

# Data Analytics

2023 Adventure in High Tech Program  
Rotary Club of Nepean-Kanata

Deanna Rothwell  
Director, Analytics  
October 2023



The Ottawa  
Hospital

L'Hôpital  
d'Ottawa

Inspired by research.      **Inspiré** par recherche.  
Driven by compassion.      **Guidé** par la compassion.

# About Me

- BSc Math / Economics
- MSc Statistics (1995)
- ICES (Toronto) ~10 yrs
- Ottawa Hospital ~15 yrs



# My Team



# Analytics Team

Total 17 FTEs

Deanna Rothwell  
Director



Erin McGeachie  
Manager, Information  
Governance

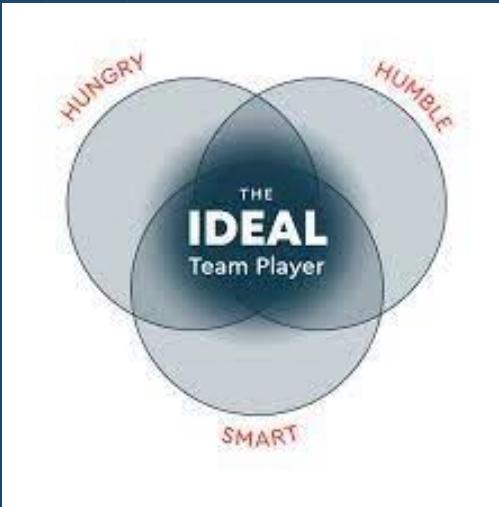
- 5 FTEs
- Project coordination
- Education & Training

Amal Al Zayadi  
Manager, Client  
Services



- 9 FTEs
- Data science
- Reporting solutions

# Data Science Staff



- Programming skills
- Data management skills
- Problem solving
- Attention to detail
- Understanding of how data is created / nuances
- Curiosity!

# Recent Posting

## *Basic Requirements:*

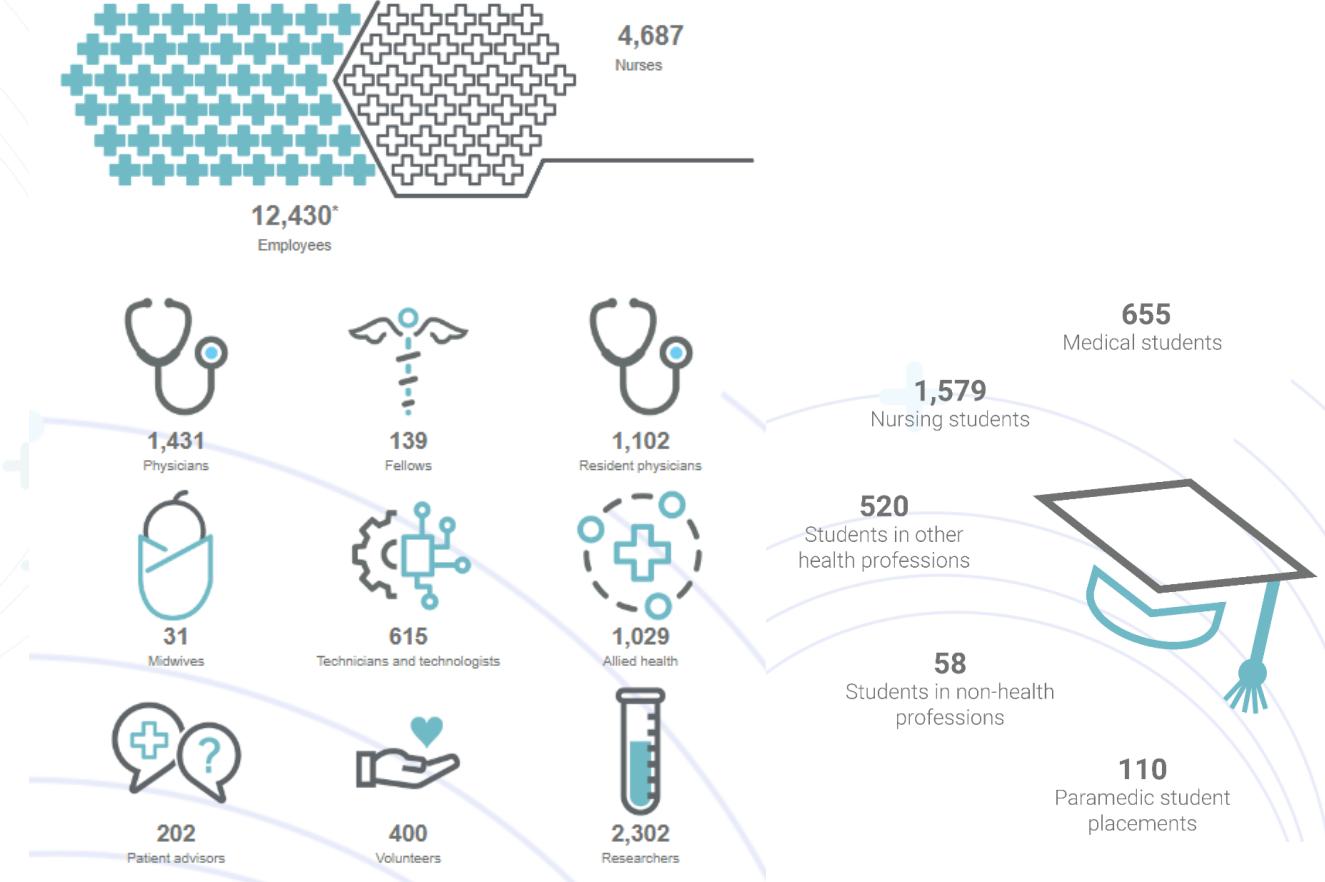
- MSc in Public Health, Sociology, Statistics, Epidemiology, Health Sciences, or related field with coursework in research or survey design and methodology
- 1- 2 years of relevant experience using analytical techniques in a healthcare or human resources subject area
- Strong interpersonal, oral, and written communication skills
- Strong problem-solving and critical thinking skills
- Aptitude for research methodology and attention to detail
- Experience with statistical analysis tools
- Experience building reports and data visualizations using Excel and/or PowerBI
- Experience analyzing healthcare or other large data
- Comfortable learning and using technology, including Office365 products

# The Ottawa Hospital

- One of Canada's largest academic health sciences centres
- 3-campus, 1400 inpatient beds
- Serves a catchment area of 1.2 million in Eastern Ontario, Canada and Nunavut



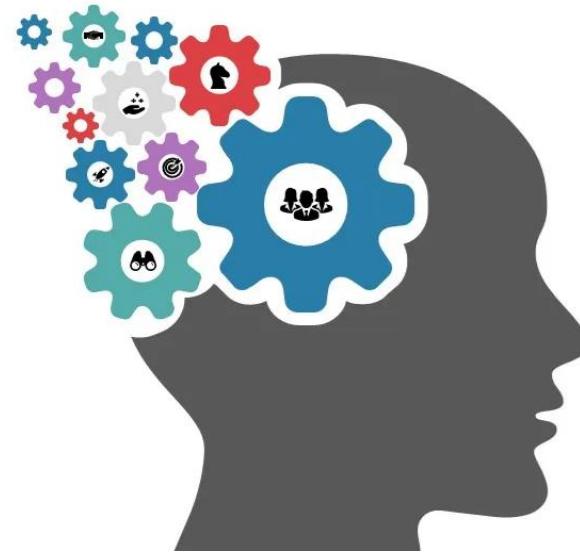
# Career Opportunities



*To provide each patient with the world-class care,  
exceptional service and compassion we would  
want for our loved ones*

# Analytics Mission

Provide data, analytical services,  
and education to support  
excellence in patient care,  
research, and innovation.



# Working with Others

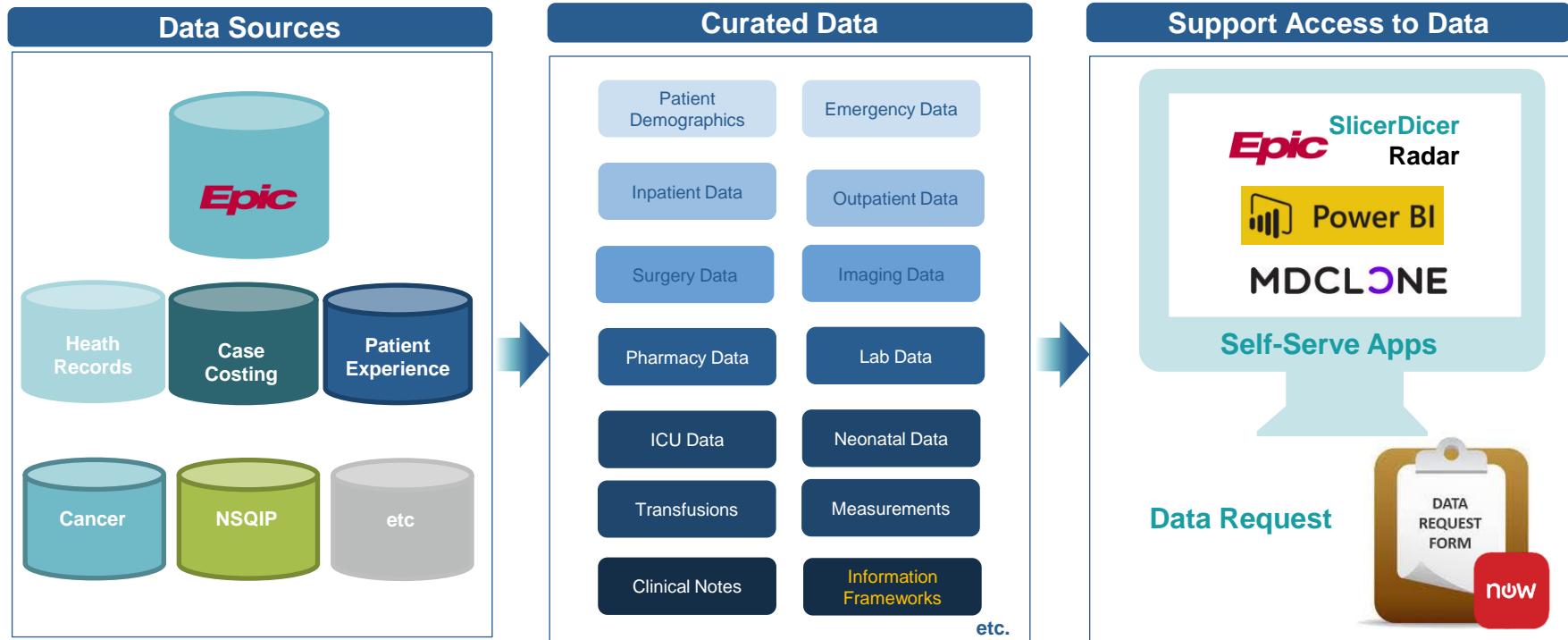


# Spectrum of Services



# Clinical Data Pipeline

Create a single source of ‘validated’ clinical data for consistent, trusted, accessible data to support operations, research, and innovation



# Tools

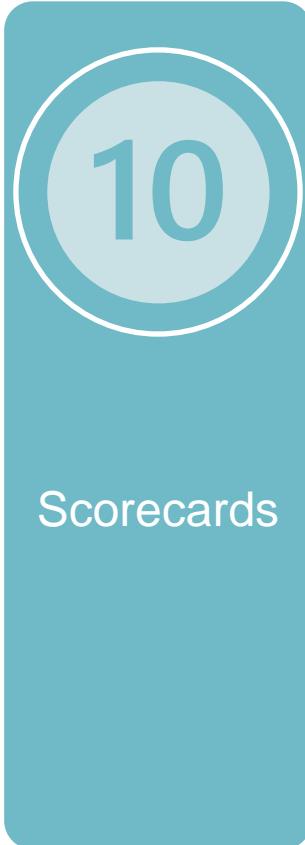


MDCLONE

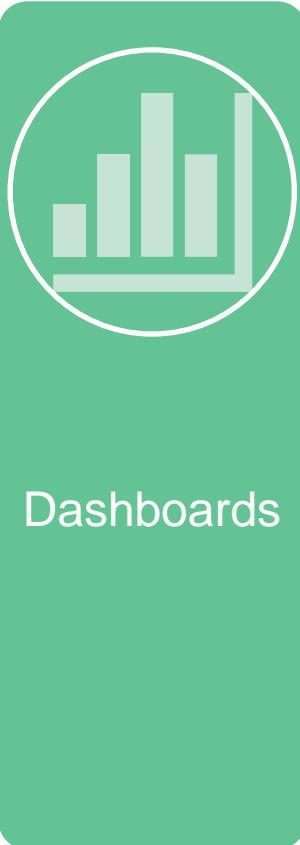


SharePoint

# Spectrum of Services



Scorecards



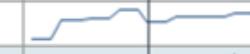
Dashboards

- Leadership
- How am I performing?
- Any good / worrisome trends?
- 80-20 rule

# Scorecards

- “Big dot” metrics for organization
- Ability to compare to other organizations

**Scorecard:** CPS 21-22 Period : 2021 Mar

Strategic Aim	Indicator	Score	YTD	Baseline	Weight	Month	2-FY Trends
Better patient experience	Overall rating of experience - Inpt (% Top Box)	3	66.5	65.1	25%	Mar-22	
Better staff experience	Staff Stress Satisfaction Index	2	0.4	0.8	20%	Mar-22	
Better value	Total margin (%)	3	0.81	3.29	25%	Mar-22	
	HSMR - 2019 (ratio)	1	99.7	95.0	10%	Mar-22	
Improved population health	Readmissions - 30 day unplanned (%)	2	10.1	9.9	10%	Mar-22	
	ALC rate (% pt days)	2	21.2	20.6	10%	Mar-22	

# Dashboards

# Wellness Pulse Survey



# Dashboards

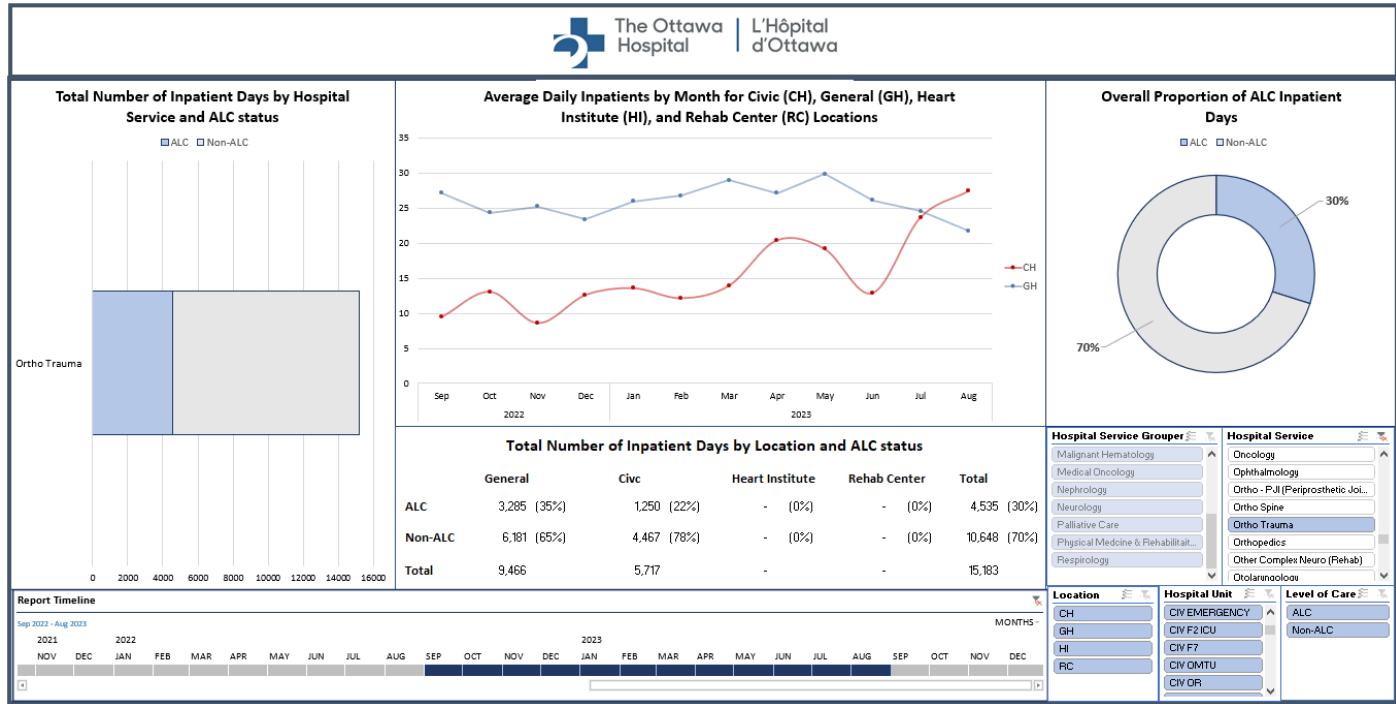
# Costs & Volumes



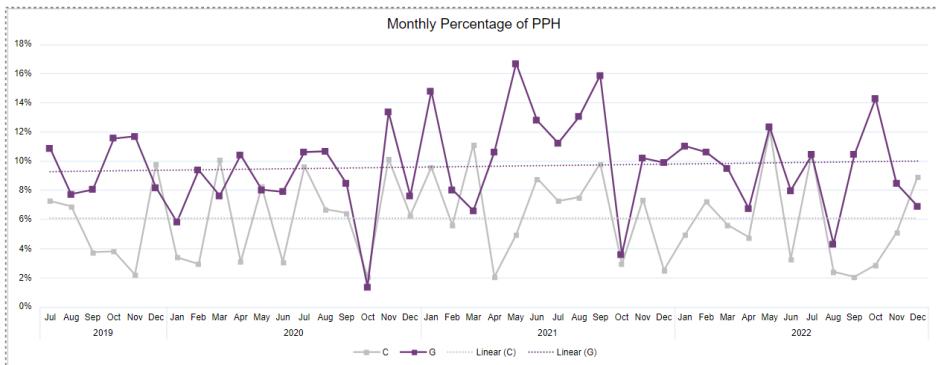
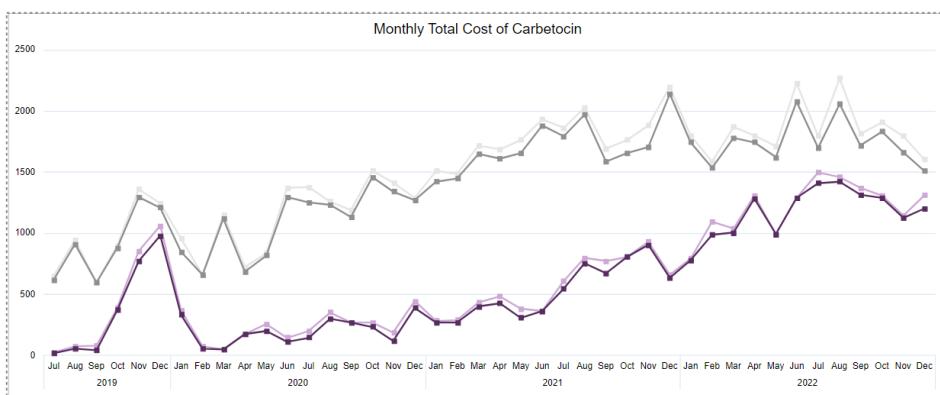
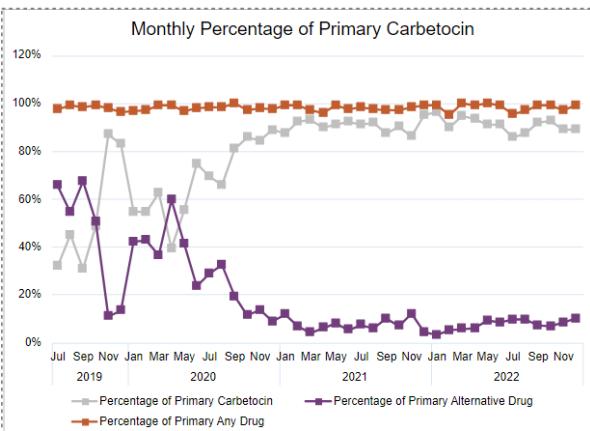
# Do we need to change our staffing models? (patient flow analysis)



Data  
Requests &  
Analytics  
Services



# Does new costly drug reduce bleeding after c-sections?



# Challenge

- Increasing wait times
- Lack of data literacy
- Frustrations
- Not using data to drive decisions



Submit a Data Request



Wait in queue for a Data Analyst



Consult with Analyst(s)

# Data Democratization



Data  
Discovery

COHORT DEFINITION | OUTPUT DEFINITION | SUMMARY REVIEW

① Reference Event > ② Additional Inclusion > ③ Time-Related Events > ④ Demographics > ⑤ Finalize Cohort & Output

Cohort Reference Event ⓘ

Get the first event,  
that Age at event is between 0 to 120

and Visit start datetime date is between 06/01/2023 to 09/30/2023

and Discharge disposition is any of the following

Search values ⓘ  
Selected from category Discharge Disposition  
Showing 5/6 | Show all ⚙️ Clear

- Eloped
- Left Before Triage
- Left Without Being Seen
- Left against medical advice (LAMA)
- Left without Being Seen

Cancel Skip Step 2 Next

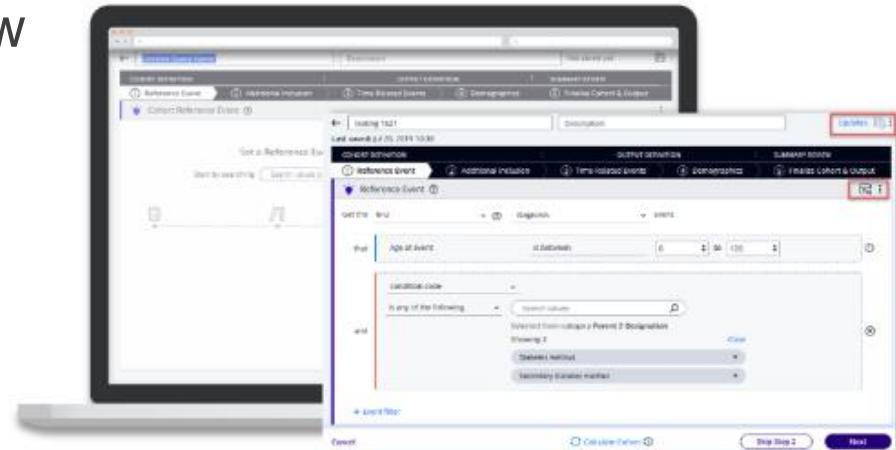


1

Cohort: 6,167 ⓘ | Calculated: Oct 11, 2023 10:43 ⓘ

# Self-Serve Platform

- Available all staff, physicians and researchers at TOH and OHRI
- Parameters easily modified by end user
- Analyses can be updated with new data on demand
- No programming skills required



# Synthetic Data (Protecting patient privacy)

- Generated using artificial intelligence
- Non-reversible
- Maintains the patterns of the original data
- Not the same as “de-identification”

X Axis	Y Axis	R	G	B
1488	1061	0.78	0.80	0.83
93	184	0.71	0.83	0.84
810	222	0.83	0.89	0.88
460	70	0.84	0.88	0.88
82	1016	0.77	0.81	0.82
430	1112	0.80	0.84	0.85
62	861	0.78	0.82	0.83
114	562	0.77	0.82	0.82
664	711	0.75	0.72	0.63
637	665	0.42	0.35	0.22
1364	547	0.76	0.79	0.81
489	537	0.76	0.71	0.54
1446	997	0.80	0.82	0.84
293	474	0.77	0.81	0.82
339	1047	0.80	0.83	0.84
465	849	0.79	0.76	0.68
995	738	0.77	0.81	0.82
929	1088	0.79	0.82	0.84
274	582	0.75	0.74	0.65
1476	919	0.89	0.89	0.88
131	903	0.63	0.68	0.71



## Synthetic Data

1488	1061	0.78	0.80	0.83
93	184	0.71	0.83	0.84
810	222	0.83	0.89	0.88
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274	582	0.75	0.74	0.65
1476	919	0.89	0.89	0.88
134	903	0.63	0.68	0.71
1176	240	0.74	0.84	0.84
731	762	0.79	0.73	0.62
1667	211	0.87	0.91	0.91
804	5	0.73	0.84	0.85
1480	175	0.87	0.91	0.91
824	996	0.78	0.82	0.84
1192	1002	0.76	0.80	0.82
608	409	0.78	0.82	0.84
524	883	0.75	0.70	0.57
480	1094	0.81	0.84	0.85
1329	242	0.72	0.83	0.83
1621	816	0.78	0.80	0.81
415	294	0.77	0.85	0.84
937	345	0.81	0.85	0.83
301	789	0.84	0.78	0.63
100	823	0.79	0.82	0.84
1402	791	0.77	0.80	0.82
1025	1070	0.80	0.83	0.84
496	103	0.83	0.87	0.88
725	562	0.85	0.84	0.76
1423	296	0.73	0.84	0.84
1109	373	0.77	0.82	0.82
868	604	0.69	0.62	0.45
453	797	0.60	0.53	0.39
1451	404	0.77	0.80	0.82
...	...	...	...	...

Safe Sandbox

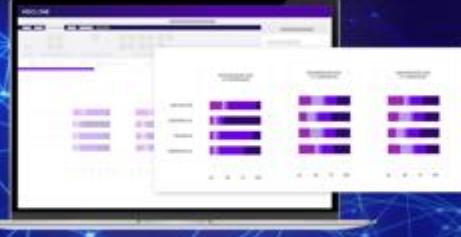


# Benefits of Synthetic Data

- Safe sandbox
- Cannot identify patients
- Great learning platform
- Easier to share data externally
- Conclusions consistent with real data for both descriptive and complex statistical analyses

# Launch of new platform

Access data with independence and speed!



**Healthcare Data  
and the  
MDClone Platform**

*Upcoming Live Session Dates: Friday November 3 & Friday November 24*

**>300** Staff and Researchers  
certified users

**> 20** Years of historical data  
available

**>30%** Requests diverted to  
self-serve

# Stroke

AHA Journals Journal Information All Issues Subjects Features Resources & Education

Home > Stroke > Abstract TP216: Ischemic Stroke In Patients With Cancer Compared To Ischemic Stroke In Patients Without Cancer - A Cohort Study Using Synthetic Data

FREE ACCESS  
ABSTRACT

INTERNATIONAL STROKE CONFERENCE 2022 POSTER ABSTRACTS  
SESSION TITLE: RISK FACTORS AND PREVENTION POSTERS II

Tools Share

Jump to

Abstract

Footnotes

## Abstract

**Background:** Patients with cancer are at an increased risk for ischemic stroke (IS) compared to those without cancer. The objectives of this study are 1) to examine risk factors for stroke in cancer and non-cancer patients, and 2) to identify predictive factors for recurrent IS in cancer patients.

**Methods:** We performed a retrospective cohort study using MDClone, a platform that produces synthetic datasets based on real health system data from the Ottawa Hospital Data Warehouse. We analyzed all subjects with a diagnosis of cancer (excluding non-melanoma skin cancer or primary central nervous system malignancies) and IS within a 2-year period preceding and following their cancer diagnosis, and all IS patients without cancer, from the same time period (2000–2019). Patients were followed until May 2019. A forward selection, stepwise multivariate logistic regression model was used to assess the association between recurrent IS (primary outcome) and baseline characteristics. A sensitivity analysis was performed with only survivors in the cancer cohort.

**Results:** We analyzed 10,875 subjects with IS: 1,250 had cancer and 9,625 did not. In cancer subjects, there was a higher prevalence of chronic obstructive pulmonary disease (8.4% vs 4.7%), previous IS (1.9% vs 0.1%), and previous venous thromboembolism (VTE) (8.3% vs 1.5%); the prevalence of atrial fibrillation and vascular risk factors was similar between the two groups. Recurrent IS occurred in 11.0% of cancer subjects and 12.1% of non-cancer subjects. In

# Development of a perioperative risk score for cirrhosis

**Dr. Angela Cheung, MD**

**Clinician-Scientist**

**Assistant Professor**

**Associate Scientist**

# Changing skillsets



Education & training



New tools



Business acumen (Not  
just technical skills)

# What do I love about my job?



- Working on real-world problems
- Collaborating with a wide variety of different roles
- Working with a talented team
- Always learning!

# Questions

