Survival_Analysis_GROUP 1

Diana Nduku - 665419, Chesia Anyika - 665567, Zak 2024-06-08

```
#libraries used
library(readxl)
library(tidyverse)
```

```
## — Attaching core tidyverse packages -
                                                                – tidyverse 2.0.0 —
## ✓ dplyr
             1.1.0
                        ✓ readr
                                    2.1.4
## ✓ forcats
             1.0.0

✓ stringr
                                     1.5.0
## ✓ ggplot2 3.5.0

✓ tibble

                                     3.2.1
## ✓ lubridate 1.9.2

✓ tidyr

                                     1.3.0
## ✓ purrr
              1.0.1
## — Conflicts
                                                          - tidyverse conflicts() —
## * dplyr::filter() masks stats::filter()
## * dplyr::lag()
                   masks stats::lag()
## i Use the ]8;;http://conflicted.r-lib.org/conflicted package]8;; to force all conflicts to become errors
```

```
library(survival)
library(summarytools)
```

```
##
## Attaching package: 'summarytools'
##
## The following object is masked from 'package:tibble':
##
## view
```

```
library(ggfortify)
library(survival)
library(survminer)
```

```
## Loading required package: ggpubr
##
## Attaching package: 'survminer'
##
## The following object is masked from 'package:survival':
##
## myeloma
```

```
st_options(use.x11 = FALSE)
```

Question 1

The "Patient Data" dataset requires re-coding of several columns to enhance the analysis of patient responses. The columns to be modified include Pleasure_Doingthings, Depressed, Sleep, Energy, Appetite, Bad_About_Myself, Concentration, Speak_Slowly, and Thoughts. These will be re-coded to quantify the level of difficulty patients experience as follows:

- 0 for Not difficult
- 1 for Somewhat difficult
- 2 for Very difficult
- 3 for Extremely difficult.

This systematic re-coding aims to standardize the entries, thereby simplifying the data analysis process and ensuring consistency across the data-set.

1.1 Data Overview

Load the "Patient Data" data-set and examine the structure of key columns for our analysis.

```
#import the dataset
library(readxl)
patient_data <- read_excel("Patient Data.xlsx")</pre>
```

```
## New names:
## • `` -> `...8`
## • `Current_Condition` -> `Current_Condition...18`
## • `Current_Condition` -> `Current_Condition...65`
## • `Kidney_Condition` -> `Kidney_Condition...72`
## • `Kidney_Condition` -> `Kidney_Condition...107`
```

```
## # A tibble: 198 × 9
##
      Pleasure doingthings Depressed
                                               Sleep Energy Appetite Bad_About_Myself
##
      <chr>
                                               <chr> <chr> <chr>
                                                                    <chr>
                            <chr>
##
    1 Somewhat
                            Not difficult
                                               Some... Somew... Not dif... Not difficult
##
    2 Very difficult
                            Not difficult
                                               Not ... Not d... Somewhat Not difficult
    3 Extremely difficult Very difficult
                                               Not ... Extre... Not dif... Not difficult
##
## 4 Somewhat
                                               Very... Very ... Somewhat Not difficult
                            Not difficult
## 5 Somewhat
                                               Very... Somew... Somewhat Very difficult
                            Not difficult
## 6 Extremely difficult Somewhat
                                               Very... Extre... Somewhat Very difficult
##
    7 Somewhat
                            Extremely diffic... Very... Very ... Somewhat Somewhat
    8 Extremely difficult Not difficult
                                               Not ... Not d... Extreme... Not difficult
## 9 Somewhat
                            Not difficult
                                               Some... Somew... Not diff... Not difficult
                            Not difficult
                                               Some... Somew... Somewhat Not difficult
## 10 Not difficult
## # i 188 more rows
## # i 3 more variables: Concentration <chr>, Speak Slowly <chr>, Thoughts <chr>
```

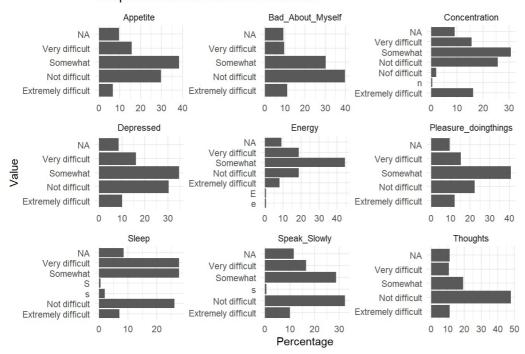
We then found the unique factors of the columns of interest and visualized them using bar plots.

```
##TRANSFORM DATA-FRAME FOR PLOTTING
#create dataframe in long format
long_data <- mental_health %>%
    pivot_longer(cols = everything(), names_to = "Variable", values_to = "Value")

##PLOT BARPLOTS
#plot barplots
ggplot(long_data, aes(x = Value, y = (..count..)/sum(..count..))) +
geom_bar(aes(y = ..prop.. * 100, group = 1), stat = "count") +
facet_wrap(~ Variable, scales = "free") +
theme(axis.text.x = element_text(angle = 90, vjust = 0.5, hjust = 1)) +
labs(title = "Unique Factors for Selected Columns",
    x = "Value",
    y = "Percentage") +
theme_minimal() + coord_flip()
```

```
## Warning: The dot-dot notation (`..prop..`) was deprecated in ggplot2 3.4.0.
## i Please use `after_stat(prop)` instead.
## This warning is displayed once every 8 hours.
## Call `lifecycle::last_lifecycle_warnings()` to see where this warning was
## generated.
```

Unique Factors for Selected Columns



Interpretation:

The plot reveals data entry errors in several mental health variables, where unexpected values such as e, E, n, s, and S appear. Specifically, the "Energy" variable contains e and E, "Speak_Slowly" contains s and S, and "Concentration" contains n. These values likely result from typos or coding mistakes and should be corrected to align with existing categories or treated as missing data to ensure accurate analysis and interpretation.

1.2 Data Preprocessing

To address the data entry errors identified in the mental health variables, we implement a cleaning process by replacing the erroneous values with their correct categories.

The bar plots showed that the variables were not standardized and contained not only the four expected categories—Not difficult, Somewhat, Very difficult, and Extremely difficult—but also single-letter responses like 'n', 's', and 'e', as well as NA entries. To standardize the data, we recoded these values as follows:

- s and S were recoded as "Somewhat"
- e and E were recoded as "Extremely difficult"
- n and Nof difficult were recoded as "Not difficult"
- NA values were left unchanged

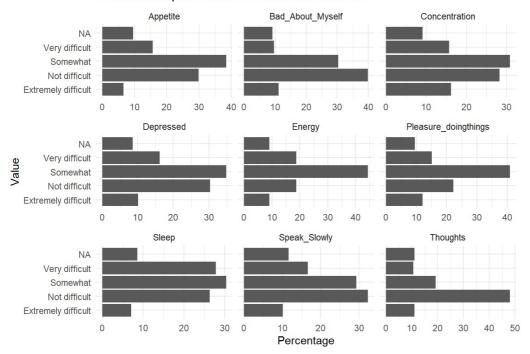
This cleaning process ensured that the dataset was consistent and ready for accurate analysis.

After implementing the data cleaning process, the updated bar plots no longer contain the previously identified errors. The variables are now contain only the expected categories: Not difficult, Somewhat, Very difficult, and Extremely difficult. Additionally, NA values remain unchanged

```
#create dataframe in long format
long_data <- mental_health %>%
    pivot_longer(cols = everything(), names_to = "Variable", values_to = "Value")

#plot barplots
ggplot(long_data, aes(x = Value, y = (..count..)/sum(..count..))) +
geom_bar(aes(y = ..prop.. * 100, group = 1), stat = "count") +
facet_wrap(~ Variable, scales = "free_x") +
theme(axis.text.x = element_text(angle = 90, vjust = 0.5, hjust = 1)) +
labs(title = "Cleaned Unique Factors for Selected Columns",
    x = "Value",
    y = "Percentage") +
theme_minimal() + coord_flip()
```

Cleaned Unique Factors for Selected Columns



We recoded categorical responses into numerical values to facilitate numerical analysis. Specifically, we converted the responses as follows:

Not difficult to 0, Somewhat to 1, Very difficult to 2, and Extremely difficult to 3. Any other values were set to NA to ensure the columns remain numeric.

```
# A tibble: 6 × 9
##
     Pleasure_doingthings Depressed Sleep Energy Appetite Bad_About_Myself
##
                      <dbl>
                                <dbl> <dbl>
                                               <dbl>
                                                         <dbl>
                                                                           <dbl>
## 1
                                     0
                                                             0
                                                                               0
                          1
                                            1
                                                   1
##
   2
                          2
                                     0
                                            0
                                                   0
                                                             1
                                                                               0
## 3
                          3
                                     2
                                           0
                                                   3
                                                             0
                                                                               0
## 4
                                     0
                                                                               0
                          1
                                            2
                                                   2
                                                             1
## 5
                                     0
                                                                                2
                          1
                                                   1
                                                             1
## 6
                          3
                                     1
                                            2
                                                   3
                                                             1
                                                                                2
## # i 3 more variables: Concentration <dbl>, Speak Slowly <dbl>, Thoughts <dbl>
```

1.2.1 Missing Data Proportion

To better understand the quality and completeness of the data-set, we calculated the number and proportion of missing values for each variable. This information is crucial for deciding how to handle missing data in subsequent analyses. For instance, columns with higher proportions of missing data, such as **Speak_Slowly** (11.616%) and **Thoughts** (11.111%), may require special attention, such as data imputation.

```
#compute count and proportion of missing values
count_missing_values <- function(data) {
  missing_counts <- sapply(data, function(x) sum(is.na(x)))
  missing_proportion <- sapply(data, function(x) round(mean(is.na(x)) * 100, 3))
  result <- data.frame(
    colname = names(missing_counts),
    missing_count = missing_counts,
    missing_proportion = missing_proportion,
    row.names = NULL
  )
  return(result)
}
#view results
count_missing_values(mental_health_recoded)</pre>
```

##	colname missing_count missing_proportion			
##	1 Pleasure_doingthings	19	9.596	
##	<pre>Depressed</pre>	17	8.586	
##	3 Sleep	17	8.586	
##	4 Energy	18	9.091	
##	5 Appetite	19	9.596	
##	<pre>6 Bad_About_Myself</pre>	18	9.091	
##	7 Concentration	18	9.091	
##	8 Speak_Slowly	23	11.616	
##	9 Thoughts	22	11.111	

Imputation

After identifying the missing values in the data-set, we proceeded to impute these missing values with the mode of their respective columns. This method was chosen because it efficiently preserves the categorical nature of the data by replacing missing values with the most frequently occurring category, ensuring the integrity of the variable's distribution and avoiding the introduction of bias that could arise from more complex imputation techniques.

The table confirms that all columns now have zero missing values, with both the count and proportion of missing values reduced to 0. This ensures that the data-set is complete and ready for further analysis without the need for additional handling of missing data

```
# Define a function to impute missing values with the mode
impute_mode <- function(x) {
  mode_value <- names(sort(table(x), decreasing = TRUE))[1]
  x[is.na(x)] <- mode_value
  return(x)
}

# Apply the function across columns - ensure result is a numeric dataframe
mental_health_imputed <- lapply(mental_health_recoded, impute_mode)
mental_health_imputed <- as.data.frame(lapply(mental_health_imputed, as.numeric))

#view results
count_missing_values(mental_health_imputed)</pre>
```

##	## colname missing_count missing_proportion				
##	1 Pleasure doingthings	0	0		
##	<pre>2 Depressed</pre>	0	0		
##	3 Sleep	0	0		
##	4 Energy	0	0		
##	5 Appetite	0	0		
##	<pre>6 Bad_About_Myself</pre>	0	0		
##		0	0		
##	8 Speak Slowly	0	Θ		
##	· -	0	0		

1.3 Data Transformation

1.3.1 Introduce a sum Variable

To enhance the analysis of the data-set, we introduced a new variable, <code>sum_coded</code>, representing the sum of the scores from seven mental health variables. This sum variable provides an overall score for each patient's mental health evaluation. We categorized these scores into different levels of depression severity based on the following value ranges:

Value Range	Factor
0-4	None-Minimal
5-9	Mild depression
10-14	Moderate depression
15-19	Moderately Severe
20-27	Severe depression

```
#compute rowsums and create new variable
row_sum <- rowSums(mental_health_imputed)
mental_health <- mental_health_imputed %>% mutate(sum_coded = row_sum)

#view results
mental_health$sum_coded
```

```
[1] 5 6 14 8 7 18 16 6 11 4 17 19 16 6 7 3 6 18 9 2 18 11 25
##
##
   [26] 22 17 27 14 4 17 6 5 6 5 15 22 24 0 16 22 11 27
                                                    0 10 10 5 4
##
   [51] 19 10 1 10 4 11 3 4 5 10 10 8 0 1 4 10 9 2 4 9 10 0 7
  [76] 4 3 6 5 19 10 8 10 7 7 8 12 10 10 18 4 6 8 5 10 4 8 6 2 3
##
## [101] 10 15 0 14 9 0
                      7
                         3
                            0 7
                                 8 7 16 11 19 9
                                               9
                                                  6 5 5 21 10 12 14 19
## [126] 4 6 18 8 17 8
                      5
                         7
                           1 4
                                 0
                                  4 7 4 12 14 5
                                                  7 15
                                                       9 16 8 12 14 12
## [151] 14 6 4 8 6 6 6 6 15 10 6 0 15 19 6 5 24 0 7
                                                       2 10 15 12 23 27
## [176] 3 12 7 0 12 7 4 18 11 4 17 0 27 10 6
                                             6 6 6 6 6 6 6
```

1.3.2 Categorizing Sum Variable

We categorize the <code>sum_coded</code> variable into different levels of depression severity.

```
#categorize sum variable
mental_health <- mental_health %>%
  mutate(depression_severity = case_when(
    sum_coded >= 0 & sum_coded <= 4 ~ "None-Minimal",
    sum_coded >= 5 & sum_coded <= 9 ~ "Mild depression",
    sum_coded >= 10 & sum_coded <= 14 ~ "Moderate depression",
    sum_coded >= 15 & sum_coded <= 19 ~ "Moderately Severe",
    sum_coded >= 20 & sum_coded <= 27 ~ "Severe depression"
))

#convert to factor variable and specify levels
mental_health$depression_severity <- factor(mental_health$depression_severity, levels = c("None-Minimal", "Mild depression", "Moderate depression", "Moderately Severe", "Severe depression"))

#view results
head(mental_health %>% select(sum_coded, depression_severity))
```

```
sum coded depression severity
## 1
            5
                   Mild depression
## 2
            6
                   Mild depression
## 3
            14 Moderate depression
## 4
            8
                   Mild depression
## 5
            7
                   Mild depression
## 6
            18
                Moderately Severe
```

1.3.3 Distribution of Depression Severity Levels

The bar plot reveals that the majority of individuals fall into the *None-Minimal and Mild depression categories, indicating that most have little to no depression symptoms*. Moderate depression is also relatively common, while Moderately Severe and Severe depression are less frequent.

Severe depression Moderately Severe Mild depression None-Minimal O 10 20 30 40 Percentage

1.3.4 Comparison of Depression Severity with Residential Status

We then compared the depression_severity variable to the Facility_type variable. The Facility_type variable has two responses, which we will re-code as follows:

- Resident as In-patient
- Non Resident as Homecare

We first prepared the Facility_Type variable for analysis by examining its unique values and standardizing the responses to remove any errors. We found that the Facility Type variable has the following unique values:

- Resident
- Non Resident
- non Resident
- NA

```
#Add Facility_Type Variable
mental_health$Facility_Type <- patient_data$Facilty_Type

#View unique values
unique(mental_health$Facility_Type)</pre>
```

```
## [1] "Non Resident" "non Resident" "Resident" NA
```

We converted all non Resident responses to Non Resident, for standardization, and recoded the variables.

```
## [1] "Homecare" "Homecare" "Homecare" "Homecare" "Homecare"
```

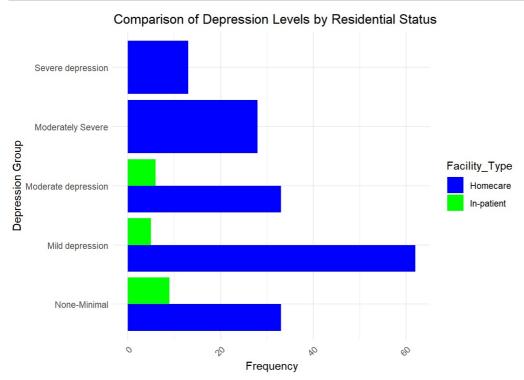
We then ran a chi-square test to determine whether there is a statistically significant relationship between the two variables. We used simulated p-values due to low value counts. The p-value obtained is 0.02249 is less than the conventional significance level of 0.05. Thus there is a statistically significant association between depression severity and residential status.

```
##
##
                          Homecare In-patient
##
     None-Minimal
                                33
##
     Mild depression
                                62
##
     Moderate depression
                                33
                                             6
##
                                28
                                             0
     Moderately Severe
##
     Severe depression
                                13
                                             0
```

```
##
## Pearson's Chi-squared test with simulated p-value (based on 2000
## replicates)
##
## data: mental_health_na_omitted$depression_severity and mental_health_na_omitted$Facility_Type
## X-squared = 11.714, df = NA, p-value = 0.01749
```

We then plotted a side-by-side bar-plot of depression severity levels in relation to residential status of the patients. The bar-plot shows that Inpatients have non-minimal to moderate depression, with most In-patients having non-minimal depression. Homecare patients range from non-minimal to severe depression, with most homecare patients having mild depression. Thus most patients regardless of residential status tend to have lower levels of depression.

When comparing the two categories, homecare patients entirely occupy the moderately severe and severe depression categories, *suggesting that* homecare patients have more severe depression levels than Inpatients.



1.4 Survival Analysis

1.4.1 Preprocess

Let us examine the unique values in the Date Ended column in the patient data data-frame.

```
#view unique values
unique(patient_data$Date_Ended)
```

```
## [1] "Ongoing"
                    "45410"
                               "45383"
                                            "45317"
                                                                    "45627"
                                                        NA
## [7] "45443"
                    "45322"
                               "45323"
                                            "45419"
                                                        "45333"
                                                                    "45376"
## [13] "45065"
                    "45174"
                                "44805"
                                            "45257"
                                                        "45138"
                                                                    "45200"
## [19] "45347"
                    "45214"
                                "44682"
                                            "45170"
                                                        "45386"
                                                                    "45375"
## [25] "45290"
                    "45275"
                                "45371"
                                            "45270"
                                                        "45427"
                                                                    "45381"
## [31] "44972"
                    "44910"
                                "45153"
                                            "45122"
                                                        "45031"
                                                                     "44941'
                    "45421"
## [37] "45415"
                                "45428"
                                            "45378"
                                                        "45434"
                                                                     "45422"
## [43] "45413"
                    "45395"
                                "45394"
                                                        "04/12/923" "45295"
                                            "45245"
## [49] "45366"
                    "45411"
                                "45426"
                                            "45393"
```

The dates are encoded in the Excel Serial Number Format for dates, which requires us to change the dates to from an integer to the P0SIXct date-time format. Furthermore, there is an 'Ongoing' entry, which represents the date 04/06/2024. There is also an error 04/12/923 which should be converted to an NA value.

```
#Convert all 'ongoing' to appropriate date
patient_data$Date_Ended <- ifelse(patient_data$Date_Ended == 'Ongoing', "2024-06-04", patient_data$Date_Ended)

#convert error to an NA value
patient_data$Date_Ended <- ifelse(patient_data$Date_Ended == '04/12/923', NA, patient_data$Date_Ended)

#convert dates to POSIXct
date <- patient_data$Date_Ended
date_b = date[!is.na(date) & date != "2024-06-04"]
date[!is.na(date) & date != "2024-06-04"] = as.character(as.Date(as.numeric(date_b), origin = "1899-12-30"))

#add dates to original dataframe, view results
patient_data$Date_Ended <- date
patient_data$Date_Ended <- as.POSIXct(patient_data$Date_Ended)

unique(patient_data$Date_Ended)</pre>
```

Let us also ensure that the Date Started variable is in the same POSIXct format as the Date Ended variable.

```
#view format of date_started variable
class(patient_data$Date_Started)
```

```
## [1] "POSIXct" "POSIXt"
```

Let us then rename an unspecified column to Event for clarity, and selects key columns Date_Started, Date_Ended, Event, Marital, Length Separated etc to streamline the data-set for survival analysis.

```
#rename ...8 column to event
patient_data <- patient_data %>% rename(Event = '...8')

#create subset of variables of interest
subset_data <- patient_data %>% select(Date_Started, Date_Ended, Event, Marital, Length_Separated, Reason_Caregiv
er)

subset_data$Facility_Type <- mental_health$Facility_Type ; subset_data</pre>
```

```
## # A tibble: 198 × 7
##
     Date Started
                         Date Ended
                                             Event Marital Length_Separated
##
      <dttm>
                                             <chr> <chr>
   1 2024-04-16 00:00:00 2024-06-04 00:00:00 <NA> Widowed More than 5 years
##
   2 2022-12-06 00:00:00 2024-06-04 00:00:00 <NA> Widowed More than 5 years
##
   3 2024-01-29 00:00:00 2024-06-04 00:00:00 <NA> Widowed More than 5 years
   4 2024-04-01 00:00:00 2024-04-28 00:00:00 Died Married NA
##
   5 2024-04-01 00:00:00 2024-06-04 00:00:00 <NA> <NA>
##
                                                           <NA>
   6 2024-03-01 00:00:00 2024-06-04 00:00:00 <NA> Widowed More than 5 years
## 7 2024-03-01 00:00:00 2024-06-04 00:00:00 <NA> Married <NA>
   8 2024-01-01 00:00:00 2024-06-04 00:00:00 <NA> Married <NA>
##
   9 2024-04-01 00:00:00 2024-06-04 00:00:00 <NA> Married <NA>
## 10 2023-12-01 00:00:00 2024-06-04 00:00:00 <NA> Married <NA>
## # i 188 more rows
## # i 2 more variables: Reason Caregiver <chr>, Facility Type <chr>
```

Add new columns to indicate the status of an event (1 for Ended , 0 otherwise) and calculates the survival time in days between <code>Date_Started</code> and <code>Date_Ended</code> .

```
## # A tibble: 198 × 2
##
     Facility_Type status
##
## 1 Homecare
                        0
##
   2 Homecare
                         0
   3 Homecare
##
   4 Homecare
                        1
## 5 Homecare
## 6 Homecare
## 7 Homecare
                         0
## 8 Homecare
                        0
   9 Homecare
                         0
## 10 Homecare
                         0
## # i 188 more rows
```

We then checked for any negative survival times, and found four columns with negative survival times.

```
#check for negative survival times
neg.times <- subset_data[subset_data$survival_time < 0 & !is.na(subset_data$survival_time), ]
#view results
neg.times[8]</pre>
```

```
## # A tibble: 4 × 1
## status
## <dbl>
## 1     0
## 2     0
## 3     1
## 4     0
```

We dealt with these values by getting the absolute values of these entries, assuming an error in inputting the beginning and ending dates. There are no more negative values.

```
## # A tibble: 0 × 9
## # i 9 variables: Date_Started <dttm>, Date_Ended <dttm>, Event <chr>,
## # Marital <chr>, Length_Separated <chr>, Reason_Caregiver <chr>,
## # Facility_Type <chr>, status <dbl>, survival_time <dbl>
```

1.4.2 Compute Survival Function (Kaplan Meier)

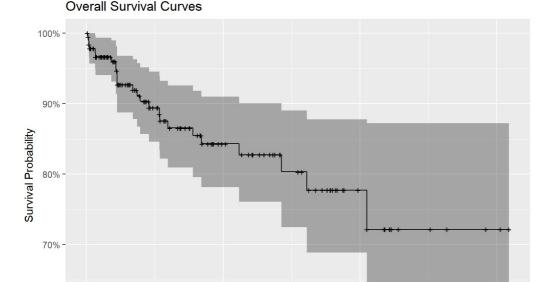
Overall Survival Curve

The survival curve from the data-set shows that survival probability starts at 100% and experiences significant declines early on, indicating a higher event rate at the beginning. As time progresses beyond approximately 200 days, the curve stabilizes, suggesting fewer events occur as time advances. The presence of markers along the curve indicates censored data, where some events have not been observed by the study's end. This pattern suggests an initial vulnerability period followed by a plateau in event likelihood, typical in survival analyses used to understand event timing and risk factors in various fields.

```
table(subset_data$status)
```

```
##
## 0 1
## 173 25
```

```
surv_fit <- survfit(Surv(survival_time, status) ~ 1, data=subset_data)
autoplot(surv_fit) + labs(x = "Time", y = "Survival Probability", title = "Overall Survival Curves")</pre>
```



Time

400

Survival Curve by Residential Status

0

60%

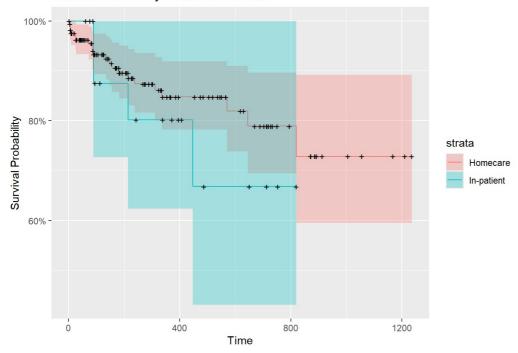
The survival curve graph shows that both the "Homecare" and "In-patient" groups start with a 100% survival probability. Over time, the "Homecare" group, represented by a blue line, maintains higher survival probabilities, with a slower decline compared to the "In-patient" group, represented by a red line. For instance, at the 400-day mark, the survival probability for the "Homecare" group is around 80%, while the "In-patient" group drops to approximately 60%. This indicates that individuals in home care have better survival outcomes over time compared to those who are in-patients.

800

1200

```
#survival curve
surv_fit2 <- survfit(Surv(survival_time, status) ~ Facility_Type, data=subset_data)
autoplot(surv_fit2) + labs(x = "Time", y = "Survival Probability", title = "Survival Curves by Residential status")</pre>
```

Survival Curves by Residential status



Log-Rank Test

The log-rank test is commonly used in survival analysis to compare the survival distributions of two or more groups (strata) to determine if there are statistically significant differences between them.

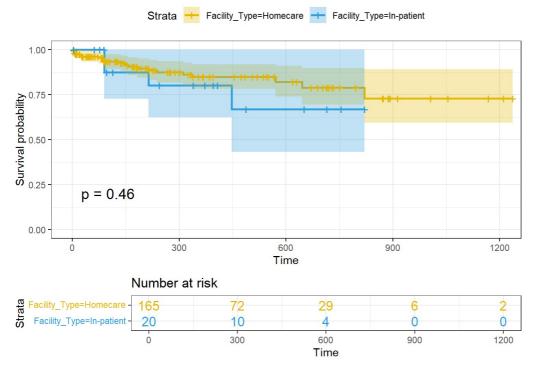
In the below Log-Rank analysis with 185 total observations (13 excluded due to missing data), the chi-squared statistic is 0.6 with 1 degree of freedom, resulting in a p-value of 0.5, which is greater than the conventional significance level of 0.05. This p-value suggests that there is no statistically significant difference in survival between the groups Homecare and In-patient, as the observed differences in survival times are not likely to be due to chance. Therefore, based on these results, we do not reject the null hypothesis that the survival distributions across different facility types are similar

```
surv_diff <- survdiff(Surv(survival_time, status) ~ Facility_Type, data=subset_data); surv_diff</pre>
```

```
## Call:
## survdiff(formula = Surv(survival_time, status) ~ Facility_Type,
##
       data = subset_data)
##
##
   n=185, 13 observations deleted due to missingness.
##
##
                              N Observed Expected (0-E)^2/E (0-E)^2/V
                                                      0.0623
## Facility Type=Homecare
                            165
                                       21
                                             22.18
                                                                 0.553
## Facility_Type=In-patient 20
                                        4
                                              2.82
                                                      0.4893
                                                                 0.553
##
    Chisq= 0.6 on 1 degrees of freedom, p= 0.5
##
```

Log Rank Test on Kaplan Meier Curve

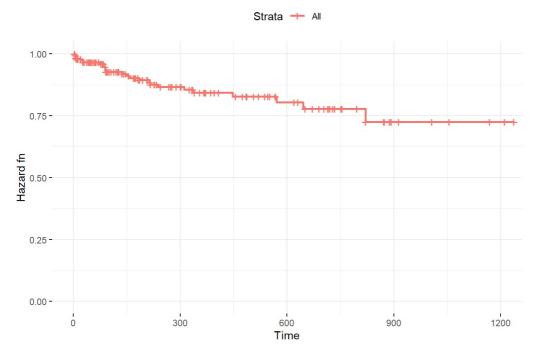
In the below curve, the p-value of 0.46 is greater than the conventional significance level of 0.05, thus this indicates no statistically significant difference between the two groups' survival curves. While both groups start with high survival probabilities, the "Homecare" group maintains slightly higher probabilities over time. The number at risk decreases from 165 to 60 for "Homecare" and from 200 to 90 for "In-patient." This suggests that residential status does not significantly impact survival outcomes based on this data.



1.4.3 Compute Hazard Function

The plot represents the cumulative hazard function over 1236 time units, showing the total hazard accumulated over time. Initially, the hazard increases steeply, indicating a high risk of the event occurring early on. After about 300 time units, the curve flattens, suggesting a decrease in the event rate as time progresses. The consistent error bars across the plot reflect uniform precision in the hazard estimates. This type of analysis is essential in fields like medical research to understand risk dynamics and plan interventions.

Hazard Function



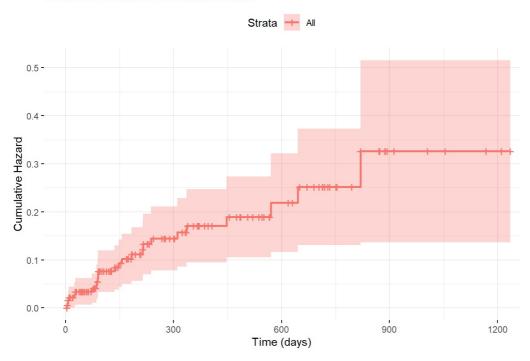
1.4.4 Compute Cumulative Hazard Function

Overall Cumulative Hazard Function

The Cumulative Hazard Function graph displays the cumulative hazard over time for a study, showing a significant initial increase within the first 200 days, followed by a plateau. This pattern indicates a high risk of the event occurring early in the period, which stabilizes as time progresses. Such insights are crucial in contexts like healthcare or mechanical system maintenance, where early detection and intervention can

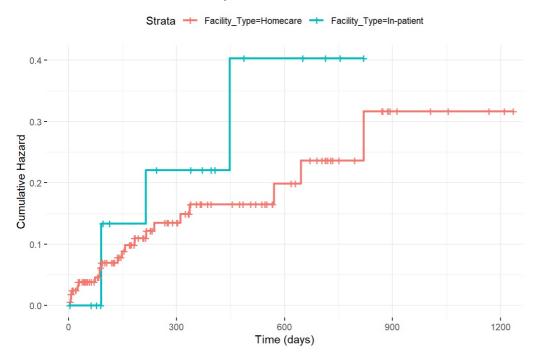
significantly mitigate risks. The graph effectively outlines how risks accumulate, aiding in strategic planning and informed decision-making based on risk timing.

Overall Cumulative Hazard Function



Cumulative Hazard Function by Residential Status

This graph shows the cumulative hazard function over 1200 days for two types of facilities. The cumulative hazard, representing the accumulated risk of an event over time, increases in steps for both facility types. The red line (Facility_Type=0) shows a gradual increase, while the blue line (Facility_Type=1) has sharper rises followed by periods of stability. Both lines plateau around 900 days, indicating no significant additional risk of the event occurring after this point. This analysis helps compare how different conditions influence risk over time in various contexts.



Question 2

2.1 Data Overview

In this question we're going to analyze the impact of marital status and compare its survival curves, and re-coded the Marital Status variable from the patient data, specifically focusing on the question, which asks, "What is your current marital status?" We categorized the responses into two groups: "Separated" and "Not Separated." Using the following rubric, we re-coded the variables:

- · Single Not Separated
- · Married Not Separated
- Divorced Separated
- · Widowed Separated
- · Separated Separated

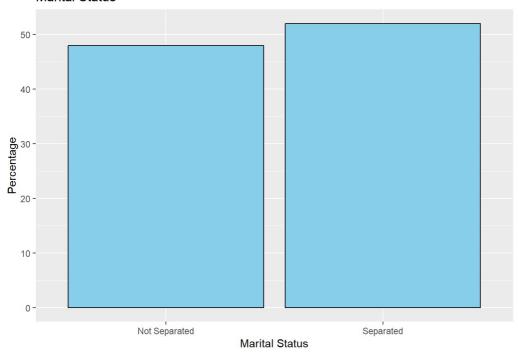
```
## # A tibble: 198 × 9
      Date Started
                          Date Ended
                                               Event Marital
##
                                                                   Length Separated
##
      <dttm>
                          <dttm>
                                               <chr> <chr>
                                                                   <chr>
    1 2024-04-16 00:00:00 2024-06-04 00:00:00 <NA>
                                                                   More than 5 years
    2 2022-12-06 00:00:00 2024-06-04 00:00:00 <NA>
##
                                                     Separated
                                                                   More than 5 years
##
    3 2024-01-29 00:00:00 2024-06-04 00:00:00 <NA>
                                                                   More than 5 years
                                                     Separated
    4 2024-04-01 00:00:00 2024-04-28 00:00:00 Died
                                                     Not Separated NA
##
    5 2024-04-01 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Not Separated <NA>
    6 2024-03-01 00:00:00 2024-06-04 00:00:00 <NA>
##
                                                                   More than 5 years
                                                     Separated
    7 2024-03-01 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Not Separated <NA>
##
    8 2024-01-01 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Not Separated <NA>
##
   9 2024-04-01 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Not Separated <NA>
  10 2023-12-01 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Not Separated <NA>
## # i 4 more variables: Reason_Caregiver <chr>, Facility_Type <chr>,
       status <dbl>, survival time <dbl>
```

2.2 Distribution of Marital Status

The bar chart illustrates the distribution of two categories of marital status: "Separated" and "Not Separated." The "Separated" category, which includes those who are divorced, widowed, or legally separated, shows a higher count, nearly reaching 100 individuals. In contrast, the "Not Separated" category, which encompasses single and married individuals, has a significantly lower count, around 70 individuals. This suggests that in the sampled population, a larger number of individuals fall into the "Separated" category compared to the "Not Separated" group.

```
# Create a barplot
ggplot(subset_data, aes(x = Marital, y = (..count..)/sum(..count..))) +
geom_bar(aes(y = ..prop.. * 100, group = 1), fill = "skyblue", color = "black") +
labs(title = "Marital Status",
    x = "Marital Status",
    y = "Percentage")
```

Marital Status



2.2.1 Comparison of Marital Status by Residential Status

We ran a chi-square test to determine if there is a statistically significant relationship between the Marital Status and Residential status of patients. The P-value obtained of 0.4472 is greater than the conventional significance level of 0.05. Thus we fail to reject the null hypothesis that there is no significant association between the two variables.

```
#smaller subset
subset_data2 <- subset_data %>%
    select(Marital, Facility_Type)

#omitt NA values
subset_data2 <- na.omit(subset_data2)

#create table
table(subset_data2$Marital, subset_data2$Facility_Type)</pre>
```

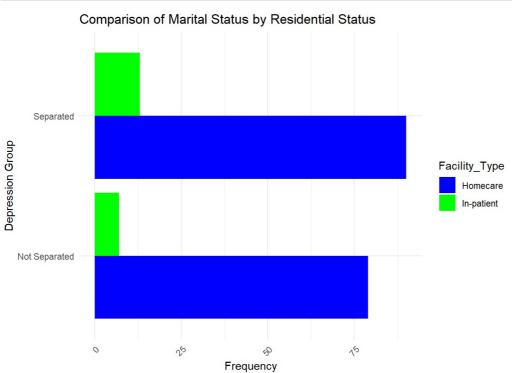
```
##
## Homecare In-patient
## Not Separated 79 7
## Separated 90 13
```

```
#chi test
chisq.test(subset_data2$Marital, subset_data2$Facility_Type)
```

```
##
## Pearson's Chi-squared test with Yates' continuity correction
##
## data: subset_data2$Marital and subset_data2$Facility_Type
## X-squared = 0.57764, df = 1, p-value = 0.4472
```

We then plotted a side-by-side bar-plot of the two variables, however the relationships shown are not statistically significant.

The bar-plot shows that for both Separated and Not Separated patients, majority are Homecare patients. Furthermore, for both Homecare and Inpatients majority of patients are Separated rather than Not Separated.



2.2.2 Comparison of Depression Severity and Marital Satatus

The ordinal variable created in Q1 is Depression_severity . Let us compare this to the Marital variable using a **chi-square test**, to determine if there is an association between depression state and relationship status.

The below output of the chi-square test shows a P-Value of 0.00129, which is less than the chosen significance level of 0.05. Thus, there is a statistically significant association between depression severity and marital status.

```
#add depression_severity variable to subset_data
subset_data$depression_severity <- mental_health$depression_severity

#tabulate both depression_severity and marital
table(subset_data$depression_severity)</pre>
```

```
##
## None-Minimal Mild depression Moderate depression Moderately Severe
## 42 76 39 28
## Severe depression
## 13
```

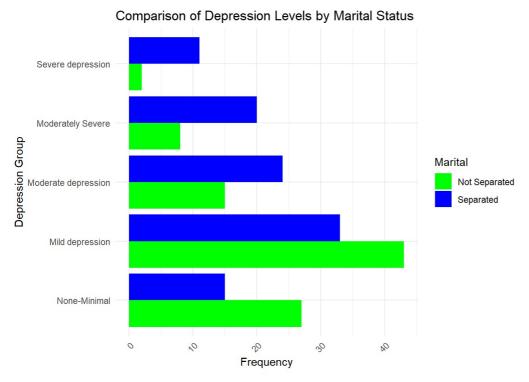
table(subset_data\$Marital)

```
##
## Not Separated Separated
## 95 103
```

```
#run chi-square test
chisq.test(subset_data$depression_severity, subset_data$Marital)
```

```
##
## Pearson's Chi-squared test
##
## data: subset_data$depression_severity and subset_data$Marital
## X-squared = 17.901, df = 4, p-value = 0.00129
```

The bar-plot reveals a distinct pattern where individuals classified under the lower levels of depression, (None-Minimal and Mild depression) predominantly belong to the Not Separated marital status group. Conversely, for those categorized under the Severe depression, Moderately Severe, and Moderate depression groups there is a noticeable prevalence of individuals classified as Separated. This trend suggests a correlation between higher levels of depression and marital separation.

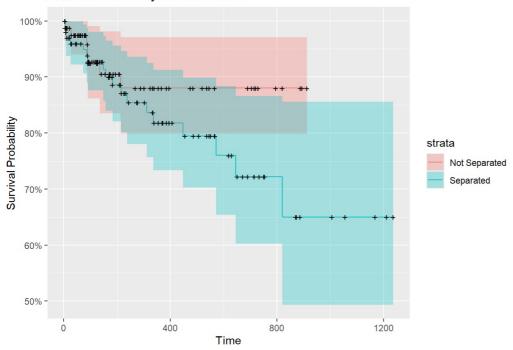


2.2.3 Survival Analysis

The plot "Survival Curves by Marital Status" illustrates the survival probabilities of individuals based on their marital status, distinguishing between those who are not separated (Stratum 0, in red) and those who are separated (Stratum 1, in blue). It shows that individuals who are not separated have consistently higher survival probabilities over time compared to their separated counterparts. The survival rates for both groups decline as time progresses, typical in survival analysis, with a more pronounced decline observed in the separated group. This suggests a higher mortality rate among separated individuals. The narrower confidence intervals for the not separated group indicate more precise survival estimates, whereas the broader intervals for the separated group suggest greater uncertainty in their survival predictions. The graph also highlights specific times where there are significant drops in survival, particularly for the separated group, which points to moments when their risk of death is notably higher. This visualization underscores the impact of marital separation on survival, suggesting that marital status is a significant factor in mortality studies and may have implications for healthcare and social support interventions.

```
#plot survival function
surv_fit3 <- survfit(Surv(survival_time, status) ~ Marital , data=subset_data)
autoplot(surv_fit3) + labs(x = "Time", y = "Survival Probability", title = "Survival Curves by Marital Status")</pre>
```

Survival Curves by Marital Status



Log-Rank Test

The output from the log rank test indicates the results of a statistical test comparing survival distributions between two groups categorized by marital status ('Marital'). In this analysis with 185 total observations (13 excluded due to missing data), the chi-squared statistic is 1.4 with 1 degree of freedom, resulting in a p-value of 0.2, which is greater than the conventional significance level of 0.05. This p-value suggests that there is no statistically significant difference in survival between the groups ('Marital=Not Separated' and 'Marital=Separated'), as the observed differences in survival times are not statistically significant at the conventional significance level of 0.05. Therefore, based on these results, we do not have sufficient evidence to reject the null hypothesis that the survival distributions across different marital statuses are similar.

```
## Call:
## survdiff(Surv(survival_time, status) ~ Marital , data=subset_data); surv_diff

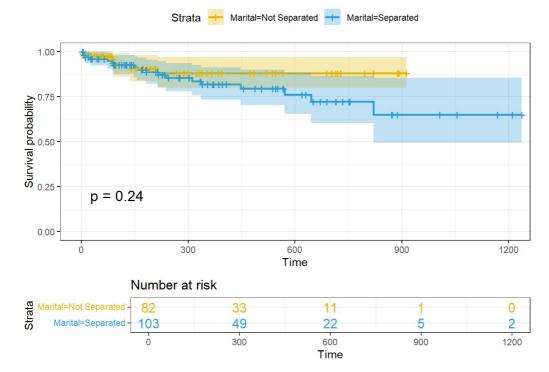
## Call:
## survdiff(formula = Surv(survival_time, status) ~ Marital, data = subset_data)
##
## n=185 13 observations deleted due to missingness
```

```
n=185, 13 observations deleted due to missingness.
##
##
##
                           N Observed Expected (0-E)^2/E (0-E)^2/V
## Marital=Not Separated 82
                                    7
                                           9.89
                                                    0.846
                                                                1.41
## Marital=Separated
                         103
                                    18
                                          15.11
                                                    0.554
                                                                1.41
##
##
    Chisq= 1.4 on 1 degrees of freedom, p= 0.2
```

Log-Rank Test on Kaplan Meier Curve

The log rank test displayed in the Kaplan-Meier survival curve compares two groups: "Marital-Not Separated" and "Marital-Separated." The survival probabilities for both groups are plotted over time, with the "Marital-Not Separated" group shown in yellow and the "Marital-Separated" group in blue. At the start (time zero), there are 103 individuals in the "Not Separated" group and 83 in the "Separated" group. The p-value of 0.24 indicates no statistically significant difference in survival between the two groups, as it is greater than the conventional significance level of 0.05. This conclusion is further supported by the overlapping confidence intervals for both groups throughout the observed period.

```
ggsurvplot(surv_fit3,
pval = TRUE, conf.int = TRUE,
risk.table = TRUE,
risk.table.col = "strata",
ggtheme = theme_bw(),
palette = c("#E7B800", "#2E9FDF"))
```



2.3 Distribution of Length Separated Variable

We will create a bar chart for the Length_Separated variable in column L, which answers the question: "If widowed/divorced/separated, for how long have you been widowed/divorced/separated?" The response categories are:

- Last six months <6m
- More than six months but less than one year 6m < 1
- One year to below three years 1<3
- Three years to below five years 3<5
- More than five years >5

[7] ">50,000"

Let us examine the Length-Separated variable for any discrepancies in categorization.

"<6m"

```
#examine variable
unique(subset_data$Length_Separated)

## [1] "More than 5 years" "NA" NA
## [4] "3<5" ">5" "1<3"</pre>
```

The "More than 5 years" and ">50,000" categories need to be re-coded to a standardized ">5". This ensures consistency in our data analysis. Furthermore, we filter the data-set to include only those who are separated, as they are the only individuals we want to consider for the Length Separated variable.

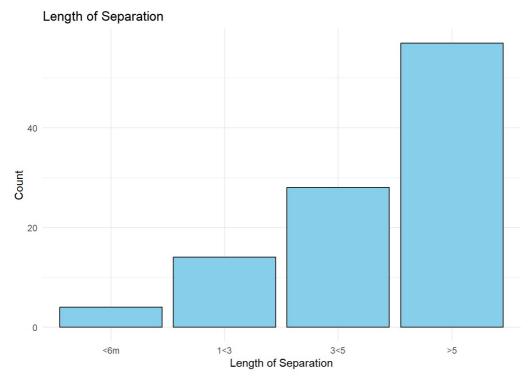
This prepares the data for creating a bar chart to visualize the distribution of separation durations.

```
#filter for only separated individuals
filtered_data <- subset_data %>%
    filter(Marital == "Separated")

#standaardise the >5 category
filtered_data <- filtered_data %>%
    mutate(Length_Separated = ifelse(Length_Separated %in% c("More than 5 years", ">50,000"), ">5", Length_Separate
d))
#view results
filtered_data
```

```
## # A tibble: 103 × 10
##
      Date Started
                          Date Ended
                                               Event Marital
                                                               Length Separated
##
      <dttm>
                          <dttm>
                                               <chr> <chr>
    1 2024-04-16 00:00:00 2024-06-04 00:00:00 <NA>
##
                                                     Separated >5
    2 2022-12-06 00:00:00 2024-06-04 00:00:00 <NA>
##
                                                     Separated >5
##
    3 2024-01-29 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Separated >5
##
    4 2024-03-01 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Separated >5
    5 2024-04-01 00:00:00 2024-06-04 00:00:00 <NA>
##
                                                     Separated 3<5
    6 2024-01-01 00:00:00 2024-04-01 00:00:00 <NA>
                                                     Separated >5
##
    7 2024-02-01 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Separated 1<3
##
    8 2023-11-01 00:00:00 2024-01-26 00:00:00 Died
                                                    Separated 3<5
    9 2022-12-01 00:00:00 2024-06-04 00:00:00 <NA>
                                                     Separated >5
  10 2024-05-01 00:00:00 2024-05-31 00:00:00 <NA>
## # i 93 more rows
## # i 5 more variables: Reason Caregiver <chr>, Facility Type <chr>,
       status <dbl>, survival time <dbl>, depression severity <fct>
```

The bar chart illustrates the distribution of the length of time individuals have been separated. The highest count is in the ">5" category, indicating that the majority of individuals have been separated for more than five years. The "3<5" category follows, showing a significant number of individuals separated for three to five years. The "1<3" category has fewer individuals, and the "<6m" category has the least. This distribution suggests that longer separations are more common among the respondents in the data, with a substantial portion having been separated for extended periods.



2.3.1 Comparison of Length Separated and Residential Status

We ran a chi-square test to determine if there is a significant association between the a patients length of separation and their residential status. We used a simulated p-value due to low value counts for the chi-square test. The P-value obtained of 0.9325 is greater than the conventional significance level of 0.05. Thus we fail to reject the null hypothesis that there is no significant association between the two variables.

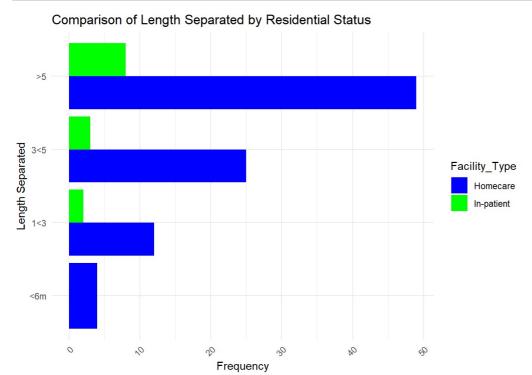
```
#create table
table(filtered_data$Length_Separated, filtered_data$Facility_Type)
```

```
##
##
          Homecare In-patient
##
      <6m
                  4
##
                 12
                               2
      1<3
##
      3<5
                 25
                               3
##
      >5
                 49
                               8
```

```
#chi test
chisq.test(filtered_data$Length_Separated, filtered_data$Facility_Type, simulate.p.value = TRUE, B = 2000)
```

```
##
## Pearson's Chi-squared test with simulated p-value (based on 2000
## replicates)
##
## data: filtered_data$Length_Separated and filtered_data$Facility_Type
## X-squared = 0.80858, df = NA, p-value = 0.933
```

We then plotted a side-by-side bar-plot visualising the distribution of patient's length of separation, categorised by their residential status; however, any relationships observed are not significant. The bar-plot shows that only homecare patients have been separated for less than 6 months. Following the distribution of the length separation variable, majority of patients have been separated for more than 5 years, with the count of patients increasing with every longer-duration category. This is true for both in-patients and homecare patients.



2.4 Summary for Reason_Caregiver Variable

We summarised the variable Reason_Caregiver in column BH, that is question 35, "What is the main reason that made you bring your patient to Care 360?". The variable has 36 unique responses, and thus can be summarised into larger categories for similar responses.

First we examined the unique values of the variable:

```
as.matrix(unique(patient_data$Reason_Caregiver))
```

```
##
         [,1]
##
   [1,] "Patient Condition"
   [2,] "Chronic Condition"
##
##
   [3,] "Assist"
    [4,] "Recommended by a doctor"
##
##
    [5,] "ompanionship and post care"
##
    [6,] "Companionship"
   [7,] "Preference"
##
   [8,] "Close monitoring epilepsy"
##
   [9,] "Adequate care"
## [10,] "Family engagement"
##
  [11,] NA
##
   [12,] "Patient discharged"
## [13,] "Recovery"
## [14,] "Patient lives alone"
## [15,] "Convinience"
## [16,] "Accessibility"
## [17,] "Care and support"
   [18,] "Monitoring"
  [19,] "Support"
##
## [20,] "Extra help"
## [21,] "Total Care"
## [22,] "Provide Care"
## [23,] "Peace of Mind"
## [24,] "Close monitoring"
   [25,] "Condition"
## [26,] "Better care"
## [27,] "Personalised Care"
## [28,] "Companionship and support"
## [29,] "Supervission"
## [30,] "Specialised care"
   [31,] "Management"
##
  [32,] "Companionship and care"
## [33,] "Loneliness"
## [34,] "Post surgery"
## [35,] "Post Hospital Care"
## [36,] "Post care"
## [37,] "Compassionate"
```

We then computed the counts and percentage of responses per category, for better understanding of the distribution of responses. This computation shows that the categories with the highest percentage responses are 'Patient Condition' (18.69%), 'Care and support' (12.63%), 'Companionship' (11.11%), 'Convenience' (7.58%) and 'Family engagement' (7.07).

```
# Summarize the Reason_Caregiver variable
reason_summary <- patient_data %>%
   group_by(Reason_Caregiver) %>%
   summarise(Count = n()) %>%
   arrange(desc(Count)) %>%
   mutate(Percentage = (Count / sum(Count)) * 100)

#omit NA values
reason_summary <- reason_summary[-6,]

# Display the summary
print(reason_summary)</pre>
```

```
## # A tibble: 36 × 3
##
      Reason_Caregiver Count Percentage
##
      <chr>
                                    <dbl>
                        <int>
##
   1 Patient Condition
                           37
                                   18.7
##
   2 Care and support
                           25
                                   12.6
    3 Companionship
                           22
                                    11.1
                           15
##
   4 Convinience
                                    7.58
##
   5 Family engagement
                           14
                                    7.07
##
    6 Recovery
                                    4.04
##
   7 Total Care
                            8
                                    4.04
##
   8 Monitoring
                            6
                                    3.03
    9 Support
                            6
                                     3.03
## 10 Assist
                            5
                                    2.53
## # i 26 more rows
```

As the variable has 36 unique responses, we can further summarise the categories into 7 main reasons, by merging the categories as follows:

Category

Values

	Specialized Care
	• Condition
	Recommended by a doctor
	Chronic Condition
	• Gironic Condition
Care & Support	Support
	Assist
	Provide Care
	Extra help
	Better Care
	Personalised Care
	Care and support
	Specialised care
Companionship	• Loneliness
Companionship	Companionship
	Companionship and Care
	Companionship and Support
	• Compassion
	Companionship and support
	Companionship and care
	Compassionate
Convenience	Family Engagement
	Patient lives alone
	Accessibility
	Peace of Mind
	Preference
	Convinience
	Peace of Mind
	Family engagement
Recovery	Post surgery management
Recovery	Patient discharged
	post care
	post care post hospital care
	Management
	Post surgery
	Post care
	ompanionship and post care
	Recovery
	Post Hospital Care
Total Care	Adequate care
	Personalized care
	Total Care
	Better care
Monitoring	Close monitoring
	Epilepsy
	Supervision

- · Close monitoring epilepsy
- Monitoring
- Supervission

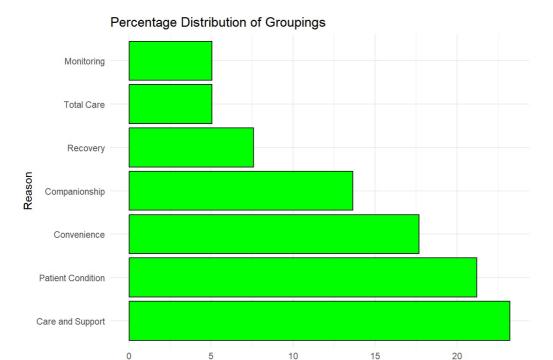
Let us summarize the variables as follows in a data-frame, getting the Total Count and Total Percentage distribution per category.

```
# Define the groups
Patient_Condition <- c("Patient Condition", "Specialized Care", "Condition", "Recommended by a doctor", "Chronic C
ondition")
Care and Support <- c("Support", "Assist", "Provide Care", "Extra help", "Better Care", "Personalised Care", "Car
e and support", "Specialised care")
Companionship <- c("Loneliness", "Companionship", "Companionship and Care", "Companionship and Support", "Compass
ion", "Companionship and support", "Companionship and care", "Compassionate")
Convenience <- c("Family Engagement", "Patient lives alone", "Accessibility", "Peace of Mind", "Preference", "Con
vinience", "Peace of Mind", "Family engagement")
Recovery <- c("Post surgery management", "Patient discharged", "post care", "post hospital care", "Management", "
Post surgery", "Post care", "ompanionship and post care", "Recovery", "Post Hospital Care")
Total Care <- c("Adequate care", "Personalized care", "Total Care", "Better care")
Monitoring <- c("Close monitoring", "Epilepsy", "Supervision", "Close monitoring epilepsy", "Monitoring", "Superv
ission")
# Summarize by groups
group_summary <- reason_summary %>%
  mutate(Group = case when(
    Reason Caregiver %in% Patient Condition ~ "Patient Condition",
    Reason Caregiver %in% Care and Support ~ "Care and Support",
    Reason Caregiver %in% Companionship ~ "Companionship",
    Reason Caregiver %in% Convenience ~ "Convenience",
    Reason Caregiver %in% Recovery ~ "Recovery",
    Reason_Caregiver %in% Total_Care ~ "Total Care",
    Reason Caregiver %in% Monitoring ~ "Monitoring",
    TRUE ~ "Other"
  )) %>%
  group by(Group) %>%
  summarise(
    Total Count = sum(Count).
    Total Percentage = sum(Percentage)
  arrange(desc(Total Count))
# Display the summary
group_summary
```

```
## # A tibble: 7 × 3
                       Total_Count Total_Percentage
##
    Group
##
     <chr>
                              <int>
                                               <dbl>
## 1 Care and Support
                                                23.2
                                 46
## 2 Patient Condition
                                 42
                                               21.2
## 3 Convenience
                                 35
                                               17.7
## 4 Companionship
                                 27
                                               13.6
## 5 Recovery
                                 15
                                                7.58
## 6 Monitoring
                                 10
                                                5.05
## 7 Total Care
                                 10
                                                5.05
```

We then create a bar-plot to visualize the percentage distribution per category.

The bar plot shows that the greatest reason for bringing a patient to 'Care360' is for Care and Support (23.23%) followed by Patient Condition (21.21%), then Condition (17.67%) taking up the top 50% of responses. This is followed by Companionship (13.64%), Recovery (7.58%), Total Care (5.05%) then finally Monitoring (5.05%) which has the fewest percentage of responses.



We then re-coded the Reason Caregiver column appropriately, as follows:

```
# Combine all groups into a named vector
group_map <- c(
    setNames(rep("Patient_Condition", length(Patient_Condition)), Patient_Condition),
    setNames(rep("Care_and_Support", length(Care_and_Support)), Care_and_Support),
    setNames(rep("Companionship", length(Companionship)), Companionship),
    setNames(rep("Convenience", length(Convenience)), Convenience),
    setNames(rep("Recovery", length(Recovery)), Recovery),
    setNames(rep("Total_Care", length(Total_Care)), Total_Care),
    setNames(rep("Monitoring", length(Monitoring)), Monitoring)
)

# Replace responses with group names
subset_data <- subset_data %>%
    mutate(Reason_Caregiver = recode(Reason_Caregiver, !!!group_map))

#view results
unique(subset_data$Reason_Caregiver)
```

Percentage

```
## [1] "Patient_Condition" "Care_and_Support" "Recovery"
## [4] "Companionship" "Convenience" "Monitoring"
## [7] "Total_Care" NA
```

2.4.1 Comparison of Reason_Caregiver and Residential Status

We ran a chi-square test to determine if there is a statistically significant relationship between a patient's reason for being brought to care 360, and their residential status. We used a simulated p-value due to low value counts for the chi-square test. The P-value obtained of 0.0004998 is less than the conventional significance level of 0.05. Thus we reject the null hypothesis that there is no significant relationship between the two variables. This result is subject to inaccuracies, as some values used int he chi-square test are less than 5.

```
#subset data
subset_data3 <- subset_data %>%
    select(Reason_Caregiver, Facility_Type)

#create table
table(subset_data3$Reason_Caregiver, subset_data3$Facility_Type)
```

```
##
##
                         Homecare In-patient
##
     Care_and_Support
                                46
                                             0
##
     Companionship
                                27
                                              0
##
     Convenience
                                28
                                             7
##
     Monitoring
                                10
                                             0
                                             8
##
     Patient Condition
                                34
##
     Recovery
                                10
                                             5
                                             0
##
     Total_Care
                                10
```

```
#chi test
chisq.test(subset_data3$Reason_Caregiver, subset_data3$Facility_Type, simulate.p.value = TRUE, B = 2000)
```

```
##
## Pearson's Chi-squared test with simulated p-value (based on 2000
## replicates)
##
## data: subset_data3$Reason_Caregiver and subset_data3$Facility_Type
## X-squared = 25.185, df = NA, p-value = 0.001499
```

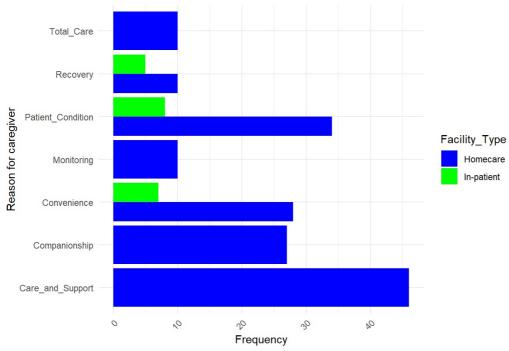
We then created a side-by-side bar-plot of patients reasons for coming to care360 and their residential status. The bar-plot shows that inpatients are mainly brought to care360 due to patient condition, followed by convenience then recovery. These reasons—especially patient condition and recovery—tend to suggest a higher level of care required for these patients, which aligns with why they are admitted as inpatients.

For homecare patients, their to reason for being brought to care360 is care and support, followed by patient condition, convenience, companionship, monitoring, recovery and total care, in that order. The top four categories—especially care and support and companionship—suggest a need for extra care and attention, but not as high as inpatients.

```
#remove NA values
subset_data3 <- na.omit(subset_data3)

# Create a bar plot
ggplot(subset_data3, aes(x = Reason_Caregiver, fill = Facility_Type)) +
    geom_bar(position = "dodge") +
    labs(title = "Comparison of Reason for Caregiver and Residential Status",
        x = "Reason for caregiver",
        y = "Frequency") +
    scale_fill_manual(values = c("Homecare" = "blue", "In-patient" = "green")) +
    theme_minimal() +
    theme(axis.text.x = element_text(angle = 45, hjust = 1)) + coord_flip()</pre>
```

Comparison of Reason for Caregiver and Residential Status



2.5 Comparison of Sex and the Facilty_Type Variable

Preprocessing

The Sex_Patient variable indicates the sex assigned to the patient at birth, and has four possible responses:

- Female
- Male
- Other
- · Prefer not to say

First, we created a subset with the two variables of interest then examined the unique variables of the sex patient variable, to check for errors.

```
#add desired column to the data
filtered_data2 <- data.frame(Facility_Type = subset_data$Facility_Type, Sex_Patient = patient_data$Sex_Patient)
#examine unique values for both
unique(filtered_data2$Facility_Type)</pre>
```

```
## [1] "Homecare" "In-patient" NA
```

```
unique(filtered_data2$Sex_Patient)
```

```
## [1] "Female" "Male" NA
```

There are no errors, thus we then ran a chi-square test to determine whether there is a statistically significant relationship between the sex of the patient and their residential status. The P-value obtained of 0.8973 is greater than the conventional significance level of 0.05. Thus, we fail to reject the null hypothesis that there is no significant association between the two variables.

```
#create table
table(filtered_data2$Facility_Type, filtered_data2$Sex_Patient)
```

```
##
## Female Male
## Homecare 102 66
## In-patient 13 7
```

```
#run chi test
chisq.test(filtered_data2$Facility_Type,filtered_data2$Sex_Patient)
```

```
##
## Pearson's Chi-squared test with Yates' continuity correction
##
## data: filtered_data2$Facility_Type and filtered_data2$Sex_Patient
## X-squared = 0.016662, df = 1, p-value = 0.8973
```

We then created a side-by-side bar plot to compare the relationship between the residential status of a patient and their sex. The relationships portrayed are not statistically significant.

The Bar-plot shows that overall, there are more female patients of Care360 than male patients. Both in residents and non-residents category, female patients are the majority. Furthermore, there are more Non-resident patients of care360 than resident patients.

