Urban Big Data Centre

An ESRC Data Investment

# RAC Project Decision Form

Version 3.0 (23 May 2016)

| **Title of Project** | Using Linked Data to Understand Multi Morbidity and the Use of Social Care Data | |
|---|---|---|
| **Lead applicant** | Prof. Nick Bailey | |
| **Date of RAC Panel meeting** | 10 February 2017 | |
| **RAC Panel decision** | Support proposal | |
| | Support proposal subject to revisions and conditions in Part E | **X** |
| | Proposal acceptable standard but not supportable due to resourcing constraints - option to re-submit in next *Call for Expressions of Interest* | |
| | Do not support | |

## Part B: Grading summary

| Criterion | Yes/No |
|---|---|
| Privacy and ethics | Yes |
| Feasibility | Yes |

*Please provide the average review panel score for each section listed below.*

| Criterion | Grade (out of 4) |
|---|---|
| Scientific merit | 3 |
| Potential for public benefit impact | 3.33 |
| Alignment to UBDC objectives | 2.67 |

***Total (out of 12):*** | 9 |

## Part C: RAC Panel Priority Grade

| Priority | Yes |
|---|---|
| 4 - Very high priority | |
| 3 - High priority | |
| 2 - Medium priority | X |
| 1 - Low priority | |
| 0 - Do not support | |

## Part D: Applicant feedback

**Comments will be sent to the applicant(s) as feedback**

**Impact:**

1. The proposed work is very valuable from the perspective of developing research capacity in this important area. Given the ageing of the population, and the very likely increase in the prevalence of co-morbidities, the research is very important in helping to better understand the implications of multiple morbidities for demand on social care services.
2. There will likely be considerable impact and benefit for informing public policy related to health inequalities and multiple morbidities. More information should be provided on how results will be disseminated to policy makers (workshops, website, blogs?) and details of possible academic journal articles and which journals will be targeted.
3. Inverse care laws and the development of more community based services is very topical and an area for reform. The data analysis may assist with the reform of health and social care – if the team have a plan for active engagement and dissemination of information.

**Methods:**

4. The authors mention that they will undertake longitudinal analysis 'if time permits' and hence there's a chance that the longitudinal aspects of the linked data may be ignored. Longitudinal analysis should be one of the key objectives given the rich linked dataset that the proposers are requesting.
5. The project may benefit from public policy experience and broader knowledge experience of potential/practice of linking of health and social care data.

**UBDC Objectives:**

6. The proposal has the potential for the findings to inform the work of other researchers or policy makers. The data will not add to UBDC Collection, nor be available directly to others – but this is normal for Controlled Data Service use.
7. The project will match health data with social care data, however it is not clear how wholly innovative this is from a big data perspective or for maximising the benefits from these links.
8. Fits with urban dimension and use of big data.

## Part E: Required revisions and conditions of acceptance

Consider more complex models that take into account the longitudinal nature of the linked dataset. Provide more details on the proposed models and how they will address the research questions.

Provide clear dissemination strategies to inform policy and to the research community, and which journals will be targeted.