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## Director General for Regulation

Chris Wormald  
Permanent Secretary  
Department of Health  
Richmond House  
79 Whitehall  
London SW1A 2NS

01 November 2016

Dear Permanent Secretary,

We have just replied to a public query relating to two statements made in a speech by the Secretary of State for Health's speech to the Conservative Party Conference. I attach my reply to the correspondent in Annex A.

We wanted to bring this to your attention not because of the specific issues in themselves – we have been able to identify the source used by the Secretary of State, as you can see from the attached reply. Instead, we wanted to highlight the opportunity for the Department to enhance the trustworthiness, quality and value of the statistics produced in this area.

As you know, we consider that it is important that any statistics used by Government, whether or not sourced from an Official Statistics publication, are accessible to the public, produced using sound methods, upfront about limitations, and are used accurately. My team has explored with NHS England and the Department the source of the statements concerned. We learnt that the statistics quoted are not sourced from an Official Statistics publication, but from a presentation made in 2015 at a health conference<sup>1</sup>. Data relating to these statistics are also presented in the NHS Scorecard<sup>2</sup> and tables published by NHS England<sup>3</sup>. We think it is difficult for the public to assess any numerical information relating to NHS Trust standards, as there is very little contextual or aggregated information accessible in the sources mentioned.

We therefore encourage the Department, with NHS England, to consider publishing statistics and data relating to NHS Trust standards<sup>4</sup> in ways that comply more fully with the Code of Practice for Official Statistics. We consider that greater attention should be paid to a description of methods, including the approach to sampling; quality assurance; a balanced description of findings; frankness, in terms of setting out any limitations of the approach; and accessibility – that is, that the public can

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<sup>1</sup> [www.healthcareconferencesuk.co.uk/news/newsfiles/deborah-williams\\_1240.pdf](http://www.healthcareconferencesuk.co.uk/news/newsfiles/deborah-williams_1240.pdf)

<sup>2</sup> [www.nhs.uk/service-search/scorecard/results/1015?metricGroupId=536&radiusInMile=0&recordsPerPage=10](http://www.nhs.uk/service-search/scorecard/results/1015?metricGroupId=536&radiusInMile=0&recordsPerPage=10)

<sup>3</sup> [www.england.nhs.uk/wp-content/uploads/2015/10/7d-services-primary-pub.xlsx](http://www.england.nhs.uk/wp-content/uploads/2015/10/7d-services-primary-pub.xlsx)

<sup>4</sup> NHS Digital already publish Official Statistics (with the experimental status) relating to some, but not all of the NHS Trust standards, in the "Seven-day Services: England" bulletin.

access the aggregated statistics and underlying data easily.

More broadly, as you know, the Authority is keen to support improvement in health and care statistics in England – not for its own sake, but to maximise the trustworthiness, quality, and public value of health and care statistics. We consider that, in cases like this, adoption of the principles of the Code of Practice as set out above would help deliver this ambition. Adopting the principles of the Code would help ensure that users of information, including the Secretary of State, policy makers and the wider public, have access to comprehensive and useful information to support better decisions.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Ed Humpherson', written in a cursive style.

Ed Humpherson

## Annex A

Dear xx,

Thank you for your email on 6 October 2016 relating to the two statements<sup>5</sup> made in the Secretary of State (SoS) for Health's speech to the Conservative Party Conference, 4<sup>th</sup> October 2016. You have asked the Authority to comment on whether the statistics quoted in the speech are incorrect.

You have helpfully provided the data tables<sup>6</sup> that appear to be the basis of the figures used in the SoS speech. Whilst the figures in the table could be derived by a member of the public as they have been taken from published data, the accompanying material presented in these spreadsheets did not mention what criteria each NHS Trust would need to meet to be of the necessary standard. I have therefore concluded that in general these tables, on their own, are of only some use to the public.

My team has also explored, with NHS England and the Department of Health, whether there were alternative published sources to be considered alongside these data tables. They directed my team to a presentation given at a health conference in 2015 by an NHS England official<sup>7</sup>, and also the My NHS scorecard<sup>8</sup>. We found that the SoS quoted figures that matched, and were sourced from, the analysis presented by NHS England at the health conference (see Annex 1). Whilst the presentation includes further analysis on the clinical standards in question, as you noted, there are also other ways to look at these data to establish a more complete picture of the 7-day a week service provided by NHS Trusts. Looking at the wider picture is something we think the Department and NHS England could consider in future publications containing analysis relating to these clinical standards.

Furthermore, within the published slides there is little information on the strengths and limitations of the data and subsequent analysis. Without this information it is difficult for users to assess whether the statistics are robust enough for their intended use. I have noted that slightly more information can be found behind the indicators in the My NHS Scorecard. However, users could benefit from more coherent information surrounding methods, quality, and interpretation of these

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<sup>5</sup> *"One says that whatever day of the week it is, highly vulnerable patients should be checked by a consultant twice a day. That's because it's vital to spot quickly if someone deteriorates. Pretty important. But when we last checked that happens in just one in twenty hospitals.*

*Another standard says that whatever day of the week, patients should be checked by a senior doctor within 14 hours of being admitted. Again pretty vital for patients. But again when we checked, happening in just one in ten hospitals."*

<sup>6</sup> [www.england.nhs.uk/wp-content/uploads/2015/10/7d-services-primary-pub.xlsx](http://www.england.nhs.uk/wp-content/uploads/2015/10/7d-services-primary-pub.xlsx)

<sup>7</sup> [www.healthcareconferencesuk.co.uk/news/newsfiles/deborah-williams\\_1240.pdf](http://www.healthcareconferencesuk.co.uk/news/newsfiles/deborah-williams_1240.pdf)

<sup>8</sup> [www.nhs.uk/service-search/scorecard/results/1015?metricGroupId=536&radiusInMile=0&recordsPerPage=10](http://www.nhs.uk/service-search/scorecard/results/1015?metricGroupId=536&radiusInMile=0&recordsPerPage=10)

statistics.

Overall, the information available to the general public relating to these statistics appears fragmented. These statistics are not sourced from an Official Statistics publication, and therefore fall outside the formal remit of the Code of Practice for Official Statistics. I have written to the Permanent Secretary at the Department of Health to ask him to consider the benefits of complying with the general principles of the Code of Practice, as I believe that such compliance would help enhance the trustworthiness, quality, and public value of these statistics. This is especially important as it is clear that there is continuing public interest in the issue of 7-day services and the standards they must meet.<sup>9</sup>

Kind regards,

A handwritten signature in black ink, appearing to read 'Ed Humpherson', written in a cursive style.

Ed Humpherson

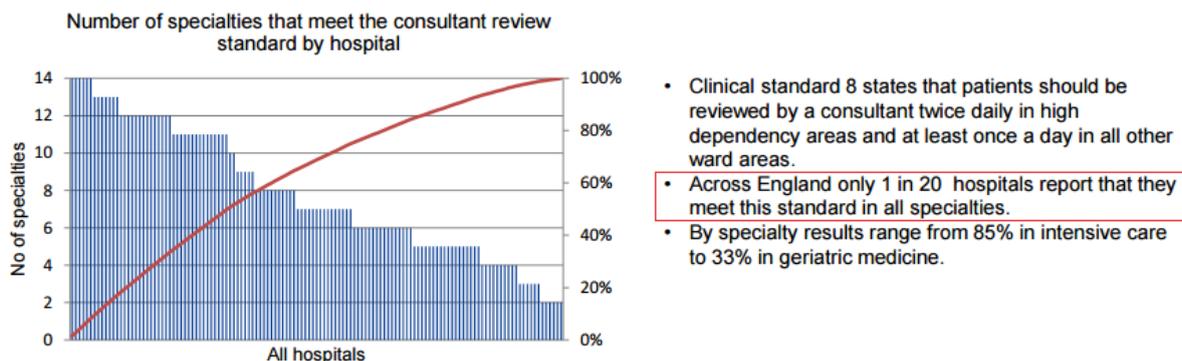
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<sup>9</sup> It is worth noting that NHS Digital already publish Official Statistics (with the experimental status) relating to some, but not all of the NHS Trust standards, in the "[Seven-day Services: England](#)" bulletin.

## Annex 1

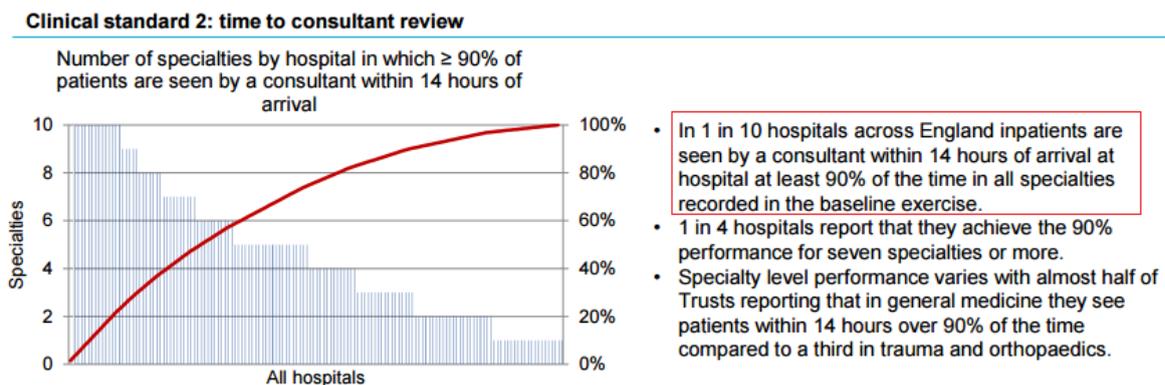
**Part 1 of quote from SoS (emphasis added to the statistic in question):** “One says that whatever day of the week it is, highly vulnerable patients should be checked by a consultant twice a day. That’s because it’s vital to spot quickly if someone deteriorates. Pretty important. But when we last checked that happens in just **one in twenty hospitals.**”

**Source of the statistic in question (box added to the statistic in question):**



**Part 2 of quote from SoS (emphasis added to the statistic in question):** “Another standard says that whatever day of the week, patients should be checked by a senior doctor within 14 hours of being admitted. Again pretty vital for patients. But again when we checked, happening in just **one in ten hospitals.**”

**Source of the statistic in question (box added to the statistic in question):**



Source (page 10 and 11): [http://www.healthcareconferencesuk.co.uk/news/newsfiles/deborah-williams\\_1240.pdf](http://www.healthcareconferencesuk.co.uk/news/newsfiles/deborah-williams_1240.pdf)