Dear Ms Eccleston,

Subject: Your email of 23 June 2019 (our ref RMC-2019-OUT-1347-AnAmBeBu)

We refer to your email of 23 June 2019, which we registered on 24 June 2019 with the reference number 19-1325-1. Your email refers to our letter dated 17 June 2019 (with the same reference than above) replying to your confirmatory application of 28 May 2019.

Below we address the comments and questions that you sent us. We have also decided to send you a new version of the dataset, to take your comments into account, where possible. Please find it attached.

Regarding your first question:

1) There are many missing infectious diseases. Other than the less than 5 reported cases, can you advise where these are?

We have included in the dataset all the diseases for which cases have been reported by the reporting authorities in the UK. If a disease is missing, it is because the UK has not reported any data in the database.

Regarding your second question:

2) We appear to only have data from January to May in the Date field. The rest is labelled W01 - W20. We can only assume that W01 is week one. However, we do not know what date week one begins and if the remaining codes W02, W03 etc are consecutive. Please can replace this with actual dates?

We acknowledge a mistake from our side. Indeed, the dataset that we provided with our letter dated 17 June 2019 only included cases reported between the months of January and May, as you correctly noticed. This is due to an error that we did when we created the script to extract the data. We send you our most sincere apologies, and you will find the complete information in the new version of the dataset attached to this letter.
Concerning the labelling by weeks, please note that the document contains the data as it has been provided by the UK. If the UK has provided a week number instead of an actual date, it is materially impossible for ECDC to provide you the actual date, as ECDC does not have such information. The same applies to cases where only the month, or even only the year, has been provided to ECDC.

The only redaction made by ECDC is to prevent disclosure of age and gender for those diseases where less than 5 cases where reported for a specific year (column *DateUsedForStatisticsYear*) and by a specific place of notification (column *PlaceOfNotification*). As we explained in our letter of 17 June 2019, this is to protect the privacy of individuals by avoiding any possibility to indirectly identifying the cases. In such cases, you will find "*anonymized*" in the age and gender fields. Where you find "*NULL*", instead, it is because we did not receive any data (as the data has not been provided to us by the UK). Where you find "*UNK*" (stands for Unknown), the UK did state that this specific set of information is unknown for them.

Regarding your third question:

3) If the assumption that "W01" is a weekly code, there are around 10 weeks out of the year that are missing. Can you please provide all dates.

As mentioned above, we disclose the data to you as it has been provided by the UK. Please note that it is not unusual that for certain diseases the reporting is seasonal, hence it is possible to have no reporting during several weeks in a year.

Regarding your fourth question:

4) Your comments that I should be able to find the correct NUTS code for Northern Ireland are a little confusing. Firstly, what are the NUTS code for Northern Ireland as many numbers follow that code? Does this mean the spreadsheet I have been sent contains data from across the UK and not Northern Ireland as requested?

You can find more information about NUTS codes (including those applicable to Northern Ireland) at this page: [https://ec.europa.eu/eurostat/documents/345175/7451602/nuts-map-UK.pdf](https://ec.europa.eu/eurostat/documents/345175/7451602/nuts-map-UK.pdf)

The information in the link above should make you able to identify the information that refers to Northern Ireland and its different local areas.

Please note that the UK has reported different diseases in the database at different levels of geographical detail. For some diseases, the UK specifically linked the cases to Northern
Ireland (you will be able to search such cases using the corresponding NUTS code). For other diseases, the UK has reported generically at UK level (you will see “UK” in the “PlaceOfNotification” field). As this generic UK data might also contain cases for Northern Ireland, we have decided to include it all in the data set. Please note that we are not able to disaggregate the data that has been reported to us at UK level and separate the data that refers to Northern Ireland only, as such information would only be available to the reporting authority (the UK). We have excluded from the data set only the data that is explicitly linked to specific areas that are not Northern Ireland.

Conclusion:

We hope that the attached data set satisfies your request. We would kindly ask you to disregard the one that we sent you previously, as it was not correct due to our mistake in the extraction of the data.

We would like to stress out that ECDC is making information available to you as it has been provided to ECDC by the UK authorities. Due to the nature of the data that is shared by the UK with ECDC, should you need more details we encourage you to consider the possibility to direct your enquiries directly to the UK authorities. They might be in a better position to assist you as they might have additional information than those reported to ECDC.

You can bring an action against this decision to the Court of Justice of the European Union, in accordance with art. 263 of the Treaty on the Functioning of the European Union. You also can lodge a complaint to the European Ombudsman, in accordance with art. 228 of the Treaty on the Functioning of the European Union.

Yours faithfully,

Andrea Ammon

ECDC Director

Enclosures:

1) Letter with the original decision of the Director of ECDC of 17 June 2019
2) Electronic version of the dataset