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**Director General for Regulation**

Richard Kingston  
(By email)

30 June 2017

Dear Mr Kingston

**Delayed discharge statistics published by NHS Scotland's Information Services Division (ISD)**

Thank you for [contacting us](#) about delayed discharge statistics published by ISD, and thank you also for your patience in waiting for our reply.

The Code of Practice for Official Statistics requires the commentary within statistical publications to be objective and impartial. This helps users of statistics to regard the organisations publishing statistics as trustworthy.

We consider that the delayed discharge statistics are of significant public interest, and with the Scottish Government committing to reduce delayed discharges, there is likely to be specific interest in trend data. There are also seasonal increases and decreases. So it is important for ISD to present fairly changes over both the short and long term.

You have highlighted your concern that ISD have been inconsistent in reporting increases and decreases, changing the content of their main points over time.

As ISD stated in their response to you they take the need to be impartial and objective seriously and have welcomed your comments on how bias can easily slip in to the commentary. Last week my team met with the Head of Profession for Official Statistics at ISD and discussed the process behind confirming main points in the commentary before publication. The core of the process is that a group of senior ISD staff review the summaries before publication. The aim of this review is to make sure that the commentary accompanying the statistics is kept useful, fresh and interesting for users. This approach is in line with the Code of Practice and the Government Statistical Service guidance on [writing about statistics](#), the thrust of which is to avoid mechanically inserting new figures into standard, unchanging text and instead ensuring that commentary provides insight to users.

My team emphasised the need to check for objective and impartial commentary in all their publications. Their Head of Profession reassured us that ISD staff were committed to doing this and that he would review the guidance given to their statisticians.

While we are reassured by ISD's approach, we can also see how their focus on different movements in different publications might create an impression of biased selectivity. We have therefore asked ISD to consider whether it could keep some of the bullet points on trends in a standardised format, and therefore highlight movements in either direction. In this way ISD can mitigate the risk of appearing to select positive changes for comment.

ISD restated their commitment to presenting consistent summary information. They pointed out that, due to changes in the definitions from July 2016, it had not been possible to provide comparable trend information. Since April 2017, ISD have included a standard graph

displaying the trends since July 2016 (as in the most [recent publication](#)) and have committed to including this in every publication to avoid focus solely on month to month changes. Comparable year on year data will be available from August 2017.

Taking together ISD's process, their commitments to impartial and objective commentary and their undertaking to include a standard trend graph, I am reassured that ISD is appropriate. Nevertheless I have also asked my health and social care team to look at a few more ISD publications to offer feedback, if required, on Principles 2 and 8 of the Code of Practice.

Meanwhile I encourage you to always contact ISD with your thoughts on their publications – it is important for statisticians to be in dialogue with their users. But of course please let us know if you have any further concerns.

I have copied in Scott Heald, Head of Profession at ISD.

Yours sincerely



Ed Humpherson  
Director General for Regulation