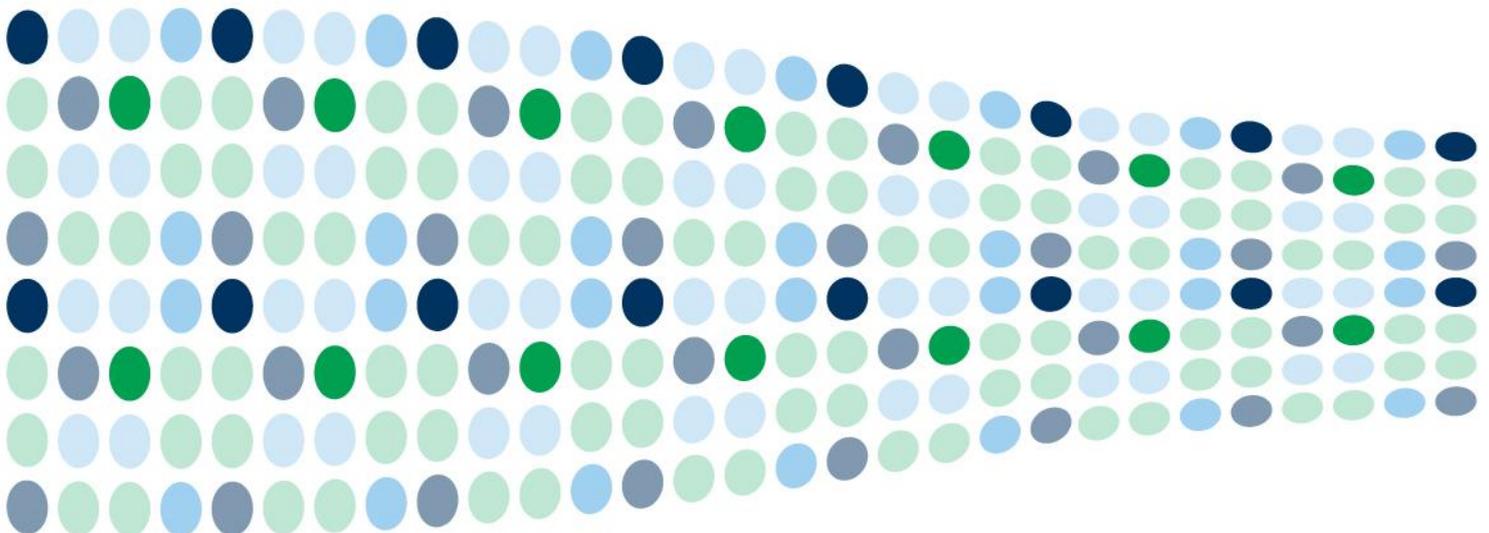




Health & Social Care
Information Centre

Focus on the health and care of older people

Data Quality Statement



Published 26 June 2014

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Focus on the health and care of older people provides a compilation of information on older people living in England to give a broad picture of their health, care and wellbeing. It will be of use to readers wanting an a better understanding of older people's use of health and social care and an introduction to the data sources that are available for further analysis.

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Introduction

This publication, Focus on the health and care of older people, June 2014, provides a compilation of information on older people living in England to give a broad picture of their health, care and wellbeing.

- It will be of use to readers wanting an a better understanding of older people's use of health and social care and an introduction to the data sources that are available for further analysis.
- Many sources of information are available nationally to provide a rich understanding on aspects of health and care of older people.
- More information on each data source is provided at the end of the main report.
- The figures reported here are for England overall. Variation exists locally.

Data in this report is taken from:

- Office for National Statistics (ONS)
 - Nomis Census 1951-2011 Census populations
 - Table 1: 2012-based Subnational Population Projections for Regions in England
 - United Kingdom, National Life Tables, 1980-82 to 2010-12
 - Disability-Free Life Expectancy (DFLE) and Life Expectancy (LE) at birth by Upper Tier Local Authority, England: 2006-08, 2007-09 and 2008-10
 - Health Survey for England - Adult trend tables 2012
 - Cancer Registration Statistics, England, 2011
 - ONS 2012 mid year population estimates
- Prescribing Units 2013
- Prescription Cost Analysis, England 2013
- Hospital Episode Statistics (HES)
- QOF - Quality Outcomes Framework (QOF)
- HSCIC Social Care RAP 2012/13 and ASC-CAR 2012/13
- Mental Health Minimum Dataset (MHMDS) 2012/13

Relevance

Focus on the health and care of older people, June 2014 aims to help inform the debate on the health and care of older people by bringing together a broad range of statistical data and analyses. This publication is considered to be of particular interest to members of the public and healthcare professionals.

The HSCIC is keen to gain a better understanding of the users of this publication and of their needs; feedback is welcome and may be sent to enquires@hscic.gov.uk (please include 'Focus on' in the subject line).

Accuracy

This report compiles data from a variety of sources, each published separately. Details are provided below on where detailed information on the key sources can be found. Links to all sources are provided in the publication itself.

Office for National Statistics (ONS)

The Office for National Statistics (ONS) is the UK's national statistical institute and the largest producer of official statistics in the UK. It is the only government department with the production of statistics as its main role. ONS is independent of ministers and instead reports through the UK Statistics Authority to Parliament and the devolved administrations of Scotland, Wales and Northern Ireland.

ONS is the executive office of the UK Statistics Authority and although they are separate, they are still closely related. The Statistics and Registration Service Act 2007 sets the Statistics Authority the objective of promoting and safeguarding the production and publication of official statistics which serve the public good. This includes, but is not exclusive to, the needs of government.

As the executive office of the Statistics Authority our main responsibilities are:

The collection, compilation, analysis and dissemination of a range of key economic, social and demographic statistics about the UK

The provision of statistical leadership and methodological advice for the benefit of UK official statistics

Representation of the UK internationally as the national statistical institute

These responsibilities span more than 650 different statistical releases a year which rely on a broad range of methods and systems. All outputs are produced in line with the 'Code of Practice for Official Statistics' and relevant quality standards. This is carried out to align with the Statistics Authority's responsibility to promote and safeguard official statistics.

Data from the ONS used in this publication includes:

Nomis Census 1951-2011 Census populations

Table 1: 2012-based Subnational Population Projections for Regions in England

United Kingdom, National Life Tables, 1980-82 to 2010-12

Disability-Free Life Expectancy (DFLE) and Life Expectancy (LE) at birth by Upper Tier Local Authority, England: 2006-08, 2007-09 and 2008-10

Health Survey for England - Adult trend tables 2012

Cancer Registration Statistics, England, 2011

ONS 2012 mid year population estimates

Prescribing Units 2013

Traditionally, prescribing has been measured using the number of items prescribed and the cost of these drugs. This is used to compare drug utilisation between NHS organisations and practices, and to look at historic trends. Data on the patient list size for each practice is also available and allows three ratios of prescribing to be commonly used:

items per patient

cost per patient

cost per item

Additional measures of volume (rather than the number of items) and patient denominators (weighted to take account of the differing needs of patients) have been developed. These are used in reports and information systems produced by NHS Prescription Services.

These measures can be used to develop indicators and comparators that help organisations to monitor prescribing and compare themselves with other organisations.

Prescription Cost Analysis, England 2013

Prescription Cost Analysis (PCA) provides details of the number of items and the net ingredient cost of all prescriptions dispensed in the community in England. The drugs dispensed are listed by British National Formulary (BNF) therapeutic class.

ICD-10 Version:2010

The International Classification of Diseases (ICD) is the standard diagnostic tool for epidemiology, health management and clinical purposes. This includes the analysis of the general health situation of population groups. It is used to monitor the incidence and prevalence of diseases and other health problems.

It is used to classify diseases and other health problems recorded on many types of health and vital records including death certificates and health records. In addition to enabling the storage and retrieval of diagnostic information for clinical, epidemiological and quality purposes, these records also provide the basis for the compilation of national mortality and morbidity statistics by WHO Member States. It is used for reimbursement and resource allocation decision-making by countries

Hospital Episode Statistics (HES)

HES is a data warehouse containing details of all admissions, outpatient appointments and A&E attendances at NHS hospitals in England.

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This data is collected during a patient's time at hospital and is submitted to allow hospitals to be paid for the care they deliver. HES data is designed to enable secondary use, that is use for non-clinical purposes, of this administrative data.

It is a records-based system that covers all NHS trusts in England, including acute hospitals, primary care trusts and mental health trusts. HES information is stored as a large collection of separate records - one for each period of care - in a secure data warehouse.

We apply a strict statistical disclosure control in accordance with the HES protocol, to all published HES data. This suppresses small numbers to stop people identifying themselves and others, to ensure that patient confidentiality is maintained.

QOF - Quality Outcomes Framework (QOF)

The Quality and Outcomes Framework (QOF) is a voluntary annual reward and incentive programme for all GP surgeries in England, detailing practice achievement results. It is not about performance management, but resourcing and then rewarding good practice.

To report the latest annual QOF points, The Health and Social Care Information Centre (HSCIC) has developed this online database to allow patients and public easy access to this useful data that indicates how well their surgery is doing. The HSCIC is working to make information more relevant and accessible to the public, regulators, health and social care professionals and policy makers, leading to improvements in knowledge and efficiency.

HSCIC Social Care RAP 2012/13 ASC-CAR 2012/13

Referrals, Assessments and Packages of Care return (RAP) and the Adult Social Care Combined Activity return (ASC-CAR) report on the social care activity of Councils with Adult Social Services Responsibilities (CASSRs) in England. They contain information taken from council administrative systems used to record the process of assessing eligibility to state-funded social care and providing services where people are eligible.

Mental Health Minimum Dataset (MHMDS) 2012/13

This annual report relates to data extracted from Mental Health Minimum Data Set (MHMDS) for activity undertaken within the financial year 2012-13.

The publication for 2012-13 was produced from a single file compiled by the Health and Social Care Information Centre (HSCIC) from the quarterly submissions (2012-13 data). This uses a new, centrally derived, unique Spell ID to link patient spells across these quarters.

Health Survey for England

The Health Survey for England provides an annual snapshot of the health of the nation and tracks changes over time. The 2012 survey is the twenty second edition.

All editions of the survey have covered the adult population aged 16 and over living in private households in England. Since 1995, the surveys have also included children aged 2-15 and since 2001, infants aged under 2. Interviews were held in 5,219 households with 8,291 adults aged 16 and over, and 2,043 children aged 0-15. 5,470 adults and 1,203 children had a nurse visit.

In some years, the core sample has been augmented by an additional boosted sample from specific population subgroups, such as minority ethnic groups, older people or children; there was no boost in 2012.

Timeliness and Punctuality

The timeliness of the data presented in this publication varies between the sources used.

Data is presented for the year up to the end of March 2013 where available. Where this is not available time period is stated.

Hospital and Community Health Services (HCHS) Staffing data is for 30 September each year.

Accessibility and Clarity

This publication is being made available on the world-wide-web as a combination of web pages and downloadable reports and data files. The publication may be requested in large print or other formats through the HSCIC's contact centre: enquiries@hscic.gov.uk.

This report draws together data from a range of sources. It is clearly labelled throughout the publication which data is used for each chart and table. Data source are provided on each relevant page and a summary of sources is provided at the end of the report.

Comparability and Coherence

As different data sources are used in this report there is some disparity between their coverage and definitions.

Patient counts in Hospital Episode Statistics (HES) are based on the unique patient identifier, HESID. This identifier is derived from a patient's date of birth, postcode, sex, local patient identifier and NHS number, using a standard algorithm. Where data are incomplete, HESID might wrongly link episodes or fail to recognise episodes for the same patient. Care is therefore needed, especially where the data includes duplicate records. Patient counts must not be summed across a table where patients may have episodes in more than one cell. [Read about the HES ID and its methodology.](#)

Quality and Outcomes Framework (QOF) 2012/13 recorded 319,000 dementia cases from 8,020 practices with a list size of 56.0 million giving an overall prevalence of diagnosed dementia of one in 176 registered patients (0.57 per cent).

This prevalence measure is lower than other available estimates of prevalence. The QOF rate represents only those with diagnosed dementia on a GP practice register.

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

For further information

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