Introduction

1. The aim of the Project was to:

• explore whether additional outcome indicators can be extracted from the ‘Secure Anonymised Information Linkage’ (SAIL) databank at Swansea University to evidence whether the well-being outcomes identified in the national outcomes framework for people who need care and support and carers who need support are achieved. Indicators could be extracted either from existing administrative data or by linking together administrative and/or survey datasets held in the databank;

• determine the extent to which existing data in SAIL can be used to flag the different client groups to which the well-being statement applies and establish the size of specific client group ‘samples’ that can be defined; this will be a first step in delivering analysis for specific client groups; and

• investigate governance issues around the sharing of local authority social care data with the SAIL databank at Swansea University.

2. The research and analysis for the Project took place between August 2013 and November 2014; the information contained in the report is correct as of November 2014.
Key Findings

3. The Project explored the issues of acquiring social care data from Local Authorities in Wales and how these issues can be overcome. By examining an extract of social care data for the City and Council of Swansea for 2004-07, the Project was able to conclude that administrative data can be a rich source of information about social care clients and that the acquisition of an all-Wales social care data set, whilst challenging, would support the reporting of the outcome indicators listed below and would contribute significantly to the evidence base.

4. The main Report examines how a range of potential user groups could be anonymously ‘flagged’ in order to allow the reporting of outcome indicators separately by user group. It should be noted that further refinement of the definitions of user groups is required e.g. to agree precisely which conditions comprise ‘mental (ill) health’, and to evaluate whether each potential outcome indicator would add value to the existing set of outcome indicators already identified in the outcomes framework.

5. The Project identified a number of potential outcome indicators that could be used in addition to the current set of outcome indicators in the outcomes framework. The potential additional outcome indicators are listed below but it should be noted that most of these indicators will require further development work or further data acquisition before reporting can begin. The main report discusses the potential additional outcome indicators in greater detail, including the extent to which each headline indicator can be reported separately by user group, and describes the data acquisition and/or development work required to allow reporting of each potential indicator.

6. Additional headline indicators available without linking data are as follows (N.B. if reporting is required separately by user group or for social care users, data linking WILL be required):

   - Percentage of young people in receipt of Education Maintenance Allowance Wales (EMA) or Assembly Learning Grant (Further Education) (ALG FE).
   - Percentage of adults with a record in the Lifelong Learning Wales Record (LLWR).
   - Percentage of adults, ‘younger adults’ and ‘older adults’ participating in a range of sports and physical recreation activities, volunteering in sport, with sports club membership, participating in competitive sport or using leisure and fitness centres.

7. Additional headline indicators that may be available without linking data are as follows:
• Percentage of children in receipt of Flying Start meeting the expectation that they would attain Level 2 in each subject at age 7 years/Key Stage 1.

8. Additional headline indicators available with relatively little additional acquisition or development work but only by linking data are as follows:

• Percentage of patients given one of 20 advice leaflets or any of several kinds of verbal advice by their GP practice.

• Percentage of Flying Start eligible children assessed to be fully prepared for school on entry to Foundation Phase (data not available until 2016).

• Percentage of Flying Start eligible children meeting the expectation that they would attain Level 2 in each subject at age 7 years/Key Stage 1.

9. Additional headline indicators available with significant additional data acquisition or development work and only by linking data are as follows:

• Objective, physician-reported status of physical and mental health.

• Average self-reported ‘happiness’ score for social care users (compared with the general population).

• Percentage of people who have experienced domestic violence receiving social care services or supported housing services e.g. Supporting People.

• Percentage of people who: i) report feeling that they belong in their neighbourhood; ii) think that their local area is a place where people from different backgrounds get on well together; or iii) think that people in their local area treat each other with respect and consideration and who are in receipt of a) social care services; and b) supported housing services e.g. Supporting People.

• Percentage of people who report being satisfied with: i) ‘personal relationships’ and ii) ‘the well-being of (their) children’ and who are in receipt of: a) social care services; and b) supported housing services e.g. Supporting People.

• Percentage of social care users in receipt of benefits.

• Percentage of children in receipt of Flying Start assessed to be fully prepared for school on entry to Foundation Phase (data not available until 2016).

• Percentage of former Children in Need receiving Adult Social Care services.

• Percentage of former Children in Need receiving services through supported housing services e.g. Supporting People.
• Percentage of private residences meeting the Local Government and Housing Act 1985 overcrowding definition.

10. Significant challenges were identified with using linked data to create outcome indicators; some of these can be overcome with further development work. Many of these challenges relate to the fact that administrative data is collected for operational and not for research purposes. There are also a number of limitations to the SAIL database in particular that will need to be overcome to enable more potential outcome indicators to be identified in future:

• although SAIL already contains large numbers of routine health records and data for a growing range of non-health topics, it does not currently contain anonymised routine records for all local authority social care clients in Wales;

• some data held by SAIL was not available for the whole population of Wales e.g. at time of writing, GP Event data was available for around 50% of Wales, although a National Institute for Social Care and Health Research-funded project was given the target to increase this to over 70% by March 2015;

• it can take a long time to acquire new administrative datasets for linking and to get the data ‘research ready’;

• definitions often vary between data providers, which means time-consuming reconciliation can be required across datasets even when they relate to the same service, individual or topic; and

• when developing indicators using large, complex administrative datasets, time and resources can be required to manage the complexity e.g. deciding precisely which indicator definitions to use and how to manage issues around e.g. severity and duration.

11. The Project found that, whilst various projects funded or undertaken by local authorities, third sector or other service delivery partner organisations have brought additional social care data into SAIL, these projects tended to focus on specific user groups, socio-demographic groups and/or geographical areas rather than seeking to acquire all social care data for Wales or to establish routine data flows between local authorities and SAIL.

12. With the creation of the Economic and Social Research Council-funded UK Administrative Data Research Network and as a result of work undertaken for various past or current (at time of writing) data linking projects, some Welsh Government-funded, some of the barriers outlined in paragraph 10 are likely to be at least partially overcome in coming years.
13. In the longer term, the implementation of the Social Services and Well-being (Wales) Act and the corresponding development of the Welsh Community Care Information System (WCCIS) will provide the opportunity to develop a standardised social care data set for Wales that could potentially be acquired for SAIL for analysis purposes.

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Views expressed in this report are those of the researchers and not necessarily those of the Welsh Government

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