

**Feedback to the Care Data Matters Roadmap**

The format of the feedback asks a similar question for each group of stakeholders against each of the themes outlined in the roadmap – “What information and data do the *stakeholders* need, in relation to the particular *theme*?”

Theme	People who use care and support services, and their carers	Care providers	Local government	National government
Population, characteristics, needs and outcomes of people who draw on care and support including self-funders	Broad information in relation to eligibility, access and outcomes may be of interest	Market Position Statements and Market sustainability plans on demographic trends, long term conditions, health outcomes, numbers of people accessing specified care services and trends, funding arrangements	Environment and wider determinants e.g., housing, deprivation, economic challenges. Possibly air quality Self-funding and state funded populations. Demographics inc. geographical and GP practice registrations.	
Quality of care and support (including early intervention, safeguarding and integration of health and care services)	Quality ratings, complaints upheld, safeguarding enquiries, leadership and management data, workforce data inc. capacity and turnover, services available, timeliness of interventions, accessibility, qualifications, and certification, Data which references quality and cost may be beneficial in choice determinations		CQC ratings in more detail e.g., by home size, location relating to levels of deprivation. Improved understanding of possible future demand.	
Supply of Care Services, local authority commissioning and accountability, and markets (including occupancy, capacity, and discharge)	Availability, accessibility, funding arrangements, sustainability, choice.	Trend analysis, market closures, market entrants, occupancy, lengths of stay.	Self-funder market – size, demand, type of care, fragility of market etc. Direct payments market.	

Theme	People who use care and support services, and their carers	Care providers	Local government	National government
Social care workforce	Availability, turnover, capacity, certification, qualification, skills, and knowledge Funding and payment models, pay and reward	Trend data and demographics	IMD <sup>1</sup> categories that we draw care staff from.	
Population of unpaid carers			Size of population and demographics, local geographical picture, support needs, whether they are in paid work as well (ideally with some detail e.g. income, part time or full, sector etc). What services are being accessed	
Contingency and infectious disease control measures	How to access the most up to date Infection Prevention and Control guidance. Where to access specialist advice and support if needed For regulated services, the outcome of quality inspections such as CQC, NHS, Health Watch, LA contracts including IPC which will inform people when choosing particular service e.g., a care home for either themselves or others	Most up to date Infection Prevention and Control (IPC) guidance for the sector, where to access specialist IPC support locally. Locally, the results of their IPC audit undertaken by the service and any recommendations needed to improve their IPC systems and processes Information on resident's risk factors and whether classed as clinically vulnerable/extremely. Staff transferable skills and information on agency workforces if staff cover is required.	Number of outbreaks locally, infection type and trends in relation to infections at local and national level; admission data to secondary care including reason Surveillance data e.g., MRSA blood stream infections; respiratory & intestinal outbreaks etc – this is already provided via UKHSA Flu vaccine uptake data How many carers have the care certificate. Care home capacity, staff numbers. Resident make-up, whether a home is care or nursing.	Information/ surveillance data about infection outbreaks is collated and monitored by UKHSA nationally including trends. Flu/COVID Vaccine uptake; workforce data – such data is already supplied by providers to national government via the capacity tracker. Outbreak or cases in immediate area such as same district

<sup>1</sup> Indices of multiple deprivation (IMD). They provide a means of identifying the most and least deprived areas in England and to compare whether one area is more deprived than another.