

Deaths of care home residents, England and Wales QMI

Quality and methodology information (QMI) for deaths of care home residents registered in England and Wales.

Contact:
Tamsyn Harris, Sophie John
health.data@ons.gov.uk
+44 1329 444110

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To be announced

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1 . Output information

- National Statistic: No
- Data collection: Administrative data
- Frequency: Annually and weekly
- How compiled: Based on third-party administrative data
- Geographic coverage: England and Wales
- Contact: Health.Data@ons.gov.uk
- Last revised: 2022
- Related publications:
 - [Deaths of care home residents, England and Wales](#)
 - [Deaths involving COVID-19 in the care sector, England and Wales](#)
 - [Deaths registered weekly in England and Wales, provisional](#)

2 . About this Quality and Methodology Information Report

This quality and methodology report contains information on the quality characteristics of the data (including the [European Statistical System five dimensions of quality, as outlined in their ESS handbook for quality reports \(PDF 2.99MB\)](#)) as well as the methods used to create it.

The information in this report will help you to:

- understand the strengths and limitations of the data
- learn about existing uses and users of the data
- reduce the risk of misusing data
- help you to decide suitable uses for the data
- understand the methods used to create the data

3 . Important points about care home resident deaths data

- We publish [weekly Care home resident deaths figures](#) and [annual Deaths of care home residents, England and Wales figures](#); both releases are based on death registrations of care home residents.
- The term "care home residents" refers to all deaths where either (a) the death occurred in a care home or (b) the death occurred elsewhere but the place of residence of the deceased was recorded as a care home.
- The Births and Deaths Registration Act (1836) made it a legal requirement for all deaths to be registered from 1 July 1837.
- The Local Registration Service, in partnership with the [General Register Office \(GRO\)](#), register deaths occurring in England and Wales.
- Coding for cause of death is carried out according to the World Health Organization (WHO) International Classification of Diseases (ICD-10) and internationally agreed rules, allowing for international comparisons.
- This publication also includes data provided by the [Care Quality Commission \(CQC\)](#) and [Care Inspectorate Wales \(CIW\)](#), comprising deaths of care home residents notified to these bodies.

4 . Quality Summary

Overview

Mortality statistics in England and Wales are based on the details collected when deaths are certified and registered. Provisional figures for care home resident deaths, which have not been subject to the full quality assurance process, are published [weekly](#). Statistics on care home resident deaths registered each year, based on final mortality data, are published in the annual [Deaths of care home residents, England and Wales](#) series of bulletins. These publications cover deaths that occurred in England and Wales (the legal remit of the Office for National Statistics (ONS)). [National Records of Scotland \(NRS\)](#) are responsible for mortality data in Scotland, and [Northern Ireland Statistics and Research Agency \(NISRA\)](#) are responsible for mortality data in Northern Ireland. NRS publish deaths in care homes as part of their [weekly Deaths involving coronavirus \(COVID-19\) in Scotland statistics](#), and NISRA publish COVID-19 related deaths in care home residents in Northern Ireland as part of their [weekly deaths statistics](#).

The following sections will cover quality and methodology specific to the production of care home resident mortality data. More detailed information on mortality statistics for the general population is available in our [Mortality statistics in England and Wales Quality and Methodology Information \(QMI\)](#) and our [User guide to mortality statistics](#).

Uses and users of care home resident mortality data

External users of care home resident mortality statistics include the [Department of Health and Social Care \(DHSC\)](#) and the [Cabinet Office](#), as well as devolved bodies such as [Welsh Government](#) and [Public Health Wales \(PHW\)](#). These organisations use the data to inform policy decisions and monitor the health of the care home resident population. Local authorities also use mortality data to aid planning and resource allocation. In our annual publication series, we request feedback from users of the data.

We use mortality statistics to:

- produce life expectancy estimates
- quality assure census estimates
- quality assure death notification data from the [Care Quality Commission \(CQC\)](#) and [Care Inspectorate Wales \(CIW\)](#)
- report on social and demographic trends
- provide information on public health issues such as the coronavirus pandemic
- conduct health analyses
- further analyse mortality (for example, causes and place of death, mortality by different characteristics such as age and sex)

When interpreting these mortality statistics, please note that:

- summary figures published in the release include analysis of causes of death by broad disease groupings (a list of these is available in [Section 10 of the User guide to mortality statistics](#))
- figures in this release are presented for England and Wales separately because of the [devolved nature of adult social care](#)

There are several publications related to mortality in care home residents that are not directly comparable owing to important differences in the data, and these are summarised below:

- [Deaths of care home residents, England and Wales](#): Final data; death registrations; annual data; care home resident data (regardless of place of death)
- [Deaths involving COVID-19 in the care sector](#): Provisional data; death occurrences; weekly data; care home resident data (regardless of place of death)
- [Care home resident deaths registered weekly in England and Wales](#): Provisional data; death registrations; weekly data; care home resident data (regardless of place of death)
- [Deaths registered weekly in England and Wales](#): Provisional data; death registrations; weekly data; deaths in care homes only

Strengths and limitations

Strengths and limitations of ONS data

The strengths and limitations of the ONS care home resident mortality data for England and Wales are the same as those reported in the [Mortality statistics in England and Wales QMI, Section 4, Strengths and limitations subsection](#).

Strengths and limitations of CQC data

Strengths:

- Good coverage of deaths occurring in care home residents while a regulated activity is being provided as it is mandatory for regulated services to report deaths to CQC.
- Deaths are notified to CQC regardless of where they occurred.
- Notifications are provided to CQC within two to three days of death, a shorter delay than with death registrations.
- CQC will contact providers if a form is blank or insufficiently complete to obtain the missing information.
- CQC analysts clean the data extracted from CQC systems and remove records where there is duplication; standard quality assurance procedures are undertaken.

Limitations:

- Notification forms ask service providers about the person who died, including age and gender. These questions are not mandatory, and so providers may not answer them. This would render the dataset incomplete, therefore we do not compare characteristics between ONS and CQC data.
- Care homes can submit death notifications via an online portal or by returning a downloadable form, and the questions differ slightly by submission method used. However, the variables supplied to ONS by CQC are asked on both versions of the form.
- Domiciliary care was included in the first edition of the annual deaths release; however, it has not been included in subsequent editions owing to concerns raised by CQC of the risk of under-reporting. CQC data on domiciliary care only contains data on those who died while a regulated activity was being provided, or those whose death may have been the result of a regulated activity and how it was provided, and so does not reflect all deaths of those receiving domiciliary care.
- Death notifications data do not go as far back in time as death registrations.
- Cause of death does not have to be medically confirmed and is reported by the care provider. This may have a particular effect on deaths from COVID-19, as unlike ONS death registrations, there is no requirement for either a medical diagnosis of COVID-19 or a positive test to state COVID-19 as cause of death.

Strengths and limitations of CIW data

Strengths:

- Almost complete coverage of deaths occurring to care home residents, as these deaths are collected by CIW under statutory regulation.
- Notifications are provided to CIW within two to three days of death, a shorter delay than registrations.
- Deaths are notified to CIW regardless of where they occurred.

Limitations:

- CIW do not publish data on characteristics of care home residents such as age or sex.
- During a quality assurance review, CIW noted some providers had notified them of the same death more than once, resulting in duplicates in the data. This was corrected at the time, but it is possible that duplicates will occur again. However, CIW now conduct regular quality assurance to minimise the impact of duplicates on the data quality.
- Cause of death does not have to be medically confirmed and is reported by the care provider. This may have a particular effect on deaths from COVID-19, as unlike ONS death registrations, there is no requirement for either a medical diagnosis of COVID-19 or a positive test to state COVID-19 as cause of death.

Recent improvements

Recent improvements to mortality data and publications are detailed in the [Mortality statistics in England and Wales QMI, Section 4, Recent improvements subsection](#).

5 . Quality characteristics of the care home resident mortality data

This section provides a range of information that describes data quality and details any points to be noted when using the outputs.

Relevance

The degree to which statistical outputs meet users' needs for both coverage and content.

Coverage

The registration of deaths occurring in England and Wales is carried out by the Local Registration Service in partnership with the [General Register Office \(GRO\)](#). Information collected at death registration in England and Wales is recorded on the Registration Online (RON) system by registrars. We quality assure and publish care home resident mortality data for England and Wales.

All deaths that occur in England and Wales must be registered in England and Wales. Deaths of those whose usual residence is outside England and Wales (non-residents) are not included in our care home resident deaths publications. Our mortality statistics exclude deaths of all residents of England and Wales that occur (and are therefore registered) outside of England and Wales.

Content

To meet user needs, timely but provisional counts of death registrations are published [weekly](#), and are available 11 days after the reference period.

Our first release of final annual data takes place in autumn, when our [Deaths of care home residents, England and Wales](#) bulletin and tables are published, following release of the [Deaths registered in England and Wales](#) publication.

We ensure the analysis published meets users' needs through:

- regular meetings with government stakeholders such as [Department of Health and Social Care](#), [Public Health Wales](#), [Welsh Government](#), [Care Quality Commission \(CQC\)](#) and [Care Inspectorate Wales \(CIW\)](#)
- request for feedback from users via phone and email

Accuracy and reliability

The degree of closeness between an estimate and the true value. Details on how we ensure accuracy and reliability during data collection and when coding cause of death and our quality assurance process can be found in [Section 5, Accuracy and reliability of the Mortality statistics in England and Wales QMI](#) and our [User guide to mortality statistics](#).

Coherence and comparability

Coherence is the degree to which data that are derived from different sources or methods, but refer to the same topic, are similar. Comparability is the degree to which data can be compared over time and domain.

In terms of coherence, there are always some differences between the death registrations from the Office for National Statistics (ONS), and the death notifications from CQC and CIW. This is because of the differences in the data collection (for example, time delays and the sources of data) and purpose of the data. Particularly for COVID-19 deaths, as cause of death for ONS figures is taken from the death certificate, whereas for CQC and CIW data cause of death is reported by the care provider and so may not be as accurate.

We started publishing deaths figures in 2020, covering data from 2019. While the methods between publication years so far have not changed considerably, meaning that data are comparable. Caution should be taken when comparing data from 2020 and 2021 to other years owing to the effects of the pandemic and lockdowns.

National and international comparisons

Our mortality statistics adhere to international standards (for example, cause of death classification and coding), which facilitates international comparisons. Following recommendations from the Office for Statistics Regulation (OSR), a number of [theme groups](#) were set up to improve the coherence and accessibility of health and social care statistics across England and the UK. Government representatives from the four UK nations meet regularly as part of the mortality theme group, to align mortality statistics published by different bodies and improve consistency across the UK.

There is a large degree of comparability in mortality statistics in the general population between countries within the UK; all figures are based on the details collected when deaths are registered. The definitions, classifications and methods used to produce published deaths in the general population statistics are broadly comparable across the four countries. More information can be found in the [Quality Information for Northern Ireland](#) and the [Quality information for Scotland](#).

Changes to methods and outputs over time

Revisions to mortality statistics occur infrequently and usually only take place following revisions to the mid-year population estimates, resulting in revised mortality rates. Footnotes are added to tables where revisions have taken place and are documented in supplementary information accompanying the release. Please see the [Revisions policy for population statistics](#) for more information. Please see [Section 5, Coherence and Comparability, Changes to methods and outputs over time](#) in our [Mortality statistics in England and Wales QMI](#), for changes to methods and outputs that were implemented prior to the publication of care home resident mortality data.

The format of the Deaths of care home residents, England and Wales publication was changed for the 2020 data year to focus on headline figures and trends. This was so we could prioritise the publications of the most time-sensitive data and analysis. This publication returned to its regular format for 2021 data. See our [update on release plans and statistical products](#).

Changes to cause of death coding over time

Please refer to our [User guide to mortality statistics](#).

Accessibility and clarity

Accessibility is the ease with which users can access the data, reflecting the format in which the data are available and the availability of supporting information. Clarity refers to the quality and sufficiency of the release details, illustrations and accompanying advice. For details on the formats of releases, and how to request special extracts and tabulations of mortality data, see [Section 5, Accessibility and clarity of the Mortality statistics in England and Wales QMI](#).

Timeliness and punctuality

Timeliness refers to the lapse of time between publication and the period to which the data refer. Punctuality refers to the gap between planned and actual publication dates.

To meet user needs, timely but provisional counts of death registrations are published by week (11 days after the week ends). The first release of annual figures, based on final data, are published around 10 months after the reference year in our [Deaths of care home residents, England and Wales](#) bulletin, following full quality assurance of the data. Mid-year population estimates for the reference year are also required to calculate mortality rates, usually published in June.

Concepts and definitions

Concepts and definitions describe the legislation governing the output and a description of the classifications used in the output.

The term "care home residents" refers to all deaths where either (a) the death occurred in a care home or (b) the death occurred elsewhere but the place of residence of the deceased was recorded as a care home. The figures should not be confused with "deaths in care homes" as reported in other publications, which refers only to category (a).

The CQC definition for care homes is as follows: "A care home is a place where personal care and accommodation are provided together. People may live in the service for short or long periods. For many people, it is their sole place of residence and so it becomes their home, although they do not legally own or rent it. Both the care that people receive and the premises are regulated." The [CQC website](#) includes explanations of different types of services.

The CIW definition of a care home is as follows: "A care home service provides accommodation, together with nursing or care, to an individual(s) because of their vulnerability or need." The [CIW website](#) includes descriptions of different service types.

Historical changes to the legislation that governs mortality statistics in England and Wales is outlined in [Section 16 of our User guide to mortality statistics](#). A [glossary of terms](#) used in mortality statistics is also available.

6 . Methods used to produce care home resident mortality data

More detailed information on the main processes used in the compilation of mortality statistics is available in our [User guide to mortality statistics](#).

How we collect the data, main data sources and accuracy

Mortality statistics are based on the administrative data collected when deaths are certified and registered in England and Wales. Deaths that occur in England and Wales should be registered within five days of the date of death. There are situations where the registration of a death will be delayed (for example, if the death is referred to a coroner). We publish analysis of the [impact of registration delays on mortality statistics](#) annually.

Our annual publication also includes the number of deaths notified to the [Care Quality Commission \(CQC\)](#) by local authority, and the number of deaths notified to [Care Inspectorate Wales \(CIW\)](#) by local authority.

The CQC is the independent regulator of health and social care in England. Notifications about deaths in care homes must be sent to the CQC without delay and are typically provided within four to five days of death. Providers can notify the CQC using the webform on the [CQC Provider Portal](#), or by using the [Microsoft Word notification form](#) on their website and returning this via email. The data provided by the CQC are counts of deaths each day of care home residents who died in care homes, by date of notification. More information on the data provided by the CQC can be found in our [joint transparency statement](#).

In Wales, the Welsh Government publishes the number of deaths of registered adult care home residents notified to the CIW. Data are collected daily through an online form that is developed and maintained by CIW. The data are validated against previous returns and any substantial changes are queried. Data include all notifications up to midnight each day and cover residents of adult care homes.

The CQC and Welsh Government, respectively, quality assure the data before sharing it with us; for further information see the [CQC website](#), the [Welsh Government page](#) about these statistics and the Information tabs in our [Deaths of care home residents dataset](#).

How we process the data

We receive data on deaths from registry offices electronically through the Registration Online (RON) system daily. Routine and automated checks are carried out on each file and the combined data are then loaded onto the deaths database. Regular receipt and diagnostic reports are produced, resulting in weekly contacts with the identified registrars to resolve any problems. Automated validation processes highlight any inconsistencies and then coding takes place to assign variables such as occupation and cause of death.

Information collected at death registration in England and Wales is recorded on the RON system by registrars. The registrar either selects the communal establishment name from a drop-down menu in RON (in this case a unique communal establishment code is automatically allocated by the system) or input the name and the address manually. Where details are manually entered, no communal establishment code is available until the registration is processed and coded by the ONS. This allows us to collect information on the type of establishment, by breaking the list into over 80 types of organisations. Where the deceased did not die in their own home, or in a communal establishment, they are included in figures for "elsewhere", which covers all other locations. The communal establishment lookup file is updated regularly with any changes, closures, and new establishments. This is done using information received from local registry offices.

How we analyse and interpret the data

The weekly provisional death registrations are presented broken down by country, region, and involvement of influenza and pneumonia or COVID-19. The annual publication presents additional breakdowns such as by local authority, place of death, and leading causes as defined by the World Health Organisation (WHO). CQC and CIW data are presented broken down by local authority only. For further information about coding place of death, see [Section 5 Area coverage, place of occurrence](#) subsection of our User guide, and for further information about coding leading cause of death, see [Section 9 Cause of death coding](#) of our User guide.

As well as the number of deaths, we publish internationally recognised age-standardised mortality rates (ASMRs) to facilitate comparisons. These have been standardised to the European Standard Population to enable comparisons between populations with different age structures, including between males and females and over time. These are calculated using the same methods as for all our [mortality releases](#).

Currently, outside of our Census estimates, we do not have a regular source of data for the care home population. In previous releases we used the latest population projections for England and Wales, and applied a care home resident proportion using the most recent Census data from [NOMIS](#). Although population projections do provide a robust estimate of the care home resident population, the further away in time we are from a Census, the less accurate and reliable the population. For example, the 2021 release, covering 2020 data, uses the care home population data from the 2011 Census. However, the impact the pandemic may have had on the care resident population, owing to excess deaths of care home residents and fluctuations in occupancy rates, is an important consideration. For future releases, we will be able to use the Census 2021 data to base care home resident populations. We are exploring alternate data sources with other government departments, to acquire more regular data of the care resident population.

We also publish ASMRs for different age groups. All rates are expressed as per 100,000 population and are presented with upper and lower limits for 95% confidence intervals. A confidence interval is a measure of the statistical precision of an estimate and shows the range of uncertainty around the figure. As a rule, if the confidence interval around one figure overlaps with the interval around another, we cannot say with certainty that there is more than a chance difference between the two figures.

Where possible we have included breakdowns of certain [protected characteristics](#) covered by the [Equality Act 2010](#). These characteristics are not recorded on the death certificate; this information was retrieved through record linkage of death registrations to the most recent Census, allowing us to ascertain the religious group and other demographic factors of the deceased. More details on the data used can be found in the [technical appendix](#), which outlines how we have used census data linkage in our most recent coronavirus (COVID-19) related releases.

How we quality assure and validate the data

For details on our validation and quality checks during processing data and producing outputs, see our [Mortality statistics in England and Wales QMI](#) and our [User guide to mortality statistics](#).

How we disseminate the data

Analyses are available on the ONS website; for details on how we disseminate the statistics see [Section 5, Accessibility and clarity of the Mortality statistics in England and Wales QMI](#).

How we review and maintain the data processes

For details on how we review and maintain data processes, see [Section 6 of the Mortality statistics in England and Wales QMI](#).

7 . Other information

Useful links

For information on methods, data quality, legislation and procedures relating to mortality statistics, see our [User guide to mortality statistics](#) and our [Mortality statistics in England and Wales QMI](#).

Our care home resident mortality statistics publications can be found on the [deaths section of the Office for National Statistics \(ONS\) website](#).

For care home deaths data for other UK countries, please see the latest death statistics for [Northern Ireland](#) and for [Scotland](#).

[Number of deaths notified to the Care Quality Commission](#) are published by the ONS, and [number of deaths notified to the Care Inspectorate Wales](#) are published by the Welsh Government.

Upcoming ONS releases are pre-announced on our [release calendar](#).

For further queries on care home resident mortality statistics published by ONS, to provide feedback on our statistics, or to request further mortality data, email: health.data@ons.gov.uk.

8 . Cite this Quality and Methodology Information (QMI)

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