SEER*DMS Change Control Board (CCB) Users Group Teleconference Summary September 8, 2016 3:00 p.m. EDT

Representatives from NCI, IMS, SCG, and 12 SEER registries participated in the SEER*DMS Users Group conference call on September 8, 2016. Participants included:

Registries:

Connecticut Cherokee Nation Detroit Georgia Hawaii Iowa Louisiana New Jersey New Mexico New York Seattle Utah NCI: Carol Kosary IMS: Linda Coyle, Suzanne Adams SCG: Mary Beth Saffo, rapporteur

Pending Records and the Version 17 (v17) Workflow

Linda discussed pending records in Consolidate tasks of the v17 workflow. The v17 Consolidate tasks require the user to "sign off" to make a record change from pending to consolidated status. Complete details of Linda's talk can be found in her PowerPoint presentation, which is available in the SEER*DMS Tech support Squish Project, Issue Number 4291 (https://www.squishlist.com/seerdms/support/4921).

Linda discussed the following changes in matching and consolidate tasks in v17:

- A Consolidate task is now created automatically after either a manual or auto match is completed.
- Records will be linked at the Cancer/Tumor/Case (CTC) level instead of being pre-linked at the patient level.
- In Consolidate Tasks, two fields are added to the record: 1) ctc_consolidated, and 2) pat_consolidated.
- In v17.17, there are four possible pat_consolidated values: 0 (Not attempted. Record is unlinked and not part of a patient set); 1 (Auto-consolidation of demographic fields complete); 2 (Manual consolidation complete. Conflict found, but user resolved the conflict); 3 (Manual review required. A conflict was found, and a user must review the conflict in a Consolidate task); 4 (Linkage not required; N/A for pat_consolidated flag).
- A parallel set of ctc_consolidated values are included in v17.17: 0 (Not attempted. Record is not linked to a CTC. It may or may not be linked to a patient set at the P level); 1 (Auto-consolidation complete. The record was fully consolidated in automatic processes. In most registries, this applies only to death certificate records); 2 (Manual consolidation complete. A user manually consolidated the record and "signed off" on the record by checking the box); 3 (Manual review required. This is the most common category because auto-consolidating at CTC level currently is limited); 4 (Linkage not required. Record is not linked and does not need to be linked to a CTC. Supplemental records are examples of files that do not necessarily need to be linked at CTC level.)

- Flags have several benefits, including immediate linkage of original records and of follow-up patient data. In addition, flags not only signal the state of the data, but also call attention to work that still needs to be done.
- Problems in flag values have arisen in special handling of certain record types. Some assumptions, including the notion that all reportable abstracts needed to be linked to a CTC, did not hold up. More flexibility in the system is needed to handle situations that are not addressed by the registry's rules for a particular record type and to accommodate registries that want particular options for record linkage and manual review. Upcoming changes will address these and other issues more effectively.
- Planned changes in Consolidate Tasks for v17.18 and later versions include the addition of more value options for ctc_consolidated and pat_consolidated flags. In the new system, 0 = linked but consolidation not attempted; 1= linked and auto-consolidation completed; 2 = linked and manual consolidation completed; 3 = linked but manual review required for consolidation; 5= not linked and linkage needed; 6= not linked and linkage not needed; 7 = not linked and manual review required for linkage.
- Not all of the new values necessarily apply to the pat_consolidated flag. In the new system, 0 is a theoretical value (or, at most, denotes a transition state) at the patient level because, in current practice, linked records always are consolidated. Values 6 and 7 are not applicable to the pat_consolidated flag. For value 3, the record is considered pending until the conflict or review is resolved.
- For ctc_consolidated flags, 0 denotes a transition state. This code might be used more in the future as records are auto-matched to CTC. Values 5, 6, and 7 all refer to unlinked records, and the need (or not) for eventual linkage to a CTC. For values 0, 3, 5, and 7, records are considered pending until a conflict is resolved or linkage or consolidation is completed. Value 5 is commonly used at registries that need to link reportable abstracts to a CTC. Supplemental records are an example of a case (value 6) where records currently unlinked to a CTC do not need to be linked at the CTC level. Value 7 provides the option for registries to consolidate abstracts but leave them at the patient level.

Linda presented new workflow diagrams that IMS has been developing. The diagrams will be available in Chapter 4 of the users manual and will be posted with the slides in Squish Issue 4291.

Announcements

The next CCB meeting is scheduled for October 13, 2016, 3:00-4:00 p.m. EDT.