

Assessment of compliance with the Code of Practice for Official Statistics

Statistics on Health and Personal Social Services in Wales

(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 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 Statistics*³. The report covers the set of statistics included in the following National Statistics publications, produced by the Welsh Government:

Health statistics

Welsh Health Survey (WHS)

- *Welsh Health Survey: Initial Headline Results*⁴ (*WHS Initial Results*);
- *Welsh Health Survey Annual Report*⁵ (*WHS Annual Report*);
- *Welsh Health Survey First Release*⁶ (*WHS First Release*);
- *Welsh Health Survey: Local Authority/Local Health Board Results*⁷ (*WHS Local Results*); and
- *Welsh Health Survey: Topic-based releases*⁸.

Patient datasets

- *Maternity Statistics, Wales: Method of Delivery*⁹ (*Maternity Statistics*); and
- *NHS Immunisation Statistics, Wales*¹⁰ (*Immunisations*).

Primary care statistics

- *NHS Dental Service in Wales*¹¹ and *NHS Dental Statistics*¹² (*Dental Quarterly and Annual*);
- *Prescriptions by General Medical Practitioners in Wales*¹³ (*Prescriptions by GPs*);
- *Prescriptions Dispensed in the Community in Wales*¹⁴ (*Prescriptions Dispensed*);
- *Community Pharmacy Services in Wales*¹⁵ (*CPS*);
- *Ophthalmic Statistics for Wales*¹⁶ (*Ophthalmic Statistics*); and

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://wales.gov.uk/topics/statistics/headlines/health2011/1105191/?lang=en>

⁵ <http://wales.gov.uk/topics/statistics/publications/healthsurvey2010/?lang=en>

⁶ <http://wales.gov.uk/topics/statistics/headlines/health2011/110913/?lang=en>

⁷ <http://wales.gov.uk/topics/statistics/headlines/health2011/1109131/?lang=en>

⁸ <http://wales.gov.uk/topics/statistics/theme/health/health-survey/results/?lang=en>

⁹ <http://wales.gov.uk/topics/statistics/headlines/health2012/120131/?lang=en>

¹⁰ <http://wales.gov.uk/topics/statistics/headlines/health2011/110817/?lang=en>

¹¹ <http://wales.gov.uk/topics/statistics/headlines/health2012/120216/?lang=en>

¹² <http://wales.gov.uk/topics/statistics/headlines/health2011/110818/?lang=en>

¹³ <http://wales.gov.uk/topics/statistics/headlines/health2011/110831/?lang=en>

¹⁴ <http://wales.gov.uk/topics/statistics/headlines/health2012/1203281/?lang=en>

¹⁵ <http://wales.gov.uk/topics/statistics/headlines/health2011/1110261/?lang=en>

¹⁶ <http://wales.gov.uk/topics/statistics/headlines/health2011/110526/?lang=en>

- *Community Dental Services in Wales*¹⁷ (CDS).

Personal social services (PSS) statistics

- *Assessments and Social Services for Adults*¹⁸ (ASSA);
- *Referrals, Assessments and Social Services for Children*¹⁹ (RASSC);
- *Local Authority Child Protection Registers Wales*²⁰ (LACPR);
- *Local Authority Registers of People with Disabilities*²¹ (LARPD); and
- *Local Authority Social Services - Staff Numbers*²² (LASS).

1.1.2 The Act requires all statistics currently designated as National Statistics to be assessed against the *Code of Practice for Official Statistics*. The Act also allows departments to request an assessment of other official statistics in order for them to gain National Statistics status. The inclusion of *Births in Wales: Data from the National Community Child Health Database*²³ (*Births in Wales*) and *NHS Wales Cancer Waiting Times: monthly report (Waiting Times)* are in response to such a request.

1.1.3 Section 3 of this report adopts an ‘exception reporting’ approach – it includes text only to support the Requirements made to strengthen compliance with the *Code* and Suggestions made to improve confidence in the production, management and dissemination of these statistics. This abbreviated style of report reflects the Head of Assessment’s consideration of aspects of risk and materiality²⁴. The Assessment team nonetheless assessed compliance with all parts of the *Code of Practice* and has commented on all those in respect of which some remedial action is recommended.

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 published in *Waiting Times* can be designated as National Statistics.

1.2.2 The Statistics Authority confirms that the statistics listed in 1.1.1 are designated as National Statistics, and has determined that the statistics *Births in Wales* can be designated as new National Statistics products subject to the Welsh

¹⁷ <http://wales.gov.uk/topics/statistics/headlines/health2011/111129/?lang=en>

¹⁸ <http://wales.gov.uk/topics/statistics/headlines/health2011/110908/?lang=en>

¹⁹ <http://wales.gov.uk/topics/statistics/headlines/health2011/1109073/?lang=en>

²⁰ <http://wales.gov.uk/topics/statistics/headlines/health2011/111123/?lang=en>

²¹ <http://wales.gov.uk/topics/statistics/headlines/health2011/1110264/?lang=en>

²² <http://wales.gov.uk/topics/statistics/headlines/health2011/111012/?lang=en>

²³ <http://wales.gov.uk/topics/statistics/headlines/health2011/110713/?lang=en>

²⁴ <http://www.statisticsauthority.gov.uk/assessment/assessment/guidance-about-assessment/criteria-for-deciding-upon-the-format-of-an-assessment-report.pdf>

Government implementing the enhancements listed in section 1.5 and reporting them to the Authority by December 2012.

- 1.2.3 The Welsh Government has informed the Assessment team that it has started to implement the Requirements listed in section 1.5. The Statistics Authority welcomes this.

1.3 Summary of strengths and weaknesses

- 1.3.1 The Welsh Government is making good progress with user engagement, through consultations, expert user groups and plans for a user event. However, there is little engagement with non-government users for some aspects of the PSS statistics.
- 1.3.2 The development and publication of Quality Reports supporting the Health statistics releases provides users with detailed information about methods and most aspects of quality. Quality Reports have not been produced for the PSS statistics and the information about methods and quality provided in PSS releases is limited. All statistics would benefit from improved information about users, uses and the strengths and limitations relating to use.
- 1.3.3 The Welsh Government makes good use of data from administrative sources for the patient datasets and primary care statistics. There are potential sources of administrative data for PSS statistics, which the Welsh Government could investigate as a means to reduce the burden on data suppliers.

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.

1.5 Requirements for designation as National Statistics

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| Requirement 1 | a) Take steps to establish regular engagement with non-government users of PSS statistics; and b) Review and document the user need for publishing <i>Immunisations</i> (para 3.1). |
| Requirement 2 | Make clear when scheduled revisions to the Health statistics and Personal social service statistics will be made (para 3.4). |
| Requirement 3 | Expand and improve information about methods used to produce the Personal social services statistics (para 3.5). |

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| Requirement 4 | Expand and improve information about the quality of the Personal social services statistics (para 3.6). |
| Requirement 5 | Provide information about the comparability of the Personal social services statistics with those produced by the other UK administrations (para 3.7). |
| Requirement 6 | Improve information about the strengths and limitations of the health and Personal social services statistics in relation to known and potential uses (para 3.9). |
| Requirement 7 | a) Improve the commentary in the Health statistics and Personal social service statistics releases so that it aids user interpretation; and b) Improve the titles of the Welsh Health Survey releases (para 3.10). |
| Requirement 8 | Investigate the feasibility of streamlining the collection of PSS data from LAs (para 3.13). |

2 Subject of the assessment

- 2.1 The statistics covered in this report are produced by the Statistical Directorate of the Welsh Government and cover various aspects of health and personal social services in Wales. Welsh health compendia publications such as *Health Trends in Wales* and *Health Statistics Wales* are currently being assessed separately.
- 2.2 The Welsh Government told us that the health statistics are used within the Welsh Government and NHS Wales to monitor health and the progress towards meeting the Welsh Government's health targets; to inform policies and strategies, such as *Our Healthy Future*²⁵, and to inform the Welsh Government and NHS Wales about service provision. Academics use the data for a wide variety of research²⁶ into health and the use of health services. PSS statistics are used to advise Ministers; to provide an evidence base for local authority (LA) comparisons and benchmarking; and to inform the Care and Social Services Inspectorate Wales.
- 2.3 The Welsh Government estimates that the production of health and PSS statistics costs approximately £1.05m per year. WHS costs around £1m per year – this includes survey management, design, fieldwork, data preparation, analysis and publication of results. A further £50,000 is spent producing the remaining statistics. The Welsh Government also reimburses the Health and Social Care Information Centre²⁷ (HSCIC) each year for dental workforce statistics.

Health statistics

Welsh Health Survey (WHS)

- 2.4 The Welsh Health Survey (WHS) is conducted annually and collects information about the health of people living in Wales, the way in which they use health services and their health-related lifestyles. The National Centre for Social Research (NatCen) collects the data on behalf of the Welsh Government. Information is collected about the households via a face-to-face interview and a self-completion questionnaire is used to capture detailed information about individuals within the household²⁸. The interview collects brief demographic information for each household member aged 16 and over and up to 2 children. The survey reflects people's own understanding of their health rather than a clinical assessment of their condition.

²⁵ <http://wales.gov.uk/topics/health/ocmo/healthy/?lang=en>

²⁶ <http://www.esds.ac.uk/government/whs/usage/>

²⁷ <http://www.ic.nhs.uk/>

²⁸ If there are more than two children in the household, two are randomly sampled. Parents complete the questionnaire on behalf of children aged below 13.

2.5 The following statistics are produced from the WHS:

- *Welsh Health Survey: Initial Headline Results (WHS Initial Results)* briefly summarises the provisional results from the WHS.
- *Welsh Health Survey Annual Report (WHS Annual Report)* presents detailed final statistics from the WHS, on the health status and illness, health-related lifestyles, health service use and the health of children.
- *Welsh Health Survey First Release (WHS First Release)* briefly summarises the final results from the WHS. The *WHS First Release* was published simultaneously with the *WHS Annual Report* and provides key facts and points readers towards the more detailed results in the *WHS Annual Report*.
- *Welsh Health Survey: Local Authority/Local Health Board Results (WHS Local Results)* combines the two most recent years' WHS data to allow analysis at the level of the LA or local health board (LHB) based on a larger sample.
- *Welsh Health Survey: Analysis of the mental Health and Wellbeing of Adults*²⁹ (*WHS Mental Health*) is an example of a topic-based release which focuses on areas of user interest. *WHS Mental Health* provides statistics on the mental health and wellbeing of adults in Wales; presenting statistics based on the Mental Component Summary score³⁰

2.6 *The WHS Initial Results, WHS Annual Report, WHS First Release, and WHS Local Results* are published annually. *WHS Mental Health* and other topic-based releases are published periodically depending on user demand and the resources available to the statistics team.

Patient datasets

2.7 The Welsh Government publishes annual statistics from administrative data held on patient databases and maintained by NHS Wales Informatics Service (NWIS), Public Health Wales (PHW), or Local Health Boards:

- *Maternity Statistics Wales: Method of Delivery (Maternity Statistics)* provides statistics on the method of delivery by age of mother, LHB and length of stay in hospital. The statistics are compiled from data held by NWIS on the Patient Episode Database for Wales (PEDW) – a database of individual hospital patient records.
- *NHS Immunisation Statistics, Wales (Immunisations)* provides statistics on uptake of routine childhood immunisations by LHB, and influenza immunisations for older people and 'at risk' groups³¹ by LHB. Childhood immunisation coverage statistics are produced from COVER³² data

²⁹ <http://wales.gov.uk/topics/statistics/headlines/health2011/110707/?lang=en>

³⁰ Mental Component Summary score summarises the responses to questions asked in the WHS on mental health; and measures an individual's perception of their mental health and the impact it has on their daily lives

³¹ 'At risk' groups include people living in long-term residential or nursing homes, people with a chronic heart or chest complaint, a hereditary and degenerative disease of the central nervous system, lowered immunity due to disease or treatment such as steroids or cancer treatment and those who are the main carer for an elderly or disabled person

³² Cover of Vaccination Evaluated Rapidly:

<http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/VaccineCoverageAndCOVER/>

derived from the National Community Child Health Database (NCCHD). Influenza immunisation statistics are compiled by PHW from the Audit+ Data Quality System which is held and maintained by NWIS.

- *Births in Wales: Data from the National Community Child Health Database (Births in Wales)* presents statistics on live births to Welsh residents by gestation, weight, place of birth and mother's age. Statistics on breastfeeding and home births are also presented. The statistics are produced from data on NWIS' NCCHD – an anonymised database of records for all children born, resident or treated in Wales since 1987.

Primary care statistics

2.8 All primary care statistics, except those on community dental services, are derived from administrative data used as part of primary care contractor payment processes. Data for community dental services are collected from LHBs in a survey³³. The primary care releases are published annually, with provisional NHS Dental Service in Wales statistics published on a quarterly basis. The statistics relate to primary care contractors working in Wales:

- *NHS Dental Service in Wales and NHS Dental Statistics* (Dental Quarterly and Annual) include patients treated, treatment undertaken and workforce data for dentists contracted to provide NHS services by LHBs in Wales.
- *Prescriptions by General Medical Practitioners in Wales (Prescriptions by GPs)* provides statistics on items dispensed which were prescribed by GPs in Wales.
- *Prescriptions Dispensed in the Community in Wales (Prescriptions Dispensed)* provides statistics on all prescription items dispensed by community pharmacists together with the Prescription Cost Analysis (PCA) which provides details of the number of items and the net ingredient cost of all prescriptions dispensed in the community in Wales with the drugs listed by British National Formulary (BNF) therapeutic class.
- *Community Pharmacy Services in Wales (CPS)* presents statistics on the NHS services provided by community pharmacies, and also includes some statistics on the number of prescription items dispensed.
- *Ophthalmic Statistics for Wales (Ophthalmic Statistics)* includes activity and workforce data for community practitioners contracted by LHBs to provide NHS sight tests and optical vouchers³⁴. Ophthalmic Statistics for England are produced by Health and Social Care Information Centre, and were subject of Assessment report 192³⁵.
- *Community Dental Services in Wales (CDS)* relates to the activity of community dentists – including patient contacts and treatments undertaken – who are directly employed by LHBs in Wales.

³³ <http://wales.gov.uk/topics/statistics/about/data-collection/health/?lang=en>

³⁴ Optical vouchers are NHS vouchers which can be put towards the cost of having new lenses fitted to existing frames, buying spectacles, or contact lenses

³⁵ <http://www.statisticsauthority.gov.uk/assessment/assessment-reports/assessment-report-192---statistics-on-ophthalmic-services-in-england-and-wales.pdf>

2.9 These statistics are part of a wider group of primary care outputs produced by the Welsh Government which also includes statistics relating to GPs in Wales and to the General Medical Services³⁶ (GMS) contracts. These are official statistics outputs and are not currently being assessed.

Personal social services (PSS) statistics

2.10 The PSS statistics summarise information about assessments and social services provided to children and adults by LAs in Wales. The data are collected from LAs by the Welsh Government, with responsibility for collection having transferred from the Local Government Data Unit (LGDU) in April 2010. Releases are published annually:

- *Assessments and Social Services for Adults (ASSA)* presents statistics on assessments and social services provided to people aged 18 or over by LAs in Wales. Services include community-based services, residential placements in care homes and nursing placements in care homes.
- *Referrals, Assessments and Social Services for Children (RASSC)* presents statistics on referrals, assessments and social services provided to children by Welsh LAs. This includes numbers of children referred and provided with services, young carers and children on Child Protection Registers.
- *Local Authority Child Protection Registers Wales (LACPR)* is published around two months after RASSC and presents more detailed statistics about children on child protection registers in Wales.
- *Local Authority Registers of People with Disabilities (LARPD)* presents statistics on people with learning disabilities or physical and sensory disabilities registered with LAs in Wales.
- *Local Authority Social Services - Staff Numbers (LASS)* is published statistics on the directly employed staff of social services departments in Wales, including statistics on qualifications and numbers of Welsh speaking staff.

Cancer waiting times statistics

2.11 The Welsh Government publishes NHS Wales Cancer Waiting Times statistics on a quarterly basis³⁷ – these statistics were the subject of Assessment report 134³⁸. These statistics are derived from aggregated data that LHBs send directly to the Welsh Government on a monthly basis. In May, the Welsh Government decided that in response to user need and in order to release more data more rapidly, it would release NHS Wales Cancer Waiting Times statistics monthly, in addition to quarterly.

³⁶ http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_116299

³⁷ <http://wales.gov.uk/topics/statistics/headlines/health2012/1203071/?lang=en>

³⁸ <http://www.statisticsauthority.gov.uk/assessment/assessment-reports/assessment-report-134---statistics-on-nhs-wales-performance.pdf>

2.12 *NHS Wales Cancer Waiting Times: monthly report (Waiting Times)* presents monthly statistics on patients newly diagnosed with cancer, by the length of time that they have been waiting to start treatment.

2.13 The Assessment team conducted this assessment mainly during the period that the Welsh Government was preparing the new monthly release and supporting quality information. We were shown draft versions of the release and we provided feedback to the producers on issues relating to compliance with the Code, so that the producers were able to address them in the published release.

3 Assessment findings

3.1 The statistics team in the Health Statistics and Analysis Unit (HSA) of the Welsh Government has published a user engagement strategy³⁹, and the Welsh Government has also published a document⁴⁰ detailing current user engagement practices for all statistics that they produce. Many of the statistics included in this Assessment have been the subject of recent user consultations. The Welsh Government has published the user responses to a consultation on the WHS 2010 outputs⁴¹ and the statistics team has advised the Assessment team that the responses to a user questionnaire about the collection of social services data from LAs⁴² will be published as part of a formal open consultation later in 2012. The Welsh Government told us that it also intends to hold a Health Statistics user engagement event later in 2012 with the intention of improving relationships, developing networks and creating awareness of the statistics produced. The Welsh Government told us it will use this event to gather feedback from users on *Waiting Times* to ensure it continues to be developed to meet user needs. Even so, there is potential for specific areas of health statistics to benefit from more regular engagement with a broad range of users. For example:

- Statistics on immunisations are published more regularly and in more detail by PHW⁴³. The Welsh Government publishes an annual summary, *Immunisations* (with further analyses available on StatsWales⁴⁴) which is intended to provide a wider, less technical audience with access to the statistics. However, the Welsh Government provided little evidence of how the summary statistics are used.
- The statistics team determines user needs for ad hoc analyses from the WHS mainly through discussions with NHS Wales and colleagues within the Welsh Government responsible for setting and monitoring policy. Subjects for the ad hoc releases are established after the WHS has been conducted, rather than developing the survey to gather topic-specific information through an add-on module.
- Since responsibility for the data collection for the PSS statistics transferred from the LGDU to the Welsh Government in 2010, the statistics team confirmed that while it has established regular contact with policymakers within the Welsh Government, it does not engage regularly with users outside the Welsh Government. Although an annual technical working group was set up, it has not convened for some time and no further attempts to set up an effective means of engaging with users have been made.

As part of the designation as National Statistics, the Welsh Government should a) take steps to establish regular engagement with non-government users of

³⁹ <http://wales.gov.uk/topics/statistics/publications/healthengage/?lang=en>

⁴⁰ <http://wales.gov.uk/topics/statistics/publications/currentengage/?lang=en>

⁴¹ <http://wales.gov.uk/consultations/statistics/healthsurvey10/?lang=en&status=closed>

⁴² <http://wales.gov.uk/topics/statistics/about/data-collection/social/formreview/?lang=en>

⁴³ <http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=25355>

⁴⁴ <http://statswales.wales.gov.uk/index.htm>

PSS statistics; and b) review and document the user need for publishing *Immunisations*⁴⁵ (Requirement 1).

- 3.2 The Welsh Government has published some general information⁴⁶ about who uses the health and PSS statistics and what they are used for – this is repeated within the Quality Reports⁴⁷ accompanying most statistical outputs. The information provided about users and uses is generic and does not provide specific examples of how the statistics have been used by different types of users. The Welsh Government has enhanced the user information in the Quality Report for Waiting Times statistics to include more specific examples of users and uses while preparing *Waiting Times* for publication. We suggest that the Welsh Government publish more information about how the health and PSS statistics are used. We suggest that the Welsh Government refer to the types of use put forward in the Statistics Authority’s Monitoring Brief, *The Use Made of Official Statistics*⁴⁸ when documenting use.
- 3.3 The Welsh Government engages well with users of maternity and birth statistics. The NCCHD Steering Group and larger Expert User Group each comprise a mix of representatives from the Welsh Government, PHW, medical personnel, academia and voluntary organisations; the Maternity and Child Health Information Exchange Group – an informal group with representation from across the UK – meets twice a year and includes representatives from the Office for National Statistics (ONS), the Department of Health, Health and Social Care Information Centre (HSCIC), academics and voluntary organisations. These groups work to develop maternity and child health information and help share good practice. Minutes and papers from these meetings are available from the Welsh Government but are not published. We suggest that the Welsh Government publish relevant documentation from user and steering group meetings.
- 3.4 The Welsh Government has published⁴⁹ a revisions policy which explains how scheduled revisions are managed, and errors corrected. Data from NCCHD and PEDW, which are used to produce the maternities and births statistics, are regularly updated and revised. The Welsh Government receives a snapshot of PEDW each autumn and data from the April update of NCCHD. However, the releases do not indicate that the statistics for the previous periods may be revised as a result of the updated datasets. Statistics from the WHS are published as initial headline results in *WHS Initial Results* and a full report *WHS Annual Report* published three months later. It is not clear whether the statistics in the later full report have been subject to scheduled revisions; the Welsh Government told us that, to date, the statistics have not been revised. The PSS statistics are not subject to scheduled revisions but this is not clearly noted within the releases. As part of the designation as National Statistics the Welsh Government should make clear when scheduled revisions to the Health statistics and Personal social service statistics will be made⁵⁰ (Requirement 2). We suggest that the Welsh Government publish a statement in *WHS Annual*

⁴⁵ In relation to Principle 1, Practices 1, 2 and 5 of the *Code of Practice*

⁴⁶ <http://wales.gov.uk/topics/statistics/publications/healthusers/?lang=en>

⁴⁷ For example <http://wales.gov.uk/topics/statistics/publications/birthinfantquality/?lang=en>

⁴⁸ <http://www.statisticsauthority.gov.uk/assessment/monitoring/monitoring-briefs/monitoring-brief-6-2010---the-use-made-of-official-statistics.pdf>

⁴⁹ <http://wales.gov.uk/topics/statistics/about/compliance/revisions/?lang=en>

⁵⁰ In relation to Principle 2, Practice 6 of the *Code of Practice*

Report and PSS releases that makes it clear for users that the statistics are not subject to scheduled revisions.

- 3.5 A brief summary of the methods used to collect the data for the PSS statistics is provided in the releases. With the exception of *LACPR*, the methods for producing the statistics are not adequately explained – information is generally limited to listing the data collection form used. As part of the designation as National Statistics, the Welsh Government should expand and improve information about methods used to produce the PSS statistics.⁵¹ (Requirement 3).
- 3.6 All health statistical releases are supported by Quality Reports, which provide information about the methods used to produce the statistics and the quality of the final statistics in terms of relevance, coherence and comparability. The PSS releases provide little information about the quality of the statistics and are not accompanied by Quality Reports. For example, in *RASSC* it would be useful to discuss the potential effect that referrals made at the end of one year that are not assessed until the next may have on the statistics. As part of the designation as National Statistics, the Welsh Government should expand and improve information about the quality of the PSS statistics⁵² (Requirement 4).
- 3.7 The Welsh Government told us that the PSS statistics for Wales are, in part, comparable with those for England as they were historically produced by the same organisation. The Welsh Government has worked to keep concepts and definitions for the PSS statistics in line with those used in England as far as divergent policy allows. The degree of comparability with statistics for Scotland and Northern Ireland is less clear. The statistics team told us that it has produced reports for policy users presenting the statistics from the different administrations and, when possible, it has provided metadata to indicate where statistics might not be completely comparable; however, these explanations have not been published. As part of the designation as National Statistics, the Welsh Government should provide information about the comparability of the PSS statistics with those produced by the other UK administrations⁵³ (Requirement 5).
- 3.8 The health and PSS statistical publications adhere to the Welsh Government's published statement on confidentiality and data access⁵⁴. The Welsh Government told us that it also follows ONS's health statistics disclosure control policy⁵⁵. However, this disclosure control policy is not referred to or linked to in the statistical releases or Quality Reports. We suggest that the Welsh Government provide a link to ONS's health statistics disclosure policy in the health and PSS releases.
- 3.9 The health statistics Quality Reports provide brief descriptions of the strengths and limitations of each set of statistics. However, these lists are general; they do not identify strengths and limitations specific to the statistics and do not relate these to the use of the statistics. Similarly, the PSS releases do not

⁵¹ In relation to Principle 4, Practice 1 of the *Code of Practice*

⁵² In relation to Principle 4, Practice 2 of the *Code of Practice*

⁵³ In relation to Principle 4, Practice 6 of the *Code of Practice*

⁵⁴ <http://wales.gov.uk/topics/statistics/about/compliance/confidential/?lang=en>

⁵⁵ <http://www.ons.gov.uk/ons/guide-method/best-practice/disclosure-control-of-health-statistics/index.html>

provide any information about the strengths and limitations of the statistics in relation to how they may be used. As part of the designation as National Statistics, the Welsh Government should improve information about the strengths and limitations of the health and PSS statistics in relation to known and potential uses⁵⁶ (Requirement 6).

- 3.10 There is scope for the commentary in all the health and PSS releases to be improved:
- The commentary in the WHS reports describes the results of the survey but does not provide any context around the statistics. For example: the WHS reports do not speculate on potential drivers of change; and provide only limited time series analysis.
 - Most of the PSS releases provide only a Wales-level summary, despite referring to LAs – three reports refer to LAs in their title – and providing LA-level statistics. Commentary mainly describes increases and decreases against the previous period, often where longer time series are presented in the accompanying tables and charts.
 - Commentary in the patient datasets and primary care releases is also limited to describing increases and decreases, and differences between regions; there is little discussion of the drivers of any changes. Some useful commentary (for example in the prescriptions releases) is provided in footnotes or end notes rather than in the main part of the release.

The titles of the WHS releases do not adequately inform users of the subjects covered by the statistics. Furthermore, two WHS releases have the same title which could be confusing for users. There are few links or references between the releases. For example, the *NHS Dental Service in Wales (Quarterly)* does not explain that additional statistics and further analysis is provided in *NHS Dental Statistics (Annual)*; similarly, *LACRP* is a supplementary release to *RASSC* but no references are made between the two releases, other than to direct *LACRP* users to the fact that the statistics featured in the release have already been published. Overall, more could be done to make the suite of releases more coherent. As part of the designation as National Statistics, the Welsh Government should a) improve the commentary in the Health statistics and Personal social service statistics releases; and b) improve the titles of the WHS releases⁵⁷ (Requirement 7). We suggest that in meeting this requirement the Welsh Government should consider the points detailed in annex 2.

- 3.11 *WHS Annual Report* provides contact details for the Statistical Directorate of the Welsh Government and the names of the report's editors. However, the responsible statistician is not clearly indicated. We suggest that the Welsh Government indicate clearly the responsible statistician in the *WHS Annual Report*.
- 3.12 The Welsh Government publishes the health and PSS statistics through its StatsWales dissemination tool. With the exception of statistics from the WHS, it does not present the statistics alongside its health and PSS releases that encourage analysis and re-use; furthermore, the Welsh Government does not

⁵⁶ In relation to Principle 8, Practice 1 of the *Code of Practice*

⁵⁷ In relation to Principle 8, Practice 2 of the *Code of Practice*

make it clear from the releases what statistics are available through StatsWales. We suggest that the Welsh Government include in the releases a list of the statistics which are available through StatsWales.

- 3.13 The Welsh Government is developing a new National Outcomes Framework for social services in Wales and the statistics team told us that, as part of this work, the Statistics Directorate is conducting a review of the social services data required from LAs to produce its PSS statistics. Some data suppliers who responded to us as part of this Assessment commented that the Welsh Government collects data that they would not use for any other purpose, and that the guidance issued by the Welsh Government could be improved. As the statistical returns are based on aggregate administrative data held by LAs, there would appear to be scope for the Welsh Government to investigate the potential for accessing these data more directly, rather than collecting them through a survey, which in turn could help to improve the consistency of them. As part of the designation as National Statistics, the Welsh Government should investigate the feasibility of streamlining the collection of PSS data from LAs⁵⁸ (Requirement 8).
- 3.14 The WHS is conducted because much of the information it provides is not available from any other sources. However, the Welsh Government told us that some comparisons have been made between WHS data and administrative data from GP registers. We suggest that the Welsh Government publish the comparisons between the WHS and GP registers data.

⁵⁸ In relation to Protocol 3, Practice 3 of the *Code of Practice*

Annex 1: Suggestions for improvement

A1.1 This annex includes some suggestions for improvement to the Welsh Government's statistics on health and personal social services, 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 more information about how the health and Personal social services statistics are used (para 3.2). |
| Suggestion 2 | Refer to the types of use put forward in the Statistics Authority's Monitoring Brief, <i>The Use Made of Official Statistics</i> when documenting use (para 3.2). |
| Suggestion 3 | Publish relevant documentation from user and steering group meetings (para 3.3). |
| Suggestion 4 | Publish a statement in the <i>WHS Annual Report</i> and Personal social services releases that makes it clear for users that the statistics are not subject to scheduled revisions (para 3.4). |
| Suggestion 5 | Provide a link to ONS's health statistics disclosure policy in the health and Personal social services releases (para 3.8). |
| Suggestion 6 | Consider the points detailed in annex 2, in seeking to improve the statistical releases (para 3.10). |
| Suggestion 7 | Indicate clearly the responsible statistician in <i>WHS Annual Report</i> (para 3.11). |
| Suggestion 8 | Include in the releases a list of the statistics which are available through StatsWales. |
| Suggestion 9 | Publish the comparisons between the Welsh Health Survey and GP registers data (para 3.14). |

Annex 2: Compliance with Standards for Statistical Releases

- A2.1 In October 2010, the Statistics Authority issued a statement on *Standards for Statistical Releases*⁵⁹. While 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 health and personal social services statistics produced by the Welsh Government, 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.
- A2.3 Annex 2 presents the findings for the Health and PSS releases grouped according to the headings outlined in section 1.1.1, namely:
- Welsh Health Survey;
 - Patient datasets
 - Primary care statistics; and
 - Personal social services (PSS) statistics.
- A2.4 Annex 2 does not comment on *Waiting Times* as the Assessment team analysed the release against the Standards for Statistical Releases and provided comments to the Welsh Government, so that it was able to address them in the published release.

Appropriate identification of the statistics being released

Welsh Health Survey

- A2.5 The titles of the releases are similar to the survey's name and do not explain what the statistics provide information about. The Welsh Government has two releases with the same title – *Welsh Health Survey 2010*. Release titles clearly indicate the period to which the latest statistics relate. The coverage of the release is clearly stated in the first paragraph, as is the content.
- A2.6 *WHS Initial Results*, *WHS Annual Report* and *WHS First Release* make the frequency of release clear. *WHS Local Results* and *WHS Mental Health* do not include a clear statement on the frequency of publication.
- A2.7 The releases use the standard headings, formats and logos. The name of the responsible statistician is included in all releases, with the exception of the *WHS Annual Report*.
- A2.8 *WHS Annual Report* and *WHS Local Results* clearly convey the contents of the release. However, the other WHS releases do not. It is implied the latest figures are new but not stated clearly in the releases.

⁵⁹ <http://www.statisticsauthority.gov.uk/news/standards-for-statistical-releases.html>

Patient datasets

- A2.9 *Births in Wales* does not clearly convey that the statistics are only about live births to Welsh residents. This is further confused by the data source holding data on all births within Welsh hospitals. There is no explanation of how births to Welsh residents in English hospitals are counted, or conversely, how births to English residents in Welsh hospitals are excluded. Similarly, the title of *Maternity Statistics* does not convey that the statistics relate only to babies delivered in hospitals, although this is explained in the first paragraph. The second paragraph quantifies the coverage as 96 per cent of births. *Immunisation* adequately describes the coverage and time period.
- A2.10 *Births in Wales* and *Maternity Statistics* provide a statement on the frequency of release; the frequency of *Immunisations* is implied. All releases provide an indication of the next update to the statistics on the front page.
- A2.11 *Immunisations* provides a summary of the subjects covered within the release but *Births in Wales* and *Maternity Statistics* do not. None of the releases includes a list of tables and charts.
- A2.12 The latest statistics, revisions and new analyses are clearly identified in all releases.

Primary care statistics

- A2.13 Only *CDS* and *Prescriptions Dispensed* clearly indicate the coverage and time period to which the statistics relate. *NHS Dental Statistics (Annual)* does not specify that the statistics relate only to Wales, and *Prescriptions by GPs* does not clearly indicate that the statistics relate to 'items dispensed' rather than 'prescriptions written', for example.
- A2.14 *NHS Dental Services in Wales (Quarterly)* and *CPS* explicitly state the frequency of the release; the other releases imply the frequency of release. The date of the next update is provided at the bottom of the front page of each release.
- A2.15 Some releases provide a summary or table of contents – for example, the *Dental Quarterly and Annual* releases; however, the summary sentence provided in *CPS* is too general. Some releases, for example *Ophthalmic Statistics*, do not provide any explanation of what statistics are provided in the release.
- A2.16 Only *NHS Dental Services in Wales (Quarterly)* clearly indicates that the statistics are provisional; the *NHS Dental Statistics (Annual)* release does not clearly state that the statistics are the combined, finalised statistics, or whether any of the statistics have been revised.

Personal social services (PSS) statistics

- A2.17 The titles of the PSS releases give the period to which the statistics relate, but not in a standard manner. *LARPD at 31 March 2011* and *LASS March 2011* both present the position at 31 March. The titles of the PSS releases do not

make it clear that the geographical coverage is Wales. While the opening statement of each release confirms the coverage, only *LACPR* includes this in the title.

- A2.18 Each release gives a brief outline of its content, although the outlines do not contain details of the subjects discussed and contents lists are not provided. Releases include links to StatsWales indicating that more detailed statistics for individual LAs are available to download. However, the tables are not listed in the release or on the release's webpage and are difficult to locate.
- A2.19 *LACPR* indicates clearly that the release may contain some revised estimates. No reference is made to revisions in the other releases, or to the fact that some statistics are not subject to revision.

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

Welsh Health Survey

- A2.20 *WHS Annual Report*, *WHS First Release* and *WHS Mental Health* each include a helpful summary of the contents within the key points section of the releases; *WHS Initial Results* and *WHS Local Results* do not include a summary of their content. The language used in the releases is mostly straightforward with some classifications and technical terms explained in the text, but not all. The *WHS Annual Report* includes a helpful glossary.
- A2.21 *WHS Local Results* does not include commentary. Commentary in the remaining *WHS* releases is demonstrably consistent with the statistics. The commentary in the releases does not include the context to the figures, for example, speculating on the drivers for change, or comparisons with other countries and internationally – a note explaining that the statistics may not be comparable with other UK countries is included in the Notes section of the releases, with the exception of *WHS Mental Health*. The *WHS* releases do not include a statement of why the statistics are important. The releases include a section on uses which identifies some generic users and use.

Patient datasets

- A2.22 All releases provide summary bullet points. The bullet points in *Births in Wales* provide only point-in-time statistics and do not provide any information about trends, for example in breastfeeding and home births.
- A2.23 The language within all the releases is straightforward. Where technical terms are used, for example in *Maternity Statistics*, these are explained within the text. In *Immunisations* the different types of immunisations are clearly explained.
- A2.24 The commentary within *Maternity Statistics* and *Births in Wales* is limited to describing increases and decreases. There is no discussion of potential reasons for trends shown, for example the increase in home births or the reduction in length of hospital stay, or for regional differences in the percentage

of deliveries that are as a result of the mother being induced. Table 6 in *Births in Wales* provides time series of live births by selected indicators, for example place of birth, mother's age and gestational age but there is no commentary for these statistics; some other charts do not seem appropriate given the small figures and population bases, for example Chart 6 (under 16s and 45 or over categories). In *Maternity Statistics* the map of maternity units is poorly presented. Commentary in *Immunisations* provides good context around different immunisations, for example Pertussis and MMR⁶⁰. Notes at the end of the release provide additional information which would be useful in the main commentary.

Primary care statistics

- A2.25 Each release provides key bullet points; however, most provide only point-in-time statistics rather than comparisons with previous periods or analysis of trends. In *Prescriptions by GPs*, the bullet points referring to comparisons with the rest of the UK are not presented in any depth within the release.
- A2.26 The language in the releases is straightforward and there are some good examples of technical terms being explained within the text, for example 'Units of Dental Activity' in *NHS Dental Statistics (Annual)*, 'prescription items' in *Prescriptions by GPs* and 'Medicine Use Reviews' in *CPS*. Most definitions, however, are explained in notes at the end of the release. There are some terms and acronyms which are not adequately defined, particularly in *Prescriptions by GPs*.
- A2.27 Commentary is limited to descriptions of increases or decreases and differences between regions in most patient datasets releases. There is little discussion of potential drivers of change, for example the increase in pharmacies providing 'stop smoking' services or the rapid decrease in the number of private eye tests partially funded by the NHS. Some useful commentary in the two *Prescriptions* releases is provided in footnotes. *NHS Dental Services in Wales (Quarterly)* contains very little commentary; there is only a presentation of the statistics for that quarter with no discussion of period-on-period changes or other analysis. The titles of two charts (Charts 7 and 8) in *NHS Dental Statistics (Annual)* do not reflect the contents and the time series are poorly presented.

Personal social services (PPS) statistics

- A2.28 Each release highlights key results on its first page together with a headline chart. The key points are mostly point-in-time statistics or comparisons with the previous year. All the releases include a glossary of terms or define terms as part of the background notes. RASSC begins each section of the release by defining the relevant key terms. These definitions are supplemented by a general glossary of terms at the end of the release.

⁶⁰ Pertussis is commonly known as whooping cough; MMR is the combined measles, mumps and rubella immunisation

- A2.29 *LASS* presents statistics based on either numbers of staff or whole-time equivalents (WTE) or, in some cases, both. Whilst WTE is defined in the release, there is no guidance on the best use of the different measures.
- A2.30 The terminology used in *ASSA* is not consistently applied. For example, 'residential placements' is used in the headline chart to represent the sum of 'residential placements in care homes' and 'nursing placements in care homes'.
- A2.31 With the exception of *LACPR*, the commentary in the releases focuses only on the summary picture for Wales, with the detailed LA statistics made available via *StatsWales*. Most of the commentary within the releases is restricted to numbers and proportions for the latest period and increases and decreases compared with the previous year. *LARPD* presents time series back to 2002 but only comments on movements in the latest year. *LASS* presents tables for 2009 to 2011, charts for 2008 to 2011 and refers to 2006 in the commentary.

Use language that is impartial, objective and professionally sound

Welsh Health Survey

- A2.32 Sampling and non-sampling error are described briefly in the notes section of the *WHS* releases and confidence intervals are presented within releases – usually in annexes, but not included with the tables or charts. *WHS Mental Health* discusses how error might affect the statistics, but the other releases do not.

Patient datasets

- A2.33 The text in patient datasets releases is impartial and descriptive statements are demonstrably consistent with the statistics.
- A2.34 Descriptions of proportions, changes and trends are professionally sound. There is no discussion of non-sampling variability in the releases and the coverage is not adequately defined. The Key Quality Information within the releases provides brief descriptions of the data sources. The Quality Reports provide further information about methods and data sources.

Primary care statistics

- A2.35 The text in the releases is impartial and most descriptive statements are consistent with the statistics. In *NHS Dental Statistics (Annual)* time series graphs are presented but there is no supporting commentary; and in *NHS Dental Services in Wales (Quarterly)*, key results compare with previous periods but no data tables or charts of time series are presented.
- A2.36 None of the releases provide a discussion of non-sampling errors and the effects these may have on the statistics. In *NHS Dental Statistics (Annual)* grossing is discussed for Clinical Dental Activity statistics but it is not clear why this is needed or what the implications are. This section also mentions potential recording errors but these are not quantified or explained well and there is no discussion of the trends shown in Net Ingredient Costs in *Prescriptions Dispensed*. In *Prescriptions by GPs*, Chart 2 presents items dispensed per

head of population, with two different populations used as the denominator. However, there are fewer items dispensed per head for the smaller population. This is not explained. Some statistics in *Ophthalmic Statistics* are based on a sample but this is only noted in table footnotes. There is no discussion of sampling errors and no confidence intervals or standard errors are published.

Personal social services (PSS) statistics

A2.37 The text is impartial and objective throughout and does not endorse or criticise government policy.

A2.38 There is scope to improve the tables and charts across the PSS releases. Other minor issues include inconsistent referencing of time periods, missing and incorrect titles. Poor use of indentation in Table 2 of *RASSC* means that ‘the number of days taken to complete’ initial assessments within seven working days could be mistaken as being the number of days taken to complete all assessments. Chart 2 and Table 3 of *LASS* both refer to staff with listed qualifications at 31 March and appear to be referencing the same data but the numbers quoted are different. The total number of staff quoted in the chart and table for 2011 are inconsistent and there is no explanation to support this.

Include information about the context and likely uses

Welsh Health Survey

A2.39 *WHS Local Results* does not include a statement about users and uses. The remaining WHS releases include a general statement about users and uses at the end of each release. *WHS Annual Report* and *WHA Mental Health* describe the operational or policy context to the statistics; however, the remaining releases do not discuss targets or policy context. The WHS releases describe the use of the statistics but do not comment on the quality and reliability of the statistics in the relation to these and other uses.

Patient datasets

A2.40 *Births in Wales* provides an explanation of why the statistics are published but does not discuss any policy context. The release also explains how the data source is used for other purposes, for example by the All Wales Perinatal Survey conducted by Cardiff University⁶¹. *Maternity Statistics* and *Immunisations* provide a general statement on users and uses. *Immunisations* mentions targets within the commentary but there is no further explanation provided.

A2.41 Useful information is presented in *Births in Wales* to explain the three different births statistics publications and when it is appropriate for each to be used. A link to births registrations statistics published by ONS is provided in *Maternity Statistics* but there is no explanation of when it is appropriate to use each source. There is no discussion of the quality and reliability in relation to the

⁶¹ <http://medicine.cf.ac.uk/awps/>

potential uses of the statistics published in *Immunisations*. The release provides a link to the full report on childhood immunisations published by PHW.

Primary care statistics

A2.42 None of the releases provide any information about why the statistics are collected such as a policy or operational context. No targets are mentioned in any of the releases. A generic list of users and uses is provided in the quality reports but these do not help to contextualise the statistics. The releases and the supporting quality reports do not provide any information about the strengths and limitations of the statistics in relation to potential uses.

Personal social services (PSS) statistics

A2.43 All of the releases except *LACPR* provide brief information about the potential users and uses of the statistics. *LACPR* presents helpful contextual information about the purpose of the child protection registers but does not clearly describe the uses of the published statistics.

Include, or link to, appropriate metadata

Welsh Health Survey

A2.44 *WHS Annual Report* contains comprehensive information about the methods used to produce the statistics and provides links to technical documents which describe the methods in detail. *WHS Annual Report* includes a section describing comparability with other UK countries, and links to additional documentation. The remaining WHS releases do not include links to equivalent statistics for the other UK countries or explain how comparable they are.

A2.45 Where methodological changes have taken place, the effects on the statistics have not been quantified. *WHS Initial Results* includes provisional results, but these are not clearly distinguished – the Welsh Government told us that the statistics, although provisional, have never been revised. The WHS releases do not make clear which revisions policy apply to the statistics.

Patient datasets

A2.46 A brief description of the data sources is provided in the Key Quality Information, and *Immunisations* provides coverage rates of the flu immunisation data. Quality Reports have been written for and *Immunisations*, *Maternity Statistics and Births in Wales* which provide further information about sources, methods and the quality of the statistics. However, clear links need to be provided to them within the releases.

A2.47 Links to other statistics for other UK countries are provided in *Maternity Statistics* but there is no explanation of how comparable they are. *Births in Wales* and *Immunisations* provide links to other UK statistics in the Quality Reports. Information about comparability is provided in the associated Quality Reports.

A2.48 There have been no changes to methods or classifications for any of the statistics in the patient datasets releases. There is no indication that the statistics are subject to regular revisions. However, clarification regarding revisions could usefully be provided in *Maternity Statistics* as the source data is updated regularly and there is a note within the release that the validation of these statistics has improved in recent years.

Primary care statistics

A2.49 The information provided within the releases about data sources, methods and quality is relatively brief. However, supporting Quality Reports are available which provide more detailed information. Similarly, brief information about comparability with other UK countries is provided in most of the patient datasets releases, with further information provided in the Quality Report. As many of these Quality Reports were produced after the most recent statistical release, links are not currently provided within some of the releases. There is no information about methods or quality provided for the ophthalmic statistics produced from sampled data. *Prescriptions by GPs* and the supporting Quality Report include a statement about the quality of the source data (99.2 per cent accurate) but there is no explanation of what this means, how it is measured or why inaccuracies might occur.

A2.50 There are two changes affecting the Net Ingredient Cost statistics in *Prescriptions Dispensed*. However, there are no numerical comparisons provided to quantify the impact of the changes, for example the impact of medicines from Category A now being categorised in Category M.

A2.51 *Prescriptions Dispensed* clearly states that statistics per head of population are provisional until mid-year estimates for the appropriate year are published. However, *Prescriptions by GPs* also uses mid-year estimates for per head of population statistics but there is no indication that these have been or will be revised, or which year's estimates have been used (statistics relate to financial years). Similarly, *NHS Dental Services in Wales (Quarterly)* clearly states that the statistics are provisional until being finalised in the annual release, but *NHS Dental Statistics (Annual)* does not explain that revised quarterly statistics are used to create the annual figures, or whether the annual figures themselves are subject to scheduled revisions.

Personal social services (PSS) statistics

A2.52 *LACPR* presents information about sources and definitions and provides guidance to users where care is needed in interpreting the statistics. *LARPD* advises on a potential break in the time series due to a change in data collection methodology in 2007, though the impact has not been quantified. With these exceptions, the releases briefly describe the sources but any information about the quality of the statistics is limited to describing shortfalls in response to data collections.

A2.53 All releases provide links to comparable statistics for other parts of the UK. Links are also provided, in some cases, to other personal social services statistics for Wales.

Annex 3: Summary of assessment process and users' views

A3.1 This assessment was conducted from January to June 2012.

A3.2 The Assessment team – Rachel Beardsmore, Donna Livesey and Gary Wainman – agreed the scope of and timetable for this assessment with representatives of the Welsh Government in January. The Written Evidence for Assessment was provided on 17 February. The Assessment team subsequently met the Welsh Government during April 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 19 responses from the consultation of users and suppliers. The respondents were grouped as follows:

| | |
|--------------------------|----|
| Welsh Government | 2 |
| Academia | 2 |
| Non-profit organisations | 2 |
| Local government | 1 |
| Suppliers | 12 |

A3.5 Users were generally content with the quality, presentation and timeliness of the statistics and were complimentary about the helpfulness and responsiveness of the statistical team. One user of *Maternity Statistics* felt that it would aid comparability with other statistics if the definition of 'normal deliveries' could be brought into line with that proposed by the Maternity Care Working Party⁶².

A3.6 Suppliers of health statistics were broadly satisfied with the data collection arrangements and reported good relations with the Welsh Government. Three suppliers of data for *LARPD* reported that the information collected is not used for any other purpose. Some suppliers of the data used to produce the PSS statistics also felt the guidance could be improved to support common interpretation of the requirements.

Key documents/links provided

Written Evidence for Assessment document

⁶² <http://www.rcog.org.uk/womens-health/clinical-guidance/making-normal-birth-reality>

