**Documentation of statistics for
Handicap Documentation 2015 Quarter 3**

1 Introduction

The municipal service indicators for handicap is generated on the basis of a set of register data containing all services provided to individuals on the basis of the service law. The register contains data on social security number level going back to 2013. The registry has replaced the collection of summarized data on handicap services, collected from municipalities by Statistics Denmark. The purpose of the registry is to document the number of recipient, but especially the ability to cross reference the register data with other data that might shed light on the living conditions of the group of people receiving handicap services under the service law. This combination of registries is the foundation for the indicator set.

2 Statistical presentation

The dataset contains the population of individuals who receive handicap services after the service law. The dataset count individual services, and not just the number of individuals. Furthermore the registry contains information on the service providers who deliver the individual service. One service provider can be the care home where a handicapped person lives. The dataset also contain information on the target group that the handicapped person is a member of, and which is the basis for the provided service. An example of a target group is cognitive disability, social problem, or blindness. The individual service can be given on the basis of several target group classifications.

2.1 Data description

The dataset contains the population of individuals who receive handicap services after the social service law. The dataset counts individual services, and not just the number of individual recipients. Furthermore the registry contains information on the service providers who deliver the individual service. One service provider can be the care home where a handicapped person lives. The dataset also contains information on which target group the person with a handicap is a member of, and which is the basis for the provided service. An example of a target group is cognitive disability, social problem, or blindness. The individual service can be given on the basis of several target group classifications. The categorization of the services, the target group and the service provider categories are derived from the VUM method. The municipality is responsible for translating its actual services to the categories defined by Statistics Denmark. Therefore two similar services are not always exactly the same, as there can be differences in terms of the exact services provided and the costs of each service. One example can be two municipalities classifying a person with a handicap on long term stay in a care home, and another municipality classifying the individual as a person receiving social pedagogical support in her own home, depending on the administrative governance of the municipality funded home of the individual. This is up to the municipalities themselves, but are primarily an expression of an administrative difference and should be noted while interpreting the numbers.

2.2 Classification system

The primary classification is the VUM guide. Which is a method for social workers to classify cases and provide the necessary services in the different municipalities. It is developed and maintained by the association of municipalities and the ministry for social affairs. The material is not available in English, contact Statistics Denmark if you have questions concerning it. One of the published services is 'Socialpedagogical support with no service provider', this is not defined in VUM, but rather a calculated classification simply counting all those §85 services which are not made in conjunction with a stay service, or without an affiliated service provider.

2.3 Sector coverage

The Danish municipalities.

2.4 Statistical concepts and definitions

Service: A service is the concrete help that a handicapped person is given by the municipality. It can be a stay at an specialized care institution, a cash subsidy, social pedagogical support or something similar. Common to all the registered services is that the the legal basis is the law on social services, otherwise referred to as the service law.

Service provider: A service provider is the physical institution providing a given services. It can be the actual care facility, training center etc, which is delivering the actual service.

Target group: A target group is connected to all services, and describes the background for the provision of the services. Target groups are distributed on three main groups, namely physical, psychiatrical/cognitive or social problems. Under each main category are are number of subcategories, except for social problem. A service can have multiple target groups connected to it.

2.5 Statistical unit

The statistic is published on individuals, or service units, depending on the table in question.

2.6 Statistical population

The service recipients are all the persons in Denmark, receiving handicap related services defined by the social service law.

2.7 Reference area

Denmark, at the municipal level.

2.8 Time coverage

2013 and onwards.

2.9 Base period

Not relevant for these statistics.

2.10 Unit of measure

The unit of measurement can be the number of individuals or the number of services provided, depending on the table in question.

2.11 Reference period

01-07-2015 - 30-09-2015

2.12 Frequency of dissemination

Semiannual.

2.13 Legal acts and other agreements

Law on legal rights and administration in the social domain §82 - §84.

2.14 Cost and burden

The burden on municipalities varies quite a bit. For the municipalities with system-to-system solutions, the burden is estimated to be quite low. For all the municipalities with manual reporting, the burden is estimated to be substantive and proportional to the number of services the municipality provides.

2.15 Comment

More information can be seen at the subject page handicap.

3 Statistical processing

Data is gathered from the relevant IT systems in the municipalities or the web solution provided by Statistics Denmark. Data is summarized in relation to publication, but is only altered in the process of error processing and error correction. Data is received monthly but published semiannually.

3.1 Source data

Data originates primarily from the municipal IT systems used to administer handicap services. These data is transferred directly to Statistics Denmark through system-to-system solutions. A number of municipalities use a manual web solution. Here they maintain the data, alongside their standard administration of the services. Typically because their IT system is not VUM based. At some point all municipalities are expected to use a system-to-system solution.

3.2 Frequency of data collection

DST received data on a monthly basis from the different IT systems.

3.3 Data collection

All data is received using a system-to-system solution or DST's own web based solution. The web solution is a system for reporting of cases and services at the individual level, which some municipalities use for entering data.

3.4 Data validation

There are a number of logical checks on micro-data. There are checks of overlapping services to the same individual of the same type, and these are adjusted automatically to the extent possible. One example of this could be a citizen being registered as having stayed at two different locations in the same time frame. The first one will then be adjusted in length, so that its end coincides with the start of the last stay. Another example is misspelled codes for services, which are corrected automatically if they are very close to the expected code. Data is checked for around 30 known error types, and these are reported back to municipalities.

Municipalities are asked to approve of their own number, as represented in a detailed report by Statistics Denmark. The municipalities are asked to approve their data by quarters but for the entire period, which the dataset covers, that is from 4th quarter 2013 to the quarter relevant for the current release (in regards to this release the period covers 4th quarter 2013 to 3rd quarter 2015). Therefore some municipalities have only approve data some quarters in the period. Non-approved data is not released.

The following 6 municipalities have approved their data for the period from 4th quarter 2013 to 1st quarter 2015: Egedal, Lemvig, Nordfyns, Nyborg, Odder and Rudersdal.

The following 26 municipalities have approved their data for the period from 4th quarter 2013 to 3rd quarter 2015: Albertslund, Billund, Favrskov, Fredericia, Frederikshavn, Gladsaxe, Holstebro, Ishøj, Kolding, Langeland, Mariagerfjord, Norddjurs, Odense, Odsherred, Ringkøbing-Skjern, Ringsted, Rødovre, Silkeborg, Skanderborg, Slagelse, Stevns, Struer, Syddjurs, Thisted, Tønder and Tårnby.

3.5 Data compilation

Today imputation is not used, but there are error corrections, as described in the section on data validation. Besides error corrections, data is not processed. Only municipalities with approved data are published in official publications and only for the quarters approved by the municipalities.

3.6 Adjustment

There are no adjustment of data besides the ones already described in under data validation.

4 Relevance

Overall the statistic is estimated to cover a major need for users, as no comparative material have been published before. Because this is the first publication, user satisfaction cannot yet be evaluated.

4.1 User Needs

There is a broad group of users of the statistic, such as handicap organizations, municipalities, ministries, scientists and the public in general. The user need is primarily to show the development of services for handicapped people over time. This fundamental need is met by the registry today, and in combination with other registries it can yield information on the general living conditions for people with handicap. The data contains only individuals who receives services after the service law. This is a narrow definition of people with handicap in comparisons with how some scientists and handicap organizations define the population.

4.2 User Satisfaction

Because this is the first publication, user satisfaction cannot yet be evaluated.

4.3 Data completeness rate

Not relevant for these statistics.

5 Accuracy and reliability

The statistic is published on the basis of data from 32 municipalities. The precision and reliability of the statistics is primarily affected by the differences in administrative practices in the municipalities as described in 'Quality assessment'. Because the statistic is still relatively new, one can expect some revision of these numbers in the future.

5.1 Overall accuracy

The precision and reliability of the statistics is primarily affected by the differences in administrative practices in the municipalities.

5.2 Sampling error

Not relevant for these statistics.

5.3 Non-sampling error

A key systematic uncertain in the collection of the population are the coverage errors that arise from difference in administrative practices. An example could be a case where one municipality reported some treatment services, administered after the the service law, where another municipality would have a small amount, because they have different registration practices. Another source to the uncertainty of the figures is that many municipalities are not apart of the statistics as a result of incomplete or no reporting.

5.4 Quality management

Statistics Denmark follows the recommendations on organisation and management of quality given in the Code of Practice for European Statistics (CoP) and the implementation guidelines given in the Quality Assurance Framework of the European Statistical System (QAF). A Working Group on Quality and a central quality assurance function have been established to continuously carry through control of products and processes.

5.5 Quality assurance

Statistics Denmark follows the principles in the Code of Practice for European Statistics (CoP) and uses the Quality Assurance Framework of the European Statistical System (QAF) for the implementation of the principles. This involves continuous decentralized and central control of products and processes based on documentation following international standards. The central quality assurance function reports to the Working Group on Quality. Reports include suggestions for improvement that are assessed, decided and subsequently implemented.

5.6 Quality assessment

The statistic is associated with some uncertainty. Partly because of municipalities who have not yet delivered approved data for all or some quarters, but also in relation to administrative differences in the individual municipalities. These administrative differences can mean that some services in some municipalities will not get registered, while they are included in other municipalities. This risk is biggest for the types of services which are rarely used by the handicap department, because practices vary the most around these services. A fall in the number of delivered services over time does not necessarily have to do with a fall in the number of services delivered but can be a result of a changes in the municipalities' registration practices. In relation to this, it should be noticed that the decrease in accompany services (ledsagerordinger) in Odense from 2nd quarter 2015 to 3rd quarter 2015 is due to changes in practices in the municipality. The number of delivered services is underestimated for the earliest quarters, because more services have been reported in the systems over time.

Another quality issue is the classification of target groups, which vary significantly between municipalities. Some service providers might be missclassified because their information cannot be checked against the database of service providers. Some municipalities will have significantly more social pedagogical support with service provider reported, because they have reported the implicit social pedagogical support contained in long term care at a home separately from the care stay, other municipalities have not. One can expect significant revisions of the statistics over time.

5.7 Data revision - policy

Statistics Denmark revises published figures in accordance with the [Revision Policy for Statistics Denmark](#). The common procedures and principles of the Revision Policy are for some statistics supplemented by a specific revision practice.

5.8 Data revision practice

Revisions have been made of previously released data. Revisions are made 3 years back in time.

6 Timeliness and punctuality

Data is published semiannually.

6.1 Timeliness and time lag - final results

Data is published semiannually.

6.2 Punctuality

The statistics will be published every half year.

7 Comparability

The time series can most obviously be compared to previously published tables on handicap services. These included the tables RESV01 and RESV05 in Statistic Denmark's StatBank. These tables are made from summarized information reported by the municipalities from to the social resource survey. Here one should consider the data break that occurs due to differences in counting the services.

7.1 Comparability - geographical

The statistic is not comparable to other international statistics, because the individual services and concepts are only used in the Danish context.

7.2 Comparability over time

The time series can most obviously be compared to previously published tables on handicap services. These included the tables RESV01 and RESV05 in Statistic Denmark's StatBank. These tables are made from summarized information reported by the municipalities from to the social resource survey. Here one should consider the data break that occurs due to differences in counting the services. One major difference is the fact that the new data is distributed on the municipality which decided on the course of action for the individual citizen, the old data was distributed on the paying municipality. This can mean very big differences in the number of services for the individual municipality.

Because some municipalities have not approved data for all quarters of the period, which the dataset covers, one should be careful when comparing summarized data for all municipalities across all quarters.

The following 6 municipalities have approved their data for the period from 4th quarter 2013 to 1st quarter 2015: Egedal, Lemvig, Nordfyns, Nyborg, Odder and Rudersdal.

The following 26 municipalities have approved their data for the period from 4th quarter 2013 to 3rd quarter 2015: Albertslund, Billund, Favrskov, Fredericia, Frederikshavn, Gladsaxe, Holstebro, Ishøj, Kolding, Langeland, Mariagerfjord, Norddjurs, Odense, Odsherred, Ringkøbing-Skjern, Ringsted, Rødovre, Silkeborg, Skanderborg, Slagelse, Stevns, Struer, Syddjurs, Thisted, Tønder and Tårnby.

7.3 Coherence - cross domain

Denmark Statistics does not know of comparable statistics.

7.4 Coherence - internal

Data has a high degree of internal consistency. Differences in classification of cases can mean difference between municipalities as described elsewhere.

8 Accessibility and clarity

The statistics is available as a twice yearly news article, in the Statbank and in Statistic Denmark's map of municipalities (Kommunekort).

8.1 Release calendar

The publication date appears in the release calendar. The date is confirmed in the weeks before.

8.2 Release calendar access

The Release Calender can be accessed on our English website: [Release Calender](#).

8.3 User access

Statistics are always published at 8:00 a.m. at the day announced in the release calendar. No one outside of Statistics Denmark can access the statistics before they are published.

8.4 News release

News article is published twice yearly, in conjunction with the publication of new data.

8.5 Publications

Data is presented semiannually in a news article.

8.6 On-line database

The following tables are planned for the statbank.

- [HAND01](#) - Overview of handicap services and service providers.
- [HAND02](#) - Overview of the service recipients highest completed education
- [HAND03](#) - Overview of target groups on service and service provider
- [HAND04](#) - Overview of service recipients on benefits and handicap service.
- [HAND05](#) - Overview of benefits and offers on year.
- [HAND06](#) - Overview of handicap services per 1000 citizens in the municipalities.

8.7 Micro-data access

Micro-data is made available to scientists and ministries through through specialized services. Data is made available with the unique and de-identified personal ID. No summary results can be withdrawn from Statistics Denmark if they are directly of indirectly identifiable.

8.8 Other

Data is made available through specialized services to scientists. Prices follow the standard price calculations from those services.

8.9 Confidentiality - policy

[The confidentiality policy of DST](#).

8.10 Confidentiality - data treatment

In tables where it is possible to extract information about an individual, because of very few individuals for a given combination of variables these data points will be subject to discretionary measures.

8.11 Documentation on methodology

An extensive description of the reporting requirements are defined in the document B3 (only in Danish).

8.12 Quality documentation

Results from the quality evaluation of products and selected processes are available in detail for each statistics and in summary reports for the Working Group on Quality.

9 Contact

The administrative placement of these statistics are in the division of Personal Finances and Welfare. The person responsible is Kiki Jørgensen, tel. +45 39 17 31 09, e-mail: kjr@dst.dk

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