

# Assessment of compliance with the Code of Practice for Official Statistics

## Statistics on NHS Wales Performance

*(produced by the Welsh Government)*

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### **About the UK Statistics Authority**

The UK Statistics Authority is an independent body operating at arm's length from government as a non-ministerial department, directly accountable to Parliament. It was established on 1 April 2008 by the *Statistics and Registration Service Act 2007*.

The Authority's overall objective is to promote and safeguard the production and publication of official statistics that serve the public good. It is also required to promote and safeguard the quality and comprehensiveness of official statistics, and good practice in relation to official statistics.

The Statistics Authority has two main functions:

1. oversight of the Office for National Statistics (ONS) – the executive office of the Authority;
2. independent scrutiny (monitoring and assessment) of all official statistics produced in the UK.

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# **Assessment of compliance with the Code of Practice for Official Statistics**

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## ASSESSMENT AND DESIGNATION

The *Statistics and Registration Service Act 2007* gives the UK Statistics Authority a statutory power to assess sets of statistics against the *Code of Practice for Official Statistics*. Assessment will determine whether it is appropriate for the statistics to be designated as National Statistics.

Designation as National Statistics means that the statistics comply with the *Code of Practice*. The *Code* is wide-ranging. Designation can be interpreted to mean that the statistics: meet identified user needs; are produced, managed and disseminated to high standards; and are explained well.

Designation as National Statistics should not be interpreted to mean that the statistics are always correct. For example, whilst the *Code* requires statistics to be produced to a level of accuracy that meets users' needs, it also recognises that errors can occur – in which case it requires them to be corrected and publicised.

Assessment reports will not normally comment further on a set of statistics, for example on their validity as social or economic measures. However, reports may point to such questions if the Authority believes that further research would be desirable.

Assessment reports typically provide an overview of any noteworthy features of the methods used to produce the statistics, and will highlight substantial concerns about quality. Assessment reports also describe aspects of the ways in which the producer addresses the 'sound methods and assured quality' principle of the *Code*, but do not themselves constitute a review of the methods used to produce the statistics. However the *Code* requires producers to "seek to achieve continuous improvement in statistical processes by, for example, undertaking regular reviews".

The Authority may grant designation on condition that the producer body takes steps, within a stated timeframe, to fully meet the *Code's* requirements. This is to avoid public confusion and does not reduce the obligation to comply with the *Code*.

The Authority grants designation on the basis of three main sources of information:

- i. factual evidence and assurances by senior statisticians in the producer body;
- ii. the views of users who we contact, or who contact us, and;
- iii. our own review activity.

Should further information come to light subsequently which changes the Authority's analysis, it may withdraw the Assessment report and revise it as necessary.

It is a statutory requirement on the producer body to ensure that it continues to produce the set of statistics designated as National Statistics in compliance with the *Code of Practice*.

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# 1 Summary of findings

## 1.1 Introduction

1.1.1 This is one of a series of reports<sup>1</sup> prepared under the provisions of the *Statistics and Registration Service Act 2007*<sup>2</sup>. The Act requires all statistics currently designated as National Statistics to be assessed against the *Code of Practice for Official Statistics*<sup>3</sup>. The report covers the set of statistics reported in the following National Statistics publications produced by the Welsh Government:

- *NHS Wales Cancer Waiting Times*<sup>4</sup>;
- *Ambulance Services in Wales*<sup>5</sup>.

1.1.2 The Act also allows Ministers to request an assessment of other official statistics in order for them to gain National Statistics status. This report includes the following sets of statistics in response to such a request:

- *Time spent in NHS Wales Accident and Emergency Departments*<sup>6</sup>;
- *NHS Wales Referral to Treatment Times*<sup>7</sup>;
- *NHS Wales Diagnostic & Therapy Services Waiting Times*<sup>8</sup>;
- *Delayed Transfers of Care in Wales*<sup>9</sup>.

1.1.3 The statistics published in *Complaints to the NHS in Wales*<sup>10</sup> were originally included in the group of outputs for this assessment. However, a recent change to legislation<sup>11</sup> means that the data and collection method since April 2011 are fundamentally different, so the statistics will not be designated as National Statistics until they have been assessed. The Welsh Government will publish the 2010-11 results as legacy National Statistics in October 2011<sup>12</sup>. The new statistics, which are not part of this assessment, will be published as experimental statistics in 2012.

1.1.4 This report was prepared by the Authority's Assessment team, and approved by the Board of the Statistics Authority on the advice of the Head of Assessment.

## 1.2 Decision concerning designation as National Statistics

1.2.1 The Statistics Authority judges that the statistics covered by this report are readily accessible, produced according to sound methods and managed impartially and objectively in the public interest, subject to any points for action

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<sup>1</sup> <http://www.statisticsauthority.gov.uk/assessment/assessment-reports/index.html>

<sup>2</sup> [http://www.opsi.gov.uk/Acts/acts2007/pdf/ukpga\\_20070018\\_en.pdf](http://www.opsi.gov.uk/Acts/acts2007/pdf/ukpga_20070018_en.pdf)

<sup>3</sup> <http://www.statisticsauthority.gov.uk/assessment/code-of-practice/index.html>

<sup>4</sup> <http://wales.gov.uk/topics/statistics/headlines/health2011/1106011/?lang=en>

<sup>5</sup> <http://wales.gov.uk/topics/statistics/headlines/health2011/110601/?lang=en>

<sup>6</sup> <http://wales.gov.uk/topics/statistics/headlines/health2011/1105262/?lang=en>

<sup>7</sup> <http://wales.gov.uk/topics/statistics/headlines/health2011/1106091/?lang=en>

<sup>8</sup> <http://wales.gov.uk/topics/statistics/headlines/health2011/110609/?lang=en>

<sup>9</sup> <http://wales.gov.uk/topics/statistics/headlines/health2011/110524/?lang=en>

<sup>10</sup> <http://wales.gov.uk/topics/statistics/headlines/health2010/1010061/?lang=en>

<sup>11</sup> <http://www.legislation.gov.uk/wsi/2011/704/made>

<sup>12</sup> <http://wales.gov.uk/topics/statistics/headlines/health2010/1010061/?lang=en>

in this report. The Statistics Authority confirms that the statistics listed in 1.1.1 are designated as National Statistics, and has determined that the statistics published in the products listed in paragraph 1.1.2 can be designated as new National Statistics products, subject to the Welsh Government implementing the enhancements listed in section 1.5 and reporting them to the Authority by January 2012.

### **1.3 Summary of strengths and weaknesses**

- 1.3.1 The Welsh Government has undertaken several user consultations about NHS Wales performance statistics, the most recent of which closed in January 2011. This consultation requested users' views on proposed changes to releases and sought information about the way that the statistics are used and how best to meet users' requirements. There is little other consultation with non-government or non-NHS users however, despite these users' readiness to respond to formal consultations.
- 1.3.2 Procedures are in place to ensure that users and data providers are consulted and informed about changes to definitions and methods. The impact of the change on the statistics is clearly presented within the releases when they occur. However, changes to definitions have not always been implemented according to the procedures and so have not been pre-announced.
- 1.3.3 The statistical releases do not contain sufficient commentary or information about the strengths and limitations of the statistics in relation to potential uses. The statistics published in the releases and further disaggregated data are available to download from the StatsWales website<sup>13</sup>.

### **1.4 Detailed recommendations**

- 1.4.1 The Assessment team identified some areas where it felt that the Welsh Government could strengthen its compliance with the *Code*. Those which the Assessment team considers essential to enable designation as National Statistics are listed in section 1.5. Other suggestions, which would improve the statistics and the service provided to users but which are not formally required for their designation, are listed at annex 1.

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<sup>13</sup> <http://www.statswales.wales.gov.uk>

## 1.5 Requirements for designation as National Statistics

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|----------------------|--|
| <b>Requirement 1</b> | Prepare a plan to engage more widely with users of these statistics and make this plan known (para 3.2).   |
| <b>Requirement 2</b> | Publish more detailed information about the methods used and the quality of the NHS Wales performance statistics including sources of bias and other errors (para 3.9)   |
| <b>Requirement 3</b> | Publish a glossary of classification definitions used in NHS Performance statistics releases based on the NHS Data Dictionary (para 3.10).   |
| <b>Requirement 4</b> | Publish information on the strengths and limitations of the NHS Wales Performance statistics in relation to the range of potential uses (para 3.20)  |
| <b>Requirement 5</b> | Improve NHS Wales Performance statistical releases by improving commentary, providing more contextual information about the statistics and providing comparisons and analysis that will aid user interpretation (para 3.21). |



## 2 Subject of the assessment

- 2.1 The publications included in this assessment present statistics on the performance of various aspects of the National Health Service and ambulance services in Wales.
- 2.2 *NHS Wales Cancer Waiting Times (Cancer)* is a quarterly release which presents statistics on patients newly diagnosed with cancer, by tumour site and the length of time that they have been waiting to start treatment. The release also presents statistics on the number of patients who have begun treatment in the most recent quarter. The statistics are derived from aggregated data that Welsh Local Health Boards (LHBs) send directly to the Welsh Government.
- 2.3 *Ambulance Services in Wales (Ambulances)* is a monthly release which presents statistics on the response times of ambulances in Wales. The statistics are presented by LHB and the urgency of the journey, as categorised by the Welsh Ambulance Services NHS Trust (WAST). The statistics presented in the release are derived from aggregated data that WAST sends to the Welsh Government via Excel spreadsheet.
- 2.4 *Time Spent in NHS Wales Accident and Emergency Departments (A&E)* is a monthly release which presents statistics on the total number of patients admitted to, and the time spent in, A&E departments in each LHB area in Wales. The release distinguishes between major and minor A&E departments. The statistics relating to minor A&E departments are derived from data held on a management information system called the Situation Reporting System Database (SITREPS). LHBs extract the data and send it to the NHS Wales Informatics Service<sup>14</sup> (NWIS). NWIS aggregate and validate the data and send it to the Welsh Government. The statistics relating to major A&E departments are derived from data held on a new management information system called the Emergency Department Data Set Database (EDDS). NWIS extracts patient level data from EDDS, aggregates the data to tabulate waiting times, and then sends the data to the Welsh Government.
- 2.5 *NHS Wales Referral to Treatment Times (RTT)* is a monthly release which presents statistics on the numbers of patients who have been treated during the month and the length of time they waited for treatment. The release also includes statistics on the number of patients who are still waiting for treatment and the length of time that they have been waiting so far. The RTT statistics are derived from management information provided by LHBs to NWIS. There are two categories of RTT statistics, Main RTT and Cardiac RTT. The Welsh Government is able to download the Main RTT data directly from NWIS. NWIS sends aggregated Cardiac RTT data to the Welsh Government<sup>15</sup>. The RTT release also includes statistics for medical specialities not covered by RTT reporting; these statistics are derived from data sent to the Welsh Government by NWIS.

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<sup>14</sup> NWIS collect data to identify the health services that are required in Wales and to monitor the performance of health services in Wales <http://www.wales.nhs.uk/nwis/news/18698>

<sup>15</sup> The Welsh Government is current exploring the feasibility of downloading Cardiac RTT data directly to make the process more efficient.

- 2.6 *NHS Wales Diagnostic & Therapy Services Waiting Times (DTS)* is a monthly release which presents statistics on the number of patients waiting for diagnostic and therapy services<sup>16</sup>. The statistics show the type of diagnostic or therapy service and the length of time waited. The statistics are derived from management information provided by LHBs. NWIS receives aggregated data from LHBs which is validated before being forwarded to the Welsh Government.
- 2.7 *Delayed Transfers of Care*<sup>17</sup> (DToC) is a monthly release which presents monthly statistics on the number of patients in Wales who are experiencing a delay in being discharged or a delay in progressing to their next stage of care. The release presents statistics on the number of patients waiting to be transferred, by month, reason for the delay, and the type of health care facility that they are currently staying in. The statistics provide point-in-time data. The Welsh Government extracts patient level data directly from the DToC database that is maintained by NWIS.
- 2.8 The statistics covered in this assessment are used by government departments and health professionals to monitor and evaluate the performance of NHS Wales in relation to government targets. The statistics are also used by government to inform public announcements and to respond to press queries. Outside government, the statistics are used by academics for research, by medical professional organisations to promote best practice, and by the media and the general public to monitor and compare the performance of local hospitals.
- 2.9 The statistics team participates in groups which represent both users and suppliers. The Welsh Information Governance and Standards Board (WIGSB) aims to ensure that data are captured, shared, stored, and used consistently and coherently throughout NHS Wales and partner organisations. WIGSB board members include the head of the Welsh Government's Health and Care Statistics Division, representatives of LHBs and the NWIS. Recently a Heads of Information Group was set up, chaired by the NWIS Head of Information with representatives from all LHB information departments and the statistics team. This group aims, among other things, to monitor and manage data quality, to discuss new data requirements, and to provide an information assurance role. It is supported by a number of sub groups each of which has an interest in different aspects of statistical production.
- 2.10 It costs £27,000 to produce the statistics covered in this assessment.

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<sup>16</sup> For example, x-rays or physiotherapy

<sup>17</sup> Delayed Transfer of Care refers to the delay that is experienced by a hospital inpatient who is ready to move on to their next stage of care or discharge, but is prevented from doing so for health, social care or family related reasons.

<http://wales.gov.uk/topics/health/socialcare/delayedtransfersofcare/?lang=en>

### 3 Assessment findings

#### Principle 1: Meeting user needs

**The production, management and dissemination of official statistics should meet the requirements of informed decision-making by government, public services, business, researchers and the public.**

- 3.1 The statistics team has an established practice of conducting formal user consultations when proposing significant changes to the outputs. The most recent consultation closed in January 2011; it sought information about the ways in which the NHS performance statistics are used and users' perspectives on a number of proposed changes. Responses were received from the media, charities and a member of the public, as well as NHS Wales organisations and the Welsh Government.
- 3.2 The formal consultations clearly show that there is user interest outside the two main user organisations - NHS Wales and the Welsh Government. However, there has been little other active engagement with these other users. The statistics team told us that as a result of the most recent consultation it hopes to develop a broad-based forum or a users' panel. As part of the designation as National Statistics, the Welsh Government should prepare a plan to engage more widely with users of these statistics and make this plan known<sup>18</sup> (Requirement 1).
- 3.3 There is considerable cross-over between users and suppliers of NHS performance statistics and users are represented on groups such as WIGSB and the Heads of Information Group. However, the mechanisms through which users are able to contribute to the development of the Welsh Government's NHS performance statistics are unclear, for example, the relationship between WIGSB, the Heads of Information Group and the Welsh Government. To aid users' understanding of the management processes behind the statistics, we suggest the Welsh Government publishes further information about WIGSB and the Heads of Information Group, which may include for example, the terms of reference, minutes and relevant papers on its website.

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<sup>18</sup> In relation to Principle 1, Practice 2 of the *Code of Practice*

## Principle 2: Impartiality and objectivity

### Official statistics, and information about statistical processes, should be managed impartially and objectively.

- 3.4 The statistical releases are published in an orderly manner and in accordance with the rules on pre-release access. They are available free of charge on the Welsh Government's website and on through the National Statistics Publication Hub.
- 3.5 Changes to classifications or methods are usually pre-announced within the statistical release. The Welsh Government has procedures<sup>19</sup> in place, endorsed by the Department for Health and Social Services (DHSS), Management Team which are intended to ensure that users and suppliers are consulted when any changes to the classifications or methods are proposed; these include consultation with WIGSB and an assessment of the potential increase in the burden on the data suppliers. However the DHSS recently made a change to the classifications for *RTT* without following these procedures. As a result, the statistical team was not able to pre-announce the changes to users, although the team did subsequently provide an analysis of the effect of the classification change within the release. The team told us that it has taken steps to ensure that any future changes to classifications or definitions will only be implemented according to the appropriate procedures. We suggest that the Welsh Government provide a readily accessible link on its website to the procedures that apply to proposed changes to methods and classifications.
- 3.6 The Welsh Government's statistical revisions policy<sup>20</sup> identifies *A&E*, *RTT*, and *DTS* as being key releases subject to scheduled revisions. These releases and *Cancer* state that the most recent statistics are provisional. Revisions arising from corrections from data suppliers, or the replacement of imputed estimates with real data, are indicated in the releases. A statement is provided within the release about the nature and extent of these revisions.
- 3.7 Errors are dealt with according to published procedures - users are notified via email and a notice placed on the Welsh Government's website. These procedures were followed when an error was discovered in the July 2010 *A&E* release<sup>21</sup> (published in August 2010).

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<sup>19</sup> <http://www.wales.nhs.uk/documents/WHC%282006%29083.pdf>

<sup>20</sup> <http://wales.gov.uk/topics/statistics/publications/revisions/?lang=en>

<sup>21</sup> <http://wales.gov.uk/topics/statistics/headlines/health2010/100819/?lang=en>

### **Principle 3: Integrity**

**At all stages in the production, management and dissemination of official statistics, the public interest should prevail over organisational, political or personal interests.**

- 3.8 No incidents of political pressures, abuses of trust or complaints relating to professional integrity, quality or standards were reported to or identified by the Assessment team.

## Principle 4: Sound methods and assured quality

**Statistical methods should be consistent with scientific principles and internationally recognised best practices, and be fully documented. Quality should be monitored and assured taking account of internationally agreed practices.**

- 3.9 Each release contains a Key Quality Information section, but the methods used to produce most of the statistics are not clearly explained and very little quality information is given. Some users who contacted us in response to this assessment said that it would be helpful to have more information about the way that the statistics are compiled. Furthermore it is not clear how data are transferred from data providers to the Welsh Government. The statistics team has recently published stand-alone quality documents to supplement *A&E*<sup>22</sup> and *RTT*<sup>23</sup> providing more detailed information about the data collection processes for these statistics. They also provide information relating to the European Statistical System's dimensions of quality<sup>24</sup> which we regard as an example of good practice. As part of the designation as National Statistics the Welsh Government should publish more detailed information about the methods used and the quality of the *Cancer*, *Ambulances*, *D&TS* and *DToC* statistics including sources of bias and other errors<sup>25</sup> (Requirement 2). In meeting this requirement, the Welsh Government should also provide more information about the data transfer process.
- 3.10 Users also expressed concerns that data providers were not using consistent definitions or interpretations of what is required. The statistics team works with data providers through the sub-groups of WIGSB and the Heads of Information Group to ensure that the data are provided consistently across NHS Wales. One key tool is the NHS Data Dictionary, which contains the definitions and guidance for data providers at a local level. We think that this information would help users to understand better the classifications used in the compilation of the statistics, however, the NHS Data Dictionary is currently only available through the NHS Wales intranet. The statistics team told us that it is working with colleagues in the NHS to make this a public resource in the same way that the Department of Health publishes the equivalent Dictionary used by the NHS in England<sup>26</sup>. As part of the designation as National Statistics, the Welsh Government should publish a glossary of classification definitions used in NHS performance statistics releases based on the NHS Data Dictionary<sup>27</sup> (Requirement 3).
- 3.11 The systems used to produce the statistics are regularly audited to ensure that they are fit for purpose. The systems to produce the data for *RTT* were reviewed as part of the Welsh Government's *Access 2009* project<sup>28</sup>. The Welsh Government's Internal Audit Services recently reviewed the mechanisms used

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<sup>22</sup> <http://wales.gov.uk/topics/statistics/publications/accidentquality/?lang=en>

<sup>23</sup> <http://wales.gov.uk/topics/statistics/publications/referralquality/?lang=en>

<sup>24</sup> [http://epp.eurostat.ec.europa.eu/portal/page/portal/pgp\\_ess/about\\_ess/quality](http://epp.eurostat.ec.europa.eu/portal/page/portal/pgp_ess/about_ess/quality)

<sup>25</sup> In relation to Principle 4, Practices 1 and 2 of the *Code of Practice*

<sup>26</sup> [www.datadictionary.nhs.uk](http://www.datadictionary.nhs.uk)

<sup>27</sup> In relation to Principle 4, Practice 6 of the *Code of Practice*

<sup>28</sup> <http://wales.gov.uk/topics/health/nhswales/performance/access09/?lang=en>

to capture performance monitoring information, and the consistency and quality of waiting times data; it did not find any problems with the current systems.

- 3.12 The Welsh Government has published a 'Frequently Asked Questions' document<sup>29</sup> to provide users with additional information about how the various NHS Wales waiting times statistics it produces – *A&E*, *RTT* and *DTS* – relate to each other. We consider this to be an example of good practice.
- 3.13 The UK Waiting Times Group has representatives from the four UK administrations. Part of the group's remit is to share working practices and to understand the variations in definitions and methods across administrations. The group has produced some tables presenting statistics across the four countries on a comparable basis<sup>30</sup> which have been published by the Office for National Statistics. We suggest that the Welsh Government provide a link to the publication containing the UK comparison tables on its website.
- 3.14 It is not always possible or appropriate for consistent historical statistics to be produced. However, when changes are made to methods or definitions, a clear analysis of the impact of those changes is provided within the statistical releases, such as those in the February 2011 publication of *RTT*.

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<sup>29</sup> <http://wales.gov.uk/topics/statistics/theme/health/waiting-times/waitingtimes/?lang=en>

<sup>30</sup> <http://www.statistics.gov.uk/statbase/Product.asp?vlnk=6637>

## **Principle 5: Confidentiality**

**Private information about individual persons (including bodies corporate) compiled in the production of official statistics is confidential, and should be used for statistical purposes only.**

3.15 The Welsh Government has assured us that it takes all necessary steps to protect the confidentiality of the data it collects. This includes receiving aggregate data returns and undertaking disclosure risk assessments for each output. Where the statistics are compiled from administrative sources, the databases do not contain personally identifiable information such as name or postcode. Furthermore, access to these databases is restricted to the statistics team.



## Principle 6: Proportionate burden

**The cost burden on data suppliers should not be excessive and should be assessed relative to the benefits arising from the use of the statistics.**

- 3.16 NHS Wales performance statistics are derived from NHS Wales's management information systems. However, the data are provided to the statistics team in different ways. The Welsh Government has direct access to unit level data for main *RTT* and *DToC* data. All other data are provided in aggregated form either directly from the LHBs such as for *Cancer* or from WAST for *Ambulances*, or through NWIS. It is expected that the data for *Cancer* will be provided via NWIS in future as this will allow more efficient validation and reduce the burden on the statistics team.
- 3.17 All requests for new data must be agreed through WIGSB. The process involves an impact assessment whereby LHBs are asked to estimate the likely cost and additional burden that may be incurred.

## Principle 7: Resources

**The resources made available for statistical activities should be sufficient to meet the requirements of this Code and should be used efficiently and effectively.**

- 3.18 The production of these statistics appears to be sufficiently resourced. The statistics team is undergoing a number of staff changes at present, so there is a risk of a loss of knowledge.
- 3.19 The Welsh Government participates in the Government Statistical Service's recruitment schemes and uses a competency-based framework to manage staff performance. This involves assessments of continuing professional development, and six-month performance reviews.

## Principle 8: Frankness and accessibility

**Official statistics, accompanied by full and frank commentary, should be readily accessible to all users.**

- 3.20 The Key Quality Information sections of the statistical releases provide insufficient quality information; in particular, there is little discussion of the strengths and limitations of the statistics in relation to potential uses. The statistics in *DToC*, for example, provide a snapshot of the delayed transfers that have occurred. The statistics only count those that are ‘live’ on the system on the census day<sup>31</sup>; a delayed transfer that began and was resolved between the census days would not be included in the statistics. As a result there are limits to how the statistics can and should be used. Furthermore, comparisons with similar NHS Performance statistics from other UK administrations are not straightforward as the definitions, standards and management information systems are often different. As part of the designation as National Statistics, the Welsh Government should publish information on the strengths and limitations of the NHS Wales performance statistics in relation to the range of potential uses<sup>32</sup> (Requirement 4). We suggest that the Welsh Government provide information about how NHS Wales Performance statistics differ from those produced in other UK countries.
- 3.21 The statistical releases provide some information about the policy or operational context, but often the small amount of commentary that is included does not help users to interpret the data. The December *Ambulances* release includes some information about how the weather may have influenced the statistics presented in the release; the other releases lack this level of contextual explanation. Most releases provide some key points but *Cancer* does not have any commentary or key points at all. In some releases, the comparisons of statistics across different geographies do not provide a clear and useful analysis. As part of the designation as National Statistics, the Welsh Government should improve the NHS Performance statistics release by: improving commentary, providing more contextual information about the statistics, and providing comparisons and analysis that will aid user interpretation<sup>33</sup> (Requirement 5). We suggest that in meeting this requirement the Welsh Government should consider the points detailed in Annex 2.
- 3.22 All the NHS Wales performance statistics published in the statistical releases, along with further disaggregated statistics are available to download from StatsWales<sup>34</sup>. There is no time delay between the publication of the statistical release and the availability of the data on StatsWales. Some users who contacted us in response to this assessment stated that they had difficulty navigating StatsWales. We suggest that clearer guidance is provided on StatsWales to help users fully exploit the available data.
- 3.23 The recent user consultation carried out by the Welsh Government identified that users would welcome combining the Ambulance and A&E statistics to

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<sup>31</sup> The census day relates to the specified day each month when the data are extracted from the management information system.

<sup>32</sup> In relation to Principle 8, Practice 1 of the *Code of Practice*

<sup>33</sup> In relation to Principle 8, Practice 2 of the *Code of Practice*

<sup>34</sup> <http://www.statswales.wales.gov.uk>

create a new release on Unscheduled Care. We think that a release on Unscheduled Care would improve the coherence between these two sets of statistics, and we suggest that the Welsh Government develop a release presenting statistics on Unscheduled Care.

## **Protocol 1: User engagement**

**Effective user engagement is fundamental both to trust in statistics and securing maximum public value. This Protocol draws together the relevant practices set out elsewhere in the Code and expands on the requirements in relation to consultation.**

3.24 The requirements for this Protocol are covered elsewhere in this report.

## Protocol 2: Release practices

**Statistical reports should be released into the public domain in an orderly manner that promotes public confidence and gives equal access to all, subject to relevant legislation.**

- 3.25 In compliance with the *Pre-release Access to Official Statistics (Wales) Order 2009*<sup>35</sup>, the Welsh Assembly Government publishes lists of people who have pre-release access<sup>36</sup> to its individual statistical publications on its website.
- 3.26 Scheduled releases are announced<sup>37</sup> 12 months in advance. There was an unusually high demand for information about unscheduled care as a result of the severe weather experienced during December 2010. Because the underlying data are available within the health service as management information, the Chief Statistician decided to mitigate the risk that the information (contained within the December 2010 *Ambulances* release) be released inappropriately by bringing forward the publication date of the statistics<sup>38</sup>.

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<sup>35</sup> <http://www.legislation.gov.uk/wsi/2009/2818/schedule/paragraph/1/made>

<sup>36</sup> <http://wales.gov.uk/topics/statistics/about/prerelease/?lang=en>

<sup>37</sup> <http://wales.gov.uk/topics/statistics/du/due-theme/health/?lang=en>

<sup>38</sup> <http://wales.gov.uk/topics/statistics/headlines/health2011/110125/?lang=en>

### **Protocol 3: The use of administrative sources for statistical purposes**

**Administrative sources should be fully exploited for statistical purposes, subject to adherence to appropriate safeguards.**

- 3.27 All source data for the NHS Wales performance statistics come from management information systems developed to monitor performance against targets. Most data are provided in aggregate form, although the Welsh Government has direct access to record level data for *RTT and DToC*.
- 3.28 The legislative changes affecting the recording of complaints to NHS Wales have provided an opportunity to ensure that the new system is developed with statistical purposes in mind. We encourage the Welsh Government to maximise this opportunity to influence the development of the administrative system to facilitate the flow of information between data providers and statistical producers.

## Annex 1: Suggestions for improvement

A1.1 This annex includes some suggestions for improvement to the Welsh Government's NHS Wales Performance statistics, in the interest of the public good. These are not formally required for designation, but the Assessment team considers that their implementation will improve public confidence in the production, management and dissemination of official statistics.

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| <b>Suggestion 1</b> | Publish further information about WIGSB and the Heads of Information Group, which may include for example the Terms of Reference, minutes and relevant papers on its website (para 3.3). |
| <b>Suggestion 2</b> | Provide a readily accessible link on its website to the procedures that apply to proposed changes to methods and classifications (para 3.5).   |
| <b>Suggestion 3</b> | Provide a link to the publication containing the UK comparison tables on their website (para 3.13).  |
| <b>Suggestion 4</b> | Provide information about how NHS Wales Performance statistics differ from those produced in other UK countries (para 3.20).   |
| <b>Suggestion 5</b> | Consider the points detailed in Annex 2, in seeking to improve the statistical releases (para 3.21).   |
| <b>Suggestion 6</b> | Provide clearer guidance on StatsWales to help users to fully exploit the data available (para 3.22).  |
| <b>Suggestion 7</b> | Develop a combined release presenting statistics on Unscheduled Care (para 3.23).  |



## Annex 2: Compliance with the Standards for Statistical Releases

- A2.1 In October 2010, the Statistics Authority issued a statement on *Standards for Statistical Releases*<sup>39</sup>. Whilst this is not part of the *Code of Practice for Official Statistics*, the Authority regards it as advice that will promote both understanding and compliance with the Code. In relation to the statistical releases associated with NHS Wales Performance Statistics, this annex comments on compliance with the statement on standards..
- A2.2 In implementing any Requirements of this report (at paragraph 1.5) which relate to the content of statistical releases, we encourage the producer body to apply the standards as fully as possible.

### Appropriate identification of the statistics being released

- A2.3 The titles of all the releases clearly indicate the coverage of the statistics and the period to which the latest statistics relate.
- A2.4 Each release provides a date for when the statistics will next be updated. *NHS Wales Cancer Waiting Times (Cancer)* specifically identifies the release as being quarterly and *Delayed Transfers of Care in Wales (DToC)* explains that the releases are monthly. Other releases do not clearly state the frequency of release but imply they are monthly or annual.
- A2.5 All releases use appropriate headings and logos.
- A2.6 The releases clearly identify the producer organisation and include the name and contact details of the responsible statistician.
- A2.7 All but one of the releases provide very little introduction. There are no contents pages and the brief introductory paragraphs do not clearly convey the subjects presented in the releases. For example the *Ambulance Services in Wales (Ambulances)* introduction says that the release 'summarises information about ambulance services provided by the NHS in Wales...'. Furthermore there is no list of tables or graphs. The exception is *DToC*, which provides a helpful explanation of how the statistics are presented in each table.
- A2.8 Four of the releases clearly state that the latest statistics are provisional, thereby implying that statistics for previous periods have been revised and finalised. One release, *NHS Wales Diagnostic and Therapy Services Waiting Times (DTS; June 2011)* indicates that the previous month's statistics have been revised as a result of a resubmission of data by one provider.

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<sup>39</sup> <http://www.statisticsauthority.gov.uk/news/standards-for-statistical-releases.html>

## **Include commentary that is helpful to the non-expert and presents the main messages in plain English**

- A2.9 All releases except *Cancer* provide at least two key points (variously referred to as 'facts,' 'points' or 'results'). In general, these relate to the targets or performance indicators that the statistics are used to monitor.
- A2.10 Other than the key points, there is little or no commentary within these releases. Technical terms are explained but they are not always presented in a clear and straightforward manner.
- A2.11 *Ambulances* (June 2011) and *Time Spent in NHS Wales A&E Departments* (A&E; May 2011) both mention the severe weather experienced during December 2010 and the January 2011 release of *Ambulances* noted the effect on the statistics. There is scope for the commentary within all the NHS Wales Performance statistics releases to be greatly improved. At most, the key points only provide descriptions of the changes from the previous period. There is no discussion of regional variations or changes in trends over time where available. There are no comparisons with similar statistics produced by other UK countries.

## **Use language that is impartial, objective and professionally sound**

- A2.12 The text used in all releases is impartial and does not endorse or criticise government policy.
- A2.13 Descriptive statements are consistent with the statistics.
- A2.14 There is very little commentary within these releases.
- A2.15 Some releases contain comparisons that are not fully developed. For example, in *Ambulances* (Jan 2011) the range of performance across ambulance regions and at Unitary Authority (UA) level is presented as percentages: "At regional level, performance ranged from 38.1% in South East Wales to 59.8% in North Wales for emergency responses arriving within 8 minutes." However, the base for these percentages – total number of emergency response calls received - is not presented at regional or UA level. There may be valid reasons for this disparity; in particular the densely populated urban conurbations in South East Wales may generate higher numbers of emergency calls than the relatively rural and less populated North Wales region.

## **Include information about the context and likely uses**

- A2.15 Not all of the releases provide information about the targets and operational standards the statistics are used to monitor. *A&E* (June 2011) and *DToC* (May 2011) no longer refer to any targets or operational standards, although *A&E* does state that the release "reports on Local Health Board performance."

A2.16 *A&E* (Jan 2011) provides an explanation that the statistics cannot be used to monitor performance against the '8 hour' target. No other release provides any information about the strengths and limitations of the statistics in relation to potential uses. The June 2011 release of *A&E* has removed references to targets and replaced the Key Quality Information section with a link to a stand-alone quality report. This document does not contain any information on the strengths and limitations of the statistics. There is no discussion of known or potential uses of the statistics, other than the policy targets mentioned previously.

### **Include, or link to, appropriate metadata**

A2.17 The releases provide minimal methodological information. Some releases refer to source data being provided on 'returns' implying they are sample surveys; however, the data providers use these forms to provide their management information and there should be 100% coverage. In some releases links to methodological information are provided rather than providing the details in the release, for example *NHS Wales Referral to Treatment Times (RTT)*. The January 2011 *A&E* release indicates that there may be discrepancies in the data as a result of a change to the data source. Where source data are estimated because of incomplete returns, as in the February 2011 *DToC*, this is clearly marked in the tables and explained within the Key Quality Information.

A2.18 There are no comparisons with similar statistics produced by other UK countries. *RTT* states that similar information is available but that the data are not exactly comparable due to local definitions and standards.

A2.19 Changes to data sources are explained in the Key Quality Information sections or Quality Reports although the explanations are not always clear; for example, in *Ambulances* (Jan 2011) the previous data collection was via the 'quarterly... KA34 Patient Transport Service return, but the data is [sic] now available monthly and this is the source of the data for this release.' An explanation of the re-organisation of NHS Wales, which came into effect in October 2009, has also been provided. The effects of changes to guidance on Referral to Treatment definitions are clearly presented within the February 2011 *RTT*. The key statistics are presented in a table using the original and new definitions for ease of comparison.

A2.20 Each release provides a date showing when the statistics will next be updated, but only four releases clearly state that the latest statistics are provisional. Those statistics that are derived from source data that are estimated are marked 'e', and revisions arising from corrected source data are marked 'r'. None of the releases explain whether the previous periods' statistics have changed as a result of scheduled revisions.

## Annex 3: Summary of assessment process and users' views

- A3.1 This assessment was conducted from February to September 2011.
- A3.2 The Assessment team – Rachel Beardsmore and Ruth James – agreed the scope of and timetable for this assessment with representatives of the Welsh Government in February. The Written Evidence for Assessment was provided on 23<sup>rd</sup> March. The Assessment team subsequently met the Welsh Government during June to review compliance with the *Code of Practice*, taking account of the written evidence provided and other relevant sources of evidence.

### Summary of users contacted, and issues raised

A3.3 Part of the assessment process involves our consideration of the views of users. We approach some known and potential users of the set of statistics, and we invite comments via an open note on the Authority's website. This process is not a statistical survey, but it enables us to gain some insights about the extent to which the statistics meet users' needs and the extent to which users feel that the producers of those statistics engage with them. We are aware that responses from users may not be representative of wider views, and we take account of this in the way that we prepare assessment reports.

A3.4 The Assessment team received 7 responses from the user consultation, and a further 6 responses from suppliers (many of whom are also users). The respondents were grouped as follows:

Government	5
Academia	1
Professional Organisation	1
Suppliers	6

A3.5 The overall number of responses was lower than had been expected. This is likely to be because the Welsh Government had recently conducted an extensive user consultation. Users who responded to the Assessment Team's consultation were generally content that the statistics met their needs. Users informed the Assessment team that the statistics are used to handle press queries or inform public announcements, and to examine the performance of public services in Wales. The statistics are also used by the academic sector for research, and by a professional organisation to represent members and to promote best practice.

A3.6 A small number of users expressed concern about possible variation in the interpretation of definitions, and were concerned that these variations were not transparent within the publications. Some users reported difficulty in locating the data sets they need on the StatsWales website. Users had mixed views about the commentary provided in the releases. Some thought that there was sufficient commentary. Others asked for: more explanation about how the statistics were compiled; relevant policy information; and links to other relevant statistics.

## **Key documents/links provided**

Written Evidence for Assessment document



