
Contents of this Issue

Following on from the discussions at the London Conference in February 2020, I asked contributors if they would agree to a student converting their power-point presentations into short texts. This was partly successful that year and also this year, although they will both be in the next issue.

The first article is the paper presented by Sally Ruane at the Conference. The second article is by the author, making a few comparisons with previous pandemics and also demonstrating the difference in portrayal of the 'League Table' by Death Rates as distinct from Number of Cases. The third article is a tour de force by Sean Demack on pupil segregation in England; and the final short piece is by John Bibby on a variant of Stigler's dilemma.

Prospects for RSN 130

We have two articles ready, which have been converted from presentations into papers with the help of an ex-student but, clearly, we are going to have to rely on further contributions from the 2021 Conference and/or anonymous or encouraged contributions.

We are still waiting for follow-ups to the relatively recent publication of the third RadStats compendium, *Data in Society*, which was presented by the books' editors on Saturday 28th 2020. It is a landmark publication, bringing together many of the crucial issues around the production and use of quantitative information.

The contributors to *Data in Society* summarise many of the concerns around the accessibility and use of statistics in contemporary society. Examples include the lack of data from banking and financial organisations hides the extent of tax evasion of taxation. Government agencies are reducing the number of data series they make available for public scrutiny. The number of healthcare treatments in Britain provided by private groups is growing steadily.

The book is an eye-opener on the difficulties in holding governments and large organisations to account. Do you agree with the authors' interpretations?

As the editors acknowledge there are data topics the volume does not cover in detail. These include the use of statistics by legal practitioners, housing and homelessness data and climate change data.

The editors of the RadStats journal have been planning to devote one journal issue to topics raised by Data in Society, and to topics not discussed in the book. Could you write an article for the journal on any of the topics above? Are there are areas of debate missing from Data in Society? For example, is anyone prepared to comment on the statistical inequalities arising out of the impact of the COVID-19 pandemic?

Administrative Issues

As the Administrator informed those receiving printed copies of the issue that, at the AGM held in London at the end of February 2020, the decision was taken to raise the subscription from £25 to £35 for those wishing to continue to receive printed copies (whilst the membership subscription only – with online access - would remain at £25 for those £10 for those on low incomes), otherwise they would be taken off the distribution list which originally includes all 300+ members.

Please make sure you have updated your subscription, *or make a donation!* - by going to www.radstats.org.uk/membership/ where you can pay by cheque, standing order, PayPal - or by filling in your details on page 52.

What can statistics tell us about the state of the NHS upon the outbreak of the SARS-CoV-2 pandemic?

Sally Ruane

Abstract

This paper draws upon selected statistics to paint a picture of a National Health Service which was not only ill-prepared for the pandemic, but the resilience of which had been undermined by policy, especially during the decade leading up to the pandemic. The paper argues that financial constraints, failure to care adequately for the workforce and the ongoing closures of hospital beds in a context of rising pressures had resulted in the health service having insufficient capacity to meet health needs even prior to the pandemic. The policy priority of restructuring health services and the shrinking of the NHS estate, reflecting in part inadequate capital investment, distracted attention from pandemic preparedness and reduced the room for flexibility available to NHS managers when large numbers of infectious patients began to be admitted to hospital. Public health had been significantly damaged by reductions in its budget and by its three-way partition in the 2012 Health and Social Care Act, reducing its ability to mount an effective and coherent response to the pandemic crisis. The capacity of primary care and NHS 111 were insufficient to meet need even before the impact of the pandemic was felt and social care, upon which the NHS depends for the effective use of its own resources, had been debilitated by chronic underfunding and the application over many years of competitive market forces in a context of severe financial constraint.

Introduction

When the virus SARS-CoV-2 reached the UK it gave rise to significant levels of Covid-19 disease, with significant implications for the NHS. This short paper discusses different dimensions of pandemic readiness.

The funding and capacity of the NHS on the eve of the pandemic

Funding of NHS