

2015 Data Validation Audit with E-Path Verification -- Information Sheet

The Florida Cancer Data System (FCDS) is charged with providing the highest quality data possible for annual cancer case reporting to the Florida Department of Health and the CDC National Program of Cancer Registries (NPCR). Data must meet rigorous standards to be included in local, regional, state, and national cancer rates, reports to Congress, and various cancer surveillance-related publications. FCDS conducts numerous data processing and data quality checks including on-site and remote record audits in various formats to ensure the data quality standards continue to be met and to identify areas that may require further education and training.

An FCDS Re-abstracting (Data Validation) Audit will be performed for this facility using electronic copies of primary medical record documents submitted by this facility (electronic pathology reports plus cancer registry abstracts) to validate the quality of abstracted and coded data for cases submitted to the Florida Cancer Data System (FCDS). The audit has been designed to assess the quality of abstracting and the accuracy of coded data items for cases submitted to the Florida Cancer Data System (FCDS). These audits allow FCDS to assess consistency in interpretation of data definitions, adherence to coding rules and guidelines, policies and procedures and to identify areas that require further education and training. A copy of the audit protocol is available from FCDS.

FCDS is utilizing a new approach to auditing to make better use of electronic medical records this year in an effort to reduce the burdens that come with on-site audits including; detailed planning, auditor travel, workspace, internet access, and other on-site coordination. There will be no in-person travel required. Code and data item reconciliation is required for each discrepant data item.

Facility and Case Selection have been stratified by 2013 reporting year caseload for primary breast cancer and primary colon cancer from calendar year 2013 diagnoses. All cases will be hospital “analytic” cases (e.g. patient was first diagnosed and/or first treated at your hospital). All cases will be audited remotely by the FCDS Audit Team.

AUDIT PROCEDURES and INSTRUCTIONS

1. **To obtain a PDF copy or to reprint this Information Sheet**, please go to the FCDS website <http://fcds.med.miami.edu> and log in to FCDS IDEA. If you have Admin or QC User Role - go to the Quality Control Menu. Select FCDS 2015 Quality Assurance Audit then select Information Sheet. A PDF version of this letter will open which can be saved and/or printed at your discretion.
2. **Each Case will undergo Two Distinct Audit Evaluations** with distinct code comparisons and “best value” resolution required.
 - a. The **first evaluation** will be a review/recode of abstracted text compared to original abstract codes as a “visual review” with “data validation” of key data items. Undocumented values will be recoded as “unknown/not available”. Text is a critical element in all internal FCDS data quality assessments as well as external third party data quality assessment procedures. FCDS, CDC, and the Florida Department of Health have been requiring full text documentation for key variables since 1995.
 - b. The **second assessment** will be a comparison of original abstract codes compared to recoded values from the text contained within the electronic pathology report from the surgery of the primary site. This part of the re-abstracting audit will identify areas where abstractors may have incorrectly read, interpreted or coded histology/behavior/grade of tumor; overlooked key staging information included in the surgical pathology report; or missed other information when coding the original abstract.
3. **Coding Inconsistencies** will be documented and returned to the originating facility to be reconciled by a facility registrar. This does not have to be the original case abstractor as this is an audit of overall facility-submitted data quality and not the abstractor.
4. **Reconciliation of Facility-Level Data Discrepancies is required for this audit.** During this part of the audit, the originating institution has an opportunity to rebut any findings with additional documentation from the record or provide a rationale for not including required text or code(s) selected while abstracting the original cancer incident report. **Reconciliation is time sensitive.**
5. **4 Week Deadline for Reconciliation** - Facilities will have four (4) weeks to complete the reconciliation process and address any concerns or inconsistencies between the original text documentation, coded data and both sets of re-abstracted/re-coded data. The facility must select a “best value” for any data item found to have a coding and/or documentation discrepancy. If reconciliation has not been completed within this time frame, all audit recode findings will be reviewed with FCDS Review selected as “final”.
6. **Final Reviews** will be conducted by the FCDS Senior Manager for Data Quality/Quality Control and Education.
7. **Audit Case Report:** Key data items will be audited following FCDS Standard Data Validation and Visual Editing Procedures with adherence to all national coding standards, rules and guidelines. Individual cases may be printed with all original and discrepant data, text, recodes, and final decisions including notes printed in a standard format that can be saved as a PDF.
8. **Facility Audit Summary Report:** Facility-specific audit summary findings will be aggregated by facility into a Facility Audit Summary Report. The report will be presented in FCDS standard format with major and minor annotated and summarized for comparison to the State Audit Summary Report. Recommendations for improvements may be included in your facility report.
9. **State Audit Summary Report:** All Facility Audit Summary Reports will be aggregated into a State Audit Summary Report.
10. **Education Planning:** Aggregate findings and recommendations will be used in planning statewide education and training events.

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