

Assessment of compliance with the Code of Practice for Official Statistics

Lifestyles Statistics Compendium Publications

(produced by the NHS Information Centre)

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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 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 reports¹ prepared under the provisions of the *Statistics and Registration Service Act 2007*². The Act requires all statistics currently designated as National Statistics to be assessed against the Code of Practice for Official Statistics³. The report covers the following National Statistics compendia publications produced by the NHS Information Centre for health and social care (NHS IC):

- *Statistics on Smoking: England*⁴;
- *Statistics on Drug Misuse: England*⁵; and
- *Statistics on Alcohol: England*⁶.

1.1.2 The Act also allows Ministers or the National Statistician to request an assessment of other official statistics in order for them to gain National Statistics status. NHS IC requested that the following statistics that it produces, which do not currently carry the National Statistics designation, should also be covered by this assessment:

- *Statistics on obesity, physical activity and diet: England*⁷.

1.1.3 Assessments of compendium publications against the Code of Practice relate to the processes involved in preparing the publication, rather than in producing the statistics that are included. Those sets of statistics will normally be subject to separate assessment. Designation of a compendium publication as National Statistics therefore means that the producer body has, for example: identified and met user needs in terms of the content of the publication; considered the appropriateness of each series for inclusion; and written appropriate commentary.

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 in this report. The Statistics Authority confirms that the statistics detailed in

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

² http://www.opsi.gov.uk/Acts/acts2007/pdf/ukpga_20070018_en.pdf

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

⁴ [http://www.ic.nhs.uk/statistics-and-data-collections/health-and-lifestyles/smoking/statistics-on-smoking-in-england-2010-\[ns\]](http://www.ic.nhs.uk/statistics-and-data-collections/health-and-lifestyles/smoking/statistics-on-smoking-in-england-2010-[ns])

⁵ <http://www.ic.nhs.uk/pubs/drugmisuse09>

⁶ <http://www.ic.nhs.uk/statistics-and-data-collections/health-and-lifestyles/alcohol/statistics-on-alcohol-england-2010>

⁷ <http://www.ic.nhs.uk/pubs/opad10>

paragraph 1.1.1 are designated as National Statistics, and has determined that the statistics detailed in para 1.1.2 can be designated as a new National Statistics product, subject to NHS IC implementing the enhancements listed in section 1.5 and reporting them to the Authority by March 2011 for Requirements 2, 4 and 5, and by July 2011 for Requirements 1 and 3.

1.3 Summary of strengths and weaknesses

- 1.3.1 The wide range of sources included in these compendia is appropriate and their quality and methods are very well documented. The compendia contain information about the data sources, methods and quality, and the context in which the statistics are produced.
- 1.3.2 As an organisation, NHS IC engages effectively with users. However, there is less evidence of effective engagement in relation to these compendia.
- 1.3.3 Some chapters in the compendia refer readers to other publications rather than reporting any statistics. For example, some chapters of the *Statistics on Drug Misuse: England* refer to the *Drugs Misuse Declared: Findings from the British Crime Survey*⁸. This was criticised by some users, who prefer to use these compendia as a one-stop-shop.

1.4 Detailed recommendations

- 1.4.1 The Assessment team identified some areas where it felt that NHS IC 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.

1.5 Requirements for designation as National Statistics

Requirement 1	Take steps to develop a greater understanding of the use made of the statistics; publish the relevant information and assumptions, and use them to better support the use of the statistics (para 3.2)
Requirement 2	Include an explanation of the distinction between National Statistics, other official statistics and statistics that are not official, and comment on the extent to which they are reliable (para 3.11).
Requirement 3	Determine the most appropriate format for the compendia, in consultation with users (para 3.22).

⁸ <http://rds.homeoffice.gov.uk/rds/pdfs08/hosb1308.pdf>

Requirement 4

Include the name of the responsible statistician in the *Statistics on Drug Misuse: England* compendium (para 3.28).

Requirement 5

Complete their Statement of Administrative Sources so that it covers all the sources currently used (para 3.29).

2 Subject of the assessment

- 2.1 The lifestyles compendia are four annual publications that draw together a range of information about drug and alcohol misuse, smoking behaviour and obesity, physical activity and health. The compendia cover England, unless only data for GB or the UK are available. The alcohol and smoking compendia have been produced since 1976 (published by Department of Health from 1976-2005 and NHS IC from 2006). The Obesity, physical activity and diet compendium was first produced in 2006. The drug misuse compendium was originally produced as *Drug Misuse and Young People* but was renamed *Statistics on Drug Misuse: England* in 2008, and the focus broadened to include information about the whole population.
- 2.2 The compendia draw together data from a wide range of sources including: the British Crime Survey⁹, the Health Survey for England¹⁰, Smoking, drinking and drug use among young people in England¹¹, Hospital Episode Statistics¹², The Drug Treatment Monitoring System¹³, General Lifestyle Survey¹⁴, National Diet and Nutrition Survey¹⁵ and the Active People Survey¹⁶. Additional analysis, carried out by NHS IC, is also included.
- 2.3 *Statistics on Smoking: England* presents a broad picture of health issues relating to smoking and covers topics such as smoking prevalence, habits, behaviours and attitudes among adults and school children. *Statistics on Drug Misuse: England* covers both adults and children and includes a focus on young adults. It is primarily concerned with the use of illicit drugs. *Statistics on Alcohol: England* presents a broad picture of health issues related to alcohol and covers topics such as drinking habits and behaviours, knowledge and attitudes towards drinking, and alcohol related hospital admissions. *Statistics on obesity, physical activity and diet: England* covers overweight and obesity prevalence, physical activity, trends in the purchase and consumption of food and drink, and the health outcomes of being overweight or obese.
- 2.4 While none of the compendia are required to be produced by any legislation, all four contain information relevant to various government strategies and former PSA targets such as: 'Reduction in the obese and overweight population', *Alcohol Harm Reduction Strategy for England (2004)*¹⁷, and 'Reduce the harm caused by alcohol and drugs' (PSA 25¹⁸). The compendia are used by a wide

⁹ <http://rds.homeoffice.gov.uk/rds/pdfs08/hosb1308.pdf>

¹⁰ <http://www.ic.nhs.uk/statistics-and-data-collections/health-and-lifestyles-related-surveys/health-survey-for-england>

¹¹ <http://www.ic.nhs.uk/statistics-and-data-collections/health-and-lifestyles-related-surveys/smoking-drinking-and-drug-use-among-young-people-in-england/smoking-drinking-and-drug-use-among-young-people-in-england-in-2009>

¹² <http://www.ic.nhs.uk/statistics-and-data-collections/hospital-care/hospital-activity-hospital-episode-statistics--hes>

¹³ <http://nta.shared.hosting.zen.co.uk/areas/ndtms/default.aspx>

¹⁴ <http://www.statistics.gov.uk/STATBASE/Product.asp?vlnk=5756>

¹⁵ <http://www.food.gov.uk/science/dietarysurveys/ndnsdocuments/>

¹⁶ http://www.sportengland.org/research/active_people_survey/active_people_survey_3.aspx

¹⁷ <http://www.huntingdonshire.gov.uk/SiteCollectionDocuments/HDCCMS/Documents/Crime%20and%20Disorder/AlcoholHarmStrategy.pdf>

¹⁸ <http://www.hm-treasury.gov.uk/Search.aspx?terms=PSA+Delivery+Agreement+25+>

range of organisations including the House of Commons Library, academic researchers, the NHS (to target and monitor services), Public Health Observatories, and the press. Statistics from the compendia receive wide press coverage, which reflects high levels of public interest.

- 2.5 The estimated annual costs to NHS IC of producing the compendia are £26,000 for *Statistics on obesity, physical activity and diet: England*, £30,000 for *Statistics on Drug Misuse: England*, £42,000 for *Statistics on Alcohol: England* and £21,000 for *Statistics on Smoking: England*.

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 At an organisational level, NHS IC engages with its users through a range of methods, including quarterly user surveys on Key Performance Indicators, targeted newsletters and a programme of corporate events and conferences. As part of its publication planning process NHS IC is investigating ways to measure the impact of its publications in terms of press coverage, relevance of the information they contain and how well they understand their users.
- 3.2 NHS IC statisticians are less actively engaged with users of these compendia. They have regular contact with policy colleagues in the Department of Health, but information about the needs of the wider user community is not well documented. As part of the designation as National Statistics, NHS IC should take steps to develop a greater understanding of the use made of the statistics; publish the relevant information and assumptions, and use them to better support the use of the statistics¹⁹ (Requirement 1).
- 3.3 NHS IC has a point-of-download feedback form on its website, on which users can comment on the statistics. Information about users is also passed to statisticians from the central NHS IC contact centre. We suggest NHS IC publish the information gained from this user engagement.
- 3.4 The statisticians in NHS IC told us that they are considering consulting about the compendia to establish users' views on the statistical services provided, the data quality, and the format and timing of reports.

¹⁹ 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.

- 3.5 These four compendia are published in an orderly manner and in accordance with the rules on pre-release access. They are available free of charge on the internet and NHS IC has a clear charging policy for supplementary data requests.
- 3.6 The statistics and associated commentary are clear, objective and impartial. Changes to methods or classifications and their implications are clearly noted and explained in the publications.
- 3.7 None of the statistics released in these compendia are subject to scheduled revisions. NHS IC has published a general revisions policy.

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 pressure, abuse 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 Nearly all of the statistics included in the compendia have already been published by either NHS IC or the organisations that supply the data to them. Exceptions to this are the affordability of alcohol (in the *Alcohol* compendium) and the Tobacco Price Index and smoking-attributable deaths (in the *Smoking* compendium). Comprehensive details of how these statistics are derived are included in an appendix in each compendium, along with information about each data source, and about methods and data quality.
- 3.10 NHS IC statisticians told the Assessment team that they were exploring ways to provide more information about data accuracy in the compendia. We suggest NHS IC seek user input into the measures that would best meet user needs.
- 3.11 A number of tables in *Statistics on obesity, physical activity and diet: England* contain statistics that are not National Statistics. Their inclusion helps to provide a more rounded and complete picture for users, but as part of the designation as National Statistics, NHS IC should include an explanation of the distinction between National Statistics, other official statistics and statistics that are not official, and comment on the extent to which they are reliable²⁰ (Requirement 2).
- 3.12 Information in the compendia is limited to England unless only GB or UK data are available, in which case its coverage is noted. Similar data are published by the other UK countries, often following the same standards. NHS IC statisticians have worked with statisticians from ONS and other government departments, for example when a new method for converting volumes of alcohol to standard units was required. UK-wide work is currently being undertaken to update the methods used to produce data on deaths attributable to alcohol. Some data are provided to international organisations such as the Organisation for Economic Co-operation and Development (OECD) and the World Health Organisation (WHO).

²⁰ In relation to Principle 4, Practice 3 of the Code of Practice.

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.

- 3.13 This principle is not directly applicable to compendia publications, as they rely on the steps taken by the producers of the original statistical series. No personal data are handled by staff producing supplementary analyses for these compendia.
- 3.14 NHS IC's arrangements for protecting confidentiality are summarised in its Statistical Governance Policy²¹. It has a published data access and information sharing policy, an information governance legal compliance policy (covering its duties under common law and data protection, freedom of information, health service and other legislation) and a 'small numbers procedure' which describes the process it uses to manage the risk of disclosure of personal information.

²¹ http://www.ic.nhs.uk/webfiles/publications/NHS_IC_Statistical_Governance_Policy_v2.pdf

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.

- 3.15 This principle has little application to compendium publications, as they rely on the steps taken by those responsible for producing the original statistical series.
- 3.16 The collection of all NHS administrative data for statistical purposes is reviewed annually via the Review of Central Returns (ROCR). The ROCR system seeks to minimise the burden of information demands on NHS bodies and to balance the cost and impact on front line staff against the benefits.

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.

- 3.17 The production of the compendia appears to be sufficiently resourced. NHS IC has introduced a time recording system to assist its business planning and management of staff resources. NHS IC statisticians work with data suppliers to reduce duplication of effort.
- 3.18 NHS IC statisticians told us that consultations are held when there is a recognised need for them. When they are held they are run in accordance with Cabinet Office guidelines.
- 3.19 NHS IC follows Government Statistical Service recruitment processes and requires staff to undertake continuing professional development.

Principle 8: Frankness and accessibility

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

- 3.20 The compendia are accessible from both the National Statistics Publication Hub and NHS IC's website. As well as a brief summary of the publication, the landing page for each compendium has links to the full report, Excel tables, the pre-release access list and a feedback form for comments.
- 3.21 The compendia are well presented and accessible, with information about data sources, quality, methods and classifications published in the appendices of each. The commentary is generally full and frank and accompanied by appropriate tables and charts. Each compendium also has an appendix that covers government policy and targets. Users who responded to our consultation were very positive about the compendia as comprehensive 'one-stop-shops' and described them as user-friendly.
- 3.22 The content of some chapters of the *Statistics on Drug Misuse: England* and *Statistics on obesity, physical activity and diet* compendia has been reduced and now consists of a summary of the source publication without the inclusion of any of the statistics themselves. NHS IC statisticians told us that this was done for two reasons: to make the publication more accessible for users who only require a high level overview; and to reduce the time taken to produce the compendia. However, users who responded to our consultation felt that this reduced the value of the compendia as a one-stop-shop, as they now had to consult more than one document. Additionally, users said that some time series originally available in the compendia were not available in the source publications. As part of the designation as National Statistics, NHS IC should determine the most appropriate format for the compendia, in consultation with users²² (Requirement 3). We also suggest that the graphs and tables in the compendia are reviewed for consistency of presentation.
- 3.23 All tables presented in the compendia are available in Excel format to enable reuse. They are presented in an Excel work book with hyperlinks from chapter content pages.

²² In relation to Principle 8, Practice 2 of the Code of Practice.

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 NHS IC has a publication schedule for the forthcoming 12 months on its website²³. It also pre-announces the release of the compendia through the Publication Hub.
- 3.26 NHS IC provides links to the pre-release access list for each series on the individual publication web page. We were told that these lists are regularly reviewed and have been restricted to essential recipients. NHS IC has published a statement of compliance with the *Pre-release Access Order 2008*.
- 3.27 The name of the responsible statistician is not given in *Statistics on Drug Misuse: England*. As part of the designation as National Statistics, NHS IC should include the name of the responsible statistician in the *Statistics on Drug Misuse: England* compendium²⁴ (Requirement 4).

²³ <http://www.ic.nhs.uk/statistics-and-data-collections/publications-calendar>

²⁴ In relation to Protocol 2, Practice 6 of the Code of Practice.

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.

3.28 The Smoking, Alcohol and Obesity, physical activity and diet compendia all make use of data from administrative sources. NHS IC has published a Statement of Administrative Sources²⁵, but it does not cover all of the administrative sources used by NHS IC. As part of the designation as National Statistics, NHS IC should complete its Statement of Administrative Sources so that it covers all of the sources currently used²⁶ (Requirement 5).

²⁵ <http://www.ic.nhs.uk/statistics-and-data-collections/publications-calendar/administrative-sources>

²⁶ In relation to Protocol 3, Practice 5 of the Code of Practice.

Annex 1: Suggestions for improvement

A1.1 This annex includes some suggestions for improvement to the NHS IC statistical outputs, 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.

- | | |
|---------------------|---|
| Suggestion 1 | Publish the information about users gained from the contact centre and via the website (para 3.3). |
| Suggestion 2 | Seek user input into the data accuracy measures that would best meet user needs (para 3.10). |
| Suggestion 3 | Review the graphs and tables in the compendia in order to make presentation consistent (para 3.22). |

Annex 2: Summary of assessment process and users' views

A2.1 This assessment was conducted from May to September 2010.

A2.2 The Assessment team – Joe Cuddeford, Elspeth Maclean and Alex Croker – agreed the scope of, and timetable for, this assessment with representatives of the NHS IC in May. The Written Evidence for Assessment was provided on 21 June. The Assessment team subsequently met the NHS IC during August 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

A2.3 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.

A2.4 The Assessment team received 7 responses from the user consultation. The respondents were grouped as follows:

NHS	2
Department of Health	2
Academia	2
Other central government	1

A2.5 Users' views were mostly positive, especially about the presentation of the compendia. One user described them as among 'the most user-friendly products published by the Government Statistical Service'. Some users, however, did want data available at more local geographies, and a breakdown by drug type in the drug misuse compendium. One user thought it would be helpful to provide more linkage between the data, for example linking alcohol purchasing patterns with alcohol related deaths.

A2.6 Generally users were satisfied with their contact with the NHS IC team, though two users were disappointed they had not been consulted before changes were made to compendia. Other users were concerned about the absence of some key research in the compendia.

Key documents/links provided

Written Evidence for Assessment document

