

ICES Data & Analytic Services

Jacob Etches, Minnie Ho, Refik Saskin

Approaches to accessing population level health data in Canada Workshop

Agenda

- Overview of Data & Analytic Services
- 2 Public Sector Research
- 3 Private Sector Research



A Little Bit of History

ICES was founded in 1992 to study the health care system and promote effective, efficient and equitable health care in Ontario.

Originally known as the Institute for Clinical Evaluative Sciences, ICES was created as an independent, not-for-profit research institute and given unprecedented access to the health records of Ontarians.

ICES' original focus on hospital-based services has expanded to include community-based health services, health policy, Indigenous health, the social determinants of health, and data science.

Our Mission and Values

Our mission is translating data into trusted evidence that makes policy and health care better and people healthier.



Our values

- We strive for excellence demonstrated by the quality, innovation and rigour for our work.
- We behave with integrity expressed through independence, transparency and impartiality.
- Our work is relevant by providing actionable and timely analyses that lead to improved health equity, outcomes and value and are responsive to health priorities.
- We collaborate through effective partnerships, accessible data and a spirit of openness.
- We are respectful –exemplified by inclusiveness and appreciation of each other, trusted data stewardship, meaningful public engagement and alignment with Ontarian's values and accountability for our funding.

Who Are We?

More than 800 research, data and clinical experts spanning a network of 8 research programs and 7 sites across Ontario.

Governed by a volunteer board of directors and guided by a scientific advisory committee and a public advisory council.



As a prescribed entity under provincial privacy legislation, ICES is a trusted steward of the health records of over 20 million Ontarians, including past and present health card holders.







18 billion

individual records (lines of data)



20 million

patient life histories
Over 25 contiguous years and growing quarterly







100+
structured and semi-structured linked data resources



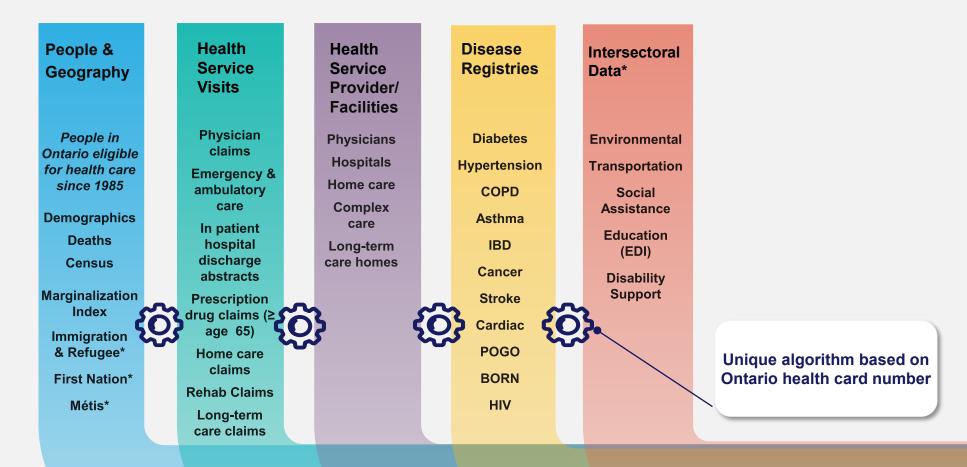
Plus unstructured data

Free-text electronic medical records of



ICES video: The power of data to improve health

ICES Core Data Repository: De-identified and Linkable



* Special governance

Linked data set

Data & Analytic Services



The ICES Data & Analytic Services (DAS) platform was launched in March 2014 as part of the Ontario SPOR Support Unit.

Transforming access to ICES data:

Access to research ready individual level data for researchers Custom linkages with external research data Access to aggregate research data

Data & Analytic Services (DAS)

Ontario Health Quality (OHQ)

Applied Health Research Question (AHRQ) Third Party Research (TPR) for Public Sector Third Party Research (TPR) for Private Sector

Indigenous

Ontario Health Data Platform (OHDP)

PM: Anahita Carbonneau Staff Sci: Michael Campitelli PM: Natasha Fortin PM: Diana An (on leave) Staff Sci: Lesley Plumptre ahrq@ices.on.ca

PM: Stefana Jovanovska Staff Sci: Refik Saskin das@ices.on.ca PM: Keresa Arnold Staff Sci: Jacob Etches das.privatesector@ices.on.ca

Analytics & reporting (research)

PM: Sarah Deck
PM: Jessica Jordao (on leave)
Staff Sci: Graham Mecredy
Staff Sci (MNO): Sarah Edwards
Staff Sci (WAHA): Beth Rachlis
indigenous@ices.on.ca

PM: Raquel Duchen Staff Sci: Luke Mondor Staff Sci: Maria Koh (on leave) ohdp@ices.on.ca

Access to data

Access to data

Analytics and reporting (E M)

Support for longitudinal cohort studies

Analytics and reporting (EPM)

SERVICES AVAILABLE

For Researchers

Information for Public Sector Researchers (ices.on.ca)

Information for Private Sector Researchers (ices.on.ca)

I. ACCESS TO ICES DATA

Researchers, students, policy makers or knowledge users who are affiliated with a publicly funded, not-for-profit organization and who want to obtain and analyze ICES data to answer a research question may submit a request to ICES DAS. DAS staff will contact the requestor to discuss the project's feasibility, timeline and cost. Projects requesting access to data require the approval of a research ethics board.



Data Safe Haven

(DSH)

DAS staff work with requestors to design a research-ready data extract from the ICES data repository using an algorithm that de-identifies data in a way that provides researchers with individual-level data while meeting all privacy standards. Requestors are provided with access to the linked, de-identified data extract on a secure, online research environment, where they can perform analyses and create reports. To ensure privacy policy compliance, linked data cannot be copied or removed from the environment.

II. ANALYTIC SERVICES AND REPORTS – RESEARCH

ICES Data & Analytic Virtual Environment (IDAVE)

In cases where the requestor is not seeking access to individual-level data, DAS can provide analytic services, including results reports based on analysis of ICES data. DAS staff and scientists will perform the analyses that generate the results report, in accordance with specifications provided by the requestor. Projects requesting analytic services for the purposes of research require the approval of a research ethics board.

For Researchers

Information for Public Sector Researchers (ices.on.ca)

Information for Private Sector Researchers (ices.on.ca)

III. ANALYTIC SERVICES AND REPORTS – SYSTEM EVALUATION

Health system policy makers and providers looking to obtain research evidence to inform planning, policy, and program development for the benefit of the entire Ontario health care system are also eligible to submit requests for DAS analytic and reporting services. Requestors will receive results reports that include summary results (e.g., the number of people with a particular medical condition in Ontario in a specific time period, or the number of hospitalizations associated with that condition). DAS staff and scientists will work with the requestor to perform the analyses that generate the results report. Requests for non-research analytic services do not require research ethics board approval.



IV. SUPPORT FOR COHORT AND LONGITUDINAL FOLLOW-UP STUDIES

Researchers interested in receiving a cohort list of applicable individuals for the purposes of conducting publicly funded research may submit a request. ICES DAS may only provide a cohort list for the following purposes, subject to ethics board approval and other conditions that may apply: 1) to abstract or examine data from existing data sources (including but not limited to medical records, disease registries, human biological materials or genetic databases); or 2) to contact physicians or institutions for recruitment in research. DAS staff and scientists will work closely to work with the requestor to ensure the secure provision of minimal information as required to conduct the research.

For Knowledge Users

The Applied Health Research Question (AHRQ) program, an initiative of the Ontario Ministry of Health, is also managed through DAS.

Applied Health Research Question Overview (ices.on.ca)



ICES is an independent, not-for-profit research institute made up of a community of research, data and clinical experts. We work with Ontario's health-related data and aim to inform health system policy and planning to improve the health of all Ontarians. Our organization receives core funding from the Ontario Ministry of Health.

QUESTION PROGRAM

How we support health system organizations

Many organizations across the province rely on research findings to improve the services they provide to their community. The Ministry of Health created the Applied Health Research Question (AHRQ) Program to help Ontario-based organizations connect with health data institutes that provide tailored analytics and information services.

What are AHROs?

AHRQs are research questions posed by health system organizations to obtain evidence that can benefit Ontario's health care system. These organizations, called "Knowledge Users," can submit an AHRQ to ICES and our team completes an analysis for them using our Data Repository. Knowledge Users typically submit an AHRQ to better understand the population they serve, inform health system planning, or develop a policy or program.

You could be eligible if

- You represent a "Knowledge User": an Ontario-based. publicly funded organization seeking data to inform planning, provision of health care services, policy or program development.
- Your question addresses a specific information need or gap that will benefit health care service delivery or policy in Ontario.*
- Your request to conduct research is not readily fundable through other research funding opportunities.

Requests to support specific advocacy positions are neither in scope nor appropriate for the AHRQ program.

Representatives from Indigenous communities or organizations who would like to inquire about AHROs should contact indigenous@ices.on.ca.



Approval Process

- Is the requestor an eligible Knowledge User?
- Is ICES the most appropriate research provider to answer the question?
- Can the AHRQ be answered using ICES data?
- Does the AHRQ identify a gap that will benefit health care service delivery or policy in Ontario?
- Is the scope reasonable, considering the needs of other Knowledge Users?

HOW TO APPLY

You can find the application form with submission details here. Requests can be submitted at any time and are evaluated monthly. AHRQ requests must be approved in writing by a senior decision-maker within the Knowledge User's organization.











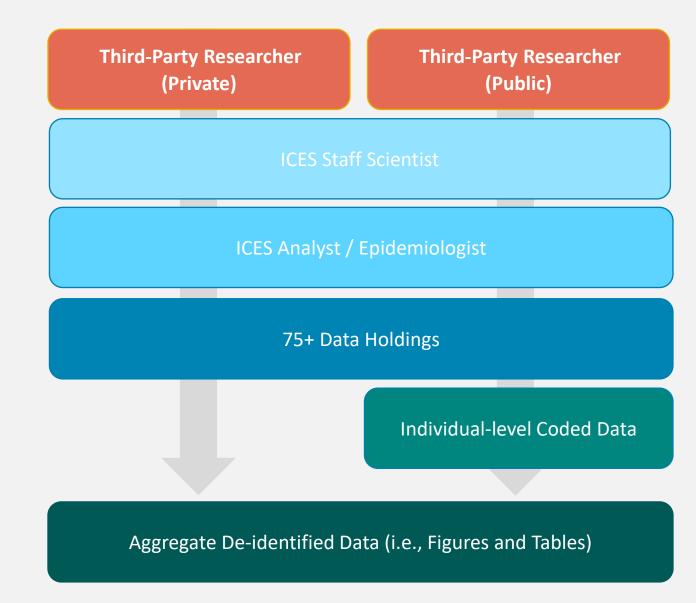
How Third Party Researchers Access ICES "Data"

Who am I

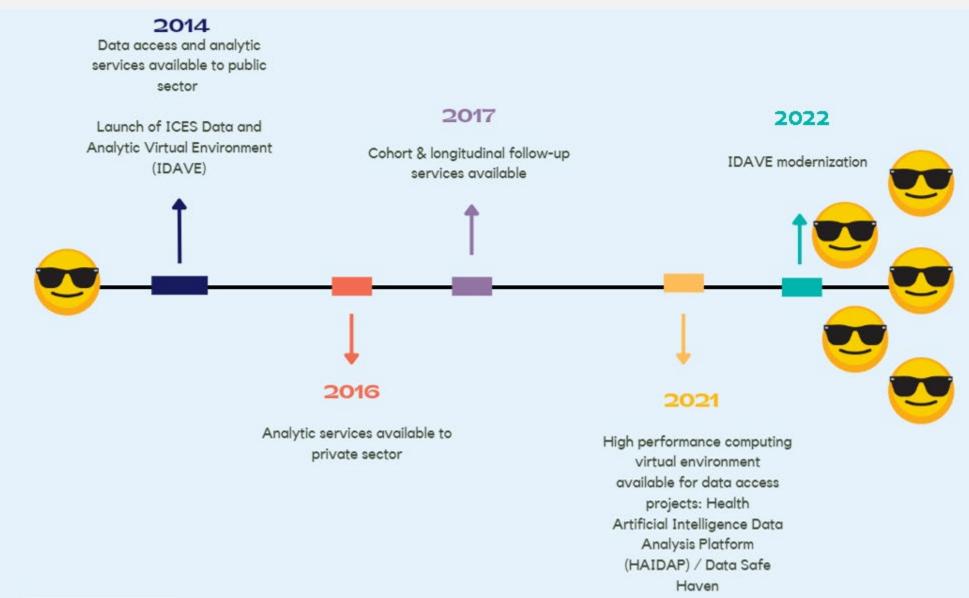
Who can help me

What can I access

What do I receive



Nine Years Young



Steady growth over the years





DATA & ANALYTIC SERVICES TEAM













Eligibility

University, college or hospital-affiliated researchers or students

Publicly-funded, not-for-profit health care agencies

Policy makers

Other knowledge users including not-for-profit organizations

Access to highly risk-reduced coded data

- Available through secure "Virtual Desktop Infrastructure": IDAVE or DSH
- Client performs analyses using analytics software and produces reports
- Re-identification risk assessment is conducted on all research results

Full analytic services

- Data set creation and analysis according to client requirements
- Report generation

Linkage of ICES data holdings with external project-specific data

Data sharing agreement required

Requests by researchers based outside of Canada are supported

ICES Data & Analytic Virtual Environment (IDAVE)

Part of the secure ICES network

Microsoft Office, SAS 9.4, R 4.2.2, Stata 17

IDAVE is fully compliant with IPC requirements:

- Strong password and two-factor authentication are required
- Data cannot be directly copied or transferred out of IDAVE by the end-user
- External peripherals (printers, USB devices, etc.) connected to the user's local computer cannot be used within IDAVE
- Communications with the server are encrypted
- End-users can only access resources they are authorized to access
- No access to the internet within the environment, significantly reducing the probability of malware

Data are on IDAVE. Now what?

We check-in if needed to ensure the datasets are as expected

If changes are required we will arrange for the revisions

We continue to offer advice on:

- Data elements
- Definitions of exposures or outcomes
- Analytic and modelling strategies

Project examples

Neighbourhood factors and Covid-19 case rates

Vaccine distribution approaches for at-risk populations during COVID-19

Long-term impacts of affordable housing

Pneumococcal vaccination in adults with underlying medical and social conditions

Inequalities in lung cancer stage at diagnosis



Who is private sector?































What extra restrictions?

Principles

- 1. Alignment with the ICES mission, vision and values
 - There must be public benefit
- 2. Transparency
 - Full results reports posted 1 year after delivery
 - Full DCP posted 1 year after delivery
 - Identify of clients posted during and after project
- 3. DAS private sector work cannot detract from other ICES research

Data

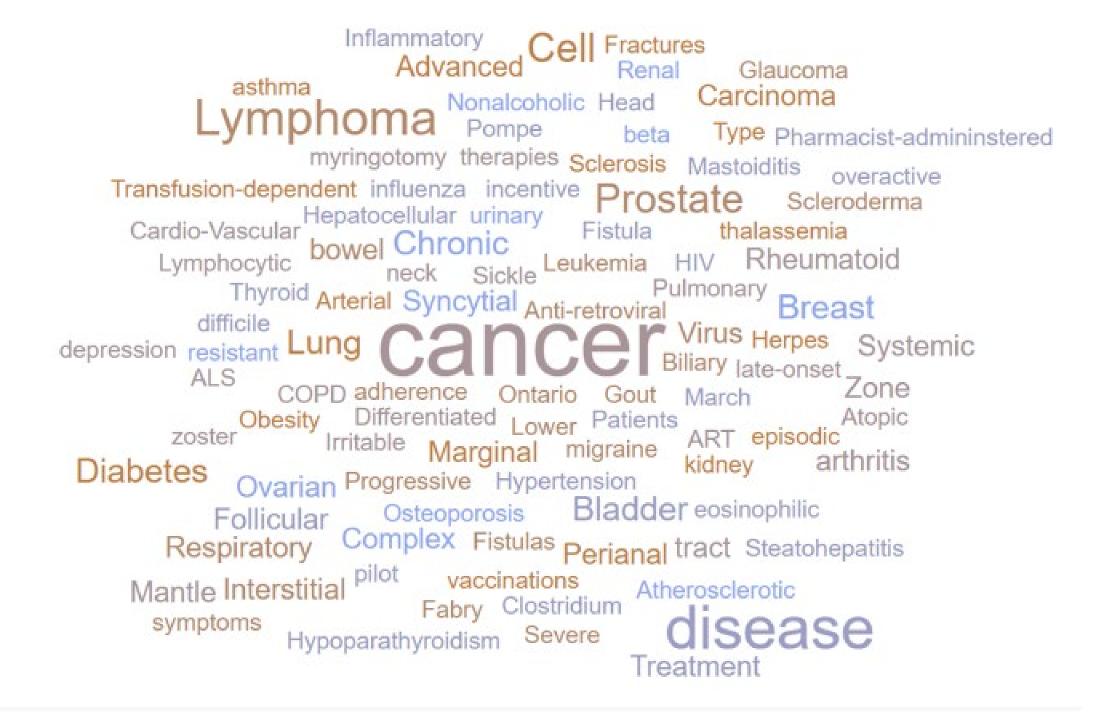
- 1. Certain data not permitted for use by private sector
 - e.g., ORGD, CCHS, CIC, TARGET, OHS
- 2. Certain user fees are different for private sector
- 3. Analytics only
 - Private sector clients currently cannot access data through IDAVE/DSH
 - DAS clients cannot receive cells smaller than 6

What process?

Phases of a private sector project

- 1. First conversation
- 2. Basic feasibility checks
- 3. Protocol
- 4. Confirmation of feasibility
- 5. Services agreement
- 6. REB approval
- 7. Analysis
- 8. Quality control
- 9. Sign-off & debrief
- 10. 1 year later: post all results and DCP publicly

What kinds of projects?



Typical private sector study tables

- 1. Exclusions
- 2. Incidence and prevalence
- 3. Baseline sociodemographic and clinical characteristics
- 4. Matching
- 5. Treatment pathways, lines of therapy & patterns of care
- 6. Health care resource utilization
- 7. Health care costs
- 8. Clinical outcomes
- 9. Overall survival
- 10. Adjusted models of key outcomes
- 11. Stratifications by age, severity, type, comorbidities, follow-up time etc.



Journal of Health Economics and Outcomes Research

Real-World Treatment Patterns, Survival, and Costs for Ovarian Cancer in Canada: A Retrospective Cohort Study Using Provincial Administrative Data

Manjusha Hurry¹, Shazia Hassan², Soo Jin Seung^{2*}, Ryan N Walton¹, Ashlie Elnoursi¹, Jacob D McGee³

ORIGINAL A AstraZeneca Canada, Mississauga, Canada nnybrook Research Institute, Toronto, Canada 3London Health Sciences Centre, London, Canada

WILEY

A retrospective observational population-based study to assess the prevalence and burden of illness of type 2 diabetes with an estimated glomerular filtration rate < 90 mL/min/1.73 m² in

Wally Rapattoni BPharm, MSc ¹ Varun Myageri MEng ² Shar Ali Tehrani BA ² Brad Millson Janssen Inc., Toronto, Ontario, Canada JOVIA, Kirkland, Quebec, Canada Sunnybrook Health Sciences Centre, Toronto, Ontario, C	[©] David Zante MBA ¹ Marko le Golden MSc ² Prerna Grover P MBS ² Sheldon W. Tobe MD ³	D Tomas PharmD ¹ hD ²
Stride, Toronto, Ontario, C	anada	





Examining Treatment Patterns and Real-World Outcomes in Chronic Lymphocytic Leukemia Using Administrative Data

Soo Jin Seung 1,*, Manjusha Hurry 2, Shazia Hassan 1, Ashlie Elnoursi 2, Krystin A. B. Scheider 2, Dennis Wagner 2, in Ontario Jonathan J. Edwin 2 and Andrew T. W. Aw 3

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OXFORD

JNCI Cancer Spectrum (2021) 5(6): pkab082

doi: 10.1093/jncics/pkab082 First published online 1 October 2021

Real-World Use of Androgen-Deprivation Therapy: Intensification Among Older Canadian Men With de Novo Metastatic Prostate Cancer

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Current Oncology

Estimating the Burden of Illness of Relapsed Follicular

Lymphoma and Marginal Zone Lymphoma in Ontario, Canada John Kuruvilla ^{1,2}, Emmanuel M. Ewara ^{3,*}, Julia Elia-Pacitti ⁴, Ryan Ng ⁵, Maria Eberg ⁵, Atif Kukaswadia ⁶

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- Modical Affairs, Janssen Canada Inc., 19 Green Belt Drive, North York, ON M3C 1L9, Canada 10VIA, 16720 Rte Transcanadienne, Kirkland, QC H9H 5M3, Canada Con Century Avenue, Mississauga, ON L5N 6A4, Canada C 7th Floor, Ottawa, ON K2K 3B8, Canada



Contents lists available at ScienceDirect

Journal of Affective Disorders

journal homepage: www.elsevier.com/locate/jad



Research paper

Burden of Treatment Resistant Depression (TRD) in patients with major depressive disorder in Ontario using Institute for Clinical Evaluative Sciences (ICES) databases: Economic burden and healthcare resource utilization



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Contact:

Data & Analytic Services (https://www.ices.on.ca/DAS)

Data Analytic Services

das@ices.on.ca

DAS Private Sector

das.privatesector@ices.on.ca







Accessing Data through the Ontario Ministry of Health

Michael Hillmer Assistant Deputy Minister Digital and Analytics Strategy Division

ICES Research Forum May 11, 2023





Our organization

The Ontario Ministry of Health's **Digital and Analytics Strategy Division** (DASD) is responsible for providing a full suite of data and analytics capabilities to enable the mandates of the Ministry of Health and the Ministry of Long-Term Care.

DASD also provides the government with advice on health system data and digital strategy and works with delivery partners and stakeholders to implement strategic direction and ensure value for money.

Five business branches focused on:

- Health data management
- Health analytics and insights
- Advanced analytics and data science
- Digital strategy
- Information management strategy and policy



Data access and collaboration – Research community

DASD supports and collaborates with the research community through a range of measures including providing access to data platforms, fulfilling direct data requests and engaging in research collaborations with individuals, academic institutions and health care organizations.

Four of our most significant supports include:





Information Management Support Centre





Research Collaborations



IntelliHealth Ontario

IntelliHealth is a repository that has a combination of administrative and clinical data from multiple sectors of the Ontario healthcare system.

Available products, services and supports

- Allows users to access data, create dashboards, reports and query system data.
- Data is available to healthcare organizations supporting reporting and analysis.
- A wide range of data is available to all users in categories such as hospital services, home care, vital statistics and population.
- Other data is offered to specific user groups using access-controlled environments.

Getting access

- Established process where authorized user with an affiliation from an approved organization with a standardized IH user agreement that outlines permitted uses of data. (1000 + current users)
- Detailed information and a link for registration is available on the IntelliHealth website.

Website/Contact IntelliHealth Ontario (gov.on.ca) /IMSupport@ontario.ca



IntelliHealth utilization

Authorization

- IntelliHealth has an established process whereby an authorized user with an affiliation from an approved organization with a standardized IH user agreement that outlines permitted uses of data
- Widely used by diverse group of authorized users to facilitate strategic and operational insights

Data Management Processes

- Data is modeled to include useful calculations, filters and aggregated measures to support ease of use
- IntelliHealth has established data management process linking, de-identification, storage, release of data

Platform As A Service

- Users have the ability to create advance reports and dashboards to support benchmarking and trending.
- User support services (dropin session, training services, help desk)

Data Processing

 IntelliHealth receives authoritative data from multiple data sources and renders the data in a singular platform

Available data

IntelliHealth

Clinical & Administrative Data

- Inpatient Discharges (DAD)
- Ambulatory Visits (NACRS)
- Complex Continuing Care/Long-Term Care (CCRS)
- Inpatient Rehabilitation (NRS)
- Inpatient Mental Health (OMHRS)

Hospital

Daily Bed Census

Bed Segmentation

Home Care

Episodes, Services, Admissions, Assessments

Medical Services

Medical Services

Billing Providers

Population

- Estimates
- Projections

- Population Grouper
- Births and Deaths

Financial

- Ontario Healthcare Financial Statistical (MIS)
- Case Costing

Reference Tables

- Postal Codes mapping to various geographies
- 6 Institution Number Listing

- Ontario Registered Persons (ORP) from RPDB
- Reference Code Tables (ICD-10 CA)

COVaxON

- Dosage and Client information
- Socio-demographic information

CPRO

Waitlist & placement data

Subrogation

Search report

Restricted Access due to PHI

IntelliHealth features



Easily Navigate to different Clinical, Administrative, and Demographic Datasets



Access to Ministry created Standard and Ad-Hoc Reports



Access to Shared Folders for collaborative reporting



Ability to create customized extracts, reports, and dashboards



Link across the continuum of care (e.g., Patients in Ambulatory and Inpatient)

Feature - IntelliHealth custom reporting

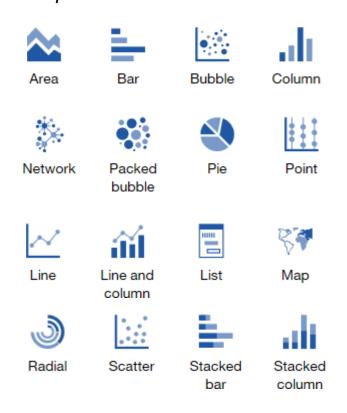


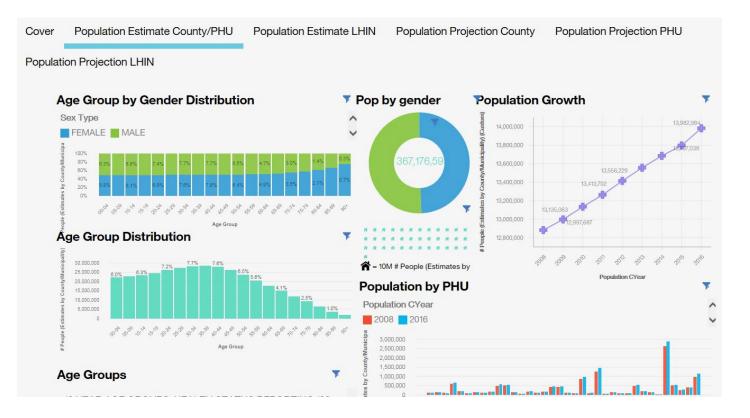




Feature - IntelliHealth custom dashboards

The **Dashboard** feature of IntelliHealth allows users to create multiple visual representations of data that are concise, interactive, and modern sample visualizations available:







The Ontario Health Data Platform

The Ontario Health Data Platform (OHDP) has been built to benefit Ontarians. The platform provides data access to researchers to better detect, plan and respond to the COVID-19 pandemic. This is a collaborative effort by leading public sector organizations to accelerate research and analytics within Ontario to help the province better manage and respond to the pandemic.



Ontario Health Data Platform

The Ontario Health Data Platform (OHDP) COVID-19 is a federated high-performance computing environment for secure, accurate, and privacy-protective linkage of large health datasets that are currently held across various organizations.

Platform allows for big data analytics, including machine learning, that will strengthen evidence for Ontario's ongoing response to COVID-19 and its related impacts.

Products, services and supports

- Data Visitation Model Institution(s) User/Researcher with an affiliation with approved institute and approved REB access data as a service for research and analytics. No data is removed from the platform.
- Platform as a Service Authorized organizations/users can bring their own data and use the platform with all the capabilities.

User profile

 OHDP users include researchers from Ontario-based research and healthcare institutions, knowledge users from organizations i.e., Toronto Public Health, MOH, Office of the Chief Medical Officer of Health, etc.



Ontario Health Data Platform

Getting access

Researcher approval and access provision process in place that includes

- Researcher submits research application online that includes a research ethics board (REB) approved researchplan/protocol
 - (https://redcap.ohdp.ca/surveys/?s=YRY3TMXFWL)
- Thereafter, the MOH leads the application evaluation process from the lens of research priority, computing needs, security and intellectual property
- Once approved, OHDP Research and Privacy
 Agreement between sponsoring
 institution/researcher and the MOH is formalised and access to OHDP is provided to the researcher

User profile

OHDP users include researchers from Ontario-based research and healthcare institutions and knowledge users from organizations (i.e., Toronto Public Health, MOH, Office of the Chief Medical Officer of Health etc.)

Website

https://ohdp.ca

Contact info@ohdp.ca



Information Management Support Centre data requests

DASD's **Information Management Support Centre** (IMSC) coordinates over 3000 data requests per year, covering a broad range of health-related topics, that are used to support policy decisions, audits, communications, and the overall management and function of the provincial health system.

Products, services and supports

- Data reports and feeds sourced from Ministry and CIHI data holdings including, OHIP claims, health card and registration data, hospital data, long-term care waitlist and occupancy data, and financial/statistical data.
- IMSC also facilitates registration and access to Intellihealth along with user support and troubleshooting.

User profile

 OPS staff, Auditor General, College of Physicians and Surgeons of Ontario (CPSO), Law enforcement, Health Service Providers, Researchers, Service Ontario, Media (via Comms), Prescribed Entities (e.g., CIHI, ICES) & Registries (e.g., CorHealth, BORN).



Profile of data request activity

Law Enforcement

Missing persons
Court orders

CPSO

Complaint investigations, Compliance with conditions

MOH & MLTC

Program areas

Program planning & evaluation Service utilization Audits Researchers

Data sharing to support health research and health system planning and evaluation

Office of the Chief Coroner

Coroner's inquests
Death investigations

Other Clients

MAG—Jury Roll Elections Ontario ServiceOntario MCCSS OH

CCO, TGLN data feeds LTC home waitlists & placements Home care Media Requests

FIPPA & PHIPPA requests



Information Management Support Centre

Getting access

Contact IMSupport@ontario.ca to complete a data application form; our team will help to refine requests as needed and advise on data availability and timelines.

Requirements vary depending on purpose for use and the type of data requested:

- Aggregate data generally does not require a data sharing agreement (DSA), whereas record-level data usually does
- Researchers may be required to submit Research Ethics
 Board approval and sign a DSA with the Ministry
- Law enforcement are typically required to submit production orders/coroners warrants to authorize MOH access to and disclosure of Personal Health Information

Contact

IMSupport@ontario.ca



Research collaborations

DASD works to establish and develop **partnerships with internal and external stakeholders** in healthcare and analytics to cultivate innovation, research, and collaboration.

We aim to align research with policy, decision and implementation priorities of Ontario's ministries of health and long-term care.

Collaboration, services and supports

DASD supports research projects in several ways, including participating in projects as
researchers or knowledge users, providing letters of support, offering expedited access to data
through IntelliHealth, and/or providing analytic support with data processing if required.

Accessing support

- The main requirement is that proposed research is aligned with the government priorities.
- Research ethics board approval is also required.

Contact

- DASD's Assistant Deputy Minister's Office and Health Data Science Branch
- E-mail <u>alan.moon@ontario.ca</u> for appropriate referral.



Research collaborations - Select current projects

There are several **active research projects** involving collaborations with researchers and major universities, hospitals and other health care organizations.

Projects generally explore issues of relevance to the provincial health policy agenda.

Some examples of research subjects include:

- Cannabinoid poisonings among elderly
- Covid mortality analysis
- Risk factors and prevalence of concussion due to pandemic
- Prevalence and impact of osteoporosis care gap in Ontario
- Vitamin D analysis
- CMOH study to compare RSV data from I9 and DAD
- Data synthetization





Thank You





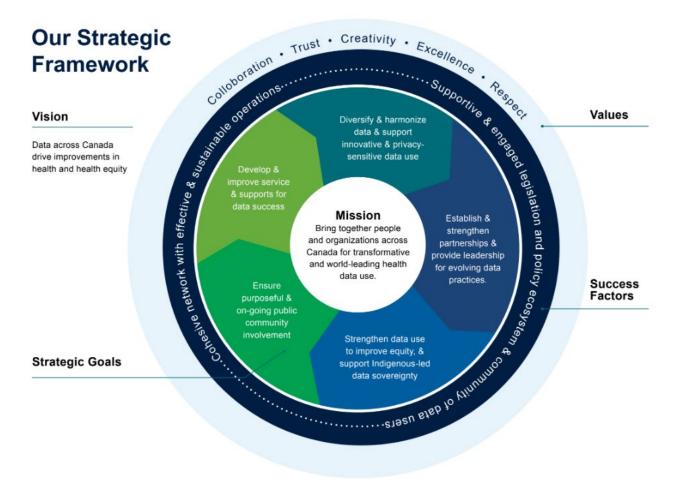


Réseau de recherche sur les données de santé du Canada Health Data Research Network Canada

Session Overview

- ➤ Overview of Health Data Research Network Canada's Data Access Support Hub (DASH) service and process
- ➤ DASH resources and tools available to researchers
- > Tips for requestors

Health Data Research Network Canada (HDRN Canada)



Data Access Support Hub (DASH)

- DASH is a service for researchers conducting multi-regional research
 - Service provided by coordination team of representatives from 13 organizations across Canada
 - Facilitate inquiries re: data access in provincial/territorial and pan-Canadian data centres and help navigate local requirements
 - DASH does not hold data; data resides at the data centres

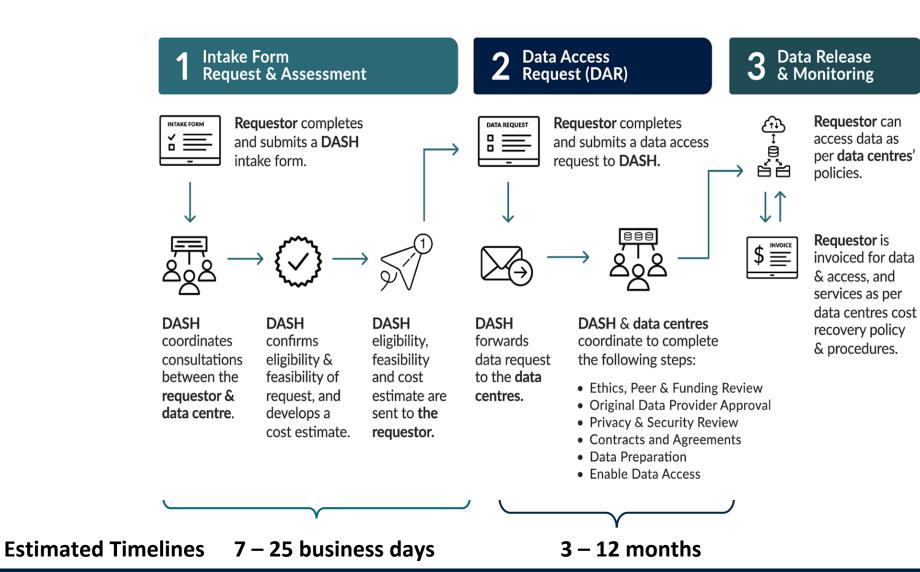




DASH (continued)

- DASH simplifies the data access process by:
 - Providing navigational support and coordination throughout data access request process
 - Offering centralized resources and tools
 - Harmonizing aspects of data access processes across data centres
 - Integrating technological solutions to streamline and progressively automate the DASH request process

DASH Process Overview



Data Assets Available via DASH

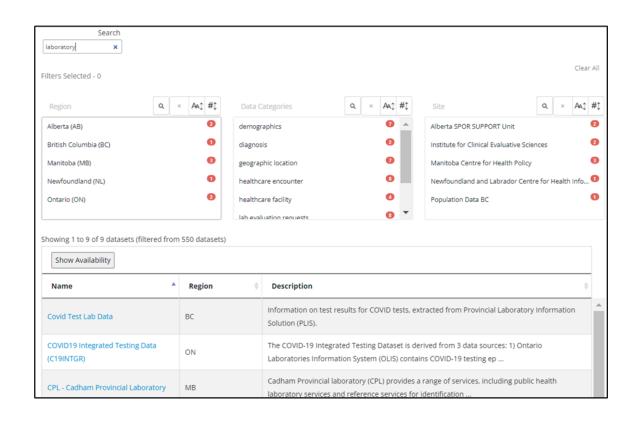
- Data Asset Inventory provides overview of data holdings available
- New data sources being updated on regular basis
- Opportunities for linking researcher collected data to administrative data

Clinical Data Administrative Social Data Data Social **Determinants** gender of Health and Race, ethnicity **Health Equity** Questions Geography (e.g., urban vs. remote, neighborhood income quintile) IIIIIIIgrauon

Innovative Resources

- ➤ Data Assets Inventory

 (https://www.hdrn.ca/en/inventory/)
- > Algorithm Inventory
- Privacy, Ethics and Study Design Considerations
- Web portal with centralized forms



Centralized Tools

DASH web portal integrates forms that are required throughout the data access process

Intake Form

Data Assembly Plan (DAP)

Data Access Request (DAR)
Form & Package

Project information (e.g., objectives, data requirements), services requested, sites of interest

Data requirements, cohort details, data extraction and analysis plan

Project information (funding, public benefit), ethics, data analysis, access and control

Supporting documents (e.g., protocol, ethics approval, consent forms, funding letter)

Tips for requestors

- ✓ Review DASH website resources
- ✓ Become familiar with legislation/policy for disclosure of patient level data, and to the transfer and/or sharing of data across regional boundaries for research use
- √Ensure you have appropriate authority/consent to link researcher
 collected or external data (if applicable)
- √ Have well defined study objectives and data needs
- **✓** Consult with DASH as early as possible for guidance on the above

Thank you!

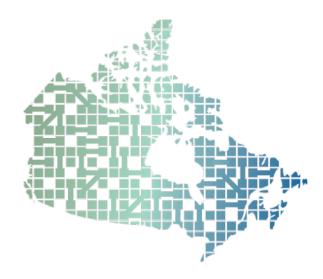
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Questions?