



Statistics on Community Care for Adults in Northern Ireland (2021 – 2022)



Department of
Health

An Roinn Sláinte

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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.
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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

Title



[Department of Health - Topics page.](#)

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.*

Description

Statistics and research for the **Department of Health** 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](#).

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.

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.

Contents

1. Introduction - What is Community Care?	7
What is included in this publication?	7
Key Statistic	8
COVID-19 impact on Community Care Services for Adults	9
2. Home Services	11
Domiciliary Care – September Survey Week	11
Number of Domiciliary Care Recipients (2017-2021)	11
Number of Visits Delivered (2017-21).....	11
Number of Hours Delivered (2017-21).....	12
Domiciliary Care – September Survey Week, by HSC Trust	14
Re-Ablement	15
Persons Starting Re-ablement.....	15
Persons Discharged from Re-ablement.....	17
Meals on Wheels	19
Overall Position	19
Persons Receiving a Meals on Wheels Service, by HSC Trust	19
Persons Receiving a Meals on Wheels Service, by Age Group.....	20
Persons Receiving a Meals on Wheels Service, by Client Group	21
3. Community Services	22
Audiology	22
Statutory Adult* Hearing Aids Fitted from 2017/18 to 2021/22	22
Statutory Adult* Hearing Aids Fitted by Trust 2021/22.....	23
Day Care Services	24
Registered Day Care Centres in 2022.....	24
Persons registered to attend Day Care centres in 2022	25
Residential & Nursing Care	29
Residential & Nursing Care Snapshot as at 30 June 2022 - Facilities.....	30
Residential & Nursing Care Snapshot as at 30 June 2022 – Care home beds.....	31
Residential & Nursing Care Snapshot as at 30 June 2022 – Care home packages.....	32

Residential Facilities 2018 – 2022	34
Nursing Facilities 2018 – 2022.....	37
Care Packages in Effect at quarter ending June 2022	40
Care Packages in Effect, by Sector, at quarter ending June 2022	41
Care Packages in Effect, at quarters ending June 2018 – June 2022	41
Care Packages in Effect, by HSC Trust, at quarters ending June 2018 – June 2022.....	42
Residential & Nursing Home Care Packages at 30 June 2022, by Sector	44
Residential Home Care Packages in Effect at 30 June 2018 – 2022, by Sector.....	44
Nursing Home Care Packages in Effect at 30 June 2018 – 2022, by Sector	45
<i>Appendix A: Definitions of Terms</i>	<i>46</i>
<i>Appendix B: Geographical Area of HSC Trusts and Age-Profile of Population 2020.....</i>	<i>50</i>
<i>Appendix C: Tables.....</i>	<i>51</i>
<i>Appendix D: Technical Notes.....</i>	<i>76</i>

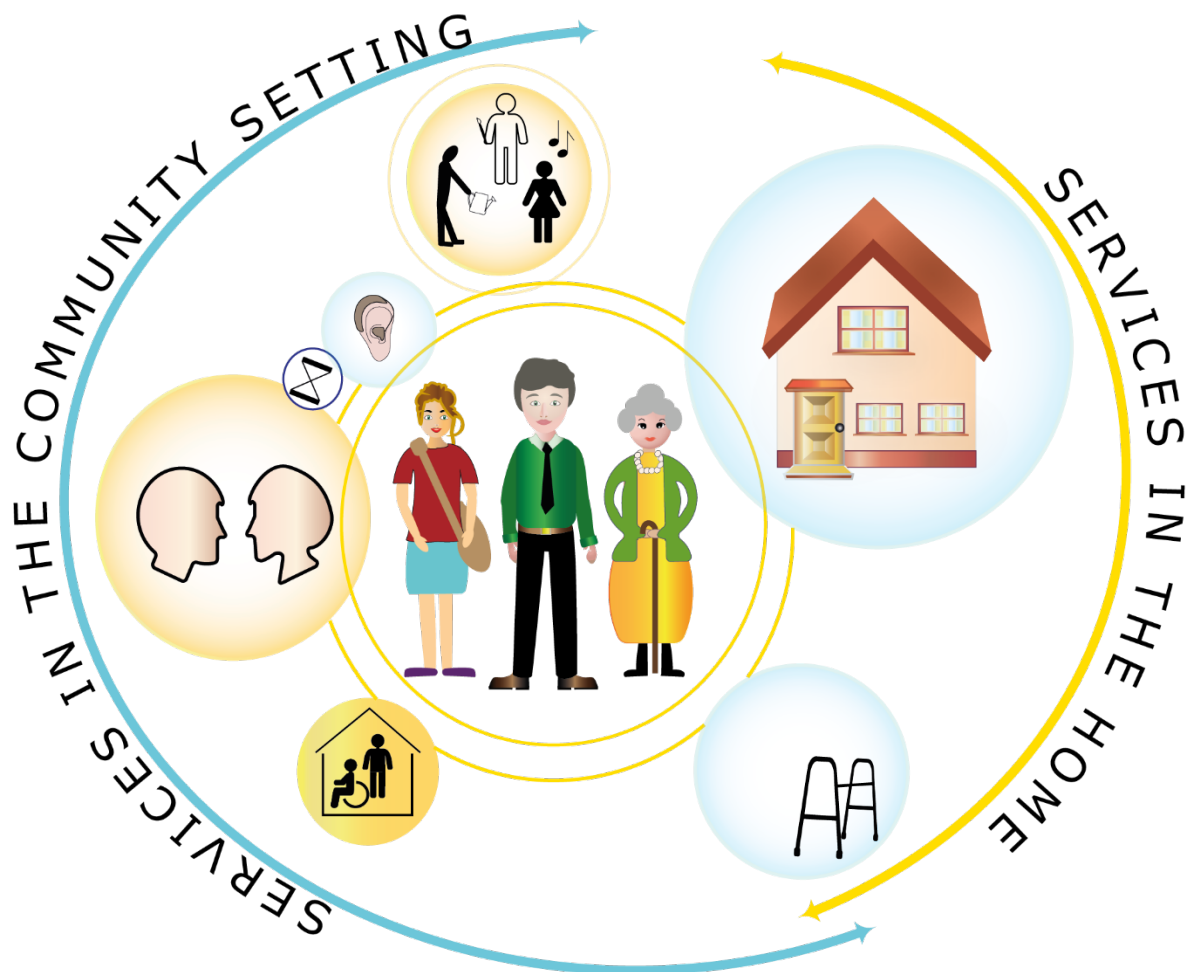
1. Introduction - What is Community Care?

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 wheels, audiology service, daycare, and accommodation services.



Health & Social Care Northern Ireland (NI)

KEY STATISTICS

1 **22,693**

persons receive domiciliary care, on average, each week in 2020/21



2

299,824



domiciliary care hours delivered, on average, each week in 2020/21

3

just under **1 in 2** persons (48%) discharged from the reablement services required no ongoing care package / occupational therapy across NI in 2021/22



4

383

persons, on average, were starting reablement service each month across NI in 2021/22

5

Received 'Meals on Wheels' in 2021/22
1,146
persons

6

278

hearing aids for adults, on average, were fitted each week across NI in 2021/22 by the statutory health services



7

5,210

registered day care attendance across NI at 31st March 2022



8

473

care homes registered in NI at 30th June 2022



9

8,027

nursing packages in effect in NI as at 30th June 2022



10

3,546

residential packages in effect in NI as at 30th June 2022



COVID-19 impact on Community Care Services for Adults

Health & Social Care (HSC) Trusts reported changes to their provision of a range of services in 2020 and 2021 due to the impact of COVID-19. The following list of points indicate the background to these changes and may apply to all, or only a single HSC Trust. It is not possible to apportion specific issues to specific changes in reported provision. Although the year 2021/22 saw an easing of COVID-19 restrictions, figures show that some services have not yet returned to pre-COVID-19 levels.

Domiciliary Care:

Domiciliary care continued to be provided during the COVID-19 pandemic, however some domiciliary care packages were suspended at various stages to reduce the risk of contact and transmission of the virus.

Where possible, and where deemed safe, some service users were taken to stay and be cared for in family homes during the course of the pandemic.

Some domiciliary care providers have experienced COVID-19 related staffing shortages, which led to changes in service provision. For example, in some cases reconfiguring service provision across geographical areas, prioritising service users or amalgamating visits was needed.

Statutory and independent sector domiciliary care providers have liaised closely with the HSC Trusts to maintain service provision and some independent providers have taken on increased provision. In other instances HSC Trusts have taken on packages normally dealt with by the independent sector to ensure coverage was met.

Re-ablement:

Re-ablement continued to be provided during the COVID-19 pandemic, however Belfast HSC Trust's service was temporarily re-configured to support COVID/palliative care in the community during March 2020. From March 2020 until July 2020, the re-ablement Service in Belfast HSC Trust was suspended temporarily.

Meals on Wheels:

Some HSC Trusts reported a reduction in Meals on Wheels provision due to the COVID-19 pandemic. In some cases this was due to care packages being cancelled by clients to reduce the risk of the virus through contact.

Community Audiology:

The HSC Trusts reported a temporary suspension of normal audiology services at mid-March 2020 to reduce the risk of contact and transmission of the virus.

While some audiology services continue to be provided during the COVID-19 pandemic, including essential paediatric services, and paediatric hearing aid fittings, service provision and capacity has varied by HSC Trust.

While hearing aid services did recommence, the capacity of the service has varied across the HSC Trusts due to a number of factors, including the following points:

- Staff shortages due to a number of reasons including: COVID-19 illness and shielding, redeployment to essential services due to COVID-19 service reconfiguration, and additional precautionary guidelines around pregnancy leave.
- Restricted access to previous audiology facilities, particularly within hospital sites, or where rooms were repurposed for more essential services, lack of PPE equipment and admin staff due to COVID-19 measures.
- Changes in working practices due to COVID-19, including reduced appointments with longer appointment times needed in order to allow for 15 mins downtime between appointments for cleaning, and to allow for safe working and social distancing.
- The Northern HSC Trust hearing aid service work an 'access and fit' model, where the majority of new hearing aid fittings are carried out at the diagnostic appointment.

Day Care Services:

While the number of registered Day Care centres for adults in Northern Ireland remained similar to previous years, some HSC Trusts reported that the numbers of adults registered to attend Day Care services has reduced due to COVID-19 and temporary closure of some facilities. As a result, while some service users would have been discharged from the registration, during periods of closure there were fewer service users newly registering to access the service.

Residential and Nursing Services:

Residential and Nursing care continued to be provided during the COVID-19 pandemic, with relatively little change to the number of beds, homes and care packages. However, some HSC Trusts reported that the average number of places occupied during the year decreased due to COVID-19, and social distancing guidelines.

Persons with Disability in Contact with HSC Trusts:

HSC Trusts noted that contact between social workers, or other member of statutory social services staff, and persons with disabilities reduced due to COVID-19. This particularly affected face-to-face activity and group work.

Virtual contact was possible between some HSC staff and service users, however this was outside the scope of the definitions for the persons in contact information in the current publication.

2. Home Services

Domiciliary Care – September Survey Week

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 2017 - 2021. Further detail is available in the [‘Domiciliary care services for adults in Northern Ireland 2021’](#) publication. The next release of these statistics, for a survey week in September 2022, is scheduled for December 2022. Source: ‘DoH CC7b Survey’

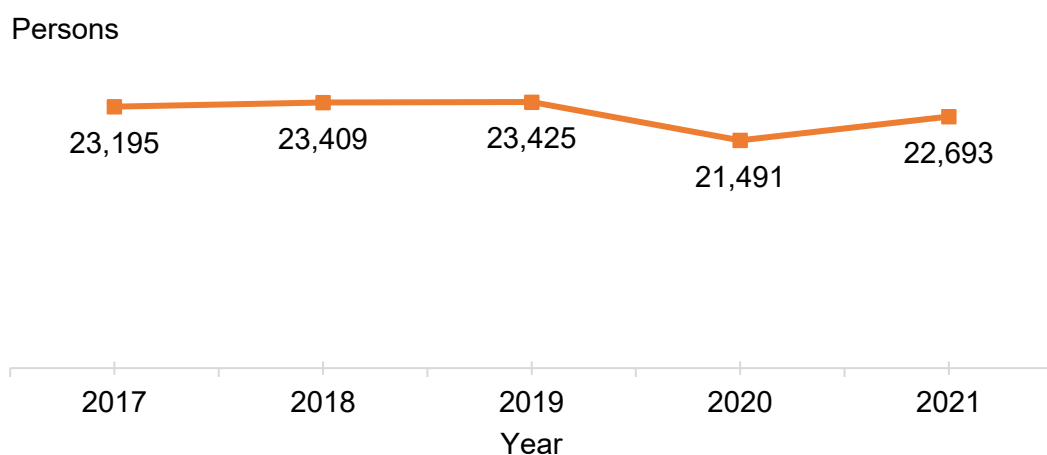
Number of Domiciliary Care Recipients (2017-2021)

On average, 22,693 clients, received domiciliary care during the survey week in 2021. This represented a 6% (1,202) increase in the number of clients who received domiciliary care in the survey week in 2020 (21,491), but a 2% (-502) decrease over the 5 year period from 2017 (23,195).

Figure 1 below shows that prior to 2020, the number of clients remained relatively constant with an average of 23,343 clients from 2017 to 2019. In 2021 the number of clients has increased but is still below the pre 2020 average.

Figure 1 Number of Domiciliary Care Recipients 2017-21

Source: DoH CC7b Survey



Number of Visits Delivered (2017-21)

A total of 551,418 domiciliary care visits were provided in 2021. The five year trend analysis in the 2021 NI Domiciliary Care Annual Survey publication presents an increasing trend in number of '0-15' min visits. There was a 10% (15,842) increase in

the number of '0-15' min visits from the survey week in 2017 (153,958) when compared to the survey week in 2021 (169,800).

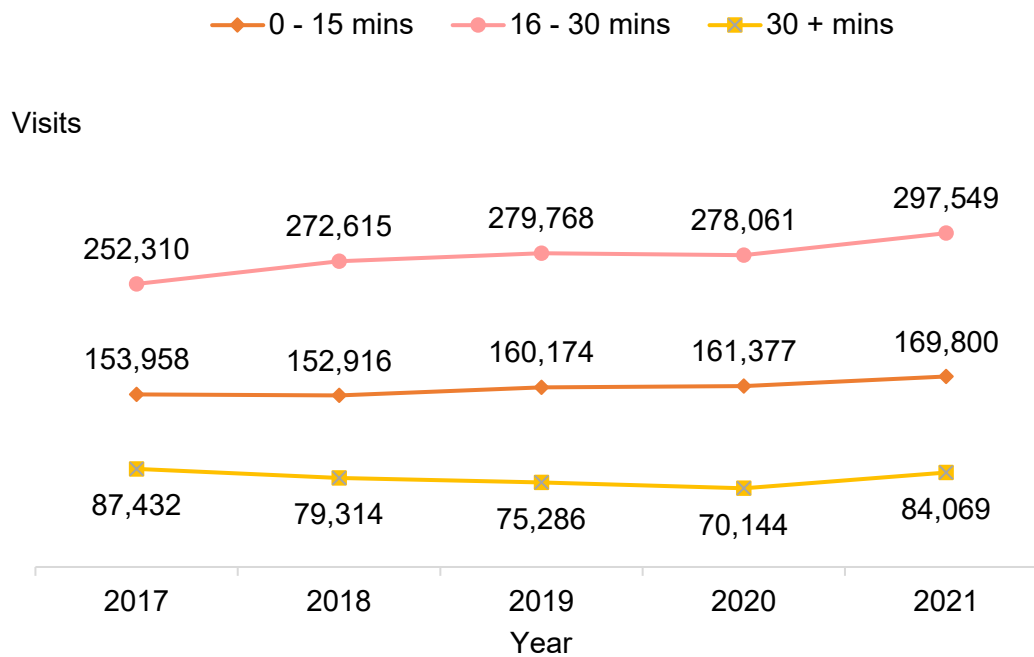
There has also been an increasing trend in the number of '16-30' min visits. There was an 18% (45,239) increase in the number of '16-30' min visits from the survey week in 2017 (252,310) when compared to the survey week in 2021 (297,549).

There had been a decreasing trend in the number of '30+' min visits prior to 2020. Although the number of '30+' min visits increased in 2021 (84,069), there was still a 4% (-3,363) decrease in the number of '30+' min visits from the survey week in 2017 (87,432) when compared to the survey week in 2021.

The five year trend analysis in the 2021 NI Domiciliary Care Annual Survey publication is shown in Figure 2.

Figure 2 Number of Visits Delivered 2017-21

Source: DoH CC7b Survey

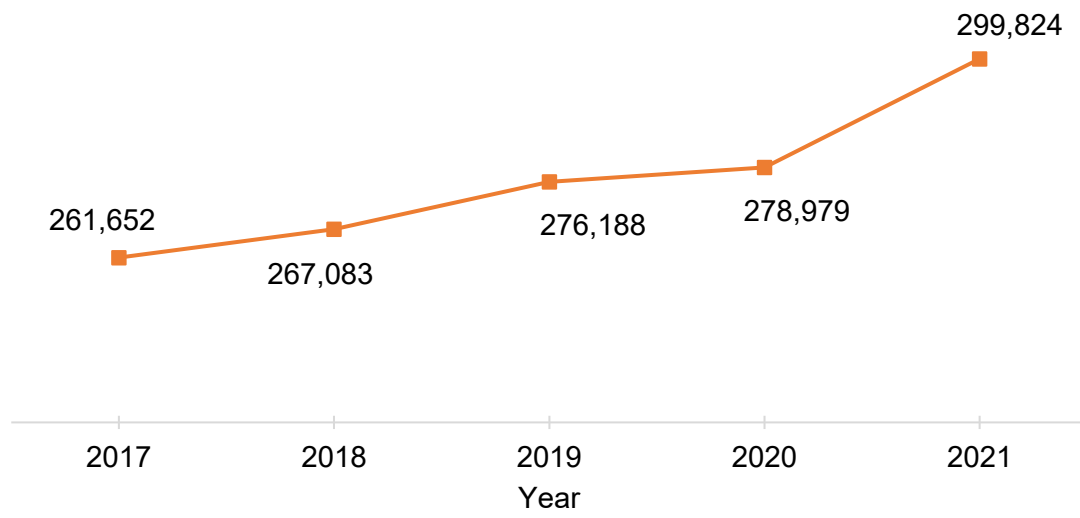


Number of Hours Delivered (2017-21)

On average, 299,824 domiciliary care hours were delivered during the survey week in 2021. This represented a 7% (20,845) increase in the number of hours that were delivered in the survey week in 2020 (278,979), and a 15% (38,172) increase over the 5 year period from 2017 (261,652), as shown in Figure 3 below.

Figure 3 Number of Hours Delivered During Survey Week 2017-21

Source: DoH CC7b Survey



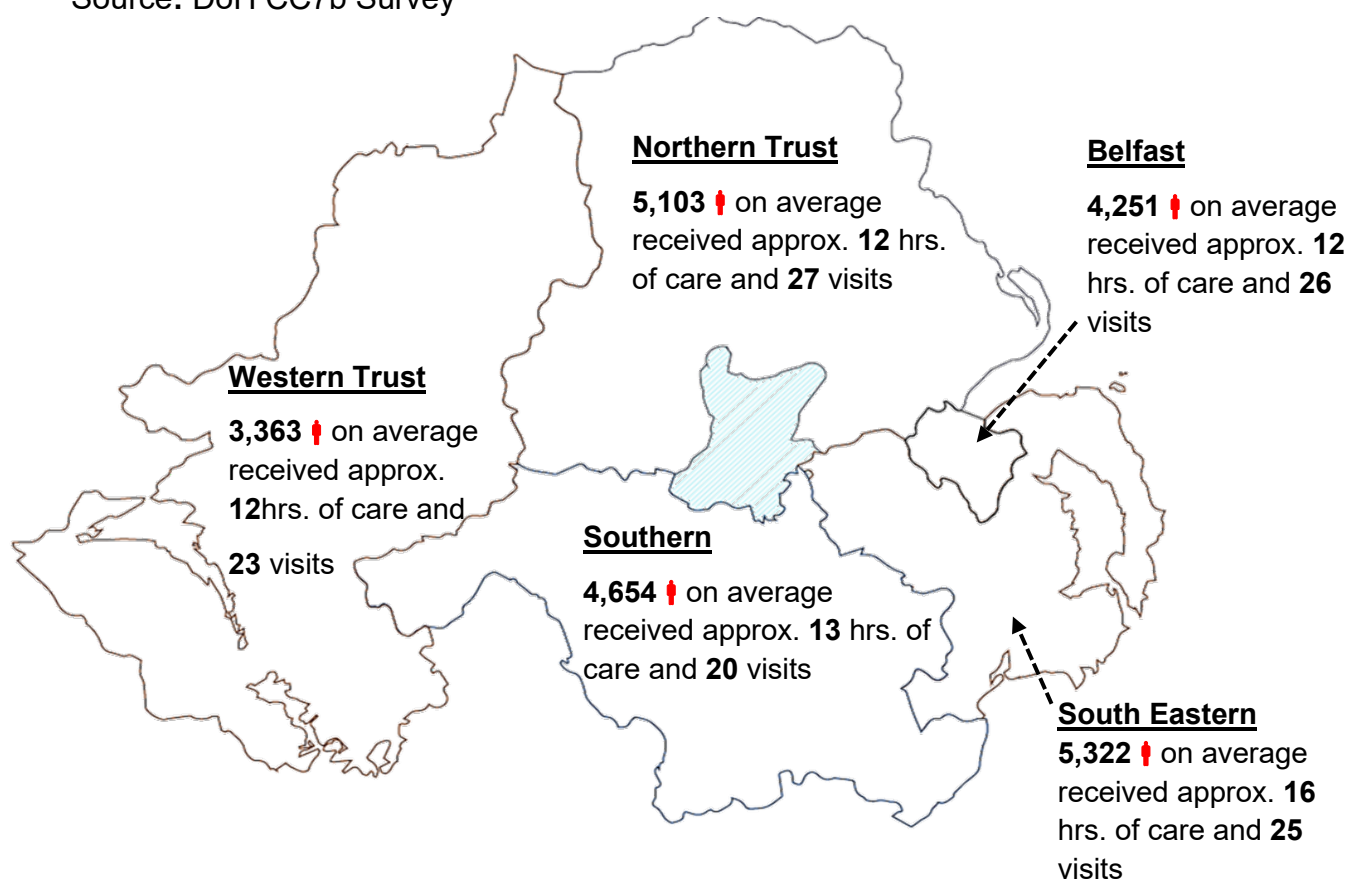
Domiciliary Care – September Survey Week, by HSC Trust

22,693 recipients were estimated to receive domiciliary care during the 2021 September survey week, ranging from 5,322 in the South Eastern HSC Trust to 3,363 recipients in the Western HSC Trust. An average of 13 domiciliary care contact hours and 24 domiciliary care visits were provided per client.

Figure 4 and the table of values below show the breakdown of Domiciliary Care delivered for each of the five HSC Trusts during the 2021 September survey week.

Figure 4 Domiciliary Care Delivered in a Survey Week, 6th – 12th September 2021, across Northern Ireland by HSC Trusts

Source: DoH CC7b Survey



HSC Trust	Number of clients	Average contact hours provided per client	Average visits provided per client
Belfast	4,251	12	26
Northern	5,103	12	27
South Eastern	5,322	16	25
Southern	4,654	13	20
Western	3,363	12	23

Further detail is available in the ‘[Domiciliary care services for adults in Northern Ireland 2021](#)’ publication.

Re-Ablement

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

4,597 persons started reablement in 2021/22. On average 5,273 persons have availed of re-ablement service each year between 2017/18 and 2021/22. The re-ablement service has not returned to pre-pandemic levels in 2021/22, and may also be lower due to revised screening protocol in South Eastern HSC Trust since 2019/20, as shown in Figure 5.

Figure 5 Persons Starting Re-ablement 2017/18-2021/22^{^~}

Source: SPPG regional re-ablement template

[^]Belfast HSC Trust had no activity during March 2020, as the service was temporarily re-configured to support COVID/ palliative care in the community. From March 2020 until July 2020, the re-ablement Service in Belfast Trust was put on a temporary hiatus.

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

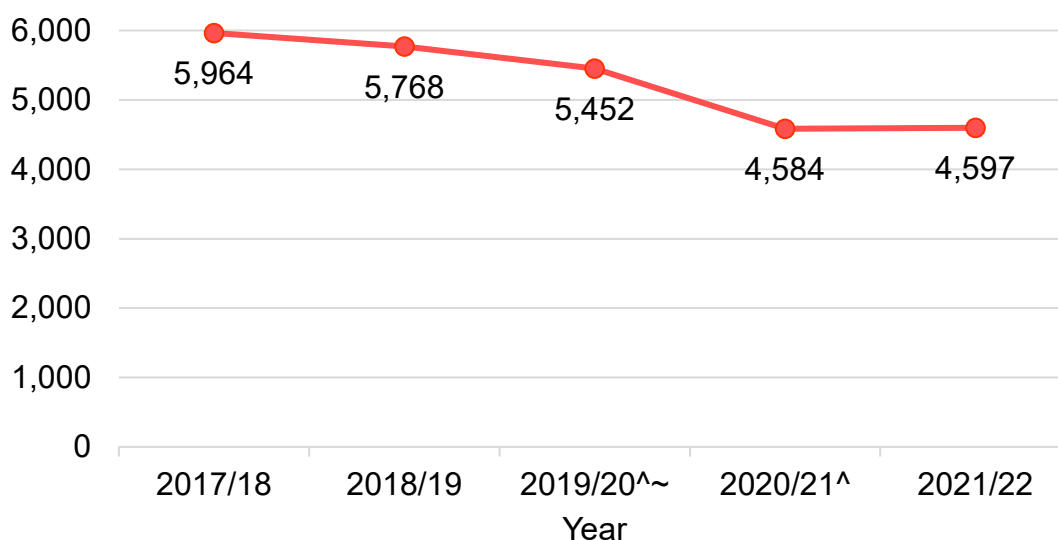
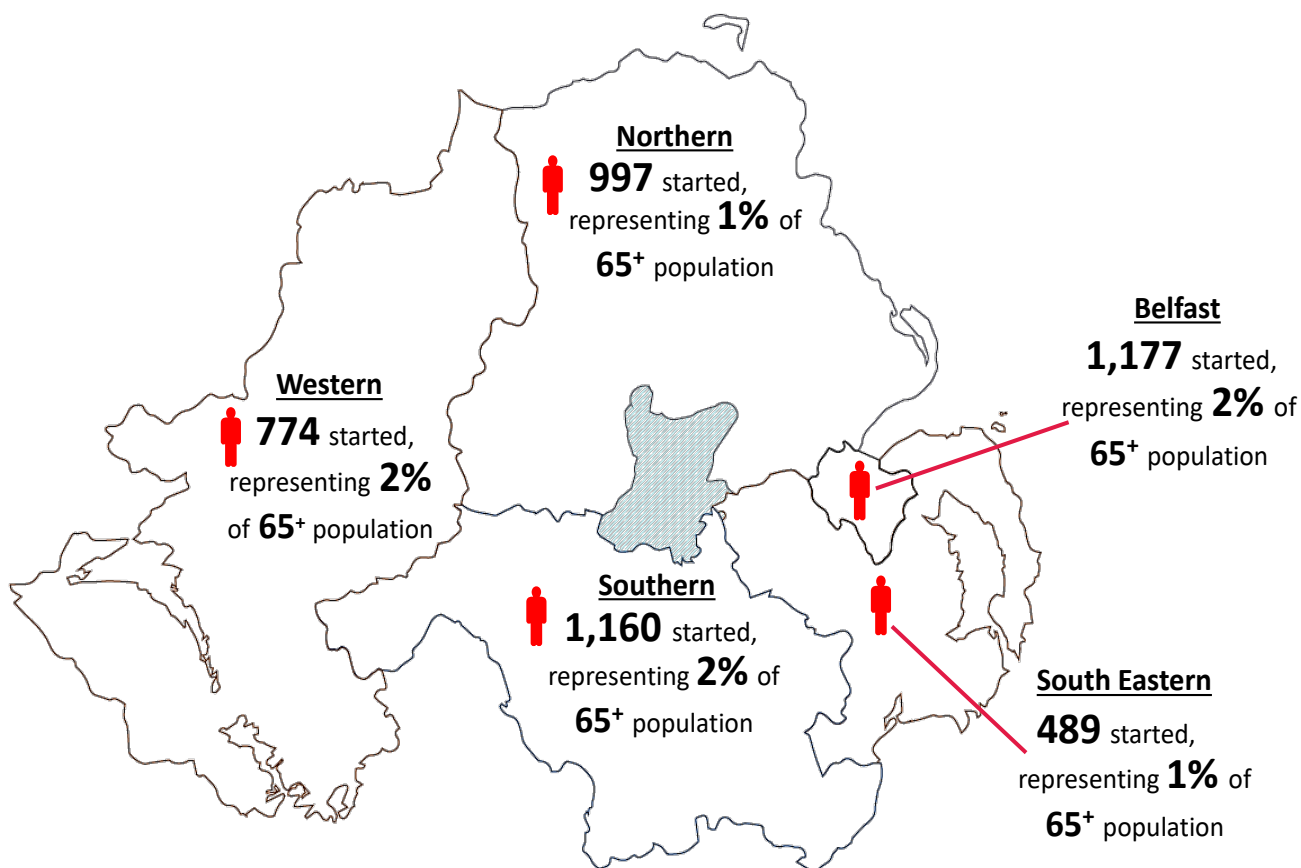


Figure 6 and the table of values below show the breakdown of persons starting re-ablement for each of the five HSC Trusts during the 2021/22. In 2021/22, around 383 persons, each month, started the service. A similar rate of uptake was observed across each of the HSC Trusts, representing 1-2% of the 65+ population within each Trust.

Figure 6 Persons Aged 65+ Starting Re-ablement across Trusts in 2021/22

Source: SPPG regional re-ablement template

Estimated 2020 mid-year population age breakdown can be found on page 50.



HSC Trust	Number persons starting re-ablement	65+ age group mid-year population estimates 2020	Percentage of 65+ age group starting re-ablement
Belfast	1,177	55,840	2%
Northern	997	86,014	1%
South Eastern	489	69,683	1%
Southern	1,160	58,703	2%
Western	774	49,709	2%

Persons Discharged from Re-ablement

Activity for re-ablement services, and associated client outcomes remains an important component of the Programme for Government 2016-21 Indicator 9, Outcome 8. It is expected that this will continue in the next PfG cycle. An overview of the performance of Indicator 9 is published on the [Departmental website](#).

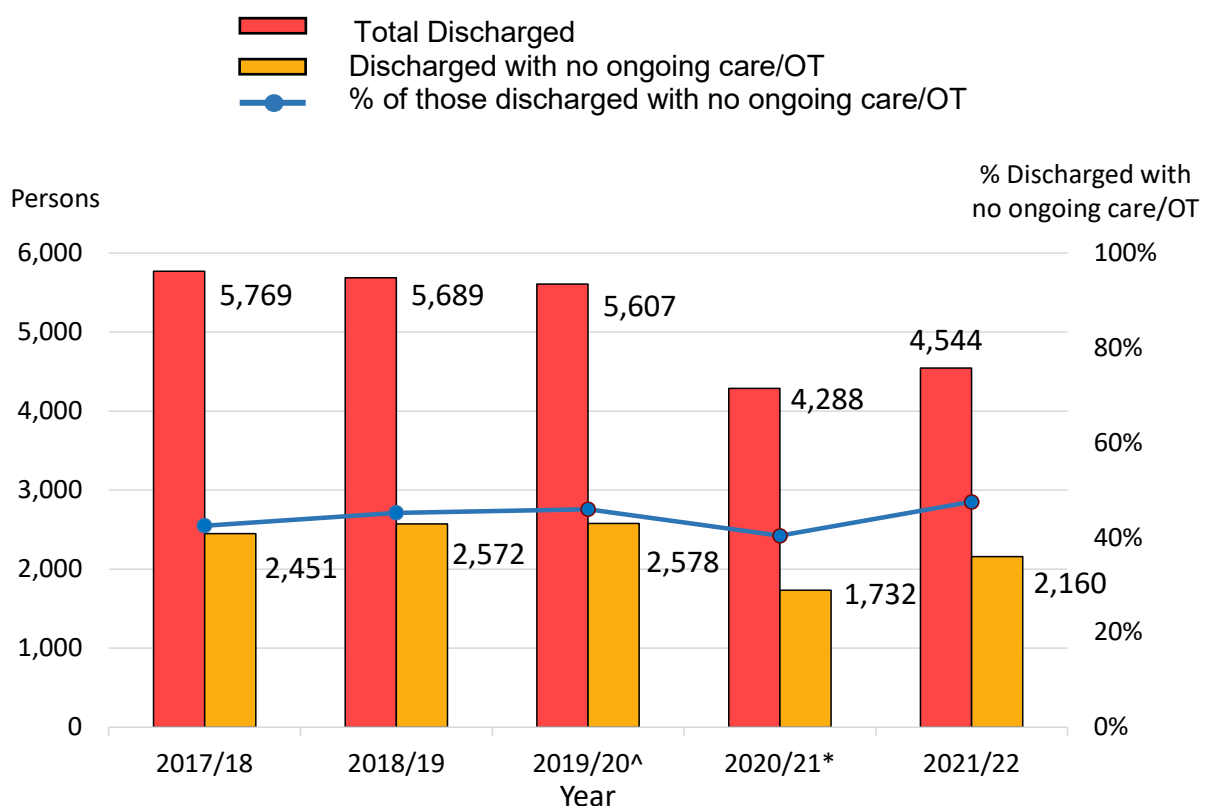
The regional average in 2021/22 for clients discharged with no ongoing care or with Occupational therapy (OT) only was 48%. This is lower than the proportion recorded for the previous four years, which ranged from 40 to 46%, as illustrated in Figure 7.

Figure 7 Overview of Regional Client Outcomes on Discharge 2017/18-21/22^{^~*}

Source: SPPG regional re-ablement template

[^]Belfast HSC Trust had no activity during March 2020, as the service was temporarily re-configured to support COVID/ palliative care in the community. From March 2020 until July 2020, the re-ablement Service in Belfast Trust was put on a temporary hiatus.

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



As Figure 8 below shows, the highest (51%), and lowest rate (24%) of clients discharged with no ongoing care package/Occupational therapy was observed in the Southern and Northern Trusts, respectively. It is important to recognise that the

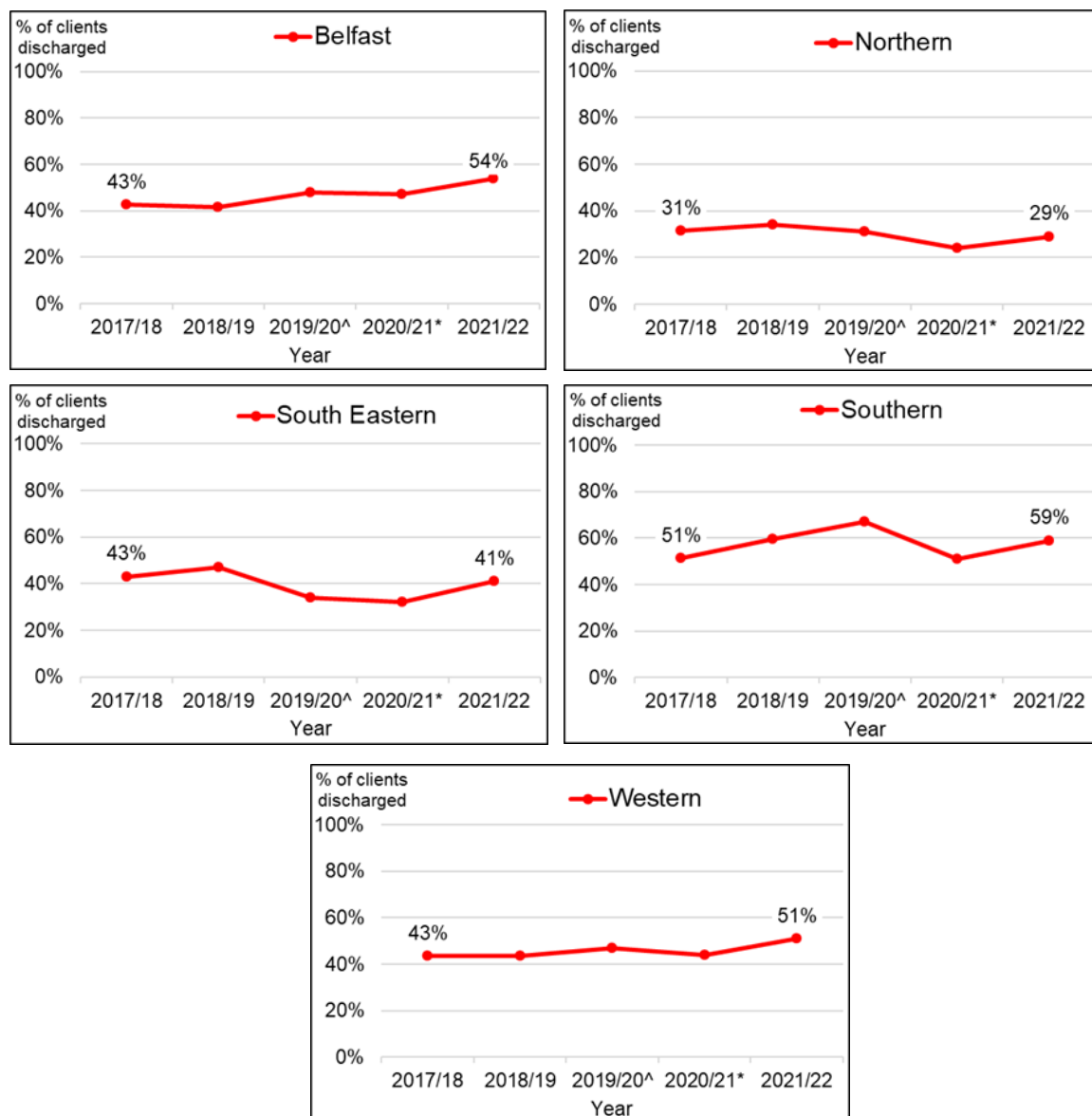
Northern Trust has a higher proportion of service users admitted to hospital or passing during a period of re-ablement. A rate similar to the Northern Ireland average (40%) ranging from 32-47% was observed in the remaining Trusts.

Figure 8 Client Outcomes on Discharge by Trust 2016/17-2021/22^{^~*}

Source: SPPG regional re-ablement template

[^]Belfast HSC Trust had no activity during March 2020, as the service was temporarily re-configured to support COVID/ palliative care in the community. From March 2020 until July 2020, the re-ablement Service in Belfast Trust was put on a temporary hiatus.

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



Meals on Wheels

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).

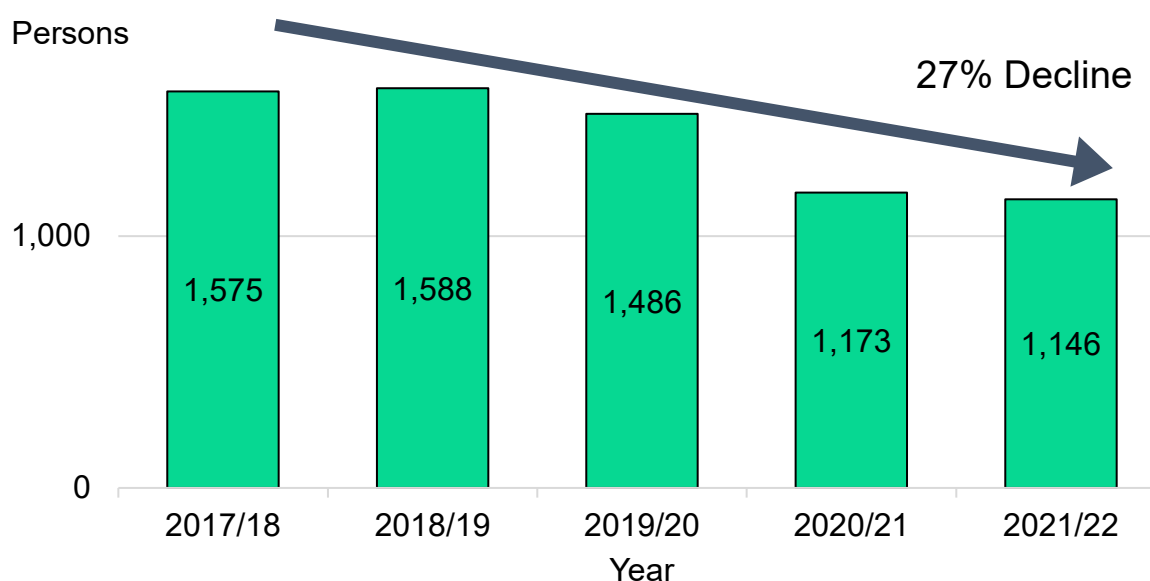
Overall Position

At 31 March 2022, 1,146 persons were in receipt of meals on wheels services in Northern Ireland. This represented a 2% (-27) decrease in the number of clients receiving meals on wheels in 2020/21 (1,173), and a 27% (-429) decrease over the 5 year period from 2017/18 (1,575).

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).

Figure 9 Persons Receiving a Meals on Wheels Service (2017/18 – 2021/22)

Source: KMW2 Health and Social Care Trust returns



Persons Receiving a Meals on Wheels Service, by HSC Trust

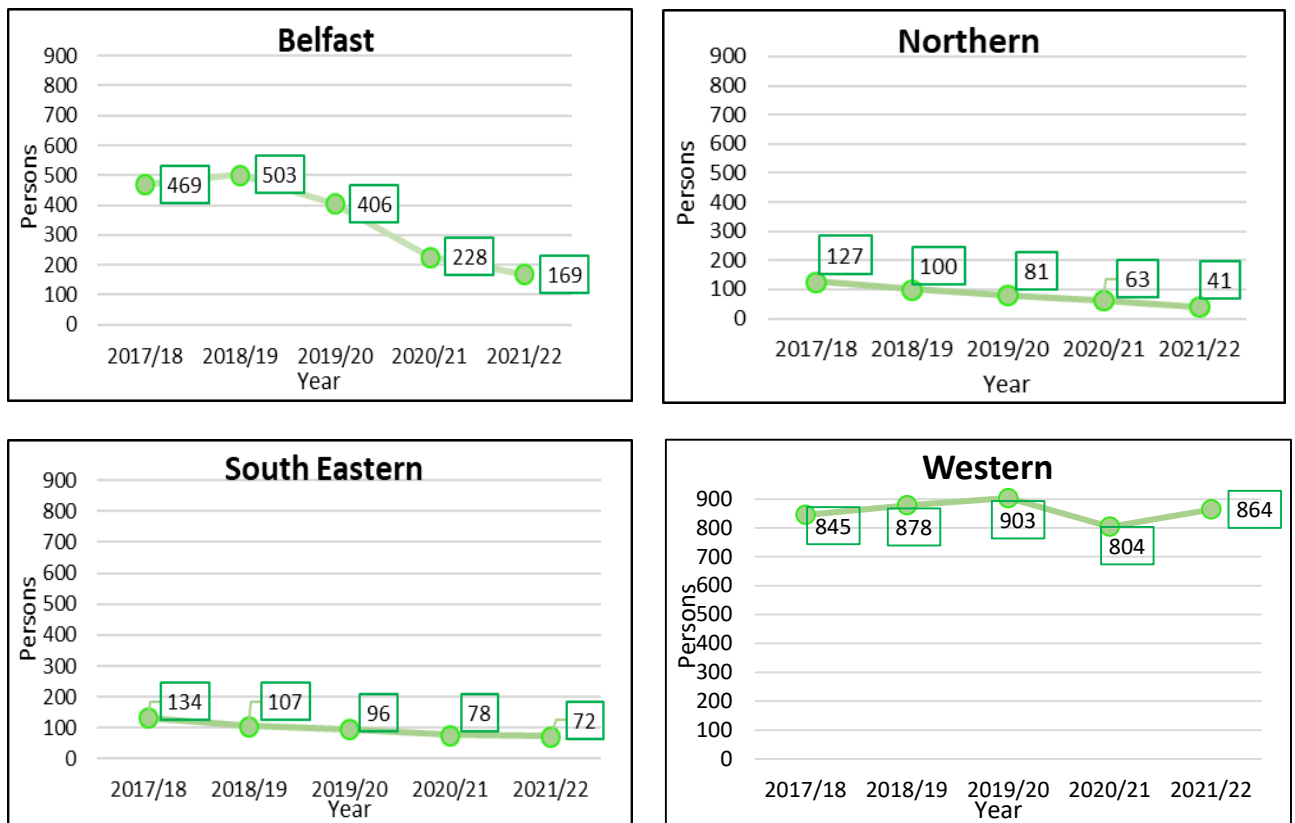
At 31 March 2022, three quarters (75%, 864) of all persons receiving a meals on wheels service were located in the Western HSC Trust. No one in the Southern HSC Trust was in receipt of a meals on wheels service as Southern HSC Trust meals on wheels service ceased prior to March 2016.

The lowest uptake of meals on wheels in 2021/22 was observed in the Northern HSC Trust (4%, 41).

There has been a decreasing trend in the number of clients receiving meals across all HSC Trusts, over the last five years. The sharpest decline is observed in the Northern HSC Trust (68% drop). Belfast and South Eastern HSC Trusts observed a 64% and 46% decrease, respectively, from 2017/18 to 2021/22. The Western HSC Trust observed a 2% increase in the number of clients receiving meals over the last five years.

Figure 10 Persons Receiving a Meals on Wheels Service, by HSC Trust (2017/18-2021/22)

Source: KMW2 Health and Social Care Trust returns



Persons Receiving a Meals on Wheels Service, by Age Group

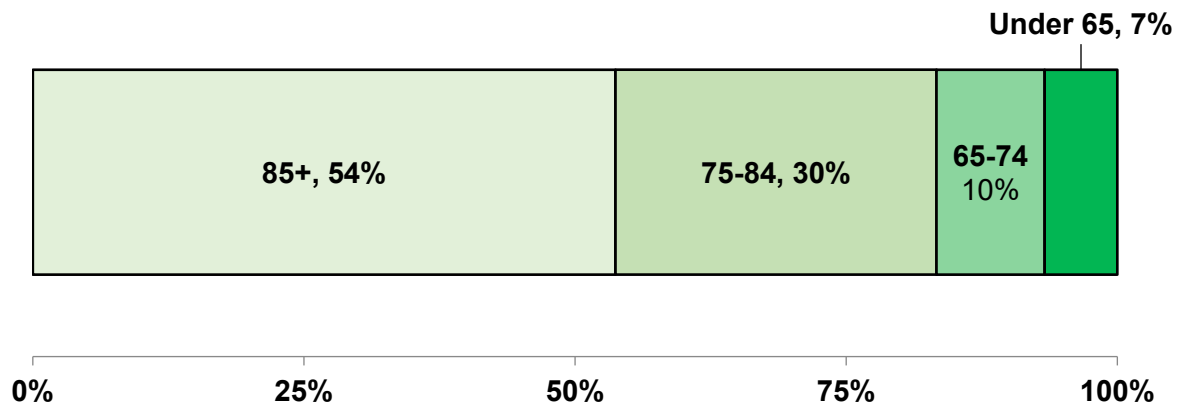
There were 1,074 persons receiving meals on wheels whose age was known.

At 31 March 2022, almost all persons (93%) receiving a meals on wheels service were aged 65 and over. This was comprised 10% aged 65 - 74, 30% aged 75 - 84 and 54% aged 85 & over. The remaining 7% were aged under 65, as illustrated in Figure 11.

Figure 11 Persons Receiving a Meals on Wheels Service, by Age Group* (2021/22)

Source: KMW2 Health and Social Care Trust returns

* Of 1,074 persons whose age was known. There were 72 persons in South Eastern HSC Trust whose age was unknown.



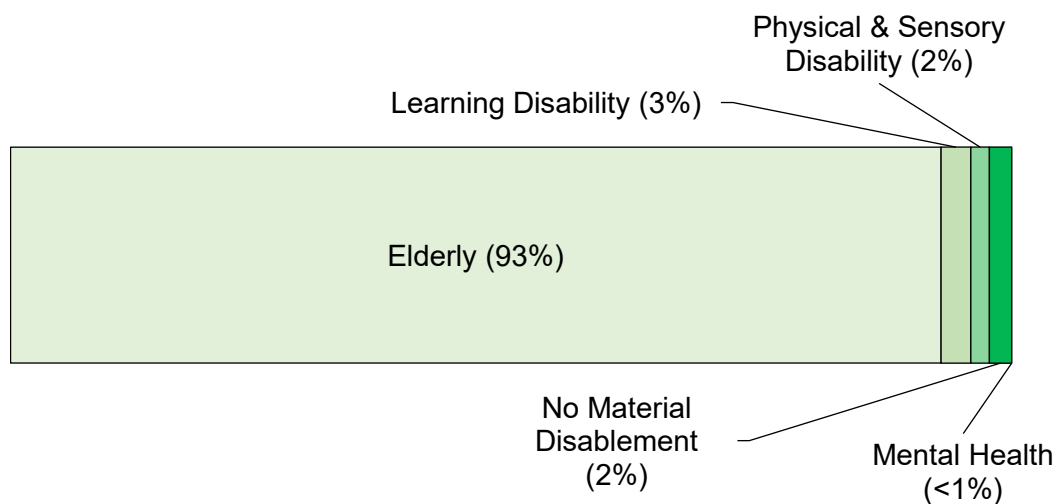
Persons Receiving a Meals on Wheels Service, by Client Group

The client group that was provided with the most meals on wheels was the elderly client group which constituted 93% of all meals provided. There was approximately the same proportions of meals on wheels given to people with either a learning disability, physical and sensory disability or no material disablement, (3%, 2%, 2% respectively). The lowest proportion of meals on wheels was given to people with mental health difficulties, which account for less than 1% of meals provided.

Figure 12 Persons Receiving a Meals on Wheels Service, by Client Group (2021/22)

Source: KMW2 Health and Social Care Trust returns

* Of 1,074 persons whose client group was known. There were 72 persons in South Eastern HSC Trust whose client group was unknown.



3. Community Services

Audiology

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 that fits on the ear and is worn by a person who is hard of hearing. Please note technical guidance on page 47 when interpreting these data.

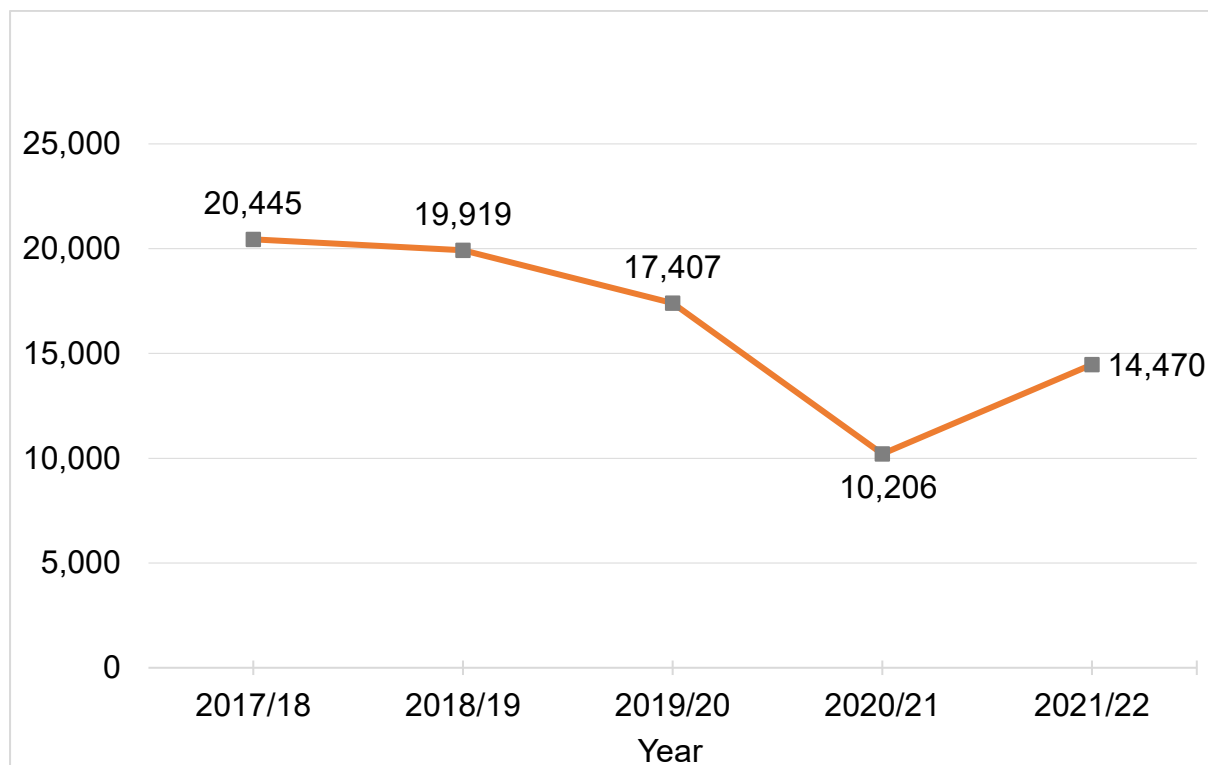
Statutory Adult* Hearing Aids Fitted from 2017/18 to 2021/22

A 42% increase is observed in the total number of adults* fitted with a hearing aid by the statutory sector between 2020/21 (10,206) and 2021/22 (14,470). This is likely to reflect the impact of the COVID-19 pandemic on the services. See section 'COVID-19 impact on Community Care Services for Adults' on page 9.

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.

Figure 13 Statutory Adult* Hearing Aids Fitted 2017/18 to 2021/22

Source: Health and Social Care Trusts' Monthly Completed Waits Return



Statutory Adult* Hearing Aids Fitted by Trust 2021/22

14,470 hearing aids were fitted by the statutory sector in 2021/22, representing 0.8% of the total Northern Ireland population[^].

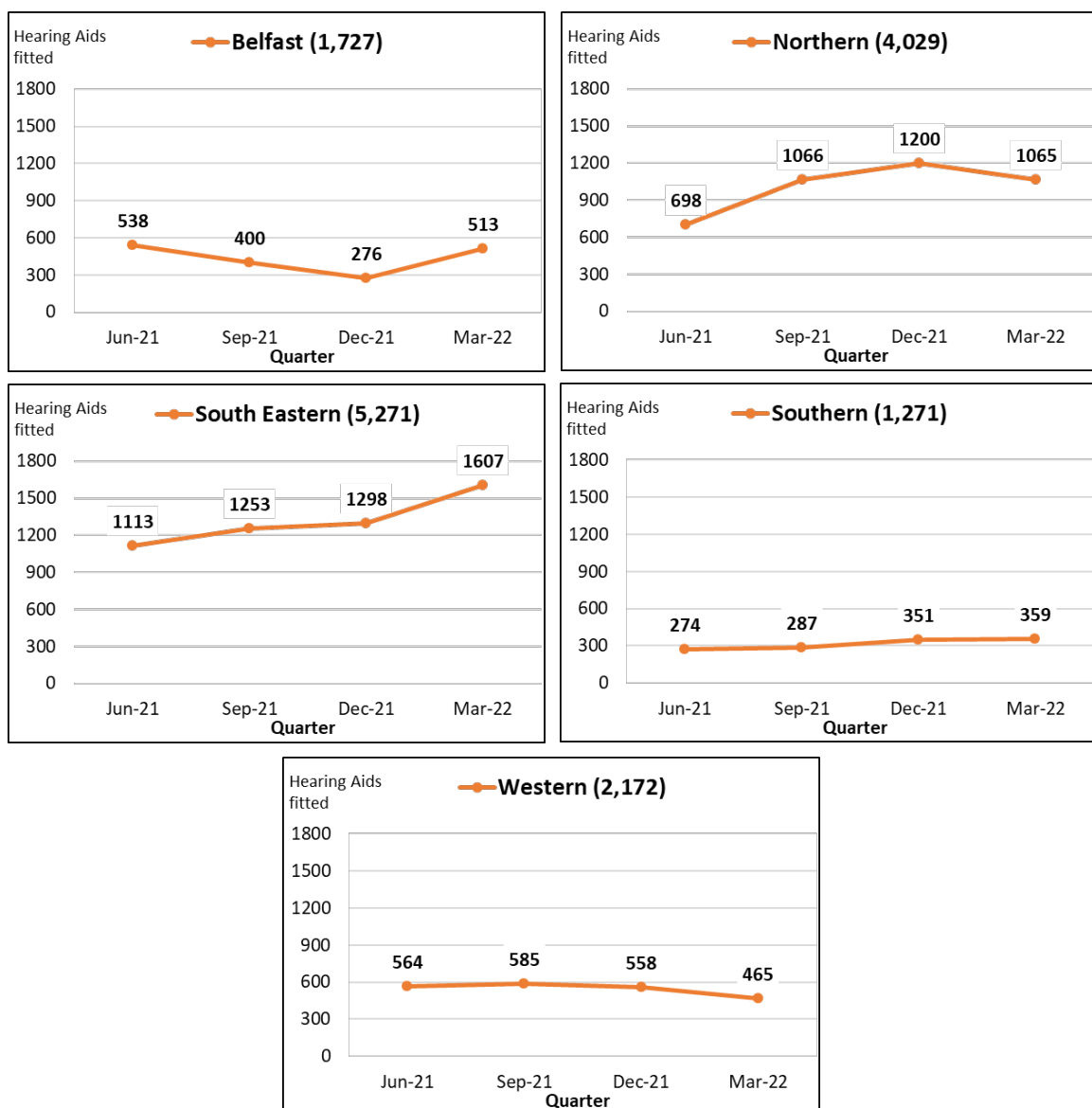
[^] Estimated 2020 mid-year population figures can be found on page 50

The number of adult* statutory hearing aids fitted by the statutory sector in 2021/22 ranged from 5,271 in South Eastern HSC Trust to 1,271 in Southern HSC Trust.

Figure 14 Statutory Adult Hearing Aids Fitted by HSC Trust 2021/22* [^]

Source: Health and Social Care Trusts' Monthly Completed Waits Return

[^] Figures quoted in the legend represent the yearly totals for each HSC Trust



Day Care Services

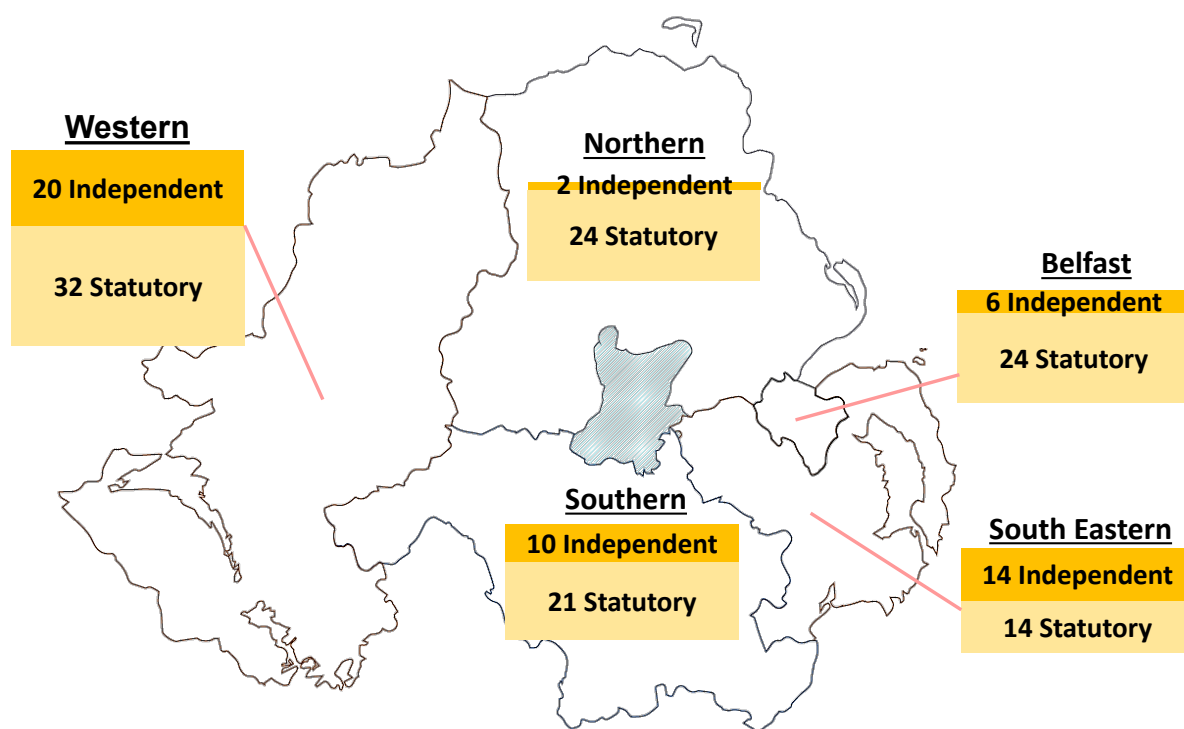
Day care services are designed to meet the assessed needs of individuals for care, support, supervision or rehabilitation, providing social stimulation for the individual, and respite for their carers.

Registered Day Care Centres in 2022

At the 31st March 2022 there were 167 day centres across Northern Ireland, of which approximately two thirds (115, 69%) were statutory facilities, and around one third 31% (52) were independent facilities. Figure 15 below illustrates the number of statutory and independent homes in each HSC Trust.

Figure 15 Registered Day Care Facilities across HSC Trusts at March 2022

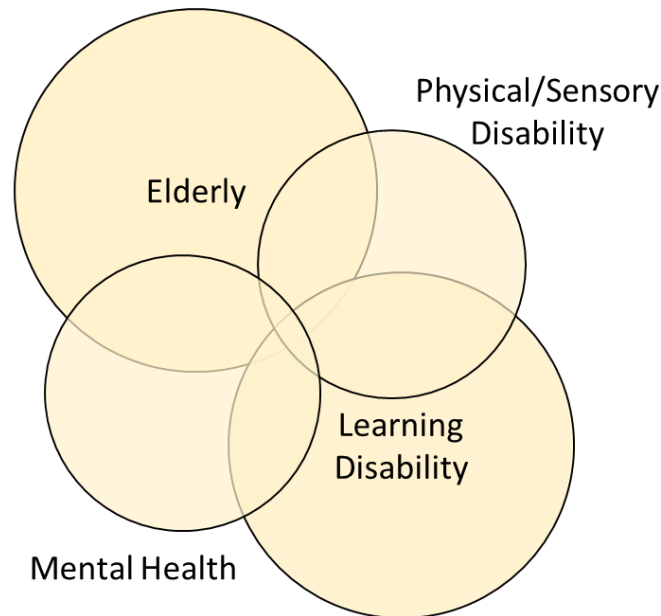
Source: RQIA



Based on RQIA registration data and HSC Trust websites, day centres have been assigned a 'primary' client group which they provide support services for, as shown in Figure 16. 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. This exercise was last carried out in 2021, however the overall number of day centres remained the same in 2022, so the proportions are likely to have also remained similar.

Figure 16 Proportion of Registered Day Care Facilities by Client Group at March 2021.

Source: RQIA



Persons registered to attend Day Care centres in 2022

5,210 persons were registered to attend Day Care Services at 31 March 2022. This was 476 (8%) less than the number registered at the end of the previous year and 1,751 (25%) less than the number registered five years ago. Of these, the client group was known for 5,125 service users.

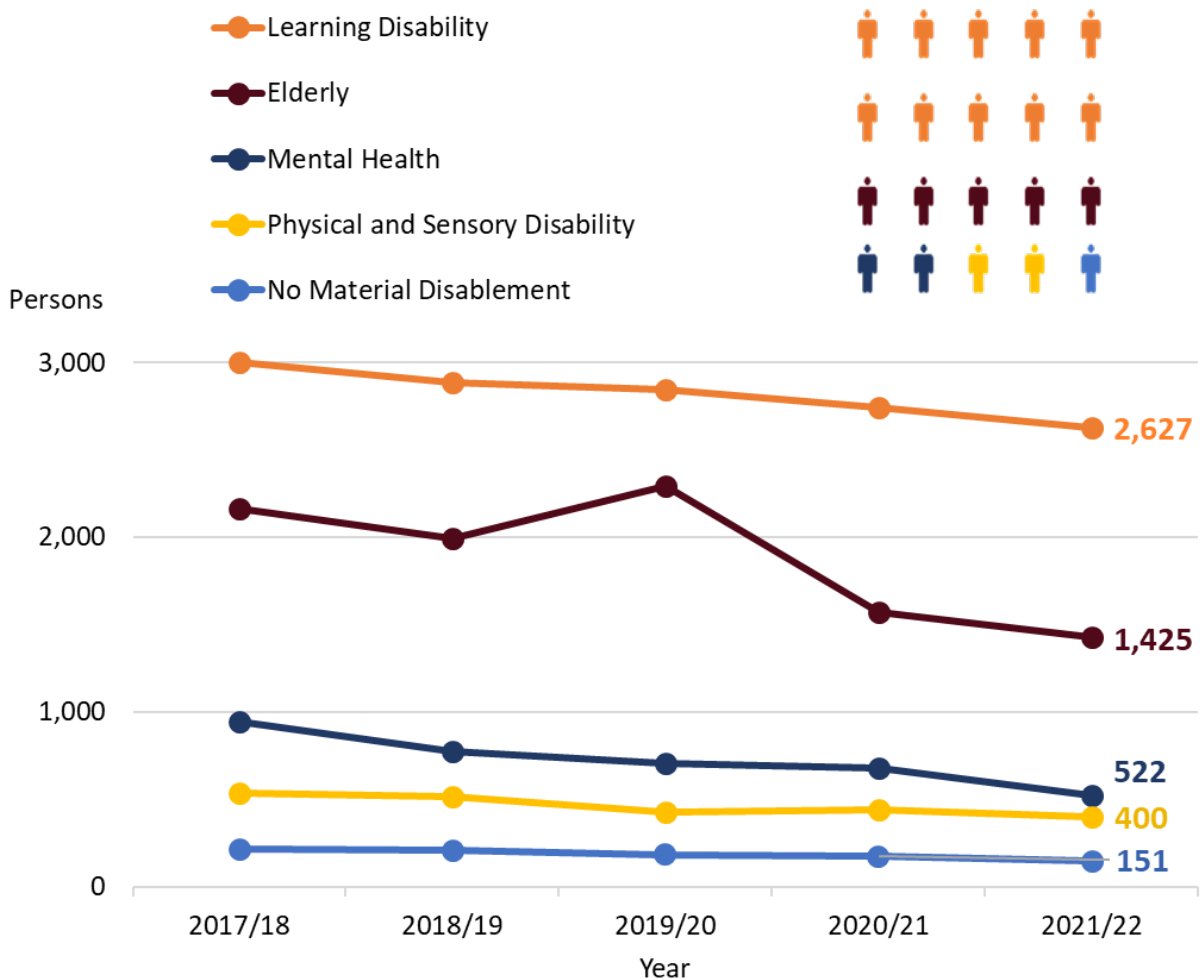
As Figure 17 illustrates, over half (51%) were registered in the learning disability group, with over a quarter (28%) in the elderly group. 1 in 10 (10%) were registered in the mental health group, and nearly 1 in 13 (8%) were registered in the physical/sensory group. A small proportion, approx. 1 in 30 (3%), were registered in the no material disablement group.

See page 46 for definitions. Over the past five years the number of persons registered to attend Day Care centres has decreased across all client groups.

Figure 17 Client Groups Registered to attend Day Care Services by at 31 March 2022*

Source: DoH KDC2(i-iv) Return

* Of 5,125 persons whose client group was known.

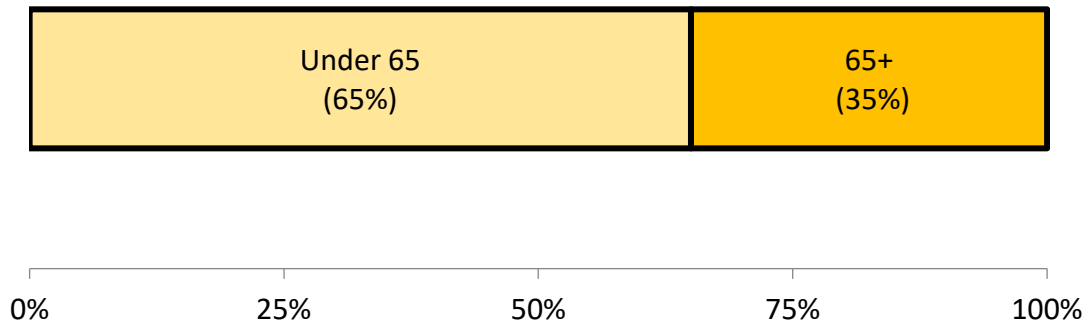


The age of 4,976 persons registered to attend Day Care Services at 31 March 2022 was known, of which 3,224 were under 65 years old, and 1,752 were over 65 years old, as Figure 18 shows.

Figure 18 Day Care Service Users by Age Group at 31 March 2022*

Source: DoH KDC2(i-iv) Return

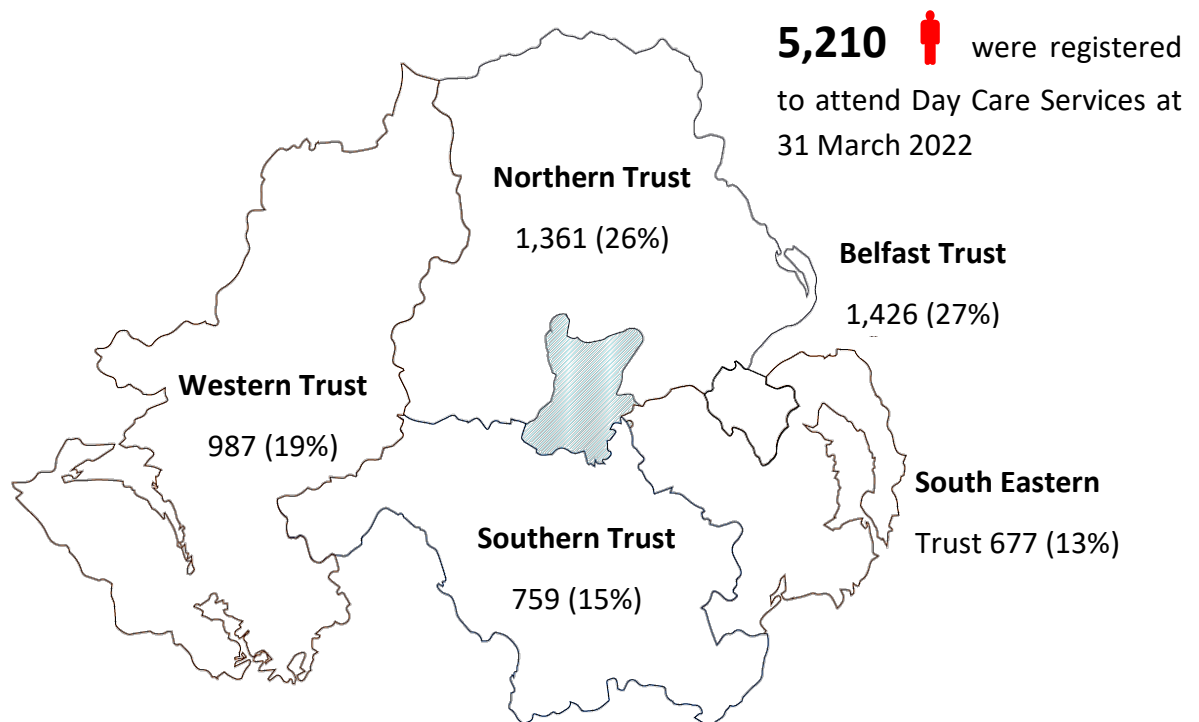
*Of 4,976 persons whose age was known. There were 234 persons in Western HSC Trust whose age was not known.



As at 31 March 2022, the highest proportions (over a quarter each) of persons registered at statutory day care facilities were in the Belfast HSC Trust (27%), and Northern HSC Trust (26%), while the lowest proportion was in the South Eastern HSC Trust, and Southern HSC Trust (13%), as shown in Figure 19 below.

Figure 19 Persons Registered to attend Day Care Services at 31 March 2022

Source: DoH KDC2(i-iv) Return



At 31 March 2022, three quarters (75%) of all registrations at statutory day care facilities were in Day Centres and one quarter (25%) were in Adult Training/Social Education Centres and Workshops.

Figure 20 below shows that in both Adult Training/ Social Education Centres and Workshops there were a higher proportion of persons registered aged under 65, than aged 65+ (where age was known).

Figure 20 Persons Registered to attend Day Care Services at 31 March 2022, by age group and setting*

Source: DoH KDC2(i-iv) Return

* Of 4,976 persons whose age was known. There were 234 persons in Western HSC Trust whose age was not known.

Adult Training/ Social Education Centres & Workshops	Under 65 (1,139)	65+ (100)
Day Centres	Under 65 (2,085)	65+ (1,652)

Residential & Nursing Care

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)*

To note, the RQIA recently led 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 were asked to action one of the three 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 have resulted 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 affected 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.

Residential & Nursing Care Snapshot as at 30 June 2022 - Facilities



473 Facilities were registered at 30 June 2022. Similar proportions of residential (229, 48%) and nursing (244, 52%) care homes were registered in June 2022.

This is similar to numbers registered at June 2018 for both residential (222, 47%) and nursing (249, 53%). 2018 figures can be found in [Statistics on Community Care for Adults in Northern Ireland 2017/18](#).

Of the 229 residential care homes registered in 2022, just over four fifths (81%, 186) were in the independent sector and about one fifth (19%, 43) were in the statutory sector.

Of the 244 nursing care homes registered in 2022, almost all (99%, 241) were in the independent sector with just 1% (3) were in the statutory sector.

In June 2022, Belfast HSC Trust had 46 nursing homes (44 independent and 2 statutory) and 45 residential care homes (33 independent and 12 statutory).

Northern HSC Trust had 66 nursing homes (all independent) and 62 residential care homes (53 independent and 9 statutory).

South Eastern HSC Trust had 54 nursing homes (all independent) and 55 residential care homes (47 independent and 8 statutory).

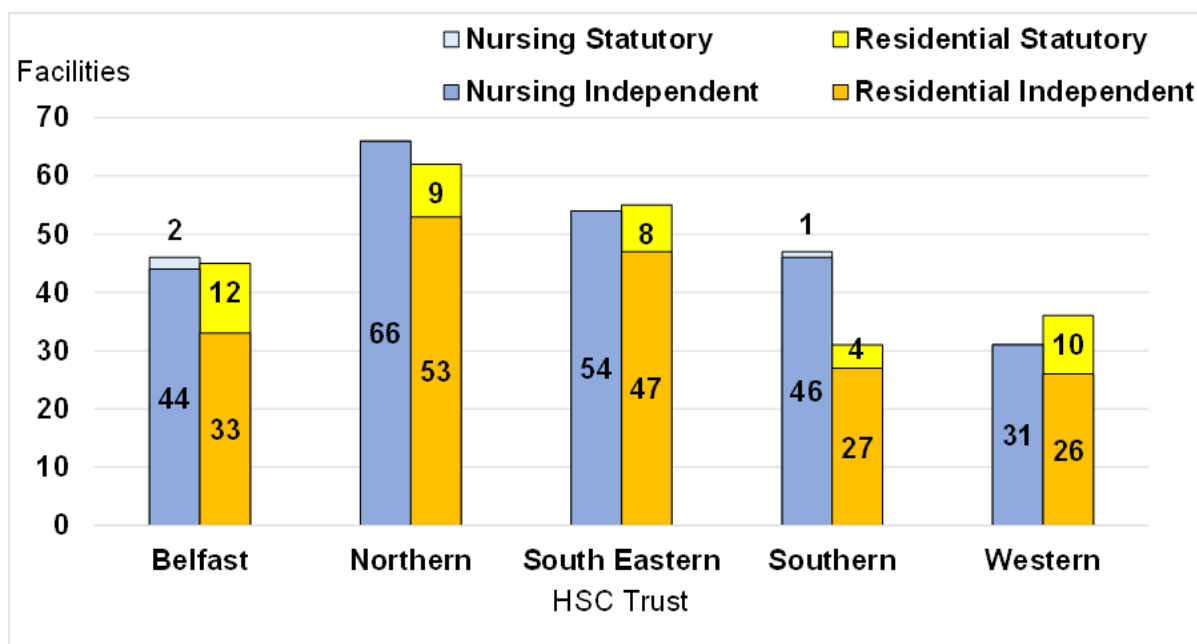
Southern HSC Trust had 47 nursing homes (46 independent and 1 statutory) and 31 residential care homes (27 independent and 4 statutory).

Western HSC Trust had 31 nursing homes (all independent) and 36 residential care homes (26 independent and 10 statutory).

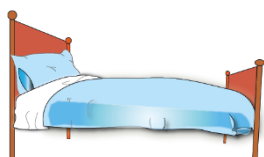
Figure 21 illustrates the number of Residential and Nursing Care facilities by sector and by HSC Trust.

Figure 21 Number of Residential & Nursing Care facilities as at 30 June 2022

Source: RQIA



Residential & Nursing Care Snapshot as at 30 June 2022 – Care home beds



15,888 Care home beds were registered at 30 June 2022.

2 in 3 of these were registered as Nursing, with 10,626 available as nursing and 5,262 available as residential.

Of the 5,262 residential places in registered residential homes, four in five (80%) were in independent residential homes while one in five were in statutory residential homes (20%).

Of the 10,626 nursing care beds available in nursing homes, almost all (99.8%) were in the independent sector, and only a small number (0.2%) were in the statutory sector.

At 30 June 2022, the Northern HSC Trust had the highest number of residential beds (1,437) available while the Southern HSC Trust had the lowest (613).

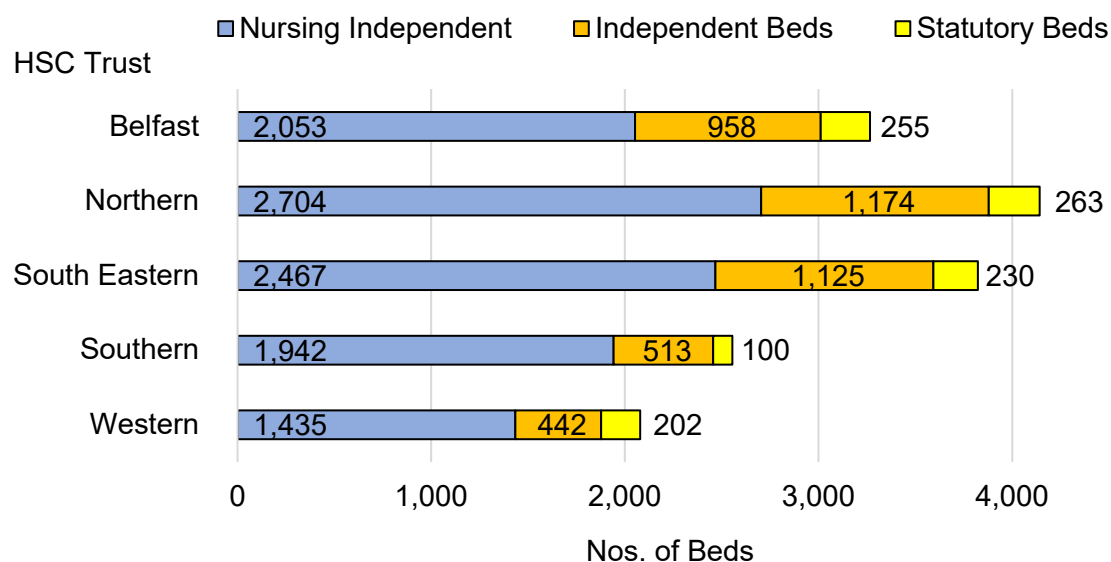
The Northern HSC Trust had the highest number of nursing care beds (2,704) available, while the Western HSC Trust had the lowest number (1,435).

Figure 22 illustrates the number of Residential and Nursing Care beds by sector and by HSC Trust.

Figure 22 Number of Residential & Nursing Care beds as at 30 June 2022*

Source: RQIA

*Individual figures will not sum up to 15,888, as Trust breakdown values for some sector type beds are too small to display clearly in the graphic. Please see Table 16 & 17, page 63 and 64 for detail.



Residential & Nursing Care Snapshot as at 30 June 2022 – Care home packages

11,573 Care packages were in effect with 97% of those delivered by the independent sector (11,181), and 3% were delivered by the statutory sector (392). Over two thirds of all care packages are Nursing (8,027, 69%) and about one third are residential (3,546, 31%).

At 30 June 2022, over four fifths (78%, 9,057) of care packages in effect were in the Elderly Care POC. Of these, 71% (6,450) were nursing care packages, and 29% (2,607) were residential care packages.

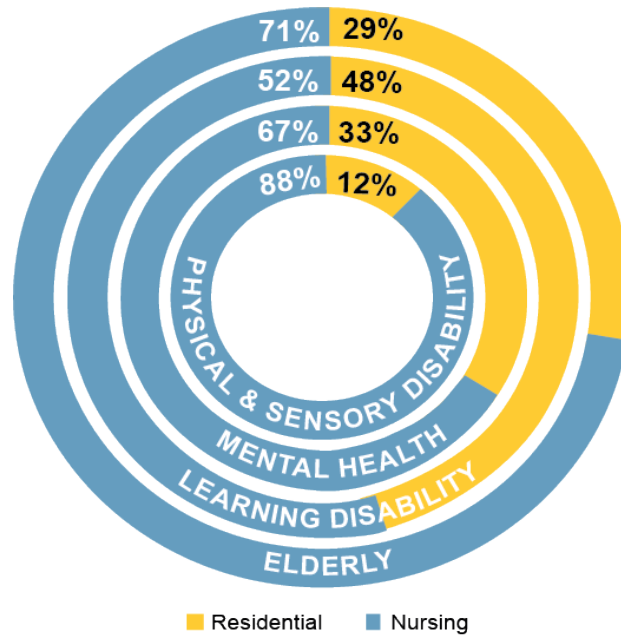
12% (1,362) of care packages were in effect in the Learning Disability POC. Of these, just over half (52%, 710) were nursing care packages, and 48% (652) were residential care packages.

Mental Health and Physical/Sensory Disability accounted for 6% (709) and 4% (445), respectively, of care packages in effect at 30 June 2022.

Figure 23 illustrates the proportion of Residential and Nursing Care packages by client group.

Figure 23 Number of Residential & Nursing Care packages as at 30 June 2022

Source: Health and Social Care Trust CC7 Returns



Residential Facilities 2018 – 2022

Note, the following trends must be interpreted with care, as trend changes of registered facilities, as recent figures will be impacted by the RQIA led process outlined at the start of the topic chapter.

Over the last five years, the number of residential facilities has increased from 222 in June 2018* to 229 in June 2022. This is due to the increase in independent residential facilities, which increased from 178 facilities in June 2018 to 186 facilities in June 2022. There was a slight decrease in the number of statutory residential facilities, which dropped from 44 facilities in June 2018 to 43 facilities in June 2022.

Three of the five HSC Trusts have shown an increase in the number of independent residential facilities, while Northern and Western HSC Trust independent homes remained at the same levels. The largest increase was in the Southern HSC Trust, where the number of independent residential facilities has increased from 22 independent facilities in June 2018 to 27 independent facilities in June 2022.

Between June 2018 and June 2022, the number of statutory residential facilities has remained the same for Northern HSC Trust (9 facilities), Southern Eastern HSC Trust (8 facilities) Southern HSC Trust (4 Facilities) and Western HSC Trust (10 facilities). Over the 5 year period from 2018 to 2022, the Belfast HSC Trust decreased the number of statutory residential facilities from 13 to 12.

Figure 21 compares the number of Residential Care facilities between 2018 and 2022, by HSC Trust.

Figure 24 Residential Facilities - Five year comparison by HSC Trust*

Source: RQIA

* 2018 figures can be found in [Statistics on Community Care for Adults in Northern Ireland 2017/18](#).

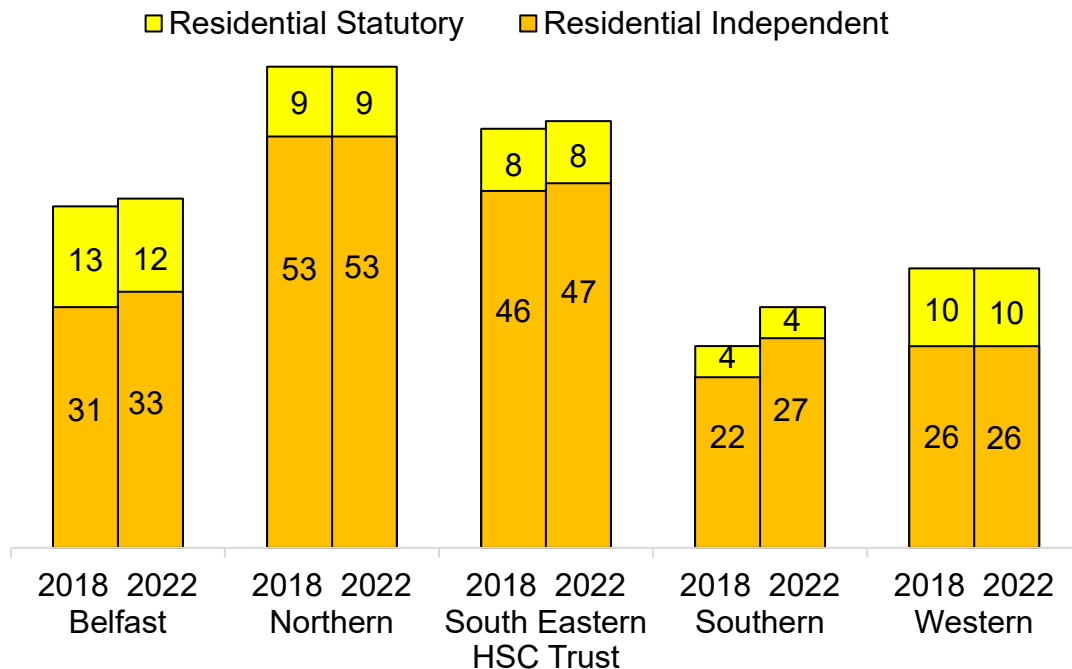


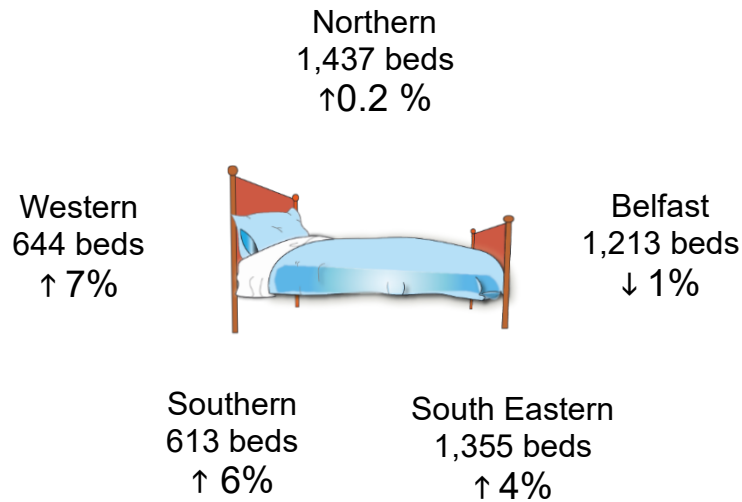
Figure 25 shows that in the last five years, the number of residential beds in Northern Ireland has increased by 2% (from 5,147 beds in June 2018* to 5,262 beds in June 2022).

The largest increase in the number of residential beds has been observed in the Western HSC Trust, a 7% increase, from 600 beds in June 2018 to 644 beds in June 2022. The Southern and South Eastern HSC Trusts also showed increases in the number of residential beds between 2018 and 2022 of 6% and 4% respectively. The number of beds in residential homes in Belfast HSC Trust decreased by -1% in the same over the 5 year period from June 2018 – June 2022, and remained similar in Northern HSC Trust with a 0.2% increase.

Figure 25 Residential Beds - Five year comparison by HSC Trust *

Source: RQIA

* 2018 figures can be found in [Statistics on Community Care for Adults in Northern Ireland 2017/18](#).



HSC Trust	Residential Beds 2018	Residential Beds 2022
Belfast	1,226	1,213
Northern	1,434	1,437
South Eastern	1,308	1,355
Southern	579	613
Western	600	644

Nursing Facilities 2018 – 2022

Note, the following trends must be interpreted with care, as trend changes of registered facilities, as recent figures will be impacted by the RQIA led process outlined at the start of the topic chapter.

Over the last five years, the number of nursing facilities has decreased from 249 in June 2018* to 244 in June 2022. The 249 nursing facilities, registered in 2018 were made up of 4 statutory facilities and 245 independent facilities. In 2022, the 244 nursing facilities were made up of 3 statutory facilities and 241 independent facilities.

Between June 2018 and June 2022, the number of independent nursing facilities in has remained the same in the Belfast (44) and South Eastern HSC Trusts (54). The Northern, Southern and Western HSC Trusts all decreased their registered number of independent nursing facilities over the 5 years from 2018 to 2022 by 1 to 2 homes each.

Between June 2018 and June 2022, the number of statutory nursing facilities has remained the same for all HSC Trusts apart from Southern HSC Trust who decreased from two statutory nursing facilities to one. There were no statutory nursing facilities registered for Northern, South Eastern and Western HSC Trust in 2018 and in 2022.

Figure 26 compares the number of Nursing Care facilities between 2018 and 2022, by HSC Trust.

Figure 26 Nursing Facilities - Five year comparison by HSC Trust*

Source: RQIA

* 2018 figures can be found in [Statistics on Community Care for Adults in Northern Ireland 2017/18](#).

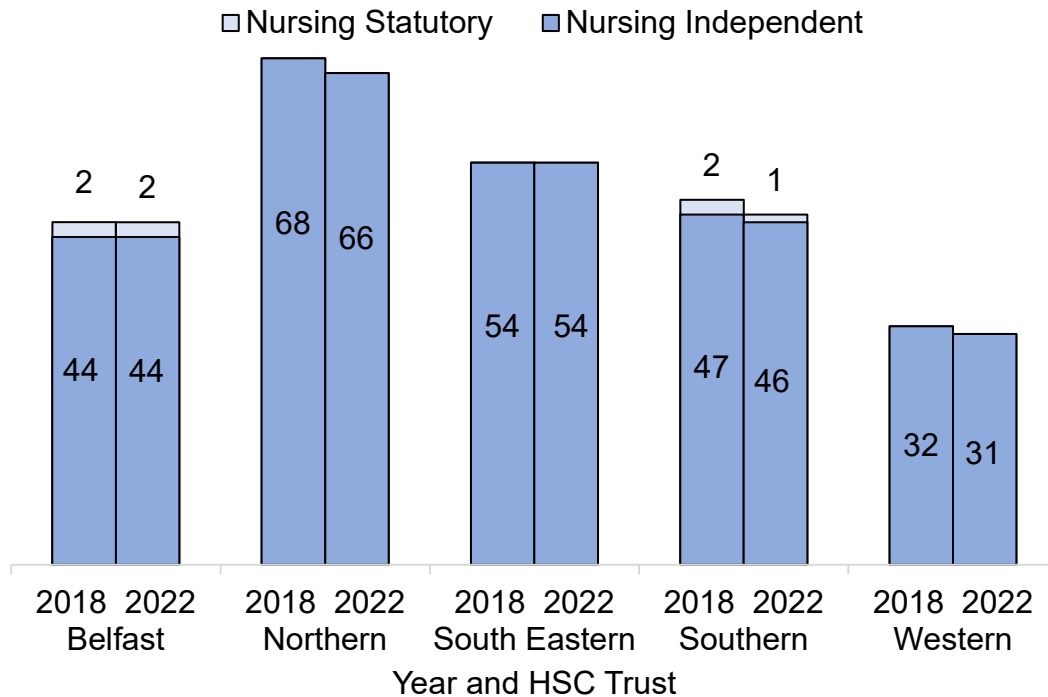


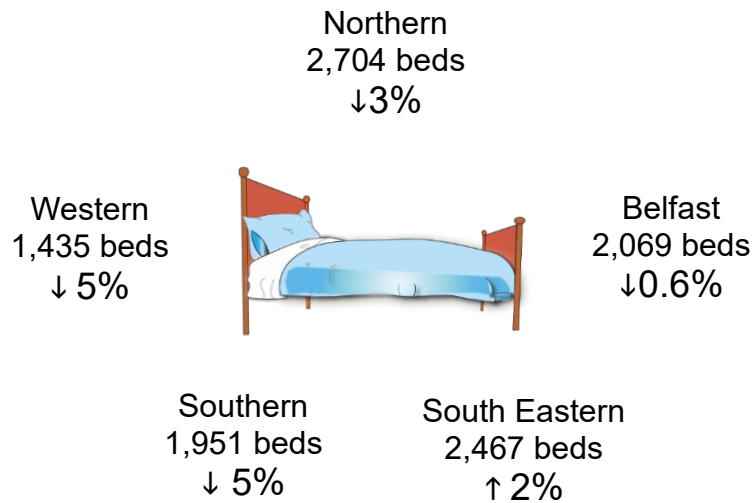
Figure 27 below shows that over the last five years, there has been a decrease (-2%) in the number of nursing beds in Northern Ireland, 10,859 beds in June 2018* and 10,626 beds in June 2022.

The largest decreases of -5% in the number of nursing beds were observed in the Southern and Western HSC Trusts, from 2,061 to 1,951 beds, and from 1,514 to 1,435 beds respectively from June 2018 to June 2022. South Eastern HSC Trust increased their number of nursing beds by 2%. However Belfast and Northern HSC Trusts decreased their number of residential beds by -1%, and -3% respectively.

Figure 27 Nursing Beds - Five year comparison by HSC Trust

Source: RQIA

* 2018 figures can be found in [Statistics on Community Care for Adults in Northern Ireland 2017/18](#).



HSC Trust	Nursing Beds 2018	Nursing Beds 2022
Belfast	2,082	2,069
Northern	2,775	2,704
South Eastern	2,427	2,467
Southern	2,061	1,951
Western	1,514	1,435

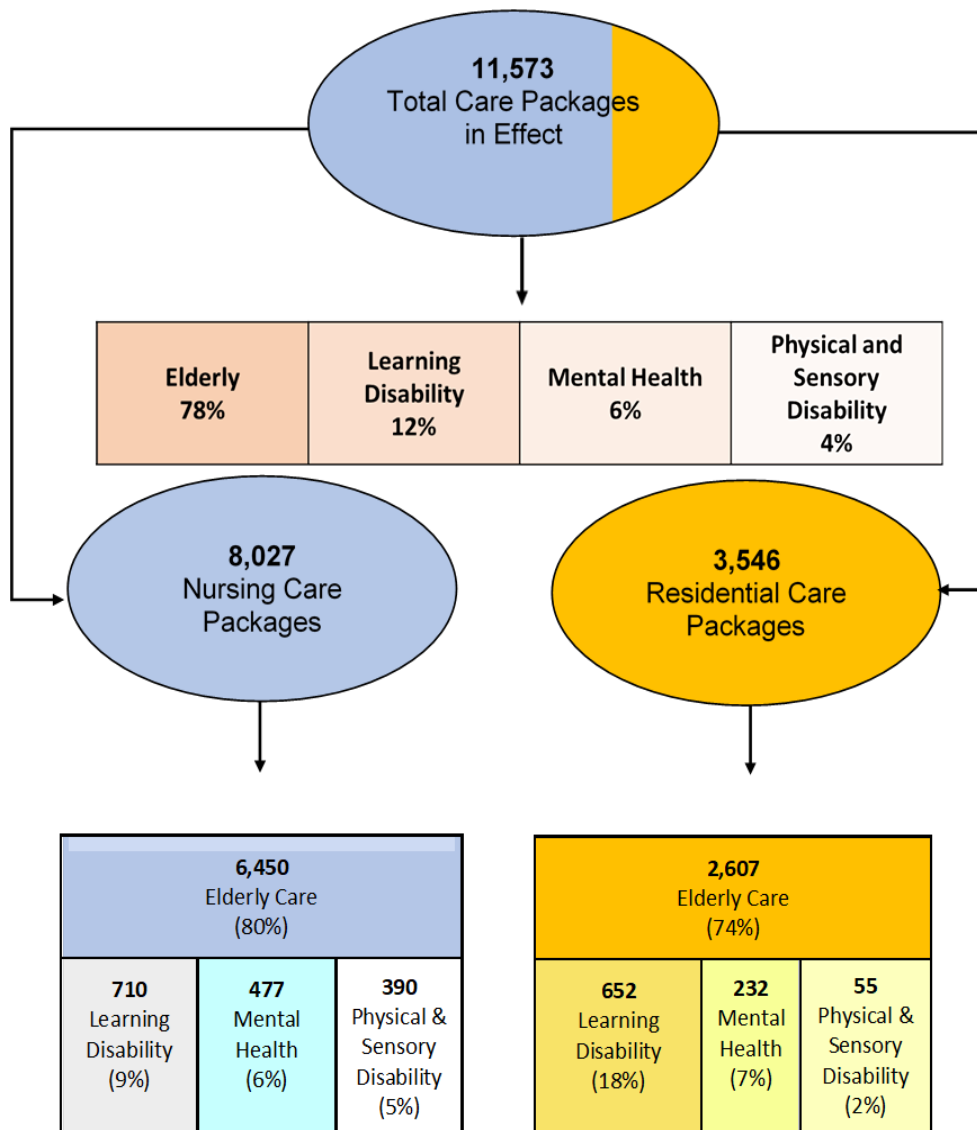
Care Packages in Effect at quarter ending June 2022

Figure 28 shows that of the 11,573 care packages in effect, over two thirds (69%, 8,027) were nursing home care packages and about one third (31%, 3,546) were residential care packages.

Over three quarters (78%, 9,057) of care packages were in effect in the Elderly Care POC. The break down for the other Programme of Care can be seen below.

Figure 28 Care Packages in Effect by POC and Type

Source: Health and Social CC7 returns



The table below shows the breakdown of Nursing and Residential care packages in effect at June 2022, for different client groups.

Client Group	Nursing	Residential	Total
Elderly	6,450	2,607	9,057 (78%)
Learning Disability	710	652	1,362 (12%)
Mental Health	477	232	709 (6%)
Physical/Sensory Disability	390	55	445 (4%)
Total	8,027	3,546	11,573

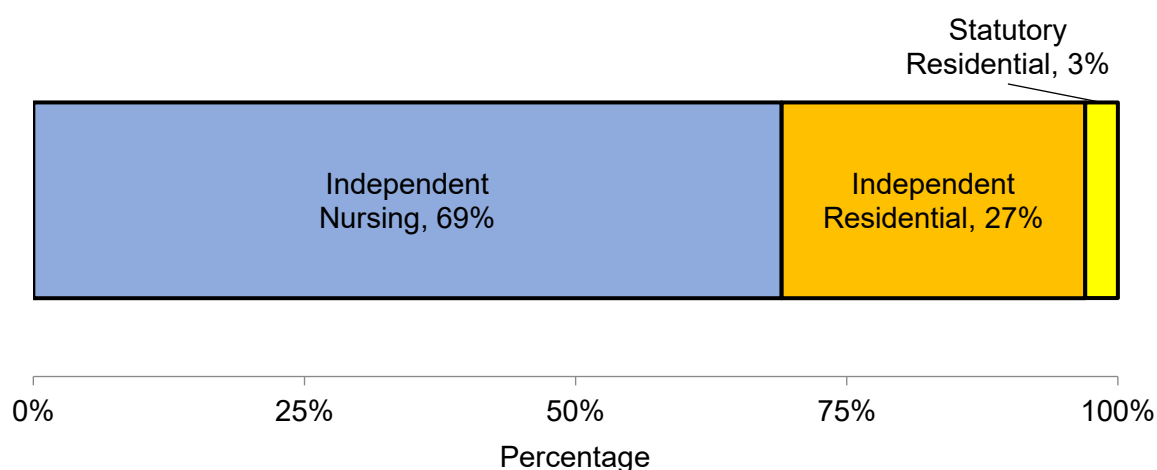
Care Packages in Effect, by Sector, at quarter ending June 2022

At 30 June 2022, almost all (97%, 11,181) of residential and nursing home care packages were provided by the independent sector. Only 3% (392) of all home care packages were provided by the statutory sector.

Figure 29 below shows that at the end of June 2022, over two thirds of home care packages were delivered by independent nursing homes (69%, 8,027), over a quarter (27%, 3,154) of home care packages were delivered by independent residential homes, and 3% (392) were delivered by statutory residential homes. The statutory sector did not provide any nursing home care packages.

Figure 29 Statutory and independent care packages at 30th June 2022

Source: Health and Social Care Trust CC7 Returns



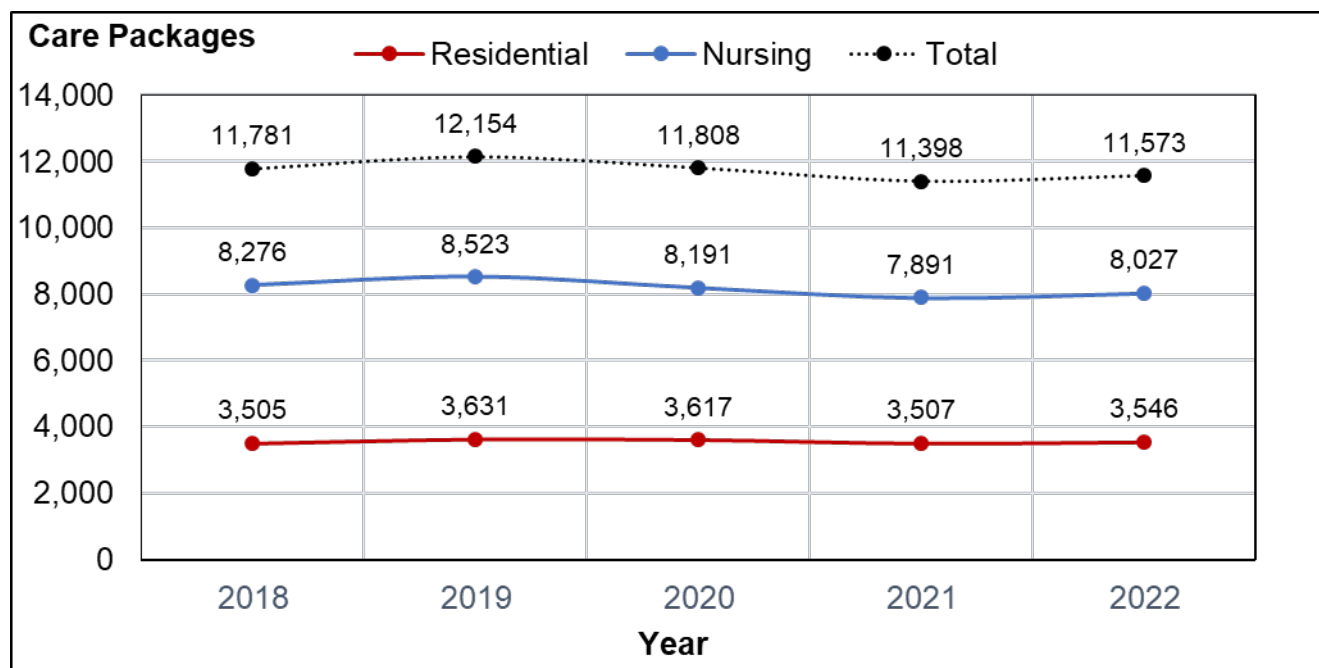
Care Packages in Effect, at quarters ending June 2018 – June 2022

At 30 June 2022, 11,573 residential and nursing home care packages were in effect in Northern Ireland. This represents an increase of 2% since 30 June 2021 (11,398), and a decrease of 2% since 30 June 2018 (11,781). Figures can be found in Table 23 in appendix C.

There has been a decrease (-3%, 249) in the number of nursing home care packages in effect between 2018 (8,276) and 2022 (8,027) but a slight increase (1%, 41) in the number of residential home care packages in effect between 2018 (3,505) and 2022 (3,546) as shown in Figure 30.

Figure 30 Northern Ireland care packages in effect 2018 – 2022

Source: Health and Social Care Trust CC7 Returns



Care Packages in Effect, by HSC Trust, at quarters ending June 2018 – June 2022

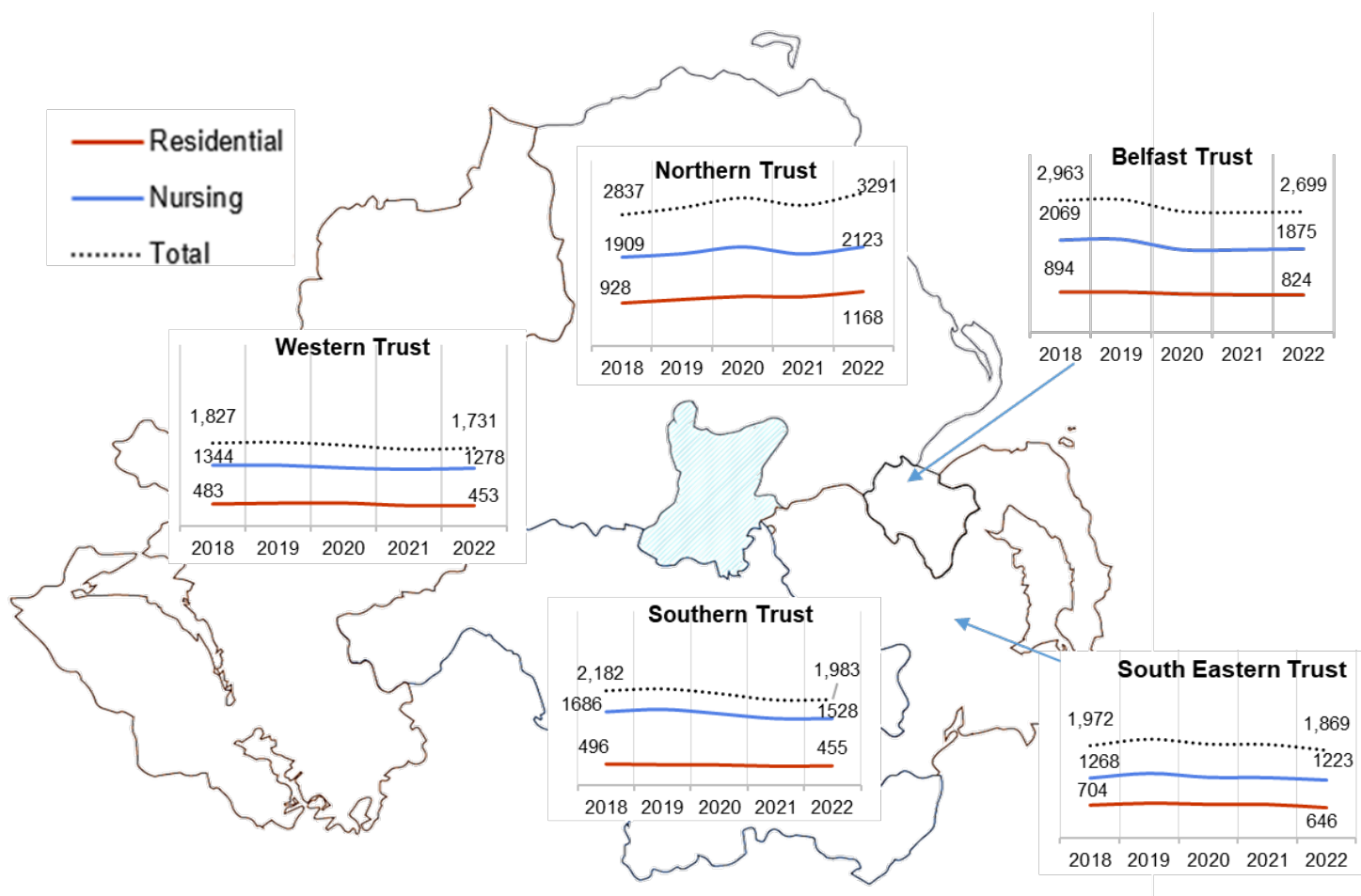
Figure 31 and the table of values below show the trend in the number of residential and nursing home care packages in effect between 2018 and 2022 for each of the five HSC Trusts.

All HSC Trusts, except the Northern HSC Trust, have shown a decrease in the number of nursing home care packages in effect between 2018 and 2022. The Northern HSC Trust increased the number of nursing home care packages in effect between 2018 and 2022 by 11% (1,909 to 2,123).

The Northern HSC Trust has also shown increases in the number of residential home care packages in effect between 2018 and 2022 of 26%. Belfast, the South Eastern and the Southern HSC Trust all decreased the number of residential home care packages in effect between 2018 and 2022 by 8%. Over the same time the Western HSC Trusts decreased by 6%.

Figure 31 Northern Ireland care packages in effect 2018 – 2022

Source: Health and Social Care Trust CC7 Returns



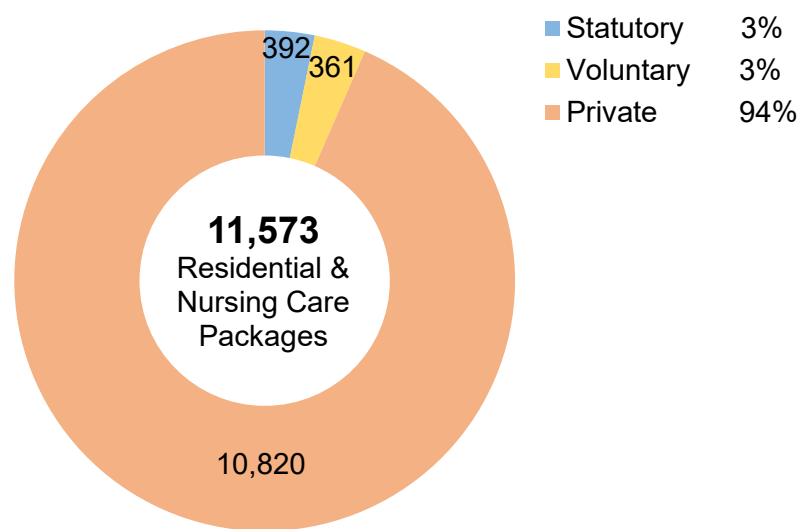
HSC Trust	Residential 2018	Residential 2022	Nursing 2018	Nursing 2022	Total 2018	Total 2022
Belfast	894	824	2,069	1,875	2,963	2,699
Northern	928	1,168	1,909	2,123	2,837	3,291
South Eastern	704	646	1,268	1,223	1,972	1,869
Southern	496	455	1,686	1,528	2,182	1,983
Western	483	453	1,344	1,278	1,827	1,731

Residential & Nursing Home Care Packages at 30 June 2022, by Sector

Figure 32 below shows that, at 30th June 2022, there were 11,573 residential and nursing care packages. Over nine tenths (94%, 10,820) of residential and nursing home care packages were provided by the private sector. The statutory and voluntary sectors provided much smaller proportions of residential and nursing home care packages (3%, 392 and 3%, 361 respectively).

Figure 32 Residential & Nursing Home Care Packages at 30 June 2022, by Sector

Source: Health and Social Care Trust CC7 Returns

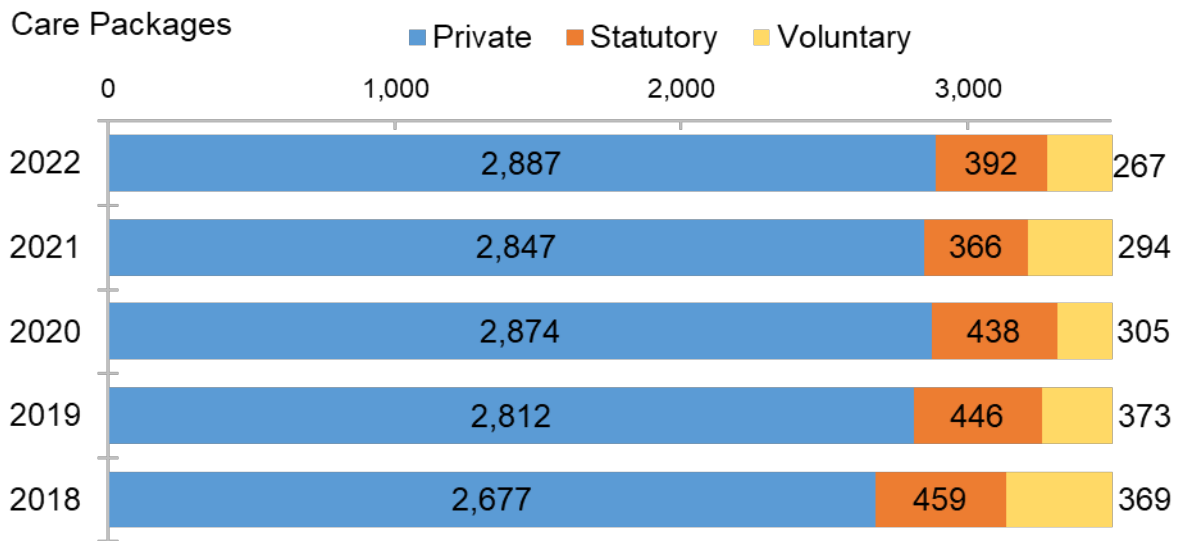


Residential Home Care Packages in Effect at 30 June 2018 – 2022, by Sector

Since 30 June 2018, the number of residential care packages in the private sector has increased by 8% but those in the statutory and voluntary sectors have decreased by 15% and 27% respectively. These trends can be seen in Figure 33 below.

Figure 33 Residential care packages in effect 2018 – 2022

Source: Health and Social Care Trust CC7 Returns

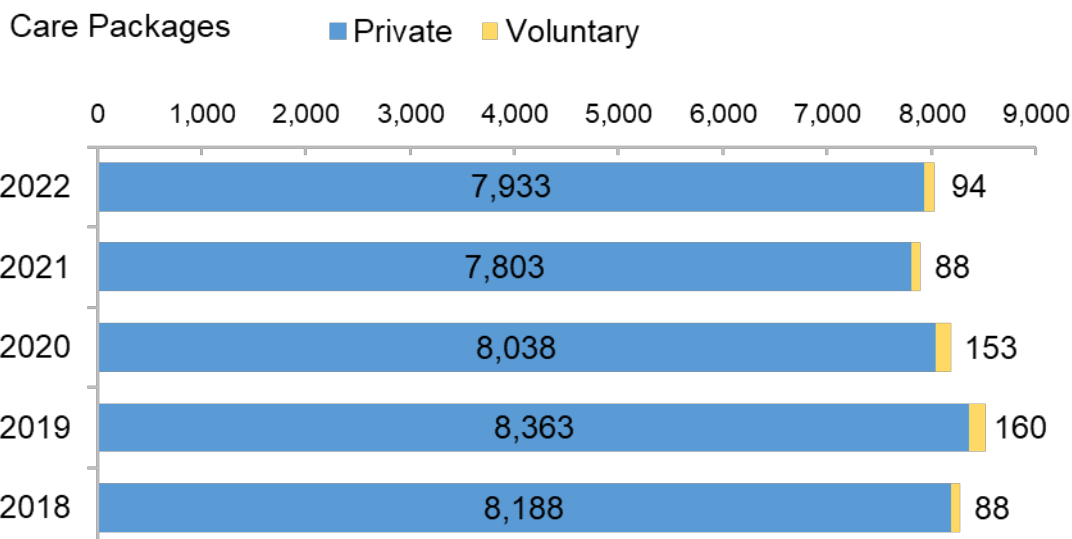


Nursing Home Care Packages in Effect at 30 June 2018 – 2022, by Sector

Since 30 June 2018, the number of nursing home care packages has decreased in the private sector by 3% (-255) while increasing in the voluntary sector by 7% (6), as shown in Figure 34 below. Please treat percentage changes with caution due to the relatively low number of care packages involved.

Figure 34 Nursing care packages in effect 2018 – 2022

Source: Health and Social Care Trust CC7 Returns



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 2021 to 31st March 2022.

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

Client Group	Definition
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>

Client Group	Definition
Learning Disabled	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 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	<p>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.</p> <p>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).</p> <p>Include all physical and/or sensory disabled clients aged 65 and over.</p> <p>Include all work relating to homes for the elderly, including those for the Elderly Mentally Infirm.</p>
5	Mental Health	<p>Exclude all community contacts where the reason for the contact was dementia. (Dementia activity should be allocated to POC 4.</p> <p>However, Down's syndrome clients who develop dementia should remain in POC 6 for any dementia related care or treatment).</p> <p>Exclude all activity relating to residential accommodation for the Elderly Mentally Infirm. (This activity should be included in POC 4).</p>
6	Learning Disability	<p>Include all community contacts where the primary reason for the contact was learning disability, regardless of age.</p> <p>Include community contacts with Down's syndrome clients who develop dementia.</p>
7	Physical & Sensory Disability	<p>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).</p>
9	Primary Health & Adult Community	<p>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.</p>

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

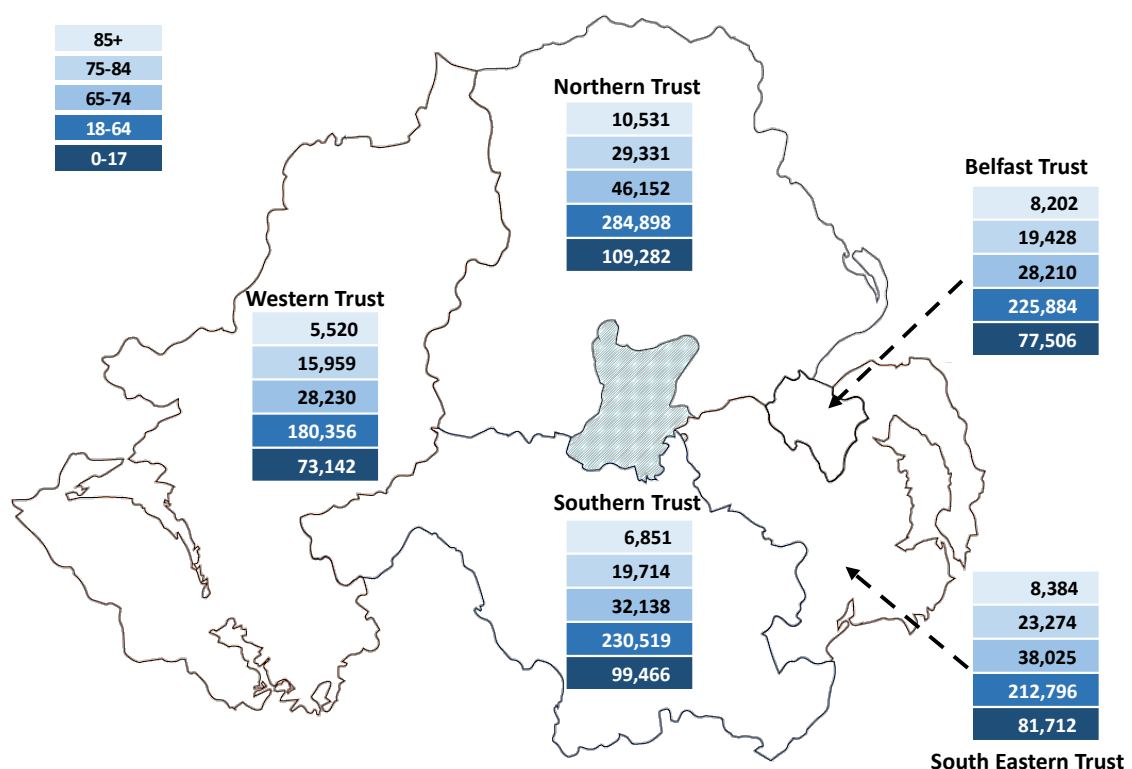
Day Care setting	Definition
Adult Training/ Social Education Centres	These are establishments mainly for people over 16 years of age with a disability in which social and occupational training is provided with the objective of preparing those, who have the ability, to progress into workshops.
Workshops	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 2020

Source: Northern Ireland Mid-year Population Estimates 2020* - Northern Ireland Statistics & Research Agency

*NISRA have rolled forward the Northern Ireland Mid-year Population Estimate, pending updated figures from the Northern Ireland 2021.

Northern Ireland's population (30 June 2020) was 1,895,510.



Appendix C: Tables

Section 1 Home Services

Table 1: Number of Domiciliary Care Recipients during September Survey Week	53
Table 2: Number of Domiciliary Care Visits during September Survey Week	53
Table 3: Number of Domiciliary Care Contact Hours during September Survey Week	53
Table 4: Number of Persons Starting Re-ablement Services during the financial years 2017/18 - 2021/22	54
Table 5: Number of persons discharged from Re-ablement Services during the financial years 2017/18 - 2021/22	54
Table 6: Number of persons discharged from Re-ablement Services with no ongoing care package / Occupational Therapy during the financial years 2017/18 - 2021/22	55
Table 7: Persons Receiving Meals on Wheels Service, by Trust at 31st March 2017/18 - 2021/22	56
Table 8: Persons Receiving Meals on Wheels Service, by Client Group and by Trust at 31st March 2021/22 ^{1,2}	56
Table 9: Persons Receiving Meals on Wheels Service, by Age-Band and Trust at 31st March 2021/22	57
Table 10: * Number of Adults fitted with hearing aids by the statutory sector in NI 2017/18 – 2021/22	58
Table 11: Number of Adults fitted with hearing aids by the statutory sector in NI in each quarter of 2021/22	59
Table 12: Registered Day Care Facilities across HSC Trusts at March 2022	60
Table 13: Persons Registered at Statutory Day Care Facilities by client group at 31st March 2018 - 2022	60
Table 14: Persons Registered at Statutory Day Care Facilities, by Age, by Trust at March 31st 2018- 2022	61
Table 15: Persons Registered at Statutory Day Care Facilities by Settings, by Age, by Trust at March 31st 2022.....	62
Table 16: Residential Accommodation in Northern Ireland, by Type of Home as at 30 June 2022	63
Table 17: Nursing Accommodation in Northern Ireland, by Type of Home as at 30 June 2022.....	64
Table 18: Care Packages in Effect, by Care Type and sector at 30 June 2022	65
Table 19: Care Packages in Effect, in Elderly Programme of Care, by Care Type and Sector at 30 June 2022	66
Table 20: Care Packages in Effect, in Mental Health programme of Care, by Care Type and Sector at 30 June 2022	67

Table 21: Care Packages in Effect, in Learning Disability programme of Care, by Care Type and Sector at 30 June 2022.....	68
Table 22: Care Packages in Effect, in Physical & Sensory Disability programme of Care, by Care Type and Sector at 30 June 2022	69
Table 23: Total Care Packages in Effect, as at 30 June 2019-2022	70
Table 24: Activity Trends for Care Packages by Programme of Care (POC) (2017/18 – 2021/22).....	71
Table 25: Residential Accommodation for Elderly Persons, by Sector at 31 March 2022	72
Table 26: Residential Accommodation for Persons with a Learning Disability, by Sector at 31 March 2022	73
Table 27: Activity Trends for Social Care (2017/18 – 2021/22).....	74
Table 28: Persons with Disability in Contact with HSC Trusts (2017/18-2021/22)	75

Section 1: Home Services

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

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

HSC Trust	2017	2018	2019	2020	2021
Belfast	4,448	4,360	4,274	4,218	4,251
Northern	5,166	5,243	5,384	4,898	5,103
South Eastern	4,924	5,051	5,220	5,076	5,322
Southern	4,558	4,738	4,872	4,026	4,654
Western	4,099	4,017	3,675	3,273	3,363
Northern Ireland	23,195	23,409	23,425	21,491	22,693

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

HSC Trust	2017	2018	2019	2020	2021
Belfast	93,001	94,056	96,001	103,391	109,318
Northern	122,306	126,931	130,836	127,552	137,117
South Eastern	110,092	114,258	119,048	126,308	135,198
Southern	87,420	88,345	90,707	77,963	91,350
Western	80,881	81,255	78,636	74,368	78,435
Northern Ireland	493,700	504,845	515,228	509,582	551,418

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

HSC Trust	2017	2018	2019	2020	2021
Belfast	39,114	40,224	41,010	45,763	49,145
Northern	54,281	56,813	60,609	59,528	62,857
South Eastern	67,015	69,475	75,194	79,045	86,318
Southern	54,142	57,813	58,508	57,133	61,244
Western	47,100	42,758	40,867	37,510	40,260
Northern Ireland	261,652	267,083	276,188	278,979	299,824

Further detail on the figures in the above three tables is available in the '[Northern Ireland Domiciliary Care Services for Adults 2021](#)' publication.

Table 4: Number of Persons Starting Re-ablement Services during the financial years 2017/18 - 2021/22

Source: SPPG

^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. From March 2020 until July 2020, the re-ablement Service in Belfast Trust was put on a temporary hiatus.

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

HSC Trust	2017/18	2018/19	2019/20 ^~	2020/21 ^	2021/22
Belfast	1,541	1,390	1,483	941	1,177
Northern	1,189	1,193	1,291	997	997
South Eastern	1,078	963	582	686	489
Southern	1,174	1,203	1,139	1,203	1,160
Western	982	1,019	957	757	774
Northern Ireland	5,964	5,768	5,452	4,584	4,597

Table 5: Number of persons discharged from Re-ablement Services during the financial years 2017/18 - 2021/22

Source: SPPG

^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. From March 2020 until July 2020, the re-ablement Service in Belfast Trust was put on a temporary hiatus.

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

HSC Trust	2017/18	2018/19	2019/20 ^~	2020/21 ^	2021/22
Belfast	1,502	1,399	1,472	874	1,123
Northern	1,056	1,085	1,366	885	1,042
South Eastern	1,088	975	617	674	479
Southern	1,137	1,207	1,159	1,141	1,159
Western	986	1,023	993	714	741
Northern Ireland	5,769	5,689	5,607	4,288	4,544

Table 6: Number of persons discharged from Re-ablement Services with no ongoing care package / Occupational Therapy during the financial years 2017/18 - 2021/22

Source: SPPG

^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. From March 2020 until July 2020, the re-ablement Service in Belfast Trust was put on a temporary hiatus.

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

HSC Trust	2017/18	2018/19	2019/20 ^~	2020/21	2021/22
Belfast	639	579	709	409	602
Northern	332	370	420	216	299
South Eastern	468	457	210	215	198
Southern	584	719	771	580	681
Western	428	447	468	312	380
Northern Ireland	2,451	2,572	2,578	1,732	2,160

Table 7: Persons Receiving Meals on Wheels Service, by Trust at 31st March 2017/18 - 2021/22

Source: DoH KMW2 Return

HSC Trust	2017/18	2018/19	2019/20	2020/21	2021/22
Belfast	469	503	406	228	169
Northern	127	100	81	63	41
South Eastern	134	107	96	78	72
Southern	0	0	0	0	0
Western	845	878	903	804	864
Northern Ireland	1,575	1,588	1,486	1,173	1,146

Table 8: Persons Receiving Meals on Wheels Service, by Client Group and by Trust at 31st March 2021/22 ^{1,2}

Source: DoH KMW2 Return

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.

HSC Trust	Elderly	Mental Health	Learning Disability	Physical & Sensory Disability <65	No Material Disablement <65	Total
Belfast	151	0	0	18	0	169
Northern	35	0	6	0	0	41
South Eastern*	-	-	-	-	-	72
Southern	0	0	0	0	0	0
Western	815	0	26	0	0	864
Northern Ireland	1,001	2	32	20	24	1,146

Table 9: Persons Receiving Meals on Wheels Service, by Age-Band and Trust at 31st March 2021/22

Source: DoH KMW2 Return

*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.

HSC Trust	Under 65	65 - 74	75 - 84	85 +	Total
Belfast	18	28	52	71	169
Northern	5	9	7	20	41
South Eastern*	-	-	-	-	72
Southern	0	0	0	0	0
Western	49	70	259	486	864
Northern Ireland	72	107	318	577	1,146

Section 2: Community Services

Table 10: * Number of Adults fitted with hearing aids by the statutory sector in NI 2017/18 – 2021/22

Source: SPPG

*Northern HSC Trust figures for 2017/18-2020/21 reflect mainly activity for adult services, with some small activity for paediatric services also included. The Trust were able to provide adult service only figures from 2021/22.

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.

HSC Trust	2017/18	2018/19	2019/20	2020/21	2021/22
Belfast	4,525	4,144	3,528	1,610	1,727
*Northern	5,507	4,855	3,469	1,638	4,029
South Eastern	5,754	6,025	5,588	4,086	5,271
Southern	2,420	2,308	2,466	1,084	1,271
Western	2,239	2,587	2,356	1,788	2,172
Northern Ireland	20,445	19,919	17,407	10,206	14,470

Table 11: Number of Adults fitted with hearing aids by the statutory sector in NI in each quarter of 2021/22

Source: SPPG

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.

HSC Trust	Q1 (Apr – Jun 21)	Q2 (Jul – Sep 21)	Q3 (Oct – Dec 21)	Q4 (Jan – Mar 22)
Belfast	538	400	276	513
Northern	698	1,066	1,200	1,065
South Eastern	1,113	1,253	1,298	1,607
Southern	274	287	351	359
Western	564	585	558	465
Northern Ireland	3,187	3,591	3,683	4,009

Table 12: Registered Day Care Facilities across HSC Trusts at March 2022

Source: RQIA

HSC Trust	Statutory	Independent	All Facilities
Belfast	24	6	30
Northern	24	2	26
South Eastern	14	14	28
Southern	21	10	31
Western	32	20	52
Northern Ireland	115	52	167

Table 13: Persons Registered at Statutory Day Care Facilities by client group at 31st March 2018 - 2022

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

* Please note individual columns 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+.

HSC Trust	2018	2019	2020	2021	2022
Elderly	2,161	1,995	2,294	1,568	1,425
Mental Health	947	776	709	682	522
Learning Disability	2,999	2,888	2,844	2,739	2,627
Physical/ Sensory Disability <65	537	513	426	440	400
No Material Disablement <65	219	212	183	173	151
Northern Ireland	6,961	6,478	6,552	5,686	5,210

Table 14: Persons Registered at Statutory Day Care Facilities, by Age, by Trust at March 31st 2018- 2022

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

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

HSC Trust	2018 < 65	2018 65+	2019 < 65	2019 65+	2020 < 65	2020 65+	2021 < 65	2021 65+	2022 < 65	2022 65+
Belfast	989	886	985	653	900	1,026	889	632	853	573
Northern	1,242	746	1,102	755	1,041	677	957	518	897	464
South Eastern	864	74	743	85	715	81	677	99	599	78
Southern	463	492	455	519	419	500	425	392	411	348
Western*	178	370	491	372	494	381	-	271	464	289
Northern Ireland	3,736	2,568	3,776	2,384	3,569	2,665	2,948	1,912	3,224	1,752
NI Total		6,961		6,478		6,552		5,686		5,210

Table 15: Persons Registered at Statutory Day Care Facilities by Settings, by Age, by Trust at March 31st 2022

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

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

AT/SEC = Adult Training/Social Education Centres & Workshops

HSC Trust	AT / SEC (<65)	AT / SEC (65+)	Day Centres (<65)	Day Centres (65+)	All Facilities (<65)	All Facilities (65+)
Belfast	0	0	853	573	853	573
Northern	675	75	222	389	897	464
South Eastern	0	0	599	78	599	78
Southern	0	0	411	348	411	348
Western *	464	25	-	264	464	289
Northern Ireland	1,139	100	2,085	1,652	3,224	1,752

Table 16: Residential Accommodation in Northern Ireland, by Type of Home as at 30 June 2022

Source: RQIA

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

HSC Trust	Statutory Homes	Statutory Beds	Independent Homes	Independent Beds	Total Homes	Total Beds
Belfast	12	255	33	958	45	1,213
Northern	9	263	53	1,174	62	1,437
South Eastern	8	230	47	1,125	55	1,355
Southern	4	100	27	513	31	613
Western	10	202	26	442	36	644
Northern Ireland	43	1,050	186	4,212	229	5,262

Table 17: Nursing Accommodation in Northern Ireland, by Type of Home as at 30 June 2022

Source: RQIA

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

HSC Trust	Statutory Homes	Statutory Beds	Independent Homes	Independent Beds	Total Homes	Total Beds
Belfast	2	16	44	2,053	46	2,069
Northern	0	0	66	2,704	66	2,704
South Eastern	0	0	54	2,467	54	2,467
Southern	1	9	46	1,942	47	1,951
Western	0	0	31	1,435	31	1,435
Northern Ireland	3	25	241	10,601	244	10,626

Table 18: Care Packages in Effect, by Care Type and sector at 30 June 2022

Source: DoH CC7 Return

“0” represents 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

HSC Trust	Statutory Residential	Voluntary Residential	Private Residential	Total Residential	Statutory Nursing	Voluntary Nursing	Private Nursing	Total Nursing	All Sectors
Belfast	92	23	709	824	0	0	1,875	1,875	2,699
Northern	82	39	1047	1168	0	0	2,123	2,123	3,291
South Eastern	94	126	426	646	0	36	1,187	1,223	1,869
Southern	36	5	414	455	0	0	1,528	1,528	1,983
Western	88	74	291	453	0	58	1,220	1,278	1,731
Northern Ireland	392	267	2887	3546	0	94	7,933	8,027	11,573

Table 19: Care Packages in Effect, in Elderly Programme of Care, by Care Type and Sector at 30 June 2022

Source: DoH CC7 Return

“0” represents 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

HSC Trust	Statutory Residential	Voluntary Residential	Private Residential	Total Residential	Statutory Nursing	Voluntary Nursing	Private Nursing	Total Nursing	All Sectors
Belfast	0	0	533	605	0	0	1,459	1,459	2,064
Northern	0	0	884	905	0	0	1,689	1,689	2,594
South Eastern	84	63	328	475	0	31	1,011	1,042	1,517
Southern	31	0	301	332	0	0	1,175	1,175	1,507
Western	47	28	215	290	0	29	1,056	1,085	1,375
Northern Ireland	250	96	2,261	2,607	0	60	6,390	6,450	9,057

Table 20: Care Packages in Effect, in Mental Health programme of Care, by Care Type and Sector at 30 June 2022

Source: DoH CC7 return

“0” represents 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.

HSC Trust	Statutory Residential	Voluntary Residential	Private Residential	Total Residential	Statutory Nursing	Voluntary Nursing	Private Nursing	Total Nursing	All Sectors
Belfast	0	0	66	66	0	0	139	139	205
Northern	0	0	83	85	0	0	110	110	195
South Eastern	0	0	14	17	0	0	45	45	62
Southern	0	0	33	0	0	0	131	131	167
Western	0	0	0	0	0	0	52	52	80
Northern Ireland	0	0	222	232	0	0	477	477	709

Table 21: Care Packages in Effect, in Learning Disability programme of Care, by Care Type and Sector at 30 June 2022

Source: DoH CC7 return

“0” represents 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.

HSC Trust	Statutory Residential	Voluntary Residential	Private Residential	Total Residential	Statutory Nursing	Voluntary Nursing	Private Nursing	Total Nursing	All Sectors
Belfast	24	19	97	140	0	0	160	160	300
Northern	60	35	57	152	0	0	209	209	361
South Eastern	0	0	79	146	0	0	90	92	238
Southern	0	0	78	85	0	0	166	166	251
Western	39	45	45	129	0	29	54	83	212
Northern Ireland	132	164	356	652	0	0	679	710	1,362

Table 22: Care Packages in Effect, in Physical & Sensory Disability programme of Care, by Care Type and Sector at 30 June 2022

Source: DoH CC7 Return

“0” represents 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

HSC Trust	Statutory Residential	Voluntary Residential	Private Residential	Total Residential	Statutory Nursing	Voluntary Nursing	Private Nursing	Total Nursing	All Sectors
Belfast	0	0	13	13	0	0	117	117	130
Northern	0	0	23	26	0	0	115	115	141
South Eastern	0	0	5	8	0	0	41	44	52
Southern	0	0	0	0	0	0	56	56	58
Western	0	0	0	0	0	0	58	58	64
Northern Ireland	0	0	48	55	0	0	387	390	445

Table 23: Total Care Packages in Effect, as at 30 June 2019-2022

Source: DoH CC7 Return

HSC Trust	2019 Residential	2019 Nursing	2019 Total	2020 Residential	2020 Nursing	2020 Total	2021 Residential	2021 Nursing	2021 Total	2022 Residential	2022 Nursing	2022 Total
Belfast	900	2,086	2,986	849	1,857	2,706	828	1,855	2,683	824	1,875	2,699
Northern	1,003	1,982	2,985	1,067	2,123	3,190	1,060	1,975	3,035	1,168	2,123	3,291
South Eastern	748	1,368	2,116	722	1,283	2,005	721	1,278	1,999	646	1,223	1,869
Southern	481	1,742	2,223	477	1,641	2,118	445	1,528	1,973	455	1,528	1,983
Western	499	1,345	1,844	502	1,287	1,789	453	1,255	1,708	453	1,278	1,731
Northern Ireland	3,631	8,523	12,154	3,617	8,191	11,808	3,507	7,891	11,398	3,546	8,027	11,573

Table 24: Activity Trends for Care Packages by Programme of Care (POC) (2017/18 – 2021/22)

Source: DoH CC7 Return

Client Group	2017/18	2018/19	2019/20	2020/21	2021/22
Elderly	9,519	9,771	9,358	8,961	9,057
Mental Health	619	654	688	690	709
Learning Disability	1,272	1,324	1,308	1,305	1,362
Physical/ Sensory Disability	371	405	454	442	445
Total	11,781	12,154	11,808	11,398	11,573

Table 25: Residential Accommodation for Elderly Persons, by Sector at 31 March 2022

Source: DoH KEL1 Return

Abbreviations: Avg Avail = Average Available places. Avg Occ Statutory = Average Occupied Places in Statutory Homes

HSC Trust	Residential Statutory	Residential Voluntary	Residential Private	Residential Dual	Residential Total	Avg Avail Statutory	Avg Avail Voluntary	Avg Avail Private	Avg Avail Dual	Avg Avail Total	Avg Occ Statutory
Belfast	4	9	10	6	29	100	354	315	122	891	58
Northern	7	0	45	0	52	248	0	1,093	0	1,341	90
South Eastern	6	6	27	0	39	198	228	663	0	1,089	130
Southern	4	1	6	15	26	97	41	162	174	474	64
Western	5	3	12	4	24	153	56	196	73	478	78
Northern Ireland	26	19	100	25	170	796	679	2,429	369	4,273	420

Table 26: Residential Accommodation for Persons with a Learning Disability, by Sector at 31 March 2022

Source: DoH KMH1 Return

Abbreviations: Avg Avail = Average Available places. Avg Occ Statutory = Average Occupied Places in Statutory Homes

HSC Trust	Residential Statutory	Residential Voluntary	Residential Private	Residential Dual	Residential Total	Avg Avail Statutory	Avg Avail Voluntary	Avg Avail Private	Avg Avail Dual	Avg Avail Total	Avg Occ Statutory
Belfast	6	3	2	0	11	39	32	29	0	100	25
Northern	2	0	0	0	2	9	0	0	0	9	8
South Eastern	2	5	5	0	12	8	87	84	0	179	8
Southern	0	2	8	1	11	0	14	84	3	101	0
Western	4	4	4	0	12	48	60	47	0	155	51
Northern Ireland	14	14	19	1	48	104	193	244	3	544	92

Table 27: Activity Trends for Social Care (2017/18 – 2021/22)

Source: DoH KPH2(i-iii) & KMH2, DoH CC7, DoH KMW2, RQIA, DoH KDC2(i-iv)

* In 2019/20, 2020/21 and in 2021/22 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, due to the impact of COVID-19 in 2020/21, and as information on Persons with a Disability in Contact with HSC Trusts cannot be provided for 2021/22 due to issues with HSC Trust IT systems and unavailable data.

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

Activity Indicator	2017/18	2018/19	2019/20	2020/21	2021/22	% Change over last 5 years (2017/18 - 2021/22)
Persons with disability in Contact with HSC Trusts	30,066 ^R	30,092	-*			A direct comparison cannot be made*
Care Packages in Effect	11,781	12,154	11,808	11,398	11,573	-2%
Persons Receiving Meals on Wheels Service	1,575	1,588	1,486	1,173	1,146	-27%
Available Residential Care Beds	5,147	5,233	5,278	5,347	5,262	2%
Available Nursing Care Beds	10,859	10,832	10,802	10,724	10,626	-2%
Persons Registered at Statutory Day Care Facilities	6,961	6,478	6,552	5,686	5,210	-25%

Table 28: Persons with Disability in Contact with HSC Trusts (2017/18-2021/22)

Source: DoH KPH2(i-iii) & KMH2, DoH CC7, DoH KMW2, RQIA, DoH KDC2(i-iv) Work to revise the persons in contact data templates (KPH2(i, ii, & iii) & KMH2) is ongoing.

* Figures for SHSCT were unavailable due to migration of IT data systems. Please note that figures are expected to be in line with previous years.

^ SHSCT information from 2019/20 was omitted, as it could not be validated ahead of publication.

HSC Trusts noted that contact between social workers, or other member of statutory social services staff, and persons with disabilities reduced due to COVID-19. This particularly affected face-to-face activity and group work. Virtual contact was possible between some HSC staff and service users, however this is outside the scope of the definitions for the persons in contact information in the current publication.

~Information cannot be provided for 2021/22 due to issues with HSC Trust IT systems and unavailable data.

Trust	Client Group	2017/18	2018/19*	2019/20 ^	2020/21#	2021/22~
Belfast	Sight impairment	2,685	2,796	1,413	1,314	-
	Hearing impairment	2,557	2,532	1,097	642	-
	Physical Disability	1,838	1,867	1,651	1,801	-
	Learning Disability	1,811	1,748	1,737	569	-
	Total	8,891	8,943	5,898	4,326	-
Northern	Sight impairment	1,086	1,010	1,092	1,015	-
	Hearing impairment	985	920	875	682	-
	Physical Disability	1,062	929	824	770	-
	Learning Disability	1,972	1,932	1,924	1,879	-
	Total	5,105	4,791	4,715	4,346	-
South Eastern	Sight impairment	1,627	1,623	1,642	1,457	-
	Hearing impairment	513	523	566	475	-
	Physical Disability	1,638	1,716	1,696	1,698	-
	Learning Disability	2,006	2,067	2,054	2,060	-
	Total	5,784	5,929	5,958	5,690	-
Southern	Sight impairment	760	-	-	474	-
	Hearing impairment	617	-	-	396	-
	Physical Disability	1,307	-	-	652	-
	Learning Disability	2,197	-	-	632	-
	Total	4,881	-	-	2,154	-
Western	Sight impairment	856	793	859	498	-
	Hearing impairment	997	912	925	541	-
	Physical Disability	1,780	2,188	1,564	865	-
	Learning Disability	1,772	1,695	1,498	1,424	-
	Total	5,405	5,588	4,846	3,328	-
Total	30,066	25,251	21,417	19,844	-	

Appendix D: Technical Notes

Report Time Period

All information in this publication refers to the period 1st April 2021 - 31st March 2022 or position at 31st March 2022 unless stated otherwise. The cut-off point for amendments to data was 24th October 2022. 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	Annual Departmental Domiciliary Care Survey carried out in September each year

Additional Sources

Return	Description of Data Collected
Re-ablement Return	Persons registered at statutory day care facilities by client group and age at 31 March – Designated mentally ill
Audiology	<p>Persons registered at statutory day care facilities by client group and age at 31 March – Learning disabled</p> <p>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:</p> <ol style="list-style-type: none"> 1. Patients can have 2 hearing aids fitted.

Return	Description of Data Collected
	<ol style="list-style-type: none"> <li data-bbox="683 255 1310 353">2. Patients do not always have a fitting following a hearing aid fitting appointment, as some patients decide not to proceed at this point. <li data-bbox="683 360 1331 459">3. Patients can have a hearing aid fitted without a hearing aid fitting appointment as they have a “see and fit” diagnostic assessment appointment.
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: Regulation and Quality Improvement Authority Northern Ireland

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)
<https://digital.nhs.uk/data-and-information/publications/statistical/adult-social-care-activity-and-finance-report/2021-22>
- Insights in Social Care: Statistics for Scotland
<https://publichealthscotland.scot/publications/insights-in-social-care-statistics-for-scotland/insights-in-social-care-statistics-for-scotland-support-provided-or-funded-by-health-and-social-care-partnerships-in-scotland-201920-202021/>
- Adult Health and Social Care Services in Wales
<https://statswales.gov.wales/Catalogue/Health-and-Social-Care/Social-Services/Adult-Services/Service-Provision>

Future Publications

The next release of these statistics, for the year ending 31 March 2023, is scheduled for October 2023.

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.

The appropriate contact point for more detailed analyses or to answer queries in relation to the data is:

Louise Walker
Community Information Branch
Information & Analysis Directorate
Department of Health
Stormont Estate
Belfast
BT4 3SQ
Tel: 028 90 522342
Email: cib@health-ni.gov.uk

This and other statistical bulletins published by Community Information Branch are available to download on the DoH website at:

Department of [Health Social Care Statistics](#)

This publication can be requested in large print or other formats.