



## **Adult Social Care Client Level Data – Principles for applying the guidance**

May 2023

The Client Level Data (CLD) collection represents a huge transformation with significant potential to improve our understanding of the Adult Social Care system, as set out in [Care Data Matters](#). For the first time at the national level, we will have timely record-level data about support and care provided to individuals and will be able to link these with NHS records to understand interactions.

The Department of Health and Social Care (DHSC) has spoken to many local authorities on a 1:1 basis and the vast majority through regional or national engagement events. There is widespread support for the aims of the CLD project, but also implementation challenges and variation in how services are organised and recorded locally. We have received and responded to a large volume of questions via the mailbox about how the guidance applies to specific activities and situations.

This principles document is designed to help local authority adult social care data leads make decisions about how to apply the guidance and to provide reassurance to local authorities submitting CLD returns or preparing to make a first mandatory submission in July. It should be read alongside the revised CLD guidance (see [February 2023 update](#)). Separate from this document, we will provide further transparency information describing our plans for analysing and publishing the data, including analytical outputs to be made available to local authorities.

### **Guiding principles for developing CLD collection**

Our approach to developing the CLD collection builds on the way that adult social care data is routinely collected, reported and used by local and central government, following our [ten guiding principles](#) for transforming adult social care data. These principles have influenced the development of CLD in three main ways:

1. **working in partnership with local government** to develop the specification & guidance. The specification was developed with the CLD local authority reference



group, with an aim of balancing the data needs of stakeholders across the system against the challenges of introducing a new record-level collection. The same partnership approach is being taken to the quality assurance and analysis of the data. We will also continue to engage with local authority colleagues through LGA and ADASS and via ADASS networks.

2. **minimising burden on local authorities** by enabling local authorities to extract and upload records in a format close to the way that activity is recorded on case management systems. This approach means that more of the data processing will be done centrally using agreed transformation rules and methods.
3. **promoting good local record management and quality assurance** in line with [national records management codes of practice](#) and [national standards for quality assurance of administrative data](#).

## Principles for applying the CLD guidance

**Local authorities should be pragmatic in providing submissions that best match the specification and guidance** paying particular attention to ensure that a defined list applies, that the submission matches this wording identically.

**Local authorities should make clear plans to be able to provide complete mandatory submissions** where this is not possible for the first mandatory submission in July. Please use the comments box on NHS Arden and GEM's (AGEM's) data landing portal (DLP) to indicate where information is not currently available and describe plans to include it in future returns.

**CLD returns should reflect the activity and outcomes at the time of the event** with minimal additional processing required. For example, there is no requirement to identify sequels as is the case for the SALT return.

**The focus should be on correcting data quality issues at source**, with quality assurance processes to support this. For example, have there been operational inspections of the data records? Are independent audits conducted? What have checks shown?



## Responses to frequently asked questions

### ***Are blank values and 'Unknown' responses acceptable for mandatory fields?***

Yes, blank values and 'Unknown' responses are valid responses and may represent the most appropriate response in some individual situations. The guidance provides information for each field describing when that information is required only for certain client groups or event types. Annex B of the CLD guidance document contains a table that clearly out the expectations for the mandatory fields.

For Person Details:

- Defined lists include an 'Unknown' response option. This is a valid response. For example, Primary Support Reason will typically be unknown for people making a new request who do not progress to an assessment.
- Open-ended fields e.g., text and date fields should be left blank in some situations. For example, Date of Death will be blank when the person is alive or when the date of death is unknown. This reflects the way that this information is typically captured on local systems.

For Events:

- Fields containing information about events should only completed for the relevant event type. For example, Route of Access should only be completed for Requests.
- For some specific event types, mandatory fields should be left blank e.g. Event Outcome should be left blank for financial assessments, since these are carried out separately from needs assessments and provision of care.

'Carer known by association' rows of data are designed to allow person details and additional carer-specific information about unpaid carers to be submitted. These data rows should be submitted for carers who receive an assessment or service, but where the record of that event is recorded against the person they care for. Events fields should be left blank for these data rows.



***What if information needed for mandatory fields is not routinely recorded on local case management systems?***

We are aware that information required to complete fields such as Accommodation Status, Employment Status, Client Funding Status and Review Outcomes Achieved is not routinely recorded. This was confirmed by the results of the CLD Pulse Survey – for example, two fifths of participating local authorities (53 out of 130) reported that Review Outcomes are not currently recorded on their case management system.

We encourage local authorities to start capturing this information in a reportable format through assessments and annual care plan reviews. We appreciate that this may involve changes to IT systems and working with IT suppliers on system upgrades and that it will take a while until there is coverage of service users once system changes are implemented. Please provide the relevant information in the comments box on the DLP.

***Financial assessments and service costs are recorded on finance system, not the case management system. How should this be included in the CLD return?***

Different local authorities are taking different approaches to extracting information from local systems to create their CLD return. A typical workflow is:

- Extract the client-level records from the case management system
- Map local categorisations and definitions to the national ones set out in the CLD specification
- Extract and process additional data not held on the case management system e.g. information from financial systems and external services such as mental health or reablement
- Combine into a single file to upload to the DLP

Over time, we will work with local authorities and IT suppliers to support more automated processes.

For financial data, many local authorities currently extract the data from their financial system and carry out some data processing to map the information to the



CLD specification e.g. converting costs into the most relevant unit cost. Some authorities are working with IT suppliers or writing their own data pipelines to output the data in the required format. Note that service costs are planned not actual costs, and that the current rate for a particular service at the end of the reporting period can be used and mapped to the relevant service rows in the CLD return for that period.

### **Updates and Further Information**

Further information can be found on AGEM CLD website. Questions can be sent to [socialcaredata@dhsc.gov.uk](mailto:socialcaredata@dhsc.gov.uk).