



## Rapid Evidence Review on the Critical Appraisal of Third-Party Evidence: Response to the Public Consultation on Draft Framework

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## **Introduction**

The Food Standards Agency's (FSA) independent Science Council has sought to provide a set of high-level guidelines to aid shared expectations on the robustness of evidence submitted to the FSA by non-commissioned third parties. Further details on the Science Council's aims and objectives are available under the terms of reference for [Rapid Evidence Review 1](#).

## **Consultation Objective**

By making the Science Council's proposed framework available for public consultation, the Science Council has aimed to ensure maximum clarity and usefulness for those who may submit evidence to the FSA. The Science Council's consultation and the presentation of its response are also consistent with the FSA's ethos on the transparency of evidence.

## **Approach**

The consultation lasted between midday 22 March 2021 and 23:45 22 April 2021, hosted on the [Science Council website](#) and supported by an online response form. Respondents were asked to select rank agreement to four statements, each followed by optional free text to elucidate further detail on a given response.

The consultation was advertised on FSA social media and directly shared with representatives from a wide range of FSA stakeholder networks.

The Science Council's own proposed response to comments received during the consultation were agreed by correspondence 4 June 2021.

## **Organisational Affiliation of Respondents**

A total of eleven responses were received, including one respondent who wished for their affiliation to remain anonymous. Responses were received from individuals content to share the following organisational affiliations:

- Allergy UK
- Council Responsible for Nutrition (CRN UK)

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- Department for Business, Energy & Industrial Strategy (BEIS)
- Food & Drink Federation (FDF)
- Government Chemist
- Health Food Manufacturers' Association (HFMA)
- Institute of Food Science & Technology (IFST)
- Jersey Hemp
- Met Office
- Provision Trade Federation (PTF)

The Science Council thank all respondents for the time and thoughtfulness they gave to their responses.

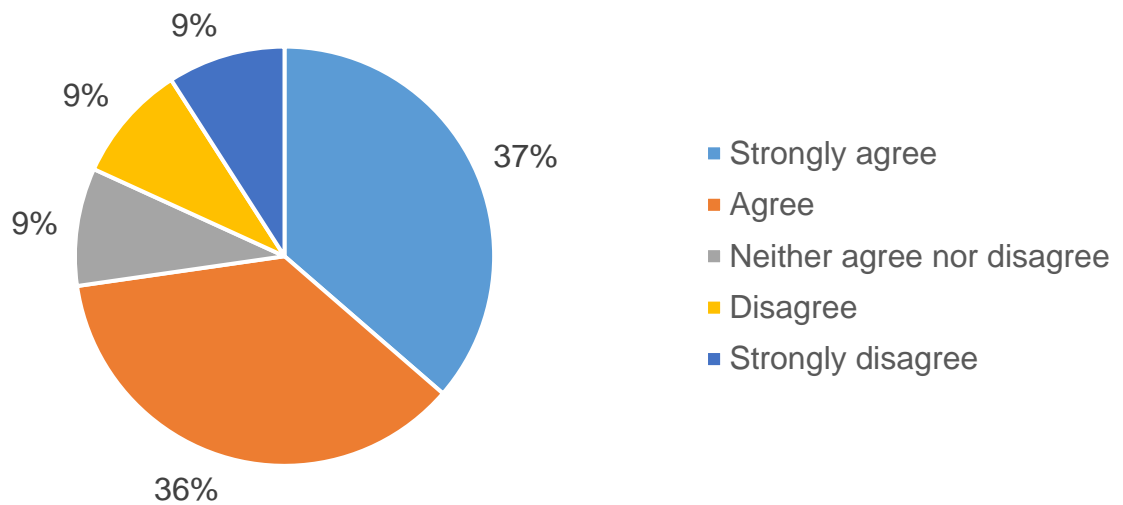
**Discussion**

This discussion summarises the consultation response and its influence on how the Science Council intends to present its proposed framework. Full consultation responses are available in Annex A.

There was general support for the principles articulated in the Science Council's framework. The three major recurring points of challenge from respondents were:

1. Greater clarity about the stated objectives of intended use;
2. Improvements to statements about expectations for the provision of underlying data; and
3. Articulation of the value placed on behavioural and social research.

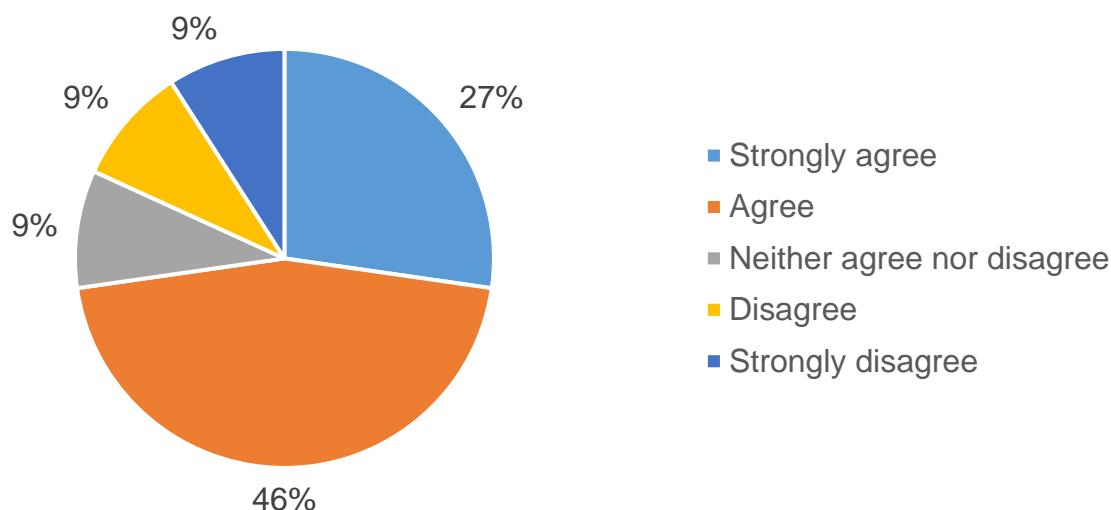
**Questions 1 & 2: The principles and guidelines provide a clear overview of what the FSA looks for when assessing evidence.**



73% of respondents strongly agreed or agreed (37% and 36% respectively) that the principles provided a clear overview of what the FSA looks for when assessing evidence.

<b>Summary of Stakeholder Comments</b>	<b>Response from Science Council</b>
Whilst overall it was felt articulated expectations for the quality, trust and robustness of evidence were clear, some improvements to the initial context setting could be made, including in relation to accessibility for a non-scientific audience.	The introduction and stated objectives of intended use will be modified to improve clarity of purpose.

**Questions 3 & 4: The principles and guidelines make the FSA's expectations for the evidence it receives clear.**

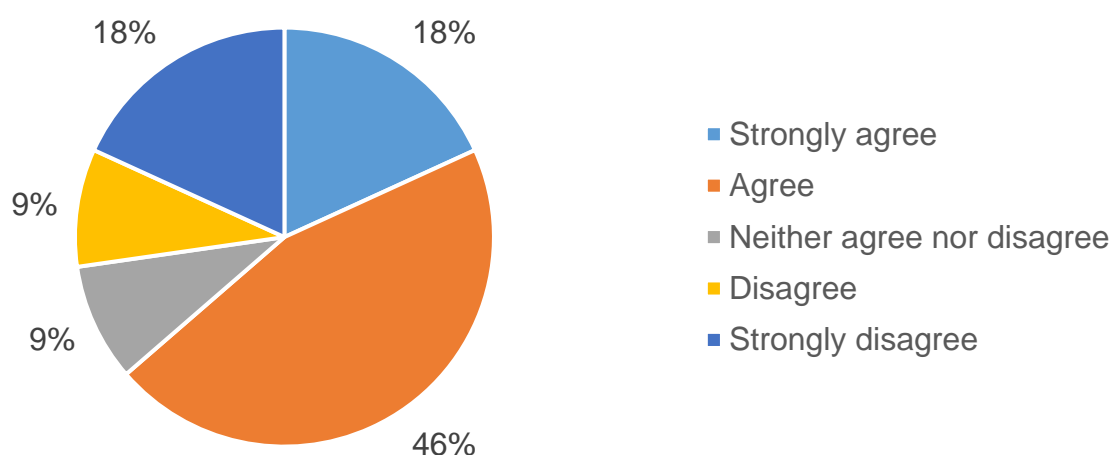


73% of respondents strongly agreed or agreed (27% and 46% respectively) that the principles make the FSA's expectations for the evidence it receives clear.

Summary of Stakeholder Comments	Response from Science Council
<p>Many respondents felt that given the breadth of ground needed to be covered, the Science Council's framework made expectations clear.</p> <p>There was however some confusion on expectations for the provision of relevant underlying data, supportive or otherwise, to a given conclusion.</p> <p>Respondents questioned the value/interest placed on early indicative evidence in which the quality, trust and robustness may be incomplete but indicative findings may be of significance to consumer interests.</p> <p>Similarly, the value placed on</p>	<p>The availability of underlying data aids robust, independent interrogation of conclusions. This is likely to improve confidence in the evidence with which the FSA is presented. If data are reasonably available to share, then it should be provided. Behavioural and social research makes a significant contribution to the FSA and its mission, and the Science Council would refer to the <a href="#">Advisory Committee for Social Science</a> for domain specific expertise.</p> <p>The Science Council's framework allows for the submission of preliminary results which, as with all submissions,</p>

behavioural/social research was questioned.	will be assessed in relation to other evidence and their relative impact on consumers.
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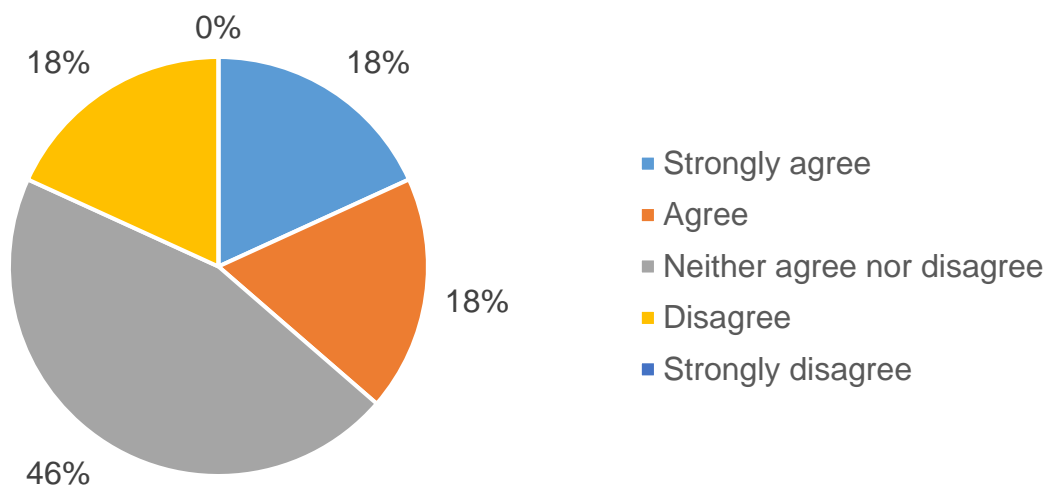
**Questions 5 & 6: The principles and guidelines are useful for your engagement with the FSA.**



64% of respondents either strongly agreed or agreed (18% and 46% respectively) that the guidelines were useful for their engagement the FSA. However, 27% disagreed to some extent, with 18% strongly disagreeing.

<b>Summary of Stakeholder Comments</b>	<b>Response from Science Council</b>
The majority of respondents felt that the Science Council’s framework was a useful reminder of foundational requirements for good evidence. However, it is important to ensure the framework is accessible to a wide audience base. It could be clearer how the framework considers behavioural and social science.	The Science Council’s framework has sought to ensure it is accessible to a wide audience base. Further review of drafting has been undertaken in light of comments received, including additional recognition of the importance of behavioural and social research.

**Question 7 & 8: There are gaps in the principles and guidelines that reduce their value. Please tell us what you think is missing and how filling these gaps would help you**



36% of respondents believed there were elements that could be improved to increase the value of the drafted principles and guidelines. 46% neither agreed nor disagreed that there were gaps.

<b>Summary of Stakeholder Comments</b>	<b>Response from Science Council</b>
<p>Few omissions were identified though respondents provided several detailed points of clarification to consider. Respondents encouraged inclusion of reference to FSA communication plans for both outputs and outcomes. It was questioned whether critical requirements could be made more explicit.</p>	<p>The FSA responds to third parties who submit evidence for consideration, but the nature of that response is dependent on both how it is submitted and the suggested impact of this new evidence on consumers. The Science Council has intentionally avoided creating a 'checklist' as such an approach is unlikely to cope with the wide range of evidence and scenarios the FSA must consider.</p>

**Question 9: Is there anything else you would like to share?**

<b>Summary of Stakeholder Comments</b>	<b>Response from Science Council</b>
Several useful suggestions were made as a continuation to responses to Question 8, but no significant further additions were added at this stage.	The Science Council has reviewed specific drafting points as necessary.



**Annex A: Full Consultation Responses Alongside Individual Science Council Comments**

**Questions 1 & 2: The principles and guidelines provide a clear overview of what the FSA looks for when assessing evidence.**

Response Number	Agreement Ranking	Respondent Comments	Science Council Comments
R1	Strongly Disagree	<p>In my area of business - Cannabis - many things have been overlooked, cast aside and have relied on incorrect science. For example - for the maximum allowable dose of CBD, your guideline say 70mg per day. This is based on the report behind a paediatric medicine. Therefore the body mass is set to 30-50kg.... and the toxicity data for a child! The medicine has ethyl alcohol as a carrier - this would obviously show that there are liver and kidney toxicity. Products sold on the market containing cannabinoids very rarely are carried within alcohol.</p> <p>The guideline for the Novel Foods have been at best, occult. The goal posts have been moved and the industry is set to go onto the black market. No one wants to ingest isolated molecules (which would obviously be novel) and want the full spectrum of the plant.</p>	<p>FSA has made <a href="#">guidance on Cannabidiol (CBD) available for businesses</a>, alongside its <a href="#">advice to consumers</a>.</p> <p>The FSA's advice is currently based on levels given for an average 70kg adult.</p>

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R2	Strongly agree	It's clear from the document how the FSA uses evidence and what it is looking for regarding standards and relevance to the particular issue.	Noted
R3	Agree	The document is thorough, addressing the key scientific requirements in conducting research and in interpreting and presenting the findings.	Noted
R4	Agree	The Government Chemist welcomes the guidelines and agrees the draft document provides a good summary of the requirements necessary to submit evidence ensuring the principles of quality, trust and robustness are being met.	Noted
R5	Strongly agree	It makes sound logical sense that the scrutiny of un-commissioned reports, papers and scientific evidence be evaluated under comprehensive and unbiased means. We agree that a scientific method should be used to evaluate all data.	Noted
R6	Agree		N/A
R7	Agree	I would strongly agree if the document opened with a clear and succinct statement of purpose that is relevant to the audience. It's not immediately clear who the intended audience of the document is – is this going to be sent to all parties who send information to the FSA? Or is it an internal document? If the former, it may be helpful for the document to begin with a statement of purpose (e.g. something along the lines of 'As a representative of an organisation that has sent information to the FSA this document is intended to provide you with guidance...')	Efforts have been made to review the framework's introduction to provide further clarity of purpose as both an external resource and internal aid to reinforce principles of best practice in the preparation and robust assessment of evidence.

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R8	Strongly agree	The expected elements for consideration are all clearly addressed to ensure only scientifically sound evidence is considered and any partiality or conflicts are clearly stated – ensuring the weight of evidence can be contextually applied.	Noted
R9	Strongly agree	Even though the studies may not be commissioned by FSA, the guidelines and principles makes it necessary for the expected criteria of valid scientific studies to be met.	Noted
R10	Neither agree nor disagree	It seems that there is a focus only on FSA own commissioned research, or pure scientific research evidence, but it's not entirely clear. There are a lot of connecting documents and links, some of which appear to relate to a 2015-2020 strategy.	As in response to R7, efforts have been made to further review the framework's introduction for clarity of purpose given some confusion here that FSA's own commissioned research was actually out of the intended scope of this framework.
R11	Disagree	The document is not written very well in places, reducing clarity. It has obviously been put together by scientists for a peer-group who already have a good knowledge of the subject. However, it has to be borne in mind that this document will also be read by a wider interested readership with less expert knowledge (e.g. those engaged in start-up operations), where more explanation and clearer presentation may be necessary to improve understanding.	Whilst the Science Council has aimed to ensure its principles are as accessible as possible, the framework does assume that those who seek to submit scientific evidence to the FSA have some capacity to evaluate that evidence. However, we aim to help the FSA make its scientific guidance as clear as possible. Identification of specific examples/issues for further improvement would have been welcome.

Questions 3 & 4: The principles and guidelines make the FSA's expectations for the evidence it receives clear.

Response Number	Agreement Ranking	Respondent Comments	Science Council Comments
R1	Strongly disagree	There have never been any clear guidelines - they change from product to product. The FSA should consult with the industry and not the paymasters of large conglomerates who wish to pharmaceuticalise and standardise everything down to its molecular status.	The authorisation process for regulated products is by nature dependent on the composition of the product on a case-by-case basis  The FSA's <a href="#">CBD business guidance</a> states that "all businesses marketing novel CBD products are treated the same."
R2	Strongly agree	As above. <i>[Referring to R2 response to Question 1&amp;2]</i>	Noted
R3	Agree	Considering the potential ground that needs to be covered in these guidelines, regarding all the possible circumstances in which un-commissioned evidence could be sent to the FSA, the document is suitably succinct with useful references to other resources for further information.	Noted
R4	Agree	The FSA have clearly described the criteria necessary for providing evidence in the sub-headings to the main headings of quality, trust and robustness.	Noted
R5	Strongly agree	It sets out the scope of information and if unofficially recognised there are clauses that make space for this given pre-conditions.	Noted
R6	Agree	Overall the guidance is clear. However, it is not clear whether there is a requirement to provide all underlying data. The section on trust states	Reviewed and amendments made. Making as much of the underlying data available as possible provides a measure of assurance

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		"Evidence that is shared transparently will include access to all underlying data" but there is conflicting guidance later under transparency which states "If this is not possible, state why." It may not always be possible to provide all underlying data so this needs to be clarified.	and the opportunity to independently evaluate conclusions. We appreciate the level of access can vary for several reasons.
R7	Agree	I wasn't sure if you would want to consider requesting data sets (including things like lab note books) to be kept accessible for a set period of time due to any potential audit requirements?	Partially addressed as in response to R6 above. There is no predetermined retention period for un-commissioned third-party datasets, but this brings into question how a dataset has been shared and obviously we would caution against the deletion of any dataset being used in an effort to inform policy. No physical records, such as lab books, would be required in the immediate context.
R8	Agree	This is an opportunity to perhaps provide more detail regarding types of indicative evidence which may be directional rather than absolute, qualitative rather than quantitative. It is especially the case for evidence relating to emerging issues or evidence based upon new parameters or indicators for which their relevance is not yet fully understood. Such types of evidence might then provide the stimulus for further investigation to generate more robust evidence. Addressing this aspect would also ensure no evidence would be lost from consideration.	Reviewed and amended. We acknowledge the risk that the framework may come across as strongly preoccupied with the absolute. Indicative evidence, particularly where a risk to consumers is suggested, can be very useful. It is however important that those who submit such evidence include why they believe it is important, so as to ensure shared understanding of the thought process. There is a chance that the significance could otherwise be missed.
R9	Strongly agree	The expectations set out in the principles of quality, trust and robustness are clearly laid down and explained.	Noted

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R10	Neither agree nor disagree	There are some areas which appear clear but the reasons for excluding consumer insight /attitudinal research is not clear.	<p>Consumer insight and behavioural/social science has not been intentionally excluded. Such research makes a significant contribution to FSA risk analysis and the Agency's own research outputs.</p> <p>The Science Council would refer to the <a href="#">Advisory Committee for Social Science</a> for further guidance on robust social research.</p>
R11	Disagree	<p>The document has obviously been put together by scientists for a peer-group who already have a good knowledge of the subject, but the document will also be read by a wider interested readership with less expert knowledge, where more explanation and clearer presentation may be necessary to improve understanding. For example, certain areas of the document require more clarity. The need for the submission of the totality of the data (both positive and negative data) is not clearly stated or emphasised, although it is an essential aspect of an assessment and is, in reality, one of the most common problems with submissions.</p>	<p>Partially addressed in response to R11 in Question 1&amp;2, and response to R6 in Question 3&amp;4 above.</p> <p>The Science Council agrees that both positive and negative data [in reference to a given hypothesis] should be made available if and where known and available.</p>

**Questions 5 & 6: The principles and guidelines are useful for your engagement with the FSA.**

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<b>Response Number</b>	<b>Agreement Ranking</b>	<b>Respondent Comments</b>	<b>Science Council Comments</b>
R1	Strongly disagree	Unattainable! There have been no clear guidelines or guidance for the Novel/Regulated Foods.	FSA <a href="#">guidance for regulated products authorisation</a> is available in the link. This includes contact details for further help as needed: <a href="mailto:regulatedproducts@food.gov.uk">regulatedproducts@food.gov.uk</a>
R2	Neither agree nor disagree	In my role, I don't engage with FSA in this way, but it's useful to see the approach being taken to uncommissioned third-party evidence.	Noted
R3	Agree	The document is well organised; breaking the requirements down under quality, trust and robustness is helpful.	Noted
R4	Agree	The Government Chemist and the National Measurement Laboratory are already familiar with many of the principles described in the draft document but this will be a useful reminder in submitting evidence.	Noted
R5	Agree	It allows for information and data potentially previously unknown to be available and may add to the growing library of evidence to help support decision making.	Noted
R6	Agree		N/A
R7	Strongly agree		N/A
R8	Strongly agree	This guidance has the potential to provide foundational best practice for capturing evidence and thus provide steer to those collecting evidence.	Noted
R9	Agree	As a stakeholder, we are consulted and are aware of the activities and functions of FSA and	Noted

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		its engagement with stakeholders. This is in line with the FSA's principles of openness and transparency.	
R10	Strongly disagree	The guidelines appear to suggest that any uncommissioned data has to be pure scientifically tested research data and consumer / attitudinal research studies are not seen as quality, trusted or robust data. As a patient organisation we regularly survey our community to inform the services we provide and identify their needs. We regard this a quality, trusted and robust data based on our reputation and engagement with consumers.	<p>Partially addressed in response to R10 in Question 3&amp;4.</p> <p>Consumer and attitudinal research make a significant contribution to the FSA, its advice and recommendations. The quality, trustworthiness and robustness of social and behavioural research can vary as with all scientific disciplines.</p> <p>The FSA seeks the guidance of the <a href="#">Advisory Committee for Social Science</a> as necessary on such work.</p>
R11	Disagree	The document has to be considered from the point of view of an interested readership with less expert knowledge than the scientists who prepared the document. Therefore, although we ourselves understand the details and requirements for the submission of evidence, a less experienced reader might struggle to understand the important aspects, such as the need for totality of the data.	Please refer to previous responses to R11 in Question 1&2 and Question 3&4.

**Questions 7 & 8: There are gaps in the principles and guidelines that reduce their value.**



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<b>Response Number</b>	<b>Agreement Ranking</b>	<b>Respondent Comments</b>	<b>Science Council Comments</b>
R1	Neither agree nor disagree		N/A
R2	Disagree	I have not spotted any obvious omissions.	Noted
R3	Agree	Reference to and expectations for other examples of evidence that might be submitted such as consumer research, cost-effectiveness analysis, status of pilot studies, and observational studies (particularly in respect of <a href="#">Williams et al, Br J Nutr 10 December 2021: Nature of the evidence base and frameworks underpinning dietary recommendations for prevention of non-communicable diseases: a position paper from the Academy of Nutrition.</a>	Reviewed with amends to ensure clarity of reference to the collation of strands/types of evidence and 'other legitimate factors'.  The Science Council welcomes reference to the shared introductory paper, published since its initial document review.
R4	Disagree	It is too strong to suggest there are gaps in the principles, but additional information or better phrasing would enhance the guidelines to help readers better understand criteria being set. The following observations are against the relevant headings and bullet points.  Uncommission Evidence Transparency is important and an indication how conclusions will be communicated would be helpful.  Clarity  It might be useful to strengthen detail on data collection. Whilst there is good provision for	Reviewed with amends as felt appropriate. The Science Council welcomes these detailed comments supporting clarification on for example, use of validated methods where possible, risks associated with inference from multiple testing and the additional resources cited.

		<p>clarity on the data collection and on sources of bias later in the guidelines, it may be helpful to be more explicit by saying "the data collected (including, for example, the data collection method, the population sampled and the sampling methodology) ..." or along similar lines.</p> <p>Indicating how statistical outliers are identified and treated needs to be highlighted.</p> <p>It may be helpful to state in the narrative for complex data sets may involve the use of mathematical modelling. In such cases, the components of the mathematical model must be described clearly including how limits and if applicable how they are defined.</p> <p>Relevance</p> <p>It is not clear whether established methods are the same as the standardised methods published as BS, EN or ISO standards.</p> <p>There is a recommendation to provide point estimates and confidence intervals alongside statistical hypothesis test results ('p-values') but does not explicitly say that when statistical hypothesis tests are used there should be consideration to the effects of multiple testing in the conclusions and what correction, if any, has been made for multiple testing.</p>	
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	<p>It is also suggested the results of all such hypothesis tests are provided, and not just those that prove to be significant. This can be particularly important in nutritional survey studies where there can be a very large number of measured parameters and commodities where it is important the data set allows many comparisons between subsets of the data. Alternatively, a reference to the UK statistics authority's code of practice for statistics and the <a href="#">ASA statement on p-values</a> can be cited.</p> <p>Reliability</p> <p>National and international bodies should include BSI, CEN and ISO standardisation bodies.</p> <p>The definition used for uncertainty in the guidelines is broad. It would be helpful if authors are encouraged to provide an indication of the measurement uncertainty as defined, in the Codex or GUM (Guide to the Expression of Uncertainty in Measurement) documents for data sets or collections of measured values such as nutritional composition, toxin or contaminant levels etc. Documents include GUM (JCGM 100 – Evaluation of measurement data – Guide to the expression of uncertainty in measurement (ISO/IEC Guide 98-3) available <a href="#">here</a> and the Codex document "Guidelines on Measurement Uncertainty (CAC/GL 54-2004)" available <a href="#">here</a>, which is used for food regulation.</p>	
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		<p>Trust It may be helpful to explain how proprietary information will be handled and whether confidences can be shared with the FSA.</p> <p>Transparency This section doesn't address how analyses of commercial samples are treated and whether identities corresponding to results are to be made known.</p> <p>Impartiality and bias The provisions on impartiality are currently limited to reporting potential conflicts of interest. It may be useful to consider adding a provision to indicate that studies should be conducted so as to minimise the effects of conflict of interest. Examples of suitable codes of practice include the Royal Society of Chemistry and Royal Statistical Society Codes for Members, or alternatively contractual terms that provide for independence of contractors.</p>	
R5	Neither agree nor disagree	There may be gaps that we have not identified that are either relevant or irrelevant to the current scientific evidence evaluation guidelines	Noted
R6	Neither agree nor disagree		N/A
R7	Neither agree nor disagree	You may wish to include something under Trust around version control for the documents submitted, perhaps added to the line about	The FSA will address the evidence with which it is presented. If multiple versions of the same evidence are presented it is reasonable

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		critical internal/external review processes the work was subjected to prior to submission to the FSA.	to challenge what has materially changed both directly within the piece of evidence specifically shared and potentially within the wider body of available evidence prior to any further/re-assessment.
R8	Agree	<p>Regarding transparency of findings provided to FSA either commissioned or commissioned by FSA or other government bodies, such data or research outputs which are provided to FSA or to other government bodies are not necessarily made available for the wider stakeholders to apply to their knowledge and to risk prevention.</p> <p>Similarly, FSA / FSS directly funded research project outputs are not easy to locate (unless you know the specific topic/title of the works) and many foundational pieces of research have been archived, so are sadly no longer accessible. restoring this archive would be of great value to the UK and wider food system.</p> <p>IFST suggests that as part of the 'Trust' and 'Transparency' aspects of these guidelines, accessibility to the data for all stakeholders at an appropriate point in time should be considered and included.</p> <p>Separately, more guidance regarding the level of detail on expressing sources of funding and conflicts of interest would be helpful.</p>	<p>All FSA commissioned <a href="#">research and evidence</a> is made publicly available. The FSA makes much of the evidence that is provided and utilised available through for example, <a href="#">Scientific Advisory Committee</a> papers and publication of <a href="#">consultation responses</a> as here. There may, however, be a range of legitimate interests that mean it is inappropriate to directly publish all evidence with which the FSA is provided. It is worth all stakeholders considering how they may make scientific knowledge available for wider consumption. Comments with respect to conflicts of interest are noted.</p> <p>The Science Council understands that the FSA has initiated a workflow to improve the accessibility of its commissioned research and evidence publications, based on the <a href="#">areas of research interest</a> covered.</p>

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R9	Neither agree nor disagree	It is not very clear if there is a limit to the potential influence uncommissioned evidence can have on FSA policy. For example, depending on the rigour of the study and implication to current policy, could it ever be enough to change policy, or could it only trigger a review of evidence and public consultation.	It is important to consider what the evidence suggests. If there may be suggestion of an enhanced risk to consumers, then in accordance with a precautionary approach, a response may be rapid. However, the FSA will consider how any new evidence sits within the total body of available evidence and whether the new evidence should result in further formal review, public consultation and/or direct commissioning of research.
R10	Strongly agree	We are regularly approached by the FSA to work closely on consumer activities and engage with the allergic community on a variety of issues that impact on their lives. The exclusion of consumer/ attitudinal research data and insights from consumers represents a huge gap in the principles and guidelines.	Engagement noted with thanks. Amends made to reflect previous comments of the recognition of the contribution made by behavioural and social research.
R11	Strongly agree	Critical requirements need to be emphasised or summarised and not hidden in woolly text.	The Science Council's framework has aimed to be succinct without the provision of a defined 'checklist' that is unlikely to be fit for the range of purposes encountered by the FSA.

Question 9: Is there anything else you would like to share?

Response Number	Respondent Comments	Science Council Comments
R1	Should have thought things through and consulted with the industry at a level that was less intimidating.	<p>The Science Council has not intended to intimidate industry in the provision of its framework, rather support a shared expectation and discussion between stakeholders and the FSA as a science and evidence-led regulator.</p> <p>The Science Council understands that the FSA has conducted ongoing engagement with industry on CBD since January 2019.</p>
R2	N/A	N/A
R3	All information already provided above. <i>[Referring to R3 response to Question 7&amp;8]</i>	N/A
R4	<p>Continuation of Q8</p> <p>Impartiality and bias Where data are omitted from a study report could be clearer as the guideline refers to individual data points or whole data sets, but can be read as omitting the possibility of excluding (or restricting testing to) subsets of data. It is suggested alternative phrasing such as "Where data are omitted from a study report, or where analysis is restricted to one or more subsets of the data available, this should be clearly stated, with reasoning provided. Omission of full data sets, subsets or individual data points should be noted and justified. ...."</p>	Reviewed with amends as partially addressed in response to R4 and R8 in Question 7&8.

	<p>In addition, the possibility of omission suggests it would be good to be explicit and encourage study authors to make public access to data possible (e.g. "Authors are encouraged ..."). This provision could be added to the second bullet under 'transparency', which can be read as providing access for FSA.</p> <p>Note that the provision "Clearly indicate when evidence is compiled from a range of sources" appears (at least) twice, under clarity (2nd bullet) and under transparency (final bullet).</p> <p>Differentiation between legal uncertainty and scientific uncertainty may be helpful to indicate that one is based on opinion whilst the other on statistics.</p> <p>It is not quite clear what is meant by 'critical review' and whether the intention should have been "any independent critical review"? It would be helpful to state clearly that the conclusions of such reviews should be made available.</p> <p>Consistency The terms repeatable and reproducible mean different things in the laboratory setting. It is suggested the text better defines whether studies should be repeatable within a lab or reproducible across different labs.</p> <p>Helpful links Suggest including BSI.</p>	
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	The Government Chemist would be happy to discuss any of the points made in this submission.	
R5	No	Noted
R6		N/A
R7	Out of interest, has this document been made in collaboration with external parties who send you unsolicited information in order to compare their requirements with the FSA's?	The Science Council have aimed to achieve this through their public consultation as here.
R8	<p>Although this document gives guidance to those submitting evidence to the FSA, it does not say how the FSA will review and weight the evidence it receives, and how FSA will communicate if prior evidence it has received was given a high weighting or a low weighting.</p> <p>Such openness would add to trust and transparency. For example, will the FSA use internal expertise to assess and weight the evidence it receives or will they outsource this? Will they apply specific set criteria to this and will these be made available?</p>	<p>Please refer to the response to R9 in Questions 7&amp;8. The FSA will respond to those who submit unsolicited evidence, though the nature of that response will vary depending on the issue raised and the route by which it was submitted.</p> <p>The assessment of evidence will draw on a combination of internal and independent expertise such as that of the FSA <a href="#">Scientific Advisory Committees</a> and Register of Specialists as necessary.</p> <p>The criteria used will draw on the principles outlined by the Science Council's framework, supported by further appropriate application of best practice guidance specific to the question raised. For example, ongoing work by the <a href="#">Joint Committee On Toxicity and Committee On Carcinogenicity Synthesis and Integration of Epidemiological and Toxicological Evidence subgroup</a>.</p>
R9	It is important and reassuring that there is close liaison across government departments and consultation with independent experts via the Scientific Advisory Committees to ensure that policies continue to be based on scientific evidence.	Noted

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R10	Our database of approx. 50,000 contacts is structured in a way which means we can target specific allergic conditions and achieve high response numbers to research surveys (in thousands). The evidence from these surveys are 'real-life', consumer feedback and are just as valid, albeit different, to pure scientific research.	Noted
R11	The Joint FAO/WHO Expert Committee on Food Additives (JECFA) should be included under 'Helpful Links'.	Joint FAO/WHO groups are already referenced and provide a wealth of resources, including but not limited to JECFA.