

Supported Housing Data Dictionary

Introduction

What is the Supported Housing Dictionary?

In November 2008, Professor Sir Michael Marmot was asked by the then Secretary of State for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England from 2010.

The review produced the report <u>'Fair Society, Healthy Lives'</u> which proposed a cradle-to-grave approach to reduce inequalities, commonly referred to as the Life Course Framework. This broke down people's lives into a number of different life phases.

It concluded that, to have a significant impact on health inequalities, action needs to be taken on six policy objectives. These policy objectives are listed below against their applicable life phase and focus area:

Policy Objective:	Life Phase:	Focus Area:
Give every child the best start in life.	Starting Well	Pre-Natal - Pre-School
Enable all children, young people and adults to maximise their capabilities and have control over their lives.	Developing Well	School
Create fair employment and good work for all.	Working Well	Training and Employment
Ensure a healthy standard of living for all.	Living Well	Family
Create and develop healthy and sustainable places and communities.	Living Well	Community
Strengthen the role and impact of ill health prevention.	Ageing Well	Retirement

This document is an additional dictionary created for specific work with people who are being supported to maintain a tenancy.

What is this data dictionary?

The measures defined in this dictionary work with a preventative model of support. One of the most effective methods of measurement, when delivering preventative services, is that of risk and protective factors. The removal of risks and the addition of protective factors provides a statistical basis for evidence of impact.

The definitions in this dictionary result from the analysis of the relevant national outcome frameworks, programmes and clinical guidelines. These have then been combined to form a single document listing all of the measures relevant to housing support services.

For each measure there is a definition (taken from one or more of the source documents), an explanation of why the measure is recorded, a description of the data that is collected and the survey point(s) at which the data is recorded. There is also a separate table showing which framework or policy records the measure.

The dictionary is separated into three areas of risk: Personal Circumstances, Lifestyle and Behaviour, and finally, Status.

Personal Circumstances - related to the factor(s) that are relevant to the support people need. Personal circumstances are non-clinical factors that are likely to have an adverse effect on health. Many of these types of risk are unchangeable or may take a long time to resolve.

For example: Social isolation is a personal circumstance. Being socially isolated can cause stress and anxiety, increased risk of misusing alcohol or substances, and increased visits to the GP or Accident and Emergency.

Lifestyle and Behavioural factors - something that increases the likelihood of a poor long-term health outcome. These will form the basis of the support provided and are able to be reduced with the right support and services. The removal of this type of risk can be achieved in a shorter period.

For example: smoking is a lifestyle and behavioural factor that increases the risk of heart, lung and respiratory disease.

Status - the result of a lifestyle and behavioural factor. The removal or reduction of these risks is likely to be a long-term outcome.

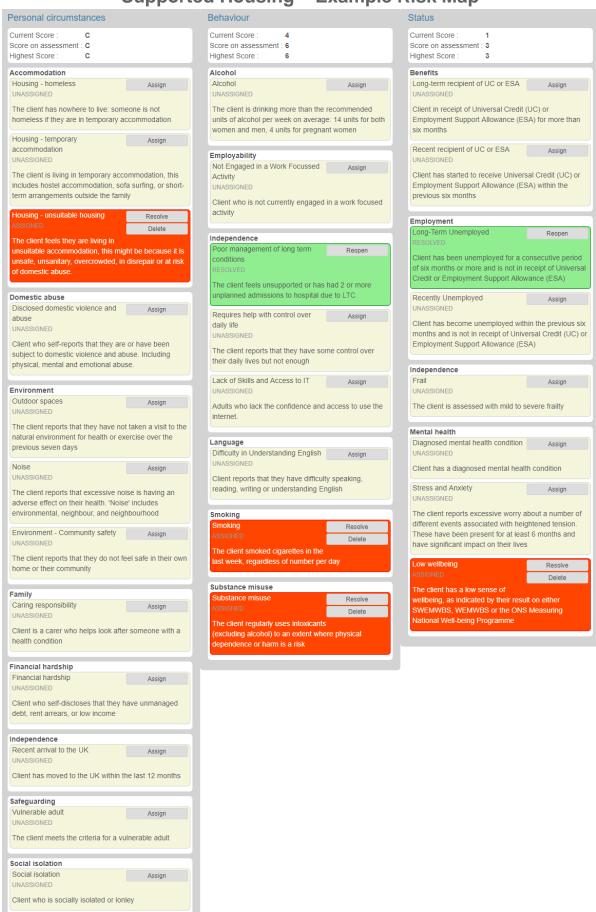
For example: A person who has been diagnosed as pre-diabetic as a result of poor lifestyle and behavioural factor(s) now has 'pre-diabetic' as a status, however the focus of support will be on the removal and reduction of the lifestyle and behaviour issues.

The data dictionary is a shared reference document that describes what should be recorded. This is because it is important that everybody who collects the data has the same understanding of what is being collected.

The measures to be recorded are taken from the following frameworks:

Organisation:	Framework Title:
National Institute for Health and Clinical Excellence	CG127: Hypertension PH35: Diabetes Type 2 PH25: Prevention of CVD CG43: Obesity
Department of Health	Improving Outcomes and Supporting Transparency
Department of Health	CCG Improvement & Assessment Framework
Department of Work and Pensions	Social Justice Outcomes Framework
Department of Health	A framework for sexual health in England

Supported Housing – Example Risk Map



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Personal Circumstances

Personal circumstances are measures of socio-economic factors that are present in a person's life. These can be quite profound factors that are have an impact on a person's ability to manage health lifestyle choices or even to make changes that can change clinical factors.

Measure:	Caring Responsibility		
Definition:	A carer is someone who helps look after a relative who has a condition such as a disability, illness, mental health condition, or a drug or alcohol problem.		
Reason for Collecting:	There is a clear relationship between poor health and providing care that increases with the duration and intensity of the caring role. Those providing high levels of care are twice as likely to have poor health compared with those without caring responsibilities. Lack of access to replacement or respite care poses a greater risk of ill		
	health and low wellbeing for the carer.		
Data Collected:	Number of clients with a caring responsibility.		

Outcome Framework:	Reference:
Adult Social Care Outcome Framework	<u>1D</u>
Public Health Outcome Framework	1.18
National Strategy For Carers	Reference
NHS Outcome Framework	<u>2.4</u>
CCG Improvement and Assessment Framework	Reference

Measure	Disclosed domestic violence and abuse
Definition	The cross-government definition of domestic violence and abuse is: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to: • psychological • physical • sexual • financial • emotional
	Where this is historic then it will be recorded if that abuse still affects the client's life presently.
Reason for collecting	People experiencing domestic violence and abuse may experience additional physical and mental health needs as a result of abuse. In addition, people may have additional support needs during their training and early employment. Domestic violence and abuse are safeguarding issues where children are involved.
Data collected	Number of people who self-report that they are or have been subject to domestic violence and abuse.

Outcome Framework	Reference
NICE Guidance	PH50 CG110
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u> <u>HCP – P45</u>
Public Health Outcome Framework	<u>1.11</u>
Social Justice Outcome Framework	<u>KI-1</u>

Measure Environment - Community Safety			
Definition:	 Adults who do not feel safe in their communities or hor People who do not feel very or fairly safe walking local area during the day. People who do not feel very or fairly safe walking local area after dark. People who do not feel very or fairly safe being homes at night. People who do not feel as adequately safe/as salike. People who do not feel safe at all. 	ng alone in their ng alone in their alone in their own	
Reason for Collecting:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Data Collected: The numbers of adults who do not feel safe in their communitie homes		nmunities or	
Outcome Fram	ework:	Reference:	
Adult Social Care	Outcome Framework	<u>4A</u>	
Tackling Obesities: Future Choices Refere		<u>Reference</u>	

Measure:	Environment - Noise
Definition:	Clients who self-report that their health and wellbeing is adversely affected by exposure to: • Environmental Noise • Neighbour Noise • Neighbourhood Noise
Reason for Collecting:	There are a number of direct and indirect links between exposure to noise and health outcomes such as stress, heart attacks and other health issues. Furthermore, there is clear evidence that exposure to noise is a key determinant of quality of life and well-being.
Data Collected:	Number of clients who self-report that their health and wellbeing is adversely affected by exposure to: • Environmental Noise • Neighbour Noise • Neighbourhood Noise

Outcome Framework: Ref	eference:
PHOF <u>1.14</u>	4

Measure:	Environment - Outdoor Space
Definition:	Clients report that they have not spent reasonable time outdoors other than routine shopping trips or their own garden.
Reason for Collecting:	Inclusion of this indicator is recognition of the significance of accessible outdoor space as a wider determinant of public health. There is strong evidence to suggest that outdoor spaces have a beneficial impact on physical and mental well-being and cognitive function through both physical access and use.
Data Collected:	Number of clients who self-report a limited time spent outdoors.

Outcome Framework:	Reference:
Public Health Outcome Framework	1.16

Measure	Financial Hardship	· ·
Definition	The client reports that their household are on a low income (60% of average wages before housing costs) Indicators are: 1. The family cannot afford a number of food and clothing items 2. They claim Job Seekers Allowance, Employment Support Allowance or Income Support 3. They have required fuel costs that are above average or, were they to spend that amount, it would leave them with a residual income below the fuel poverty line. 4. They have unmanaged debt; this includes rent arrears	
Reason for collecting	Clients may be perceived to be in a 'benefits trap' where they are unable to earn enough to equal or exceed their current rate of benefit. Recent legislation has capped benefits resulting in increased need to obtain employment. Many clients may find the cost of training and work-focused activity difficult to manage.	
Data collected	Number of clients who self-disclose that they have unmanaged debt, rent arrears or low income.	
Outcome Fran	nework	Reference
Public Health Outcomes Framework <u>1.1, 1.17</u>		<u>1.1, 1.17</u>
Social Justice Outcomes Framework KI-4		<u>KI-4</u>
Healthy Child Programme <u>HCP – P17</u>		<u>HCP – P17</u>

Measure:	Housing - Homeless
Definition:	 You may be legally homeless if: You've no legal right to live in accommodation anywhere in the world. You can't get into your home - eg. your landlord has locked you out. It's not reasonable to stay in your home - eg. risk of violence or abuse. You're forced to live apart from your family or people you normally live with because there's no suitable accommodation for you. You're living in very poor conditions - eg. overcrowding. If you're legally homeless, your council must provide you with help – this could range from giving advice to arranging accommodation. If you became homeless through no fault of your own If you're eligible for assistance If you're in priority need If you're in priority need
Reason for Collecting:	Being homeless is an indication of social risk. This has implications for financial status.
Data Collected:	Number of people who are homeless and not living in temporary accommodation provided by their local authority.

Outcome Framework:	Reference:
Public Health Outcome Framework	<u>1.15i</u>
Social Justice Outcome Framework	<u>KI-1</u>

Measure:	Housing - Temporary Accommodation
Definition:	Temporary accommodation includes sofa-surfing, hostel accommodation and short-term arrangements as a non-dependent.
Reason for Collecting:	Living in temporary accommodation is an indication of social risk. It often leads to a period of financial crisis for someone as benefits will usually be delayed.
Data Collected:	Number of clients who are living in temporary accommodation as defined above.

Outcome Framework:	Reference:
Public Health Outcome Framework	<u>1.15ii</u>
Healthy Child Programme: Pregnancy and the First Five Years	HCP - P17
Social Justice Outcome Framework	<u>KI -1</u>

Measure:	Housing - Unsuitable Accommodation
Definition:	Accommodation is self-declared unsuitable by the client.
Reason for Collecting:	Unsuitable accommodation might include housing repairs or overcrowding. Typically, this will have an adverse effect on the client and the wider family's physical and mental health.
Data Collected:	Does the client feel that they are living in unsuitable accommodation? This might be because it is unsafe, unsanitary, overcrowded or in disrepair.

Outcome Framework:	Reference:
Public Health Outcome Framework	<u>1.15i</u>
Healthy Child Programme: Pregnancy and the First Five Year	<u>HCP – P17</u>
Social Justice Outcome Framework	<u>KI-1</u>

Measure	Recent Arrival to the UK
Definition	People who moved to the UK within the previous 12 months 1. Recent migrants 2. Asylum seekers 3. Refugees
Reason for collecting	People who are recent migrants, asylum seekers or refugees, or who have difficulty reading or speaking English, may not make full use of health and wellbeing services. This may be because of unfamiliarity with the health service, because they find it hard to communicate with healthcare staff or because their arrival status restricts that services they can access.
Data collected	Number of people who moved to the UK within the previous 12 months

Outcome Framework:	Reference:
NICE Guidance	CG110 PH38

Measure:	Social Isolation - Loneliness
Definition:	An adult is considered to be socially isolated if they have no support from either a partner, family or a friend. The client reports that they do not have as much social contact as they would like.
Reason for Collecting:	Social isolation may be a trigger for mental ill-health problems, reduction in physical activity and the inability to access services. Social isolation is all considered an indicator for higher risk of suicide.
Data Collected:	Number of adults who define themselves as socially isolated or lonely.

Outcome Framework:	Reference:
Public Health Outcome Framework	<u>1.18</u>
Adult Social Care Outcome Framework	<u>1L</u>
Preventing Suicide in England	<u>Reference</u>

Measure:	Vulnerable Adult	
Definition:	A "vulnerable adult" is aged 18 or over; receives or may notice services because of a disability, age or illness; and we be unable to take care of themselves or protect themselves significant harm or exploitation.	vho is/or may
	"A person lacks capacity in relation to a matter if, at the m is unable to make a decision for himself (in relation to the because of an impairment of, or disturbance in the function mind or brain." [Definition of a 'vulnerable adult' from the Mental	matter) oning of, the
Reason for Collecting:	Vulnerable people are at particular risk of being able to ac services that can improve their mental and physical wellbo	•
	In addition, vulnerable people are at greater risk of being abuse and violence.	victims of
Data Collected:	Number of clients who meet the criteria for being a vulner	able adult.
Outcome Fram	ework:	Reference
Adult Social Care Outcome Framework 4B		<u>4B</u>

Behavioural Factors

These are issues that increase the likelihood of a poor long-term health outcome. These will form the basis of the support provided and are able to be reduced with the right support and services. The removal of this type of risk can be achieved in a shorter period.

Measure:	Alcohol Misuse
Definition:	Clients who regularly exceed the advised maximum amount of alcohol. For both men and women: 2 - 3 units per day (guideline: <14 units per week)
Reason for Collecting:	Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Alcohol can be a contributory factor to falls in older people. As the metabolic rate slows down with ageing the effect of alcohol is greater.
Data Collected:	The number of clients who regularly exceed the advised maximum amount of alcohol units per day.

Outcome Framework:	Reference:
NICE Guidance	CG110, CG45, CG100, PH24, CG127
Public Health Outcome Framework	<u>2.1</u> , <u>2.15</u>
Social Justice Outcome Framework	<u>KI5</u>
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u> <u>HCP – P45</u>

Measure	Difficulty in Understanding English
Definition	Self-reported indicator whereby the client says they have difficulty with reading, writing or speaking English
Reason for collecting	Having a difficulty in understanding English can lead to social isolation and make it more difficult for a client to access services on their own.
Data collected	Number of people who self-report having difficulties with reading, writing or speaking English

Outcome Framework	Reference
NICE Guidance	CG110 CG62
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u>
BIS - Skills Funding Statement 2012 - 2015	Reference

Measure:	Lack of Skills and Access to IT
Definition:	Adults who lack the confidence and access to use the internet.
Reason for Collecting:	Being digitally capable can make a significant difference to individuals and organisations day to day. For individuals, this can mean cutting household bills, finding a job, or maintaining contact with distant friends and relatives. Reducing digital exclusion can help address many wider equality, social, health and wellbeing issues such as isolation. 81% of people over 55 say being online makes them feel part of modern society and less lonely.
Data Collected:	Number of adults who lack the confidence and access to use the internet.
Outcome Fram	ework: Reference:

Digital Inclusion Strategy

Digital Inclusion for Health and Social Care

Reference

Reference

Measure	Not Engaged in a Work Focused Activit	ty
Definition	Work focused activity can encompass a range obtain or retain a work position. They include,	
	 Skills development and training Work trials Volunteering Work placement Employability and Personal Development English for Speakers of Other Language Non-accredited courses 	. •
Reason for collecting Clients who are not undertaking work focused activity are reducin chances of obtaining or retaining employment		,
Data collected	ta collected Number of clients who are not currently engaged in a work focused activ	
Outcome Frame	work	Reference
No Health Without Mental Health Re		<u>Reference</u>

Measure:	Poor Management of Long-Term Condition(s)
Definition:	Client with a Long-Term Condition (LTC) who reports that they: 1. Have had two or more unplanned admissions to hospital, relating to that LTC, in the past 12 months. 2. Feel unsupported with managing their LTC.
Reason for Collecting:	LTCs have a significant impact on a person's ability to work and live a full life. People from lower socio-economic groups have increased risk of developing a LTC – better management can help to reduce health inequalities
Data Collected:	Number of clients with a long-term condition who report that they have had two or more unplanned admissions to hospital in the past 12 months or feel unsupported to manage their condition

Outcome Framework:	Reference:
NICE Guidance	<u>NG22</u>
NHS Outcome Framework	<u>1.08</u>

Measure:	Requires Help with Control Over their Daily Life
Definition:	Adults who report that they have some control over their daily lives, but not enough, or those who report that have no control over their daily lives. Control includes: • Meal Preparation • Shopping • Transportation • Telephone Usage • Housekeeping • Laundry • Managing Money • Taking Medications
Reason for Collecting:	Not being able to complete these tasks alone presents challenges to maintaining 'functional independence'. People at the end of life will often lose the ability to complete some or all of these tasks alone.
Data Collected:	Number of clients who report that they have some control over their daily life but not enough, or those who report they have no control over their daily life.

Outcome Framework:	Reference:
Adult Social Care Framework	<u>1B</u>

Measure:	Smoking		
Definition:	Client who smokes, regardless of number of cigarettes. Also, clients that co-habit with smokers are at increased risk of smoking related disease.		
Reason for Collecting:	Smoking is a major cause of preventable morbidity and premature death, accounting for 79,100 deaths in England in 2011 and some 18 per cent of all deaths of adults aged 35 and over.		
Data Collected:	Number of clients who smoke, regardless of number per day.		

Outcome Framework:	Reference:
NICE Guidance	CG62, PH14, CG127
Public Health Outcome Framework	<u>2.3, 2.9, 2.14</u>
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P18</u> <u>HCP – P22</u>

Measure:	Substance Misuse
Definition:	Adults who regularly use recreational drugs, misuse over-the-counter medications, misuse prescription medications or misuse volatile substances (such as solvents or inhalants) to an extent whereby physical dependence or harm is a risk.
Reason for Collecting:	Individuals misusing substances pose significant risks in terms of overall health and well-being, reduced life expectancy, increased blood-borne virus transmission and reduced physical and psychological health. Substance misuse can also be risk factor in increased suicide risk.
Data Collected:	Number of adults who report that they misuse substances.

Outcome Framework:	Reference:
NICE Guidance	<u>CG110</u> , <u>NG64</u>
Public Health Outcome Framework	<u>2.15</u>
Social Justice Outcome Framework	<u>KI-5</u>
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u> <u>HCP – P45</u>
No Health Without Mental Health	Reference
Preventing Suicide in England	Reference

Status

Status measures are generally more intractable issues such as clinical diagnosis or issues relating to skills and employment. These issues are likely to be heavily dependent on the resolution of things relating to healthy behaviours and socio-economic factors.

Measure:	Frailty	
Definition:	A client who is assessed as having mild to severe frailty on Edmonton Frail Scale.	the
Reason for Collecting:	People with frailty have a substantially increased risk of fall long-term care and death. Frailty develops as a consequen related decline in multiple body systems, which results in visudden health status changes triggered by minor stress or as an infection or a fall at home. Between a quarter and half of people older than 85 are estifrail, with overall prevalence in people aged 75 and over ap 9%.	ce of age- ulnerability to events such mated to be
Data Collected:	Number of clients who have been assessed as having mild frailty on the Edmonton Frail Scale.	to severe
Outcome Fram	ework	Reference
	nt and Assessment Framework 2017/18	Reference
Edmonton Frailty		Reference

Measure	Long-term recipient of UC or ESA
Definition	The client has been unemployed for a consecutive period of six months or more and is not in receipt of Universal Credit (UC) or Employment Support Allowance (ESA).
	This includes clients who:
	 are in receipt of Job Seekers Allowance (JSA) have been sanctioned, but would otherwise receive Universal Credit or JSA
	are not entitled to Universal Credit or JSA
	They may be employed, unemployed, self-employed or a student on Disability Living Allowance or Personal Independence Payment.
Reason for collecting	Clients who are in receipt of ESA require structured support to help them find employment and/or training that will works with their capability. Being a long-term recipient of ESA makes it less likely that a client will find work.
Data collected	The number of clients in receipt of Employment Support Allowance (ESA) for more than six months

Measure	Long-Term Unemployed
Definition	The client has been unemployed for a consecutive period of six months or more and is not in receipt of Universal Credit or Employment Support Allowance (ESA).
	This includes clients who:
	 have been sanctioned, but would otherwise receive Universal Credit or JSA are not entitled to Universal Credit JSA
Reason for collecting	Being unemployed for a period of more than six months will make it harder for a client to find employment that it will for somebody who is recently unemployed
Data collected	Number of adults who have been unemployed for a consecutive period of six months or more and are not in receipt of Employment Support Allowance (ESA)

Measure	Diagnosed with a Mental Health Condition
Definition	People who have a diagnosed mental health condition
Reason for collecting	Diagnosed mental health conditions can pose a risk for physical health and well-being as well as being a potential safeguarding issue.
Data collected	Number of people with a diagnosed mental health condition

Outcome Framework	Reference
NICE Guidance	CG45 1.1.1.1
Healthy Child Programme: Pregnancy and the First Five Years	<u> HCP – P17</u>

Measure:	Low Reported Wellbeing
Definition:	 Scoring 40 or less on the Warwick-Edinburgh Mental Well-being Scale. Scoring 16 or less on the Short Warwick-Edinburgh Mental Well-being Scale Low sense of Wellbeing. ONS Measuring National Well-being Programme.
Reason for Collecting:	Low sense of wellbeing is an indicator of social risk.
Data Collected:	 Number of adults scoring 40 or less on the Warwick-Edinburgh Mental Well-being Scale. Number of people scoring 16 or less on the Short Warwick- Edinburgh Mental Well-being Scale Number of adults scoring 4 measures on ONS programme. Self-reported stress.

Outcome Framework:	Reference:
Public Health Outcome Framework	2.23 2.24
Healthy Child Programme: Pregnancy and the First Five Years	<u> HCP – P17</u>
No Health Without Mental Health	Reference

Measure:	Stress and Anxiety
Definition:	General Anxiety Disorder can cause a change in behaviour and the way people think and feel about things, resulting in symptoms such as: • Restlessness • A Sense of Dread • Feeling Constantly "On Edge" • Difficulty Concentrating • Irritability
Reason for Collecting:	Symptoms may cause withdrawal from social contact (seeing family and friends) to avoid feelings of worry and dread, and/or the inability to attend work. These actions can cause worry and increase a lack of self-esteem.
Data Collected:	Number of clients who report symptoms of general anxiety disorder.

Outcome Framework:	Reference:
NICE Guidance	CG45
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u>

Measure	Recent recipient of UC or ESA
Definition	The client has started to receive Universal Credit (UC) or Employment Support Allowance (ESA) within the previous six months.
	UC and ESA are benefits awarded to people whose illness or disability affects their ability to work and they are:
	 under state pension age not getting Statutory Sick Pay or Statutory Maternity Pay not getting Job Seekers Allowance
	They may be employed, unemployed, self-employed or a student on Disability Living Allowance or Personal Independence Payment.
Reason for collecting	Clients who are in receipt of UC or ESA require structured support to help them find employment and/or training that will works with their capability. There is a higher possibility of returning to work when interventions are made earlier.
Data collected	The number of clients who have started to receive Universal Credit (UC) Employment Support Allowance (ESA) within the previous six months.

	Measure	Recently Unemployed	
	Definition	The client has become unemployed within the previous six months and is not in receipt of Universal Credit or Employment Support Allowance (ESA).	
		This includes clients who:	
		 have been sanctioned, but would otherwise receive Universal Credit or ESA 	
		are not entitled to Universal Credit or ESA	
	Reason for collecting	Being unemployed, even for a relatively short period of time, is a risk to becoming employed.	
	Data collected	Number of adults who have become unemployed within the previous six months and are not in receipt of Universal Credit or Employment Support Allowance (ESA)	

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If you would like further information on the dictionaries, and how they can support your work please email info@insideoutcomes.co.uk.

