

IMC: 8780

Andrew Dilnot CBE  
Chair, UK Statistics Authority  
1 Drummond Gate  
LONDON SW1V 2QQ

Richmond House  
79 Whitehall  
London  
SW1A 2NS

Tel: 020 7210 3000  
healthsofs@dh.gsi.gov.uk

8 November 2012

*Dear Andrew,*

## **REVIEW OF THE ACCESSIBILITY OF OFFICIAL HEALTH STATISTICS**

Thank you for your letter of 17 October drawing my attention to the recent UK Statistics Authority review of the accessibility of official health statistics.

I am pleased that this report recognises the richness of health data, the role health statistics play in the management of health services and their wider relevance within a democratic system.

This report draws attention to those organisations producing relevant figures but not currently recognised as producers of Official Statistics. You will be aware, of course, of statutory changes for organisations in the NHS in England, arising from the Health and Social Care Act 2012. Officials in my Department are already engaged with their colleagues in the Cabinet Office who are reviewing the secondary legislation that list Official Statistics producers, with a view to ensuring that appropriate organisations in the new architecture are properly listed. Many of the English bodies mentioned in the report are Public Health Observatories and these will be incorporated into Public Health England (PHE), which will be an Executive Agency of the Department of Health.

My Department, and the government as a whole, have been keen advocates of increasing public sector transparency since our first day in office. This drive for transparency culminated in the information strategy published in May this year. The strategy, *The Power of Information*, advocates:

“a culture of transparency, where access to high-quality, evidence-based information about services and quality of care ... is openly and easily available to us all.”

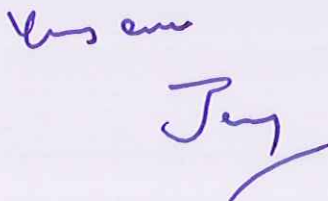
The role of the Health and Social Care Information Centre will be important as a focal point for national data. In more detail, the strategy envisages a single comprehensive portal for health data. In recent years, the Government has required private providers delivering services to NHS patients to produce and report data to NHS standards and the NHS standard contract reflects this. I believe these initiatives, in concert, go some way to addressing the points raised in your letter.

There is of course a limit to what government can, and should do. Moves to greater transparency and openness will open up opportunities for other organisations to re-present data in innovative ways to engage patients and the public.

Within the UK, responsibility for health policy has been devolved and it is only right and proper that the different governments pursue their own priorities to best meet the needs of their populations. Of course, this does place a natural limit on the comparability that is achievable between the different information systems of the different administrations. The decision by the Office for National Statistics to cease production of the *UK Health Statistics* compendium perhaps reflects these changes.

This natural limit notwithstanding I am happy for the UK Statistics Authority to set up a working group to look further into the issue of comparability of the different data systems with a view to bringing forward proposals. In order to best focus this work on the areas where alignment and improvement might be possible we would suggest that it may be helpful to start with a small number of key topics, driven by user concerns. I will ask officials to consider the appropriate representatives for such a group.

I am copying this letter to Alex Neil MSP, Lesley Griffiths AM, Edwin Poots MLA, Stephen Dorrell MP and Jil Matheson.

A handwritten signature in blue ink, appearing to read 'Jery' with a long horizontal stroke extending to the right.

**JEREMY HUNT**