

CARE QUALITY COMMISSION RESPONSE (VIA E-MAIL)

Dear Transparency Team

Please find below a few comments relating to the above consultation:

Making Open Data Real – A Public Consultation

Meaningful Open Data

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Section 8.6

- 1) We would agree with this principle that data should be open by default in existing legislation and that it should be assumed that data will always be published unless it is explicitly exempt.
- 2) This is less appealing as organisations may publish data without clear quality measures and checks.
- 3) This may result in unnecessary bureaucracy as organisations use it to test the release and publication of the data.

Generally, using access to data by external bodies and FOI type activities to drive up data quality for those that generate or store data is probably not the best way to drive up data quality. Rather, it is more useful to encourage publication, use and challenge to data sets. This drives up quality quicker.

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7) We would support this.

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8) We would support this.

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5. Data should always be of the highest quality and open to data quality checks. It is not always possible to reach the highest data quality standards due to the nature of the data collected and the way in which it is sourced. Some qualitative data, for example, can be of low data quality but incredibly helpful to organisations such as CQC. It is therefore more important that data is described accurately i.e. how it was collected, the purpose for which it is collected and a utility put against it e.g. measures of data quality based on a few simple metrics, rather than continually 'polishing' the data and putting an undue burden on those that submit and collect the data.

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1. We would support the use of central portals that can be accessed by all parties who want to use the data, rather than department by department.
2. Data should be released as soon after the collection period has ended with clear descriptions of the data collected.

Best wishes

Neil