

Publication Report



Support Needs System (SNS) Summary Statistics

as at August 2011

Publication Date- 27 March 2012

Contents

Contents.....	1
About ISD.....	2
Official Statistics.....	2
Introduction	3
Key points	4
Results and Commentary.....	5
Children being assessed on SNS	5
Impairment recording on SNS	7
Read code recording on SNS.....	9
Service recording on SNS	10
Glossary.....	12
Contact.....	13
Further Information.....	13
Appendix	14
A1 – Background Information	14
A2 – Publication Metadata (including revisions details).....	16
A3 – Early Access details (including Pre-Release Access)	17

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Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

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Purpose: To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

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Introduction

The Support Needs System (SNS) is an electronic system that records information about children and young people under 20 years of age with additional support needs. Its aim is to enable early identification, assessment and monitoring of children with additional support needs. The system has now been implemented in twelve of Scotland's NHS Boards, although the level of implementation and utilisation of the system varies across Boards.

A child might be identified as having additional support needs if they require support over and above that usually given to all children. This might be in the form of therapy, a piece of equipment or other resource and should be required for at least six months. The clinical judgement of the professional is paramount in determining whether a child has support needs. A child will be registered on the SNS if the clinical professional involved with their care (usually a Community Paediatrician) considers it appropriate and following discussion with his / her parent(s) or guardian(s).

The system provides a facility whereby the child's needs and problems can accurately be defined and recorded, and reviewed on a regular basis. It can also record the support or services a child requires and is receiving or using, details of health care professional/s involved and any other pertinent information relating to a child's care. Although primarily a highly valued clinical support tool, information outputs from SNS enable clinicians and managers to identify patterns of need to allow planning of various support services, and to facilitate retrieval of information for research and audit purposes.

A minimum of around two percent of the child population would be expected to be eligible for registration on SNS. In some NHS Boards the proportion of children registered on SNS exceeds two percent and in others a lower proportion of children are registered. This is a reflection of differing implementation and utilisation of the system in each participating Board. In some NHS Board areas, children with more complicated or severe problems are targeted for assessment in SNS, while in other areas children with a wider range of problems are being assessed on the system. ***For these reasons SNS figures cannot be used as direct indications of the prevalence of particular conditions in the wider population and should not be used to make comparisons between NHS Boards.***

These summary statistics are based on August 2011 data and present information for ten NHS Board areas. Data for Fife and Dumfries & Galloway NHS Boards have been excluded from this publication due to very small, unrepresentative numbers.

Key points

- The Support Needs System (SNS) has now been implemented in twelve of Scotland's NHS Boards, although the level of implementation and utilisation of the system varies across Boards. This means figures from SNS must be read with caution. Overall, in the ten participating Boards with data included in these statistics, 15,541 children and young people had assessment data recorded on SNS.
- 78.0% of all children and young people on SNS had at least one impairment (of any severity) recorded and 26.8% of all children and young people on SNS had at least one severe impairment recorded.
- Of all children and young people on SNS, 98.6% were recorded as requiring at least one service (newly identified or ongoing). The most commonly required service type recorded was the involvement of a professional, such as a speech therapist (98.6% of all children on SNS).

Results and Commentary

These summary statistics are based on August 2011 data and present information for ten NHS Board areas (data for two boards with very small numbers of children on the system have been excluded from these statistics). Please see [background information](#) for further details of variations in the implementation of SNS across participating SNS Boards.

Children being assessed on SNS

Table 1: Number of children being assessed in SNS¹ as at August 2011, by NHS Board

NHS Board	Number of children being assessed in SNS	% of Child Population on SNS ²
Ayrshire & Arran	1,117	1.36
Borders	51	0.20
Forth Valley	142	0.20
Grampian	3,526	2.86
Greater Glasgow & Clyde	4,995	1.86
Highland (Argyll & Bute only) ³	479	2.57
Lanarkshire	1,762	1.31
Lothian	2,668	1.46
Shetland	25	0.46
Tayside	776	0.87
All SNS Boards⁴	15,541	1.55

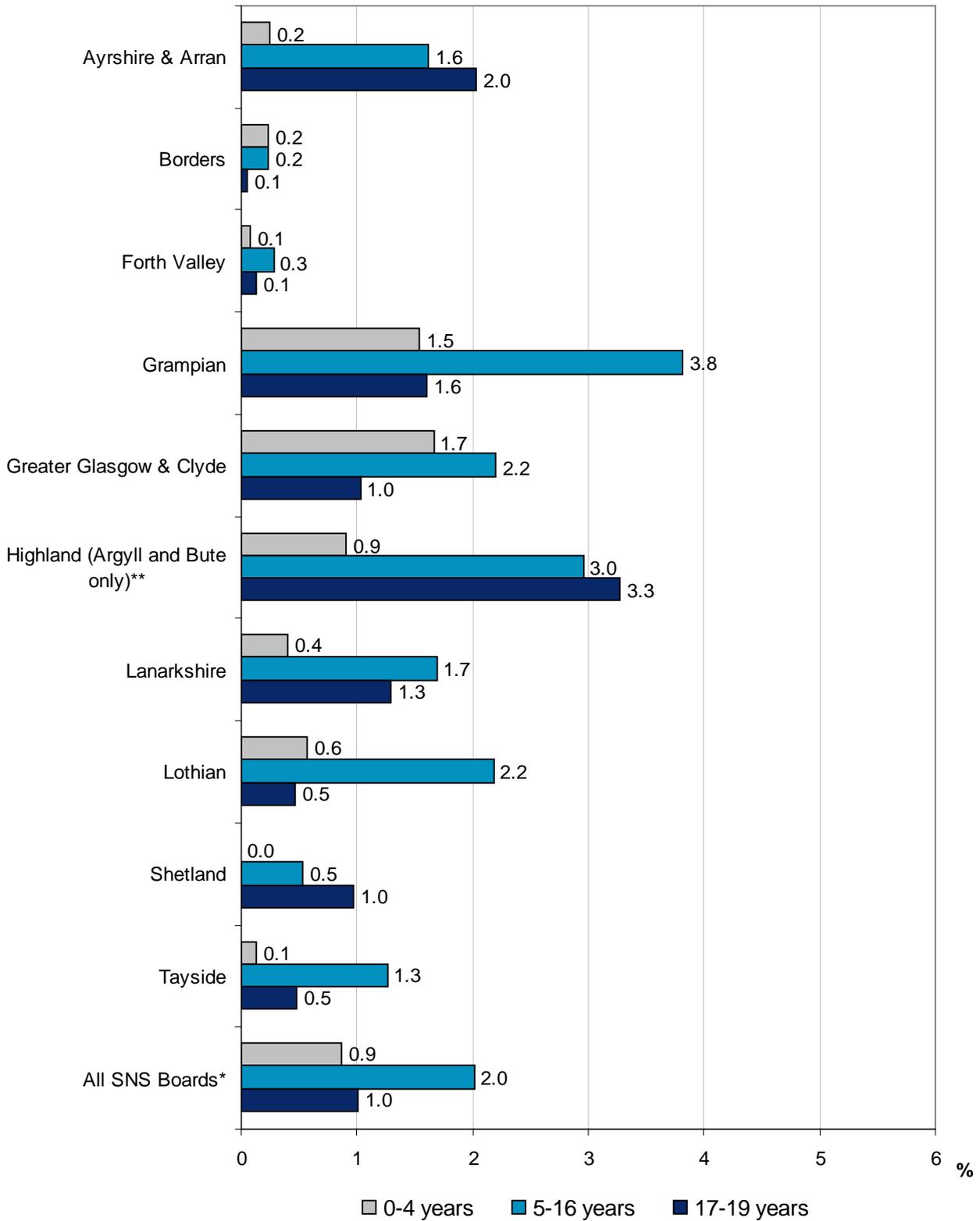
Source: SNS; ISD Scotland; Aug11 and General Register Office Scotland mid 2010 population estimates

1. SNS relates to children and young people under 20 years of age. However, there is a small number of children aged 20 and over still registered on SNS (22 in total across all SNS Boards).
2. Based on GRO population estimate of children aged 0-19 years as at 30th June 2010.
3. SNS is implemented in the Argyll & Bute council area of NHS Highland only.
4. All SNS Boards: NHS Fife and NHS Dumfries & Galloway have very small, unrepresentative numbers of children registered on SNS. Data for these children, and those registered under more than one NHS Board, are excluded from these summary statistics.

Table 1 shows the number and percentage of children being assessed in SNS in each NHS Board. Figure 1 presents these figures, broken down into age groups, as a percentage of the child population in each age group, by NHS Board area. A minimum of around two percent of the total child population would be expected to be eligible for registration on SNS. Figure 1 shows that this is exceeded in some areas, particularly for children of school age, but not reached in other areas.

The different rates of capture shown for each NHS Board are a reflection of differing implementation and utilisation of the system in each NHS Board. In some areas, e.g. NHS Lanarkshire, children with more complicated or severe problems are targeted for assessment in SNS. In other areas e.g. NHS Grampian, children with a wider range of problems are being assessed on the system.

Figure 1: Children assessed in SNS, as a percentage of the child population in each age group, by NHS Board



Source: SNS; ISD Scotland; Aug11 and General Register Office Scotland mid 2010 population estimates

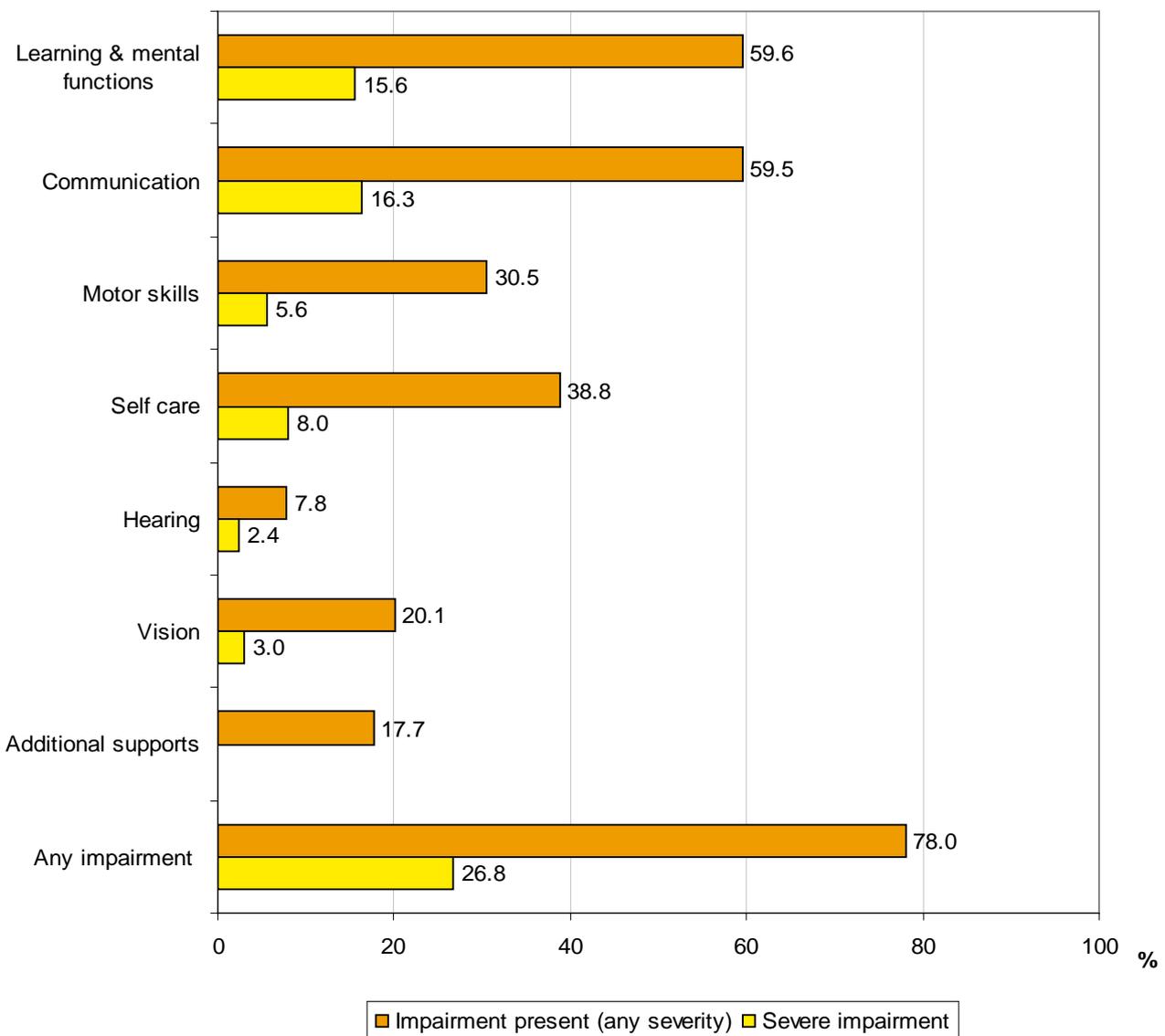
* All SNS Boards: NHS Fife and NHS Dumfries & Galloway have very small, unrepresentative numbers of children registered on SNS. Data for these children, and those registered under more than one NHS Board, are excluded from these summary statistics.

** SNS is implemented in the Argyll & Bute council area of NHS Highland only.

Impairment recording on SNS

SNS has the facility to record details of a child’s disabilities and impairments including type and severity. Figure 2 shows the proportion of children being assessed on SNS that have at least one impairment (any severity) or severe impairment recorded. 78.0% of children being assessed on SNS have at least one impairment recorded in at least one category, meaning that the remaining 22.0% of children do not have any information on impairment recorded yet (because this section of the form had not been completed at the time the data was extracted). Also, part of Greater Glasgow & Clyde implemented SNS relatively recently (in late 2010) and it will take some time until all children on SNS in this area have had an assessment using the SNS form and have details of impairments recorded. 'Learning & mental functions' and 'Communication' impairments are the most commonly recorded (59.6% and 59.5% respectively). Of all children on SNS, 26.8% have at least one severe impairment recorded.

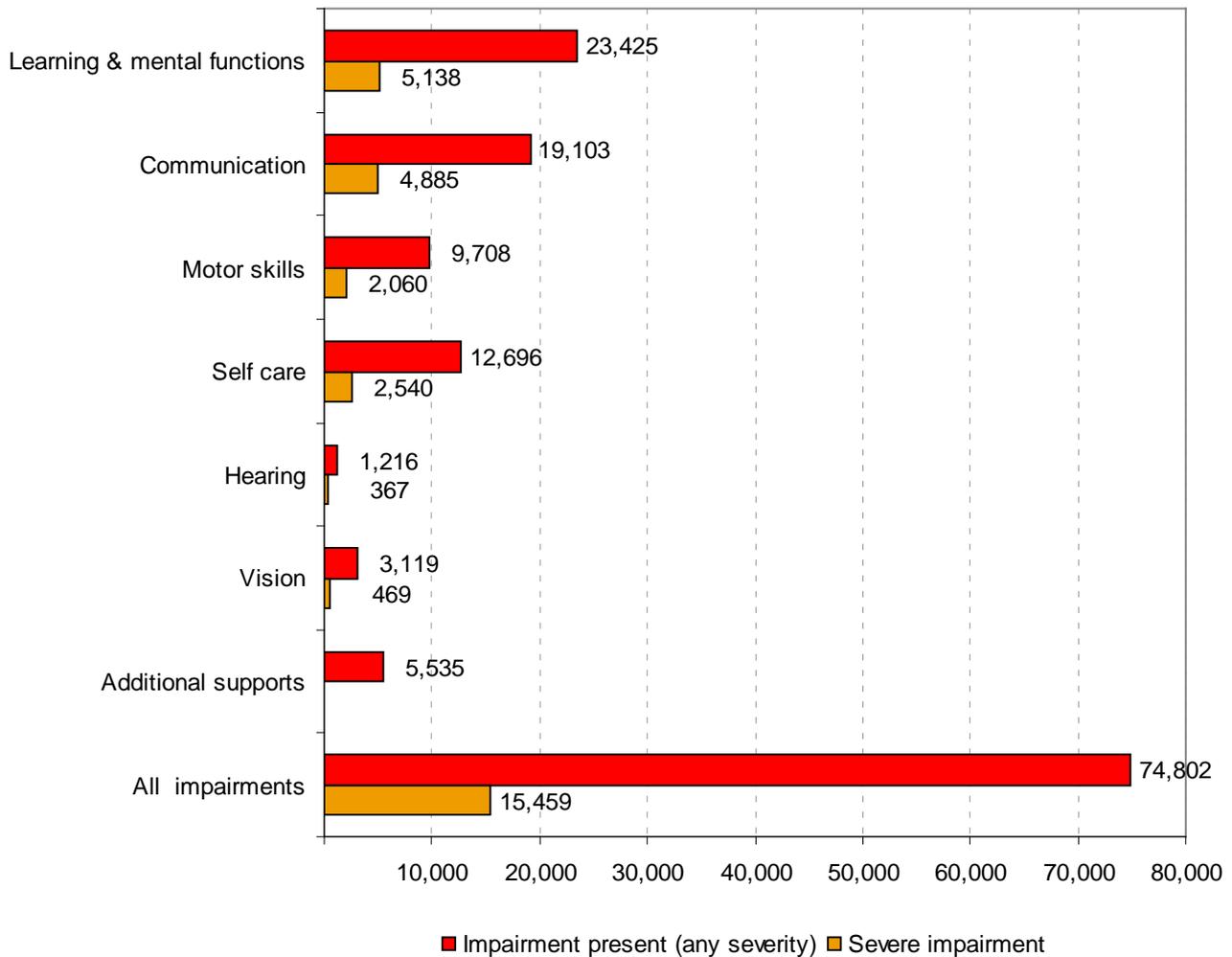
Figure 2: Impairments (present and severe) as a percentage of children being assessed on SNS



Source: SNS; ISD Scotland; Aug11

Within each of the main impairment categories shown on Figure 2 (except 'Additional supports') there are several more specific sub-types (e.g. 'Feeding', 'Toileting' and 'Dressing' within the 'Self care' category). Each of these impairments can be recorded as being 'Present' or 'Severe'. Severity level is not applicable to 'Additional supports' as this category details whether or not the child requires e.g. respiratory support, renal dialysis or uses e.g. a wheelchair, hearing aids.

Figure 3: Number of recordings of impairment (present and severe)



Source: SNS; ISD Scotland; Aug11

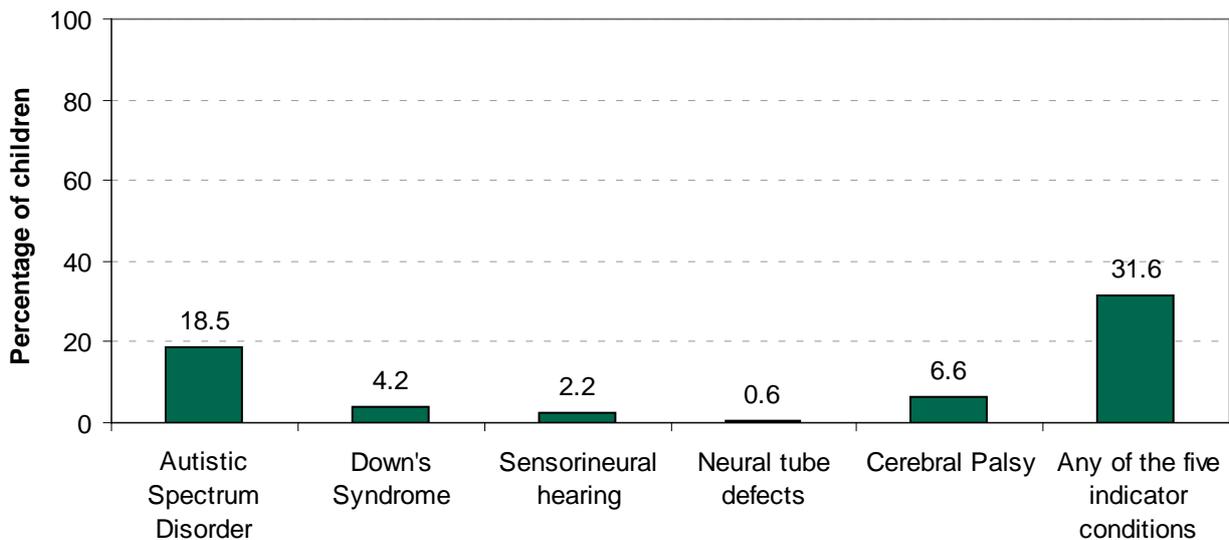
Figure 3 shows the total number of impairment recordings and the number of severe impairment recordings (where applicable) for each category. In total, there were 74,802 impairments recorded and of these, 15,459 were severe impairments. These 74,802 impairment recordings relate to 78.0% of all children on SNS (approx. 12,100 children), which illustrates that many children have multiple impairments recorded on the system. The highest proportion of severe impairments is for 'Hearing' (367 of 1,216 records) although this relates to only 2.4% of all children on SNS.

Read code recording on SNS

The conditions and problems of children being assessed in SNS may be recorded using Read coding. Around 5,000 different codes have been entered into SNS to describe conditions or problems. Clinicians using SNS have agreed on groupings of Read codes for certain conditions to be used for recording data on SNS: Autistic Spectrum Disorder, Down's Syndrome, Sensorineural hearing loss, Neural tube defects and Cerebral Palsy. In future, Read code groupings may be developed for other conditions.

Figure 4 shows the percentage of all children on SNS who have selected indicator conditions recorded. Nearly one third (31.6%) of all children on SNS have at least one of these indicator conditions recorded, while some children may have more than one recorded. The remaining 68.4% of children on SNS have other Read coded problems, impairments or service requirements. **Please note that these five indicator conditions are not necessarily recorded on SNS more extensively than other Read code problems and Read code data on SNS cannot be used to infer the prevalence of conditions in the general population.**

Figure 4: Selected indicator conditions, as a percentage of all children on SNS



Source: SNS; ISD Scotland; Aug11

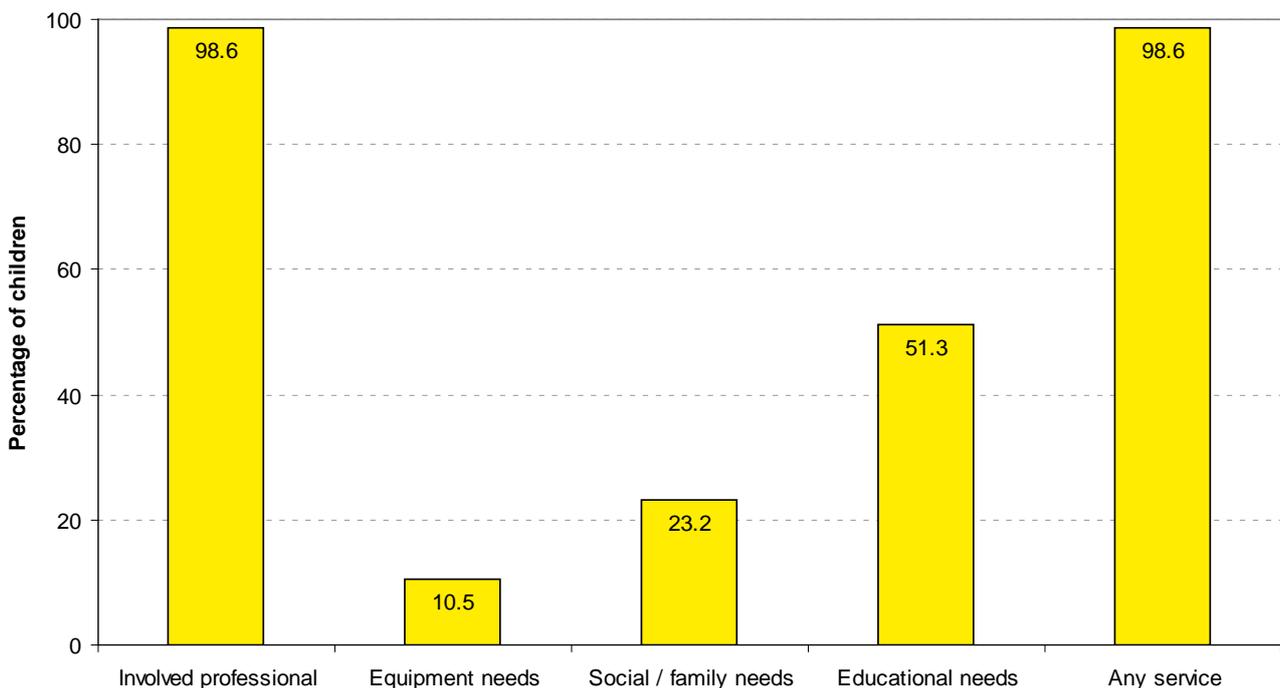
Service recording on SNS

A revised version of the page of the SNS assessment form used to record service requirements came into use at the end of March 2009. This page can be used to record the type of service required and information on the availability of services.

There are over 130 individual service codes that may be recorded on SNS and these services are grouped into four main categories (involved professional, equipment needs, social / family needs and educational needs). Some children may be assessed on SNS over a period of many years and their service requirements may change during that time.

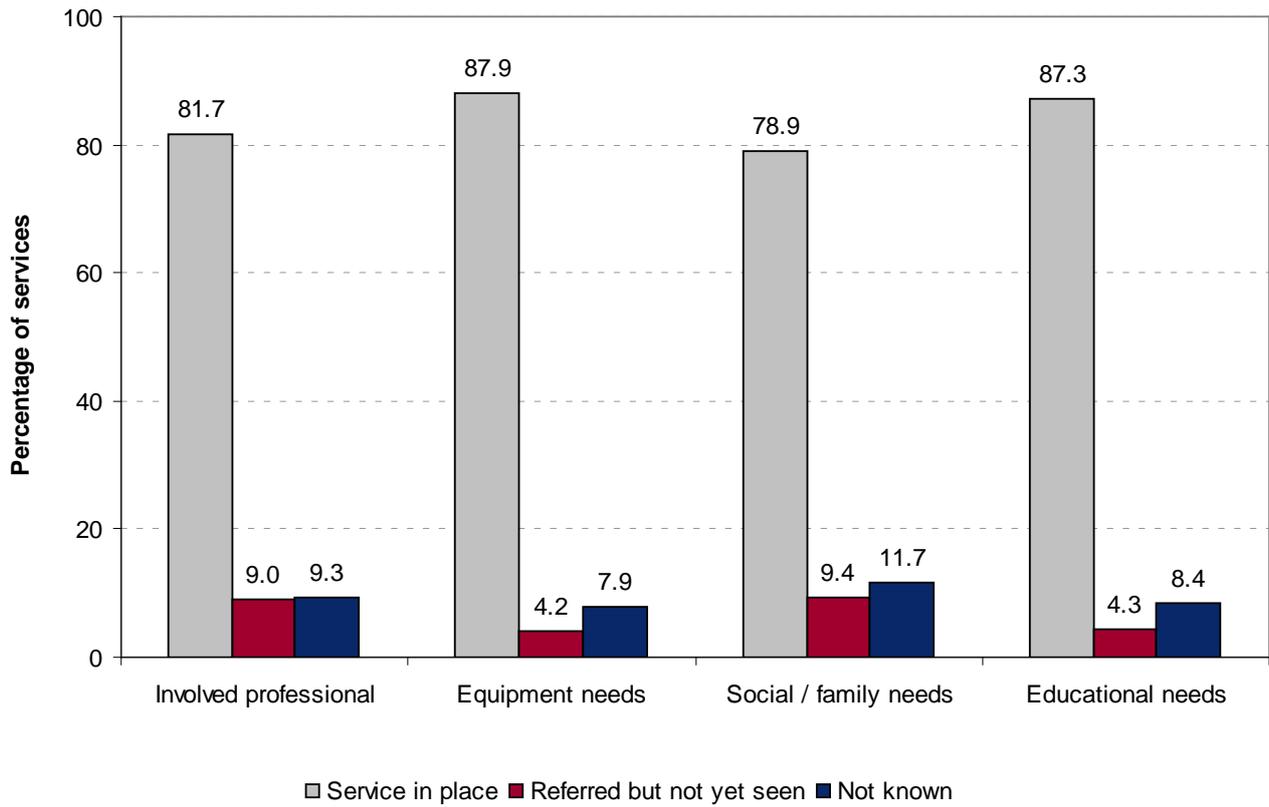
Figures 5 and 6 contain figures relating to overall service requirement (newly identified and ongoing service requirements) for children on SNS. Figure 5 shows that most children on SNS (98.6%) have at least one service requirement recorded. All children on SNS require support from at least one professional (e.g. community paediatrician, speech therapist, etc) and the statistics show that for the vast majority (98.6%) this has been recorded. Many children have multiple service requirements and may need services from more than one category.

Figure 5: Children with at least one service requirement, as a percentage of all children on SNS



Source: SNS; ISD Scotland; Aug11

Figure 6: Service availability, as a percentage of services required



Source: SNS; ISD Scotland; Aug11

For each service category, Figure 6 shows the percentage of required services that are known to be in place, and the percentage where the referral has been made or the service availability is not known. In the most commonly required service category, involvement of a professional, 81.7% of services are in place. The least required service category, equipment needs, has the highest percentage in place (87.9%). The lowest percentage of services known to be in place (78.9%) is for social / family needs.

Glossary

SNS

Support Needs System

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Further Information

Further information can be found on the [ISD website](#)

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Appendix

A1 – Background Information

Details for each user NHS Board as at August 2011 are given below:

NHS Board (using SNS)	Year of implementation	Other notes on implementation
Ayrshire & Arran	2001	In general, SNS has been consistently used.
Borders	2000	There are currently very few records on the system.
Dumfries & Galloway	2001	Use of SNS is very limited and there are currently very few records on the system.
Fife	2004 (relaunched in 2008)	There are currently very few records on the system.
Forth Valley	2007	There are currently very few records on the system.
Grampian	1996	SNS has been consistently and extensively used.
Greater Glasgow & Clyde	Former Argyll & Clyde 1993 Rest of Greater Glasgow & Clyde 2010	SNS was implemented in the area of NHS Greater Glasgow & Clyde inherited from the former Argyll & Clyde NHS Board in 1993 and has been consistently used (covers Renfrewshire and Inverclyde, and part of West Dunbartonshire and East Renfrewshire Community Health Partnership areas). The rest of NHS Greater Glasgow & Clyde began implementation of the SNS in August 2010 and by the end of 2010 the system was implemented in all units. However, it will take some time before all children in the units that recently implemented SNS have been assessed using the SNS form and have details of impairments recorded on SNS.
Highland (Argyll & Bute council area only)	1993	SNS is implemented in the Argyll & Bute council area of NHS Highland only and has been consistently used since 1993. NHS Highland inherited this area from the former Argyll & Clyde NHS board which ceased to exist on 31st March 2006.
Lanarkshire	2001	SNS is consistently used but staff shortages and staggered implementation have reduced overall registrations.
Lothian	2002	In general, SNS has been consistently used.
Shetland	1994	The use of SNS has been hindered since Shetland has no lead Paediatrician.
Tayside	1997	SNS is currently not consistently or routinely used. The numbers therefore are not accurate and do not reflect work activity or needs in that area. At present SNS is predominantly being used for children with exceptional healthcare needs (CEN), and being considered for children with cerebral palsy as part of the hip screening programme.

All SNS Boards: NHS Fife and NHS Dumfries & Galloway have very small, unrepresentative numbers of children registered on SNS. Data for these children, and those registered under more than one NHS Board, are excluded from these summary statistics.

Particular care should be taken when viewing figures for individual NHS Boards that are based on small numbers e.g. Shetland, as these can give an unrepresentative picture of activity in that NHS Board. SNS holds data for a subgroup of children identified as requiring sustained support over and above that routinely given to all children. Figures cannot be used as direct indications of the prevalence of particular conditions in the general population and should not be used to compare NHS Boards.

SNS has not been implemented in all NHS Boards across Scotland. NHS Orkney, NHS Western Isles and the majority of NHS Highland use alternate electronic or paper systems to manage the care of children and young people with support needs in their areas.

Some children and young people on the system have not yet been assessed using the revised impairment/disability page on the assessment form, which came into effect in October 2007. Therefore the impairment statistics in this publication will not represent as full a picture of the impairments of children on the system as figures published prior to 2008, which were derived from the old disability page.

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	SNS Summary Statistics
Description	Support Needs System (SNS) Annual Summary Statistics, as at August 2011
Theme	Health and Social Care
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Date that data are acquired	2 August 2011
Release date	27 March 2012
Frequency	Annual
Timeframe of data and timeliness	Data as at August 2011
Continuity of data	See Appendix A1- Background Information
Revisions statement	The data are not subject to planned revisions.
Revisions relevant to this publication	None
Concepts and definitions	Further information can be found on the ISD website .
Relevance and key uses of the statistics	Making information publicly available on implementation and utilisation of the system.
Accuracy	Figures are compared to previous years' figures and expected trends.
Completeness	See Introduction and Appendix A1- Background Information
Comparability	See Introduction and Appendix A1- Background Information
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines .
Coherence and clarity	Information is available as a PDF document.
Value type and unit of measurement	Numbers and percentages.
Disclosure	The ISD protocol on Statistical Disclosure Protocol is followed.
Official Statistics designation	Official Statistics
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A3 – Early Access details (including Pre-Release Access)

Pre-Release Access

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

Standard Pre-Release Access:

Scottish Government Health Department
NHS Board Chief Executives
NHS Board Communication leads

Extended Pre-Release Access

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

Scottish Government Health Department (Analytical Services Division)

Early Access for Quality Assurance

These statistics will also have been made available to those who needed access to help quality assure the publication:

Representatives of the Support Needs System National User Group