Care Home Census 2013
Statistics on Adult Residents in Care Homes in Scotland
29th October 2013
Contents

Introduction ................................................................................................................................................................. 2
Uses of Data ................................................................................................................................................................. 4
Related Health and Social Care Information .................................................................................................................. 4
Key points ....................................................................................................................................................................... 6
Results and Commentary ................................................................................................................................................. 7
Glossary ........................................................................................................................................................................... 26
List of Tables ................................................................................................................................................................. 28
Contact ........................................................................................................................................................................... 29
Further Information .......................................................................................................................................................... 29
Rate this publication .......................................................................................................................................................... 29
  A1 – Background Information ........................................................................................................................................ 30
  A2 – Publication Metadata (including revisions details) .............................................................................................. 30
  A3 – Early Access details (including Pre-Release Access) ............................................................................................ 33
  A4 – ISD and Official Statistics ....................................................................................................................................... 34
Introduction

Background

This publication presents information on adult residents in Care Homes in Scotland collected as part of the annual Scottish Care Home Census (SCHC) held at 31st March 2013. The census covers all adult care homes in Scotland that are registered with the Care Inspectorate and data are collected via the Care Inspectorate’s web based “eForms” system. The data collected are at two levels:

- **Aggregated** care home level data includes the number of residents at the census date, along with the number of admissions, discharges and deaths that occurred in the preceding year and information on weekly charges per resident. A distinction is made between the following types of care based on the intention when the individual was admitted to the home. The types of care are:
  - Long stay
  - Respite care
  - Short stay

- **Individual** data on residents in the ‘long stay’ category.

For the purposes of the census residents are classified as long stay, respite or short stay. Further information on the types of care can be found in the glossary.

The SCHC groups care homes into one of the following five main client groups:
- Older people (aged 65 and over)
- Adults with physical disabilities
- Adults with mental health problems
- Adults with learning disabilities
- Other (e.g. for adults with acquired brain injuries, alcohol related problems, drugs related problems, AIDS/HIV and other vulnerable groups)

It is important to note that, where data is shown by client group, this relates to the main client group of the home as designated by the Care Inspectorate. Many care homes provide care for a number of different types of client. The client group of an individual resident may differ from the main client group of the home.

There are three sectors responsible for running care homes: Local Authority/NHS, private and voluntary sector. The SHSC covers all homes, which are registered with the Care Inspectorate, from these three sectors.
Publication of Findings

The statistics contained in this release are presented by the Local Authority area in which the care home is situated.

The publication presents information on:

- **All Care Homes for Adults** - Information on residents in all types of adult care homes in Scotland (see [Section 1](#)).

- **Care Homes for Older People** – Information on residents in care homes for which the main client group is older people (see [Section 2](#)).

- **Care Homes for Other Main Client Groups** – Information on residents in care homes for which the main client group is adults with physical disabilities, adults with mental health problems or adults with learning disabilities (see [Section 3](#)).

The publication does not include a separate section on care homes for certain other types of user including homes whose main client group is adults with acquired brain injuries and alcohol and drug problems. This is due to the small numbers of homes in these categories. The section for all adult care homes (Section 1) does include information on these homes.

For the 2011 census ISD published two reports: an interim report and a detailed findings report. For the 2012 census onwards, ISD has produced a single annual report.

**Excel tables**

This report is accompanied by a series of excel tables which provide more in-depth information both at Scotland and Local Authority level. A link to the Excel tables can be found via the following link: [Link to Excel Tables](#).

**Trend Data**

Data on the number of care homes, places registered with the Care Inspectorate and residents is available from March 2000 to March 2013. Information on the types of care (i.e. long stay, respite care and short stay), as well as the detailed information on long stay residents is available from March 2003 to March 2013.

**Coverage & Estimation**

**Aggregate Data**

The number of operational Care Homes registered with the Care Inspectorate at the 31\textsuperscript{st} March 2013 census was 1,282. Full or partial responses were received from 1,189 operational care homes giving a response rate of 93 per cent. For those care homes who did not submit data, the figures are imputed based on either previous records available for the care home in question or an average for other care homes of similar size and main client group who did submit a response.

**Long Stay Resident Data**

It should be noted that the response rate for individual data on ‘long stay’ residents in the census has never been 100 per cent. At 31\textsuperscript{st} March 2013, data were returned for 86 per
Information Services Division

cent (29,866) of ‘long stay’ residents. Further details of how the total number of long stay residents is estimated in the overall population can be found in Appendix A1.

Uses of Data

The information contained in the publication, along side other health and social care data, is used for a variety of purposes. It is used by the Scottish Government, health boards and local authorities to monitor policy obligations, both locally and nationally. Data from this census feeds into the Scotland Performs indicator – ‘Increase the percentage of people aged 65 and over with high levels of care needs who are cared for at home’. http://www.scotland.gov.uk/About/Performance/scotPerforms/indicators/CareAtHome

The data is has been used to monitor elements of Scotland’s national dementia strategy (e.g. measuring levels of formal and informal diagnosis of dementia).


The data is used to facilitate benchmarking with other areas to help share best practice as well as supporting enhanced performance through improved efficiency. The statistics are used along side other health and social care data in discussions that take place between NHS Boards and local partnerships to inform service planning discussions.

The data is used on an annual basis in the National Records of Scotland (NRS) model used to calculate household projections in Scotland.

The information is used by academics for research projects. For example, the Centre for Policy on Aging used data contained in this report for a project looking at the changing role of care homes and future projections of care home population in the UK. http://www.cpa.org.uk/information/reviews/changingroleofcarehomes.pdf

A short summary report on the uses of the Care Home Census information is available in this report.

Related Health and Social Care Information

ISD publish other information that helps to measure the shift in the balance of care to ensure that older people are cared for in their own homes or in a homely setting in the community, wherever possible.

For most patients, following completion of health and social care assessments, the necessary care, support and accommodation arrangements are put in place in the community without any delay in the patient’s safe and appropriate discharge from hospital. A ‘delayed discharge’ is a hospital inpatient who has been judged clinically ready for discharge by the responsible clinician, in consultation with all agencies involved in planning the patient’s discharge, who continues to occupy a bed beyond the ready for discharge date. These patients are clinically ready to move on to a more appropriate care setting either within or out with the NHS e.g. patient’s home, care home etc. Further information can be found at the following link: http://www.isdscotland.org/Health-Topics/Health-and-Social-Community-Care/Delayed-Discharges/

The NHS Continuing Care Census identifies all patients who were receiving NHS Care on the census date. NHS Continuing Care is defined as on-going, non-acute care, delivered as
an inpatient, and often over an extended period, either in hospital, hospice or care home. In addition to supporting the need for information about shifting the balance of long term care for older people, this data is also used to inform on the application of the NHS Continuing Health Care guidance. A link to the latest report can be found here: http://www.isdscotland.org/Health-Topics/Health-and-Social-Community-Care/NHS-Continuing-Care/

The Scottish government publish other information relating to service provision for older people and this can be found at the following website: http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/Data

Information on home care statistics can also be found at the above link as well as information on free personal and nursing care.
Key points

Care Homes for All Adults

- As at 31st March 2013 there were 1,282 care homes for adults in Scotland providing 42,755 places to 36,578 residents.

- The majority of care homes for adults, 716 (56 per cent), were run by the private sector, 367 (29 per cent) were run by the voluntary sector and 199 (16 per cent) were run by Local Authorities or Health Boards.

Care Homes for Older People

- As at 31st March 2013 there were 911 care homes for older people providing 38,508 places to 32,888 residents, of whom 31,752 were long stay residents (97 per cent).

- The total numbers of short stay and respite care residents increased from 736 in March 2003 to 1,136 in March 2013, an increase of 54 per cent.

- 52% of long stay residents in care homes for older people had a formal diagnosis of dementia compared to 29% at the March 2003 census. Over the same time period the percentage of residents who have been identified as having dementia but not formally diagnosed has decreased from 14 per cent to 8 per cent.

- At 31st March 2013 around a third of residents had been in the care home for more than three years. The median length of stay for existing residents was around 2 years and has remained unchanged for the last ten years.

- The average weekly charge for self-funding long stay residents without nursing care was £658 per week, an increase of 4 per cent since the last census period. The average weekly charge for self funding long stay residents with nursing care was £726, an increase of 4 per cent from the previous year.

Care Homes for Other Main Client Groups

- The number of long stay residents in care homes for adults with learning disabilities fell from 2,489 in March 2003 to 1,588 in March 2013, a decrease of 36 per cent.

- The majority of registered places for adults with physical disabilities, 458 (69 per cent), were provided by the voluntary sector.
Results and Commentary

Section 1 - All Care Homes for Adults
This section provides summary information on all care homes for adults in Scotland and includes:

1.1 Numbers of care homes, places and residents
1.2 Main client group of the care home
1.3 Sector providing care

1.1 Number of Care Homes, Residents and Places for All Adults

As at 31st March 2013 there were 1,282 care homes for adults providing 42,755 places to 36,578 residents. The proportion of residents aged 65 and over is 89%. Figure 1 presents information on the number of care homes, registered places and residents for all adults in care homes over time. It shows that the number of care homes has been steadily falling from 1,669 in March 2000 to 1,282 in March 2013, a decrease of 23 per cent. Between March 2000 and March 2013, the number of residents has fallen by 3,676 (9 per cent). Whilst the number of residents being cared for in care homes has fallen between 2000 and 2013, figures from the National Records of Scotland show that over the same time period the number of people aged 65 and over has increased from around 799,500 in 2000 to around 925,750 in 2012, an increase of 16 per cent.

The number of older people being cared for in other care settings has increased over the same time period. For example, recent figures from the Scottish Government show that the proportion of people aged 65 and over receiving intensive home care (10+ hours a week) as a percentage of all older people receiving long term care has increased from 25.6% in 2003 to 32.3% in 2011. These figures reflect the shift in the balance of care agenda (i.e. a move from care homes towards more care being provided in people’s own homes). http://www.scotland.gov.uk/About/Performance/scotPerforms/indicators/CareAtHome.

Figure 1 shows the number of residents in all adult care homes on the census day from 2000-2103.

Figure 1: Number of Care Homes¹, Registered Places¹, Residents² for All Adults, March 2000 – March 2013

1 Source: Care Inspectorate
2 Source: ISD, Scottish Care Home Census (SCHC)
Figure 2 shows that the average number of residents per home has increased from 24 residents in March 2000 to 29 residents in March 2013. The average number of registered places per home shows a similar trend: it has risen from 27 places to 33 over the same time period. This could be due to the closure of some very small homes and the building of some large purpose built facilities in recent years. In March 2000, 48 per cent of care homes had 20 or fewer registered places, which compares to 36 per cent in March 2013.

The average occupancy at the census point in each year has remained at between 86 and 91 per cent between March 2000 and March 2013. It is important to note that the occupancy rate is likely to vary through the year and the figures represent a snapshot at a point in time. As at 31st March 2013 around 344 (27 per cent of homes) were operating at full capacity.

**Figure 2: Average Number of Registered Places per Home, Residents per Home and Percentage Occupancy, March 2000 – March 2013**
1.2 Information on Main Client Group of Residents in All Care Homes for Adults

Figure 3 presents information on the number of residents by the main client group of the care home. As at 31st March 2013, 32,888 (90 per cent) of residents were in care homes where the main client group was older people, a decrease from 34,433 in March 2000 (4 per cent).

Figure 3 demonstrates that the number of residents in care homes for adults with learning disabilities has decreased substantially from 3,295 in 2000 to 1,859 in 2013, a decrease of 44 per cent. This is in line with the recommendations outlined in the “The Same as You?” Report, published in May 2000 to ensure people stay in their own homes as far as possible. The number of care homes for adults with learning disabilities has fallen from 380 to 233 over the same time period. The Scottish Consortium for Learning Disability (SCLD) collects additional statistics on the provision of care for people with learning disabilities and can be accessed at the following website: [http://www.scld.org.uk/home](http://www.scld.org.uk/home). The data collected by SCLD and the Scottish Government shows that since 2001 the number of adults with learning disabilities receiving home care services has increased from nearly 1,500 in 2001 to 4,300 in 2011. Around 7,800 adults with learning disabilities now live in their own tenancies, an increase of over 3,500, since these data were first collected in 2003. Further information can be found at the following link: [http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/TrendLearningDisabilities](http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/TrendLearningDisabilities)

Figure 3: Number of Residents by Main Client Group\(^1\) of the Care Home, March 2000 – March 2013

\(^1\) Designated by the Care Inspectorate
1.3 Number of Care Homes, Registered Places and Residents for All Adults by Sector

Care homes are currently run either by the Local Authority/NHS, the private sector or by voluntary organisations.

As at 31\textsuperscript{st} March 2013:
- 199 (16 per cent) care homes were run by a Local Authority or by the NHS, providing 5,114 places to 4,334 residents.
- 716 (56 per cent) were privately owned providing 31,677 places to 26,926 residents.
- 367 (29 per cent) were in the voluntary sector providing 5,964 places to 5,318 residents.

Figure 4 presents information on the number of adult care homes over time by the sector providing care. The figures show that over time there has been a changing mix in terms of the sector providing care. Since March 2000 the number of care homes run by a Local Authority or by the NHS has fallen by 27 per cent, from 271 to 199. The number of care homes run by the private sector has fallen by 10 per cent, from 798 to 716. The largest fall has been in the voluntary sector, a fall from 600 to 367 (39 per cent) over the same time period.

**Figure 4: Number of Care Homes for All Adults by Sector, March 2000 – March 2013**
Figure 5 provides information on the number of registered places by the sector running the care home. Whilst the number of care homes provided in the private sector has fallen (see Figure 4), the number of registered places in the private sector has increased from 29,373 in March 2000 to 31,677 in March 2013, an increase of 8 per cent. The number of registered places in both the Local Authority/NHS and voluntary sectors has fallen steadily over time. Private sector care homes tend to be larger with an average registered capacity of 44 places, compared to an average registered capacity of around 25 places for Local Authority/NHS homes and 15 for voluntary sector care homes.

**Figure 5: Number of Registered Places for All Adults by Sector, March 2000 – March 2013**

Further information on the number of care homes, registered places and residents in each sector can be found through the following link: [Link to Excel Tables](#)
Section 2. Care Homes for Older People

As previously reported, at 31st March 2013, 90 per cent of residents in Scotland were in care homes whose main client group is older people. Ninety-five per cent of long stay residents in these care homes are aged 65 and over (see section 2.6). This section looks in more depth at those residents and includes information on:

2.1 Sector providing care
2.2 Type of care (long stay, respite, short stay)
2.3 Admissions and discharges of long stay residents
2.4 Source of admission for long stay residents
2.5 Destination on discharge for long stay residents
2.6 Age profile and selected characteristics (medically and non medically diagnosed dementia) of long stay residents
2.7 Length of stay of long stay residents
2.8 Average gross weekly charges for long stay residents

It is important to note that while a home has been classified as a home for older people it may also provide care for residents in other client groups.

Further information on care homes for older people can be found via the following link: Link to Excel Tables

2.1 Sector

Figure 6 shows that the number of residents in care homes for older people run by the private sector has increased from 24,337 in March 2000 to 25,503 in March 2013, an increase of 5 per cent. This increase has been more marked from March 2009 onwards. On the other hand the number of residents in both the Local Authority/NHS and the voluntary sectors has fallen steadily over time by 30 and 23 per cent respectively since March 2000. Private sector care homes for older people tend to be larger with an average registered capacity of 47 places, compared to an average registered capacity of around 30 places for both Local Authority/NHS and voluntary sector care homes.

Figure 6: Number of Residents in Care Homes by Sector for Older People, March 2000 – March 2013
2.2 Type of Care (long stay, respite, short stay)

As at 31\textsuperscript{st} March 2013 there were 31,752 long stay residents in care homes for older people accounting for 91 per cent of the total.

Figure 7 presents the number of long stay, short stay and respite care residents in care homes for older people. The number of short stay plus respite care residents has increased from 736 in 2003 to 1,136 in 2013, an increase of 54 per cent. Over the same time period the number of long stay residents has decreased from 33,566 in 2003 to 31,752 in 2013, a decrease of 5 per cent.

Figure 7: Number of Long Stay, Respite and Short Stay Residents in Care Homes for Older People, March 2003 – March 2013
2.3 Admissions and Discharges of Long Stay Residents in Care Homes for Older People

Figure 8 shows the trend in the annual number of long stay admissions, discharges and deaths throughout each census year in care homes whose main client group is older people. The number of admissions is clearly closely correlated with the number of discharges (including deaths), which lead to registered places becoming available. The number of long stay admissions in March 2004 was 14,433, compared to 13,044 in March 2013. The percentage of discharges that are recorded as deaths range from 69 per cent in March 2006 to 79 per cent for the most recent census period.

Figure 8: Number of Long Stay Admissions, Discharges and Deaths, Census period 2003 - 2013
Individual resident information is collected for long stay residents only. The remainder of this section will look at long stay residents in care homes where the main client group is older people.

### 2.4 Source of Admission of Long Stay Residents in Care Homes for Older People

Figure 9 shows the source of admission to care homes for long stay residents. This covers all long stay residents admitted in each census period between 2003 and 2013.

In the latest census period the largest proportion of residents were admitted to care homes from hospitals (50 per cent, which accounts for around 6,500 long stay resident admissions). The information gathered from the SCHC does not allow identification of the type of hospital a resident is admitted from. A further 33 per cent were admitted from their own home, which accounts for around 4,300 long stay residents. The distribution of all sources of admission has remained fairly steady since the March 2003 census.

**Figure 9: Source of Admission of Long Stay Residents in Care Homes for Older People, April 2003 – March 2013**

From 2003 to 2006, if Care Homes were unable to provide the information requested then data was imputed based on the results from similar care homes in their area. From 2007 onwards, the data is treated as a sample and percentages are calculated based on the data received with no imputation.
2.5 Destination on Discharge for Long Stay Residents in Care Homes for Older People

Figure 10 shows the destination of long stay residents who were discharged from care homes in each census period. In the latest census period, 79 per cent of discharges were due to deaths. A further 16 per cent were discharged to either another care home or hospital. Very few long stay residents (2.5 per cent) returned to their own home or supported accommodation / sheltered housing.

Figure 10: Destination on Discharge of Long Stay Residents in Care Homes for Older People, Census period 2003 – 2013

From 2003 to 2006, if Care Homes were unable to provide the information requested then data was imputed based on the results from similar care homes in their area. From 2007 onwards, the data is treated as a sample and percentages are calculated based on the data received with no imputation.
2.6 Age Profile and Selected Characteristics of Long Stay Residents in Care Homes for Older People

Figure 11 shows the age group of long stay residents over time in care homes for older people. Since March 2005, the numbers of long stay residents in the 75-84 age group has been steadily falling, from 11,958 to 10,159 in March 2013, a decrease of 15 per cent. Over the same time period the numbers of long stay residents in the 85-94 age group has been increasing at a similar rate from 12,961 to 14,275 in March 2013, an increase of 10 per cent.

Figure 11: The Number of Long Stay Residents in Each Age Group, March 2003 – March 2013

From 2003 to 2006, if Care Homes were unable to provide the information requested then data was imputed based on the results from similar care homes in their area. From 2007 onwards, the data is treated as a sample and percentages are calculated based on the data received with no imputation.

Figure 12 shows the number of long stay residents with dementia (both medically and non-medically diagnosed). The number of residents with medically diagnosed dementia has increased from 9,758 in March 2003 to 16,441 in March 2013, an increase of 68 per cent. Over the same time period the number of residents with a non medical diagnosis of dementia has fallen from 4,599 to 2,452, a decrease of 47 per cent. These figures reflect recent recommendations outlined in Scotland’s National Dementia Strategy\(^1\) to increase the numbers of people with a formal diagnosis of dementia. The overall number of residents with dementia has been increasing steadily since March 2005, although there has been a slight drop at the latest census.

From 2003 to 2006, if Care Homes were unable to provide the information requested then data was imputed based on the results from similar care homes in their area. From 2007 onwards, the data is treated as a sample and percentages are calculated based on the data received with no imputation.

Figure 13 shows the percentage of residents with dementia (both medically and non-medically diagnosed) within each age group as at 31st March 2013. In all age groups over 65 the percentage of long-stay residents with dementia has been increasing at similar rates in recent years. The largest increase has been in the 75-84 age group, which has increased from 44 per cent in March 2003 to 64 per cent in March 2013.

From 2003 to 2006, if Care Homes were unable to provide the information requested then data was imputed based on the results from similar care homes in their area. From 2007 onwards, the data is treated as a sample and percentages are calculated based on the data received with no imputation.
Further information on other resident characteristics can be found via the following link: [Link to Excel Tables](#).

## 2.7 Length of Stay for Long Stay Residents in Care Homes for Older People

For the Scottish Care Home Census the length of stay has been calculated in two different ways - 'complete' or 'incomplete'. A 'complete' length of stay is calculated for any resident who left the care home during the year prior to the census point (it does not include those residents who were still in the care home at the census point). An 'incomplete' length of stay is calculated for everyone who is resident in the care home on the census date and calculates the length of time the individual has been resident in the care home up to the census point. The figures are based on length of stay within a particular care home and will not take account of length of stay in previous care homes.

Figure 14 presents information on both complete and incomplete length of stay for long stay residents in care homes for older people. These data have been collected since 2003. The median complete length of stay has remained fairly constant across the period. The median incomplete length of stay has, with the exception of March 2006, been steadily increasing since March 2003.

**Figure 14: Length of Stay (years) for Long Stay Residents in Care Homes for Older People**

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<tr>
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<td>3.0</td>
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From 2003 to 2006, if Care Homes were unable to provide the information requested then data was imputed based on the results from similar care homes in their area. From 2007 onwards, the data is treated as a sample and percentages are calculated based on the data received with no imputation.
2.7 Average Gross Weekly Charge for Long Stay Residents in Care Homes for Older People

This section looks at average weekly charges for long stay residents in care homes where the main client group is older people.

From March 2006 the Scottish Care Home Census has required care homes to supply a breakdown of the different charges applied to long stay residents in four different categories as follows:

- Publicly funded, without nursing care
- Publicly funded and receiving nursing care
- Self funders, without nursing care
- Self funders and receiving nursing care

Publicly funded residents are those whose capital is less than £24,750. Publicly funded residents with capital less than £15,250 make no contribution to fees. Those with capital between £15,250 and £24,750 contribute to care home fees from their pensions and any other income and Local Authorities fund the balance. The fees for publicly funded residents are covered in the National Care Home Contract (NCHC), which was developed and introduced in 2007/2008. The rationale for developing the NCHC was to standardise the terms, conditions and fees for publicly funded clients, and to incentivise improvements in quality. The Convention of Scottish Local Authorities (COSLA) negotiates annually with Scottish Care, the representative body of the independent care home sector, to review the terms of the contract and set appropriate and consistent fee levels across Scotland for publicly funded clients.

Self funders are residents with capital, including property, worth £24,750 or more. The resident must meet his or her care costs in full (over and above any assessed entitlement to free personal and nursing care).

Weekly costs include any money received from the resident, relations or third parties. It also includes any money received from Local Authorities or Health Boards whether for personal care, nursing care or accommodation costs.

Figures 15 and 16 show the average charges across Scotland for long stay residents in each of the above categories. At the 31st March 2013 census the average weekly charge for publicly funded long stay residents was £487 per week without nursing care and £566 per week with nursing care, in line with the rates agreed in the National Care Homes contract (see glossary for further explanation). The average weekly charge for self-funding residents was £658 per week without nursing care and £726 per week with nursing care.

Further information at Local Authority level for the average weekly charges for self funders can be found via the following link: Link to Excel Tables. It is important to note that any comparisons between Local Authority areas should be interpreted with caution. Charges may vary for a variety of reasons such as size of rooms or those with or without en-suite facilities. The charging information presented in this publication does not distinguish between these factors. Please also note that for self funders charges are agreed on a contractual basis between the individual and the care home provider.

As there are now National Standard Rates for publicly funded residents this information is not presented by Local Authority area.
Figure 15: Average Weekly Charge in Care Homes for Long Stay Residents in Care Homes for Older People by Source of Funding and Whether Nursing Care Required, March 2007 - March 2013

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<td>All Funded - With Nursing Care</td>
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<td>£540</td>
<td>£577</td>
<td>£598</td>
<td>£617</td>
<td>£632</td>
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1. Residents with capital of less than £24,750 (at 31st March 2013). Publicly funded residents with capital less than £15,250 make no contribution to fees. Those with capital between £15,250 and £24,750 contribute to the care home fees from their pensions and any other income and the local authority funds the balance.

2. Self funders are residents with capital, including property, worth £24,750 or more. The resident must meet his or her care costs in full (over and above any assessed entitlement to free personal and nursing care).

Figure 16: Average Weekly Charges for Long Stay Residents in Care Homes for Older People by Funding Source
Section 3 Care Homes for Other Main Client Groups

This section contains summary information on care homes for the other main client groups as follows: adults with physical disabilities, adults with mental health problems and adults with learning disabilities. As at 31st March 2013 there were:

- 44 care homes for adults with physical disabilities providing 669 places to 554 residents.
- 71 care homes for adults with mental health problems providing 1,135 places to 1,032 residents.
- 233 care homes for adults with learning disabilities providing 2,125 places to 1,859 residents.

This section looks in more depth at those residents and includes information on:

3.1 Sector providing care
3.2 Type of care (long stay, respite care, short stay)
3.3 Age profile of long stay residents
3.4 Length of stay of long stay residents

3.1 Sector Providing Care

As at 31st of March 2013 there were:

- 410 adults with physical disabilities in voluntary sector care homes, 124 in private sector care homes and 20 in LA/NHS sector care homes.
- 429 adults with mental health problems in voluntary sector care homes, 576 in private sector care homes and 27 in LA/NHS sector care homes.
- 965 adults with learning disabilities in voluntary sector care homes, 695 in private sector care homes and 199 in LA/NHS sector care homes.

Figure 17 shows that for all other main client groups the majority of residents as a proportion of the total were in care homes run by the voluntary sector with the highest proportion in care homes for adults with physical disabilities (74 per cent). This is in contrast to care homes where the main client group is older people where the majority of residents are in care homes run by the private sector (see Figure 6).

Figure 17: Number of Residents in Care Homes by Sector for Other Main Client Groups, as at 31st March 2013
3.2 Type of Care (long stay, respite, short stay)

Figure 18 presents the number of long stay residents in care homes for other main client groups. The number of long stay residents in care homes where the main client group is adults with learning disabilities has declined since 2003 (36 per cent). The numbers of long stay residents in homes for adults with mental health problems has shown a slight decline overall. The numbers of long stay residents in homes for adults with physical disabilities has remained the same.

**Figure 18: Number of Long Stay Residents in Care Homes for Other Client Groups, March 2003 to March 2013**

Figure 19 provides information on the types of admissions for the census period April 2012 to March 2013. It shows that 39 per cent (13,044) of admissions to care homes for older people were classed as long stay. This compares to only 1 per cent in care homes for adults with learning disabilities and 3 per cent in care homes for adults with physical disabilities, where the majority were admissions for respite care.

**Figure 19: Number of Admissions to Care Homes Between April 2012 and March 2013 by Resident Type and Main Client Group**
3.3 Age Profile of Long Stay Residents

Figure 20 provides a summary by age group of long stay residents in care homes for the other main client groups at 31st March 2013. Twenty-five per cent of long stay residents in care homes where the main client group is adults with physical disabilities were aged between 45 and 54. Just over a quarter of residents in care homes where the main client group was adults with mental health problems were aged over 65.

Figure 20: The Number of Long Stay Residents in Each Age Group, as at 31st March 2013
3.4. Length of Stay of Long Stay Residents

Figure 21 shows the incomplete length of stay for long stay residents in care homes for the other main client groups compared to care homes for older people. Seventy-two per cent of long stay residents in care homes where the main client group was learning disabilities had been resident in the care home for 5 years or more. This compares to 42 per cent in care homes where the main client group is adults with mental health problems and 18 per cent in care homes for older people.

Further information on the other main client groups can be found via the following link: Link to Excel Tables
Glossary

**Long Stay Residents:** Long-stay residents are those whose intention when they entered the home was to stay as a permanent resident, regardless of how long they stayed. It may be that some residents enter the home with the intention of only staying for a short time. If you have any residents whose intention was only to stay for a short time but have been resident for more than six weeks, then these residents should be counted as long-stay residents for the purposes of this census.

**Respite residents:** Respite residents are those whose predominant reason for admission was to provide respite or holiday relief for the resident and for their carer. Periods of respite will normally be short, overnight or for a weekend or a few weeks at the most.

**Short-stay residents:** Residents are counted as short stay if
1. their intention at admission was to stay less than six weeks; and
2. at the time of the census or their discharge they did in fact stay less than six weeks; and;
3. the predominant reason for admission was not respite care.

**Mean:** The mean is an average of a set of data, e.g. the numbers of residents in a set of care homes. The mean is the grand total divided by the number of data points, e.g. the average number of residents per home in a set of care homes.

**Median:** The median is the middle value in a sample sorted into ascending order. If the sample contains an even number of values, the median is defined as the average of the middle two.

**Complete Length of Stay:** A 'complete' length of stay is calculated for anyone who has left the care home during the year prior to the census. It will include residents who were in the home for short lengths of stay as well as those who had been in the home a long time.

**Incomplete Length of Stay:** An 'incomplete' length of stay is calculated for everyone resident in the home at the census date and covers the length of time the individual has been resident in the home up to the census point. These figures are based on length of stay within a particular care home and will not take account of length of stay in previous care homes.

**Publicly funded:** Residents with capital of less than £24,750 (at 31st March 2013). Publicly funded residents with capital less than £15,250 make no contribution to fees. Those with capital between £15,250 and £24,750 contribute to care home fees from their pensions and any other income and Local Authorities fund the balance.

The fees for publicly funded residents are covered in the National Care Home Contract (NCHC), which was developed and introduced in 2007/2008. The rational for developing the NCHC was to standardise the terms, conditions and fees for publicly funded clients, and to incentivise improvements in quality. The Convention of Scottish Local Authorities (COSLA) negotiates annually with Scottish Care, the representative body of the independent care home sector, to review the terms of the contract and set appropriate and consistent fee levels across Scotland for publicly funded clients.
**Self funders**: Residents with capital, including property, worth £24,750 or more. The resident must meet his or her care costs in full (over and above any assessed entitlement to free personal and nursing care).
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<td>Table 1</td>
<td>Care Homes, Registered Places, Residents and Occupancy by Main Client Group</td>
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<td>Table 2</td>
<td>Care Homes, Registered Places, Residents and Occupancy by Sector</td>
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<td>Table 3</td>
<td>Local Authority Comparison, by Main Client Group</td>
<td>March 2000 – March 2013</td>
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<td>Table 4</td>
<td>Local Authority Comparison, by Main Client Group and Sector</td>
<td>March 2000 – March 2013</td>
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<td>Table 5</td>
<td>Comparison For a Selected Local Authority and Main Client Group (All adults and Older people only)</td>
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<td>Table 6</td>
<td>Information at Scotland level on Residents in Care Homes (All Adults and Older People)</td>
<td>March 2003 – March 2013</td>
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<td>Table 7</td>
<td>Local Authority Level: Weekly Charges</td>
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<td>Table 8</td>
<td>Information on Long Stay Residents in Care Homes (All Adults and Older People)</td>
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<td>Table 9</td>
<td>Information on Long Stay Residents in Care Homes (All Adults and Older People)</td>
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<td>Table 10</td>
<td>Information on Long Stay Residents in Care Homes (All Adults and Older People)</td>
<td>March 2003 - March 2013</td>
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<td>Table 11</td>
<td>Local Authority Comparison for Selected Key Statistics (Types of Residents and Resident Characteristics)</td>
<td>March 2003 - March 2013</td>
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<td>Table 12</td>
<td>Local Authority Comparison for Selected Key Statistics (Age, Gender and Length of Stay)</td>
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<td>Table 13</td>
<td>Information for Scotland (Other Main Client Groups)</td>
<td>March 2003 - March 2013</td>
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<td>Table 14</td>
<td>Registered Places by Local Authority per 1,000 Population Aged 65+, Care Homes for Older People, Comparison Between 2000 and 2012</td>
<td>March 2000 and March 2013</td>
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Further Information
Further information can be found on the ISD website

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Appendix

A1 – Background Information

The Scottish Care Home census is intended to cover all adult care home establishments that are registered with the Care Inspectorate. The Care Inspectorate is responsible for regulating a wide range of social services and was established under the Regulation of Care (Scotland) Act 2001.

This census was first issued in March 2003 and replaced two previous surveys. It combined the former ‘Residential Care Home Census – R1’ (run by the Scottish Government) and the ‘Private Nursing Homes Census’ (run by ISD Scotland). In March 2006 some of the data collection, relating mainly to care home places, was taken over by the Care Inspectorate. Therefore, this publication excludes tables relating to places in single rooms, en-suite places and occupancy rates that have been published in statistics releases prior to 2006.

Prior to 2010, most census forms were printed and returned to the Scottish Government as paper forms. From 2010, Care Inspectorate collected this information on behalf of the Scottish Government using their web based “eforms” system, though some Care Homes continued to return the survey electronically (using an Excel spreadsheet) direct to the Scottish Government.

For the census periods between 2003 and 2006 where census forms were not submitted the data was imputed. The average response rates in those years averaged at around 75 per cent. If resident details were missing from a particular home, a ‘similar’ home was identified, based on size and client group, for which resident details were available and the details of the missing records were estimated from these. From 2007 onwards, the data is treated as a sample and percentages are calculated based on the data received with no imputation. Further work will be considered to explore the benefits of different imputation options.

Feedback

In August 2011 Information Services Division (ISD) sent out a feedback survey to all care homes for adults in Scotland. The survey looked at ease of completing the Care Home Census, the usefulness of the guidance, the time taken to complete the census and any general comments. The findings from the survey are contained in this report.

A summary report on the uses of the Care Home Census information is available in this report.

The following report published in 2012 outlines issues relating to the quality/reliability of the Scottish Care Home Census statistics: Quality reliability summary.

A2 – Publication Metadata (including revisions details)

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<td>Description</td>
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<td>Frequency</td>
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<td>Continuity of data</td>
<td>Prior to 2010, most census forms were printed and returned as paper forms. From 2010, the Care Commission collected this information on behalf of the Scottish Government using their eforms system, though some Care Homes continued to return the survey electronically (using an Excel spreadsheet) direct to the Scottish Government. The data has largely gone unchanged.</td>
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<td>Revisions statement</td>
<td>Validation checks on historical (previously unpublished) data have highlighted some inaccuracies. These have been revised and noted in the relevant tables. The revisions have a very limited impact on overall findings.</td>
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<td>Revisions relevant to this publication</td>
<td>See above</td>
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<td>Concepts and definitions</td>
<td>Care Home Census data supplier guidance: <a href="http://www.isdscotland.org/Health-Topics/Health-and-Social-Community-Care/Care-Homes/Census/">http://www.isdscotland.org/Health-Topics/Health-and-Social-Community-Care/Care-Homes/Census/</a></td>
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<td>Relevance and key uses of the statistics</td>
<td>The results from the Scottish Care Homes Census are used by the Scottish Government, Local Authorities, private and voluntary service providers, academics and members of the public to get a clear picture of Care Home provision across Scotland. The information is used to look at the scale of Care Home provision across the country and to plan for the future.</td>
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<td>Accuracy</td>
<td>The data returns are cross checked with the Care Commission Registration details to validate the number of beds etc. The data is also checked against previous years submissions and any anomalies are discussed with the Care Home concerned.</td>
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<td>Completeness</td>
<td>For the aggregate data full or partial responses were received from 1,189 care homes giving a response rate for the survey of 93 per cent. For those homes who do not complete the census, data has been imputed either from</td>
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the previous year or based on an average for the size and type of home (e.g. older people, mental health etc.). Long stay resident information was supplied by 86 per cent of the long stay population.

Comparability
The Scottish Government also collect information on a quarterly basis on the number of residents aged 65+ supported by local authorities in care homes and those receiving free nursing and personal care (http://www.scotland.gov.uk/Resource/Doc/317110/0100996.pdf).

The Scottish Care Home Census collects information on all adult residents in care homes regardless of their funding source and age.

The Care Inspectorate’s Annual return. NHS Continuing Care census.

Accessibility
It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines.

Coherence and clarity
The publication includes sections on Introduction/background and key findings. The data is presented in tabular format.

Value type and unit of measurement
Number, Percentage, Mean, Median

Disclosure
The ISD protocol on Statistical Disclosure Protocol is followed.

Official Statistics designation
National Statistic (legacy)

UK Statistics Authority Assessment
Awaiting assessment by UK Statistics Authority

Last published
October 2013

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Date of first publication
March 2004

Help email
nss.carehomecensus@nhs.net

Date form completed
14/10/2013
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)
A4 – ISD and Official Statistics

About ISD

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.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

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

**Mission:** Better Information, Better Decisions, Better Health

**Vision:** To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of ‘Official Statistics’. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD’s statistical publications are currently classified as one of the following:

- National Statistics (i.e. assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (i.e. legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (i.e. still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD’s statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the ISD website.