



Central Statistics Office
An Phríomh-Oifig Staidrimh



NCIS Workshop 18 April 2005

Notes from roundtable discussions

Q.1: Proposed Data Standards / Q.2 List of variables

1.01 Sex

1.02 Date of birth

Format?

1.03 County (Address)

Change name to Place of residence/ post code?

Higher level def pa- code afterwards

post codes

geo director

1st line address

Include NI, Co Dublin

1.04 Marital Status

Drop 'separated informally' (no such legal status)

Clarification on cohabiting situation

1.05 Living arrangements

Simplify paediatric? - worth leaving in 06/07

1.06 Type of accommodation

No official dwelling – needs clarification

Homelessness?

Deleted?

1.07 Religion

(record source): Basis for top choices?

Too broad – law priority

What is the relevance?

Deleted?

1.08 Country of birth

Add NI (Note: already there)

1.09 Ethnicity

'Roma'- understandable?- may need explanation
Question based on numbers?
Genetic info?
Include White British (DoHC pilot)

1.10 GMS Card

1.11 GMS entitlement

03 full or partial

1.12 Private medical insurance

Need to define pan local
Take out or do something else

1.13 Education

30/40 training very important
For paediatrics – 'Are you at school?'/Is the child currently in education?'
If yes, options pre-school, primary, secondary, other, special needs
Last of categories needed

1.14 Principal economic status

Vote for both Option 1 and 2
Guidance on 'apprentice' or 'FAS' trainee under PES

1.15 Social group

Working and school-going children aged over 16?
Gauging social group of 16-18 yr olds at work is not useful

Will they be useful?

Yes All

What this set of questions is going to provide?

Clinical and operational reasons
Differences in service uptake
9 grounds equal status
socio-economic group
Need to define all deliverables from the ethnicity variable

How well are we capturing the socio-economic status of older/retired people with the variables included?

Define all deliverables from ethnicity variable- useful socio-economic/genetic/cultural/health behaviour perspective

Do we include income?

Are any modifications needed?

Variable to measure acceptability of variable

Unknown or 'other' doesn't wish to answer
For select number of sensitive questions
Informed consent
Legal requirements

Different situation- family doctor
Hospital setting

Occupation on its own should be collected besides Social group

Capture employment status and perhaps income

Capture person's mother tongue [perhaps it is more their command of English is at issue] - reason - greater ethnic mix, equality issues in using health services

Q.3 Issues for data collection:

a) Is it feasible to collect the desired information in the proposed settings- CHAIR, CRIS, Heartwatch?

CRIS:

Yes
Resource implications
Training

Heartwatch:

Challenging – living arrangements, Ethnicity, Religion- sensitivity
- Balance
- Uses of data
- Non-referral may be due to no services

Patient registration dataset
Economic status- doable

Patient care record + national information
- Intention of the data – differs
- anonymity and data protection (HIQA legislation), patient education

b) Are any modifications needed?

Keep it simple- absolute minimum- get to the nub- data quality dependent

Infrastructure

Data management

Harness feedback from GP's

c) What other issues regarding data collection in the patient care setting should be considered?

Repeat requests for information from patient to be avoided

Q.4 Education and Training

Education of patients necessary

Needs to be well-resourced to collect this volume of data

- consider defining an absolute minimum
- fall-back position

Training combined

Ongoing

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Changing staff

Q.5 Any other comments

While the outcome of the workshop might be of benefit in suggesting the demo and soc-ec data for use in the CV databases - that generalising to health info systems in general [designed for other purposes] would not be appropriate.