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**Data stewardship – NSOs in the changing world**

## Emerging data stewardship role of the Central Statistics Office of Ireland and its deployment in the COVID crisis

**Prepared by Ireland**

*Summary*

　　The document provides a summary of some services already being provided by the Central Statistics Office of Ireland (CSO) that are consistent with a data stewardship role. Many of these services have been deployed rapidly in the context of the COVID crisis and are described under each service category. CSO will reflect on this valuable experience when finalising its upcoming data strategy elaborating its data stewardship role.

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## I.    Developing new services via partnerships

1.      Partnerships are going to be essential for National Statistical Institutes (NSIs) into the future if we are to meet the ever-growing demand for insight. Finding the right partner of course is not always easy and our focus tends to be on those who share our core values which is based around the need to protect our reputation for professionalism, integrity and objectivity. CSO has engaged in a number of strategic partnerships in recent times with agencies that have complementary skills. The most successful partnership recently has been with the national mapping authority in Ireland, Ordnance Survey Ireland (OSi). This was the entry point for our work to support the COVID crisis in Ireland, as the OSi offered (with our support) to develop a dashboard to support decision makers in the health sector with real time data on infections, deaths and hospital activity. However, it quickly became apparent in mid-March as the crisis took hold that our involvement would need to be much broader than this to be an effective support to the health system.

## II.    Data services

2.      Recently there have been demands from the policy side, health and education sectors primarily, for CSO to link and integrate relevant data sources, and to subsequently provide research access to these newly created Research Microdata Files (RMFs) within the framework of the Statistics Act, 1993. This would effectively involve CSO creating a 'data hub' for policy and research purposes in some key domains. Enhanced governance around these RMF's involving our data providers would need to be implemented. This service needed to be implemented quickly in the context of the COVID crisis, and key datasets were identified, acquired and made available for research purposes in around a week based on the researcher access and administrative data governance systems of CSO. This was CSO's first involvement with clinical data from these sources. The key group that were facilitated initially were COVID modellers in the university sector who were informing the National Public Health Emergency Team on the spread of the virus. They required microdata access to apply their models, and there was no researcher infrastructure available to support them in the health sector until the intervention of CSO.

## III.    Data governance

3.      Protecting data is at the core of what we do in national statistical institutes. The legal guarantee of confidentiality is a key foundation stone for Official Statistical Systems. The introduction of the General Data Protection Regulation (GDPR) in Europe in many respects complements statistical law although its introduction has required some changes to our data acquisition and governance procedures. This is a service that many of our partners across the Public Service are looking for us to provide and supports us to grow our relevance across the system. This was the key reassurance that the data owners in the health sector needed in respect of our role. Our right to microdata access under the Statistics Act, 1993 was one aspect of this reassurance, and another was provided by our legal basis for the research partnership under the Act. Our administrative arrangements were also an important reassurance to the health sector. CSO has adopted and adapted the 5 'safes' which were first published by the Office for National Statistics (ONS) in 2002/03 (https://blog.ons.gov.uk/2017/01/27/the-five-safes-data-privacy-at-ons/).

4.      These 5 'safes' are as follows:

- Safe people – all analysts are Officers of Statistics and have research or statistical credentials

- Safe projects – projects have clear public benefits

- Safe settings – researchers access microdata via the Researcher Data Portal

- Safe outputs – outputs are checked by CSO staff for statistical disclosure

- Safe data – data is pseudonymised and deidentified.

5. CSO consistently applies these safe practices in the conduct of its business, including among CSO staff in the production of official statistics. This is important so that it is transparent to any data provider or data user that CSO takes its data governance responsibilities (data protection, data confidentiality, data security and data privacy) very seriously. Therefore, in the application of the '5 safes' CSO demonstrates clearly that:

- Data is stored safely and securely
- Data is used legitimately and ethically
- Good governance standards are applied to the data and
- CSO operates in a way that obeys both the letter and the spirit of the law.

## IV. Secondment of professional statisticians

6. CSO professional statistical staff have been seconded to government departments on request for more than 20 years. The seconded statistical staff provide a broad range of statistical services and lead on the broad range of services being provided by CSO within the seconding organisation. We added another statistician to our four seconded statisticians in the Department of Health to help with analysis to support the COVID crisis. We also had seconded statisticians available from similar departments as required who were familiar with the policy environment and with the type of operational analysis required to support decision makers in the health sector.

## V. Data quality role – defining and supporting implementation of standards

7. Assessing and assuring quality is a key activity for national statistical institutes. With the ever-growing use of administrative data within our compilation processes, assessing and assuring the quality of administrative data sources is an increasingly important task. Addressing data quality issues as close to the source as possible is always preferable and this is a core part of our strategy to support an expanded use of administrative data within the Irish Statistical System. This has also been an area where we have been centrally involved in supporting the COVID crisis. Some of the systems which are being deployed in the community health system to deal with referrals, testing and contact tracing are completely new and rapidly evolving. In addition to acquiring data for research purposes from these systems, we are actively involved in documenting and developing metadata for these systems with technology staff in the health sector.

## VI. Support for policy analysis

8. Official statistics are the key support that we provide for policy analysis. We have informed the public and the health sector with weekly COVID bulletins which have become a trusted source of statistical data on COVID deaths and cases. In particular, we have developed statistics on the socio-economic profile of infections which could only be provided by CSO. However, 'off the shelf' publications cannot anticipate the various population sub-groups or cross tabulations that are required in specific policy discussions. The policy environment is often fast moving and, in some cases, "confidential" and it is unlikely that CSO will be consulted in these circumstances. We offer a 'pyramid' of services to meet policy needs for statistics as outlined in figure 1:

Figure
**Services to meet policy needs**
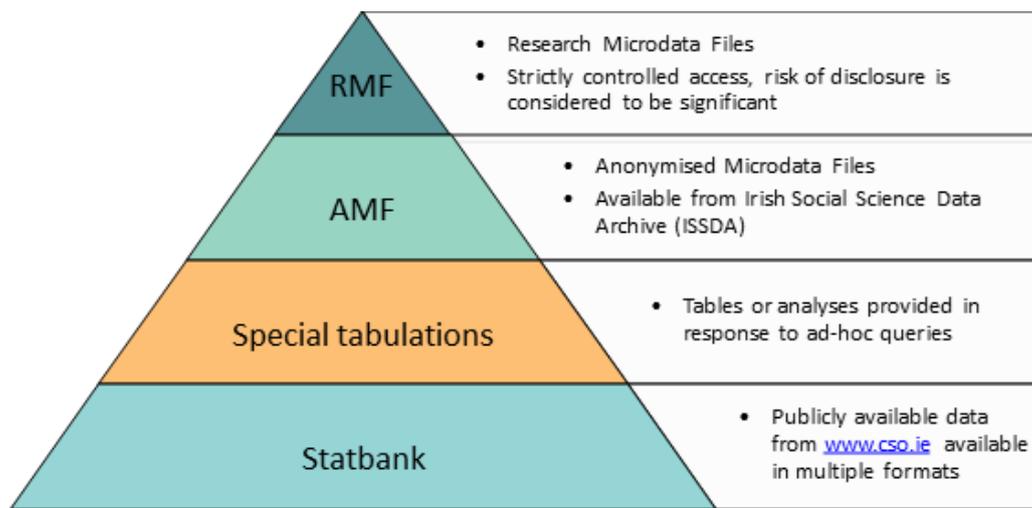


9.	The COVID data hub has been made available to health sector staff in addition to the COVID modellers in order to provide the highest level of service within the sector. There are also benefits for our understanding of the various data flows from this partnership. We have also provided special tabulations to various parts of the health sector on a bespoke basis from a dedicated in-house team to support their data needs.

## VII.	Pathfinder projects

10.	Pathfinder projects are policy-relevant research projects that CSO develops in collaboration with policy makers on specific policy questions. The aim of these projects is to deliver insight and value to the policy makers while at the same time highlighting the value and critical importance of the National Data Infrastructure (i.e., the collection and storage of identifiers related to persons, locations and businesses by Public Service Bodies in their administrative systems).  These projects have increased the profile of CSO as a provider of analytical services to policy makers and demonstrated an agility and flexibility in how we do our business. While this has not been an aspect of our COVID response so far, it will clearly be a useful service for the health sector when basic reporting requirements have been met and there is time to reflect on structural issues. We have provided methodological support for a number of data initiatives in the health sector, including the national prevalence study, which is very highly valued.

## VIII.	Supporting the development of Public Service Data Strategies

11.	CSO has played and continues to play a central role in helping to shape the data and statistical elements of a number of Civil and Public services strategies. These strategies support the development of "Data as a strategic asset" across all Civil and Public Service bodies which supports those bodies to deliver an effective and efficient service as well as directly benefiting official statistics by further improving the provision of high-quality administrative data. There has been a major step forward in the implementation of health identifiers in new systems to support the COVID crisis, and CSO staff have helped with the exploitation of these enhanced data sources for analysis purposes.

## IX.	Services sought outside our mandate

12.	There are additional services that some Public Service Bodies have asked us to provide such as Business Intelligence, Operational Analytics, Programme Evaluation and

Data Warehousing.  These activities, in our view, are not consistent with our mandate but the work we do in developing standards generally across the system in line with the services outlined above will of course support Public Sector Bodies in undertaking these activities for themselves, including in the health sector.

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