Introduction

This Statistics Release presents the latest national figures for Social Care services provided or purchased by Local Authorities in Scotland. These services give people the support, practical help and personal care that they need to live as independently as possible within their community.

All 2017 figures presented in this publication are provisional. This is because Angus council was unable to submit their data in time for publication and so the 2016 Angus council figures have been used to create the total Scotland figures.

The introduction of Self-Directed Support (SDS) means that everyone eligible for social care and support has the right to make informed choices on what their support looks like and how it is delivered, making it possible to meet agreed personal outcomes. This has resulted in changes to the way that Social Care information is recorded across Scotland. However, it should be noted that some clients such as those receiving reablement or crisis care support may not be able to make choices regarding their services or support. This report presents information on:

- Home Care
- Community Alarm / Telecare and
- Direct Payments (now SDS “Option 1”)

A separate report on Self-directed Support was published in July 2017, which can be found here: http://www.gov.scot/Publications/2017/07/1120. This will be updated in 2018.
Figure 1: Home Care clients, 2001 to 2017¹

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

Figure 2: Clients receiving Direct Payments, 2001 to 2017¹

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

There are three sections to the report:
1. A summary of clients of all ages receiving Social Care services in Scotland
2. Service-level information on older people, aged 65+, receiving Social Care services
3. Service-level information on working age adults, aged 18 to 64.
Key points

All of the figures presented have been rounded to the nearest 10, 100 or 1,000.

- The number of people purchasing services through **Self-Directed Support (all options)** has increased by 57% to 83,770 over the last financial year.

- There were **59,640 people in Scotland receiving Home Care services** in March 2017, a slight decrease compared to the previous year. These people received **696,600 hours of Home Care** during the census week, a 3% increase from March 2016.

- In the financial year 2016-17, **128,750 people received Community Alarms and/or Telecare services**; an increase of 2% compared with 2015-16.

- Councils are increasingly purchasing services from the private and voluntary sector rather than providing it themselves. In 2017, under half (47%) of Home Care clients received a service **solely from their Local Authority**, compared to nearly three-quarters (71%) in 2008.

- **The number of people choosing a Direct Payment** to purchase the services they require continues to increase, with 8,290 clients and an estimated £113.3 million spent during the 2016-17 financial year.

Figure 3 shows the trend in Home Care clients and hours provided in the last 10 years. The number of Home Care clients has decreased slightly over the last three years. However, the number of Home Care hours (excluding 24/7 care) has increased in the last year, following a decrease between 2015 and 2016.

**Figure 3: Home Care (a) clients and (b) hours provided during the census week, 2008-2017**

![Home Care chart](chart.png)

Note: 24/7 care has been excluded under the Home Care definition used since 2013. Two lines are provided in this chart for Home Care hours to provide comparability. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

The number of people in receipt of Direct Payments has continued the same trend as previous years, increasing from an estimated 7,530 in 2015-16 to 8,290 in 2016-17 (Figure 4). Expenditure on Direct Payments has also increased, from an estimated £94.5 million in 2015-16 to an estimated £113.3 million in 2016-17.

**Figure 4: Direct Payments (SDS option 1), clients and expenditure, financial year 2007-08 to 2016-17¹**

¹ Direct Payments totals include an estimate for East Renfrewshire council in 2014/15 and Angus council in 2016/17, and an estimate for Angus council in 2015/16 for Value of Payments only - see 5.5 (background notes).

2. Social Care Summary Information

Age and gender

Figure 5 shows that most social care clients tend to be in older age groups and that the proportion of clients who are female increases with age. The 18-64 age group (covered in Section 4 of this report) is almost evenly split between male and female. For clients aged 65+, (covered in Section 3 of this report) 66% are female and 34% are male.

This may be due to many factors, including women’s higher life expectancy and women being more likely to live alone as they get older. Figure 5 also shows that the 0-17 age group accounts for less than 2% of clients. Due to potential disclosure issues with small numbers there is no section focusing on 0-17 year olds in this report.

Figure 5: Age and gender of Social Care clients, 2017¹

![Bar chart showing age and gender distribution](image)

Note: Total of 212,220 clients. Gender information was unavailable for 4 clients under the age of 65.

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

Source: Scottish Government Social Care Survey 2017

Ethnicity

Of all 2017 Social Care clients for whom ethnicity information was known, 98% were recorded as being “White”, with 2% in other ethnic groups (Table 1).

Table 1: Ethnicity of Social Care clients, 2017

<table>
<thead>
<tr>
<th>Ethnic Group</th>
<th>Clients¹</th>
<th>Percentage²</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>150,000</td>
<td>98.1%</td>
</tr>
<tr>
<td>Other ethnicity</td>
<td>2,950</td>
<td>1.9%</td>
</tr>
</tbody>
</table>

¹ Ethnicity information was unavailable for 59,270 clients. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

² Percentages are based on client figures rounded to the nearest ten and are given to nearest percentage point.

Source: Scottish Government Social Care Survey 2017
Living arrangements (Home Care clients aged 18+)

Home Care clients are more likely to be living alone as they get older: 55% of those aged 65+ were living alone, compared with 40% of those aged 18-64 (Figure 6).

**Figure 6: Living arrangements of Home Care clients aged 18+, 2017**

Based on 37,120 Home Care clients aged 18+. There were 22,520 cases with no data on Living Arrangements.  
*2017 Scotland figures are provisional as Angus council figures relate to 2016.*  
*Source: Scottish Government Social Care Survey 2017*
Client Group

Figure 7 shows the breakdown of Social Care clients by client group: the reason for needing a social care service. This shows that the largest groups are “Frail Older People” and “Physical Disability”.

**Figure 7: Client Group of clients receiving Social Care services, 2017**

![Bar chart showing client group distribution]

- Total of 212,220 clients
  1 Dementia is known to be under recorded in the social care management information system.
  2 Other includes addictions, palliative care and carers.
2017 Scotland figures are provisional as Angus council figures relate to 2016.
Source: Scottish Government Social Care Survey 2017

Figure 8 shows the breakdown of 2017 Social Care clients by age and client group. Almost all of the clients receiving a service due to being frail and elderly (100%) or due to dementia (98%) are aged 65 and over, while the majority of those receiving a service due to Mental Health (67%) or a Learning Disability (85%) are aged under 65.
Figure 8: Proportion of Social Care clients aged (a) under 65 and (b) 65+, by client group, 2017

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016. Source: Scottish Government Social Care Survey 2017

Home Care service provision

Over the past ten years Local Authorities have increasingly purchased Home Care from the private and voluntary sector, rather than providing services directly themselves. In March 2017, 47% of clients were receiving services provided solely by Local Authority staff (Figure 9). This proportion has been decreasing each year since 2008. The proportion of Home Care hours being provided by Local Authority staff was 30% in March 2017 and has again decreased every year since 2008. The difference between these proportions reflects the fact that the private and voluntary sectors, on average, provide larger packages of care.
Figure 9: Home Care provision by Service Provider, 2008 to 2017\(^1\) (all ages)

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

Age breakdown for key services covered in this report

Figure 10 shows the age distribution of clients receiving different social care services. These services are mainly used by older people. However, over a third of people who receive Housing Support are aged under 65.

Figure 10: Key services by age, 2017\(^1\)

From 2013, Local Authorities were asked to class 24-7 care as Housing Support, not Home Care.

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.
Source: Scottish Government Social Care Survey 2017
Age breakdown for Self-directed Support options

Figure 11 shows the age breakdown of clients purchasing services through the different Self-Directed Support options (see background section 5.3 for more information on the different options available).

People purchasing services through option 3 (where services are arranged by the Local Authority) tend to be older whereas people purchasing services using Direct Payments (option 1) tend to be younger, with 16% of those choosing Direct Payments under the age of 18.

Figure 11: Self-directed Support clients, by age, 2017

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.
Source: Scottish Government Social Care Survey 2017
Local Authority comparison: Rates per 1,000 population

Figure 12 gives an overview of how service provision varies across Scotland for Home Care while figure 13 gives an overview of the number of people using Direct Payments to purchase services across Scotland.

Note that while these charts enable comparisons to be made between Local Authorities, they should not be considered as a “ranking” as they will reflect the different demographics in each area and demand for services. There are several factors that can affect levels of recorded service provision, such as differing proportions of elderly people (who will be more likely to require Social Care services) and different levels of deprivation. Such variations are reflected in the funding formulae used to allocate resources to Local Authorities.

Figure 12: Clients receiving Home Care per 1,000 population, by Local Authority, 2017

1. 2017 figures for Angus are provisional and relate to 2016. Figures are presented as rate per 1,000 population.
2. Adult Social Care in Highland is delivered by the Health board through a lead agency model.
Source: Scottish Government Social Care Survey 2017
Figure 13: Clients receiving Direct Payments per 1,000 population, by Local Authority, 2017

1. 2017 figures for Angus council are provisional and relate to 2016. Figures are presented as rate per 1,000 population.
2. Adult Social Care in Highland is delivered by the Health board through a lead agency model.
Source: Scottish Government Social Care Survey 2017

Meals Services

Data on Meals services provided at home has proved difficult for Local Authorities to capture, and as such the figures presented here; i) are likely to be lower than the true figures, and ii) should not be compared with previous years’ figures to gauge changes in provision. There were 6,390 people recorded as receiving Meals services at the 2017 census. Figure 14 shows that most clients who received meals services were in the older age groups, while the majority (65%) received hot meals rather than frozen meals.
Figure 14: Clients receiving Hot or Frozen Meals¹, by age, 2017

1 Some clients receive both hot and frozen meals.
2 Three Local Authorities did not submit Meals data for 2017. Direct comparisons should not be made with previous years.
3 2017 Scotland figures are provisional as Angus council figures relate to 2016.

Source: Scottish Government Social Care Survey 2017

**Housing Support**

Data on Housing Support was presented for the first time in 2015. Housing Support includes services such as assistance with claiming welfare benefits, filling in forms, managing budgets and help with shopping and housework. In previous years there has been some overlap in the definitions of Housing Support and Home Care used in recording by some Local Authorities; from 2013 Local Authorities were asked to record Live-in and 24/7 services as Housing Support and not Home Care. **Note that around 82% of Housing Support clients were recorded as also receiving another Social Care service, while for 15 Local Authorities this figure was 100%. This suggests that there are likely to be other Housing Support clients who are not captured in the survey.**

There were 18,940 people recorded as receiving Housing Support in 2017, a 10% decrease since last year. This is just under a third of the number who receive Home Care (59,640). While Home Care is provided mainly for older people, Housing Support tends to be split more evenly between older people and under 65s (Figure 15). Note that there is some overlap between the two categories: just over one third of Housing Support clients (35%) also received Home Care.
Figure 15: Number of clients receiving Housing Support¹ and Home Care, by age, 2017

³ 2017 Scotland figures are provisional as Angus council figures relate to 2016.

Source: Scottish Government Social Care Survey 2017

The remainder of this report looks in more detail at the provision of Home Care, Community Alarm / Telecare services and Direct Payments for older people (Section 3) and working age adults (Section 4).
3. Older People – Clients aged 65+

This section provides more detail on those people receiving Social Care services who are aged 65 and over, and who account for three-quarters (75%) of all Social Care clients reported on in this publication.

3.1 Home Care for clients aged 65+

There were 48,800 Home Care clients aged 65+ in March 2017. The rate per population of clients aged 65+ receiving Home Care has decreased over time to 48.9 per 1,000 population in 2017 (Figure 16). The decrease in rates per population may be partly due to an increase in the elderly population and care being focused on clients with highest levels of need.

**Figure 16: Home Care clients per 1,000 population aged 65+, 2007 to 2017**

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.
   Population data: National Records for Scotland mid-year population estimates up to 2017 (latest available).

The number of people aged 65+ receiving Home Care has decreased slightly in 2017, following a larger decrease in the previous year (Figure 17). However, the number of Home Care hours provided has increased by 2% in 2017, following a decrease in the previous year.
The majority of Home Care clients tend to receive smaller amounts of care per week; nearly two thirds (65%) of those aged 65+ received less than 10 hours of care per week (Figure 18), while 8% received more than 20 hours of care per week in March 2017.

**Figure 18: Home Care clients aged 65+ by level of service, 2017**

Table 2 shows that 52% of Home Care clients aged 65+ in March 2017 received their care solely from Local Authorities, down from 53% in 2016. The table also provides two measures of the average hours of care provided per week to clients aged 65+, by service provider; the mean (total hours divided by the number of clients) and the median (the “middle” value; half of the values are greater...
than it and half less, which reduces the impact of extremely large values. Both measures show that those clients receiving care solely from Local Authorities tend to have smaller amounts of care per week.

Table 2: Home Care for clients aged 65+, by service provider, 2017

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Number of clients</th>
<th>Client hours</th>
<th>Average (mean) hours per week</th>
<th>Average (median) hours per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Authority only</td>
<td>25,450</td>
<td>187,800</td>
<td>7</td>
<td>6</td>
</tr>
<tr>
<td>Private sector only</td>
<td>18,510</td>
<td>192,100</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>Voluntary sector only</td>
<td>1,480</td>
<td>25,900</td>
<td>18</td>
<td>7</td>
</tr>
<tr>
<td>LA plus private</td>
<td>2,670</td>
<td>39,400</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>LA plus voluntary</td>
<td>510</td>
<td>7,200</td>
<td>14</td>
<td>11</td>
</tr>
<tr>
<td>All other combinations</td>
<td>180</td>
<td>3,000</td>
<td>17</td>
<td>14</td>
</tr>
<tr>
<td>Total</td>
<td>48,800</td>
<td>455,500</td>
<td>9</td>
<td>7</td>
</tr>
</tbody>
</table>

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.
Source: Scottish Government Social Care Survey 2017

Figure 19 shows the distribution of March 2017 Home Care clients aged 65+, by the principal reason they are receiving care (their ‘client group’). There are a large number who receive care either as a result of frailty due to old age, or due to a physical disability. Note that Dementia is known to be under-recorded by Local Authorities, and so it is likely there are clients in other client groups (e.g. “Frail Older people”) who have Dementia.

Figure 19: Home Care Clients aged 65+ by Client group and age group, 2017

Based on 48,800 home care clients aged 65+.
1 Dementia is known to be under recorded in the social care management information system.
2 Other includes addictions, palliative care and carers.
3 2017 Scotland figures are provisional as Angus council figures relate to 2016.
Source: Scottish Government Social Care Survey 2017
Figure 20 shows that of the Home Care clients aged 65+, for whom living arrangements are known, 55% lived alone. As would be expected, this is higher than the figure for 18-64 year olds (40%).

**Figure 20: Living arrangement of clients aged 65+ receiving Home Care services, 2017**

![Pie chart showing 55% living alone and 45% living in other arrangements.]

Based on 30,980 clients for whom Living Arrangements were known. Information was unavailable for 17,820 clients. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

*Source: Scottish Government Social Care Survey 2017*
3.2 Community Alarm / Telecare Services for clients aged 65+

From 2015, Local Authorities were asked to provide data on Community Alarm/Telecare services provided at any time during the financial year – previously only those receiving the service during the March census week were recorded. This has contributed to a jump in the number of Community Alarm/Telecare clients recorded in the last two years.

In the year 2016-17, 111,270 people aged 65+ made use of a Community Alarm and/or another Telecare Service, with 70% of these people having only a Community Alarm (Figure 21).

Figure 21: Distribution of clients aged 65+ receiving Community Alarm and/or another Telecare service, by client group, 2017

1. From 2015 Local Authorities were asked to record all clients receiving Community Alarms/Telecare at any time during the financial year. Previously only clients receiving these services during the March census week were recorded.
2. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

3.3 Direct Payments for clients aged 65+

In 2016-17, 3,240 people aged 65+ received Direct Payments. The total amount spent by Local Authorities on Direct Payments for this age group in 2016-17 was an estimated £33.3 million. This saw the continuation of the trend of increasing numbers of people receiving Direct Payments; the number of clients aged over 65 receiving Direct Payments has increased by 13% since 2015-16. Figure 22 shows the increase in Direct Payment clients aged 65+ over the last ten years.
Table 3 shows the breakdown of 2016-17 clients aged 65+ receiving Direct Payments by client group. Frailty due to old age is the primary reason for clients in this age group receiving Direct Payments, followed by Physical Disabilities and Dementia.

Table 3: Direct Payments for clients aged 65+, by client group, 2016-17

<table>
<thead>
<tr>
<th>Client Group</th>
<th>Number of clients**</th>
<th>Expenditure (£ millions)</th>
<th>Mean(^1) value of direct payments</th>
<th>Median(^2) value of direct payments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frail older people</td>
<td>1,750</td>
<td>£16.0</td>
<td>£9,000</td>
<td>£7,000</td>
</tr>
<tr>
<td>Physical disability</td>
<td>730</td>
<td>£8.7</td>
<td>£12,000</td>
<td>£8,000</td>
</tr>
<tr>
<td>Dementia***</td>
<td>390</td>
<td>£4.3</td>
<td>£11,000</td>
<td>£8,000</td>
</tr>
<tr>
<td>Mental Health</td>
<td>70</td>
<td>£0.7</td>
<td>£9,000</td>
<td>£7,000</td>
</tr>
<tr>
<td>Learning disability****</td>
<td>40</td>
<td>£0.8</td>
<td>£23,000</td>
<td>£10,000</td>
</tr>
<tr>
<td>Other</td>
<td>120</td>
<td>£1.2</td>
<td>£10,000</td>
<td>£7,000</td>
</tr>
<tr>
<td>Not known</td>
<td>160</td>
<td>£1.1</td>
<td>£7,000</td>
<td>£4,000</td>
</tr>
<tr>
<td>All*</td>
<td>3,240</td>
<td>£33.3</td>
<td>£10,000</td>
<td>£7,000</td>
</tr>
</tbody>
</table>

* The expenditure figure presented for "All" clients aged 65+ receiving Direct Payments has been adjusted to account for missing 2017 data from Angus council, so are slightly higher than the sum of individual client groups. The client figures for are provisional, as figures for Angus council relate to 2016.

** Some clients receive more than one direct payment

*** Dementia is known to be under recorded in the social care management information system

**** Learning Disability includes clients with both a Learning Disability and Physical Disability.

\(^1\) The Mean denotes the "average" value of direct payments, i.e. the sum of all payments divided by the number of payments (rounded to nearest £1,000)

\(^2\) The Median denotes the "middle" value of direct payments, i.e. the value at which half of the payments are less and half are more (rounded to nearest £1,000)

Source: Scottish Government Social Care Survey 2017
4. Working Age Adults – Clients aged 18 to 64

This section of the report provides more detail on the 48,540 Social Care clients aged 18 to 64 in the survey.

4.1 Home Care for adults aged 18 to 64

There were 10,610 Home Care clients aged 18-64 in 2017. Figure 23 shows that the rate of Home Care clients aged 18 to 64 per 1,000 population did not change between 2016 and 2017, remaining at 3.1 per 1,000.

Figure 23: Home Care clients per 1,000 population aged 18-64, 2008 to 2017¹

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.
Population data: National Records for Scotland mid-year population estimates up to 2016 (latest available)

The number of people aged 18 to 64 receiving Home Care has remained roughly the same between 2016 and 2017, while the number of Home Care hours provided has increased. This follows decreases for both the number of 18-64 year olds receiving Home Care and hours provided between 2015 and 2016.
Figure 24: Home Care clients aged 18-64 and hours provided, 2010 to 2017\(^1\)

1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.

Just under half (48\%) of Home Care clients aged 18 to 64 received less than 10 hours of care per week (Figure 25), compared to 65\% for older people (see Figure 18, Section 3). 14\% of clients aged 18 to 64 received more than 50 hours of care per week compared with only 1\% of clients aged 65+.

Figure 25: Home Care clients aged 18-64 by level of service, 2017\(^1\)

Based on 10,610 home care clients aged 18-64.
1. 2017 Scotland figures are provisional as Angus council figures relate to 2016.
Source: Scottish Government Social Care Survey 2017

Working age adults are less likely to use Local Authority run services: only 22\% of clients aged 18 to 64 received their care solely from Local Authorities (Table 4), compared with 52\% for clients aged 65+ (Table 2). Only 10\% of Home Care hours for clients aged 18 to 64 were provided solely by Local Authorities in 2017, compared with 41\% for those aged 65 and over.
There is also a greater discrepancy between the mean and median numbers of hours for clients aged 18 to 64 than was seen for clients aged 65+ (Table 2). This is due to the distribution of home care hours seen in Figure 25 and in particular the 14% of clients who receive 50 or more hours of care each week.

### Table 4: Home Care by Service Provider for clients aged 18 to 64, 2017¹

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Number of clients</th>
<th>Client hours</th>
<th>Average (mean) hours per week</th>
<th>Average (median) hours per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Authority only</td>
<td>2,370</td>
<td>23,900</td>
<td>10%</td>
<td>10</td>
</tr>
<tr>
<td>Private sector only</td>
<td>4,490</td>
<td>89,600</td>
<td>37%</td>
<td>20</td>
</tr>
<tr>
<td>Voluntary sector only</td>
<td>3,130</td>
<td>111,700</td>
<td>47%</td>
<td>36</td>
</tr>
<tr>
<td>LA plus private</td>
<td>370</td>
<td>6,900</td>
<td>3%</td>
<td>19</td>
</tr>
<tr>
<td>LA plus voluntary</td>
<td>130</td>
<td>3,400</td>
<td>1%</td>
<td>26</td>
</tr>
<tr>
<td>All other combinations</td>
<td>100</td>
<td>3,400</td>
<td>1%</td>
<td>34</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>10,610</strong></td>
<td><strong>239,100</strong></td>
<td><strong>100%</strong></td>
<td><strong>23</strong></td>
</tr>
</tbody>
</table>

¹ 2017 Scotland figures are provisional as Angus council figures relate to 2016.

*Source: Scottish Government Social Care Survey 2017*

Figure 26 shows people aged 18-64 who receive a home care service by the principal reason they are receiving care (their ‘client group’). The main reasons that people in this age group require home care is because they have a learning disability (36% of clients) or a physical disability (33% of clients). An additional 3% of clients aged 18-64 have both a Learning and Physical disability.

### Figure 26: Home Care Clients aged 18 to 64, by client group, 2017

![Figure 26: Home Care Clients aged 18 to 64, by client group, 2017](image)

¹ Dementia is known to be under recorded in the social care management information system.
² “Other” includes addictions, palliative care and carers.
³ 2017 Scotland figures are provisional as Angus council figures relate to 2016.

Based on 10,610 home care clients aged 18-64.

*Source: Scottish Government Social Care Survey 2017*
Figure 27 shows that of the Home Care clients aged 18 to 64 for whom living arrangements are known, 40% live alone. This is lower than the 55% of clients aged 65+ who live alone (Figure 20).

**Figure 27: Living arrangement of clients¹ aged 18 to 64 receiving Home Care services, 2017²**

![Pie chart showing 60% living in other arrangements and 40% living alone.]

¹ Based on 6,030 clients for whom Living Arrangements were known. Living arrangements information was unavailable for 4,590 clients.
² 2017 Scotland figures are provisional as Angus council figures relate to 2016.

*Source: Scottish Government Social Care Survey 2017*
4.2 Community Alarm / Telecare Services for clients aged 18 to 64

There were 16,780 people aged 18-64 in receipt of a Community Alarm and/or Telecare service in the year 2016-17. As explained in Section 3 of this report, in 2015 Local Authorities were asked to provide data on all clients receiving Community Alarms/Telecare at any point during the financial year; previously they only recorded those receiving the service during the March census week (Figure 28).

Figure 28: Clients aged 18 to 64 receiving Community Alarm and/or another Telecare service, 2011 to 2016-17

¹ From 2015 Local Authorities were asked to record all clients receiving Community Alarms/Telecare at any time during the financial year. Previously only clients receiving these services during the March census week were recorded.
² 2017 Scotland figures are provisional as Angus council figures relate to 2016.


4.3 Direct Payments for clients aged 18 to 64

In 2016-17, an estimated 3,930 people aged 18 to 64 received Direct Payments to purchase the care services they need. The total amount spent by Local Authorities on Direct Payments for this age group was estimated as £73.1 million. As with the 65+ age group, this saw the continuation of the trend of increasing numbers of people receiving Direct Payments, which has been the case each year since 2009-10 (Figure 29).
Figure 29: People aged 18 to 64 who received Direct Payments¹, 2009-10 to 2016-17²

Table 5: Direct Payments for clients aged 18 to 64, by client group, 2016-17

<table>
<thead>
<tr>
<th>Client Group</th>
<th>Number of clients**</th>
<th>Expenditure (£ millions)</th>
<th>Mean¹ value of direct payments</th>
<th>Median² value of direct payments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical disability</td>
<td>1,610</td>
<td>£30.4</td>
<td>£19,000</td>
<td>£12,000</td>
</tr>
<tr>
<td>Learning disability****</td>
<td>1,430</td>
<td>£29.0</td>
<td>£21,000</td>
<td>£12,000</td>
</tr>
<tr>
<td>Mental Health</td>
<td>270</td>
<td>£2.5</td>
<td>£10,000</td>
<td>£6,000</td>
</tr>
<tr>
<td>Dementia***</td>
<td>40</td>
<td>£0.3</td>
<td>£10,000</td>
<td>£8,000</td>
</tr>
<tr>
<td>Other</td>
<td>440</td>
<td>£8.0</td>
<td>£18,000</td>
<td>£9,000</td>
</tr>
<tr>
<td>Not known</td>
<td>150</td>
<td>£1.7</td>
<td>£12,000</td>
<td>£9,000</td>
</tr>
<tr>
<td>All*</td>
<td>3,930</td>
<td>£73.1</td>
<td>£19,000</td>
<td>£11,000</td>
</tr>
</tbody>
</table>

¹ Direct Payments totals include an estimate for East Renfrewshire council in 2014-15– see 5.5 (background notes).
² 2017 Scotland figures are provisional as Angus council figures relate to 2016.

Table 5 shows the breakdown of clients aged 18 to 64 receiving Direct Payments to purchase the care services they need. Physical Disabilities and Learning Disabilities are the primary reason for clients in this age group receiving Direct Payments.

* The expenditure figures presented for "All" clients aged 18 to 64 receiving Direct Payments have been adjusted to account for missing 2017 data from Angus council, so are slightly higher than the sum of individual client groups. The client figures are provisional as they include 2016 Angus council figures.
** Some clients receive more than one direct payment
*** Dementia is known to be under recorded in the social care management information system
**** Learning Disability includes clients with both a Learning Disability and Physical Disability

¹ The Mean denotes the “average” value of direct payments, i.e. the sum of all payments divided by the number of payments (rounded to nearest £1,000)
² The Median denotes the “middle” value of direct payments, i.e. the value at which half of the payments are less and half are more (rounded to nearest £1,000)

Source: Scottish Government Social Care Survey 2017
5. Background information on the collection of the data

5.1 Social Care Survey¹

<table>
<thead>
<tr>
<th>Service</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Alarm / Telecare</td>
<td>128,750</td>
</tr>
<tr>
<td>Social Worker / Support Worker²</td>
<td>122,220</td>
</tr>
<tr>
<td>Home Care</td>
<td>59,640</td>
</tr>
<tr>
<td>Self-Directed Support (all options)²</td>
<td>83,770</td>
</tr>
<tr>
<td>Housing Support *</td>
<td>18,940</td>
</tr>
<tr>
<td>Meals **</td>
<td>6,390</td>
</tr>
<tr>
<td>Direct Payments (SDS option 1)</td>
<td>8,290</td>
</tr>
</tbody>
</table>

Notes on chart

¹ Community Alarm/Telecare, Direct Payments, SDS and Social Worker/Support Worker information are for the financial year. Home Care, Housing Support and Meals data is for the March Census week.

¹ Clients can receive multiple social care services.

² Data on Social Worker / Support Workers and Self-Directed Support is in development, and not reported on in detail in this release. More detailed analysis on Self-Directed Support is available in the separate Self-Directed Support, Scotland publication.

² 2017 Scotland figures are provisional.

³ Self-Directed Support can be used to purchase services such as Home Care and Meals

** 2 local authorities did not submit housing support data for 2017.

*** 3 local authorities did not submit meals data for 2017.

All the new data presented in this release was collected through the 2017 Social Care Survey. This is the fifth year of the survey, which replaced the previously separate Home Care and Direct Payments data collections (see 5.2).

The data is supplied by all 32 Local Authorities in Scotland, who collect this information as part of their Social Care Management Information system and is submitted to Scottish Government via a secure web-based system called ProcXed. The ProcXed system reduces administrative burdens and increases the speed, ease and accuracy (via inbuilt validation checks) of information exchange.

Information is returned for every person who has had a Social Care assessment and receives or uses:

During the Census Week (the census week normally includes the 31st March, but a different week can be chosen if this week is not typical for the year e.g. includes public holidays):

- Home Care services, including re-ablement services
- Meals services (provided or purchased by the local authority);
- Housing Support services;
- OPTIONAL - other services e.g. Shopping, Laundry.
During the financial year 1 April 2016 to 31 March 2017:
- Community Alarms / other Telecare services (this was previously only collected for the census week);
- Services or support provided through Self-Directed Support, including Direct Payments;
- Social Worker / support worker services

5.2 Data collection prior to 2013

The ‘Home Care Census’ collected annual statistics on the number of people receiving a home help or Home Care service at the end of March each year. From March 2010, the statistics were collected at the individual level, having previously been collected through an aggregate data return. See http://www.gov.scot/Topics/Statistics/Browse/Health/HomeCareCensus for more detail on the survey design and collection.

The “Self-Directed Support (Direct Payments)” Survey collected annual statistics on the number of people who received direct payments to purchase the care that they need. It should be noted that this collection was focused solely on Direct Payments, and not Self-Directed Support as it is now defined (see section on Self-Directed Support below). These statistics relate to everyone who received a Direct Payment during the relevant financial year and from 2010 onwards have been collected at the individual level, having previously been collected through an aggregate data return.


5.3 Self-Directed Support Act

The Self-Directed Support Act was introduced in Scotland in April 2014. Self-Directed Support (SDS) gives people control over an individual budget and allows them to choose how that money is spent on the support and services they need to meet agreed health and social care outcomes. (see http://www.selfdirectedsupportscotland.org.uk for details)

Self-Directed Support allows people to choose a number of different options for getting support. The person’s individual budget can be:
- SDS Option 1: Taken as a Direct Payment (a cash payment). Information on Direct Payments has been collected since 2001 and is reported on in this publication.
- SDS Option 2: Allocated to a provider that the person chooses. The council holds the budget but the person is in charge of how it is spent (this is sometimes called an individual service fund); or
- SDS Option 3: the person can choose a council arranged service; or
- SDS Option 4: the person can choose a mix of these options for different types of support

Over time all Social Care and support will transition to being focused on achieving personal outcomes. This presents challenges for the reporting and comparability of Social Care data: increasing numbers of people will be directing their own support rather than services being provided directly for them. It is expected that in future this publication will become more focused on Social Care clients, what their needs are, their individual budget and the options that they choose.

5.4 Data Quality Issues

For 2017, Angus council were unable to submit their data in time for publication. Therefore, the 2016 Angus council figures have been used in this report and the 2017 data will be updated in time for the next release in 2018.

Direct Payments (Self-Directed Support Option 1)

The data quality issues in this report are primarily due to implementation of the Self-Directed Support Act (see 5.3), and the resulting change to recording systems carried out by Local Authorities. This mainly affects the figures for Direct Payments, now SDS Option 1:

- For 2017 data, Angus council were unable to submit their data in time for publication. The Scotland level figures have therefore been adjusted to account for this missing data and ensure comparability with previous years. This was done by “scaling-up” the 2015 Angus figures based on the change between 2015 and 2017 in the other 31 Local Authorities, as the 2016 data for Angus was also missing, then adding the scaled-up figure to the Scotland total.
- For 2016 data, Angus council experienced an issue with their data which meant they were unable to return any financial information on Direct Payments. The Scotland level figures have therefore been adjusted to account for this missing data and ensure comparability with previous years. This was done by “scaling-up” the 2015 Angus figures based on the change between 2015 and 2016 in the other 31 Local Authorities, then adding the scaled-up figure to the Scotland total.
- For 2015 data, East Renfrewshire council were unable to submit any data on Direct Payments or the other SDS options. The Scotland-level figures for both the number of clients receiving Direct Payments and expenditure have therefore been adjusted to account for this missing data and to ensure comparability with previous years. This was done by “scaling-up” the 2014 East Renfrewshire figures based on the change between 2014 and 2015 in the other 31 Local Authorities, then adding the scaled-up figure to the Scotland total.
- For 2015 data, Scottish Borders and Falkirk councils have stated that some clients who were previously recorded as receiving Direct Payments have not been captured under the new SDS system as SDS Option 1. This has resulted in an apparent drop in Direct Payments clients in these authorities between 2014 and 2015. This has a minimal effect on the Scotland figures.
- For 2015, Local Authorities were asked to record the expenditure for Self-Directed Support as the Gross value of the budget allocated within the reporting year. Argyll & Bute and West Lothian councils have stated that they were unable to supply Gross expenditure figures and so supplied Net expenditure (i.e. net of any client contribution) figures instead. These figures have been included within the Scotland level expenditure totals.

Meals Services

Data on Meals services has proved difficult for Local Authorities to capture and so the charts presented in this report have been provided for information on the data collection, rather than an exact number of the people in Scotland receiving Meals services. Three local authorities did not supply data on Meals services (East Renfrewshire, Edinburgh City and Eilean Siar).

Housing Support

Data on housing support was not returned by two Local Authorities (North Lanarkshire and West Dunbartonshire) this year which should be considered if trying to compare to previous years.
5.5 Client groupings

Since 2010, Local Authorities have been able to provide multiple client groups for each person. In this publication, where a local authority returned multiple client groups, clients have been allocated to the group that appears first in the list below in order to avoid double counting:

1. Dementia
2. Mental Health Problems
3. Learning Disability
4. Learning Disability and Physical Disability
5. Physical Disability
6. Frail older people
7. Other vulnerable groups (including Addiction, Palliative Care and Carer’s)
8. Not known

For example, if a client has dementia and has a physical disability, then they will appear in the dementia client group for the purpose of analysis (as this appears higher in the list than physical disability).

It should be noted that Local Authorities vary in how they record people whose reason for receiving a service is frailty due to old age. Some record this as ‘physical disability’ while others record as ‘frail older people’. Therefore when looking at the older age groups these two client groups are best considered together when comparing statistics for different local authorities.

It is also important to note that “Dementia” is known to be under-recorded in social care management information systems.

5.6 Community Alarm and other Telecare services

From 2015, Local Authorities were asked to collect information on all people receiving a Community Alarm / Telecare service at any time during the financial year. This information was previously asked only for the March census week.

Telecare is the remote or enhanced delivery of care services to people in their own home by means of telecommunications and computerised services. Telecare usually refers to sensors or alerts which provide continuous, automatic and remote monitoring of care needs emergencies and lifestyle changes, using information and communication technology (ICT) to trigger human responses, or shut down equipment to prevent hazards (Source: National Telecare Development Programme, Scottish Government). Community Alarms are considered to be the basic, introductory level of Telecare.

Community Alarm is defined as: A person in receipt of a technology package which consists of a communication hub (either an individual home hub unit or part of a communal system e.g. the alarm system within sheltered housing), and a button/pull chord/pendant which transfers an alert/alarm/data to a monitoring centre or individual responder.

Telecare is defined as: A person in receipt of a technology package which goes over and above the basic community alarm package identified above, and includes any other sensors or monitoring equipment e.g. (not an exhaustive list):

- linked pill dispensers,
- linked smoke detectors,
- linked key safes,
- bogus caller buttons and door entry systems,
- property exit sensors, extreme temperature, flood, falls, movement detectors.
Standalone devices and pieces of equipment are not be considered 'Telecare' for the purpose of this return i.e. they should be capable of alerting/providing information to a monitoring centre or individual responder and should generally be 'linked' to the home hub or communal alarm system.

5.7 Other data sources

In order to calculate rates per population, the National Records of Scotland mid-year population estimates have been used. For 2017 rates, the 2016 mid-year population estimates have been used as these are the latest available.


5.8 Cost of respondent burden

To calculate the cost of respondent burden to this survey each Local Authority was asked to provide an estimate of the time taken in hours to extract the requested information and complete the survey form. The average time from 29 Local Authorities in 2015 has then been used within the calculation below to calculate the total cost of responding to this survey, which is £37,000.

Cost of responding (£) = (number of responses) \times \frac{\text{median time it takes to respond in hours}}{\text{hourly rate of typical respondent}} \times any additional + costs experienced by data providers
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The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be interpreted to mean that the statistics: meet identified user needs; are produced, managed and disseminated to high standards; and are explained well.

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How to access background or source data
A spreadsheet accompanying this statistical bulletin with Local Authority data can be found at: http://www.gov.scot/Topics/Statistics/Browse/Health/Publications and selecting “SOCIAL CARE SERVICES, SCOTLAND, 2017”.

A more detailed spreadsheet, which covers the same general topics included in this report but with more sub-categories and data going back to 1999, will be uploaded to the following web page shortly after this release: http://www.gov.scot/Topics/Statistics/Browse/Health/Data/HomeCare

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