

INFORMATION
ANALYSIS
DIRECTORATE



Quarterly Carers' Statistics for Northern Ireland

(July - September 2017)



Department of
Health

An Roinn Sláinte
Mánnystrie O Poustie

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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](#).

<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 30 September 2017:

Carers Assessments

- A carer’s assessment was offered to 3,501 carers in Northern Ireland during the quarter ending 30 September 2017. This represented a 3% (92) decrease on the number of assessments offered in the previous quarter (3,593), and a similar amount to the same quarter last year (3,484)



- Of the 3,501 carers’ assessments offered, 51% (1,785) were accepted / completed and 49% (1,716) were declined.
- Those carers caring for someone in the Older People client group were the most likely to accept an offer of an assessment, whereas those caring for someone in the Family & Child Care client group were the least likely to accept an offer of an assessment.

Carers Reassessments

- A carer’s reassessment was offered to 563 carers in Northern Ireland. This represented a 12% (78) decrease on the previous quarter (641) and an increase of 10% (50) from the same quarter last year (513).



- Of the 563 carers’ reassessments offered, 72% (406) were accepted / completed and 28% (157) 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 adult carers, thus ensuring a standardised approach to assessment regardless of the location of the carer in Northern Ireland. However, children with caring responsibilities, or in some circumstances adults caring for children with disabilities, will be assessed under the Understanding the Needs of Children in Northern Ireland (UNOCINI) assessment framework.

This bulletin presents, for the **quarter ending 30 September 2017**, 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.

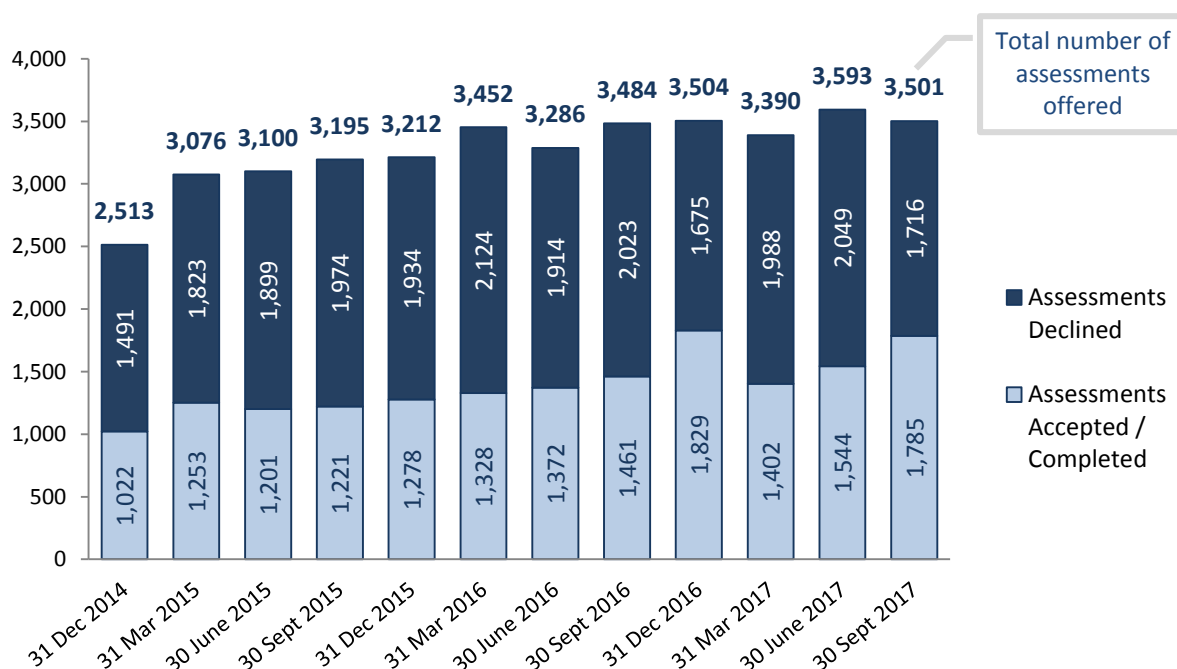
During quarter ending 30 September 2017, a carer's assessment was offered to 3,501 carers in Northern Ireland. This represented a 3% (92) decrease on the number of assessments offered in the previous quarter (3,593), and a similar amount when compared to the same quarter last year (3,484).¹

Of the 3,501 carers' assessments offered, 51% (1,785) were accepted / completed and 49% (1,716) were declined (Figure 1).

The 1,785 carers' assessments which were accepted / completed represented a 16% (241) increase from the previous quarter (1,544) and an increase of 22% (324) from the same quarter last year (1,461).

The 1,716 carers' assessments which were declined represented a 16% (333) decrease from the previous quarter (2,049) and a decrease of 16% (307) from the same quarter last year (2,023) (Figure 1). The number of declined carers' assessments has consistently been higher than the number of completed carers' assessments, with the exception of this latest quarter and the quarter ending 31 December 2016 ([Table 1](#)).

Figure 1 Carers Assessments Offered, Accepted / Completed and Declined (quarter ending 31 December 2014 – 30 September 2017)



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 South Eastern and Western HSC Trusts were lower than in the other HSC Trusts (11% and 9% of the total respectively) (Figure 2) ([Table 2](#)). Taking into account the population structure of the HSC Trusts, the Western HSC Trust had the lowest rate of assessments offered (100 assessments, compared to 270 assessments per 100,000 of the population in the Belfast HSC Trust).²

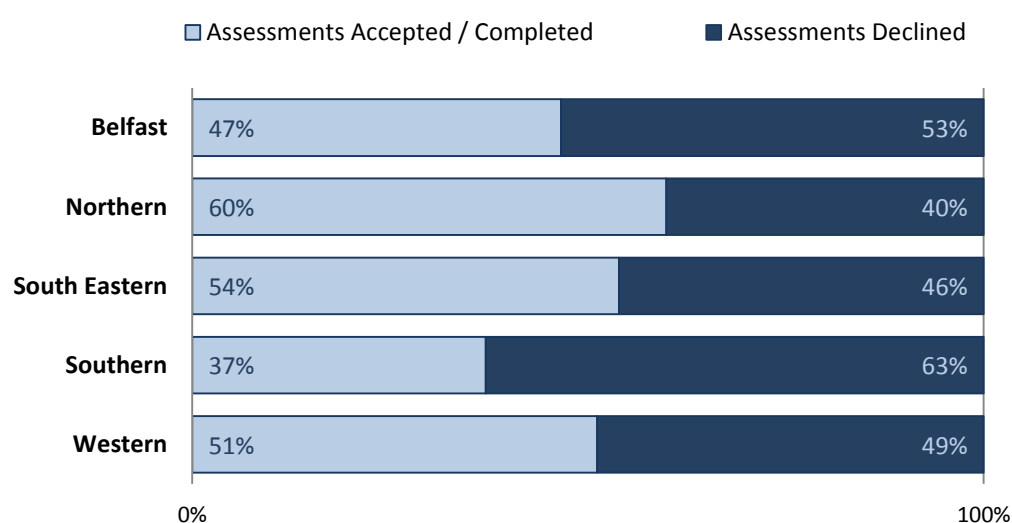
HSC Trust figures can vary considerably between quarters. During quarter ending 30 September 2017, the Northern and Belfast HSC Trusts increased the number of carers' assessments offered when compared to the previous quarter by 20% and 14% respectively. The Western, South Eastern and Southern HSC Trust decreased the number of carers' assessments offered when compared to the previous quarter by 36%, 29% and 14% respectively.

Figure 2 Number of Carers Assessments Offered by HSC Trust (quarter ending 30 September 2017)

Number of Carers Assessments Offered by HSC Trust				
Belfast	Northern	South Eastern	Southern	Western
957	1,267	382	596	299

The Northern, South Eastern and Western HSC Trusts had more offers of carers' assessments accepted / completed than declined, with 60%, 54% and 51% accepted / completed respectively. There were 53% of offers declined in the Belfast HSC Trust and 63% declined in the Southern HSC Trust. (Figure 3) ([Table 3](#)).

Figure 3 Proportion of Carers Assessments Accepted / Completed and Declined by HSC Trust (quarter ending 30 September 2017)

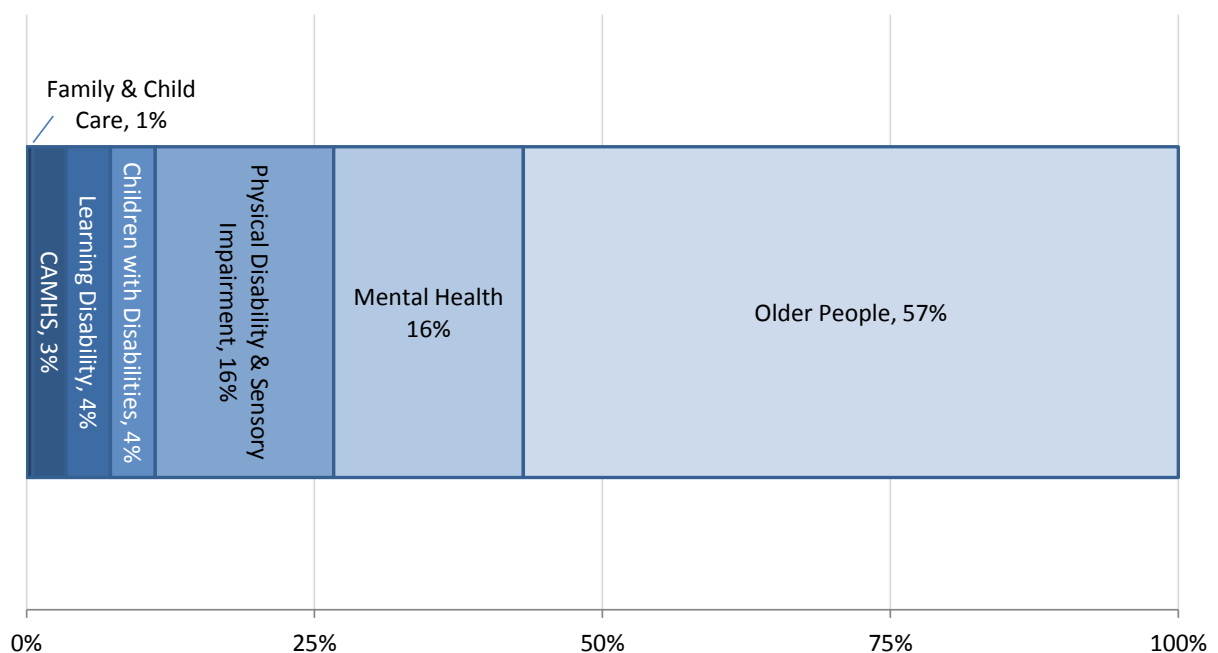


² 2016 Mid-Year Population Estimates, NISRA 2017

Client Group

Regionally across Northern Ireland, almost three fifths (57%) of carers who had been offered an assessment during the quarter ending 30 September 2017 were caring for someone in the Older People client group³. Carers caring for someone in the Mental Health and Physical Disability and Sensory Impairment client groups accounted for 16% of assessment offers respectively; 4% of those offered an assessment were caring for someone in the Children with Disabilities and Learning Disability client groups; 3% in the Child and Adolescent Mental Health Service (CAMHS) client group and 1% in the Family & Child Care client group. (Figure 4) ([Table 4](#)).

Figure 4 Proportion of Carers Assessments Offered by Client Group (of Cared for Person) (quarter ending 30 September 2017)

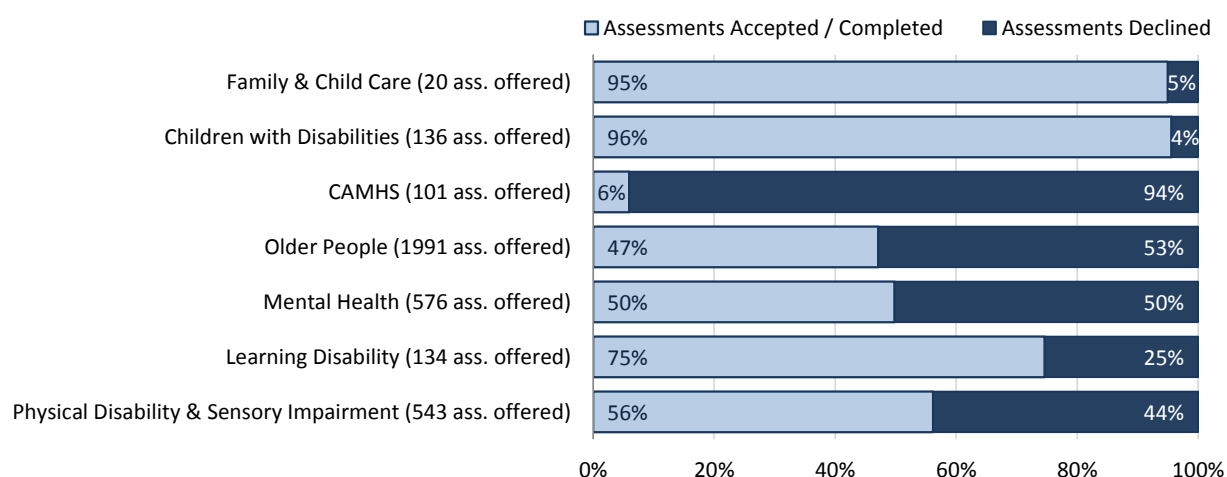


³ A list of client groups and associated definitions can be found in [Appendix B](#) of this report.

Across Northern Ireland, 96% of those carers caring for someone in the Children with Disabilities client group accepted or completed an offer of a carer’s assessment. Other client groups with a higher proportion of carers accepting or completing an offer of assessment than declining were the Family & Child Care (95% accepted / completed), Learning Disability (75% accepted / completed) and Physical & Sensory Impairment groups.

Those carers caring for someone in the CAMHS and Older People client groups were more likely to decline an offer of assessment, with those in the Mental Health client group just as likely to accept / complete an assessment as decline. (Figure 5).

Figure 5 Proportion of Carers Assessments Accepted / Completed and Declined by Client group (quarter ending 30 September 2017)



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 30 September 2017, the most frequent reason for declining an offer of a carer's assessment was that the carer felt that they did not need any support or additional support. This was the reason stated by 26% (448) of carers. People who did not give a reason or for who no reason was recorded accounted for 25% (422) of those declining.

Carers declining an offer of assessment for the reason that they felt that an assessment would not result in additional support or service accounted for 4% of all those that were declined. Less than 1% 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](#)).

26%
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 30 September 2017)

<i>The carer feels that they do not need any support / additional support</i>	26%
<i>The carer would not give a reason / No reason recorded</i>	25%
<i>The carer does not see themselves as a carer and therefore does not see assessment as relevant</i>	20%
<i>The carer felt that the time / place / environment offered was unsuitable but would like the opportunity to consider an assessment at a later date.</i>	13%
<i>The carer sees their caring duties as a private matter which they prefer not to discuss</i>	7%
<i>The carer feels that assessment would be too complicated or time consuming</i>	5%
<i>The carer feels that an assessment would not result in additional support / service</i>	4%
<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 30 September 2017, 563 carers' reassessments were offered to carers in Northern Ireland. This represented a 12% (78) decrease on the previous quarter (641) and an increase of 10% (50) from the same quarter last year (513).⁴

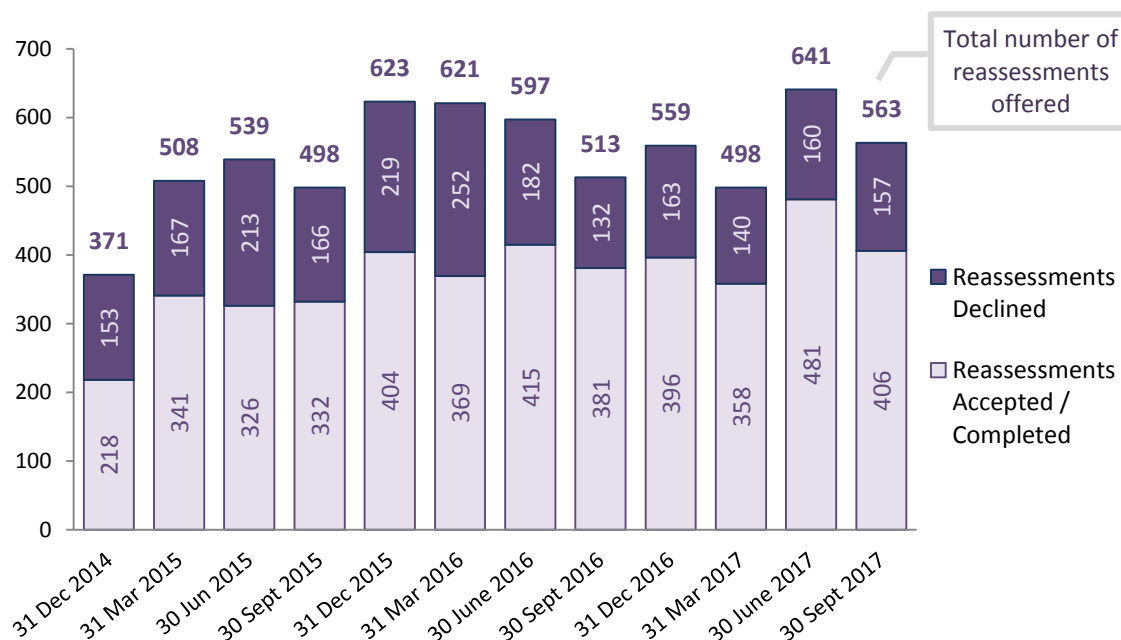
Figure 7 presents information on carers' reassessments since quarter ending 31 December 2014. Over the past three years the quarterly numbers of reassessments have been quite variable, however the proportion of those accepted / completed has increased over time.

Of the 563 carers' reassessments offered in the latest quarter, 72% (406) were accepted / completed and 28% (157) were declined (Table 6).

The 406 carers' reassessments which were accepted / completed represented a decrease of 16% (75) from the previous quarter (481) and an increase of 7% (25) from the same quarter last year (381).

The 157 carers' reassessments which were declined were similar to the previous quarter (160) and an increase of 19% (25) from the same quarter in 2016 (132).

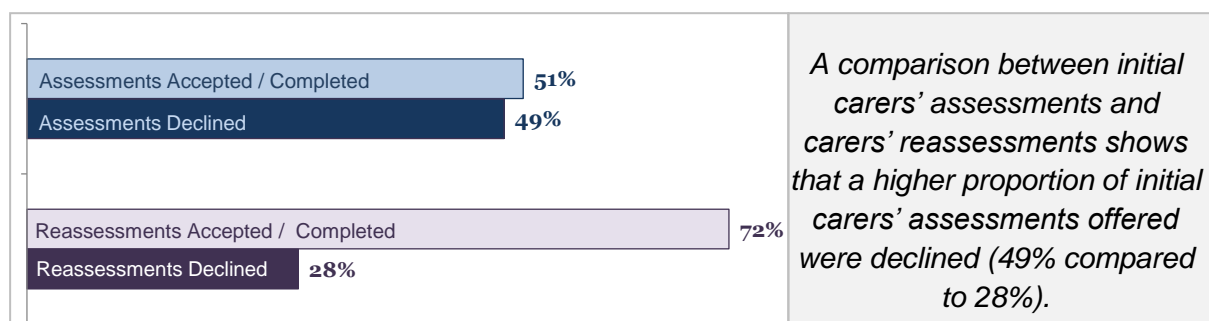
Figure 7 Carers Reassessments Offered, Accepted / Completed and Declined (quarters ending 31 December 2014 – 30 September 2017)



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

⁴ 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 30 September 2017)



Carers Reassessments by HSC Trust

Of all carers' reassessments offered in Northern Ireland, the Northern HSC Trust offered the most at 237 (42% of the total number); while the South Eastern HSC Trust offered the least at 70 (12%) (Figure 9) ([Table 7](#)).

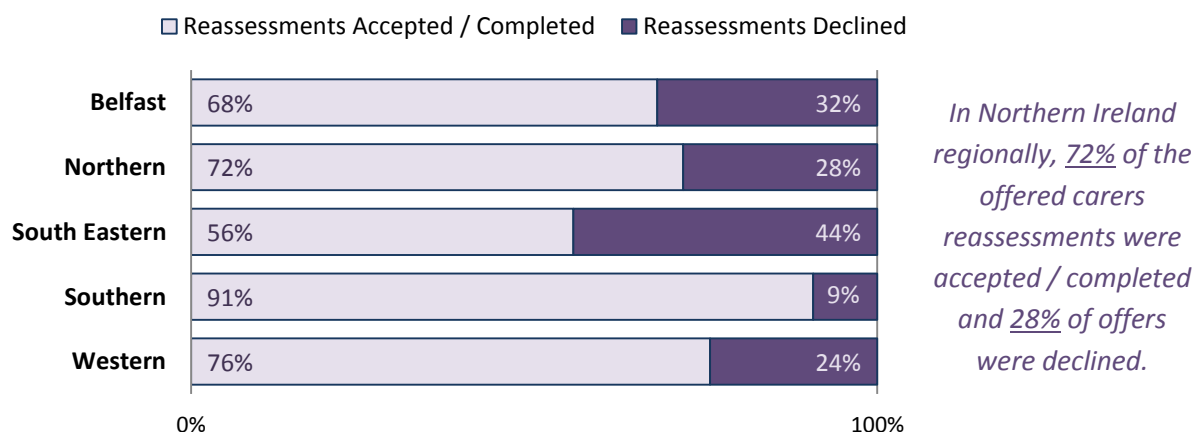
Figure 9 Number of Carers Reassessments Offered by HSC Trust (quarter ending 30 September 2017)

Number of Carers Reassessments Offered by HSC Trust				
Belfast	Northern	South Eastern	Southern	Western
103	237	70	75	78

During quarter ending 30 September 2017, four of the five HSC Trusts decreased the number of reassessments offered compared to the previous quarter, ranging from a 30% decrease in the South Eastern HSC Trust to an 11% decrease in the Northern HSC Trust. The Western HSC Trust almost doubled the number of reassessments offered compared to the previous quarter. It is worth noting however that carer reassessment figures may be relatively small and quarter on quarter comparisons can be somewhat volatile.

During quarter ending 30 September 2017, all HSC Trusts had more reassessments accepted / completed than declined. This ranged from 91% accepted / completed in the Southern HSC Trust to 56% accepted / completed in the South Eastern HSC Trust. ([Table 8](#) & [Table 9](#)).

Figure 10 Proportion of Carers Reassessments Completed and Declined by HSC Trust (quarter ending 30 September 2017)



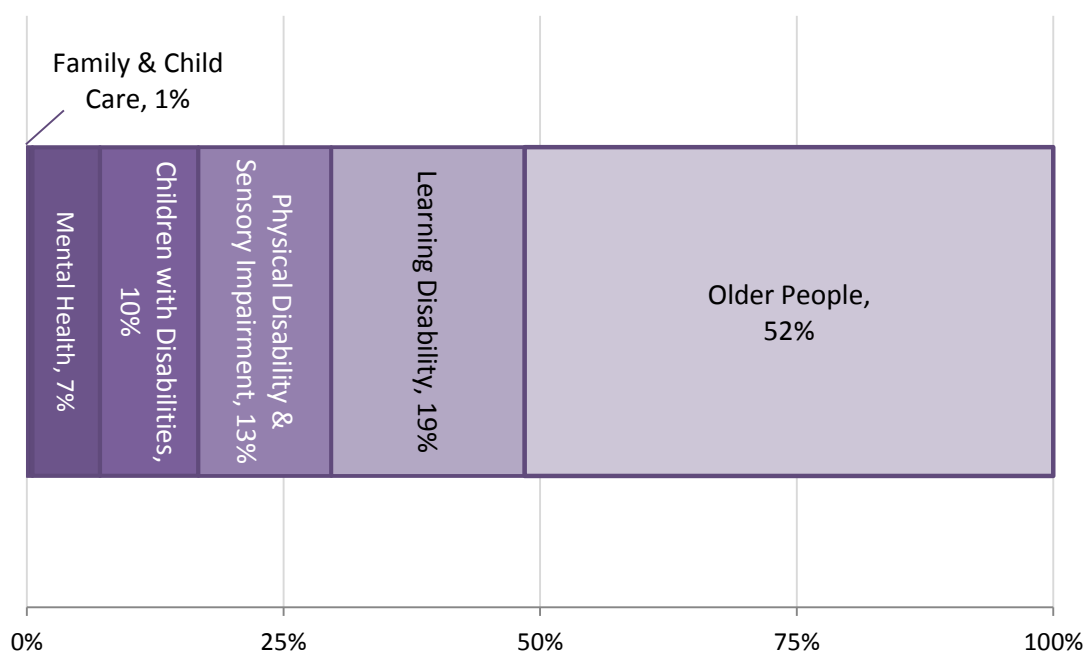
Client Group

Across Northern Ireland, during the quarter ending 30 September 2017, 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 client group accounted for 19%; with those in the Physical Disability & Sensory Impairment group receiving 13% of offers. The Children with Disabilities and Mental Health client groups accounted for 10% and 7% of offers respectively.

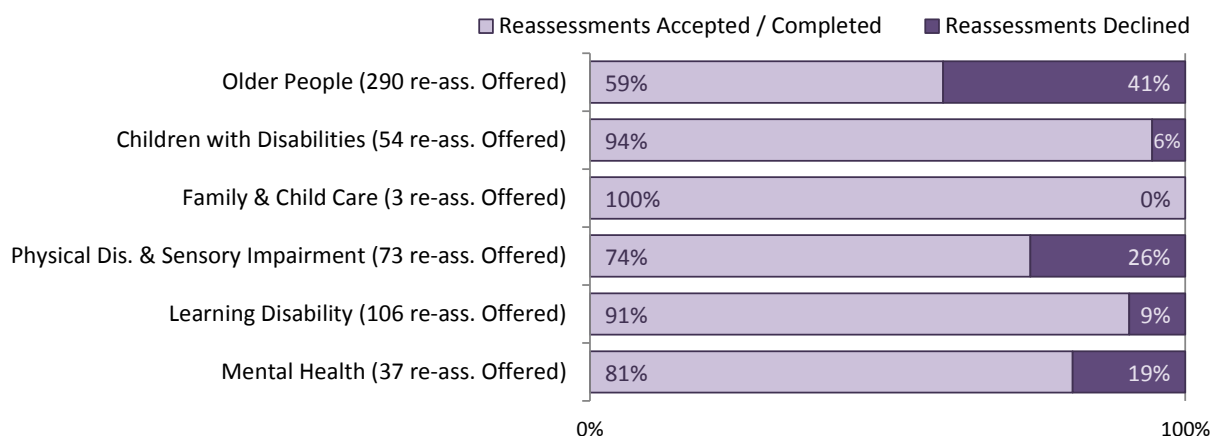
The remaining 1% of offers were made to carers caring for someone in the Family and Child Care and no offers of a carer's reassessment were made to carers caring for someone in the CAMHS client group (Figure 11) ([Table 7](#)).

Figure 11 Proportion of Carers Reassessments Offered by Client Group (of Cared for Person) (quarter ending 30 September 2017)



Across Northern Ireland, carers in all client groups were more likely to accept / complete an offer of a reassessment than decline (Figure 12) (Table 8). Of these groups, Family & Child Care and Children with Disabilities were the most likely to accept an offer of reassessment, with 100% and 94% either accepted or completed respectively. Carers caring for someone in the Older People client group were the most likely to decline an offer of reassessment, with 41% of offers being declined.

Figure 12 Proportion of Carers Reassessments Accepted / Completed and Declined by Client Group (quarter ending 30 September 2017)



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

Reasons for Declining a Carers Reassessment

During the quarter ending 30 September 2017, the majority of carers who declined an offer of a carers' reassessment felt that they did not need any additional support (40%). This has frequently been the most likely reason for a carers' reassessment to be declined. No reason was given or recorded for 36% of reassessment offers (Figure 13).

The least frequent reason for declining a carers' reassessment during the quarter ending 30 September 2017 was that the carer felt previous assessments / reassessments had not been beneficial (3%). That the carer found previous assessments / reassessments to be too time consuming was not a reason given for declining a carers' reassessment this quarter ([Table 10](#)).

Figure 13 Reasons Given for Declining a Carers Reassessment (quarter ending 30 September 2017)

<i>The carer feels that they do not need any additional support</i>	40%
<i>The carer would not give a reason / No reason recorded</i>	36%
<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>	8%
<i>The carer feels that the reassessment would not result in additional support</i>	8%
<i>The carer sees their caring duties as a private matter which they prefer not to discuss</i>	6%
<i>The carer did not feel previous assessments / reassessments had been beneficial</i>	3%
<i>The carer found previous assessments / reassessments too time consuming</i>	0%

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.

Revisions

In the Quarterly Carers' Statistics for Northern Ireland (October - December 2016) publication, figures for the number of carers' assessments offered and accepted / completed were amended for the quarter ending 30 September 2016 following the receipt of revised figures from the Northern HSC Trust.

Related Publications

This publication can be downloaded from the DoH website at:

<https://www.health-ni.gov.uk/articles/carers'-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 – 2016/17

<https://digital.nhs.uk/catalogue/PUB30045>

Community Care Statistics: Social Services Activity, England 2015-16

<https://www.gov.uk/government/statistics/community-care-statistics-social-services-activity-england-2015-to-2016-report>

Wales

Welsh Health Survey: 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

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Future Statistical Release

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 31 December 2014 – 30 September 2017)

	31 Dec 2014	31 Mar 2015	30 June 2015	30 Sept 2015	31 Dec 2015	31 Mar 2016	30 June 2016	30 Sept 2016	31 Dec 2016	31 Mar 2017	30 June 2017	30 Sept 2017
Assessments Offered	2,513	3,076	3,100	3,195	3,212	3,452	3,286	3,484	3,504	3,390	3,593	3,501
Assessments Accepted / Completed	1,022	1,253	1,201	1,221	1,278	1,328	1,372	1,461	1,829	1,402	1,544	1,785
Assessments Declined	1,491	1,823	1,899	1,974	1,934	2,124	1,914	2,023	1,675	1,988	2,049	1,716

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 30 September 2017)

HSC Trust	Family & Child Care / Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Assessments Offered
Belfast	58	4	535	172	39	149	0	957
Northern	33	0	821	212	10	191	0	1,267
South Eastern	19	0	205	70	12	76	0	382
Southern	24	97	267	87	27	94	0	596
Western	22	0	163	35	46	33	0	299
Northern Ireland	156	101	1,991	576	134	543	0	3,501

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 30 September 2017)

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	58	-	155	98	-	99	0	446
Northern	33	0	547	48	10	121	0	759
South Eastern	19	0	74	63	7	43	0	206
Southern	23	-	91	50	-	33	0	221
Western	16	0	71	28	29	9	0	153
Northern Ireland	149	6	938	287	100	305	0	1,785

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 4: Carers Assessments Declined by Client Group and HSC Trust (quarter ending 30 September 2017)

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	-	380	74	-	50	0	511
Northern	0	0	274	164	0	70	0	508
South Eastern	0	0	131	7	5	33	0	176
Southern	1	-	176	37	-	61	0	375
Western	6	0	92	7	17	24	0	146
Northern Ireland	7	95	1,053	289	34	238	0	1,716

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 30 September 2017)

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	14	78	54	137	-	-	37	164	511
Northern	86	146	22	91	-	-	39	105	508
South Eastern	4	21	48	51	8	-	-	41	176
Southern	13	65	70	139	4	-	-	81	375
Western	5	31	36	30	11	-	-	31	146
Northern Ireland	122	341	230	448	63	6	84	422	1,716

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

Table 6: Carers Reassessments Offered, Accepted / Completed and Declined (quarters ending 31 December 2014 – 30 September 2017)

	31 Dec 2014	31 Mar 2015	30 June 2015	30 Sept 2015	31 Dec 2015	31 Mar 2016	30 June 2016	30 Sept 2016	31 Dec 2016	31 Mar 2017	30 June 2017	30 Sept 2017
Reassessments Offered	371	508	539	498	623	621	597	513	559	498	641	563
Reassessments Accepted / Completed	218	341	326	332	404	369	415	381	396	358	481	406
Reassessments Declined	153	167	213	166	219	252	182	132	163	140	160	157

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 30 September 2017)

	Family & Child Care	Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Reassessments Offered
Northern Ireland	3	54	0	290	37	106	73	0	563

HSC Trust	Total Reassessments Offered
Belfast	103
Northern	237
South Eastern	70
Southern	75
Western	78
Northern Ireland	563

Table 8: Carers Reassessments Accepted / Completed by Client Group and HSC Trust (quarter ending 30 September 2017)

	Family & Child Care	Children with Disabilities	CAMHS	Older People	Mental Health	Learning Disability	Physical Disability & Sensory Impairment	Other	Total Reassessments Accepted / Completed
Northern Ireland	3	51	0	172	30	96	54	0	406

HSC Trust	Total Reassessments Accepted / Completed
Belfast	70
Northern	170
South Eastern	39
Southern	68
Western	59
Northern Ireland	406

Table 9: Carers Reassessments Declined by Client Group and HSC Trust (quarter ending 30 September 2017)

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	0	3	0	118	7	10	19	0	157

HSC Trust	Total Reassessments Declined
Belfast	33
Northern	67
South Eastern	31
Southern	7
Western	19
Northern Ireland	157

Table 10: Reasons Given for Declining a Carers Reassessment (quarter ending 30 September 2017)

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	9	4	12	63	12	0	57	157

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
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
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 DoH 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.