

# Respite Care and Carers

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# Respite Care

- History
- What does the data tell us / not tell us
- Review of current Respite Care survey
- Future of Respite Care survey
- Discussion

# Respite Care - History

The Respite Concordat Commitment was a national target for the delivery of an additional 10,000 respite weeks across Scotland, to be delivered over 3 years as follows:

2008-09 (2,000 weeks)

2009-10 (6,000 weeks)

2010-11 (10,000 weeks)



When Concordat commitment was announced, Audit Scotland were collecting and publishing information on Respite Care.

Following a review of their SPIs they decided to stop collecting this information from 2009-10 onwards.

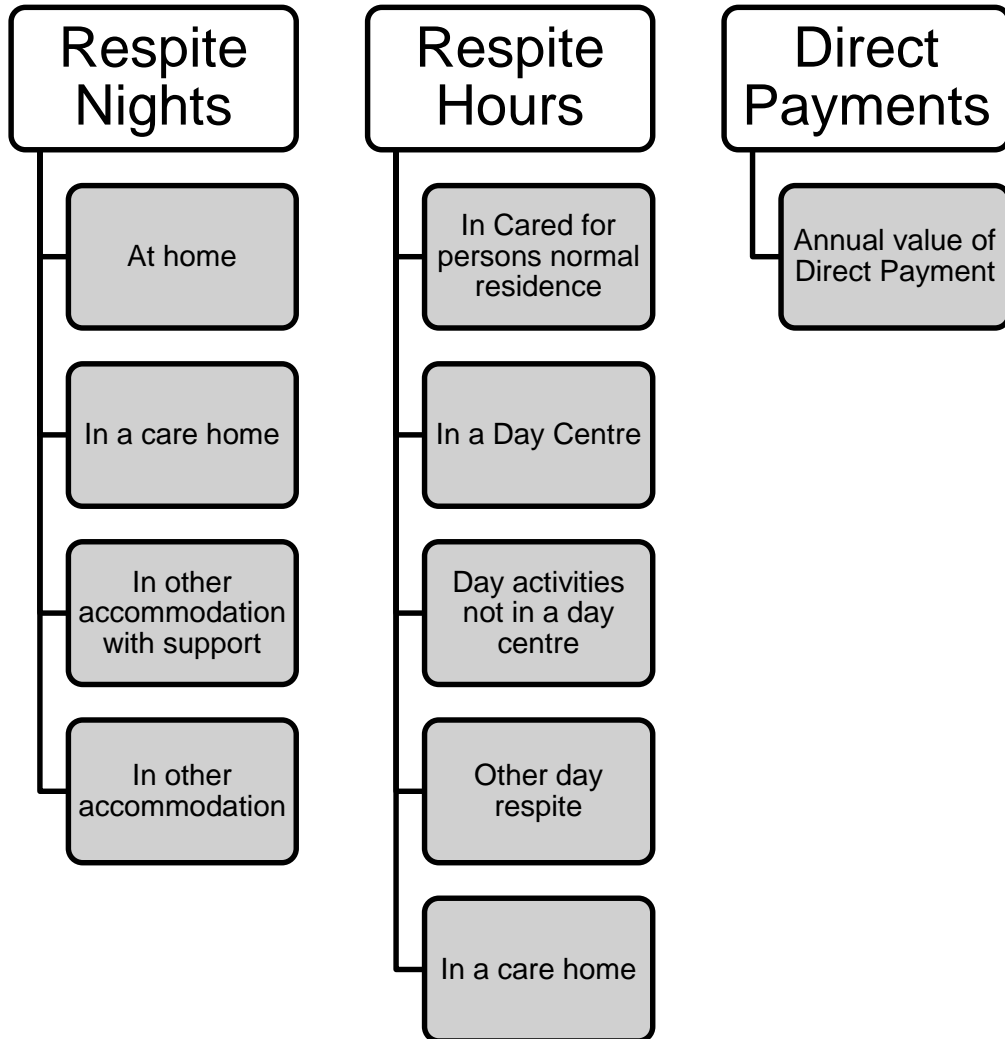


**The Scottish  
Government**  
Riaghaltas na h-Alba

Scottish Government collected Respite Care data from 2009-10 onwards and has published annually as Official Statistics.

Carried out review of Respite Care guidance in 2011 and issued new guidance from 2012-13 onwards to get better consistency between councils.

# What does data tell us?



Tells us:

- Number of respite hours, nights and weeks
- Types of respite provided
- Whether the person being cared for is:
  - Child (0-17)
  - Adult (18-64)
  - Older (65+)

Doesn't tell us:

- How many people get respite service
- Anything about the carers
- Anything about outcomes
- About respite provided by HBs or directly by 3<sup>rd</sup> sector

## Number of respite weeks provided to All ages in Scotland, 2007/08 to 2013/14

Select Local Authority

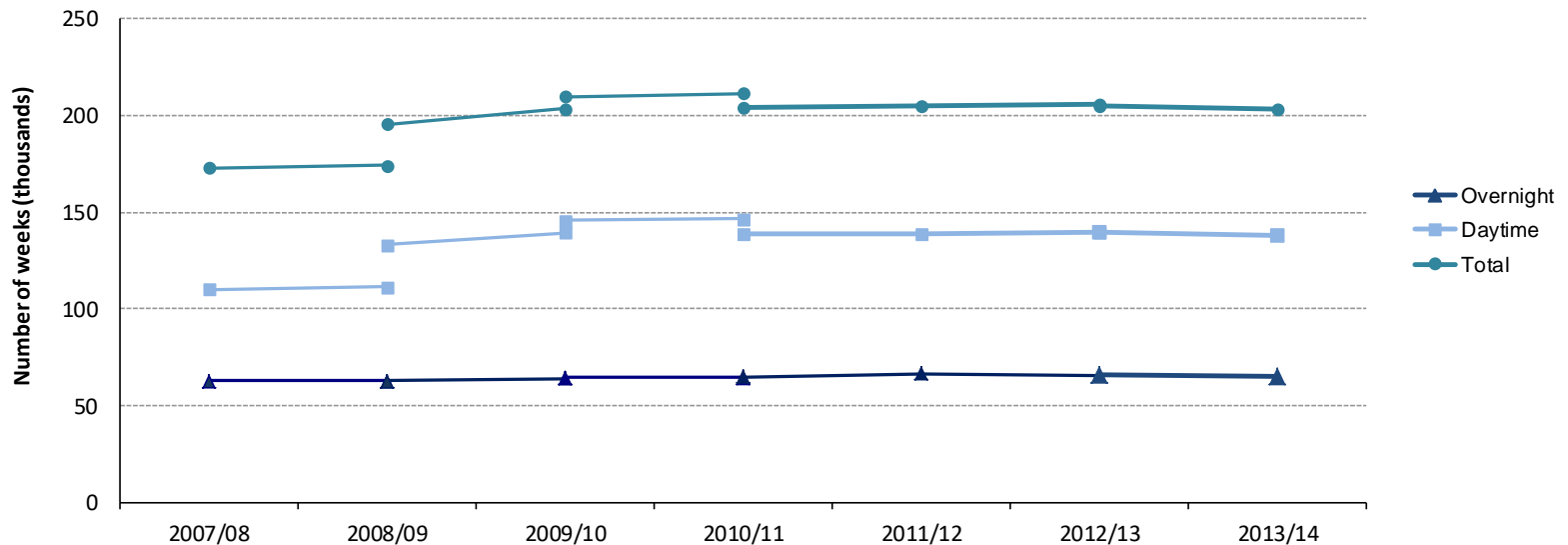
Scotland

Select age group

All ages

### Number of respite weeks provided

	2007/08 <sup>0</sup>	2008/09 <sup>0</sup>	2008/09 <sup>1</sup>	2009/10 <sup>1</sup>	2009/10 <sup>2</sup>	2010/11 <sup>2</sup>	2010/11 <sup>3</sup>	2011/12 <sup>3</sup>	2012/13 <sup>3</sup>	2012/13 <sup>4</sup>	2013/14 <sup>4</sup>
Overnight Respite Weeks	62,754	62,800	62,731	64,112	64,287	64,648	64,903	66,570	65,881	65,761	65,033
Daytime Respite Weeks	109,979	111,229	132,983	139,457	145,508	146,567	138,822	138,500	139,920	139,322	138,060
<b>Total</b>	<b>172,733</b>	<b>174,028</b>	<b>195,714</b>	<b>203,568</b>	<b>209,796</b>	<b>211,215</b>	<b>203,725</b>	<b>205,070</b>	<b>205,801</b>	<b>205,083</b>	<b>203,094</b>



Source: Audit Scotland SPI data 2006-2008, Scottish Government 2009-2014

All figures rounded to the nearest ten. Total may not add up to the sum of components due to rounding

<sup>0</sup> - Same methodology used in 2007/08 & 2008/09 making the figures comparable

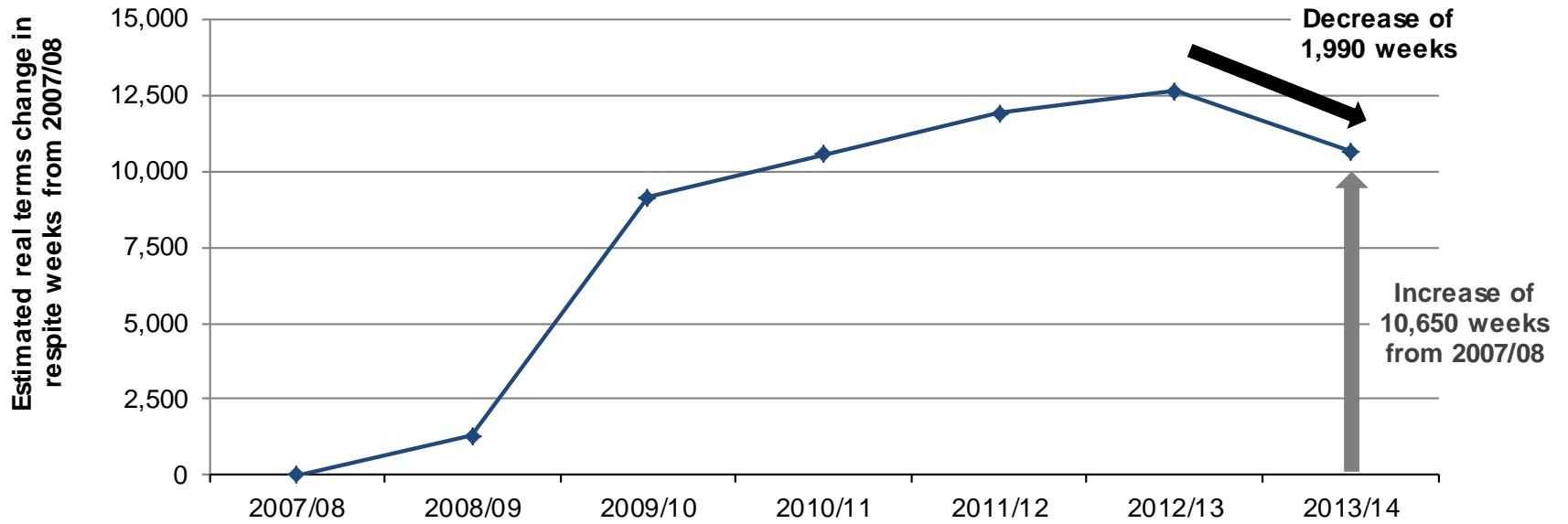
<sup>1</sup> - Same methodology used in 2008/09 & 2009/10 making the figures comparable

<sup>2</sup> - Same methodology used in 2009/10 & 2010/11 making the figures comparable

<sup>3</sup> - Same methodology used in 2010/11 - 2012/13 making the figures comparable

<sup>4</sup> - Same methodology used in 2012/13 & 2013/14 making the figures comparable, comparisons should not be made at the Local Authority level in the cases described in the Background Notes

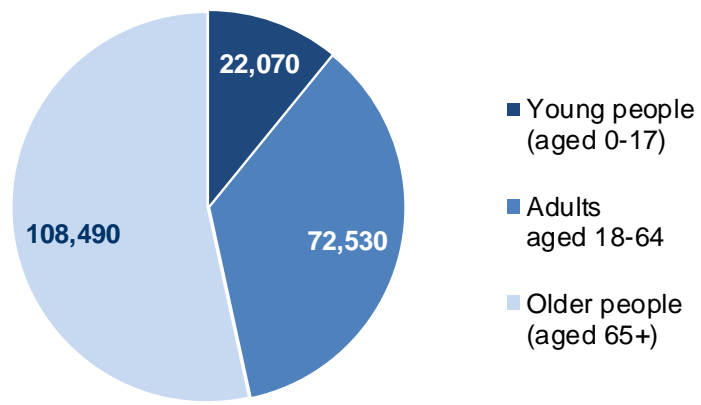
**Chart 1 - Estimated real terms change in overnight and daytime respite weeks, Scotland, 2007/08 to 2013/14**



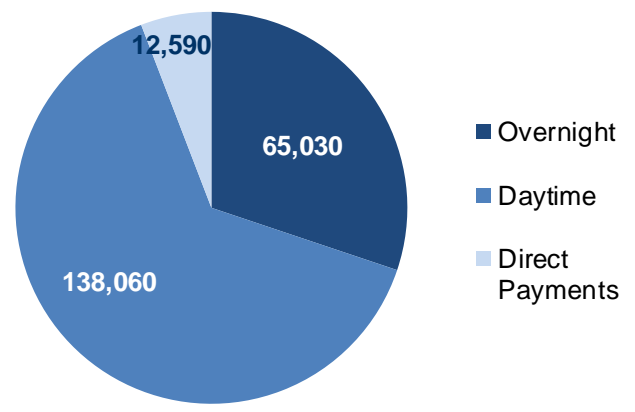
Source: Audit Scotland SPI data 2007/08 - 2008/09, Scottish Government 2009/10 - 2013/14.

Real terms changes estimated based on changes in methodology between years. See the "Presentation of statistics" tab for more information.

**Chart 2: Proportion of respite weeks (excluding Direct Payments) by cared-for age group, 2013/14**



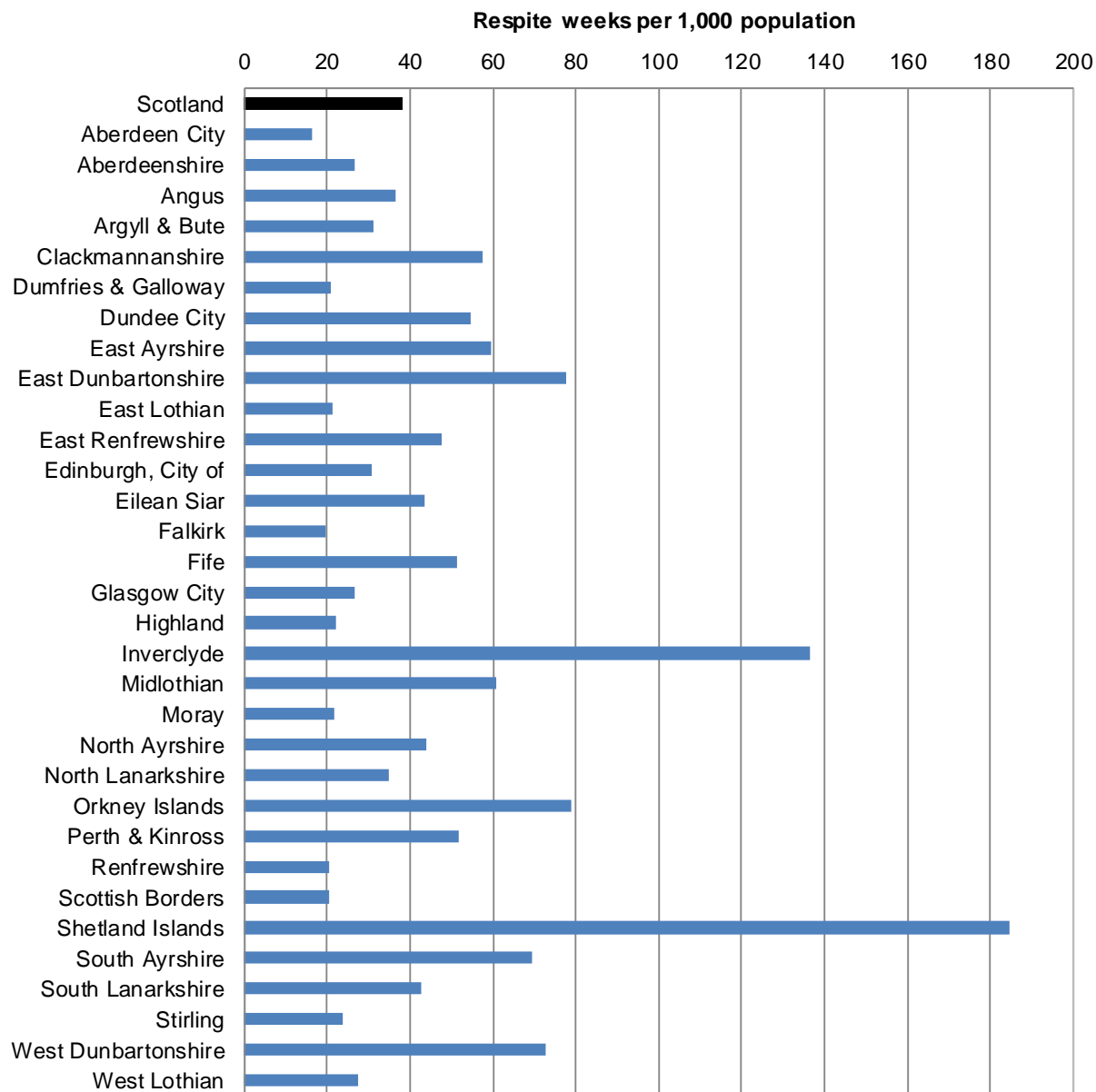
**Chart 3: Proportion of respite weeks by type of care, including Direct Payments, 2013/14**



Source: Scottish Government 2013/14.

*Note: Only 18 out of 32 Local Authorities were able to submit Direct Payment information. Of these, a further two were excluded from the Direct Payments figures in order to prevent double-counting of respite weeks. All of these factors mean that the Direct Payment figure shown on Chart 3 will be an underestimate of the true value.*

**Chart 5: Pre-capita rates of overnight and daytime respite weeks, by Local Authority, 2013/14**



Source: Scottish Government 2013/14.

Populations: National Records of Scotland, mid-year estimate 2013

Units are weeks per 1,000 population



# Issues with Respite Survey

- Respite is a reason for a service. Therefore some subjectivity in deciding whether a service is respite or not
- Self-directed Support offers new ways of looking at providing respite
- Not all respite can be converted into respite weeks e.g. greenhouse!
- Survey doesn't cover all of the respite provided in Scotland
- Survey is burdensome for LAs

# Who uses the data?

- National Carers Organisations
  - Shared Care publish and comment on it each year
  - Use it to identify areas doing well / not so well
- Local Authorities / Integration Authorities
  - What do you use it for?
- Scottish Government
  - To report on Concordat Commitment
  - Carers Strategy commits to collecting up to 2015

# Review of Respite Care Survey

- Looked at possibility of discontinuing survey in 2015
- Carried out SWOT analysis
- Discussed with LAs, NCOs and SG policy

## Option 1: To continue to collect and publish the existing Respite Survey in 2015

### Strengths

- Will provide a further year of Respite Weeks data to add to the published trend, and to be analysed in more detail by expert users (notably Shared Care)
- The ability to see at a glance the “cold spots” where local authorities are not providing as many respite weeks as other local authorities
- Carer’s Strategy says that Scottish Government will publish this information until 2015

### Weaknesses

- With introduction of SDS, we expect more councils to be unable to provide accurate data on total numbers of Respite Weeks.
- In particular, data may be unavailable for SDS clients who choose a Direct Payment or to direct the available resource.
- If data quality continues to reduce in this way then we may be unable to say with confidence whether Respite Weeks have increased or decreased in 2015.
- The burden on LAs to complete the existing survey is substantial. This burden is similar to Social Care Survey, which provides much better quality data and a published product with a much wider user community.
- The data quality issues also mean that this publication places a more substantial burden on ASD staff than would be the case if the data were consistent and comparable.
- Current publication format doesn’t include respite provided by Health Boards and / or by Voluntary Sector fund.

### Opportunities

- Some Local Authorities may be producing this data in any case, either for local use or to return to ISD as part of the Health and Social Care Data Integration & Information Project (HSCDIIP).

### Threats

- Could be subject to criticism of quality of Official Statistics / not fit for purpose.
- Data quality issues may mean that effectively communicating the key findings (especially to non-expert audiences) becomes very difficult.
- The data quality issues associated with SDS are likely to further deteriorate in 2016 and 2017 as well, such that this decision is likely to resurface each year.

## Option 2: To discontinue the existing Respite Survey in 2015 and concentrate on the development of alternative Respite data

### Strengths

- Will free up ASD time to look into alternative data sources, such as improving quality and coverage of Social Care Survey, and to get a better understanding of customer needs.
- Will free up time in Local Authorities and allow them to put more effort into getting reliable data for the Social Care Survey (this includes data on respite for SDS clients).

### Weaknesses

- Likely to be no substantive new data available for publication in 2015, such that this would need to be seen as a transition year.
- No comparable data likely to be available to continue a time series showing volume of respite care each year.

### Opportunities

- To consider strategically what data is actually needed within the evolving policy context (SDS, Carers Bill), rather than simply continuing with what is already collected.
- Opportunity to change focus away from volume of respite care (e.g. Respite Weeks) and towards more information about the people who make use of respite care, why they need respite care and who they are.
- To work with National Carers Organisations to understand their data needs and develop a new data collection on respite care.
- To look at other existing data sources in more detail – Scottish Household Survey, Scottish Health Survey and Scottish Care Homes Census have questions involving Respite care.
- To develop a new question for inclusion in next Health and Social Care Experience Survey to gather outcomes data on respite care.

### Threats

- Could be subject to criticism – stopping a data collection when it looks like concordat / manifesto commitment might no longer be met
- Carer's strategy says will publish until 2015

# Future of Respite Care Survey

- 2015-16 is final year of Respite Care Survey
- Need to consider strategically what data is actually needed within the evolving policy context (SDS, Carers Bill), rather than simply continuing with what is already collected.
- Change focus away from volume of respite care (e.g. Respite Weeks) and towards more information about the people who make use of respite care, why they need respite care and who they are.
- Work with National Carers Organisations to understand their data needs and consider whether a new data collection on respite care is needed
- Look at existing data sources in more detail – Scottish Household Survey, Scottish Health Survey and Scottish Care Homes Census have questions involving Respite care.
- Consider developing a new question for inclusion in next Health and Social Care Experience Survey to gather outcomes data on respite care.

# Existing data sources

SCHC

- SCOTTISH CARE HOMES CENSUS
- Admissions, Discharges and Deaths for respite residents in Care Homes throughout financial year

SHS

- SCOTTISH HOUSEHOLD SURVEY
- Asks if receive respite care    Asks if need respite care
- Asks what would most improve your quality of life (respite is one option)

SHeS

- SCOTTISH HEALTH SURVEY
- What kind of support, if any, do you personally receive as a carer to help with the care that you provide?

SCS

- SOCIAL CARE SURVEY
- For people who are assessed under SDS, asks if respite is reason for needing a service

HACE

- HEALTH AND CARE EXPERIENCE SURVEY
- Possibility of asking a new question referring specifically to respite

# Discussion



- Do you currently have a need for data on respite?
- What data do you use?
  - SG Respite Care publication?
  - What else?
- How can we better capture data on respite in future given that it is a SG priority to support carers.





# Summary

## CURRENT SURVEY

- Collected by SG since 2009-10
- Tells us about number of respite weeks provided or purchased by LAs in Scotland
- Challenging to collect
- Doesn't tell us about respite provided directly by third sector or by Health Boards
- Introduction of SDS has made data collection more challenging
- Burdensome on LAs
- Carers Strategy commits to collecting up to 2015

## FUTURE

- What do you want to know about respite?
- Who gets respite services and what difference does it make?
- Information collected in:
  - Scottish Health Survey
  - Scottish Household Survey
  - Scottish Care Homes Census
  - Social Care Survey
- Possibly develop new question for Health and Care Experience survey?
- Publish more than just respite weeks