

INFORMATION
ANALYSIS
DIRECTORATE



Quarterly Carers' Statistics for Northern Ireland

(January - March 2016)

Reader Information

Theme	Social Care – Carers’ Statistics
Document Purpose	For information
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Publication Date	9 th June 2016
Issued by	Community Information Branch Information & Analysis Directorate Department of Health Stormont Estate Belfast, BT4 3SQ Email cib@health-ni.gov.uk
Internet address	https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research-social-services/social-care-statistics
Target Audience	Social Services Directors, Chief Executives of HSC Board and Trusts in Northern Ireland, health care professionals, academics and social care stakeholders.
Main uses of document	The main uses of these data are to monitor a Commissioning Plan Direction target, to assess HSC Trust performance, to inform and monitor related policy and to respond to ad-hoc queries and parliamentary/ assembly questions. The bulletin is also used by academics/ researchers, the voluntary sector and those with an interest in carers.
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Price	Free

About Us



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



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

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

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

This publication is produced by Community Information Branch.

Our Vision and Values

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

About Community Information Branch

The purpose of Community Information Branch (CIB) is to promote effective decision making in children and adult social services by providing quality information and analysis.

We collect, analyse, and publish a wide range of community information that is used to help monitor the delivery of personal social services policy. Information collected by CIB is used to assess HSC Trust performance, for corporate monitoring, policy evaluation, and to respond to parliamentary/assembly questions.

Information is widely disseminated through a number of regular key statistical publications and ad hoc reports, details of which are available online.

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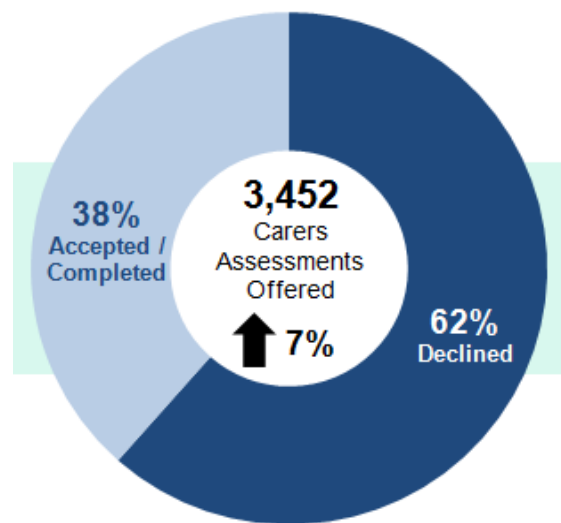
1. Key Findings

“Quarterly Carers’ Statistics for Northern Ireland” presents figures regionally and by Health and Social Care Trust in respect of carers’ assessments and reassessments that are offered, accepted / completed and declined; and are available by the client group of the person being cared for.

Quarter ending 31 March 2016:

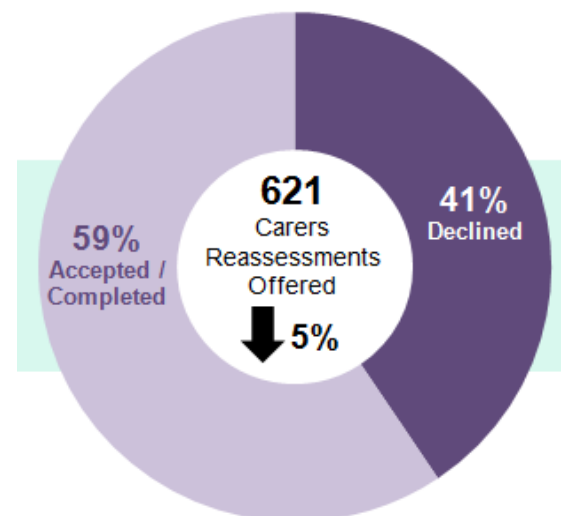
Carers Assessments

- A carer’s assessment was offered to 3,452 carers in Northern Ireland during the quarter ending 31 March 2016. This represented an increase of 7% (240) from the quarter ending 31 December 2015 (3,212) and an increase of 12% (376) from the same quarter last year (3,076).
- Of the 3,452 carers’ assessments offered, 38% (1,328) were accepted / completed and 62% (2,124) were declined.
- Those carers caring for someone in the Older People client group were more likely to decline an offer of an assessment, whereas those caring for children (excluding CAMHS), as well as those caring for clients with a physical or learning disability, were more likely to accept the offer of an assessment.



Carers Reassessments

- A carer’s reassessment was offered to 621 carers in Northern Ireland during the quarter ending 31 March 2016. This represented a decrease of 5% (35) from the quarter ending 31 December 2015 (656) and an increase of 22% (113) from the same quarter last year (508).
- Of the 621 carers’ reassessments offered, 59% (369) were accepted / completed and 41% (252) were declined.



2. Introduction

Carers are people who, without payment, provide help and support to a family member or a friend who may not be able to manage without this help because of frailty, illness or disability. Carers can be adults caring for other adults, parents caring for ill or disabled children or young people who care for another family member and are a vital part of the DoH's vision of providing support for people to live more independent lives and helping people remain in their own homes and live independently for longer.

In recognition of the need to support carers in their caring role and their need to have access to a social life, educational, training and employment opportunities, a carers' strategy, "[Caring for Carers](#)", was developed. The strategy, published in January 2006, was inter-departmental and inter-agency, dealing with health and personal social services, employment, training, education, availability of information and support services.

Carers may need support to allow them to continue in their caring role and to ensure their own health and well-being does not suffer as a result. They have a right to a life outside caring. All carers are individuals and, as such, present varying needs. Proper **assessment** is the first step to accessing services and it is vitally important that carers are offered the opportunity to discuss their own needs and be considered for services in their own right.

The [Carers and Direct Payments Act \(Northern Ireland\) 2002](#) imposed a statutory duty on Health and Social Care Trusts to inform carers of their right to an assessment and to be considered for services to meet their own needs. The Carers' Assessment looks at each carer as an individual with their own personal circumstances, and will identify any particular needs they may have as a result. It is important that the needs of individual carers are properly understood and that service providers are prepared to respond with flexibility, offering carers real choice as to how their needs will be met. The "Carers Support and Needs Assessment" component of the [Northern Ireland Single Assessment Tool \(NISAT\)](#) is used for assessing the needs of carers in all programmes of care, thus ensuring a standardised approach to assessment regardless of the location of the carer in Northern Ireland.

This bulletin presents, for the **quarter ending 31 March 2016**, statistics relating to the numbers of carers' assessments offered, completed and declined, the main reasons why carers declined offers to be assessed as well as carers' reassessments offered, completed and declined. Analyses are presented both regionally and across Health and Social Care Trusts in Northern Ireland.

Detailed definitions are available in [Appendix B](#) of this report.

3. Carers Assessments

*A **Carers Assessment** is carried out to determine the support needs of the person in commencing or sustaining their caring role; or in addressing the risks to the sustainability of that caring role; or the risks to the carer's own health and wellbeing.*

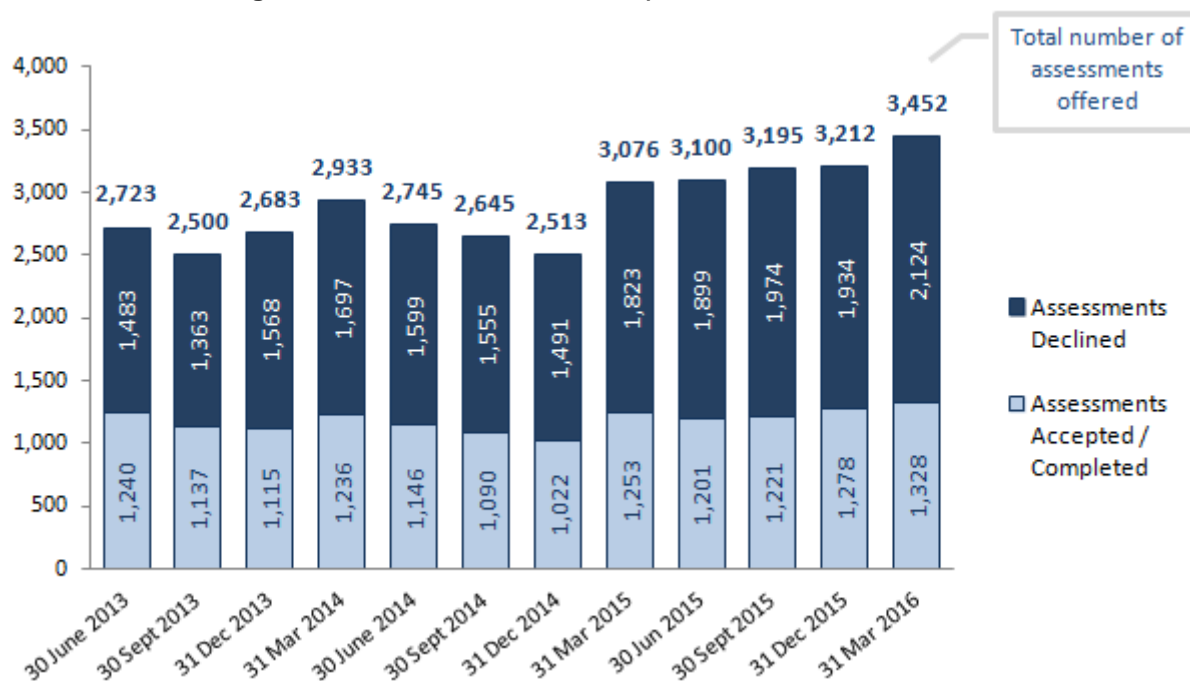
During quarter ending 31 March 2016, a carer's assessment was offered to 3,452 carers in Northern Ireland. This was an increase of 7% (240) from the previous quarter (3,212), and an increase of 12% (376) from the same quarter last year (3,076).¹

Of the 3,452 carers' assessments offered, 38% (1,328) were accepted / completed and 62% (2,124) were declined (Figure 1).

The 1,328 carers' assessments which were accepted / completed represented an increase of 4% (50) from the previous quarter and an increase of 6% (75) from the same quarter last year (1,253).

The 2,124 carers' assessments which were declined represented an increase of 10% (190) from the previous quarter (1,934) and an increase of 17% (301) from the same quarter last year (1,823) (Figure 1). The number of declined carers' assessments has consistently been higher than the number of completed carers' assessments ([Table 1](#)).

Figure 1 Carers Assessments Offered, Accepted / Completed and Declined (quarter ending 30 June 2013 - 31 March 2016)



Note: Information prior to 31st March 2015 was sourced from the CA1 and CA1b community information returns.

¹ All figures presented can be found in table format in [Appendix C](#) of this report and in excel format on the Department of Health Northern Ireland website <https://www.health-ni.gov.uk/articles/carers-assessments-and-reassessments>

Carers Assessments by HSC Trust

The number of carers' assessments offered in the Western HSC Trust was substantially lower than in the other HSC Trusts (9% of the total number)(Figure 2). This has been the trend since the quarter ending 31 March 2015 ([Table 2](#)).

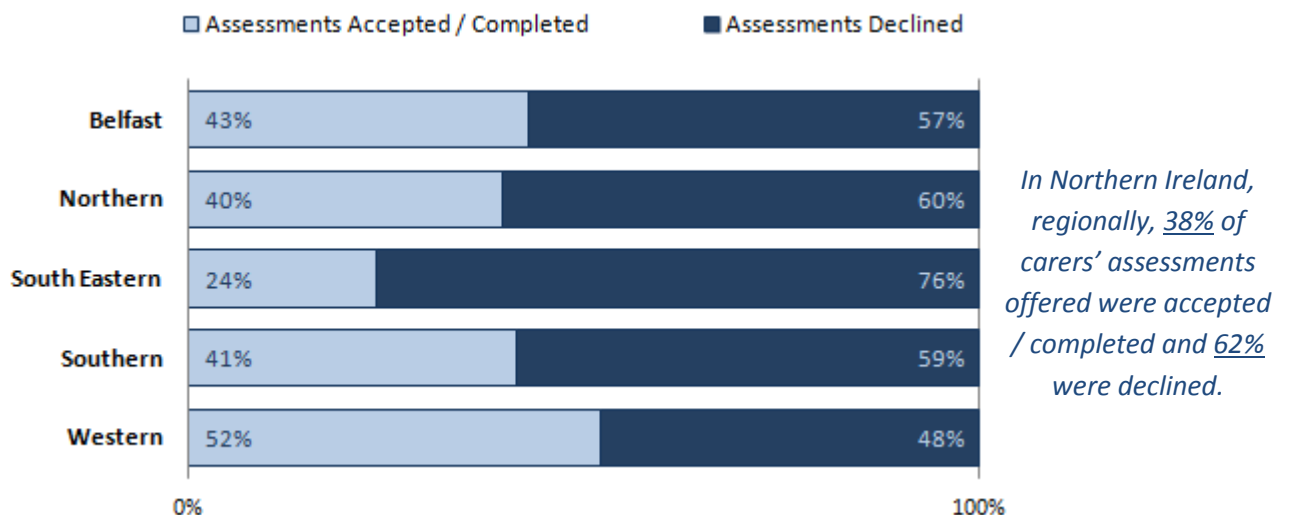
During quarter ending 31 March 2016, the Southern, Western and Belfast HSC Trusts increased the number of carers' assessments offered when compared to the previous quarter by 34%, 29% and 13% respectively. The Northern HSC Trust had a decrease of 19% in the number of carers' assessments offered when compared to the previous quarter, with the South Eastern HSC Trust offering a similar number to that of the previous quarter.

Figure 2 Number of Carers Assessments Offered by HSC Trust (quarter ending 31 March 2016)

Number of Carers Assessments Offered by HSC Trust				
Belfast	Northern	South Eastern	Southern	Western
805	626	778	926	317

Each HSC Trust had more offers of carers' assessments declined than accepted / completed with the exception of the Western HSC Trust who had 52% of offers accepted / completed. The percentage of carers' assessments declined ranged from 76% in the South Eastern HSC Trust to 48% in the Western HSC Trust (Figure 3) ([Table 3](#)).

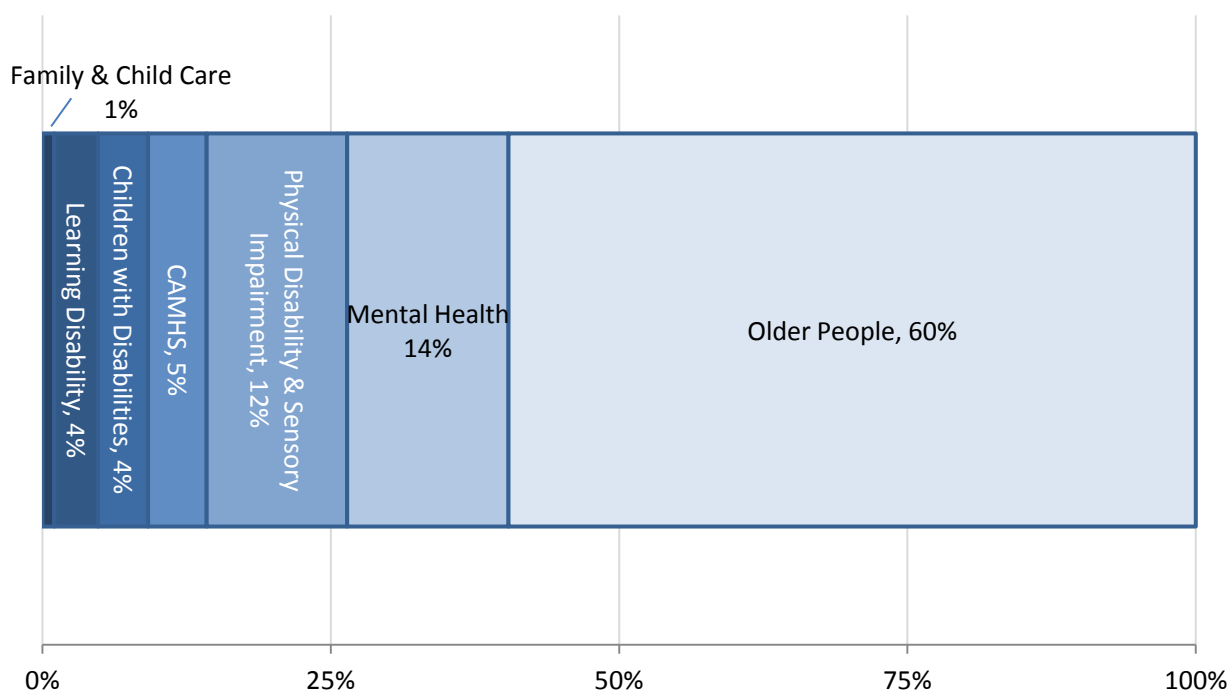
Figure 3 Proportion of Carers Assessments Accepted / Completed and Declined by HSC Trust (quarter ending 31 March 2016)



Client Group

Regionally across Northern Ireland, three fifths (60%) of carers who had been offered an assessment during the quarter ending 31 March 2016 were caring for someone in the Older People client group². Carers caring for someone in the Mental Health client group accounted for 14% of assessment offers; 12% of those offered an assessment were caring for someone in the Physical Disability and Sensory Impairment client group; 5% in the Child and Adolescent Mental Health Service (CAMHS) client group and 4% each in the Children with Disabilities and Learning Disability client groups. The client group with the least offers of a carers' assessment was Family and Child Care (1%). Less than 1% of offers were for other unspecified client groups (Figure 4) ([Table 4](#)).

Figure 4 Proportion of Carers Assessments Offered by Client Group (of Cared for Person) (quarter ending 31 March 2016)

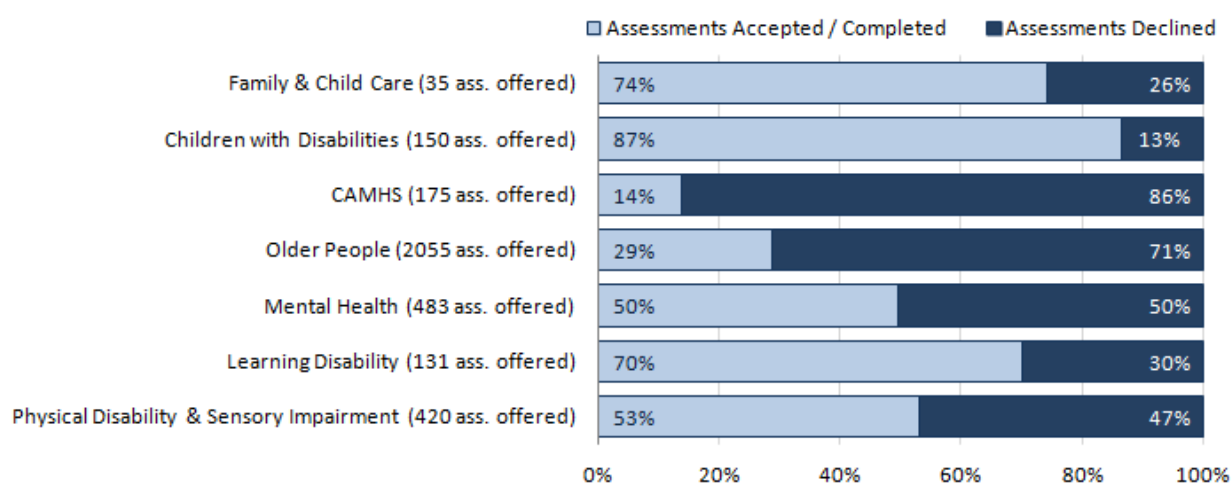


² A list of client groups and associated definitions can be found in [Appendix B](#) of this report.

Across Northern Ireland, 87% of those carers caring for someone in the Children with Disabilities client group who were offered a carer’s assessment accepted or completed an assessment. Other client groups with a higher proportion of carers accepting or completing an offer of assessment than declining were those in the Family and Child Care (74% accepted / completed), Learning Disability (70% accepted / completed) and Physical Disability & Sensory Impairment (53% accepted / completed) groups.

Those carers caring for someone in the Older People and CAMHS client groups were more likely to decline an offer of assessment. An even percentage of people accepted / completed as declined an offer of an assessment in the Mental Health client group (Figure 5).

Figure 5 Proportion of Carers Assessments Accepted / Completed and Declined by Client group (quarter ending 31 March 2016)



Reasons for Declining a Carers Assessment

Many carers will be caring for someone who is already in receipt of community care services and are supported by existing care packages that are in place. An offer of a carer's assessment is to help identify those carers who require more support and to recognise carers as an individual with needs in their own right.

During the quarter ending 31 March 2016, the most frequent reason for declining an offer of a carer's assessment was that the carer feels that they do not need any support or additional support. This was the reason stated by 35% (746) of carers. Carers who felt that the time / place / environment offered was unsuitable but would like the opportunity to consider an assessment at a later date, accounted for 27% (566) of those declined.

Carers declining an offer of assessment for the reason that they felt that an assessment would be too complicated or time consuming accounted for 2% (45) of all those that were declined. Less than 1% (6) of those who declined an offer of assessment did so as they were concerned about the impact on their benefits / income (Figure 6) ([Table 5](#)).

35%
of carers who declined an offer of an assessment feel that they **do not need any support or additional support.**

Figure 6 Reasons given for declining a Carers Assessment (quarter ending 31 March 2016)

<i>The carer feels that they do not need any support / additional support</i>	35%
<i>The carer felt that time / place / environment offered was unsuitable but would like the opportunity to consider an assessment at a later date</i>	27%
<i>The carer would not give a reason / No reason recorded</i>	15%
<i>The carer does not see themselves as a carer and therefore does not see assessment as relevant</i>	12%
<i>The carer sees their caring duties as a private matter which they prefer not to discuss</i>	5%
<i>The carer feels that an assessment would not result in additional support / service</i>	3%
<i>The carer feels that assessment would be too complicated or time consuming</i>	2%
<i>The carer was concerned about the impact on their benefits / income</i>	<1%

4. Carers Reassessments

A **Carers Reassessment** is required when a carer's circumstances change resulting in a change in their level of need. For example, this could be additional family commitments, changes in their work pattern, or varying physical or mental health. The Reassessment can be either a complete rework of the original Carers Assessment or an amendment to aspects of it.

During the quarter ending 31 March 2016, 621 carers' reassessments were offered to carers in Northern Ireland. This was a 5% (35) decrease on the previous quarter (656) and an increase of 22% (113) from the same quarter last year (508).³

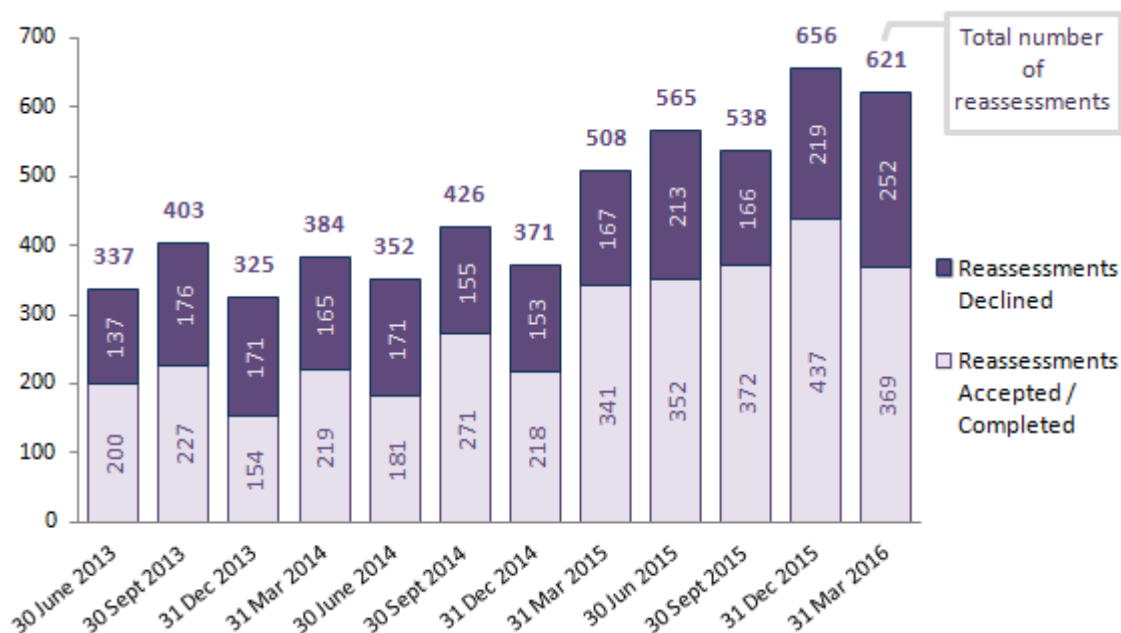
Figure 7 presents information on carers' reassessments since quarter ending 30 June 2013. Although the quarterly numbers of reassessments have been quite variable, Figure 7 shows an increasing trend in the number of reassessments offered since 2013 with a greater proportion being accepted / completed.

Of the 621 carers' reassessments offered in the latest quarter, 59% (369) were accepted / completed and 41% (252) were declined ([Table 6](#)).

The 369 carers' reassessments which were accepted / completed represented a decrease of 16% (68) from the previous quarter (437) and an increase of 8% (28) from the same quarter last year (352).

The 252 carers' reassessments which were declined represented an increase of 15% (33) on the previous quarter (219) and an increase of 51% (85) from the same quarter last year (167).

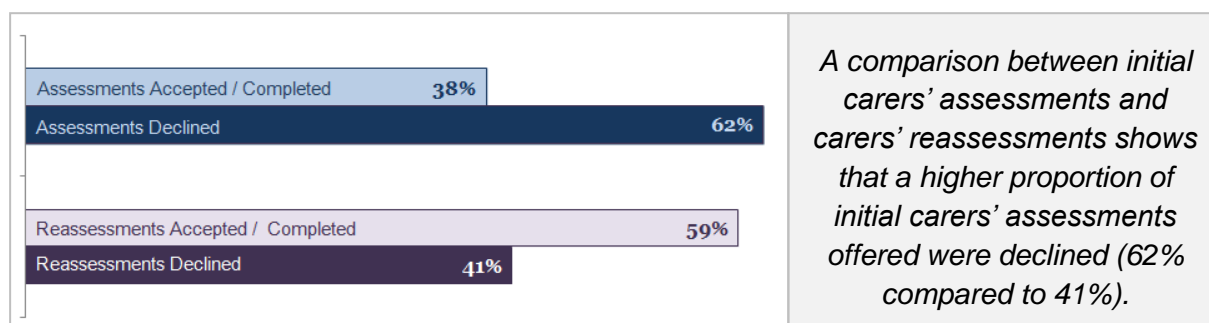
Figure 7 Carers Reassessments Offered, Accepted / Completed and Declined (quarters ending 30 June 2013 - 31 March 2016)



Note: Information prior to 31st March 2015 was sourced from the CA1 and CA1b community information returns.

³ All figures presented can be found in table format in [Appendix C](#) of this report and in excel format on the Department of Health Northern Ireland website <https://www.health-ni.gov.uk/articles/carers-assessments-and-reassessments>

Figure 8 Proportion of Carers Assessments and Carers Reassessments Accepted / Completed and Declined (quarter ending 31 March 2016)



Carers Reassessments by HSC Trust

Of all carers' reassessments offered in Northern Ireland, the Belfast and Northern HSC Trusts offered the most at 201 each (32%), while the Western HSC Trust offered the least at 16 (3%) (Figure 9) ([Table 7](#)).

Figure 9 Number of Carers Reassessments Offered by HSC Trust (quarter ending 31 March 2016)

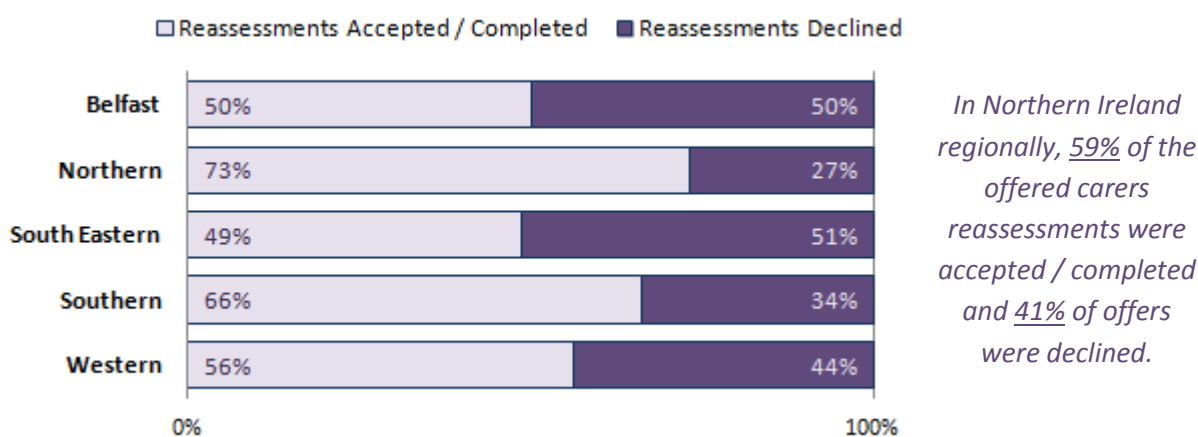
Number of Carers Reassessments Offered by HSC Trust				
Belfast	Northern	South Eastern	Southern	Western
201	201	129	74	16

During quarter ending 31 March 2016, only the Belfast and Southern HSC Trusts increased the number of carers' reassessments offered when compared to the previous quarter. The Western, South Eastern and Northern HSC Trusts all offered less carers' reassessments when compared to the previous quarter, by 78%, 23% and 5% respectively. It is worth noting however that carer reassessment figures may be relatively small and quarter on quarter comparisons can be somewhat volatile.

The Northern HSC Trust had the highest number of accepted / completed carers' reassessments (147) while the Western HSC Trust had the fewest (9). The Belfast HSC Trust had the highest number of declined carers' reassessments (100) while the Western HSC Trust had the fewest (7) ([Table 8](#) & [Table 9](#)).

During quarter ending 31 March 2016 all HSC Trusts, with the exception of the Belfast and South Eastern HSC Trusts, had more reassessments accepted / completed than declined. This ranged from 73% accepted / completed in the Northern HSC Trust to 56% accepted / completed in the Western HSC Trust. In the South Eastern HSC Trust, 49% of reassessment offers were accepted / completed; while an even proportion of offers were accepted / completed as declined in the Belfast HSC Trust (Figure 10).

Figure 10 Proportion of Carers Reassessments Completed and Declined by HSC Trust (quarter ending 31 March 2016)



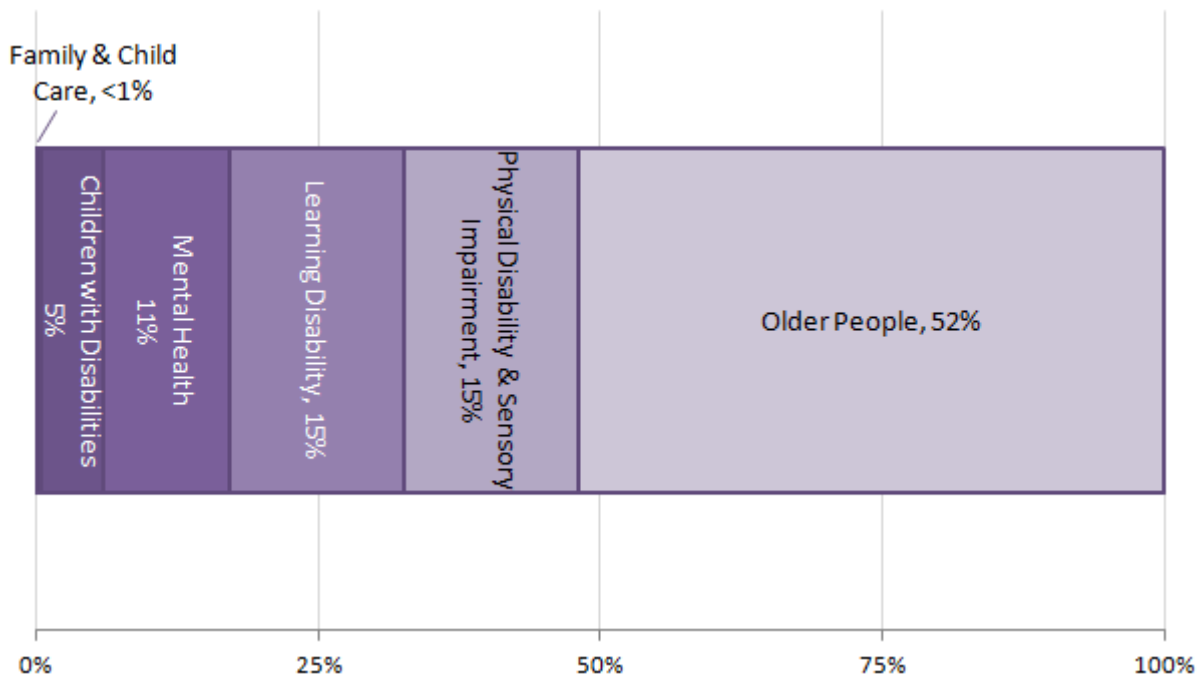
Client Group

Across Northern Ireland, during the quarter ending 31 March 2016, the majority (52%) of carers who were offered a carer's reassessment were caring for someone in the Older People client group.

Reassessment offers to carers caring for someone in the Learning Disability and Physical Disability & Sensory Impairment client groups accounted for 15% each.

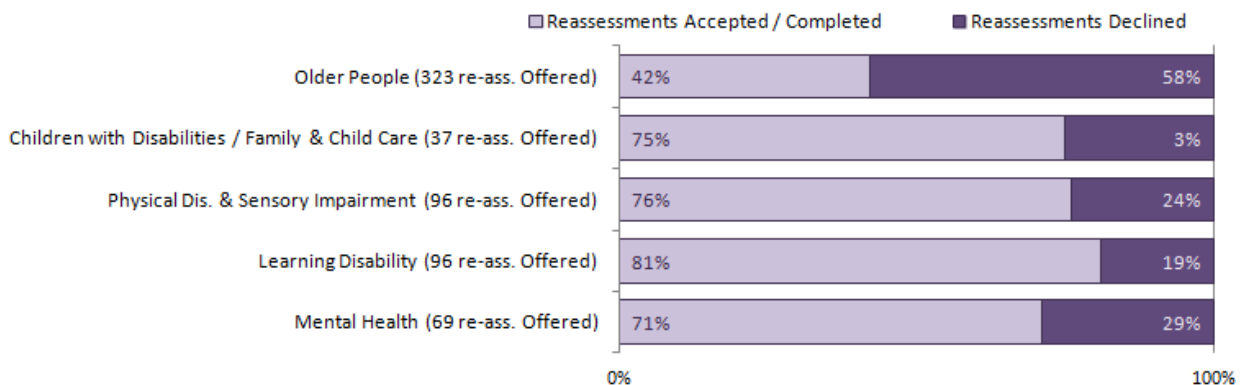
The least offers of a carer's reassessment were made to those carers who care for someone in the Family and Child Care (<1%) client group. No offers of a carer's reassessment were made to carers caring for someone in the CAMHS client group during this quarter (Figure 11) ([Table 7](#)).

Figure 11 Proportion of Carers Reassessments Offered by Client Group (of Cared for Person) (quarter ending 31 March 2016)



Across Northern Ireland, and across all client groups except Older People, carers were more likely to accept / complete an offer of a reassessment than decline. Carers caring for someone in the Older People client group were the more likely to decline an offer of a reassessment with 58% of offers being declined (Figure 12) (Table 8).

Figure 12 Proportion of Carers Reassessments Accepted / Completed and Declined by Client Group (quarter ending 31 March 2016)⁴



Note: The analysis of client groups related to reassessments may be based on low numbers which can add volatility of the figures.

⁴ The client groups Family & Child Care and Children with Disabilities have been merged to avoid possibility of personal disclosure.

Reasons for Declining a Carers Reassessment

During the quarter ending 31 March 2016, the majority of carers who declined an offer of a carers' reassessment felt that they did not need any additional support (37%). Regionally, for 16% of carers declining an offer of a reassessment, no reason was given or recorded (Figure 13).

The least frequent reason for declining a carers' reassessment during the quarter ending 31 March 2016 was that the carer found previous assessments / reassessments too time consuming (2%) ([Table 10](#)).

Figure 13 Reasons Given for Declining a Carers Reassessment (quarter ending 31 March 2016)

<i>The carer feels that they do not need any additional support</i>	37%
<i>The carer feels that the reassessment would not result in additional support</i>	22%
<i>The carer would not give a reason / No reason recorded</i>	16%
<i>The carer felt that time / place / environment offered was unsuitable but would like the opportunity to consider a reassessment at a later date</i>	14%
<i>The carer sees their caring duties as a private matter which they prefer not to discuss</i>	5%
<i>The carer did not feel previous assessments / reassessments had been beneficial</i>	5%
<i>The carer found previous assessments / reassessments too time consuming</i>	2%

Health Survey Northern Ireland 2014/15

The Health Survey Northern Ireland is carried out annually by the Department of Health and captures a wide range of health issues. It also includes questions on people caring for someone sick, disabled or elderly.

Of those respondents (over the age of 16) who were caring for someone sick, disabled or elderly, **50%** were spending **20 hours or more** per week on their caring duties.

Of those who provided care for someone, **70%** were female and **30%** were male.

Of those respondents who were caring for someone sick, disabled or elderly, more than **three fifths** (62%) listed their marital status as married.

Source: *Northern Ireland Health Survey 2014/15*

Appendix A: Technical Notes

Carers assessment publication

This statistical bulletin was first published 10 February 2012 under the name “Carers’ Statistics for Northern Ireland (quarter ending 30 June 2011)”. The name of the bulletin has since changed to “Quarterly Carers’ Statistics for Northern Ireland”.

Data Collection

From quarter ending 31st March 2015, the CA1 and CA1b community information returns covering data on carers’ assessments were discontinued and replaced with a new Adult Carers Assessment return. The new return has revised and combined information needs from both DoH and HSCB. This streamlining of information collection has caused some information published not to be directly comparable to outputs in previous quarters.

The new Adult Carers Assessment return template is detailed in Appendix D and is also available with associated guidance notes on the DoH [website](#). The CA1 and CA1b information return templates are available on request from CIB.

The changes to the data collection following the change of source of data are set out below:

- Figures on carer’s reviews are no longer collected.
- Figures are now collected by client group compared to the previous programmes of care (client group separates out children with disability as well as child and adolescent mental health services).
- All figures collected are available by client group (previous figures on programme of care were available for completed carers’ assessments only).
- There have been amendments to the definitions for those reasons provided for declining a carer’s assessment or reassessment.
- The age group of the carer is no longer collected. This information is however collected annually by the HSCB through the Delegated Statutory Functions returns.

All information referring to quarter ending 31st March 2015 and subsequent quarters use the new carers return as source, whereas quarters prior to this derive from the quarterly CA1 and CA1b community information returns.

Data Quality

The Adult Carers Assessment returns are validated and quality assured by HSC Trusts senior management before being submitted to the HSC Board. Further validations and consistency checks are carried out by the HSCB before being shared with statisticians in CIB. Statisticians will use historical and/or other independent data to monitor emerging trends and variations within and between Trusts in order to query any discrepancies.

Statement of Administrative Sources

A detailed 'Statement of Administrative Sources' is available on the DoH [website](#).

Rounding Conventions

Percentages have been rounded to whole numbers and as a consequence some percentages may not sum to 100.

Disclosure Conventions

The information presented in this publication has been assessed for the risk of disclosure. To prevent disclosure of the identity of individual carers, it may be necessary to suppress the values of cells with low counts and those which could otherwise be derived by means of simple arithmetic.

In some instances low counts will not be suppressed as the risk of sensitive personal data being disclosed is considered low against the benefit of such figures being available. Further detail can be found in the Government Statistical Service's (GSS) guidance on [disclosure control](#) for tables produced from administrative sources and the [Anonymisation Standard for Publishing Health and Social Care Data](#).

Our policy statement on confidentiality and security is contained within the DoH Statistics Charter and is available on our [website](#).

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.

Our policy statement on revisions and errors is contained within the DoH Statistics Charter and is available on our [website](#).

Related Publications

This publication can be downloaded from the DoH website at:

<https://www.health-ni.gov.uk/articles/carers%E2%80%99-assessments-and-reassessments>

Other statistical information relating to social care can be found at:

<https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research-social-services/social-care-statistics>

Health Survey Northern Ireland: <https://www.health-ni.gov.uk/articles/health-survey-northern-ireland>

Data for the UK

The statistics detailed in this report relate to Northern Ireland only. Similar information for England, Scotland and Wales may be found as detailed below.

England

Survey of Carers' in Households – 2009/10 England

www.ic.nhs.uk/pubs/carersurvey0910

Personal Social Services Survey of Adult Carers' in England – 2009/10

www.ic.nhs.uk/pubs/psscscarersurvey0910

Community Care Statistics: Social Services Activity, England 2014-15

<https://www.gov.uk/government/statistics/community-care-statistics-social-services-activity-england-2014-15>

Wales

Welsh Health Survey 2011: Health of carers

<http://wales.gov.uk/statistics-and-research/welsh-health-survey/?lang=en#/statistics-and-research/welsh-health-survey/?tab=previous&lang=en>

Scotland

Information about Carers' Statistics in Scotland can be found at the following link:

<http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/Data/Carers>

Official Statistics

These are 'Official Statistics' as defined in Section 6 of the [Statistics and Registration Services Act 2007](#). They were produced by CIB within the DoH.

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.

Future Statistical Release

The next statistical release from CIB in relation to carers' information is due for publication on 8th September 2016.

Upcoming releases for all social care statistics produced by CIB can be found on the IAD Publications Calendar at:

<https://www.health-ni.gov.uk/publications/statistical-releases-calendar>

Appendix B: Definitions

Carers and Direct Payments (Northern Ireland) Act 2002

The [Carers and Direct Payments Act \(Northern Ireland\) 2002](#) came into effect on 2 May 2002. This Act gives carers the right to a separate assessment of their needs and places an obligation on HSC Trusts to identify and provide information to carers. All carers providing or intending to provide care on a regular and substantial basis therefore have a legal right to have their needs assessed. The results of a carer's assessment should be recorded separately from that of the person cared for.

A Carer

A carer is someone who provides or intends to provide a **substantial** amount of care on a regular basis. The term 'carer' includes a person who may or may not be a relative and who may or may not be living with the person for whom they are caring. A carer provides help and support to someone, such as a family member, friend or neighbour, who may not be able to manage at home without this help because of frailty, illness or disability. A carer can be an adult caring for another adult, parents caring for ill or disabled children or young people of 16 or 17 years of age who care for someone.

It does not include someone who is providing care by virtue of a contract of employment, a volunteer working on behalf of a voluntary organisation, a foster carer or anyone who is providing personal assistance for payment either in cash or kind.

Substantial Care

The term 'substantial' is not defined in the [Carers and Direct Payments Act \(Northern Ireland\) 2002](#) but is left to professional judgement. It should not be based simply on the number of hours spent caring, but also take into consideration the impact of the caring role on the carers own health and well-being, key factors relating to the sustainability of the role and the extent of risk to the sustainability of the role.

Carers Assessment

Carers have a right to an assessment of their needs even when the person cared for has refused an assessment for community care services, or the provision of services, provided the person cared for would be eligible for community based services.

A carer's assessment is the process of gathering data for the purpose of determining a carer's needs and eligibility for services to sustain their caring role. All services offered to a carer should be the outcome of an assessment of need. The assessment must be formally documented, placed on file and a copy given to the carer. The "Carers Support and Needs Assessment" component of the [Northern Ireland Single Assessment Tool \(NISAT\)](#) for assessing the health and social care needs of older people is the "tool of choice" for use in assessing the needs of carers in all programmes of care, thus ensuring a standardised approach to assessment regardless of where they live in Northern Ireland. This component was issued to Trusts in June 2009 along with associated guidance.

The assessment focuses on the needs of the carer and the purpose of the assessment is to:

- give the carer an opportunity to talk about their caring role;
- determine the support needs of the carer;
- determine whether the carer is eligible for support; and
- determine if the needs identified can be met by the Trust or other services and to make an appropriate referral.

The focus of the assessment is on the carer's ability to care and the support they need to continue in their caring role. The assessment takes account of the carer's circumstances, age, views and preferences, available support, family and other commitments. The assessment is not a test for the carer but is about recognising, valuing and supporting the carer. The process can be important in itself even where service provision does not flow from the assessment. The decision about services to be provided should be informed by the assessments of both the carer and the person being cared for.

Carers Reassessment

A reassessment is required when/if the carer's circumstances change and hence the level of support required to enable the carer to continue caring. Changed circumstances could become known to the professional:

- through a planned event such as a review of existing support plan
- unplanned changes in carer's personal circumstances e.g. physical or mental health, additional other family commitments, changes in work pattern etc.
- a crisis which impacts on the health or wellbeing of the person cared for.

Carers Assessments / Reassessments Offered

The number of carers' assessments / reassessments offered is the total of those accepted / completed plus those declined (see definitions below).

Carers Assessments Accepted / Completed

This refers to all assessments completed during the quarter, which were focused on a carer's need for support to sustain their caring role, whether they took place on the same day as the assessment of the person cared for or were conducted on a separate date.

Carers Reassessments Accepted / Completed

This refers to all reassessments completed during the quarter in response to the changing need of the carer.

Carers Declining a Carers Assessment / Reassessment

This refers to all assessments / reassessments that were offered to carers by HSC trust staff, and the offer was declined during the quarter, for whatever reason. If a carer declined an assessment / reassessment more than once during the quarter, they should only be counted once.

Client Group

Client group refers to that of the cared for person.

Family and Child Care

This group is mainly concerned with activity and resources relating to the provision of social services support for families and/or children.

Children with Disabilities

This group is mainly concerned with children and young people who have a physical, sensory or learning disability or prolonged illness or condition which, in interaction with various barriers, and without the provision of adequate support services, may hinder their full and effective participation in society on an equal basis with others and hinder their optimal potential for personal development and social inclusion.

Child and Adolescent Mental Health Service (CAMHS)

This group is mainly concerned with children and young people where the primary reason for contact was due to mental health.

Older People

This programme includes all community contacts with those aged 65 or over except where the reason for contact was mental illness or learning disability. All community contacts where the reason for the contact was dementia are included regardless of age, as well as all work relating to homes for the elderly, including those for the Elderly Mentally Infirm

Mental Health

This programme includes all community contact where the primary reason for contact was due to mental health.

Learning Disability

This programme includes all community contacts where the primary reason for contact was due to learning disability. All community contacts with Down's Syndrome patients who develop dementia, for any dementia related care or treatment are included as are all contacts in learning disability homes and units.

Physical Disability and Sensory Impairment

This programme includes all community contacts by any health professional where the primary reason for the contact is physical and/or sensory disability. All patients and clients aged 65 and over are excluded and allocated to the Elderly Care Programme.

Other

Any carer caring for someone who does not fall under one of the outlined client groups should be included in this group.

Adult Carers Assessment return

This return records the number of carers for whom a carer's assessment or reassessment has been accepted / completed, the number of carers declining a carer's assessment or reassessment and the main reason given by the carer for declining a carer's assessment or reassessment during the quarter. These figures are available by the client group of the person for whom the carer is caring for.

Reasons for declining an offer of a Carers Assessment

- A1** - The carer sees their caring duties as a private matter which they prefer not to discuss.
- A2** - The carer does not see themselves as a carer and therefore does not see assessment as relevant.
- A3** - The carer felt that time/ place/ environment offered was unsuitable but would like the opportunity to consider an assessment at a later date.
- A4** - The carer feels that they do not need any support/ additional support.
- A5** - The carer feels that an assessment would not result in additional support/ service.
- A6** - The carer was concerned about the impact on their benefits/ income.
- A7** - The carer feels that assessment would be too complicated or time consuming.
- A8** - The carer would not give a reason/ No reason recorded.

Reasons for declining an offer of a Carers Reassessment

- R1** - The carer sees their caring duties as a private matter which they prefer not to discuss.
- R2** - The carer did not feel previous assessments/ re-assessments had been beneficial.
- R3** - The carer felt that time/ place/ environment offered was unsuitable but would like the opportunity to consider a re-assessment at a later date.
- R4** - The carer feels that they do not need any additional support.
- R5** - The carer feels that the re-assessment would not result in additional support.
- R6** - The carer found previous assessments/ re-assessments too time consuming.
- R7** - The carer would not give a reason/ No reason recorded.

The Adult Carers Assessment return template is detailed in Appendix D and is also available with associated guidance notes on the DoH [website](#).

Appendix C: Tables

Please note that all tables can be found in excel format at:

<https://www.health-ni.gov.uk/articles/carers-assessments-and-reassessments>

Table 1: Carers Assessments Offered, Accepted / Completed and Declined (quarters ending 30 June 2013 – 31 March 2016)

	30 June 2013	30 Sept 2013	31 Dec 2013	31 Mar 2014	30 June 2014	30 Sept 2014	31 Dec 2014	31 Mar 2015	30 Jun 2015	30 Sept 2015	31 Dec 2015	31 Mar 2016
Assessments Offered	2,723	2,500	2,683	2,933	2,745	2,645	2,513	3,076	3,100	3,195	3,212	3,452
Assessments Accepted / Completed	1,240	1,137	1,115	1,236	1,146	1,090	1,022	1,253	1,201	1,221	1,278	1,328
Assessments Declined	1,483	1,363	1,568	1,697	1,599	1,555	1,491	1,823	1,899	1,974	1,934	2,124

Note: Information prior to 31st March 2015 was sourced from the CA1 and CA1b community information returns.

Table 2: Carers Assessments Offered by Client Group and HSC Trust (quarter ending 31 March 2016)

HSC Trust	Family & Child Care / Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Assessments Offered
Belfast	34	0	531	126	20	94	0	805
Northern	34	0	344	157	25	63	3	626
South Eastern	28	0	651	19	13	67	0	778
Southern	22	175	395	133	41	160	0	926
Western	67	0	134	48	32	36	0	317
Northern Ireland	185	175	2,055	483	131	420	3	3,452

Note: The client groups Family & Child Care and Children with Disabilities have been merged to avoid possibility of personal disclosure.

Table 3: Carers Assessments Accepted / Completed by Client Group and HSC Trust (quarter ending 31 March 2016)

HSC Trust	Family & Child Care / Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Assessments Accepted / Completed
Belfast	33	0	155	78	18	62	0	346
Northern	34	0	115	47	19	30	3	248
South Eastern	28	0	98	14	6	39	0	185
Southern	21	24	164	75	23	77	0	384
Western	40	0	58	26	26	15	0	165
Northern Ireland	156	24	590	240	92	223	3	1,328

Note: The client groups Family & Child Care and Children with Disabilities have been merged to avoid possibility of personal disclosure.

Table 4: Carers Assessments Declined by Client Group and HSC Trust (quarter ending 31 March 2016)

HSC Trust	Family & Child Care / Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Assessments Declined
Belfast	-	0	376	48	-	32	0	459
Northern	0	0	229	110	6	33	0	378
South Eastern	0	0	553	5	7	28	0	593
Southern	-	151	231	58	-	83	0	542
Western	27	0	76	22	6	21	0	152
Northern Ireland	29	151	1,465	243	39	197	0	2,124

Note: The client groups Family & Child Care and Children with Disabilities have been merged and some figures have been suppressed to avoid possibility of personal disclosure.

Table 5: Reasons Given for Declining a Carers Assessment by HSC Trust (quarter ending 31 March 2016)

HSC Trust	Main Reason a Carer Declined a Carers Assessment								Total
	The carer sees their caring duties as a private matter which they prefer not to discuss	The carer does not see themselves as a carer and therefore does not see assessment as relevant	The carer felt that time / place / environment offered was unsuitable but would like the opportunity to consider an assessment at a later date	The carer feels that they do not need any support / additional support	The carer feels that an assessment would not result in additional support / service	The carer was concerned about the impact on their benefits / income	The carer feels that assessment would be too complicated or time consuming	The carer would not give a reason / No reason recorded	
Belfast	24	72	59	241	15	-	-	38	459
Northern	28	73	44	154	11	-	-	59	378
South Eastern	25	33	387	108	14	-	-	25	593
Southern	29	70	37	197	15	-	-	166	542
Western	9	16	39	46	7	-	-	32	152
Northern Ireland	115	264	566	746	62	6	45	320	2,124

Note: Some figures have been suppressed to avoid personal disclosure.

Table 6: Carers Reassessments Offered, Accepted / Completed and Declined (quarters ending 30 June 2013 – 31 March 2016)

	30 June 2013	30 Sept 2013	31 Dec 2013	31 Mar 2014	30 June 2014	30 Sept 2014	31 Dec 2014	31 Mar 2015	30 Jun 2015	30 Sept 2015	31 Dec 2015	31 Mar 2016
Reassessments Offered	337	403	325	384	352	426	371	508	565	538	656	621
Reassessments Accepted / Completed	200	227	154	219	181	271	218	341	352	372	437	369
Reassessments Declined	137	176	171	165	171	155	153	167	213	166	219	252

Note: Information prior to 31st March 2015 was sourced from the CA1 and CA1b community information returns.

Table 7: Carers Reassessments Offered by Client Group and HSC Trust (quarter ending 31 March 2016)

	Family & Child Care / Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Reassessments Offered
Northern Ireland	37	0	323	69	96	96	0	621

HSC Trust	Total Reassessments Offered
Belfast	201
Northern	201
South Eastern	129
Southern	74
Western	16
Northern Ireland	621

Note: The client groups Family & Child Care and Children with Disabilities have been merged to avoid possibility of personal disclosure.

Table 8: Carers Reassessments Accepted / Completed by Client Group and HSC Trust (quarter ending 31 March 2016)

	Family & Child Care / Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Reassessments Accepted / Completed
Northern Ireland	27	0	136	52	82	72	0	369

HSC Trust	Total Reassessments Accepted / Completed
Belfast	101
Northern	147
South Eastern	63
Southern	49
Western	9
Northern Ireland	369

Note: The client groups Family & Child Care and Children with Disabilities have been merged to avoid possibility of personal disclosure.

Table 9: Carers Reassessments Declined by Client Group and HSC Trust (quarter ending 31 March 2016)

HSC Trust	Family & Child Care / Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Reassessments Declined
Northern Ireland	10	0	187	17	14	24	0	252

HSC Trust	Total Reassessments Declined
Belfast	100
Northern	54
South Eastern	66
Southern	25
Western	7
Northern Ireland	252

Note: The client groups Family & Child Care and Children with Disabilities have been merged to avoid possibility of personal disclosure.

Table 10: Reasons Given for Declining a Carers Reassessment (quarter ending 31 March 2016)

HSC Trust	Main Reason a Carer Declined a Carers Reassessment							Total
	The carer sees their caring duties as a private matter which they prefer not to discuss	The carer did not feel previous assessments / reassessments had been beneficial	The carer felt that time / place / environment offered was unsuitable but would like the opportunity to consider a reassessment at a later date	The carer feels that they do not need any additional support	The carer feels that the reassessment would not result in additional support	The carer found previous assessments / reassessments too time consuming	The carer would not give a reason / No reason recorded	
Northern Ireland	13	12	35	92	55	4	41	252

Appendix D: Adult Carers Assessment Return

A copy of these returns can be made available upon request from Community Information Branch. [Contact Us](#)

NUMBER OF CARERS ASSESSMENTS DURING THE QUARTER													
Contact Name:	<input style="width: 100%;" type="text"/>												
Contact Number:	<input style="width: 100%;" type="text"/>												
HSC Trust:	<input style="width: 100%;" type="text"/>												
Quarter Ending:	<input style="width: 100%;" type="text"/>												
TABLE 1: REFERRALS													
Client Group	Referrals Accepted												
Children	Family & Child Care												
	Children with Disabilities												
	CAMHS												
Older People													
Mental Health													
Learning Disability													
Physical Disability & Sensory Impairment													
Other (please specify by inserting a comments box)													
Total	0												
TABLE 2: ASSESSMENTS													
Client Group		Assessments Offered	Assessments Accepted/ Completed	Assessments Declined	Main reason carer declined a carer's assessment								
					A1	A2	A3	A4	A5	A6	A7	A8	
Children	Family & Child Care	0											
	Children with Disabilities	0											
	CAMHS	0											
Older People	0												
Mental Health	0												
Learning Disability	0												
Physical Disability & Sensory Impairment	0												
Other (please specify by inserting a comments box)	0												
Total	0	0	0	0	0	0	0	0	0	0	0	0	0
TABLE 3: RE-ASSESSMENTS													
Client Group		Re-assessments Offered	Re-assessments Accepted/ Completed	Re-assessments Declined	Main reason carer declined a carer's Re-assessment								
					R1	R2	R3	R4	R5	R6	R7		
Children	Family & Child Care	0											
	Children with Disabilities	0											
	CAMHS	0											
Older People	0												
Mental Health	0												
Learning Disability	0												
Physical Disability & Sensory Impairment	0												
Other (please specify by inserting a comments box)	0												
Total	0	0	0	0	0	0	0	0	0	0	0	0	0
NOTES:													
Please return by email to: HSCBInformation@hscni.net													
Please return no later than 4 weeks after the end of each quarter.													
A Guidance sheet has also been included for reference.													

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

<https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research-social-services/social-care-statistics>

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