

2020 NPCR VIRGINIA CANCER REGISTRY SUCCESS STORY

STORY TOPIC/FOCI: Registry operations, COVID-19 challenges overcome, electronic reporting

STORY CATEGORY: Registry Operations

STORY TITLE: Registry Workgroup Clears Hurdles to Cross Finish Line of Software Implementation!

STORY AUTHORS: Larry Kirkland, MA; John Ladouceur, MHA, CTR; Michael Peyton, CTR; Nikkia Ray, MPH

SUMMARY

Virginia Cancer Registry (VCR) staff developed an in-house workgroup to perform thorough testing, troubleshooting, and statewide training on the latest version of Web Plus software to push to providers and reporters for use. Staff had to overcome several hurdles not limited to stringent statewide security restrictions, agency limitations in response to the COVID-19 pandemic, and budget constraints to accomplish this. This testing initiative began in February 2020, with the Virginia Department of Health (VDH) moving staff to a 100% teleworking status in March. Thus, most efforts dedicated to this software testing and launch, including initial onboarding instruction and additional on-going training for providers was completed virtually.

CHALLENGE

This is the VCR's second attempt to launch this software. During the initial testing period in 2017, the registry did not have dedicated information technology (IT) personnel who were both familiar with the registry software and operations and had the time to dedicate to thorough testing. The registry used contacts from VDH's overarching IT department, the Office of Information Management (OIM) to assist as available—and not always with the same staff member from OIM. In addition, due to the proximity to several highly secure government and military establishments, Virginia has higher security standards and more stringent protocols for implementing public facing software or for new software versus internal programs such as Prep Plus or software upgrades. These factors alone made it nearly impossible to have meetings between VCR, OIM and CDC staff to discuss all parameters required for software implementation.

VCR faced several challenges that made adopting an electronic reporting system such as Web Plus an easy decision, albeit a complex process. Program and agency budget constraints prevented hiring additional staff to field and abstract the thousands of cases received and processed annually by the registry. Established reporting software used by several reporters in the field required the VCR education and training coordinator to either mail, or hand deliver the software loaded on external drives to each site around the state, with additional visits scheduled as needed for troubleshooting and training.

Conversion to a web-based reporting software would not be much of a transition for reporters currently using some form of electronic system. However, Virginia has several smaller sized reporting facilities with limited staff and capabilities that still reported on paper forms. These facilities presented a considerable challenge as they were especially reluctant to commit the constrained time and staff available to such a large learning curve.

SOLUTION

The Virginia Cancer Registry hired an Informatics Data Systems Manager as a member of the permanent registry staff. Once software testing began, the registry now had a dedicated IT resource capable of committing the time and effort to learning registry operations and software functionality, as well as serving as a liaison between the registry and the CDC for testing issues. After identifying pertinent components for a successful testing process, the newly developed workgroup consisting of the Education and Training Coordinator, IT Specialist, and Cancer Data Analyst/CTR, the registry moved forward with alpha testing internally.

The Education and Training Coordinator assessed initial interest in conversion to web-based reporting by polling the Meaningful Use system for providers who expressed desire in public health reporting and would receive reimbursement incentives for registering/reporting. Other reporters who expressed interest, larger volume reporters, and facilities who could benefit from the transition were considered to generate the first testing group upon progression to beta testing. Formalized testing began with the workgroup mapping out a testing plan, timeline, and a list of challenges experienced from the previous release attempt that would need to be tackled first. The workgroup met weekly, troubleshooting every feature of the Web Plus software and keeping a running list of errors encountered. The group articulated the error and defect list to the CDC and developed workarounds which were later used to provide users an expectation management guide of solutions to potential problems. Seemingly as soon as the workgroup was reaching a level of optimal productivity, all operations were abruptly modified as agency wide adjustments had to be made in response to the COVID-19 pandemic. The workgroup switched to a virtual meeting interface and continued their testing with no decrease in efficiency, now holding numerous weekly video conferences via Google Meet, sharing screens during calls, and creating shared fileserver locations where all documentation could be viewed by each of the workgroup members.

RESULTS

Once the workgroup was comfortable with the level of rigorous testing and troubleshooting, they prepared for the beta testing phase of the process. The initial beta testing cohort consisted of six external users who already had experience using the Abstract Plus or Web Plus software with other states. The registry received feedback from the cohort, adjusted to additional workarounds, and pushed the beta tested software to the remaining reporting facilities interested in trying Web Plus on September 24, 2020. Within three weeks of this soft opening, the registry's workgroup had 19 facilities using Web Plus, created 44 external user accounts and had already received more than 100 cases for review and processing.

The Education and Training Coordinator and Cancer Data Analyst provided optimal customer service and training to onboard laboratory facilities and smaller pathology labs that formerly

reported 100% via paper and that were most hesitant to make the leap towards electronic reporting. This training allowed staff at the reporting facilities to abstract and report close to the level of a trained Certified Tumor Registrar (CTR). Although the initial submissions would still require regular quality assurance checks, having external reporters inputting their own cases freed the registry CTRs to commit more time to abstracting more complex cases from hospitals and larger facilities.

In addition to increasing efficiency and easing the burden on registry CTRs, implementation of Web Plus allows us at the Virginia Cancer Registry to house a centralized database from our reporters at our disposal. Having this pool of data allows us to perform analytics, identify trends in the field in real time to assess which reporters are most efficient, and which reporters need more training. A Web-based system also allows us to be aligned with trends towards cloud-based computing, permitting access from anywhere without any special software installed on the computer. This is especially helpful given current conditions with the COVID-19 pandemic.

SUSTAINING SUCCESS

We felt it was imperative for the registry to have a three-fold support approach to sustain success with the Web Plus implementation. The approach consists of the IT support, education and training on a management level, and a cancer registrar overseeing the abstract entry level to assist reporters in every facet of their software usage. Software implementation is a moving target, with regular software updates requiring ongoing testing. Moving forward, regular check-ins with reporters to touch base and assess performance will be scheduled, as well a monthly virtual Web Plus user group meeting, consisting of light teaching, training, networking, and question and answer sessions. The Virginia Cancer Registry is committed to the continued success of our reporting facilities, as their accomplishments directly contribute to achieving the National Program of Cancer Registry's (NPCR) Registry of Distinction certification.

REGISTRY CONTACT INFORMATION

Nikkia Ray, nikkia.ray@vdh.virginia.gov, (804) 864-7860