

RSS RESPONSE TO COVID-19 INQUIRY CONSULTATION ON TERMS OF REFERENCE

07 April 2022

Q1: Do the Inquiry's draft Terms of Reference cover all the areas that you think should be covered by the Inquiry? Yes or no.

No

Q2: Please explain why you think the draft Terms of Reference do not cover all the areas that the Inquiry should address.

Statistics and data played an important role in the government response to the pandemic – they were used to inform decisions, communicate with the public and evaluate the effectiveness of interventions.

The Terms of Reference (TORs) as they stand only refer to the availability and use of data and evidence in the context of public health decision-making. This, we agree, is important for the inquiry to look at but it is just one part.

Our view is that the TORs should explicitly cover how statistics and data were used in government communication with the public. Communication is a vital part of pandemic response: the public need to be informed about what is happening and the new measures being put in place need to be clearly explained. A great deal of government communication around Covid-19 relied upon statistics and data – they were a key part of the daily briefings – and we think it is important that the inquiry looks at this specifically.

We also think it is important that the inquiry consider the evaluation of public health interventions. There were several large-scale policy interventions – eg, test and trace and the use of lateral flow tests in schools – where there was an important role for statistical science in evaluating the success of the interventions. This had the potential to improve both the public health response and our understanding of the virus.

In both these cases – communication and evaluation – we think there are important lessons that need to be learned to help improve the response to any future pandemic.

It might also be useful to mention that the RSS is running a series of events – called Covid-19 evidence sessions – which are reflecting on statistical questions raised during the pandemic. We have identified four areas where we think there are important statistical issues. These areas and the questions we are looking at are outlined below, in case they are useful to you.

1. Communication during the pandemic: the role of statistics, data and modelling
 - a. How effectively have data providers, government representatives, the media and commentators communicated with the public on issues involving data, statistical analyses and modelling?
 - b. How have different statistical definitions impacted how information is communicated to the public?
 - c. How well has uncertainty been communicated, including in modelling?
 - d. How good were the visualisations used to communicate with the public?
 - e. How has data being accessible to the public improved communication – and was data accessible enough for this purpose?
 - f. Was enough done to try and prevent information becoming misinformation?
2. Government's statistical resources
 - a. **The data journey:** What did the journey look like at the start, and what changed through the pandemic? What drove any changes in public and private data availability and use?
 - b. **Cross-government sharing:** Did different public sector institutions – including central government, devolved governments, local government, health services – share and integrate data effectively

- across organisational boundaries? If not, what were the barriers? What effect did this have on communication with policy-makers, parliament and the public?
- c. **Definitions and communication:** Were definitions and their caveats – for example, in how deaths or hospitalisations were defined – sufficiently consistent and clearly communicated? How were changes managed?
 - d. **Covid Infection Survey, REACT and Zoe:** What did we learn from these surveys? Did they provide value for money, and were there alternatives? What should the future of the CIS be?
 - e. **Open data and transparency:** How might greater transparency around data and research used in policy- and decision-making have improved outcomes? What could have been done to improve transparency?
3. Statistical and data-based evidence and its role in policymaking
 - a. What is the value of statistical thinking in an emergency? Are there examples from the pandemic of times when more of a statistical perspective might have improved advice?
 - b. How should statisticians be involved as experts when there is a state of emergency? How should statisticians prepare and train for this situation?
 - c. How can statisticians best communicate a balanced view of the strength and weakness of evidence to policy makers and be trusted as an intermediary? Is there a role for statisticians in “educating” policy makers?
 - d. How was epidemic modelling used by policy makers and validated?
 - e. How did global data feed in to the UK's decision-making process? Could improvements in international data sharing have improved the UK (and other countries') response?
 4. Evaluation of interventions
 - a. How are risks to successful evaluation – low participation-rates, biased comparators, weak performance-monitoring, delayed transparency – best managed?
 - b. Which COVID-health policies needed evaluation – not all do and so who decides and are there some criteria we could set out which might us help prioritise those policies which could/should be evaluated?
 - c. How are prior beliefs formulated about the likely impact of public-health policies during COVID – via modelling, formal elicitation etc?
 - d. Medicines and vaccines apart, what are the barriers to randomization when evaluating non-pharmaceutical interventions?
 - e. What were some of the benefits that evaluation brought during the pandemic? What were missed opportunities? How can statistical science help to deliver more robust policy-evaluation in the next decade?

The RSS is happy to support the inquiry on issues around the use of statistics and data in whatever way you think would be most useful.

Q3: Which issues or topics do you think the Inquiry should look at first?

Our view is that it is important that the inquiry considers the issues around statistics and data that we outlined in response to the previous question. This was an important aspect of the government's response to the pandemic, but we do not have a view on whether it should be looked at first.

Q4: Do you think the Inquiry should set a planned end-date for its public hearings, so as to help ensure timely findings and recommendations? Yes or no.

No answer.



Q5: How should the Inquiry be designed and run to ensure that bereaved people or those who have suffered serious harm or hardship as a result of the pandemic have their voices heard?

No answer