The RECORD statement – checklist of items, extended from the STROBE statement, that should be reported in observational studies using routinely collected health data.

	Item No.	STROBE items	Location in manuscript where items are reported	RECORD items	Location in manuscript where items are reported
Title and abstract					
	1	(a) Indicate the study's design with a commonly used term in the title or the abstract (b) Provide in the abstract an informative and balanced summary of what was done and what was found	1a Study design listed in the title 1b Abstract section includes introduction, methods, results and conclusions (page 4 lines 61-87).	RECORD 1.1: The type of data used should be specified in the title or abstract. When possible, the name of the databases used should be included. RECORD 1.2: If applicable, the geographic region and timeframe within which the study took place should be reported in the title or abstract. RECORD 1.3: If linkage between databases was conducted for the study, this should be clearly stated in the title or abstract.	1.1. Type of data: page 4, line 68 1.2. Geographic region: Title (page 1) and Abstract (page 4, line 64-65); Timeframe: page 4, lines 69-70 1.3. Linkage cleared stated in the Title (page 1) and Abstract (page 4, line 68)
Introduction					
Background rationale	2	Explain the scientific background and rationale for the investigation being reported	Introduction section: scientific background: page 5, lines 111 - 139; rationale: page 5-6, lines 141-165		
Objectives	3	State specific objectives, including any prespecified hypotheses	Objectives: page 6, lines 162-165		
Methods					
Study Design	4	Present key elements of study design early in the paper	Key study design elements: page 6, lines 167-170		

Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	Setting introduced in Introduction (page 6, lines 158-165) and expanded upon (with location and recruitment period) in Methods section: page 6, lines 171-174		
Participants	6	*(a) Cohort study* - Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up *Case-control study* - Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. Give the rationale for the choice of cases and controls *Cross-sectional study* - Give the eligibility criteria, and the sources and methods of selection of participants *(b) Cohort study* - For matched studies, give matching criteria and number of exposed and unexposed *Case-control study* - For matched studies, give matching criteria and the number of controls per case	6a) Eligibility criteria: page 6 171-174. Source and method of selection: page 6-7, lines 175-195	RECORD 6.1: The methods of study population selection (such as codes or algorithms used to identify subjects) should be listed in detail. If this is not possible, an explanation should be provided. RECORD 6.2: Any validation studies of the codes or algorithms used to select the population should be referenced. If validation was conducted for this study and not published elsewhere, detailed methods and results should be provided. RECORD 6.3: If the study involved linkage of databases, consider use of a flow diagram or other graphical display to demonstrate the data linkage process, including the number of individuals with linked data at each stage.	6.1 Eligibility criteria (page 6 171-174), source and method of selection page 6-7, lines 175-195). 6.2 Not applicable 6.3 Figure 1, page 17 is the data flow diagram. Figure 2 (page 18) describes the data linkage process.

Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable.	Outcomes: page 7, lines 212-227 Potential effect modifers (differing age/sex distributions): page 7 lines 218-222	RECORD 7.1: A complete list of codes and algorithms used to classify exposures, outcomes, confounders, and effect modifiers should be provided. If these cannot be reported, an explanation should be provided.	Codes and definitions in Extended data file 1 "Definitions and ICD-10 code lists for avoidable, amenable and preventable mortality". Page 22-26 ICD-10 codes to classify causes of death Extended data file 2-3, page 26-29.
Data sources/ measurement	8	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group	Sources of data: page 6-7, lines 175-191. Methods of assessment: page 7, lines 212-227 There is more than one group but their outcome data comes from the same source: Page 7 lines 206-211		
Bias	9	Describe any efforts to address potential sources of bias	Efforts to address differing age/sex distributions described in page 7 lines 218-222		
Study size	10	Explain how the study size was arrived at	Page 7, lines 186-192		
Quantitative	11	Explain how quantitative	Handling of		

variables		variables were handled in the analyses. If applicable, describe which groupings were chosen, and why	quantitative variables: page 7-8, lines 192-206		
Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding (b) Describe any methods used to examine subgroups and interactions (c) Explain how missing data were addressed (d) *Cohort study* - If applicable, explain how loss to follow-up was addressed *Case-control study* - If applicable, explain how matching of cases and controls was addressed *Cross-sectional study* - If applicable, describe analytical methods taking account of sampling strategy (e) Describe any sensitivity analyses	12a) Statistical methods: page 7-8, lines 195-206 b) N/A c) Statistical methods: page 8, lines 209-212 d) N/A		
Data access and cleaning methods		..		RECORD 12.1: Authors should describe the extent to which the investigators had access to the database population used to create the study population. RECORD 12.2: Authors should provide information on the data cleaning methods used in the study.	12.1 REgarding data later used for linkage: Page 6, lines 155-157. The full database with linked data: Page 8, lines 180-191
Linkage		..		RECORD 12.3: State whether the study included person-level, institutional-level, or other data linkage across two or more databases. The	Person-level data: page 7, line 191-192. Linkage methods:

				methods of linkage and methods of linkage quality evaluation should be provided.	Page 7, lines 189-195
Results					
Participants	13	(a) Report the numbers of individuals at each stage of the study (*e.g.*, numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed) (b) Give reasons for non-participation at each stage. (c) Consider use of a flow diagram	13a) Described in flowchart page 18 b) Individuals either linked or not N/A c Flowchart page 18	RECORD 13.1: Describe in detail the selection of the persons included in the study (*i.e.*, study population selection) including filtering based on data quality, data availability and linkage. The selection of included persons can be described in the text and/or by means of the study flow diagram.	13.1 Described in flowchart page 18 and Results section page 9, lines 230-235.
Descriptive data	14	(a) Give characteristics of study participants (*e.g.*, demographic, clinical, social) and information on exposures and potential confounders (b) Indicate the number of participants with missing data for each variable of interest (c) *Cohort study* - summarise follow-up time (*e.g.*, average and total amount)	14a Characteristics: Page 8, lines 236-241. Also Table 1. Information on exposures: Page 8, lines 230-234. b) N/A c) Person-time analyses on-going, page10, line 297-299.		
Outcome data	15	*Cohort study* - Report numbers of outcome events or summary measures over time *Case-control study* - Report numbers in each exposure category, or summary measures of exposure *Cross-sectional study* - Report numbers of outcome events or	Outcome events: Page 8, line 235-236. Also described in lines 246-266.		

		summary measures			
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (e.g., 95% confidence interval). Make clear which confounders were adjusted for and why they were included (b) Report category boundaries when continuous variables were categorized (c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	16a) Table 2, page 15-16. Weighted and unweighted figures provided. CIs not applicable as one group weighted so that their age and sex mix matches the other group. b) N/A c) Not in the scope of this paper.		
Other analyses	17	Report other analyses done—e.g., analyses of subgroups and interactions, and sensitivity analyses	N/A		
Discussion					
Key results	18	Summarise key results with reference to study objectives	Page 10, lines 273-258		
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	Limitations: Page 10, 299-304 Potential bias: Page 11, 314-218.	RECORD 19.1: Discuss the implications of using data that were not created or collected to answer the specific research question(s). Include discussion of misclassification bias, unmeasured confounding, missing data, and changing eligibility over time, as they pertain to the study being reported.	Data not collected: Page 10 line 295-298. Potential bias: Page 11, 314-218.
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	Interpretation and results from similar studies/other related evidence: Page 10-11, lines 306-219.		

Generalisability	21	Discuss the generalisability (external validity) of the study results	Generalisability to homeless people discussed: Page 11 lines 316-321		
Other Information					
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based	Grant information and funding: Page 13 lines 385-403.		
Accessibility of protocol, raw data, and programming code		..		RECORD 22.1: Authors should provide information on how to access any supplemental information such as the study protocol, raw data, or programming code.	22.1 Data availability: Page 10, lines 361-374

*Reference: Benchimol EI, Smeeth L, Guttmann A, Harron K, Moher D, Petersen I, Sørensen HT, von Elm E, Langan SM, the RECORD Working Committee. The REporting of studies Conducted using Observational Routinely-collected health Data (RECORD) Statement. *PLoS Medicine* 2015; in press.