Revealing the hidden challenges of making health research reusable

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Multiple pain points threaten research project timelines and later data reuse

Research Idea

- Contact partners
- Grant writing
- Funding approval
- HRA approval
- Ethics approval
- Letters of Support/Honorary contracts

Specification

- Cohort discovery
- Data specification
- •Technical information
- •Pseudonymisation codes
- •Anonymisation method
- •etc

Data extraction, approvals, transfer

- Takes ages
- Contracts
- Risks analysed & signed off
- Extraction
- Anonymisation
- Quality Assurance
- Checked for safety
- Secure transfer

Analysis

- On your laptop
- On HPC
- With collaborators?

Output

- Publication
- Data retained or deleted, but unlinked at project level
- Difficult or impossible to re-use or update

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Solutions are reinvented for each project and often person-specific.

- We want to understand the current process(es) for getting routine data for research from our local NHS
 - "Easy data" that is fast to specify and extract
 - Structured data that needs transformation before transfer
 - Multi-modal data that can't be created through the right query, eg images, vitals
- We want to understand what it took to get (routine) data for health research via the Trusts
 - Which parts of the process went well, with good support from UoB/NHS?
 - Which parts of the process were lengthy or painful?
- This will feed into a project to streamline health data pipelines for both the SDE and our usual research platforms

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Questions for discussion:

Have you requested routine structured or unstructured data from your local NHS trust? More than once?

At which stages did you need the most help?

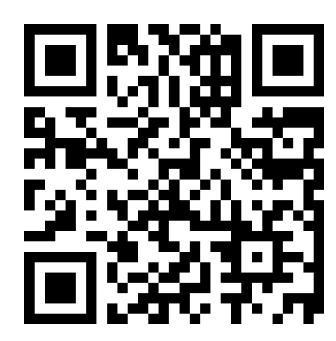
- Proposal development
- Data specification
- Data extraction and transfer
- Analysis and outputs

What kind of assistance did you need?

- Clinical knowledge
- Technical/systems knowledge
- Organisational knowledge

What is essential/desirable for a reproducible process?

• People as well as systems



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What or who made it easier?