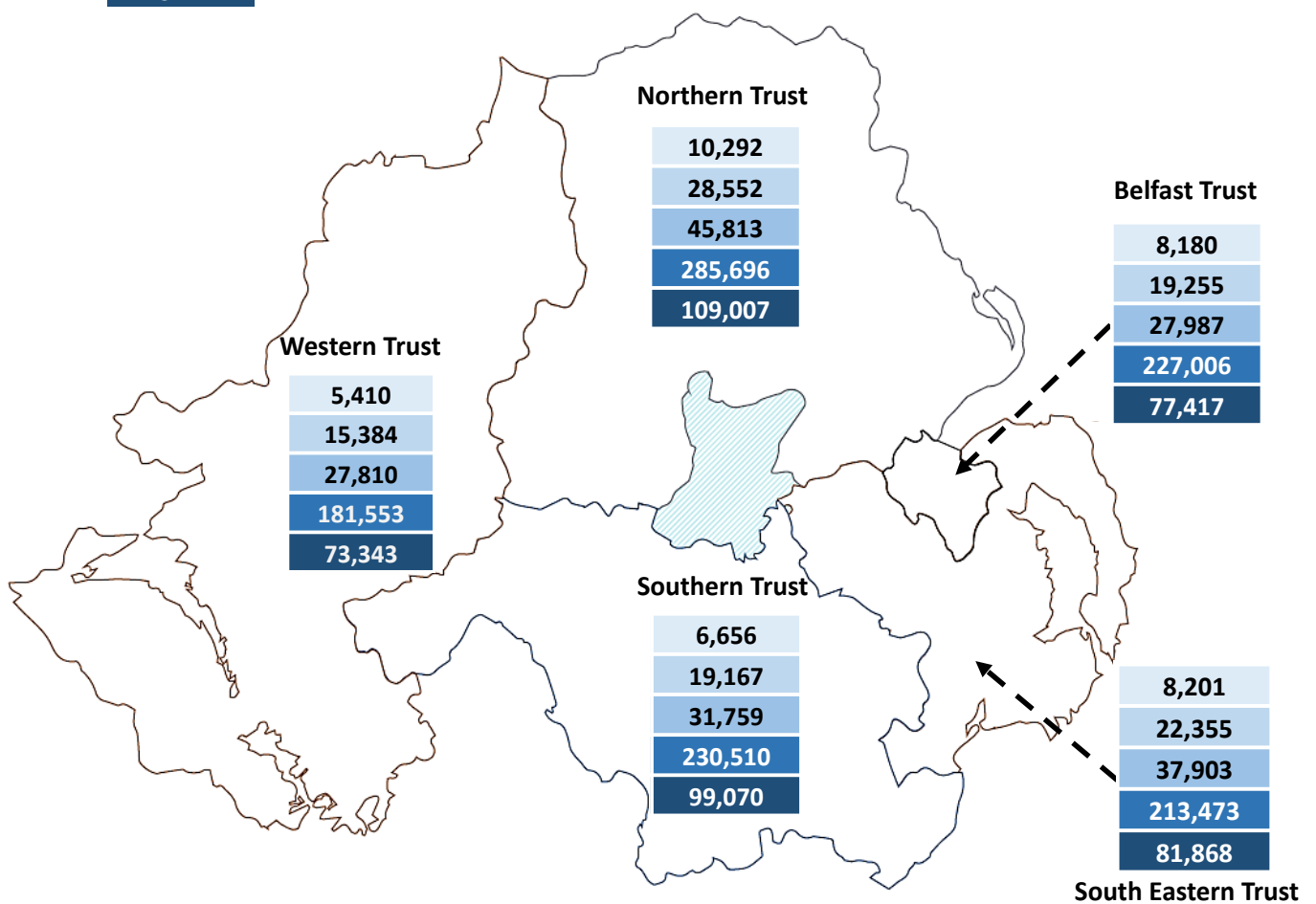
Day Care Settings – Three different types of daycare setting are described in the publication, a description of each is set out below.

Adult Training/ Social Education Centres	These are establishments mainly for people over 16 years of age with a disability in which social and occupational training is provided with the objective of preparing those, who have the ability, to progress into workshops.
Workshops	This is where industrial therapy and contract work is undertaken, aimed at preparing those who are suitable for placement in open or sheltered employment in the community.
Day Centres	These are centres which have a full time organiser and where professional staff are employed. They are open five or more days each week and provide a variety of activities for members and facilities for meals.

Appendix B: Geographical Area of HSC Trusts and Age-Profile of Population 2019

Age Range Key

85+
75-84
65-74
18-64
0-17



Source: Northern Ireland Mid-year Population Estimates 2019 - Northern Ireland Statistics & Research Agency

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Section 1: Home Services

Table 1: Number of Domiciliary Care Recipients during September Survey Week

HSC Trust	2015	2016	2017	2018	2019
Belfast	4,886	4,891	4,448	4,360	4,274
Northern	4,856	5,125	5,166	5,243	5,384
South Eastern	4,850	4,909	4,924	5,051	5,220
Southern	4,289	4,489	4,558	4,738	4,872
Western	4,379	4,459	4,099	4,017	3,675
Northern Ireland	23,260	23,873	23,195	23,409	23,425

Reported figures exclude double counting i.e. clients receiving domiciliary care from both the Independent and the statutory sectors.

Table 2: Number of Domiciliary Care Visits during September Survey Week

HSC Trust	2016	2017	2018	2019
Belfast	79,598	93,001	94,056	96,001
Northern	102,111*	122,306	126,931	130,836
South Eastern	107,640	110,092	114,258	119,048
Southern	91,543	87,420	88,345	90,707
Western	55,282	80,881	81,255	78,636
Northern Ireland	436,174*	493,700	504,845	515,228

*The total regional visits figure includes an estimate for the number of statutory visits greater than 30 minutes in length for the Northern HSC Trust. The estimate is in line with the 2015 survey findings.

Table 3: Number of Domiciliary Care Contact Hours during September Survey Week

HSC Trust	2015	2016	2017	2018	2019
Belfast	40,506	44,076	39,114	40,224	41,010
Northern	52,580	50,956	54,281	56,813	60,609
South Eastern	63,120	69,590	67,015	69,475	75,194
Southern	48,445	53,272	54,142	57,813	58,508
Western	50,558	50,989	47,100	42,758	40,867
Northern Ireland	255,209	268,883	261,652	267,083	276,118

Further detail on the figures in the above three tables is available in the '[Northern Ireland Domiciliary Care Services for Adults 2019](#)' publication.

Table 4: Number of Persons Starting Re-ablement Services during the financial years 2016/17-2019/20

HSC Trust	2016/17	2017/18	2018/19	2019/20 [^]
Belfast	1,575	1,541	1,390	1,483
Northern	938	1,189	1,193	1,291
South Eastern	1,076	1,078	963	582
Southern	1,525	1,174	1,203	1,139
Western	866	982	1,019	957
Northern Ireland	5,980	5,964	5,768	5,452

Source: HSCB

Table 5: Number of persons discharged from Re-ablement Services during the financial years 2016/17-2019/20

HSC Trust	2016/17	2017/18	2018/19	2019/20 [^]
Belfast	1,538	1,502	1,399	1,472
Northern	864	1,056	1,085	1,366
South Eastern	1,032	1,088	975	617
Southern	1,504	1,137	1,207	1,159
Western	902	986	1,023	993
Northern Ireland	5,840	5,769	5,689	5,607

Source: HSCB

Table 6: Number of persons discharged from Re-ablement Services with no ongoing care package / Occupational Therapy during the financial years 2016/17-2019/20

HSC Trust	2016/17	2017/18	2018/19	2019/20 [^]
Belfast	749	639	579	709
Northern	327	332	370	420
South Eastern	421	468	457	210
Southern	708	584	719	771
Western	340	428	447	468
Northern Ireland	2,545	2,451	2,572	2,578

Source: HSCB

[^]In March 2020, the Belfast HSC Trust re-ablement service was reconfigured on a temporary basis to accommodate the management and care of COVID and/or end of life patients in the community, as a result no re-ablement activity took place during this month.

[~]South Eastern Trust advised that figures for clients starting re-ablement were lower in 2019/20 due to different screening procedures in place.

Table 7: Persons Receiving Meals on Wheels Service, by Trust at 31st March 2015/16-2019/20

HSC Trust	2015/16	2016/17	2017/18	2018/19	2019/20
Belfast	609	581	469	503	406
Northern	216	176	127	100	81
South Eastern	238	176	134	107	96
Southern	0	0	0	0	0
Western	1,058	913	845	878	903
Northern Ireland	2,121	1,846	1,575	1,588	1,486

Source: DoH KMW2 Return

Table 8: Persons Receiving Meals on Wheels Service, by Client Group and by Trust at 31st March 2019/20 ^{1,2}

HSC Trust	Elderly	Mental Health	Learning Disability	Physical & Sensory Disability <65	No Material Disablement <65	Total
Belfast	362	0	0	43	0	406
Northern	65	0	7	8	0	81
South Eastern*	0	0	0	0	0	96
Southern	0	0	0	0	0	0
Western	890	0	0	0	9	903
Northern Ireland	1,317	3	12	51	12	1,486

¹The 'Total' column may not agree with the sum of the individual categories, as some Trusts may include a person in more than one client group. As a consequence, information for particular Trusts will not equate with the meals data summed across individual client groups

² "0" represents either a zero or a cell count less than 4 in order to avoid personal disclosure. In addition, where a zeroed cell can be deduced from the totals, the smallest cells have been zeroed. For this reason some row or column totals may not tally.

*South Eastern HSC Trust are unable to provide client group breakdown.

Source: DoH KMW2 Return

Table 9: Persons Receiving Meals on Wheels Service, by Age-Band and Trust at 31st March 2019/20

HSC Trust	Under 65	65-74	75-84	85+	Total
Belfast	44	52	109	201	406
Northern	13	18	20	30	81
South Eastern*	0	0	0	0	96
Southern	0	0	0	0	0
Western	9	79	275	540	903
Northern Ireland	66	149	404	771	1,486

*Please note that the individual age-bands totals will not sum to overall total, as South Eastern HSC Trust are unable to provide age breakdown as per table age-bands, but all persons will be reflected in total count column.

Source: DoH KMW2 Return

Section 2: Community Services

Table 10: *Number of Adults fitted with hearing aids by the statutory sector in NI 2015/16 – 2019/20

HSC Trust	2015/16	2016/17	2017/18	2018/19	2019/20
Belfast	3,183	4,326	4,525	4,144	3,528
*Northern	11,716	8,293	5,507	4,855	3,469
South Eastern	4,681	5,044	5,754	6,025	5,588
Southern	2,004	2,602	2,420	2,308	2,466
Western	1,857	1,825	2,239	2,587	2,356
Northern Ireland	23,441	22,090	20,445	19,919	17,407

*Northern HSC Trust figures reflect mainly activity for adult services, with some small activity for paediatric services also included. The Trust are not able to provide adult service only figures.

Any interpretation of this data should also consider the below:

1. Patients can have 2 hearing aids fitted.
2. Patients do not always have a fitting following a hearing aid fitting appointment, as some patients decide not to proceed at this point.
3. Patients can have a hearing aid fitted without a hearing aid fitting appointment as they have a “see and fit” diagnostic assessment appointment.

Source: HSCB

Table 11: *Number of Adults fitted with hearing aids by the statutory sector in NI in each quarter of 2019/20

HSC Trust	Q1 (Apr-Jun 19)	Q2 (Jul-Sep 19)	Q3 (Oct-Dec 19)	Q4 (Jan-Mar 20)
Belfast	916	864	957	791
*Northern	1,104	799	847	719
South Eastern	1,409	1,374	1,348	1,457
Southern	565	577	707	617
Western	567	429	605	755
Northern Ireland	4,561	4,043	4,464	4,339

*Northern HSC Trust figures reflect mainly activity for adult services, with some small activity for paediatric services also included. The Trust are not able to provide adult service only figures.

Any interpretation of this data should also consider the below:

4. Patients can have 2 hearing aids fitted.
5. Patients do not always have a fitting following a hearing aid fitting appointment, as some patients decide not to proceed at this point.
6. Patients can have a hearing aid fitted without a hearing aid fitting appointment as they have a “see and fit” diagnostic assessment appointment.

Source: HSCB

Table 12: Registered Day Care Facilities across HSC Trusts at March 2020

HSC Trust	Statutory	Independent	All Facilities
Belfast	24	7	31
Northern	24	2	26
South Eastern	14	13	27
Southern	21	10	31
Western	33	21	54
Northern Ireland	116	53	169

Source: RQIA

Table 13: Persons Registered at Statutory Day Care Facilities by client group at 31st March 2017-2020

Client Group	2017	2018	2019	2020
Elderly	2,207	2,161	1,995	2,294
Mental Health	921	947	776	709
Learning Disability	3,117	2,999	2,888	2,844
Physical/ Sensory Disability <65	561	537	513	426
No Material Disablement <65	255	219	212	183
Northern Ireland	7,173	6,961	6,478	6,552

* Please note individual rows may not sum to the N.I. total due to unknown age-bands being returned.

*The Elderly client group is comprised of persons in the Physical/Sensory Disability or No Material Disablement groups aged 65+.

Source: DoH KDC2 (i) - (iv) Return

Table 14: Persons Registered at Statutory Day Care Facilities, by Age, by Trust at March 31st 2017-2020

HSC Trust	2017		2018		2019		2020	
	< 65	65+	< 65	65+	< 65	65+	<65	65+
Belfast	1,028	827	989	886	985	653	900	1026
Northern	1,305	826	1,242	746	1,102	755	1,041	677
South Eastern	867	72	864	74	743	85	715	81
Southern	479	474	463	492	455	519	419	500
Western*	217	378	178	370	491	372	494	381
Northern Ireland	3,896	2,577	3,736	2,568	3,776	2,384	3,569	2,665
NI Total	7,173		6,961		6,478		6,552	

* Please note individual rows may not sum to the N.I. total due to unknown age-bands being returned.

Source: DoH KDC2 (i) - (iv) Return

Table 15: Persons Registered at Statutory Day Care Facilities by Settings, by Age, by Trust at March 31st 2020

HSC Trust	Adult Training / Social Education Centres & Workshops		Day Centres		All Facilities	
	<65	65+	<65	65+	<65	65+
Belfast	0	0	900	1,026	900	1,026
Northern	737	76	304	601	1,041	677
South Eastern	302	42	413	39	715	81
Southern	0	0	419	500	419	500
Western *	643		550		1,193	
Northern Ireland	1,800		4,752		6,552	

* As some Western HSC Trust data is provided by manual returns, age-band information could not be provided for all persons.

Source: DoH KDC2 (i) - (iv) Return

Table 16: Residential Accommodation in Northern Ireland, by Type of Home as at 30 June 2020

HSC Trust	Statutory		Independent		Total	
	Home	Beds	Home	Beds	Home	Beds
Belfast	12	257	32	956	44	1,213
Northern	9	263	56	1,192	65	1,455
South Eastern	8	232	49	1,090	57	1,322
Southern	4	100	26	507	30	607
Western	10	208	28	473	38	681
Northern Ireland	43	1,060	191	4,218	234	5,278

Residential beds in nursing homes have been excluded from Table 16 to avoid double counting.

Source: RQIA

Table 17 Nursing Accommodation in Northern Ireland, by Type of Home as at 30 June 2020

HSC Trust	Statutory		Independent		Total	
	Home	Beds	Home	Beds	Home	Beds
Belfast	2	16	44	2,055	46	2,071
Northern	0	0	68	2,768	68	2,768
South Eastern	0	0	54	2,428	54	2,428
Southern	1	9	46	2,027	47	2,036
Western	2	58	31	1,441	33	1,499
Northern Ireland	5	83	243	10,719	248	10,802

The Independent category reflects homes/beds previously denoted as dual.

Source: RQIA

Table 18. Care Packages in Effect, by Care Type and Sector at 30 June 2020

HSC Trust	Residential Home Care				Nursing Home Care				All Packages
	Sector				Sector				
	Stat.	Vol.	Private	Total	Stat.	Vol.	Private	Total	All Sectors
Belfast	107	42	700	849	0	11	1,846	1,857	2,706
Northern	53	63	951	1,067	0	72	2,051	2,123	3,190
South Eastern	137	129	456	722	0	21	1,262	1,283	2,005
Southern	26	4	447	477	0	0	1,641	1,641	2,118
Western	115	67	320	502	0	49	1,238	1,287	1,789
Northern Ireland	438	305	2,874	3,617	0	153	8,038	8,191	11,808

Abbreviations: Stat = Statutory; Vol. = Voluntary

Source: DoH CC7 Return

Table 19. Care Packages in Effect, in Elderly Programme of Care, by Care Type and Sector at 30 June 2020^{1, 2}

HSC Trust	Residential Home Care				Nursing Home Care				All Packages
	Sector				Sector				
	Stat.	Vol.	Private	Total	Stat.	Vol.	Private	Total	All Sectors
Belfast	87	15	522	624	0	9	1,461	1,470	2,094
Northern	43	33	784	860	0	45	1,668	1,713	2,573
South Eastern	125	61	363	549	0	16	1,085	1,101	1,650
Southern	23	0	319	342	0	0	1,238	1,238	1,580
Western	77	46	217	340	0	22	1,099	1,121	1,461
Northern Ireland	355	155	2,205	2,715	0	92	6,551	6,643	9,358

¹ Abbreviations: Stat = Statutory; Vol. = Voluntary

² "0" represents either a zero or a cell count less than 4 in order to avoid personal disclosure. In addition, where a zeroed cell can be deduced from the totals, the smallest cells have been zeroed. For this reason some row or column totals may not tally.

Source: DoH CC7 return

Table 20. Care Packages in Effect, in Mental Health programme of Care, by Care Type and Sector at 30 June 2020^{1, 2}

HSC Trust	Residential Home Care				Nursing Home Care				All Packages
	Sector				Sector				
	Stat.	Vol.	Private	Total	Stat.	Vol.	Private	Total	
Belfast	0	0	71	75	0	0	111	111	186
Northern	0	0	80	90	0	0	0	86	176
South Eastern	0	0	11	13	0	0	0	38	51
Southern	0	0	43	45	0	0	159	159	204
Western	0	0	26	28	0	0	43	43	71
Northern Ireland	9	11	231	251	0	1	436	437	688

¹ Abbreviations: Stat = Statutory; Vol. = Voluntary

² "0" represents either a zero or a cell count less than 4 in order to avoid personal disclosure. In addition, where a zeroed cell can be deduced from the totals, the smallest cells have been zeroed. For this reason some row or column totals may not tally.

Source: DoH CC7 return

Table 21. Care Packages in Effect, in Learning Disability programme of Care, by Care Type and Sector at 30 June 2020^{1, 2}

HSC Trust	Residential Home Care				Nursing Home Care				All Packages
	Sector				Sector				
	Stat.	Vol.	Private	Total	Stat.	Vol.	Private	Total	
Belfast	20	23	85	128	0	0	156	156	284
Northern	0	0	66	94	0	26	199	225	319
South Eastern	10	66	73	149	0	0	0	93	242
Southern	0	0	84	89	0	0	179	179	268
Western	36	0	69	125	0	0	0	70	195
Northern Ireland	73	135	377	585	0	55	668	723	1,308

¹ Abbreviations: Stat = Statutory; Vol. = Voluntary

² "0" represents either a zero or a cell count less than 4 in order to avoid personal disclosure. In addition, where a zeroed cell can be deduced from the totals, the smallest cells have been zeroed. For this reason some row or column totals may not tally.

Source: DoH CC7 return

Table 22. Care Packages in Effect, in Physical & Sensory Disability programme of Care, by Care Type and Sector at 30 June 2020^{1, 2}

HSC Trust	Residential Home Care				Nursing Home Care				All Packages
	Sector				Sector				
	Stat.	Vol.	Private	Total	Stat.	Vol.	Private	Total	All Sectors
Belfast	0	0	22	22	0	0	0	120	142
Northern	0	0	21	23	0	0	99	99	122
South Eastern	0	0	9	11	0	0	0	51	62
Southern	0	0	0	0	0	0	65	65	66
Western	0	0	0	0	0	0	53	53	62
Northern Ireland	1	4	61	66	0	5	383	388	454

¹ Abbreviations: Stat = Statutory; Vol. = Voluntary

² "0" represents either a zero or a cell count less than 4 in order to avoid personal disclosure. In addition, where a zeroed cell can be deduced from the totals, the smallest cells have been zeroed. For this reason some row or column totals may not tally.

Source: DoH CC7 return

Table 23. Total Care Packages in Effect, by Trust, as at 30 June 2017- 2020

HSC Trust	2017			2018			2019			2020		
	Residential	Nursing	Total	Residential	Nursing	Total	Residential	Nursing	Total	Residential	Nursing	Total
Belfast	812	2,176	2,988	894	2,069	2,963	900	2,086	2,986	849	1,857	2,706
Northern	947	1,885	2,832	928	1,909	2,837	1,003	1,982	2,985	1,067	2,123	3,190
South Eastern	685	1,349	2,034	704	1,268	1,972	748	1,368	2,116	722	1,283	2,005
Southern	504	1,694	2,198	496	1,686	2,182	481	1,742	2,223	477	1,641	2,118
Western	502	1,317	1,819	483	1,344	1,827	499	1,345	1,844	502	1,287	1,789
Northern Ireland	3,450	8,421	11,871	3,505	8,276	11,781	3,631	8,523	12,154	3,617	8,191	11,808

Source: DoH CC7 Return

Table 24. Activity Trends for Care Packages by Programme of Care (POC) (2016/17 – 2019/20)

Client Group	2016/17*	2017/18	2018/19	2019/20
Elderly	-	9,519	9,771	9,358
Mental Health	-	619	654	688
Learning Disability	-	1,272	1,324	1,308
Physical/ Sensory Disability	-	371	405	454
Total	11,871	11,781	12,154	11,808

*Regional breakdown of care packages by POC was not available in 2016/17.

Source: DoH CC7 Return

Table 25. Residential Accommodation for Elderly Persons, by Sector at 31 March 2020

HSC Trust	Number of Residential Homes					Average Available Places					Average Occupied Places in Statutory Homes
	Stat.	Vol.	Private	Dual	Total	Stat.	Vol.	Private	Dual	Total	
Belfast	4	9	11	6	30	100	347	340	121	908	78
Northern	7	0	56	1	64	200	0	1,184	10	1,394	138
South Eastern	6	6	28	0	40	218	212	659	0	1,089	165
Southern	4	1	5	23	33	97	41	140	188	466	60
Western	5	3	10	2	20	153	56	215	32	456	123
Northern Ireland	26	19	110	32	187	768	656	2,538	351	4,313	564

Source: DoH KEL1 Return

Abbreviations: Stat = Statutory; Vol. = Voluntary

Table 26. Residential Accommodation for Persons with a Learning Disability, by Sector at 31 March 2020

HSC Trust	Number of Residential Homes					Average Available Places					Average Occupied Places in Statutory Homes
	Stat.	Vol.	Private	Dual	Total	Stat.	Vol.	Private	Dual	Total	
Belfast	6	3	2	0	11	39	32	29	0	100	39
Northern	2	0	0	0	2	12	0	0	0	12	10
South Eastern	2	5	6	0	13	12	86	117	0	215	10
Southern	0	2	7	1	10	0	15	78	3	96	0
Western	4	4	4	0	12	51	60	47	0	158	51
Northern Ireland	14	14	19	1	48	114	193	271	3	581	110

Source: DoH KMH1 Return

Abbreviations: Stat = Statutory; Vol. = Voluntary

Table 27. Activity Trends for Social Care (2016/17 – 2019/20)

Activity Indicator	2016/17	2017/18	2018/19	2019/20	% Change over last 4 years 2016/17 - 2019/20
Persons with disability in Contact with HSC Trusts	- *	30,066 ^R	30,092	- *	A direct comparison cannot be made*
Care Packages in Effect	11,871	11,781	12,154	11,808	- 1%
Persons Receiving Meals on Wheels Service	1,846	1,575	1,588	1,486	- 20%
Available Residential Care Beds	5,238	5,147	5,233	5,278	1%
Available Nursing Care Beds	10,700	10,859	10,832	10,802	1%
Persons Registered at Statutory Day Care Facilities	7,173	6,961	6,478	6,552	- 9%

* In 2016/17 and in 2019/20 a figure for 'persons with disability in contact' is not available for trend analysis due to incomplete data submission for the KPH2 (i) return in 2016/17 and 2019/20.

^R 2017/18 'persons with disability in contact' figure has been revised due to an amended Belfast HSCT 2017/18 KPH2 (i) return.

Sources: DoH KPH2(i-iii), KMH2, CC7, KMW2 & KDC2(i-iv) returns, and RQIA.

Table 28. Persons with Disability in Contact with HSC Trusts (2016/17-2019/20)

Trust	Client Group	2016/17*	2017/18	2018/19*	2019/20*
Belfast	Sight impairment	2,513	2,685	2,796	1,413
	Hearing impairment	2,264	2,557	2,532	1,097
	Physical Disability	-	1,838	1,867	1,651
	Learning Disability	1,661	1,811	1748 [^]	1,737
	Total	6,438	8,891	8,943	5,898
Northern	Sight impairment	1,080	1,086	1,010	1,092
	Hearing impairment	882	985	920	875
	Physical Disability	1,371	1,062	929	824
	Learning Disability	1,973	1,972	1,932	1,924
	Total	5,306	5,105	4,791	4,715
South Eastern	Sight impairment	1,618	1,627	1,623 [^]	1,642
	Hearing impairment	556	513	523	566
	Physical Disability	1,584	1,638	1,716	1,696
	Learning Disability	2,042	2,006	2,067	2,054
	Total	5,800	5,784	5,929	5,958
Southern	Sight impairment	750	760	-	-
	Hearing impairment	691	617	-	-
	Physical Disability	1,476	1,307	-	-
	Learning Disability	1,841	2,197	-	-
	Total	4,758	4,881	-	-
Western	Sight impairment	779	856	793	859
	Hearing impairment	949	997	912	925
	Physical Disability	1,868	1,780	2,188	1,564
	Learning Disability	1,755	1,772	1,695	1,498
	Total	5,351	5,405	5,588	4,846
Total		27,653	30,066	25,251	21,417

* These data are unavailable due development work to migrate these data to new IT system, and ongoing validation work ahead of publication

[^] 2018/19 figures are revised based on amended returns

Source: DoH KPH2(i-iii) & KMH2 Return

Appendix D: Technical Notes

Report Time Period

All information in this publication refers to the period 1st April 2019 - 31st March 2020 or position at 31st March 2020 unless stated otherwise. The cut-off point for amendments to data was 6th November 2020. Any amendments notified by HSC Trusts after this date will not have been included.

Disclosure Conventions

To prevent disclosure of the identity of individuals, it has been necessary to apply disclosure control methods. Where figures to be reported are small or may be deduced from row or column totals, these have been treated using professionally agreed methods of suppression to ensure confidentiality is maintained and that no individual is capable of being identified. Where information has been suppressed the method used is indicated in the publication. Our policy statement on disclosure and confidentiality can be found in the [DoH Statistics Charter](#).

Rounding Conventions

Percentages have been rounded to whole numbers and as a consequence some percentages may not sum to 100. 0% may reflect rounding down of values under 0.5%.

Revisions Policy

These data are revised by exception. If revisions are required, background circumstances are reported and revision dates are noted in subsequent publications of these series of statistics. The general revisions policy for Official Statistics produced by the DoH can be found in the [DoH Statistics Charter](#).

Data Sources

The majority of data presented in this report is underpinned by 13 Departmental annual Korner Aggregate Returns (KARs) returns. These returns are completed by each of the 5 HSC Trusts. An overview of these returns and the data that they collect is set out below. The individual 'KAR' and CC7 templates, and associated guidance can be viewed on this Departmental webpage. A copy of the CC7b Domiciliary Care Survey and accompanying guidance can be viewed on [page 48](#) of the [2018 Domiciliary Care Survey Report](#).

Departmental Returns	Description of Data Collected
KDC2(i)	Persons registered at statutory day care facilities by client group and age at 31 March – Designated mentally ill
KDC2(ii)	Persons registered at statutory day care facilities by client group and age at 31 March – Learning disabled
KDC2(iii)	Persons registered at statutory day care facilities by client group and age at 31 March – Registerable physically disabled
KDC2(iv)	Persons registered at statutory day care facilities by client group and age at 31 March – Persons without material disablement
KEL1	Residential homes for elderly people; year ending 31 March.
KMH1	Residential homes for people with a learning disability; year ending 31 March.
KMH2	Learning disabled persons with whom Trust had contact and no. of new referrals, during year ending 31 March
KMW2	Persons receiving meals on wheels service by age, sex and major disability; at 31 March.

KPH1	Residential homes solely for physically disabled people; year ending 31 March
KPH2 (i)	Registerable physically disabled people – general classes, who had contact with the Trust and no. of new referrals, during year ending 31 March
KPH2(ii)	Severely Sight Impaired, Sight Impaired & Visually Impaired sighted people who had contact with the Trust and no. of new referrals, during year ending 31 March
KPH2(iii)	Deaf, deaf and hard of hearing people who had contact with the Trust, and no. of new referrals, during year ending 31 March
CC7	Quarterly CC7 Community Information Return – Residential and nursing home care packages in effect at end of quarter
CC7b- Domiciliary Care Survey	Annual Departmental Domiciliary Care Survey carried out in September each year
Additional Sources	
Re-ablement Return	Regional re-ablement template, quarterly collection
Audiology	Regional audiology template, monthly collection
Regulation & Quality Improvement Authority (RQIA)	RQIA is the independent body responsible for collecting registration data for residential, nursing and daycare facilities. Further information is available at: http://www.rqia.org.uk/home/index.cfm

Note on Audiology Data

Please note the following when interpreting audiology data present in this publication. Data for completed waits in the financial year have been used as a proxy for statutory adult hearing aids fitted in the financial year. Any interpretation of this data should also consider the below:

7. Patients can have 2 hearing aids fitted.
8. Patients do not always have a fitting following a hearing aid fitting appointment, as some patients decide not to proceed at this point.
9. Patients can have a hearing aid fitted without a hearing aid fitting appointment as they have a “see and fit” diagnostic assessment appointment.

Statement of Administrative Sources

The ‘Statement of Administrative Sources’ describes the administrative/management sources which the Department of Health, (DoH) currently uses to produce official statistics, or which have the potential to be so used.

Data Quality

Any information published is fully quality assured. HSC Trust service area and information staff liaise to validate their information returns prior to submission. On receipt of returns, statisticians in Community Information Branch (CIB) conduct internal consistency checks using historical data to monitor annual variations and/ or emerging trends, both regionally and for specific HSC Trusts. Queries arising from validation checks are raised with HSC Trusts for clarification and if required returns may be amended and re-submitted. The HSC Trusts are also asked to provide appropriate explanations for any inconsistent or missing information. The detail around these processes is set out in the ‘Quality Report for Statistics on Community Care’ on the DoH website.

Data Format/ Availability

In order to aid secondary analysis, data is available both in spreadsheet format (Microsoft Excel and Open Document Spreadsheet format, and can be found on the ‘Care not at Home’ section of the

Social Care Statistics webpage. Further adult community statistics, such as direct payment and domiciliary care can also be found on these webpages.

UK Social Care Community Statistics

Information within this report relates to Northern Ireland data. Similar publications for England, Scotland and Wales can be found by visiting/clicking on the titles below. Please note that inter-country comparisons are difficult as social care operates within different legislative frameworks across devolved administrations and a vast range of administrative systems exist from which statisticians extract statistical data.

- [NHS Digital Adult Social Care Activity and Finance Reports \(England\)*](#)
*Relates to the 2018/19 report. The 2019/20 is due to be published on 10/12/2020'
- [Insights in Social Care: Statistics for Scotland](#)
- [Adult Health and Social Care Services in Wales](#)

Future Publications

The next release of these statistics, for the year ending 31 March 2021, is scheduled for October 2021.

User Feedback

Any comments you have regarding this or any other publication produced by CIB are welcome. Your views help us to improve the service we provide to users of this information and to the wider public. Please send any comments you have to [**cib@health-ni.gov.uk**](mailto:cib@health-ni.gov.uk).

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