

GCCR Moving into Improving Data Quality

By A. Rana Bayakly, GCCR Director

In 2004, the Georgia Comprehensive Cancer Registry (GCCR) will be conducting a re-abstracting audit at selected hospitals. The purpose of this audit is to improve the accuracy of data accuracy currently being reported to GCCR.

We would like to accomplish two objectives: first, estimate the agreement rate between the data submitted and data found in the medical records (source document); second, identify problems in coding and interpreting information from the source document.

Information gained from the re-abstracting audits will be used to identify state training needs and give specific feedback to hospitals so that data abstraction quality will improve at the hospital level.

Early in 2004, GCCR staff will select a total of 20 hospitals to participate in

the audit. Hospital selection will be based on the hospitals' rejection and error history.

The regional coordinator will communicate with the selected hospitals in advance so that personnel, time, and space are made available for the regional coordinator.

Two weeks prior to the audit, a sample of 25 cases will be selected from the last six months of the hospital's submission. A list of cases including last name, first name, social security number, medical record number, and date of birth will be sent to the appropriate regional coordinator and the hospital.

At that point, the hospital's responsibility will be to pull the medical records for all 25 cases, and the regional coordinator will abstract these cases into Abstract Plus software on her laptop.

GCCR strongly encourages each hospital to have cancer data reporting

personnel available for the regional coordinator during the re-abstracting audit.

When the regional coordinator has completed the re-abstracting (which we expect will take 2 to 3 full working days), the Georgia Center for Cancer Statistics will provide the regional coordinator with the original submitted abstracts.

The regional coordinator will analyze the records for agreement and disagreement between the two data files and subsequently request a meeting with all appropriate hospital personnel to discuss and review the findings of the audit analysis.

A summary report will be provided to the hospital when the re-abstracting audit is complete and the hospital has had the chance to review the findings with the regional coordinator.

CDC National Program of Cancer Registries Audit

The Georgia Comprehensive Cancer Registry (GCCR) is participating in the Centers for Disease Control and Prevention's (CDC) National Program of Cancer Registries (NPCR) "Case Completeness and Data Quality Audit".

The cooperative agreement that GCCR has with NPCR mandates that at least once every 5 years, states that receive NPCR funding under the auspices of the Public Law 102-515 (Cancer Registries Amendment Act) undergo an audit.

The audit will be performed on cancers diagnosed during 2001 in Georgia and will encompass an evaluation of central cancer registry cases for completeness and data quality. The audit team will arrive at Georgia hospitals on February 9, 2004.

Nine hospitals in Georgia were

chosen to evaluate the GCCR. The selection was made randomly, using sampling techniques. Performing the audit at the hospitals will provide the audit team the most accurate information.

CDC/NPCR reviewers will perform casefinding and re-abstracting activities to assess data quality and verify the completeness of reporting of female breast, colon and rectum, lung and bronchus, and prostate cancer cases for the months selected for audit at the hospital, determined from the number of cases in the database.

The CDC/NPCR program will be utilizing a contractor to perform the audit process. ORC Macro was chosen for this task through a competitive bid process.

The GCCR views this audit as an

essential activity in evaluating data for high quality, completeness, and timeliness.

Because cancer reporting is mandated by Georgia State law and regulations, entities covered under the HIPAA provisions may disclose protected health information to GCCR without individual informed consent of each patient. ORC Macro has signed a confidentiality agreement with GCCR and works under the umbrella of the State's cancer reporting law.

No information that identifies the hospital by name will be published. Staff participating in the review will abide by State medical records and cancer reporting confidentiality statutes. Reviewers will sign any additional confidentiality statements the hospital may require.

Special Bulletins

NAACCR 10 Format: GCCR will follow the NAACCR 2003 Implementation Work Group Guidelines and Recommendations (<http://www.naacr.org/Standards/files/NAACCR2003ImplementationGuidelines1-15-2003.pdf>). For information specific to

Georgia, see the new GCCR Policy and Procedure Manual.

Collaborative Staging System information is available on the following websites:

- www.edits.cx/cs/CSManualPart1.pdf
- www.edits.cx/cs/schemalist.htm
- www.cancerstaging.org

The GCCR Website is now live on the internet. On this site you can download the Policy and Procedure Manual along with all the latest errata, get incidence and mortality data, find a registry contracting service, and more. Check it out at <http://www.ph.dhr.state.ga.us/programs/gccr/index.shtml>

FAQ's

Q: How do you create a folder on your hard drive for state submissions?

A: Use the following steps:

- Click on the Windows Explorer icon on your computer, or use the right button on your mouse and click on the Start button.
- Find the (C:) drive. (You can choose another, but the C drive is most commonly used.)
- Click on the "Folders" button at the top. Choose "Make a new folder". Click on this. A "new folder" highlighted will appear to the right. Type in "State Submissions".

When you have offloaded and are ready to save your state submissions and edit reports:

- In your database, At Drive location: go to the C drive.
- Click on State Submissions and click on OK or save. (Note: When you are re-naming the file put (.rpt) at the end of the edit reports, but (.txt) for the abstract submission file).
- You can then locate each submission by going to Windows Explorer, find the C drive, click on State Submissions. If you saved your reports to this file, you will find them here.

Q: How do you make corrections on the GenEdits Lite report?

A: First, save the edit report to your C drive, then follow these steps:

- When viewing the edit report, click on the Export button.
- At "Save In:", click on the down arrow. Click on the C drive. Double click on "State Submissions".
- Go down to "File Name" and name your file as you would for the month, with (.rpt) at the end. **Do not click on "Save" yet.**
- Below that, at "Save as type", click on the down arrow, scroll to "Text", click on this. Click "Save".
- Close out of GenEdits Lite.
- Go to Windows Explorer, go to the C drive, go to State Submissions, double click on the file to open the document and make the corrections. (If you get the message "*click the program you want to use to open...*", find and click on Word Pad. Click on OK).
- Make sure you save the corrections by clicking on "File" at the top left corner, scroll to save, and click on Save.
- You will also encrypt the document from this file to be sent with your submissions.

Mark Your Calendars...

GCCR Spring Training

April 28-30, 2004

Renaissance Concourse Hotel

Atlanta, Georgia

*Educational opportunities will include:
Collaborative Stage, Benign Brain Tumors,
Improving Data Quality, and more...*

Cancer Registry Training

*Principles and Practice of Cancer
Registration, Surveillance, and Control*

March 29-April 2, 2004

Cancer Case Abstracting, Staging, and Coding
April 5-9, 2004

Complete details are available at <http://cancer.sph.emory.edu>.
Financial assistance is available. Contact your regional coordinator.

Georgia Comprehensive Cancer Registry
Georgia Department of Human Resources
2 Peachtree St NW 14th Floor
Atlanta, GA 30303-3142

Star Reporters

Due to the NAACCR 10 upgrade, the GCCR will delay announcement of star reporters based on the current criteria: Facilities must submit at least ninety percent of their expected cases for the preceding quarter within six months of diagnosis and with less than a two percent error rate.

Welcome Wagon

We are honored to welcome Judy Andrews, CTR, as our newest member of the Georgia Comprehensive Cancer Registry (GCCR).

Judy is the new Metro Regional Cancer Registry Coordinator. She was raised in Evanston, Illinois and has a Bachelor's Degree in Psychology from Birmingham-Southern College.

Before accepting this job, Judy worked with the GCCR for a year as an independent abstractor. Prior to that, she worked with the Georgia Center for Cancer

Statistics as a Senior Research Project Coordinator where she oversaw the planning, development, coding, abstracting and collection of cancer data for various special studies.

Judy is married and has 3 children: 2 handsome sons and a beautiful daughter. Both of her boys are active soccer players in the Tucker Youth Soccer Association.

When asked what was most exciting about her new job, Judy's response was "learning more about hospitals, registrars and abstractors , gaining

appreciation of registrars' responsibilities in a hospital setting."

When you have a free moment, call Judy at 404-727-9787 and join us in welcoming her to our registry.

Rana Bayakly, MPH
Director/Epidemiologist
GCCR

Kevin Ward
Deputy Director
GCCS

Blue Ribbon Award

I would like to recognize Jennifer Davidson, at Fairview Park Hospital, in Dublin, GA. Jennifer began working as a cancer registrar, at Fairview Park Hospital, about 5 years ago. During that time, Fairview Park Hospital has been named one of the top 100 hospitals for the 3rd year and has had some great achievements over the last several months.

In August of 2003, Dr. Brenda Carroll, Oncologist, came on board, along with the opening of the hospital's new cancer center. The center offers chemotherapy and other cancer-related diagnostic testing for patients in the surrounding area.

In September 2003, Jennifer took the CTR exam and is now a "proud CTR".

She enjoys her job and finds it challenging and rewarding.

She has been married to Sid for 12 years and they have 3 children, AJ, Jared and Joshua. Congratulations Jennifer and thanks for your hard work!

Susan Roberson, RHIA, CTR
Southeast Regional Coordinator
Savannah

HIPAA Corner

Q: Does a temporary employee who is in a position for only three months have to receive HIPAA training?

A: Maybe, it depends on the employee's job duties.

The relevant HIPAA provision [See 45 CFR § 164.530(b)] and DHR HIPAA policies [5.0 & 5.1] regarding workforce training, do not make a distinction among employees based on whether they are full-time, part-time, or temporary.

The measure for whether a workforce member should receive HIPAA training is role-based. An employee must receive HIPAA training "as necessary and appropriate" for that person to carry out their job functions. If an employee does not use, disclose, or otherwise come into contact with protected health information (PHI), then that employee does not require HIPAA training in order to carry out their job duties. If the workforce member (even if temporary) does or has the potential to handle PHI, then that person must receive HIPAA training.

Q: Should fax cover sheets include a confidentiality disclaimer?

A: Yes. HIPAA requires covered entities to have in place reasonable and appropriate administrative, technical, and physical safeguards to protect the privacy of protected health information that is disclosed using a fax machine. Examples of measure that could be reasonable and appropriate in such a situation include the sender confirming that the fax number to be used is in fact the correct one and placing the fax machine in a secure location to prevent unauthorized access to the information. See 45 CFR § 164.530(c). Placing a confidentiality disclaimer on fax cover sheets is a reasonable safeguard that should be taken to protect PHI that is sent via fax. Suggested language follows:

"The information contained in this transmission is confidential and is otherwise protected from disclosure. It is intended only for use by the above referenced person or entity. If the reader of this message is not the intended recipient, then the reader is hereby notified that any use, dissemination, distribution, or copying of this transmission is strictly prohibited. If the reader has received this transmission in error, then please notify the sender immediately and discard the original message received in error. Thank you."

Q: What is the process for handling an incidental disclosure?

A: Under HIPAA, incidental disclosures are okay and don't require action on the part of the covered entity when they occur if the particular incidental disclosure is a by-product of a permitted use or disclosure, reasonable safeguards have been applied, and if the minimum necessary standard was implemented. See 45 CFR § 164.502(a)(1)(iii).

The only time an incidental use or disclosure becomes problematic is if it was a by-product of an underlying use or disclosure that is not allowed by HIPAA to begin with. In this case, you will have to document the unauthorized disclosure as well as efforts taken to mitigate the incidental disclosure, i.e. corrective action taken and steps taken to prevent such a disclosure from happening in the future. See 45 CFR § 164.530(f).

HIPAA Regulation information and updates may be found on the following websites: Georgia Division of Public Health at www.ph.dhr.state.ga.us/phil; NAACCR at www.naacr.org; US Department of Health and Human Services at www.hhs.gov; and ACoS at www.facs.org/dept/cancer/coc/. Please keep yourself updated on the latest HIPAA regulations.

Thank You Note from the Georgia Comprehensive Cancer Registry

GCCR thanks the following hospitals for submitting cancer data at least two months out of three (September, October, and November 2003).

Hospitals Reported Three Months Out of Three		
Atlanta Medical Center	Hart County Hospital	Satilla Regional Medical Center
Augusta State Medical Prison	Henry Medical Center	SE Georgia Health Sys – B'wick
Berrien County Hospital	Houston Medical Center	SE Georgia Health Sys – Camden
Brooks County Hospital	Irwin County Hospital	South Georgia Medical Center
Burke County Hospital	Jasper Memorial Hospital	Southern Regional Medical Center
Candler County Hospital	Jefferson County Hospital	Southwest Hospital and Med Ctr
Candler Health System	Jenkins County Hospital	St Francis Hospital
Children's Healthcare of Atlanta	John D. Archbold Memorial Hosp	St Joseph's Hospital – Atlanta
Coffee Regional Medical Center	Louis Smith Memorial Hospital	St Joseph's Hospital – Augusta
Coliseum Health System	Macon Northside Hospital	St Joseph's Candler Health Sys
Colquitt Regional Medical Center	McDuffie Regional Medical Center	St Mary's Healthcare System
DeKalb Medical Center	Meadows Regional Medical Ctr	Stephens County Hospital
Doctor's Hospital Augusta	Memorial Hospital and Manor	Sumter Regional Hospital
Doctor's Hospital Columbus	Memorial Hospital of Adel	Sylvan Grove Hospital
Dorminy Medical Center	Mitchell County Hospital	Tanner Health System
Early Memorial Hospital	Monroe County Hospital	Taylor Regional Hospital
East Georgia Regional Med Ctr	Morgan Memorial Hospital	Telfair Regional Medical Center
Emanuel Medical Center	Mountainside Medical Center	The Medical Center
Emory Crawford W Long Hospital	NE Georgia Medical Center	Tift General Hospital
Emory Dunwoody Medical Center	North Fulton Regional Hospital	Union General Hospital
Emory Eastside Medical Center	North Georgia Medical Center	University Hospital
Emory University Hospital	Northside Hospital – Forsyth	VA Medical Center – Atlanta
Evans Memorial Hospital	Northside Hospital Cancer Center	VA Medical Center – Dublin
Fairview Park Hospital	Oconee Regional Medical Center	Walton Medical Center
Fannin Regional Hospital	Peach Regional Medical Center	Washington County Reg Med Ctr
Fayette Community Hospital	Perry Hospital	Wayne Memorial Hospital
Flint River Community Hospital	Phoebe Putney Memorial Hospital	Wellstar Health System
Floyd Medical Center	Phoebe Worth Medical Center	Wesley Woods Geriatric Hospital
Georgia Baptist Meriwether Hosp	Piedmont Hospital	West Georgia Health System
Grady General Hospital	Polk Medical Center	Wheeler County Hospital
Grady Health System	Rabun County Memorial Hospital	Wildwood Lifestyle Center & Hosp
Gwinnett Health System	Redmond Regional Medical Ctr	Wills Memorial Hospital
Hamilton Medical Center	Rockdale Hospital	
Hospitals Reported Two Months Out of Three		
Appling Health Care System	Donalsonville Hospital	Murray Medical Center
Athens Regional Medical Center	Effingham County Hospital	Newnan Hospital – East
Barrow Medical Center	Elbert Memorial Hospital	Newnan Hospital – West
Bleckley Memorial Hospital	Emory Northlake Reg Med Ctr	Newton General Hospital
Calhoun Memorial Hospital	Gordon Hospital	Palmyra Medical Center
Cartersville Medical Center	Habersham County Medical Ctr	Putnam General Hospital
Central State Hospital Med Surg	Hutcheson Medical Center	Screven County Hospital
Charlton Memorial Hospital	Jeff Davis Hospital	Smith Northview Hospital
Chatuge Regional Hospital	Medical College of Georgia	South Fulton Medical Center
Clinch Memorial Hospital	Memorial Health Univ Med Ctr	Stewart Webster Hospital
Crisp Regional Hospital	Miller County Hospital	SW Georgia Regional Med Ctr
Decatur Medical Center	Minnie G Boswell Memorial Hosp	