





My experience with administrative data

Catherine Stewart & Ruth Dundas

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Overview

- Sourcing data
- Data application process
- ☐ Data linkage & transfer
- Data cleaning
- ☐ Benefits of using linked data
- Final reflections

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Example

The importance of secondary school education in the patterning of health outcomes in Scotland

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Background

- ☐ Broad aim: Investigate how various health outcomes in Scotland are patterned according to educational status.
- ☐ Particular focus on educational attainment at school-leaving.
- ☐ Several ways in which education may influence health:
 - Better education can lead to better job opportunities and income.
 - Better education can improve knowledge of how to live a healthy life and have a better understanding of how certain behaviours can affect health.

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Sourcing Data

☐ Health outcome data:

· Hospitalisation and mortality records (ISD).

■ Education data (??):

- Scottish Longitudinal Study (SLS)
- · Obtain education data directly from Scottish Government

☐ Obtaining data from Scottish Government:

- As with SLS, we would also only be able to access education data as far back as 2007 (due to data quality issues)
- Could we gain access to pupil names to improve linkage to health data (SQA)?

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Data Application Process (~2012/13)

1. Define specific research questions

- Cohort and hence health outcomes restricted by availability of education data back to 2007 only.
- Focus on
 - Mental health outcomes e.g. suicide/attempted suicide and psychiatric hospital admission as well as
 - Alcohol and drug-related deaths and hospitalisations
 - Accidents and assaults

2. Data applications

- ☐ Three different data applications had to be made to the three different agencies providing data:
 - Privacy Advisory Committee (PAC) application to ISD to use health data and request linkage of previously unlinked datasets.
 - Data access application to Education Analytical Services (EAS) at the Scottish Government to access education data.
 - Application to Scottish Qualifications Authority (SQA) to access names of pupils for education and health data linkage.

Data Requested

☐ Health data (ISD)

- General acute inpatient & day case discharges (SMR01)
- Psychiatric admissions (SMR04)
- Maternity inpatient & day case discharges for cohort member & any offspring of female cohort members (SMRO2)
- Deaths

☐ Education data (Scot Gov)

- School attainment data for all school leavers
- Pupil Census data
- Attendance, absence and exclusion data
- · Destination information
- School-level deprivation information (SIMD)

☐ Other (SOA)

• Identifiers (including Scottish Candidate number, forename & surname, gender and DOB)

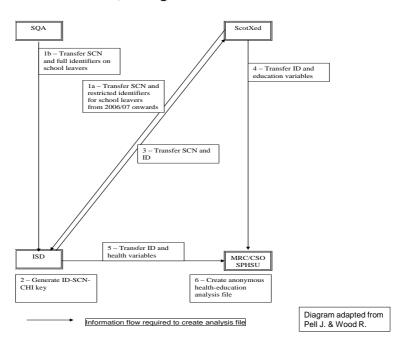
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Variable Selection

| ☐ Applications to both ISD and Scot Gov required detailed |
|---|
| lists of all variables that required for the research. |
| |

- Any variables requested at a later date may (or may not) have to go through another formal application process and be signed-off separately.
- Sourcing education variables
 - ScotGov (ScotXed) website data specification documents for each survey
 - Administrative Data Liaison Service (ADLS) website
- Sourcing health variables
 - SMR crib sheets

Data Extraction, Linkage & Transfer Process



Problems with the data (Received June 2013)

Major problems

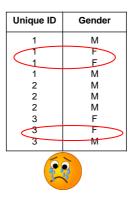
□ Health and education data did not appear to be referring to the same person when cross-checking on variables like gender and year of birth.

| | unique_id | YearOfBirth | yobsmr02 |
|----|-----------|-------------|----------|
| 1 | 1 | 1995 | 1993 |
| 2 | 2 | 1991 | 1995 |
| 3 | 3 | 1992 | 1989 |
| 4 | 4 | 1990 | 1994 |
| 5 | 5 | 1989 | 1993 |
| 6 | 6 | 1991 | 1993 |
| 7 | 7 | 1991 | 1992 |
| 8 | 8 | 1991 | 1993 |
| 9 | 9 | 1990 | 1993 |
| 10 | 10 | 1989 | 1994 |

☐ ISD had sent an old version of the anonymised ID to ScotXed for them to attach to the education data.

■ Education data was very messy - inconsistencies within data - having to check for consistency within individuals for all variables (very time-consuming!!).

| Unique ID | Gender |
|-------------|--------|
| 1 | М |
| 1 | M |
| 1 | M |
| 1 | M |
| 2 | М |
| 2 2 2 | M |
| 2 | М |
| 3 | F |
| 3 | F |
| 3 | F |
| | |



- □ Data extraction problems delete all education data (January 2014)!!
- New (cleaner!!) dataset received end February 2014.

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Minor Problems (some examples)

- □ Death records for individuals who had further records (health and/or education) after date of death.
 - Most of these death records had been linked to individuals who were multiple birth babies and the death record was actually for their twin: delete death record.
- Mismatch between education and health records based on gender/YOB cross-checks: full exclusion
- ☐ Attainment data where the date of award was after supposed date of school-leaving.
 - Keep the attainment record if the date of award within 1 year of schoolleaving.
 - Assumed this would capture courses that had been taken at school, but had been awarded at a later date due to late submission, but would exclude any courses taken at college.

Benefits

- Large datasets
 - · Rare outcomes
- Range of confounders
- Natural experiments
 - Causal relationships

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Opportunities for Publications

- Inequalities in Perinatal outcomes
 - Fairley L, Leyland AH. Social class inequalities in perinatal outcomes: Scotland 1980-2000. Journal of Epidemiology & Community Health 2006;60:31-36
 - Fairley L, Dundas R, Leyland AH. The influence of both individual and area based socioeconomic status on temporal trends in Caesarean sections in Scotland 1980-2000. BMC Public Health 2011;11:330
- Evaluation of the Health in Pregnancy Grant policy
 - · NIHR Report due soon
 - 5 conference presentations
- ☐ Evaluation of the Healthy Start Voucher Scheme
 - · Linking survey data to routine data
- Educational effects on health of young adults
 - Stewart CH, Leyland AH. The role of educational attainment in explaining the relationship between perinatal conditions and suicidal behaviour in young adults in Scotland: a prospective cohort study
 - Cohort profile paper
 - 4 conference presentations

Final Reflections: What I've Learned

| Linking previously unlinked data is a long process, but it can provide access to large, rich datasets. |
|--|
| Document all the data cleaning decisions that have to be made and any cases that have to be excluded. |

later if data seem more 'messy' than expected.

☐ Get in touch with data custodians sooner rather than

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Final Reflections: What could have been done better?

- ☐ Data custodians could have been better at suggesting further information that I would probably need e.g. continuous inpatient stay variable chance conversation with colleague.
 - Having data agencies and 'experts' that know the data and what is available may help to overcome this.

MRC/CSO Social and Public Health Sciences Unit, University of Glasgow.

Thank you

catherine.stewart@glasgow.ac.uk

ruth.dundas@glasgow.ac.uk



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