



Driving R adoption in an NHS information service: barriers and solutions

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- · Second largest acute hospital trust in England
- Four hospital sites seeing approx. 440,000 in-patients per year
- Large informatics team(s):
 - Core Information
 - Analytics
 - SQL engineers/ Dashboard developers
 - Research
 - Commercial

So we're all R-wielding data ninjas, right?









www.hed.nhs.uk

- Online hospital benchmarking system
- Statistical models and analysis tools
- Activity, Mortality, Readmissions, Length-of-Stay, Marketshare etc.
- Used by ~60 NHS and other organisations
- Training and support
- Using national NHS data



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Data analysis tools in the NHS



- Variable reliance on IT departments and external suppliers
- Huge differences in skills across, and within, organisations
- Increasing use of Qlik, PowerBI and Tableau

UHB:

- Recruited SQL devs and slowly moved whole department
- Excel, SSRS and TIBCO Spotfire used for outputs





Keenies...



- R was used only for rare 'statistical' calculations
- A few keen researchers or medical students
- Simlar at other Trusts
- · Also the case in our team
- But...

One keen user...



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Allowed space to develop:



- PhD project, funded by UHB
- Developed statistical, visualisation and data wrangling skills
- Chose to use R from the outset, rather than SAS or Stata.
- Python training harder to find when I started

Took a risk

- Moved some HED models to R, from SAS
- Supported other team members to use it
- This generated a demand for basic training







- Set up a local user group
- Trained senior team
- Encouraged new starters to use R
- External relationships:
 - Twitter has been key
 - NHS-R Community: https://nhsrcommunity.com/
 - External R user groups
 - Regional relationships: Other Trusts, PHE, City Council
 - Advice from Mango, RStudio and others
- Demonstrated ROI !!!



Barriers



- Open Source fears: IT teams sometimes reluctant to install
- Wrestling with default settings:
 - Mapped user folders that aren't writable
 - Can't write to package library, or download temp files
- Poor hardware
 - Cheap desktops, low on disk space with minimal RAM
- Lack of understanding of fundamentals:
 - Networking/file locations
 - Suspicions around security
 - R coding, or its application to problems



Solutions



- Permissions: Explicitly identify, and change, default settings
 - Set a folders: R_libs_user or .Renviron file
- Hardware:
 - Make the case for more RAM! It doesn't cost much
 - Consider server approaches: VMs or 'Desktop' on a 'Server'
 - RStudio Server / RStudio Connect
- Skill/Awareness:
 - Protect time
 - Windows users often don't know file paths, SSH etc.
 - Central guidance on R/Python implementation

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How do we use it?

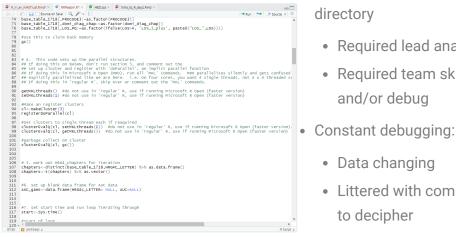


- 1. Regression, and related models (mgcv, lme4, glmmTMB, glmnet)
- 2. Machine Learning technique (caret, randomForest, gbm)
- 3. Optimisation problems (solving equations using nloptr)
- 4. Summary stats and Exploration
- 5. Data Visualisation (ggplot2, FunnelPlotR)
- 6. RMarkdown Reports and Presentations
- 7. API interaction (NHS ODS service, CQC registered organisations)









- Collections of R scripts saved to directory
 - · Required lead analyst to write
 - · Required team skills to run and/or debug
- - · Data changing
 - · Littered with comments, hard to decipher

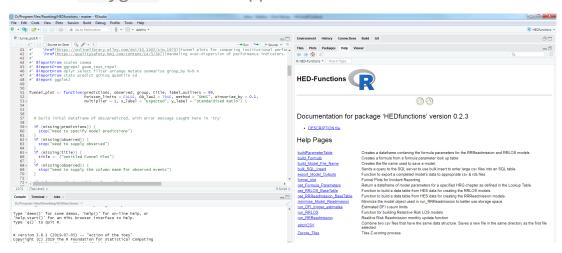


Creating a local package



Wrapped functions in to an R package structure

- Built binary package and saved to shared folders
- Used roxygen2 to write support material



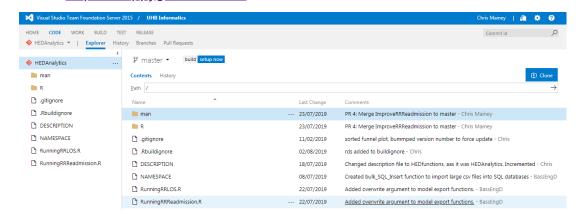


Source control



- Moved to source control
 - · Install git for windows
 - · Git learning curve
 - Happy Git with R! https://happygitwithr.com/
- Git repo on TFS
 - · Figure out https connections
 - Steph Locke's tfsr

https://github.com/lockedata/tfsR







NHS-R community



- Promote R use in NHS
- · Led by Prof. MA Mohammed
- Funded by grant from the Health Foundation
- Training provision
- Blog posts
- Share best practice
- · Development of tools
- National Conference: 4th & 5th November





What's next?



- Continuing to develop analyst skills in R
- Spreading to different teams: control charts, Rmarkdown
- Contributing to, or building, Open Source tools with NHS-R community:
 - FunnelPlotR
 - NHSRdatasets
- Pushing further into ML techniques for prediction
 - Improving current models: Ensemble techniques etc.
 - Unsupervised techniques for cluster analysis.

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Thanks for your time!

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