

ANNEX A: Assessment Workstream - Sources of Information

Points raised by the Group under their discussion on sources of information, for consideration in the development of an advice note, included:

- Data / information held in health records may not be relevant or useful for assessment purposes as not for that purpose.
- There may be assumptions that data already exists in a format that is fit for purpose and links together with all the individual's other data, but in reality interfaces between different parts of the health and social care record are often poor.
- Within health records individuals have a unique identifier. ISD (Information Services Division) are cleaning health datasets, but there is still a poor interface with social care records.
- The lack of common datasets means it is difficult to link DWP records to health records.
- With social care records, people who fall under the threshold for eligibility, which is stringently high in some areas, will not appear on the system at all.
- You cannot safely correlate the amount of social care a person gets with degree of need. Cuts to social care packages can result in greater need.
- There is a high level of inconsistency in social care data between Local Authorities.
- People may not be taking up entitlement, e.g. if they are following a Self-Directed Support type model.
- Caution needs to be taken with mental health data; there are layers of complexity.
- Need to take data security into account.
- Need to take data protection principles into account – e.g. need to be clear why personal data is being collected and hold it within Data Protection Act timescales / rules.
- Need to distinguish what the data is needed for, e.g. to verify ID (once and done) or eligibility.
- There could be a set of principles around the collection and holding of data, e.g.: least possible evidence to get a decision; quickest possible evidence; ranking of evidence e.g. person's own evidence first.
- Could people 'own' more of their own data records? Need to consider status of data which is owned by the person claiming the benefit, e.g. Occupational Health records are fully owned by the individual.
- Need to consider person's control over their own information – may choose not to disclose / not to allow sharing.
- Need to consider the status of data / evidence from friends / family / carers, and the permissions required to obtain this.
- Need to consider the role of carer / individual diaries in recording unmet need e.g. 'I would have gone swimming but I couldn't.'
- If corroboration is required it should be from closest possible person to individual. Consider appropriate balance between self-evidence and requiring corroboration.

Summary of Actions from this Meeting

Number	Action	Action For	Action By
DACBEAG5 Action 1	The individual Group members identified to work on agency recruitment and operations to hold an initial meeting with the chair, deputy chair and secretary to discuss their input and briefing needs.	LG, EdA, JH, JMcG, SW, JMcC, NR.	asap following meeting.
DACBEAG5 Action 2	Liaise with officials to be clear where they and the Minister want the Group's input and identify areas where the Group can add value around agency recruitment and operations.	LG, EdA, JH, JMcG – with input from whole Group where appropriate.	asap following meeting and ongoing.
DACBEAG5 Action 3	Respond to officials' report back on learning from first round of recruitment.	LG, EdA, JH, JMcG – with input from whole Group.	Following report back at the August meeting.
DACBEAG5 Action 4	Obtain early sight of the charter research plan and seek clarity on officials / the Minister's ask re the Group's input.	Secretariat, SW	end February
DACBEAG5 Action 5	Convey information to Group members and identify suitable members to form charter workstream.	Secretariat, SW, Group members	mid March
DACBEAG5 Action 6	Consider the convening of non-Group members whose expertise would add value to the charter workstream. Ensure the basis of their involvement is clear and transparent.	Secretariat, SW, identified workstream members	end March
DACBEAG5 Action 7	Prepare advice note to Ministers from the assessment workstream on sources of information, with further input from assessment workstream members.	TB, Group members, assessment workstream members	Complete following assessment workstream meeting on 22 Feb. [DN: agreed following meeting].
DACBEAG5 Action 8	The individual Group members identified to work on Carer's Allowance Supplement to meet programme officials.	FC, LG, JP	Make initial contact early Feb
DACBEAG5 Action 9	Invite officials responsible for programme evaluation to next Group meeting, and consider development of a workstream.	Secretariat	Next meeting
DACBEAG5 Action 10	Plan self-review / team building for August meeting or separate date in summer.	Secretariat, chair, deputy chair	next meeting
DACBEAG5 Action 11	Discuss Group resourcing with officials / Minister	Chair	Early Feb