

Maximizing Data Changes Opportunities: Solutions That Work

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Background:

With the advent of the unprecedented 2010 data changes work effort, central cancer registry resources were stretched well beyond their limits. Central registries were faced with data changes challenges the likes of which had never been experienced before. How was all this going to be accomplished given our dwindling resources? Here is our central registry experience in facing the challenge.

Objective:

Now that the "recovery" period has begun, we can stand back and take a look at the 2010 data changes journey and determine what went well, what didn't and what we need (beyond more resources and fewer changes at one time) to improve efficiencies in our own data changes processes. Methods: The 2010 data changes effort provided us an opportunity to implement new and innovative ideas and improve upon existing resources. Project managing the entire effort and maintaining good communication was a key element. Individuals were encouraged to think outside the box and come up with ideas and solutions for the many challenges we faced.

Results:

- Project Management
- Monthly meetings with involvement of various departments
- > Frequent internal/inter-unit and Inter-region meetings
- Frequent communications between meetings
- Updates on Monthly Regional Registry Teleconferences
- Reviewed risks, assumptions and timelines on a regular basis and discussion of consequences/ dependencies of ongoing delays beyond our control
- Implemented a Data Changes Alert System for Registrars
- 16 Data Alerts distributed to registrars statewide using Constant Contact
- Data alerts were also posted to the CCR website





- Implemented a Monthly Notification Systems for Registrars
- New CCR Inquiry System coding and abstracting questions and answers
- New SEER SINQ questions and answers
- Standards Documents Improvements
- Implemented a better system of tracking and summarizing edit changes (Volume III – Data Dictionary)
- Streamlined documentation in our coding and abstracting standards document by providing more links to additional resources (CCR Volume I)
- Developed a simple tool to identify which CSv2 SSF's were required in California (found in CCR Volume I, Appendix Y)
- Developed improvements and efficiencies to our standards for automated reporting document (CCR Volume II)
- Statewide Data Management System (Eureka)
- Advantageous due to immediate/frequent interaction
- . Hospital Software Vendor (CNET)
 - Representation on the NAACCR Edits Workgroup
 - Registrars provided input in software modifications
- . Coordinated Training Efforts
- 5 designated CSv2 Trainers Statewide
- Phased in approach
- 11 training sessions held with a total of 300 registrars trained
- Frequently Asked Questions documented developed and posted on the CCR website
- Staged implementation of Data Changes Hospital and Central Registry Software
- > Frequent communications between the software teams
- Plan for completing older cases prior to the 2010 conversion
- Frequent communication with hospital registrars and regional registries
- · Testing, testing, testing
- Participation by regional registry staff



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_	A	В	С	D	J
-1				Edit Identifier Tracker	
2	Type	ID	V3	Edit Title	Notes
3	ER	001	×	Census Tract 2010 (SEER)	NAACCR New for 2011 data item changes
4	ER	002	х	Year First Seen	
5	ER	003	х	Census Block Group 2010 (NAACCR)	NAACCR New for 2011 data item changes
6	ER	004	×	Census Tr Certainty 2010 (SEER)	NAACCR New for 2011 data item changes
7	ER	005	х	Chemo 1 NSC Number	CER New for 2011 data item changes
8	ER	006	×	Chemo 1 Num Doses Planned	CER New for 2011 data item changes
9	ER	007	×	Chemo 1 Planned Dose	CER New for 2011 data item changes
10	ER	900	х	Accession Number-Hosp	
11	ER	009	х	Tumor Record Number	
12	ER	010	×	Chemo 1 Planned Dose Unit	CER New for 2011 data item changes
13	ER	011	х	Chemo 1 Num Doses Receivd	CER New for 2011 data item changes
14	ER	012	х	Other Regional Registry ID	
15	ER	013	х	Other Regional Registry Patient No	
16	ER	014	х	Abstracted By	
17	ER	015	х	Date Case Completed	
18	ER	016	х	Chema 1 Received Dase	CER New for 2011 data item changes
19	ER	017	х	Chema 1 Received DaseUnit	CER New for 2011 data item changes
20	ER	018a	х	Over-ride Admis Dx, Over-ride HospSeq/Site	
21	ER	018ap	х	Over-ride Name/Sex, Race/Birthplace, Spanish/Birthplace	
22	ER	0181	х	Over-ride Age/Site/Morph, Report Source, Histology, III Define Site, LuekLymph,	
23	ER	019	х	Chemo 1 Start Date	CER New for 2011 data item changes
24	ER	020	х	Coding Proc	
25	ER	021	х	Study Flag	
26	ER	022	х	Chemo 1 Start Date Flag	CER New for 2011 data item changes
27	ER	023	х	Other Regional Registry Tumor No	
28	ER	024	х	Chemo 1 End Date	CER New for 2011 data item changes
29	ER	025	х	Social Security Number Suffix	
30	ER	026	х	Chemo 1 End Date Flag	CER New for 2011 data item changes
31	ER	027	х	Census Tract 1970/90/90	
32	ER	028	х	Census Tract Block 1990	
33	ER	029	х	NameLast	
34	ER	030	х	NameFirst	
35	ER	031	х	Name-Middle	
36	ER	032	х	Height	CER New for 2011 data item changes

- Identified the need to re-run edits on the entire database on a regular basis to avoid large scale data clean-up efforts
- Manual review processes must be well coordinated and adequate time given to complete

Conclusions:

Although the 2010 data changes were extremely labor intensive, it forced us to examine our own data changes processes. Staff members were encouraged to develop new and innovative ways to improve our data changes approach. Efficiencies were identified and implemented. Despite the challenges faced, these actions lead to a successful implementation of 2010 data changes. Change does indeed present challenges and opportunities for improvement.