

OKLAHOMA

Oklahoma Central Cancer Registry; Susan Nagelhout, CTR;
Amber Sheikh, MPH

Implementation of New Processes to Streamline Cancer Registry
Operations, Identify Surveillance Gaps and Enhance Acquisition of
Complete, Timely, Quality Assured Cancer Data

NATIONAL PROGRAM OF CANCER REGISTRIES SUCCESS STORY

SUMMARY: During calendar year 2018, the Oklahoma Central Cancer Registry (OCCR) leveraged systems available at the Oklahoma State Department of Health (OSDH) and identified new tools to improve data quality and completeness for the National Program of Cancer Registries (NPCR) and North American Association of Central Cancer Registries (NAACCR) data submissions.

The enhanced processes put in place will continue to benefit the OCCR in future years. Additional benefits include better use of limited resources and more skilled staff time dedicated towards data submission activities such as consolidation, duplicate review, sequence 99 review (reviewing for code 99 indicating they can't identify how many primaries a patient had), and edits review, instead of using staff time for timely and tedious follow-back activities with facilities for missing data elements.

CHALLENGES: Focus areas to identify surveillance gaps include:

Data Quality and Completeness –

- 1) The death clearance process in the past followed back to facilities one at a time.
- 2) Duplicate review is tedious and requires the cooperation of facility reporters. Lack of response or delay of response from reporters in reply to queries regarding verification of demographic information is a common problem.
- 3) Data linkages to ensure that facilities submit all reportable diagnoses to the OCCR requires constant monitoring and communication with reporters.

Data Timeliness –

- Ongoing training needs, especially for small facilities, expend a considerable amount of the OCCR staff time.
- A small facility is one that reports less than 50 cases per year and reports cancer cases via the Center for Disease Control and Prevention (CDC) Web Plus application.
- The OCCR staff are required to train new reporters quite frequently.
- Historically, facilities using Web Plus were trained on-site, oftentimes necessitating out-of-town travel.

SOLUTIONS:

- 1) The death clearance procedure was slightly modified in order to enhance the follow-back process. The new process consisted of using the hospital discharge data to follow-back to multiple facilities at the same time, as opposed to the past process of following back to multiple facilities sequentially.
- 2) Duplicate Review- In 2018, the OCCR obtained two user licenses for the use of CLEAR online investigation software. CLEAR is an investigative online search tool, which can be used to ascertain accurate demographic information on individuals, including name, date of birth, social security number and address at diagnosis.
- 3) Data Linkages- Hospital discharge data is used to assist with the assessment of cancer reporting compliance. The discharge data is linked to individual facility subsystems, identifying cancer cases, which may have been missed.

Data steward from the OCCR staff partnered with the Health-e-Oklahoma (HeO) project, an integration and interoperability project (including an enterprise master

patient index [eMPI]), which links data systems across the OSDH and other Oklahoma health and human services agencies. The HeO project will enhance the death clearance and data linkage processes.

- 4) Ongoing Training Needs- An online Web Plus training module was developed in 2018. The module includes a Pre Test, a video training guide with associated PowerPoint presentation, a Post Test, and a Test Abstract.

RESULTS:

- 1) Death Clearance Process- Using sequential follow-back during the death clearance process created an unnecessary delay in obtaining information, as initial queries were frequently unsuccessful. The new process allowed for the casting of a wider net, which saved valuable time.
- 2) Duplicate Reviews- Registry staff used CLEAR software to resolve demographic discrepancies within cancer cases during duplicate case review. No follow-back to the reporting facility was required, saving the OCCR staff countless hours of time. In addition, CLEAR is used in an attempt to identify persons on the mortality list who did not match a registry database case due to missing demographic information.
- 3) Data Linkages- Missing cases identified during linkage with hospital discharge data are uploaded to the Web Plus account for each facility. The compliance specialist, via email, instructs facility reporters to either abstract the missing cases or provide a detailed reason as to why the cases are not reportable. The email includes a deadline for completion. This process proves to be successful as it provides the facilities with a definitive case-finding list. Missing cases are submitted on time, alleviating the necessity for continued compliance monitoring.

HeO processes are being put in place to establish data to be included (shared) in results and annual exchange agreements between the participating data systems. This will allow the OCCR to receive linked results for the hospital discharge data and the death certificate records through automated linkage results and save staff time and effort in conducting manual linkages and death clearance.

- 4) Ongoing Training Needs- The new Web Plus online module provides comprehensive reporter training with minimal utilization of the OCCR resources. Since the launch, two new registrars have been scheduled to complete the online training.

SUSTAINING SUCCESS: As each of the new processes implemented and tested for streamlining operations shows success, their use will be incorporated into the OCCR Policies and Procedures. The OCCR staff will continue to utilize CLEAR software and assess need for additional CLEAR accounts and batch processing. Use of the discharge data for assistance with compliance and death clearance can continue seamlessly as a SAS program has been written and procedures have been refined. Feedback from users of the Web Plus online training module is critical for the successful training of new reporters. The OCCR staff will edit and modify the online training module as needed to provide comprehensive training. Progress with the development of the HeO project will allow assessment of additional data systems through the HeO project to identify new data sources for missing information to complete a cancer case record.

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