

Editorial

It seems appropriate to mark this 60th year of the National Health Service with an edition of *Radical Statistics* devoted to current debates in health policy. The articles presented reflect strongly the themes of equity, equality, access and accountability. Despite talk of taking politics out of health care, the NHS remains as politicised as ever. Of particular contemporary political resonance, several articles address concerns surrounding the reconfiguration of hospital services and the shifting balance of the mixed economy in health and social care provision. All of the articles point to the importance of the role of academics in challenging the ways in which health care data are constructed managed and presented. Because so much of the debate around politically controversial decisions in health care is conducted in highly technical terms, statisticians prepared to alert others to flawed and misleading claims have a critical contribution to make in holding policy makers to account.

Unsurprisingly, some of the articles reflect a preoccupation with one of the principal values underpinning the NHS: equity. The articles by Sheena Asthana and Alex Gibson and Jane Galbraith examine the shortcomings of the formula used to determine funding allocations to Primary Care Trusts. Since this accounts for around 80% of total NHS funding, the significance to equity of flaws in the formula and its implementation should not be underestimated and Sheena Asthana and Alex Gibson propose an alternative approach.

The articles by Christine Jones and Mark Johnson examine a different aspect of equity: equality of access to health care by different ethnic groups and the use of ethnic monitoring in health services. Mark Johnson discusses the evolution of ethnic monitoring from the 1990s onwards and points to the continuing variation in the completeness of monitoring across different regions and health datasets. Christine Jones focuses on the particular instance of ethnic monitoring of the use of physiotherapy services at Parkside Health Authority during the 1990s.

Serious concerns about accountability and transparency are raised in a group of articles in this edition on hospital reconfiguration.

Each of these articles suggests problems in the way in which evidence is deployed in hospital reconfiguration processes. Sean Boyle and Roger Steer, who act as expert advisors to local government health overview and scrutiny committees, condemn the poor standards of public consultation when local health organisations are proposing to close highly valued local services. Alison Macfarlane points out that there has been an untested assumption that larger hospital maternity units are better than small ones and that this is leading to a drive for reconfiguration and amalgamation to provide 24 hour consultant care despite the fact that no attempt has been made to assess whether there is any evidence for this. David Byrne and Keming Yang criticise the absence of proper statistical procedures and the crude misuse of data surrounding the ‘clinical case’ for restructuring hospital services. Janet Shapiro draws our attention to an example of statistical evidence being used to support restructuring proposals; there are clearly doubts as to whether the graphs presented in the glossy Public Consultation document relating to Lord Darzi’s Review of the NHS in London support their argument.

The articles by Demi Patsios and Sally Ruane explore developments in the mixed economy of health and social care. Demi Patsios examines the prevalence and incidence of the number of older people reporting Activities of Daily Living limitations and the extent to which there has been an increase in the provision of informal care following the reduction in formal care after the NHS and community Care Act of 1990. Sally Ruane examines the introduction of the commercial sector into ‘NHS’ provision of elective care through independent sector treatment centres and draws attention to the difficulties faced by policy analysts in obtaining even quite basic information about these centres.

There are two Book reviews. We hope also to receive unsolicited reviews of books of interest to the Radical Statistics Group.

We offer grateful thanks to Jay Ginn for her assistance with proof reading and to Melanie Schöllhammer for her incisive cover design.

Finally, the editors of Radical Statistics wish to express their support for Denise Lievesley in her dispute with the Department of Health. Reports on the employment tribunal hearing in the

Financial Times, January 15 2008, and E-Health Insider, January 17 2008, have been distributed via the Radical Statistics email list.

Denise became chief executive of the Information Centre in 2005 when negotiations to form a joint venture, Dr Foster Intelligence, with a private company were far more advanced than she had been led to believe.

In her affidavit she says “I felt I had no effective alternative but to work very hard on modification of the joint venture agreement to achieve the best outcome for the public sector.”

The Financial Times writes “Prof Lievesley has gone to the employment tribunal to try to revoke a confidential deal under which she received a pay-off in exchange for her silence about the circumstances surrounding her departure from the Information Centre in July.

“She says the agreement was unfair as the health department failed to point out in public that her exit was unconnected with the criticism of the Dr Foster deal made in the Commons public accounts committee report a few weeks later.”

Denise is well-known and respected within *Radical Statistics*; she was one of the judges for the Biennial Critical Essay Competition in 2006. While members might regret that she agreed the deal with Dr Foster, we respect her professional judgement and wish her success in the negotiations with the tribunal.

We look forward to her being able to tell us more; her experience appears to be another example of the ethical problems that face statisticians.

Sally Ruane (Guest Editor), Jane Galbraith and Janet Shapiro

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