Data Acquisition, Data Management and Subject Tracking in an RCT:

Promoting Breast Cancer Screening in Non-Adherent Women

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Disclosure of Conflict of Interest

I have no actual or potential conflict of interest in relation to this program/presentation

Study Overview

- 5- year study funded by National Cancer Institute
- Dynamic study population: Women age 51-84 (Later age 40-84)
 - Core eligibility: Fallon Community Health Plan (FCHP) member
 >=18 months with a Fallon (Reliant) Clinic PCP
 - Later added 3 other health plans and reduced time in plan to 13 months
 - Baseline n=23,000
 - New subjects added as they become eligible (Health plan membership >=18 months with Fallon/Reliant PCP)
 - Subjects excluded when no longer eligible, but may return if core eligibility regained

Study Overview

Main objective:

- Compare the effectiveness of 3 different interventions arms in promoting adherence to screening mammography over 4years.
- When first meeting core eligibility requirements, women are randomized to three study arms:
 - 1. Reminder letter (control, usual care)
 - Reminder letter followed by reminder/scheduling call to nonresponders
 - 3. Reminder letter and educational booklet followed by an enhanced tailored telephone counseling call to nonresponders.

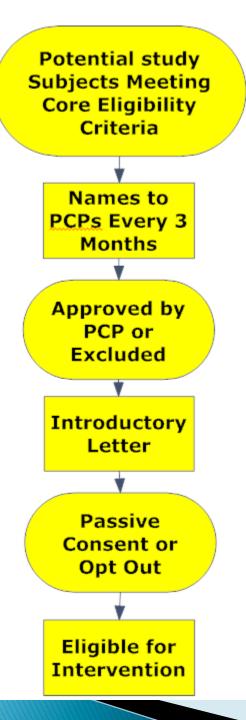
The call includes:

- Reminding
- Tailored review of information in educational booklet
- Motivational interviewing as needed
- Scheduling

Establish Study Eligibility

Potential study Subjects Meeting Core Eligibility Criteria Names to PCPs Every 3 Months Approved by PCP or Excluded Introductory Letter Passive Consent or **Opt Out** Eligible for Intervention

Establish Study Eligibility



Intervention Delivery

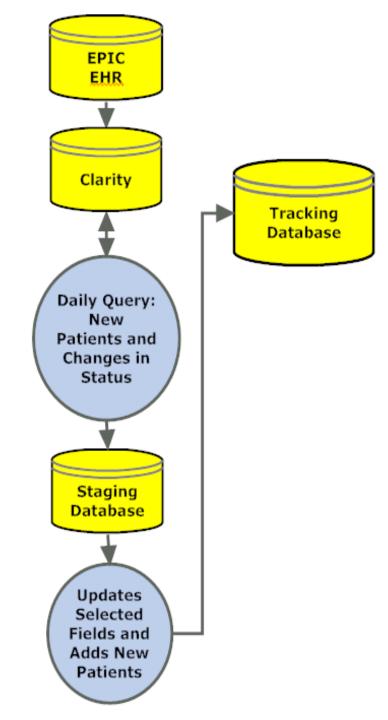
>=18 Months
from Last
Mammogram or
Study Entry

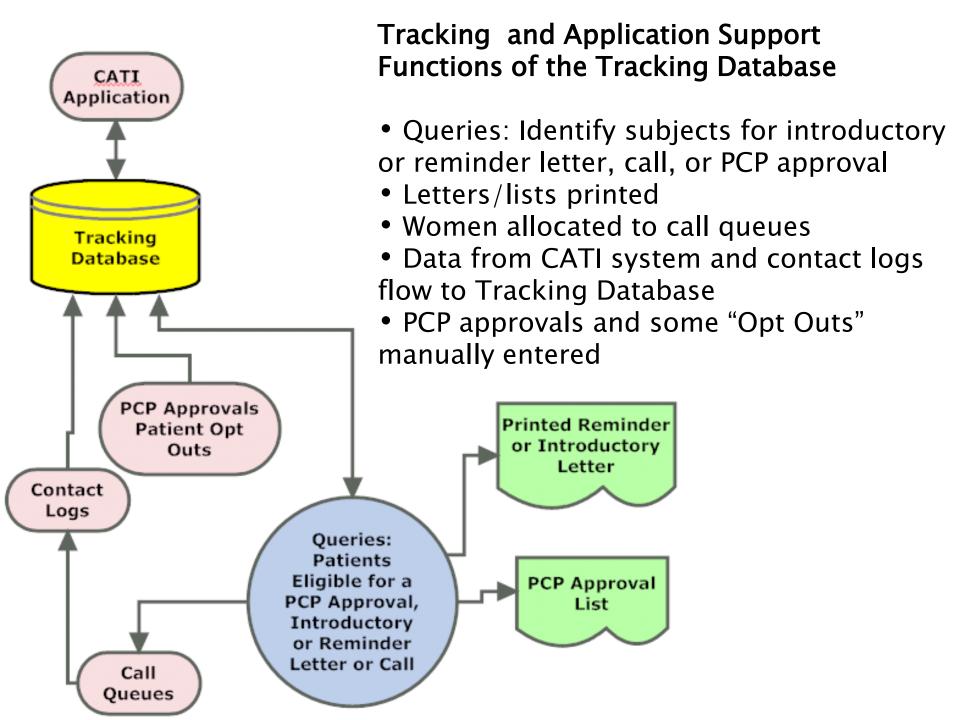
Reminder Letter

- Schedules a Mammogram
- No Response
- Reminder Call
- Counseling Call
- No Further
 Intervention
- If No Mammogram, Recycle in 12 months
- If Mammogram
 Received, Recycle in
 18 Months

Data Flow: Core Eligibility and Mammogram Tracking

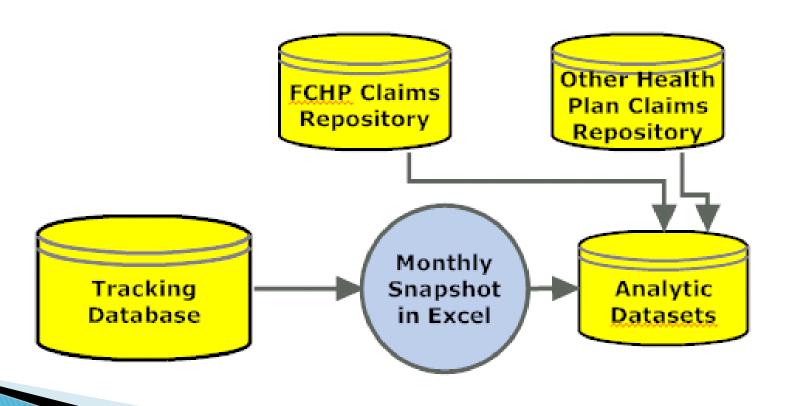
- EHR data flows into Clarity data repository
- Automated daily query of Clarity: Data on women >=40 loads into Staging Database
- Eligibility flag is set (Yes/no) based on core eligibility criteria
- Tracking Database updated:
 - ➤ Newly eligible subjects added
 - > Eligibility flag, contact info, date of last and next scheduled mammogram updated

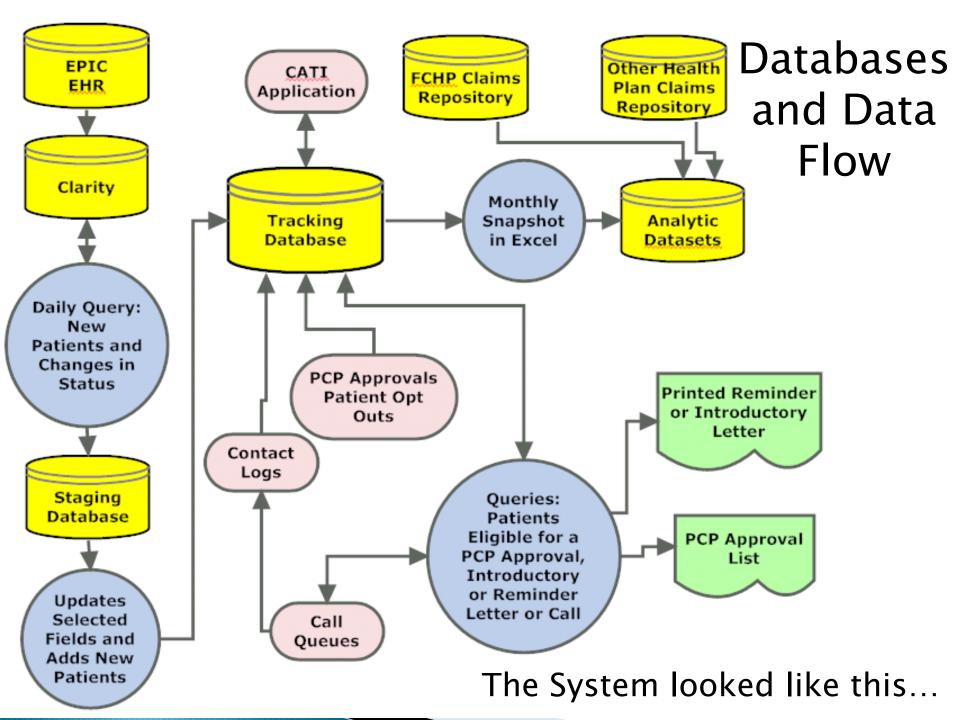




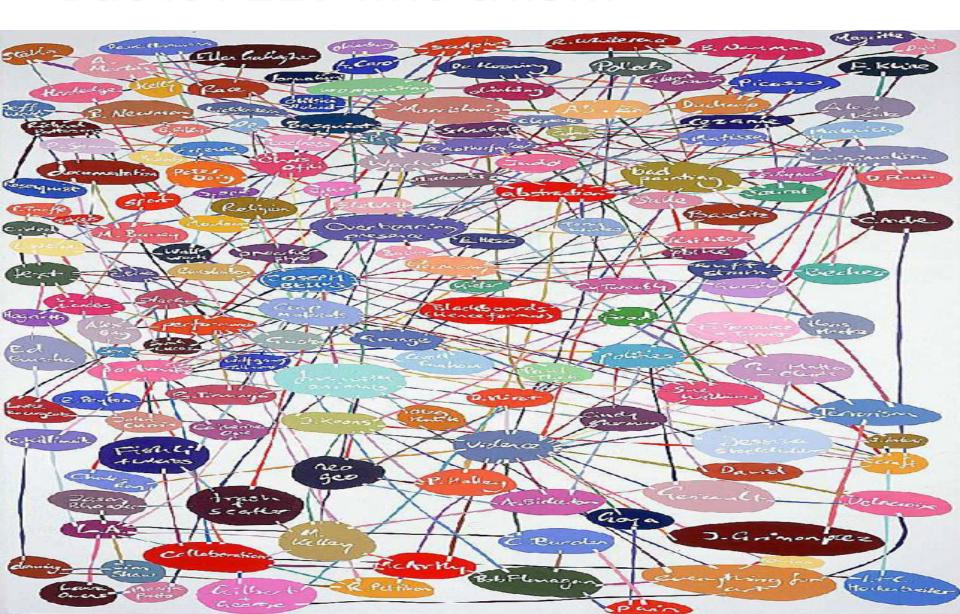
Data Flow to Analytic Datasets

- Monthly snapshots merged as needed for analysis
- Data from fields written to >1 time in a month are lost
- Claims from multiple years extracted and merged with data from Tracking Database





But it FELT like this...



Challenges and Issues

- Inconsistent field names and terminology (e.g. 4 types of "eligibility")
- Losing/Regaining eligibility (Overwriting fields and loss of history) and specifying eligibility in staging dataset
- 3 data sources for core eligibility, sometimes in conflict (Clarity, FCHP claims, CATI)
- ▶ 1 4 repeats (waves) of interventions
- Repeated snapshots of tracking data is inefficient and ineffective way to create an analytic dataset

Lessons Learned

- Use consistent field names that indicate data source when possible
- Identify and resolve any potential conflicts in the design phase
- Develop a flow chart of all eligibility processes and waves of intervention when designing the system
- Maintain control of all eligibility rules and of updating of the tracking database
- Do not overwrite values in any variable
- Date and time stamp all entries
- Specify analytic dataset as subset of tracking database in the design phase

Expertise Needed for Building Effective Data Acquisition/Management and Tracking Systems

Expertise in:

- Source data content and organization
- Source data extraction, transfer, and loading (ETL)
- Database design
- System design (Data flow, automated queries, interfaces, hardware)
- Data management (Field names and formats, record structure, analytic dataset construction)
- Data analysis (Biostatistics)
- Software development for custom applications
- Facilitation of process of specifying all system requirements