

NHS Sickness Absence Rates to November 2015, Provisional Statistics Data Quality Statement

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Accuracy:

The data is extracted from an operational system which may change slightly over time due to its live status and potential additional updates. Current analyses have shown that data for the same time frame, extracted 6 months later has a difference at a national level of less than 0.1%.

No refreshes of the data will take place either as part of the regular publication process, or where minor enhancements to the methodology have an insignificant impact on the figures.

The HSCIC seeks to minimise inaccuracies and the effect of missing and invalid data but responsibility for data accuracy lies with the organisations providing the data. Methods are continually being updated to improve data quality.

Relevance:

The statistics exploit recent developments (most notably the roll-out of the ESR) to improve the service enjoyed by users of NHS workforce information and to reduce the burden on NHS Organisations to complete and return this data.

Relevance of NHS workforce information is maintained by reference to working groups who oversee both data and reporting standards. Major changes to either are subject to approval by an NHS-wide Standardisation Committee for Care Information (SCCI).

Significant changes to workforce publications (e.g. frequency or methodology) are subject to consultation, in line with recommendations of the Code of Practice for Official Statistics.

Comparability and Coherence:

This is the latest publication of Sickness Absence statistics using data from the ESR. The HSCIC welcomes feedback on the methodology, plus the content and accuracy of tables within this publication.

In our May publication, covering January 2015 sickness absence figures, we will be extending our standard tables to provide organisation level figures for nursing staff.

Bank staff, Primary Care staff and staff from the two Trusts which are not on ESR, are not included in this data.

Prior to this publication series, the HSCIC released sickness absence statistics in 2006 using 2005 data. In that survey and the ones in previous years, organisations were asked to report

a single rate for their entire organisation, which they calculated themselves for either the entire year, or for whichever months they were able to collect data for.

Sickness absence rates from this survey series and historical surveys cannot be meaningfully compared as this will not produce “like for like” estimates for the following reasons:

- This survey series contains rates based solely on the number of days lost to sickness absence. In the previous series organisations were instructed to calculate their own rates based on either hours or days lost;
- The quarterly figures in this survey series are based on a snapshot of 3 set months of data, and sickness absence is subject to marked seasonal variation. Historical surveys were based on data from between 1 and 12 months of the year, from any part of the year, with the months used varying between organisations.

Timeliness and punctuality:

The ESR data will be published within 4 months of the data time stamp. For example, a monthly publication, published in December uses ESR data for August of the same year. The August data is extracted from the ESR Data Warehouse in mid-November, providing Trusts with 2 months of ESR operational use to ensure their business processes have captured all relevant sickness absences in their Trusts for August.

Data will typically be published on the 21st of the month in which publication occurs, unless that falls on a Friday, Saturday, Sunday or Monday in which case it will be the Thursday before or first Tuesday thereafter, (or first Wednesday thereafter if a Bank Holiday Monday is involved) to allow for 24 hour pre-release access.

Accessibility:

This publication consists of high-level NHS Sickness Absence statistics at a National and HEE region level. Rates are presented in 4 separate tables showing the National and HEE region monthly rates, rates by staff group, rates by type of organisation and rates at organisation level. Further detailed analyses may be available on request, subject to resource limits and compliance with disclosure control requirements.

Performance cost and respondent burden:

The statistics exploit recent developments (most notably the roll-out of ESR) to reduce the burden on NHS Organisations to complete and return this data by extracting the data from administrative systems.