

Article

# Incorporating data on crimes experienced by care home residents into crime statistics

Exploring how to better incorporate data on crimes against care home residents into our crime statistics.

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# 1 . Overview

As part of our plans to make crime statistics more inclusive, we have investigated how to better incorporate data on crimes against care home residents. This includes exploring options for extending the Crime Survey for England and Wales (CSEW) to include the collection of data from those living in care homes, a commitment made in the government's [Tackling Domestic Abuse Plan](#), published in March 2022.

The care home population in England and Wales (approximately 344,000 adults) is likely to have a very different experience of crime compared with the household population but evidence is limited and focuses on experiences of abuse. Neglect has been shown to be the most prevalent form of abuse in care homes in England, while reported prevalence of physical and verbal abuse is comparatively low (for further details please see [the English national care home survey results](#)).

Given limited data on crimes against care home residents, we recommend further exploration of these experiences using currently available administrative data.

The CSEW cannot be extended to care home residents in its existing form and any new survey instrument would need extensive research and development. Costs for conducting a detailed crime-focused survey in this setting would be substantial and reliable crime prevalence estimates would not be possible because of expected non-response bias in this population.

Alternatives for further data collection could include interviewing care home workers (for example, on witnessed abuse) or designing a less complex survey for care home residents that could also be completed by family members (for example, on quality of care and perceptions of safety). These would not provide prevalence estimates and would also be dependent on substantial funding.

## 2 . The current situation

### Aims of the study

The aim of the study was to determine how to better incorporate data on crimes against care home residents into our statistics. To do this, we conducted a literature review and engaged with a wide range of stakeholders for input and advice on the following two areas: what sources of data are currently available and whether the Crime Survey for England and Wales (CSEW) could be extended to care home settings.

### How do we currently measure crime?

The Centre for Crime and Justice at the Office for National Statistics (ONS) measures crime against households and adults across England and Wales using data from the Crime Survey for England and Wales (CSEW) and police recorded crime (PRC). While PRC has wider offence and population coverage, the CSEW covers crimes not reported to the police and is not affected by changes in police recording practice; therefore, it is the more reliable measure of long-term trends.

The CSEW does not include [non-household populations \(approximately 1.7% of the population in England and Wales according to Census 2021\)](#), such as care home residents or homeless people. This is because the sample frame is based on private households selected from the Postcode Address File.

Understanding the experiences of non-household populations is important because they are likely to have different experiences of crime compared with the household population and a lack of data on these groups results in additional challenges in policy decision making. However, recruiting non-household populations is challenging and requires careful sample design, involves additional ethical concerns, and tends to have substantially higher costs.

### The residential care home population and their crime experience

For the purposes of this review, we are focusing on adults living in residential care accommodation across England and Wales. Children living in residential care are out of scope for this review given the substantial differences in setting and available data sources.

## Residential care home population

According to Census 2021, [in 2021 there were an estimated 344,000 care home residents in England and Wales](#), a 10% decrease from 2011 (382,000). This decrease may reflect the impact of the coronavirus (COVID-19) pandemic on bed occupancy.

The population consists of adults living in care homes with or without nursing staff. Care homes without nursing staff provide personal care and offer support, such as assisting with meals, while care homes with nursing staff provide more specialised care for those with certain disabilities or conditions. Although [most of the care home population is aged 65 years and over](#) (82% in 2011 Census), care homes also offer care for younger adults with various types of needs, including physical disabilities, learning disabilities or mental health conditions. An estimated two-thirds (69%) of care home residents are understood to have dementia (for more information please see [Dementia UK update report](#)).

## Measuring crime in care home residents

Living in a residential care setting shapes the crimes that an individual can experience. Any questionnaire would need to be adapted to ensure that relevant experiences of crime and abuse in this setting were fully captured, and to enable as many residents to take part as possible.

For example, the current suite of CSEW questions used to measure domestic abuse among those living in private households would not capture the wider experiences of abuse experienced by those in receipt of care, such as neglect ([neglect \(PDF, 604KB\)](#) includes ignoring medical, emotional or physical care needs and failing to provide access to appropriate care and support). They would also only capture experiences where the perpetrator was a family member or partner.

## Abuse in care home settings

There are very limited data on the prevalence of victimisation and abuse in care home settings because of the high proportion of residents who do not have capacity for consent or participation in a complex survey.

Published studies that have reported on the prevalence of abuse have relied on care home staff perceptions. A recent study conducted by University College London found [neglect to be the most prevalent form of abuse witnessed by staff in care homes](#) across England.

The most common abusive behaviours witnessed in the last three months were:

- making a resident wait for care (reported by 26% of staff surveyed)
- avoiding a resident with challenging behaviour (25%)
- giving residents insufficient time for food (19%)
- taking insufficient care when moving residents (11%)

The prevalence of witnessed verbal (5%) and physical abuse (1%) in the last three months were much lower in comparison with neglect. These prevalence figures relate to the care home unit rather than individual residents and are therefore not comparable with data from victimisation surveys, such as the CSEW. These figures are also likely to be underestimates as staff may not observe all abuse taking place and may not always be willing to report it.

## Comparing levels of abuse in care homes and private households

A recent study of helpline data showed some indication that abuse perpetrated against elderly people was more frequent in private households than in institutional settings.

Of the calls received by the [Hourglass](#) helpline for the year ending March 2022:

- 83% were regarding abuse occurring in victims' own homes
- 7% in care homes
- 5% in hospitals
- 3% in sheltered housing
- 2% in nursing homes (data not published)

However, caution should be taken in interpreting these figures given care home residents may have difficulty in accessing the helpline. It is also important to note there are differences in population size and care needs between these groups, so these figures are not comparable.

Data from [NHS Digital Safeguarding Adults Collection](#) showed there were 147,930 concluded Section 42 enquiries (formal enquiries where an adult may be experiencing or at risk of abuse or neglect) in the year ending March 2022. Similar to helpline data, the most common locations of the risk were:

- the person's own home (51%)
- around one-third (34%) of enquiries were concerning risk of abuse in nursing and residential care homes
- 8% in hospital settings
- 7% in the community
- 6% in other locations

These figures should also be interpreted with caution given the differing population sizes and contexts. For example, Section 42 enquiries are more likely to be raised by experienced professionals in a care home setting in comparison with the general population living in private households who may not be aware of these formal processes.

### **3 . Currently available data**

The following four datasets were identified as potential sources of regular data on the extent and nature of crime and abuse in care homes in England and Wales. These administrative data sources are limited in the information they can provide because they are based on reported crimes and abuse. Any crimes or experiences of abuse that are not reported would not be captured by these data sources.

- [NHS Digital - Safeguarding Adults data](#) provides the number of Section 42 Safeguarding Enquiries raised (where an adult may be experiencing or at risk of abuse or neglect) in England; data can be broken down by place of residence, for example, own home or residential care setting.
- [Care Quality Commission](#) collect data on the number of crime incidents reported to or investigated by police in care homes across England; these data are not currently published.
- [Welsh Government](#) provide the number of Safeguarding enquires raised in Wales; data can be broken down by place of residence, for example, own home or residential care setting.
- [Hourglass helpline](#) collect data on the number of calls received concerning abuse of older people living in private households and care home settings across the UK; these data are not currently published on a regular basis.

Despite the data limitations, stakeholders stated that it would be useful to collate and publish these data. We plan to work with data producers to explore how we can incorporate these sources of data into our statistics. Where possible, we will incorporate these data into a new publication on crimes against non-household populations in the financial year ending 2024.

## 4 . Further data collection

### Challenges to conducting the CSEW with care home residents

While stakeholders welcomed further data collection to understand the crimes experienced by care home residents, there was consensus that measuring these experiences is complex. Stakeholders stated that extending the Crime Survey for England and Wales (CSEW) to care home residents to provide reliable prevalence estimates in its current form would be very difficult if not impossible, and highlighted the following challenges.

#### Questionnaire development

The survey would need to be tailored to best capture the crime experiences of those living in care home settings and would require substantial upfront research and development resource. For example, to capture the wider experiences of abuse experienced by those in receipt of care, such as neglect, that are not captured by CSEW domestic abuse questions. In addition, the diversity of care home users would mean that questionnaire development would need to take into consideration the experiences and needs of distinct groups, for example, residents with dementia or residents with learning disabilities.

#### Recruitment in care home settings

Accessing care home residents is complex, and additional recruitment strategies will place extra burden on staff involved in collecting survey data. It would be critical to persuade care home managers of the importance of any research.

#### Mental capacity and complex needs of residents

A high proportion of care home residents would not have mental capacity to consent to participation in the first place, while for a separate cohort of residents, complex needs would limit the ability to participate meaningfully in survey research, even if consent were legitimately gained.

Mental capacity is difficult to assess and would require input from care home workers. A hybrid approach would likely be needed, with survey facilitators working closely with care home managers, staff, residents and relatives to ensure that everyone who had the capacity and desire to consent to participation did so and that all procedures adhered to the principles of the Mental Capacity Act.

## **Ethical issues and safety**

Navigating the complex issues of consent in this group raises serious ethical concerns that would need to be addressed ahead of any data collection. In addition, asking questions on crime experiences and abuse may not be suitable because of the sensitivity of the topic and issues surrounding disclosure in care home settings.

In developing any survey, important considerations include whether it is safe to ask respondents certain questions, whether they would be willing to disclose certain information and whether there is a way to secure the needed privacy for interviews in this type of setting. In addition, suitable mechanisms would need to be put in place to raise any concerns related to abuse that were reported in the survey.

## **Piloting a survey**

Given challenges identified in recruitment strategies and the complex ethical concerns, it would be important to conduct a pilot study to test any survey developed for this setting. A pilot study would also clarify the extent to which the mental capacity of respondents stands to impact on recruitment and data collection.

## **Reliability of estimates**

There are significant challenges to generating a representative sample of care home residents, given the issues identified with recruitment and respondent mental capacity. These challenges would make it difficult to provide reliable crime and abuse prevalence estimates. Respondents with cognitive impairment deemed eligible to take part might also have difficulty recalling or communicating their experiences as a result of that cognitive impairment.

## **Summary**

Given these challenges, it is our judgement that the CSEW cannot be extended to care home settings in its current form. Substantial upfront research and development costs would be needed to develop a questionnaire that accurately captured the crime experiences of care home residents, especially those that are not captured by the CSEW domestic abuse questions (such as neglect).

A newly designed survey for care home residents would not provide reliable prevalence estimates of victimisation and abuse in care homes because of inevitable sampling bias: residents who do not have the capacity to consent to participation would not be able to respond to the survey. We foresee this to be a significant problem given aforementioned estimates that over two-thirds (69%) of care home residents have dementia ([the Dementia UK report \(PDF, 1.21MB\)](#)).

## **Alternative options for further data collection**

Stakeholders suggested alternatives for further data collection as well as improvements that could be made to the CSEW on data collected from those receiving care in private households.

### **Incorporating a simpler set of questions on residents' perception of safety into a wider survey on quality of care**

We could develop a simpler set of questions on perceptions of safety, which could be completed by a wider range of care home residents as well as family members. These questions could be incorporated into a wider survey on quality of care and resident experiences, similar to the inactive [Your Care rating survey](#). This was an annual survey completed by care home residents and their family to understand their satisfaction with care.

Capturing these wider experiences related to quality of care is likely to be of interest to a greater range of stakeholders but would need support from multiple government departments and significant funding, and consensus as to a lead organisation.

### **A survey of care home workers on witnessed abuse**

This could provide prevalence estimates for witnessed abuse in care homes, potentially giving an indication of the extent of abuse in care homes over time. While a [recent cross-sectional survey](#) has proven this approach to be feasible, any estimates would be subject to respondent bias. For example, underreporting of witnessed abuse would be likely because of fear of investigations within the care home or blame being assigned to care workers. In addition, any survey of care home workers would also need substantial funding.

## Further CSEW questionnaire development

There were also suggestions that older people in receipt of care living in private households may be the most vulnerable to crime given that care homes are highly regulated and suggested further CSEW questions on this topic could be developed. This could include further questions for identifying adults who receive care in their own homes, whether care is formal or informal (for example, from relatives), and whether care is publicly or privately funded. This would allow us to understand the experiences of victimisation and domestic abuse within these groups.

Further CSEW questionnaire development could include adapting current measures of abuse to include neglect, and adapting questions on perpetrators of abuse to include care workers.

## 5 . Future developments

The aim of the study was to determine how to better incorporate data on crimes against care home residents into our statistics. The report has outlined the main administrative data sources that are currently available and how they could be used in future publications.

We have also explored if it would be feasible to extend the Crime Survey for England and Wales (CSEW) in its current form to care home residents. Based on the information in this report, we conclude that this would not be possible. If the questionnaire was adapted for care home residents, costs would be high and crime prevalence estimates would not be reliable because of substantial bias introduced from the high proportion of residents who would not have mental capacity to consent and participate.

## Recommendations

Although we do not recommend extending the CSEW to include care home residents, it is important that we take steps to better incorporate data on crimes against care home residents into our statistics. We recommend that the following activities be taken forward:

- continue working with administrative data producers (NHS Digital, Welsh Government, Care Quality Commission and Hourglass) to further explore currently available data and incorporate these data into our planned publication on crimes against non-household populations before the end of March 2024
- continue discussions with stakeholders on alternative data collection strategies, including incorporating a simpler set of questions on residents' perception of safety into a wider survey on quality of care (similar to the [Your Care rating survey](#)) with support from other government departments
- review the content of the current CSEW questionnaire to determine if additional questions to measure the wider experiences of abuse of those receiving care in private households could be added; for example, adapting current CSEW measures of abuse to include neglect.

## 6 . Related links

### [Crime in England and Wales](#)

Bulletin | Quarterly

Crime against households and adults using data from police recorded crime and the Crime Survey for England and Wales (CSEW).

### [Tackling Domestic Abuse Plan](#)

Home Office policy paper | Released 30 March 2022

The government's plan to tackle domestic abuse and domestic homicide and provide victims and survivors with the support they need.

# 7 . Cite this article

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