

Adult Social Care Survey 2022/23

Lancashire County Council summary report



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1. Executive summary

The Adult Social Care Survey (ASCS) is a national survey that has been used to collect the views of adult social care service users every year since 2010/11. The main purpose of the survey is to provide assured, benchmarked, local data to support local decision-making in a challenging financial climate. The survey provides an overall quality of life index and intelligence to identify if different types of service user experience different outcomes and whether services are meeting service users' needs.

The ASCS includes service users in residential and nursing care, as well as those who receive services in the community. However, service users who lack the capacity to consent to take part aren't included.

For the 2022/23 ASCS, 936 self-completion postal questionnaires were sent to a stratified random sample of adult social care service users during January 2023. Reminder letters were sent during February 2023. In total, 272 questionnaires were returned, giving an overall response rate of 29%.

1.1. Key findings

1.1.1. Overall satisfaction

- Overall, about nine-tenths of respondents (88%) were satisfied with the care and support services they receive. However, one-in-twenty respondents (6%) were dissatisfied.
- About three-fifths of respondents (61%) rated their quality of life as good and about one-in-eight respondents (12%) rated their quality of life as bad.

1.1.2. Having choice over care and support

- Three-quarters of respondents (74%) said that they have enough choice about the care and support services they received. However, about a fifth of respondents (22%) said that they don't have enough choice.

1.1.3. Social care related quality of life

- About a third of respondents (34%) said that they have as much control over their daily life as they want. One-in-twenty respondents (6%) said that they have no control over their lives.
- Four-fifths of respondents (81%) agreed that care and support services help them in having control over their daily lives.
- About half of respondents (54%) said that they felt clean, and they were able to present themselves the way they liked. One-in-fifty respondents (2%) said that they didn't feel clean or presentable.
- Two-thirds of respondents (66%) said that they got all the food and drink they liked when they wanted. One-in-a-hundred respondents (1%) said that they



didn't always get adequate or timely food and drink, and they thought there was a risk to their health.

- Two-thirds of respondents (66%) said that their home was as clean and comfortable as they wanted. One-in-fifty respondents (2%) said that their home was not at all clean or comfortable.
- Two-thirds of respondents (66%) said that they felt as safe as they wanted. One-in-fifty respondents (2%) said that they didn't feel at all safe.
- More than four-fifths of respondents (84%) agreed that care and support services help them in feeling safe.
- More than two-fifths of respondents (44%) said that they had as much social contact as they wanted. However, about one-in-twenty respondents (6%) said that they had little social contact with people and felt socially isolated.
- About two-fifths of respondents (42%) agreed that care and support services help them in having social contact with people.
- About a third of respondents (34%) said that they were able to spend their time as they wanted, doing things they valued or enjoyed. However, one-in-ten respondents (8%) said that they didn't do anything they valued with their time.
- More than three-quarters of respondents (78%) agreed that care and support services helped them in the way they spend their time.
- About three-fifths of respondents (62%) said the way that they were helped and treated made them think and feel better about themselves. One-in-twenty respondents (6%) said the way that they were helped and treated completely undermined the way they think and feel about themselves.
- Nine-tenths of respondents (87%) agreed that care and support services helped them to have a better quality of life.

1.1.4. Information

- Of those respondents who had tried to find information or advice about support, services or benefits in the past year, more than two thirds (68%) said it was easy to find and about one third (32%) said it was difficult to find.

1.1.5. Health

- Over two-fifths of respondents (43%) said that in general their health was very good or good, almost two-fifths of respondents (37%) said that their health in general was fair and a fifth (20%) said it was bad or very bad.
- Almost two-fifths of respondents (37%) said that they had no pain or discomfort on the day they responded to the questionnaire, half of respondents (49%) said that they had moderate pain or discomfort, and about a seventh of respondents (14%) said that they had extreme pain or discomfort.



- Half of respondents (51%) said that they were not anxious or depressed on the day they responded to the questionnaire, two-fifths of respondents (41%) said that they were moderately anxious or depressed and less than one tenth (9%) said that they were extremely anxious or depressed.

1.1.6. *Doing things for myself*

- Three-fifths of respondents (60%) said that they couldn't deal with finances and paperwork – for example, paying bills, writing letters – by themselves.
- More than a third of respondents (36%) said that they couldn't manage to wash all over by themselves, using either a bath or a shower.
- About a quarter of respondents (25%) said that they couldn't manage to get dressed and undressed by themselves.

1.1.7. *Getting around in my local area*

- About three-tenths of respondents (28%) said that they can get to all the places in their local area that they want. About a quarter (26%) said that, at times, they find it difficult to get to all the places in their local area that they want. Just under half of respondents (46%) said that they are unable to get to all the places in their local area that they want or that they do not leave their home.

1.1.8. *Type of help and support received*

- Four-fifths of respondents (80%) were in a community support setting, one seventh (16%) were in residential care and less than one-in-twenty respondents (4%) were in nursing care.
- About two-fifths of respondents (37%) had a local authority (LA) managed personal budget, one quarter of respondents had direct payment only (27%), one seventh had LA commissioned support only (15%) and one-in-fifty (2%) had part direct payment.
- About a quarter of respondents (26%) didn't receive any practical help on a regular basis from their husband/wife, partner, friends, neighbours, or family members. Over two-fifths of respondents (43%) received help from someone living in their household and about two-fifths (41%) received help from someone living in another household.
- About three-fifths of respondents (59%) didn't buy any additional care or support privately or pay more to 'top-up' their care and support. One-third of respondents (33%) bought some more care and support with their own money and one-tenth of respondents (9%) had family that paid for some more care and support for them.

1.1.9. Suitability of home

- More than half of respondents (53%) said that their home met their needs very well. Over two-fifths of respondents (42%) said that their home met most or some of their needs. However, one-in-twenty respondents (5%) said that their home was totally inappropriate for their needs.

1.1.10. Demographics

- About three-fifths of respondents (56%) were female and about two-fifths of respondents (44%) were male.
- Nine-tenths of respondents (90%) were white and one-tenth of respondents (10%) were from an ethnic minority community.
- Almost three-fifths of respondents (58%) were aged 65 and over and two-fifths of respondents (42%) were aged 18-64.



2. Introduction

The Adult Social Care Survey (ASCS) is a national survey that has been used to collect the views of adult social care service users every year since 2010/11.

The main purpose of the survey is to provide assured, benchmarked, local data to support local decision-making in a challenging financial climate. The survey provides an overall quality of life index and intelligence to identify if different types of service user experience different outcomes and whether services are meeting service users' needs.

The ASCS includes service users in residential and nursing care, as well as those who receive services in the community. However, service users who lack the capacity to consent to take part aren't included.

The ASCS is used to populate the following outcome measures in the Adult Social Care Outcomes Framework (ASCOF).

- 1A Social care related quality of life
- 1B The proportion of people who use services who have control over their daily life
- 1I1 The proportion of people who use services and their carers, who reported that they had as much social contact as they would like
- 1J Adjusted Social care-related quality of life – impact of Adult Social Care services
- 3A Overall satisfaction of people who use services with their care and support
- 3D1 The proportion of people who use services who find it easy to find information about support
- 4A The proportion of people who use services who feel safe
- 4B The proportion of people who use services who say that those services have made them feel safe and secure

3. Methodology

A sample of 936 people was selected from the eligible population produced on 28 November 2022. The eligible population for the Adult Social Care Survey (ASCS) 2022/23 was adult social care users in receipt of long-term support services funded or managed by the local authority following a full assessment of need. It included part-funded and full-cost-paying clients, and was the same population of service users as those who would be reported in table LTS001b of the SALT return.

The ASCS covers a range of different service users: those with learning disabilities and those without; those in residential or nursing care; and those receiving services in the community; as well as older and younger service users. To reduce the sampling error of the population statistics estimated from the survey data, the sample was selected using stratified random sampling. This technique has been shown to produce better population estimates when there is considerable variation between different groups within the population. Stratified random sampling involves splitting different groups within an eligible population into separate strata and drawing an independent random sample within each strata.

The four strata in the sample were

1. Learning disabilities – all ages
2. Non-learning disabilities aged 18-64
3. Non-learning disabilities aged 65+ in residential and nursing care
4. Non-learning disabilities aged 65+ receiving community-based services

Checks were undertaken to exclude those service users who lack the capacity to consent to take part. All services users within each of the four selected samples were sent a self-completion questionnaire in the post.

Each type of service user was sent a questionnaire in a format appropriate to their needs. For example, those who were identified as having learning disabilities were sent questionnaires in an easy-read format. The different questionnaires asked the same questions. However, the responses for question 1 and question 2 in the easy-read versions consisted of five response options, not seven response options like the standard questionnaires.

936 self-completion postal questionnaires were sent to the service users in the sample during January 2023. Reminder letters were sent during February 2023. In total, 272 questionnaires were returned, giving an overall response rate of 29%. The returned questionnaires were processed and compiled on a datasheet provided by NHS Digital. This completed datasheet was returned to NHS Digital for validation. The final validated survey result for all councils in England, along with several other related publications including the 2022/23 ASCOF score, are published by NHS Digital at <https://digital.nhs.uk/data-and-information/publications/statistical/personal-social-services-adult-social-care-survey>. The final validated data is weighted by NHS Digital to account for non-response.

The analysis of question 1 and question 2 combines the responses to the easy-read questionnaire (five response options) and standard questionnaire (seven responses options).

3.1. Limitations

The table below shows the sample tolerances that apply to the results in this survey. Sampling tolerances vary with the size of the sample as well as the percentage results.

Number of respondents	50/50 + / -	30/70 + / -	10/90 + / -
100	10%	9%	6%
200	7%	6%	4%
300	6%	5%	3%
400	5%	5%	3%
500	4%	4%	3%

In a sample of 400 respondents where 50% of respondents give a particular answer to a question, we would expect that in the same population if 100 different samples of 400 respondents were asked the same question then in 95 of those samples the response would be between 45% and 55% (ie +/- 5%). Therefore, we can be 95% confident that the population (adult social care users) would provide a response to the same question somewhere between 45% and 55%.

It should also be noted that the eligible population of adult social care users for the Adult Social Care Survey changed from the 2013-14 survey to 2014-15 survey. In the 2013-14 survey it had been those in receipt of local authority funded services following a full assessment of need. The key changes to the eligible population for the 2013-14 survey and the 2014-15 survey are that

- Service users whose only services are the provision of equipment, professional support or short-term residential care who were included in previous years are not included this year. The exception to this is that service users receiving professional support for their mental health needs are included even where this support is the only service they receive.
- 'Full-cost clients' (those who pay for the full costs of their services, but whose care needs are assessed and supported through the local authority) were not eligible for inclusion in years prior to 2014-15.

In charts or tables where responses do not add up to 100%, this is due to multiple responses or computer rounding.



4. Main findings

4.1. ASCOF summary

The ASCS data is used for eight ASCOF indicators. Lancashire's 2022/23 scores for these indicators are presented in the table below.

There are no statistically significant differences between the eight ASCOF scores for 2022/23 and the previous year in 2021/22.

Table 1 ASCOF measures from the Adult Social Care Survey – year-on-year comparison

	2019/20	2021/22	2022/23
(1A) Social care-related quality of life	19%	19%	19%
(1B) The proportion of people who use services who have control over their daily Life	78%	80%	77%
(1I part 1) service users – proportion of people who use services and their carers, who reported that they had as much social contact as they would like	40%	45%	46%
(1J) Adjusted social care-related quality of life – impact of adult social care services	0.395	0.440	0.385
(3A) Overall satisfaction of people who use service with their care and support	61%	69%	66%
(3D1) The proportion of people who use services who find it easy to find information about support	69%	69%	69%
(4A) The proportion of people who use services who feel safe	68%	70%	66%
(4B) The proportion of people who use services who say that those services have made them feel safe and secure	85%	85%	84%

4.1.1. Comparing different councils' ASCS ASCOF scores

The ASCS ASCOF measures are calculated using survey data and are therefore subject to confidence intervals.

With survey data, confidence intervals express the range of values that we would expect the response to fall between if the survey was repeated numerous times. The confidence intervals published by NHS Digital for this survey are the 95% confidence intervals. Therefore, if the survey was repeated in the exact same way 100 times, we would expect that 95 times the value would be somewhere between the range given by the confidence intervals.

When comparing the survey results of different councils, each council's confidence intervals need to be taken account before it can be said if they differ statistically from each other. One way to do this is to test if their confidence intervals don't overlap each other. If they don't overlap, they can be said to be statistically significantly



different from each other. This method is used for comparing 1A and 1J as these indicators are derived scores. For all other ASCOF indicators, a z-score test has been used to determine where statistically significant differences exist.

4.1.2. North West councils

There are 23 councils in North West England with responsibility for adult social care. They are

- Blackburn with Darwen
- Blackpool
- Bolton
- Bury
- Cheshire East
- Cheshire West and Chester
- Cumbria
- Halton
- Knowsley
- Lancashire
- Liverpool
- Manchester
- Oldham
- Rochdale
- Salford
- Sefton
- St. Helens
- Stockport
- Tameside
- Trafford
- Warrington
- Wigan
- Wirral

Table 2 Lancashire's ASCS 2021/22 ASCOF scores compared to other North West councils

	1A	1B	1I1	1J	3A	3D1	4A	4B
Higher score than LCC	0	2	0	0	0	0	3	6
Same score as LCC	22	20	20	22	20	19	19	16
Lower score than LCC	0	0	2	0	2	3	0	0

There is some statistical difference between Lancashire's ASCS 2022/23 ASCOF scores and the scores of the other North West councils, with Lancashire scoring statistically identical scores to most other councils for most of the indicators. The differences occur in indicators 1B, 1I1, 3A, 3D1, 4A and 4B.

For the indicator '1A: Social care-related quality of life', no North West council had a score statistically significantly different to Lancashire's score.

For the indicator '1B: The proportion of people who use services who have control over their daily life', Rochdale and Warrington had scores that were statistically significantly higher than Lancashire's score.

For the indicator '(1I1): The proportion of people who use services and their carers, who reported that they had as much social contact as they would like', Stockport and Bolton had scores that were statistically significantly lower than Lancashire's score.



For the indicator '1J: Adjusted social care-related quality of life – impact of adult social care services', no North West council had a score statistically significantly different to Lancashire's score.

For the indicator '3A: Overall satisfaction of people who use services with their care and support', Manchester and Tameside had scores that were statistically significantly lower than Lancashire's score.

For the indicator '3D1: The proportion of people who use services who find it easy to find information about support', Warrington, Cheshire West and Chester, and Oldham had scores that are statistically significantly lower than Lancashire's score.

For the indicator '(4A): The proportion of people who use services who feel safe', Warrington, Cheshire West and Chester, and Cumbria had scores that were statistically significantly higher than Lancashire's score.

For the indicator '4B: The proportion of people who use services who say that those services have made them feel safe and secure', Rochdale, Sefton, Cheshire East, Blackpool, Wirral and Cumbria had scores that were statistically significantly higher than Lancashire's score.

4.1.3. Peer group councils

There are 15 councils in the Lancashire peer group. They are

- Cambridgeshire
- Essex
- Gloucestershire
- Hampshire
- Kent
- Kirklees
- Lancashire
- Leicestershire
- Nottinghamshire
- South Gloucestershire
- Staffordshire
- Surrey
- Warwickshire
- West Sussex
- Worcestershire

Table 3 Lancashire's ASCS 2021/22 ASCOF scores compared to its peer group councils

	1A	1B	1I1	1J	3A	3D1	4A	4B
Higher score than LCC	0	1	0	1	0	0	1	7
Same score as LCC	14	13	14	13	14	14	13	7
Lower score than LCC	0	0	0	0	0	0	0	0

There is some statistical difference for the ASCS 2021/22 ASCOF scores between Lancashire and the councils in its peer group, with Lancashire scoring statistically identical scores to most other councils for most of the indicators. The differences occur in indicators 1B, 1J, 4A and 4B.



For the indicator '1A: Social care-related quality of life', no peer group council had a score statistically significantly different to Lancashire's score.

For the indicator '1B: The proportion of people who use services who have control over their daily life', Kent had a score that was statistically significantly higher than Lancashire's score.

For the indicator '(111): The proportion of people who use services and their carers, who reported that they had as much social contact as they would like', no peer group council had a score statistically significantly different to Lancashire's score.

For the indicator '1J: Adjusted social care-related quality of life – impact of adult social care services', Essex had a score that was statistically significantly higher than Lancashire's score.

For the indicator '3A: Overall satisfaction of people who use services with their care and support', no peer group council had a score statistically significantly different to Lancashire's score.

For the indicator '3D1: The proportion of people who use services who find it easy to find information about support', no peer group council had a score statistically significantly different to Lancashire's score.

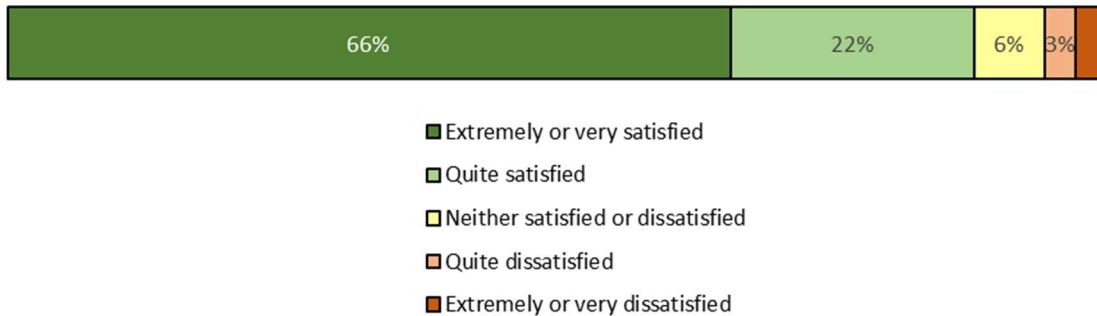
For the indicator '(4A): The proportion of people who use services who feel safe', Gloucestershire had a score that was statistically significantly higher than Lancashire's score.

For the indicator '4B: The proportion of people who use services who say that those services have made them feel safe and secure', Worcestershire, Gloucestershire, Surrey, Nottinghamshire, Warwickshire, Essex and Kirklees had scores that were statistically significantly higher than Lancashire's score.

4.2. Overall satisfaction

The questionnaire began by asking respondents how satisfied or dissatisfied they were with the care and support services they receive. Overall, about nine-tenths of respondents (88%) were satisfied¹ with the care and support services they receive. However, one-in-twenty respondents (6%) were dissatisfied².

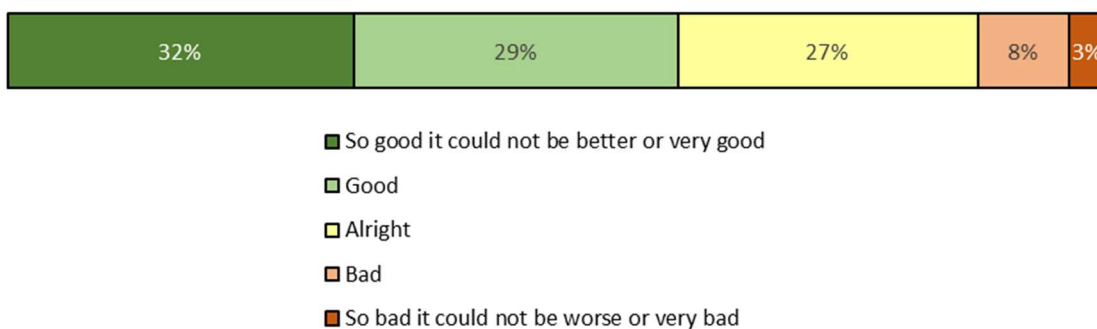
Chart 1 Overall, how satisfied or dissatisfied are you with the care and support services you receive?



Base: all respondents (unweighted 261)

Respondents were then asked how they rated their quality of life as a whole. About three-fifths of respondents (61%) rated their quality of life as good³ and about one-in-eight respondents (12%) rated their quality of life as bad⁴.

Chart 2 Thinking about the good and bad things that make up your quality of life, how would you rate the quality of your life as a whole?



Base: all respondents (unweighted 256)

¹ Either 'extremely satisfied', 'very satisfied' or 'quite satisfied'.

² Either 'extremely dissatisfied', 'very dissatisfied' or 'quite dissatisfied'.

³ Either 'so good it could not be better', 'very good' or 'good'.

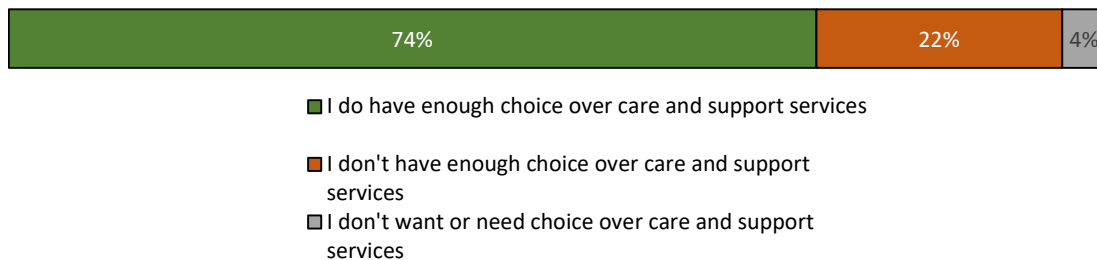
⁴ Either 'so bad it could not be worse', 'very bad' or 'bad'.



4.2.1. Having choice over care and support

Respondents were then asked which of three statements best described how much choice they have over the care and support services they receive. Three-quarters of respondents (74%) said that they have enough choice, about a fifth of respondents (22%) said that they don't have enough choice and one-in-twenty respondents (4%) said they don't want or need choice about the care and support services they receive.

Chart 3 Which of the following statements best describes how much choice you have over the care and support services you receive?



Base: all respondents (unweighted 165)

4.3. Social care related quality of life (1A)

The ASCOF measure social care-related quality of life (1A) is constructed from eight domains. This indicator aims to give an overarching view of the quality of life of social care users. The eight domains are control, personal care, food, accommodation, personal safety, social life, occupation and dignity.

For each domain, respondents were presented a question and asked to choose which description from four different options best matched their situation. For example, for the personal safety domain, respondents were asked which of the following statements best described how safe they feel, 'I feel as safe as I want', 'I generally feel adequately safe, but not as safe as I would like', 'I feel less than adequately safe' and 'I don't feel at all safe'.

The following table shows the full response to all eight questions.



Table 4 Responses in full for the questions that make up the ASCOF measure social care related quality of life (1A)

Domain – question	Response	(%)
Control - Which of the following statements best describes how much control you have over your daily life? I have...	...as much control over my daily life as I want	34%
	...adequate control over my daily life	43%
	...some control over my daily life but not enough	16%
	...no control over my daily life	6%
Personal care - Thinking about keeping clean and presentable in appearance, which of the following statements best describes your situation?	I feel clean and am able to present myself the way I like	54%
	I feel adequately clean and presentable	38%
	I feel less than adequately clean or presentable	7%
	I don't feel at all clean or presentable	2%
Food - Thinking about the food and drink you get, which of the following statements best describes your situation?	I get all the food and drink I like when I want	66%
	I get adequate food and drink at OK times	28%
	I don't always get adequate or timely food and drink	5%
	I don't always get adequate or timely food and drink, and I think there is a risk to my health	1%
Accommodation - Which of the following statements best describes how clean and comfortable your home is? My home is...	... as clean and comfortable as I want	66%
	... is adequately clean and comfortable	28%
	...not quite clean or comfortable enough	5%
	...not at all clean or comfortable	2%
Personal safety - Which of the following statements best describes how safe you feel?	I feel as safe as I want	66%
	Generally I feel adequately safe, but not as safe as I would like	26%
	I feel less than adequately safe	6%
	I don't feel at all safe	2%
Social life - Thinking about how much contact you've had with people you like, which of the following statements best describes your social situation? I have...	...as much social contact as I want with people I like	44%
	...adequate social contact with people	33%
	... some social contact with people, but not enough	18%
	...little social contact with people and feel socially isolated	6%
Occupation - Which of the following statements best describes how you spend your time?	I'm able to spend my time as I want, doing things I value or enjoy	34%
	I'm able to do enough of the things I value or enjoy with my time	30%
	I do some of the things I value or enjoy with my time but not enough	28%
	I don't do anything I value or enjoy with my time	8%



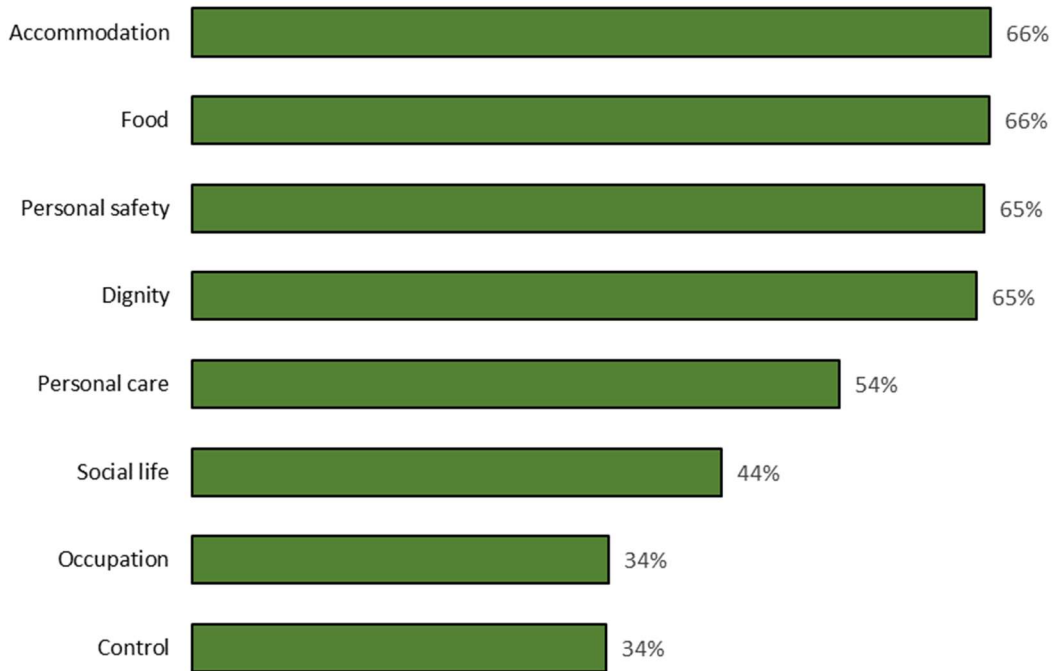
Domain – question	Response	(%)
Dignity - Which of these statements best describes how the way you are helped and treated makes you think and feel about yourself? The way I'm helped and treated...	...makes me think and feel better about myself	62%
	...does not affect the way I think or feel about myself	22%
	...sometimes undermines the way I think and feel about myself	10%
	...completely undermines the way I think and feel about myself	6%
Dignity - Which of these statements best describes how having help to do things makes you think and feel about yourself? Having help...	...makes me think and feel better about myself	65%
	...does not affect the way I think and feel about myself	21%
	...sometimes undermines the way I think and feel about myself	13%
	...completely undermines the way I think and feel about myself	1%



For each domain, respondents can be described as having either 'no needs', 'low-level needs' or 'high-level needs'. Shown in the chart below is the proportion of respondents in each of the eight domains with 'no needs'.

Of the eight domains, respondents were most likely to have 'no needs' for accommodation (66%) and food (66%). Respondents were least likely to have 'no needs' for control (34%) and occupation (34%).

Chart 4 Social care related quality of life (1A) – 'no needs'



Base: all respondents (unweighted 254-261)



Table 5 shows the eight domains over time, from 2016/17 to 2022/23. Between the 2021/22 and 2022/23 surveys there were no statistically significant improvements or declines in the domains.

Table 5 ASCOF measure social care-related quality of life (1A) domains over time (2016/17 to 2022/23)

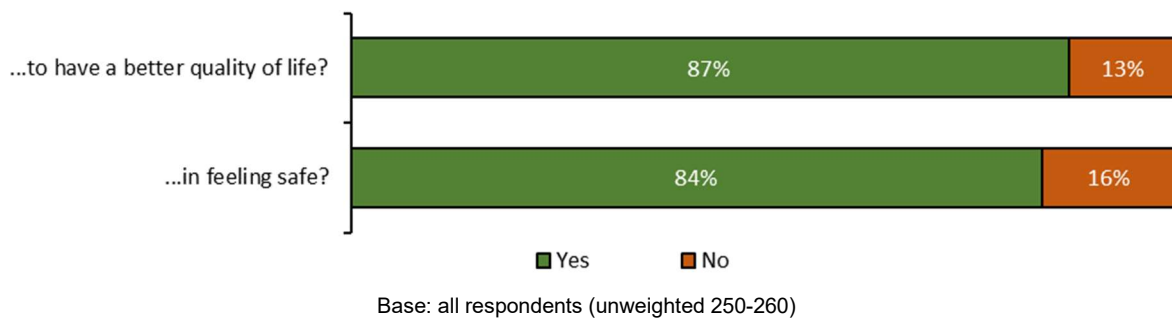
Domain - question	16/17	17/18	18/19	19/20	21/22	21/22
Control - Which of the following statements best describes how much control you have over your daily life? <i>I have as much control over my daily life as I want</i>	29%	34%	34%	35%	36%	34%
Personal care - Thinking about your personal care, by which we mean being clean and presentable in appearance, which of the following statements best describes your situation? <i>I feel clean and am able to present myself the way I like</i>	59%	58%	58%	57%	58%	54%
Food - Thinking about the food and drink you get, which of the following statements best describes your situation? <i>I get all the food and drink I like when I want</i>	59%	68%	61%	61%	68%	66%
Accommodation - Which of the following statements best describes how clean and comfortable your home is? <i>My home is as clean and comfortable as I want</i>	64%	75%	64%	70%	71%	66%
Personal safety - Which of the following statements best describes how safe you feel? <i>I feel as safe as I want</i>	70%	76%	70%	68%	70%	65%
Social life - Thinking about how much contact you've had with people you like, which of the following statements best describes your social situation? <i>I have as much social contact as I want with people I like</i>	43%	49%	44%	40%	45%	44%
Occupation - Which of the following statements best describes how you spend your time? <i>I'm able to spend my time as I want, doing things I value or enjoy</i>	34%	42%	37%	29%	39%	34%
Dignity - Thinking about the way you are helped and treated and how that makes you think and feel about yourself, which of these statements best describes your situation? <i>The way I'm helped and treated makes me think and feel better about myself</i>	61%	63%	59%	60%	63%	62%



For the question on quality of life and for some of the eight domains, a follow up question was asked about whether the care and support services they receive help them in that area. For example, in the control domain, respondents were asked if care and support services helped them in having control over their daily life.

For the quality of life question and personal safety domain, respondents could answer 'yes' or 'no'. Respondents were most likely to say 'yes' that care and support services helped them to have a better quality of life (87%).

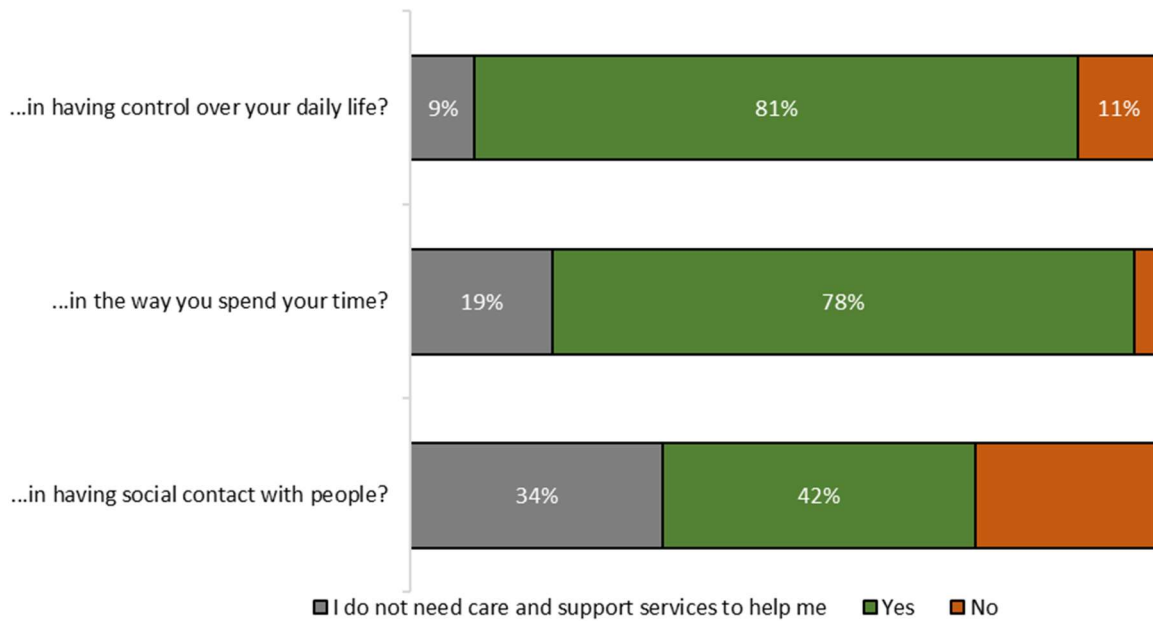
Chart 5 Do care and support services help you...



For the remaining domains, respondents could answer 'yes', 'no' or that 'I do not need care and support services to help me...' For these domains, respondents were most likely to say 'yes' that care and support services helped them in having control over their daily life (81%), in the ways they spent their time (78%) and in having social contact with people (42%).



Chart 6 Do care and support services help you...



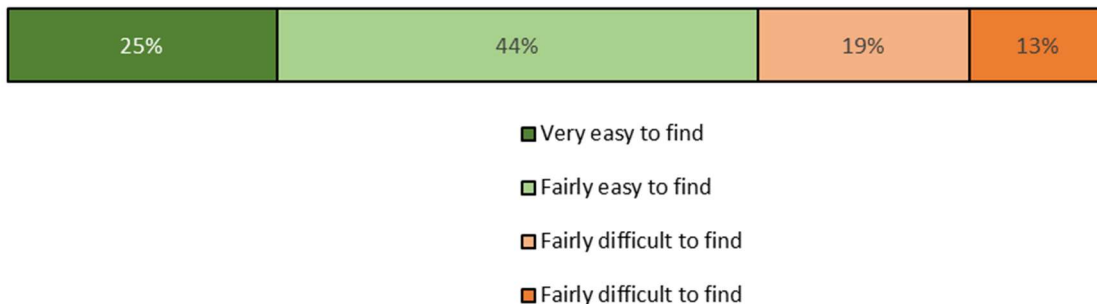
Base: all respondents (unweighted 244-249)

4.4. Information

Respondents were asked if, in the past year, they had generally found it easy or difficult to find information and advice about support, services or benefits. Around a third of respondents (35%) said that they hadn't tried to find any information or advice.

Of those respondents who have tried to find information or advice, more than two thirds (68%) said it was easy⁵ to find and about one third (32%) said it was difficult to find⁶.

Chart 7 In the past year, have you generally found it easy or difficult to find information and advice about support, services or benefits?



Base: respondents who have tried to find information or advice (unweighted 167)

⁵ Either very easy to find or fairly easy to find

⁶ Either very difficult to find or fairly difficult to find



4.5. Health

Over two-fifths of respondents (43%) said that in general their health was very good or good, almost two-fifths of respondents (37%) said that their health in general was fair and a fifth (20%) said it was bad or very bad.

Table 6 How is your health in general?

Very good	16%
Good	27%
Fair	37%
Bad	14%
Very bad	6%

Almost two-fifths of respondents (37%) said that they had no pain or discomfort on the day they responded to the questionnaire, half of respondents (49%) said that they had moderate pain or discomfort, and about a seventh of respondents (14%) said that they had extreme pain or discomfort.

Table 7 Which statements best describe your own health state today

I have no pain or discomfort	37%
I have moderate pain or discomfort	49%
I have extreme pain or discomfort	14%

Half of respondents (51%) said that they were not anxious or depressed on the day they responded to the questionnaire, two-fifths of respondents (41%) said that they were moderately anxious or depressed and less than one tenth (9%) said that they were extremely anxious or depressed.

Table 8 Which statements best describe your own health state today

I am not anxious or depressed	51%
I am moderately anxious or depressed	41%
I am extremely anxious or depressed	9%

4.5.1. *Doing things for myself*

Respondents were presented with eight statements such as, do you usually manage to feed yourself, and asked if it is something they can do it easily by themselves, if they have difficulty doing it by themselves or if they can't do it by themselves.

Of the eight statements, the things that respondents were most likely to say they can't do by themselves were deal with finances and paperwork (60%), manage to wash all over (36%) and manage to get dressed and undressed (25%).

Table 9 Do you usually...?

	I can do this easily by myself	I have difficulty doing this myself	I can't do this by myself
...manage to get around indoors (except steps) by yourself	56%	26%	18%
...manage to get in and out of a bed (or a chair) by yourself	59%	23%	18%
...manage to feed yourself	74%	18%	8%
...deal with finances and paperwork - for example, paying bills, writing letters - by yourself	22%	18%	60%
...manage to wash all over by yourself, using either a bath or shower	32%	32%	36%
...manage to get dressed and undressed by yourself	42%	33%	25%
...manage to use the WC/toilet by yourself	61%	23%	16%
...manage to wash your face and hands by yourself	70%	18%	12%

4.5.2. Getting around in my local area

Respondents were asked about getting around in their local area. About three-tenths of respondents (28%) said that they can get to all the places in their local area that they want. About a quarter (26%) said that, at times, they find it difficult to get to all the places in their local area that they want. Just under half of respondents (46%) said that they are unable to get to all the places in their local area that they want or that they do not leave their home.

Table 10 Thinking about getting around outside of your home, which of the following statements best describes your present situation?

I can get to all the places in my local area that I want	28%
At times I find it difficult to get to all the places in my local area that I want	26%
I am unable to get to all the places in my local area that I want	20%
I do not leave my home	26%

4.6. Type of help and support received

Four-fifths of respondents (80%) were in a community support setting, one seventh (16%) were in residential care and less than one-in-twenty respondents (4%) were in nursing care.

Table 11 Support setting

Community	80%
Residential care	16%
Nursing care	4%



About two-fifths of respondents (37%) had a local authority (LA) managed personal budget, one quarter of respondents had direct payment only (27%), one seventh had LA commissioned support only (15%) and one-in-fifty (2%) had part direct payment.

Table 12 Mechanism of delivery

Direct payment only	27%
Part direct payment	2%
LA managed personal budget	37%
LA commissioned support only	15%
Missing	20%

About a quarter of respondents (26%) didn't receive any practical help on a regular basis from their husband/wife, partner, friends, neighbours, or family members. Over two-fifths of respondents (43%) received help from someone living in their household and about two-fifths (41%) received help from someone living in another household.

Table 13 Do you receive any practical help on a regular basis from your husband/wife, partner, friends, neighbours or family members?

Yes, from someone living in my household	43%
Yes, from someone living in another household	41%
No	26%

About three-fifths of respondents (59%) didn't buy any additional care or support privately or pay more to 'top-up' their care and support. One-third of respondents (33%) bought some more care and support with their own money and one-tenth of respondents (9%) had family that paid for some more care and support for them.

Table 14 Do you buy any additional care or support privately or pay more to 'top up' your care and support?

Yes, I buy some more care and support with my own money	33%
Yes, my family pays for some more care and support for me	9%
No	59%

4.7. Suitability of home

More than half of respondents (53%) said that their home met their needs very well. Over two-fifths of respondents (42%) said that their home met most or some of their needs. However, one-in-twenty respondents (5%) said that their home was totally inappropriate for their needs.

Table 15 How well do you think your home is designed to meet your needs?

My home meets my needs very well	53%
My home meets most of my needs	28%
My home meets some of my needs	14%
My home is totally inappropriate for my needs	5%



4.8. Demographics

About three-fifths of respondents (56%) were female and about two-fifths of respondents (44%) were male.

Table 16 Gender

Male	44%
Female	56%
Other	0%

Nine-tenths of respondents (90%) were white and one-tenth of respondents (10%) were from an ethnic minority community.

Table 17 Ethnicity

White	90%
Ethnic minority	10%
Refused/not stated	0%

Almost three-fifths of respondents (58%) were aged 65 and over and two-fifths of respondents (42%) were aged 18-64.

Table 18 Age group

18-64	42%
65 and over	58%



5. Appendix

ASCOF measures definitions

Measure	1A. Social care-related quality of life
Domain/ Outcome statement	1. Enhancing quality of life for people with care and support needs (<i>overarching measure</i>)
Rationale	This indicator gives an overarching view of the quality of life of users based on outcomes identified through research that are relevant to adult social care.
Definition	This is a composite measure using responses to questions from the Adult Social Care Survey covering eight domains (control, how people are treated, personal care, food and nutrition, safety, occupation, social participation and accommodation). Responses indicate whether the individual has unmet needs in any of the eight areas. The domains are given equal weight, with the measure calculated using a simple cumulative score based on responses to each question. <i>Source: Adult Social Care Survey</i>

Measure	1B. The proportion of people who use services who have control over their daily life
Domain/ Outcome statement	1. Enhancing quality of life for people with care and support needs <i>People manage their own support as much as they wish, so that are in control of what, how and when support is delivered to match their needs.</i>
Definition	Numerator: In response to Question 3a, those individuals who selected the response ‘I have as much control over my daily life as I want and “I have adequate control over my daily life”’. Denominator: All those that respond to question 3a <i>Source: Adult Social Care Survey</i>

Measure	111. The proportion of people who use services and their carers, who reported that they had as much social contact as they would like
Domain/ Outcome statement	<i>1. Enhancing quality of life for people with care and support needs.</i>
Definition	Numerator: In response to Question 8a, those individuals who selected the response “I have as much social contact as I want with people I like”. Denominator: All those that responded to question 8a. <i>Source: Adult Social Care Survey</i>



Measure	1J. Adjusted social care-related quality of life – impact of adult social care services
Domain/ Outcome statement	<i>1. Enhancing quality of life for people with care and support needs (overarching measure)</i>
Definition	This measure is based on the quality of life scores arising from responses to the Adult Social Care Survey. It is a composite measure using responses to survey questions covering the eight domains identified in the ASCOT; control, dignity, personal care, food and nutrition, safety, occupation, social participation and accommodation. <i>Source: Adult Social Care Survey</i>

Measure	3A. Overall satisfaction of people who use service with their care and support
Outcome statement	3. Ensuring people have a positive experience of care and support. <i>People who use social care and their carers are satisfied with their experience of care and support services. (overarching measure)</i>
Definition	Numerator: In response to question 1, those individuals who selected the response “I am extremely satisfied” or “I am very satisfied” and for the easy read version for those with learning disabilities, those individuals who selected “I am very happy with the way staff help me, it’s really good”. Denominator: All those that answered question 1. <i>Source: Adult Social Care Survey</i>

Measure	3D. The proportion of people who use services and carers who find it easy to find information about services
Domain/ Outcome statement	3. Ensuring people have a positive experience of care and support. <i>People know what choices are available to them locally, what they are entitled to, and who to contact when they need help.</i>
Definition	Numerator: In response to question 12, “In the past year, have you found it easy or difficult to find information and advice about support, services or benefits” those individuals who selected the response “Very easy to find” and “fairly easy to find”. Denominator: All those that respond to question 12 minus those who responded “I’ve never tried to find information or advice” <i>Sources: Adult Social Care Survey and Carers Survey</i>

Measure	4A. The proportion of people who use services who feel safe
Domain/ Outcome statement	4. Safeguarding people whose circumstances make them vulnerable and protecting from avoidable harm <i>(overarching measure)</i>
Definition	<p>Numerator: In response to the question 7a “Which of the following statements best describes how safe you feel?” the number of people who respond, “I feel as safe as I want”.</p> <p>Denominator: All those that respond to question 7a.</p> <p><i>Source: Adult Social Care Survey</i></p>

Measure	4B. The proportion of people who use services who say that those services have made them feel safe and secure
Domain/ Outcome statement	<p>4. Safeguarding people whose circumstances make them vulnerable and protecting from avoidable harm</p> <p><i>Everyone enjoys physical safety and feels secure.</i></p> <p><i>People are free from physical and emotional abuse, harassment, neglect and self-harm.</i></p> <p><i>People are protected as far as possible from avoidable harm, disease and injury.</i></p> <p><i>People are supported to plan ahead and have the freedom to manage risks the way that they wish.</i></p>
Definition	<p>Numerator: In response to the "Do care and support services help you in feeling safe?" the number of people who respond “yes”.</p> <p>Denominator: All those that respond to question 7b.</p> <p><i>Source: Adult Social Care Survey</i></p>

