

The background is that we've been shouting about the need for better statistics for the last couple of years. We've done so through reports on social care statistics in [England \(https://statistics.helpful.ws/publication/report-on-adult-social-care-statistics-in-england/\)](https://statistics.helpful.ws/publication/report-on-adult-social-care-statistics-in-england/), [Scotland \(https://statistics.helpful.ws/publication/adult-social-care-in-scotland/\)](https://statistics.helpful.ws/publication/adult-social-care-in-scotland/) and [Wales \(https://statistics.helpful.ws/publication/adult-social-care-review-wales-report/\)](https://statistics.helpful.ws/publication/adult-social-care-review-wales-report/). We've done it through presentations and I've taken the opportunity to highlight it when I've given evidence at the [Public Administration Committee in the House of Commons \(https://uksa.statisticsauthority.gov.uk/submission/office-for-statistics-regulation-correspondence-to-the-public-administration-and-constitutional-affairs-committee-regarding-cases-deaths-from-covid-19/\)](https://uksa.statisticsauthority.gov.uk/submission/office-for-statistics-regulation-correspondence-to-the-public-administration-and-constitutional-affairs-committee-regarding-cases-deaths-from-covid-19/).

Certainly, we found some excellent allies in [Future Care Capital \(https://osr.statisticsauthority.gov.uk/nobody-cares-how-much-you-know-until-they-know-how-much-you-care/\)](https://osr.statisticsauthority.gov.uk/nobody-cares-how-much-you-know-until-they-know-how-much-you-care/) and the [Nuffield Trust \(https://osr.statisticsauthority.gov.uk/adult-social-care-statistics-across-great-britain-the-power-and-potential-for-change/\)](https://osr.statisticsauthority.gov.uk/adult-social-care-statistics-across-great-britain-the-power-and-potential-for-change/), yet it has sometimes felt like we're in the minority, shouting in the wilderness.

What were our concerns? Our research in 2020 highlighted that there were several challenges and frustrations related to adult social care data that were common to England, Scotland and Wales. Our [report \(https://osr.statisticsauthority.gov.uk/publication/adult-social-care-statistics-summary-report-for-great-britain/\)](https://osr.statisticsauthority.gov.uk/publication/adult-social-care-statistics-summary-report-for-great-britain/) summarising the common features of the statistics across Great Britain highlighted four key needs to help both policymakers and individuals make better informed decisions about social care:

- Adult social care has not been measured or managed as closely as healthcare, and a lack of funding has led to under investment and resourcing in data and analysis.
- There is an unknown volume and value of privately funded provision of adult social care. Although data is collected from local authorities, this only covers activities that they commission and fund, which constitute a smaller proportion of total adult social care activity.
- Robust, harmonised data supply to ensure comparable statistics from both public and private providers is problematic, as data collection processes are not always standardised. Furthermore, data definitions might not always be consistent across local authorities and other providers.
- Data quality is variable within and across local authorities, with inconsistent interpretation of data reporting guidance by local authorities. This means that data isn't always reliable and so users have difficulty trusting it.

As data issues go, as the pandemic has highlighted, there is not so much a gap as a chasm, with consequences to our understanding of social care delivery and outcomes.

Most people we've talked to, inside and outside the UK's governments, recognise these issues. But to date there hasn't been much evidence of a sustained desire to inject energy into the system to effect change.

Maybe, though, there are glimmers of light. Whilst this list is not meant to be exhaustive, I would like to draw attention to some initiatives that have caught my eye.

- The first comes from an extremely negative space. That is the pandemic's impact on those in care homes. Not only has the pandemic highlighted the importance of care and care workers, it has also led to much more interest in data about the care home sector. The Care Quality Commission and the Office for National Statistics (ONS) collaborated to publish timely information on the numbers of [deaths in care homes \(https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/numberofdeathsincareshomesnotifiedto\)](https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/numberofdeathsincareshomesnotifiedto), to shine a light on the impact of the pandemic for this vulnerable population. And DHSC has commenced the publication of a monthly statistics [report on Adult social care in England \(https://www.gov.uk/government/collections/monthly-statistics-for-adult-social-care-england\)](https://www.gov.uk/government/collections/monthly-statistics-for-adult-social-care-england) to fill a need for information on the social care sector itself. This means that COVID-19 has resulted in people listening to analysts and statisticians when we raise the problem with social care data now. Of course, the questions people are interested in go well beyond COVID-19.
- The Department for Health and Social Care's [draft data strategy \(https://www.gov.uk/government/publications/data-saves-lives-reshaping-health-and-social-care-with-data-draft\)](https://www.gov.uk/government/publications/data-saves-lives-reshaping-health-and-social-care-with-data-draft) for England makes a significant commitment to improving data on adult social care.
- [The Goldacre Review \(https://www.gov.uk/government/news/new-review-into-use-of-health-data-for-research-and-analysis\)](https://www.gov.uk/government/news/new-review-into-use-of-health-data-for-research-and-analysis) for data in England may present a further opportunity for improvement.
- I was pleased to [restore the National Statistics designation \(https://osr.statisticsauthority.gov.uk/correspondence/ed-humpherson-response-to-sandra-tudor-national-statistics-designation-for-local-authority-revenue-expenditure-and-financing-budget-statistics-england/\)](https://osr.statisticsauthority.gov.uk/correspondence/ed-humpherson-response-to-sandra-tudor-national-statistics-designation-for-local-authority-revenue-expenditure-and-financing-budget-statistics-england/) to the Ministry of Housing, Communities and Local Government's statistics report about local authority revenue.
- Beyond the pandemic, [ONS \(https://www.ons.gov.uk/\)](https://www.ons.gov.uk/) is working in collaboration with Future Care Capital to shine a light on one of the biggest data gaps here: the private costs borne by individuals and families for care. And ONS has recently published estimates of [life expectancy in care homes \(https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/lifeexpectancies/articles/lifeexpectancyincarehomeseng\)](https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/lifeexpectancies/articles/lifeexpectancyincarehomeseng) prior to the pandemic.
- Adult social care remains high on the political agenda in Scotland, with the recently published independent review of adult social care by the Scottish Government and the inquiry by Scotland's Health and Sport Committee.
- The Welsh Government remains committed to improving the data it captures on social care.

It's far too early to declare "problem solved", but we ought to be optimistic about improvements to data as a consequence. We'll be reviewing the actions currently underway as statistics producers react to the gaps in social care statistics highlighted by the pandemic and publishing a comprehensive report of our findings in the autumn.

What I do think is that there is an opportunity here – if statistics producers across the UK are willing to take it, we can anticipate much better statistics on this sector. And a much better understanding of the lives and experiences of citizens who receive, and provide, social care.