



CLS DAC approved use of NHS Hospital Episode Statistics (HES) data linked to CLS cohort data

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Use of HES data linked to CLS cohort data

The NHS Hospital Episode Statistics (HES) data comprise Admitted Patient Care, Outpatient, Critical Care, and Accident & Emergency. CLS have obtained permission from NHS Digital to link HES data to the four CLS cohort studies: NCDS, BCS70, Next Steps and MCS.

The CLS aims agreed with NHS Digital are the following:

1. CLS data management

Process, store and generate a useful linked HES data resource linked to the CLS cohort data. These processed linked HES data are suitably pseudonymised and de-identified. This work is carried out within the secure UCL server used by CLS (UCL Data Safe Haven).

2. CLS methodological work

Describe and assess the quality of the processed linked HES data and/or their benefit to health and social care, in order to facilitate onward sharing via user training, publication of methodological papers and promotion of policy-related research. This work is carried out within the secure UCL server used by CLS (UCL Data Safe Haven).

The CLS Data Access Committee oversees this internal data access to ensure that CLS staff do not use the linked data for their own research purposes outside of the internal methodological work.

3. Onward sharing via the UK Data Service SecureLab

Safe sharing of the processed linked HES data with the research community where they can be analysed in combination with the cohorts survey data. Researchers, including CLS staff, who want to use the data for research purposes must apply to the UK Data Service.

The applications are reviewed by the CLS Data Access Committee and apply to an independent committee that ensures that the information is used responsibly and safely. Researchers will only be given permission to use the data if they present a strong scientific case and explain the potential impact of the research and its wider value to society.

In addition to the standard UKDS Secure lab licence, access to these linked HES data is governed by a sub-licence between the applicant's institution and UCL, as agreed by NHS Digital.

CLS methodological projects (DAC approved)

CLS DAC ref.	DAC / 113
UKDS project ref.	N/a
Project title	Linkage of National Longitudinal Cohort Studies and Administrative Data: A Mutually Beneficial Arrangement
Institution	Centre for Longitudinal Studies (University College London)
Cohort(s)	NCDS and Next Steps
Plain text abstract	<p>The overall aim of this project is to address several methodological issues at the interface between linked cohort data and administrative data that are mutually beneficial for both data sources: missing data, data quality, residual confounding. This will be undertaken using existing data linkages in health and education with UCL Centre for Longitudinal Studies (CLS) cohorts.</p> <p>We will address the following three methodological research questions, which will be directly reflected in the project work packages:</p> <ol style="list-style-type: none"> 1. How can linked administrative data aid the handling of missing cohort data? 2. How can linked cohort data improve our understanding of the quality of administrative data? 3. How can linked cohort data help address residual confounding in analyses of administrative data? <p>The project will utilise data across two of the world-leading national longitudinal cohort studies run by CLS (1958 National Child Development Study and Next Steps) linked to three sources of administrative data (National Pupil Database, Hospital Episode Statistics and Higher Education Statistics Agency data)</p>
Data requested	<p>Selected variables from</p> <ul style="list-style-type: none"> • SN 8697 National Child Development Study: Linked Health Administrative Datasets (Hospital Episode Statistics), England, 1997-2017: Secure Access • SN 8681 Next Steps: Linked Health Administrative Datasets (Hospital Episode Statistics), England, 1997-2017: Secure Access
Date received	1 December 2020
Date approved	3 March 2021

CLS DAC ref.	DAC / 141
UKDS project ref.	N/a
Project title	Analysis of Mental Health in Young People with Linked Data
Institution	Centre for Longitudinal Studies (University College London)
Cohort(s)	Next Steps
Plain text abstract	<p>There has been increasing policy focus on mental health in recent years given the rising prevalence of anxiety and psychological distress, and the COVID-19 pandemic has brought it into even sharper focus than ever before. In analysing whether mental health services are reaching those most in need, this project has the potential to transform how services are best targeted. The applicants will liaise closely with policymakers to ensure findings reach those designing and delivering services. In providing an in-depth understanding of the changes in mental health in young people over time, and exactly how services are meeting their needs, this work will enable policymakers to better plan and allocate healthcare resources for this generation. The impact on society will be far reaching, with the potential to benefit the lives of several thousands of individuals and their families.</p>
Data requested	<p>Selected variables from:</p> <ul style="list-style-type: none"> • SN 8681 Next Steps: Linked Health Administrative Datasets (Hospital Episode Statistics), England, 1997-2017: Secure Access
Date received	28 January 2022
Date approved	10 February 2022

Research projects for access via the UK Data Service (DAC approved)

CLS DAC ref.	DAC / 119
UKDS project ref.	203391
Project title	Socioeconomic inequalities in perinatal and maternal health care access
Institution	Lancaster University
Cohort(s)	Next Steps
Plain text abstract	In this paper, I will investigate the socioeconomic health inequalities in children's health and access to maternal healthcare. The time from conception to the age of 2 is a critical time for development and can impact physical health, mental health and opportunity throughout life. Health inequalities can be observed in early life as unfavourable birth outcomes. preterm birth, with substantially higher rates among women from more deprived areas both in the UK (de Graaf et al. (2013)). Perinatal mental health problems carry a total economic and social long-term cost to society of about £8.1 billion for each one-year cohort of births in the UK.
Data requested	Selected variables from the following NHS Hospital Episode Statistics datasets: Admitted Patient Care, Outpatient, Critical Care, and Accident & Emergency. These datasets are pseudonymised, de-identified, and available via the UK Data Service Secure Lab, as follows: <ul style="list-style-type: none"> • SN 8681 Next Steps: Linked Health Administrative Datasets (Hospital Episode Statistics), England, 1997-2017: Secure Access
Date received	21 June 2021
Date approved	13 July 2021

CLS DAC ref.	DAC / 137
UKDS project ref.	204521
Project title	Health Outcomes of Care Experienced Young People
Institution	University of Edinburgh
Cohort(s)	Next Steps
Plain text abstract	This project aims to look at what experiences affect the mental health of care experienced people. Understanding this is important given the high rates of poor mental health amongst this population compared to their non-care counterparts. Statistical tests shall be run to assess whether or not key experiences throughout the life-course e.g., parental socio-economic status, care

	<p>placement, length of time in care, poverty, housing, etc. are associated with mental health outcomes. This includes an assessment of their positive and negative effects at different ages.</p> <p>Having an awareness of what affects the mental health of care experienced people will contribute towards our understanding of what can be done to effectively support this population. Specifically, it will allow us to develop policies, services and practices that are best placed to both support positive outcomes and protect against poor mental health for this population.</p>
Data requested	<p>Selected variables from</p> <ul style="list-style-type: none"> • SN 8681 Next Steps: Linked Health Administrative Datasets (Hospital Episode Statistics), England, 1997-2017: Secure Access
Date received	29 October 2021
Date approved	4 October 2022