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Data Acquisition, Data Management and Subject Tracking in an RCT: Promoting Breast Cancer Screening in Non-Adherent Women

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Data Acquisition, Data Management and Subject Tracking in an RCT: *Promoting Breast Cancer Screening in Non-Adherent Women*

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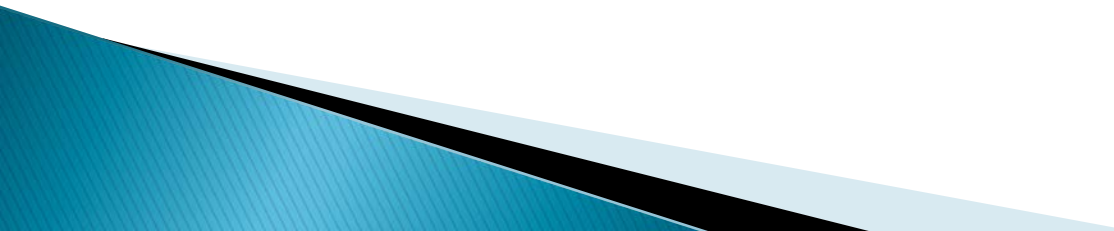
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Disclosure of Conflict of Interest

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

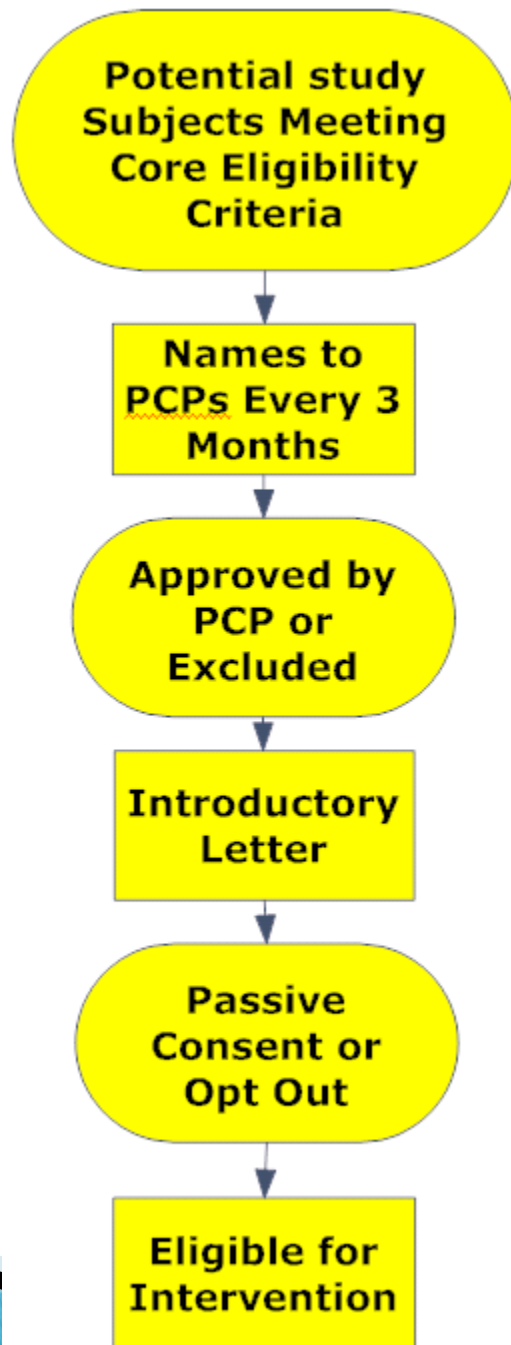
Main objective:

- ▶ Compare the effectiveness of 3 different interventions arms in promoting adherence to screening mammography over 4-years.
- ▶ When first meeting core eligibility requirements, women are randomized to three study arms:
 1. Reminder letter (control, usual care)
 2. 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.

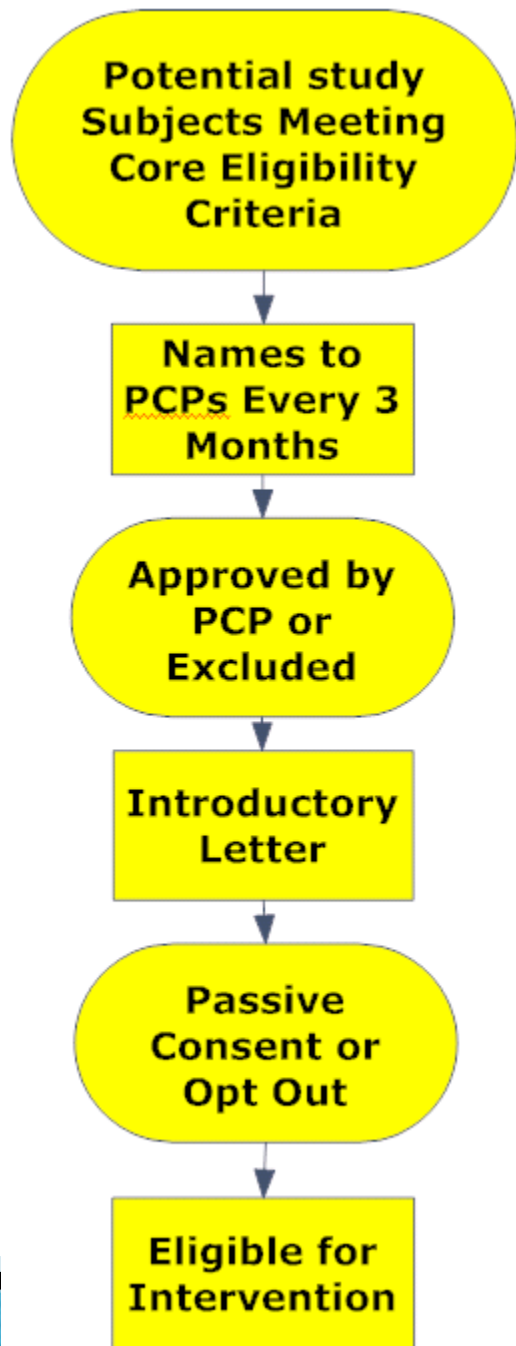
The call includes:

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

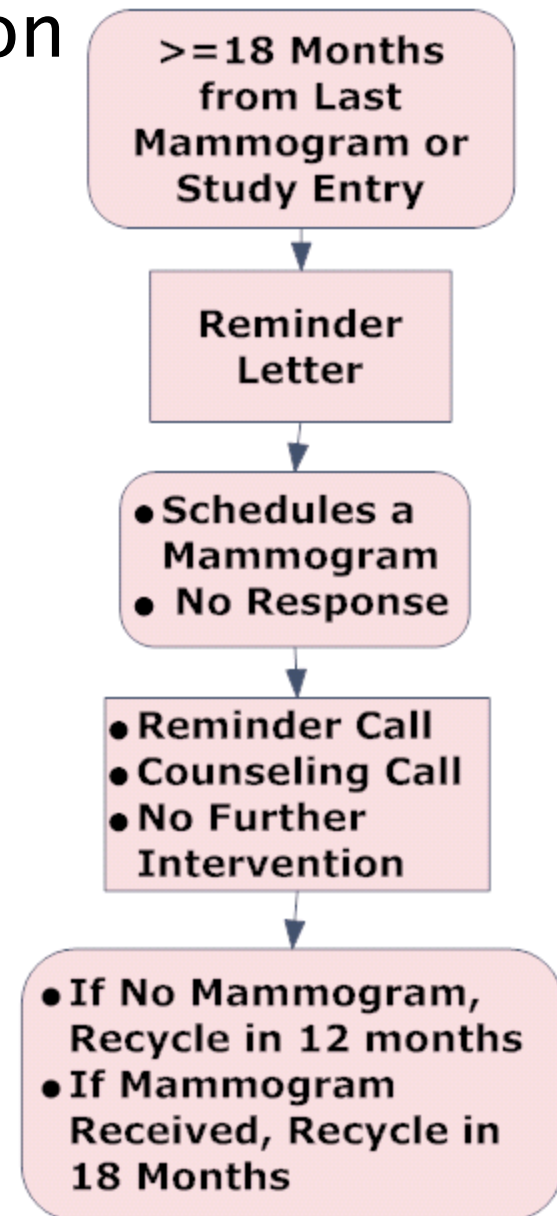
Establish Study Eligibility



Establish Study Eligibility

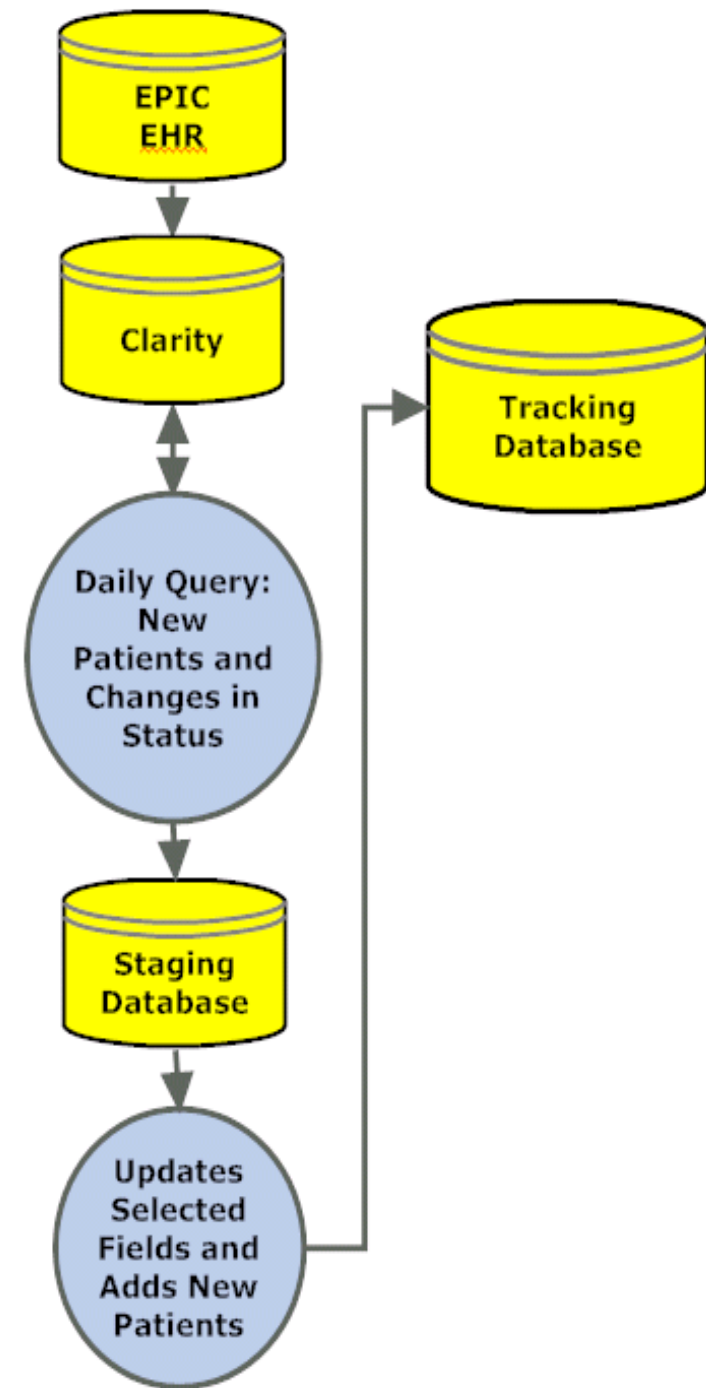


Intervention Delivery



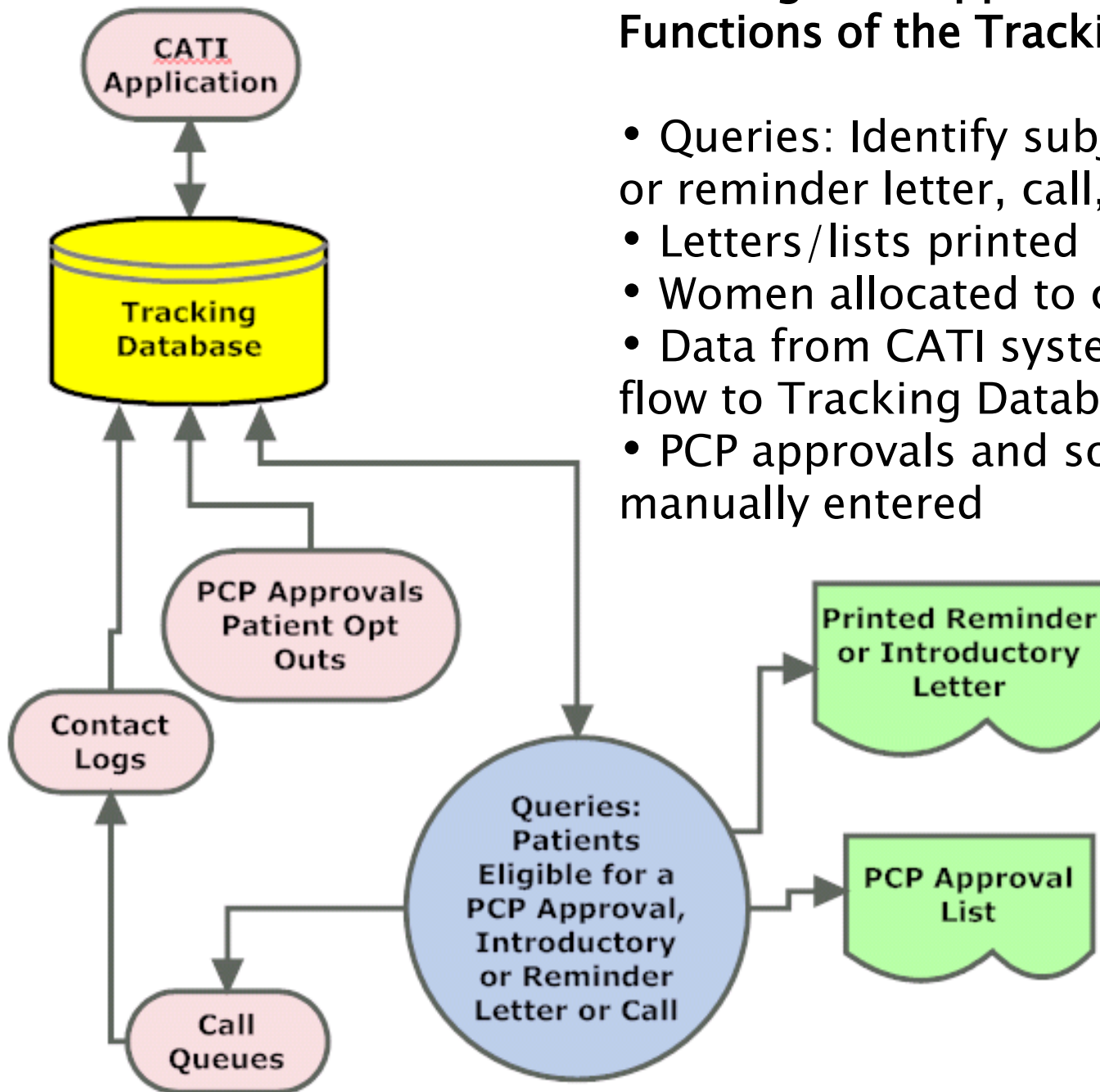
Data Flow: Core Eligibility and Mammogram Tracking

- 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



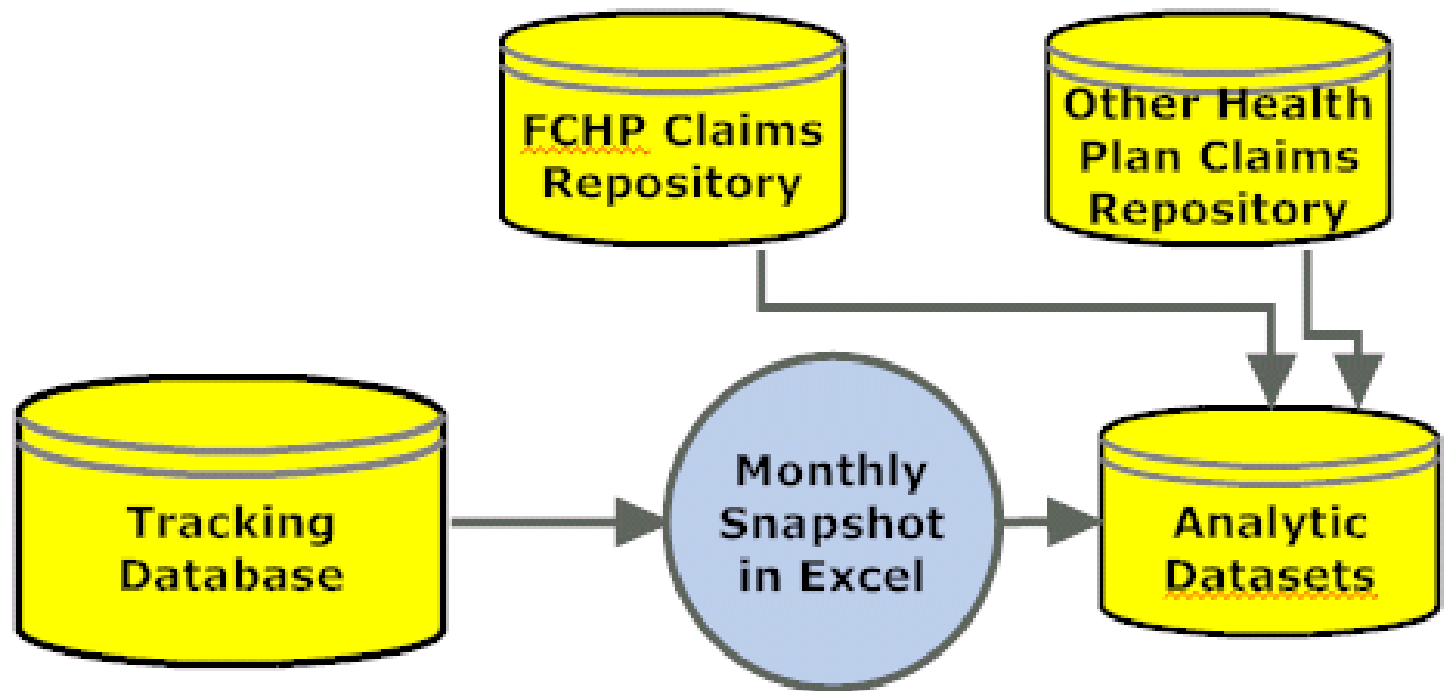
Tracking and Application Support Functions of the Tracking Database

- Queries: Identify subjects for introductory or reminder letter, call, or PCP approval
- Letters/lists printed
- Women allocated to call queues
- Data from CATI system and contact logs flow to Tracking Database
- PCP approvals and some “Opt Outs” manually entered

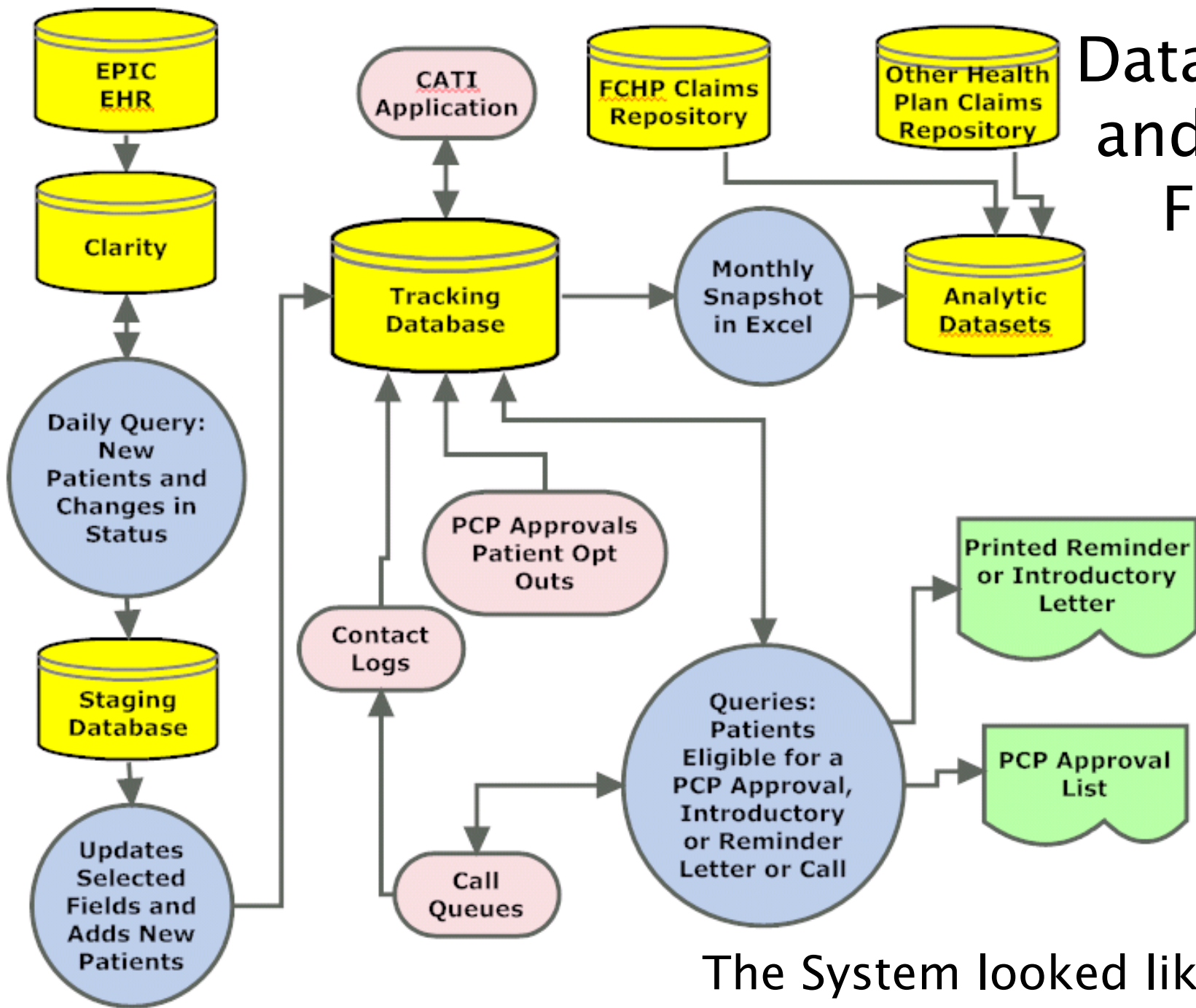


Data Flow to Analytic Datasets

- 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

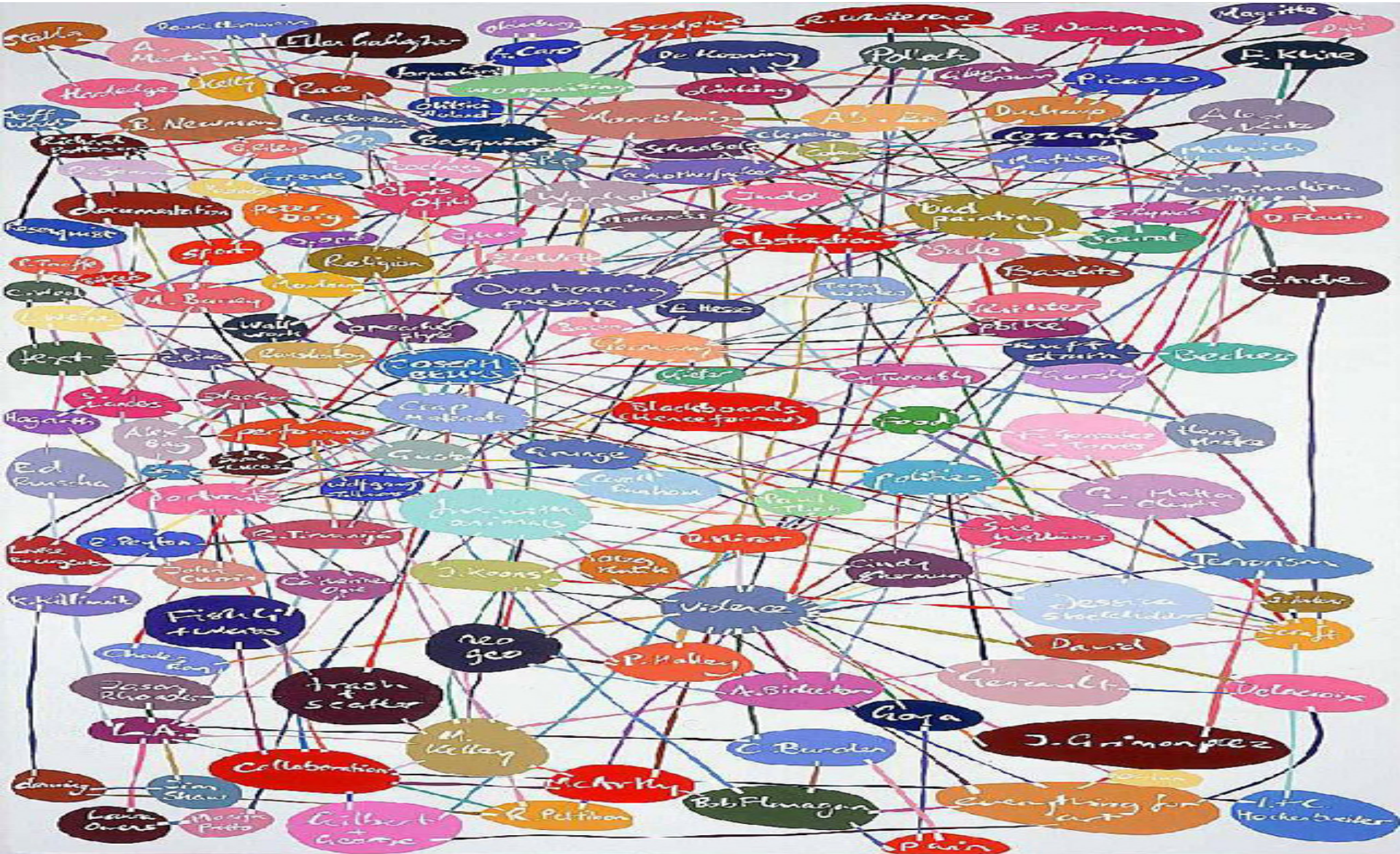


Databases and Data Flow

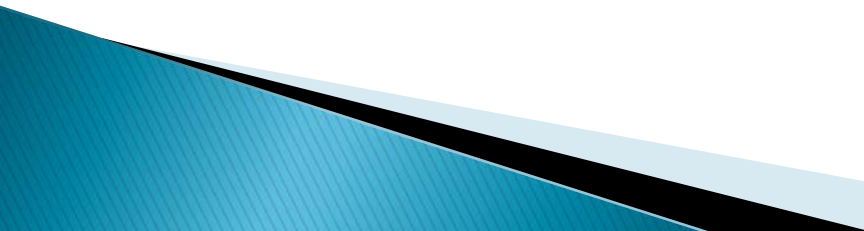


The System looked like this...

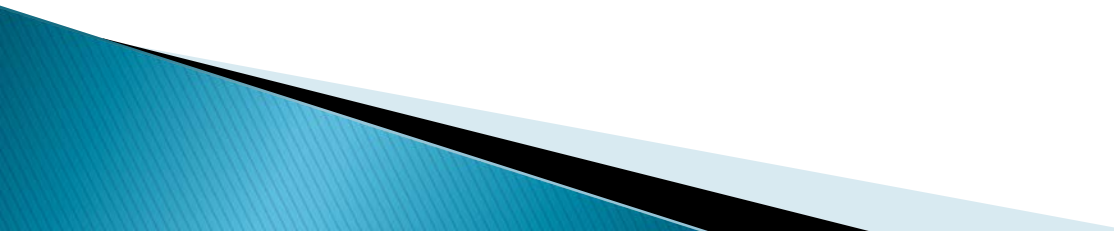
But it FELT like this...



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
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