# Research Professionals Network Workshop Series

DEVELOPING EFFECTIVE DATA COLLECTION TOOLS

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## **Objectives**

Following the session, learners should be able to:

- 1) Define "data collection"
- 2) Outline the importance of having and maintaining a good data collection form
- 3) Determine what type of data to collect
- 4) Apply discussed concepts to develop one's own data collection form

### **Data Collection - Definition**

 The process of gathering and measuring information on variables of interest, in an established systematic fashion that enables one to answer stated research questions, test hypotheses, and evaluate outcomes.

- U.S. Department of Health & Human Services

### **Data Collection**

- All facets of the data collection process should be carefully reviewed in order to ensure reliable and valid data
  - Make sure your data are collected in the same fashion from beginning to end of your research study

#### Key questions to ask yourself prior to data collection:

- 1) What information are you going to collect?
- 2) How are you going to collect your data?
  - a) Interviews/focus groups
  - b) Phone records
  - c) Surveys/questionnaires
  - d) Medical records (or clinic and office charts)
  - e) Recorded data from EEGs, ECGs, etc.
- 3) How will data be analyzed?

### Protocol -> Data Collection Process

WonderDrug Protocol 95-06
Site Number: 126 Subject Screening Number: 126-001 Initials: IT
Demographics
Date of birth (Day/Month/Year):
Gender: ☐ Male ☐ Female
Race:   White   Black   Hispanic/Latino   Asian   Other
Eligibility
Does the subject meet all of the inclusion eligibility criteria? ☐ Yes ☐ No If no, specify the unmet inclusion criterion (by number):
Does the subject meet any of the exclusion criteria? ☐ Yes ☐ No  If yes, specify the met exclusion criterion (by number):
If the subject does not meet all of the eligibility criteria, do not proceed with randomization.
Randomization
Was the subject randomized? ☐ Yes ☐ No If not, why not? ☐ Serious adverse event ☐ Screening lab test abnormality ☐ Withdrew consent ☐ Other reason
Evaluation of Primary Infection
Date of enrollment:
Duration of signs and symptoms prior to randomization (in days)
Type of skin infection
<ul> <li>□ Decubitus ulcer</li> <li>□ Major abscess</li> <li>□ Cellulitis (check only if complicated)</li> <li>□ Postoperative wound infection</li> <li>□ Wound classification stage if a pressure ulcer:</li> </ul>

Were specimens sent for culture? ☐ Yes ☐ No						
Source of spec Blood Aspira	☐ Pus		☐ Curettage			
		? □ Yes □ No cceptable; obtain d	nnother sample.			
Did the G Did the G	ram stain shov ient must be d	v wbc*? □ Yes	cci in clumps?	Yes □ No		
Accession	·				Result	
number	Date	Source	Site		(use organism code)	
					(,	
Sensitivity Res	ults					
			Organism 1		Organism 2, etc.	
Bacteria isola		7.111.07.1	MRSA		E. coli	
Report sensitivities to the following antibiotics		MIC (ug/ml	MIC (ug/ml)		/ml)	
Cephakillita	all					
Wondercilli	n					
Vancomycir	1					
Bactrim						
Rifampin						

# Importance of Collecting "Good"/Valid Data

- Precision of data is important to maintain the integrity of your research
- Written record (i.e. paper surveys) and electronic records should be properly maintained in the event that aspects of your research protocol need to be modified

# Data Collection Approaches in Clinical Research

Advantages & Disadvantages

Questionnaire Survey Data

Advantages	Disadvantages
<ul> <li>Can collect personal and/or risk</li></ul>	<ul> <li>Validating individual survey</li></ul>
factor data not typically	responses can be difficult,
contained in hospital/ambulatory	burdensome, costly, and of
care records	questionable utility
<ul> <li>Can elicit information in an analytically desirable and standardized manner</li> </ul>	<ul> <li>If response rates are less than desirable, one may question the representativeness of the study sample and its generalizability</li> </ul>
<ul> <li>Can maintain high survey response</li></ul>	<ul> <li>Responses might differ if questions</li></ul>
rates through various financial or	are asked in-person vs. by phone
other incentives	vs. by mail/internet

# Data Collection Approaches in Clinical Research

Advantages & Disadvantages
Hospital/Ambulatory Care Records

Advantages	Disadvantages
<ul> <li>Readily available and contain much useful demographic and clinical information</li> </ul>	Often times data contained in medical records are non-standardized and inconsistently collected and recorded
<ul> <li>Can be linked to other follow-up information sources</li> </ul>	<ul> <li>Information is often incomplete and/or missing</li> </ul>
<ul> <li>Can be used to characterize the medical history and clinical course of hospitalized and outpatient individuals</li> </ul>	<ul> <li>Independent checks on validity and/or reliability are atypically performed</li> </ul>
Can provide data on medication intensity and duration	<ul> <li>Information on etiologic or prognostic factors of importance is often either not obtained or asked about or recorded in a standardized manner</li> </ul>

# Data Collection Approaches in Clinical Research

Advantages & Disadvantages Biologic Data

Advantages	Disadvantages
<ul> <li>May provide novel insights into underlying disease pathophysiologic processes</li> </ul>	<ul> <li>Need to be collected under standardized conditions with considerable attention to detail</li> </ul>
<ul> <li>Can serve as an important endpoint of relevance</li> </ul>	<ul> <li>Ongoing quality control procedures needed</li> </ul>
<ul> <li>Can be linked to other sociodemographic, medical history, and clinical data to obtain insights into disease occurrence and prognosis</li> </ul>	<ul> <li>Need to consider impact of possible biologic circadian variation for purposes of timing and frequency of data collection efforts</li> </ul>
	<ul> <li>May need collection of multiple measures at baseline to adequately profile subsequent changes</li> </ul>

Have as many details as needed and define the variables in your form as needed

Sexually Transmitted Disease Program Clinic Patient Intake Form	(ID) Client ID Number://
(spa) SPA: 1 2 3 4 5 6 7 8 (See STD Annual Report for SPA names:	(Fictitious Data—DO NOT QUOTE)
	public/AtoZTopics/AtoZpubDisplayAll.cfm?
Last Name:	First Name:
(gender) Gender: [ ] Male (M) [ ] Fem	ale (F) (dob) Date of Birth://
(race) Race/Ethnicity: [ ] Hispanic/Latino   [ ] White (non-Hisp   [ ] African America   [ ] Asian (4)   [ ] Other/Mixed Ra   [ ] Refused (6)	panic) (2) an/Black (3)
(clinic) Skid Row Location: [ ] Hope (1)	
(gsexpart) Gender of Sexual Partner: [ ] Ma	ale (1) [ ] Female (2) [ ] Both (3)
(highrisk) Engages in high risk behaviors (analsex) Engages in anal sex (drugsex) Used drugs during sex (internet) Gets sex partners from the internet (oralsex) Gives/receives oral sex	[ ] Yes (1) [ ] No (2) [ ] Yes (1) [ ] No (2) [ ] Yes (1) [ ] No (2)
(datetest) Date Tested:/_	1
(chl) Chlamydia infection       [ ] Yes (1)         (HIV) HIV+       [ ] Yes (1)         (gc) Gonorrhea infection       [ ] Yes (1)         (trich) Trich       [ ] Yes (1)	[ ] No (2) [ ] No (2)
Counselor: Lo	cation: Date://

### **Version Control**

	Specify details of DNA restrictions:					
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		<u> </u>		Vicit & VERSION & O	July 1997	
•	ARIC PROTOCOL 2. Cohort Component Procedures	Versio	n 6 <sub>-</sub> 0	Visit 4, VERSION 4.0	July 1997	

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## Improper Data Collection Leads to...

- Inability to answer research questions accurately
- Inability to repeat and validate the study
- Distorted findings resulting in wasted resources
- Misleading other researchers to pursue fruitless avenues of investigation
- Compromising decisions for public policy
- Causing harm to human participants and animal subjects

## Data Collection Problems Requiring Immediate Action

- Errors in individual data items
- Systematic errors
- Violation of protocol
- Problems with individual staff or site performance
- Fraud or scientific misconduct



## Clinical Research Documentation

"If it wasn't documented, it wasn't done."



## Collecting Valid Data

#### **Case Vignette: Collecting Valid Data**



Part of the data collection methodology for Dr. Smith's study includes distributing a 12-page self-administered questionnaire to participants; they must fill out and initial each page of the questionnaire to confirm completion.

One day on his way home from conducting an interview with a subject, the Research Assistant, Joel, needed to write directions for a friend and he reached in his bag and grabbed the first piece of paper that he could find. Joel accidentally ripped the back page off of one of the completed questionnaires to write the directions, which he then gave to his friend. He didn't realize this until a few hours later, when he was reviewing the data that he had collected that day.

Joel thought that he remembered the participant's answers on the last page of the survey, since they were mostly demographic questions.

What should Joel do?



### How Much is Too Much?



#### **Data Collection Methods**

# What's Needed for... Questionnaires

- 1) A "sampling frame" from which you can choose a representative (or randomized) sample
- 2) A survey instrument that has been vetted
- 3) Invitation to encourage participation
- 4) A means of dissemination (mail, email, telephone)
- 5) Method of following-up with non-respondents
- 6) A system for creating and managing a database of survey responses
- 7) A plan and method for analyzing results

#### ...Interviews

- 1) A method to identify and recruit the people you want to interview
- 2) An interview protocol with primarily or exclusively open-ended questions
- 3) Skilled interviewers
- 4) A way to record the interviews and either summarize or transcribe them
- 5) A method to analyze the results of all your interviews. This may include a qualitative data analysis software program
- 6) Staff who have skills in qualitative data analysis

## Communication/Training

#### **Case Vignette: Communication**



A few weeks after Dr. Smith added the new questions to the self-administered questionnaire, it occurred to the Research Assistant, Heather, that the data collection methodology could be changed slightly. She realized that the first questionnaire that was administered to subjects (a survey on attitudes) now included information that provided answers to the questions on a subsequent questionnaire (a knowledge pre-test).

Heather realized that it would make much more sense to administer the knowledge test **before** the attitude questionnaire.

How should Heather proceed?



# Explicit Script in Data Collection Form

#### Interviews Q1 Interviewer name: Q2 REC ID: Q3 Phone call date: Q4 Phone call time: Q5.Hello, may I please speak with XXX? [If the person is not available ask when a good time to call would be.] I am calling from Boston Medical Center. My name is XXX and I'm calling as a follow-up from the appointment you had on [appointment date] with Dr. XXX. You are being asked to voluntarily participate in a research study. We are studying how our patients are using resources in the hospital and the community to help with their basic needs like food, education, employment. You are someone that can help us understand this better. If you agree, we will ask you to share your opinion on some brief questions that will take about 10-15 minutes, we will not record any identifiable information, such as your name, on the survey itself. We will label your survey answers with a unique number, and this number will be linked to your identifiers in separate document. Do you have a moment to share your opinion? No [If no, ask if there is another time the patient might be available to share their opinion.] (1) Yes (2)



### Social Determinants of Health Pilot Study

Objective #1: The overall aim of the project is to examine the feasibility and potential impact of screening and referral for unmet SDOH needs on chronic disease clinical outcomes among new BMC adult primary care patients with diabetes, hypertension, and/or depression. We also aim to better characterize the SDOH burden among adult primary care patients.

 Question: Based on the objective above, what variables (i.e. A1C, age, etc.) do you think would be of interest?

Screening and referral tool →



Place Patient Sticker Here

Please fill this out and give to the medical assistant when you are called into the exam room. Your answers will help your care team take better care of your health and connect you with resources. Thank you!

		Please check "√" your answers:				
		O I have a steady place to live				
<b>(A)</b>	What is your living situation	O I have a place to live today, but I am worried about lo	sing it in the future			
	today?	O I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)				
	Within the past : didn't have mon	12 months, the food you bought just didn't last and you ey to get more.	Often true Of Sometimes true Of Never true			
		12 months, you worried whether your food would run oot money to buy more.	Often true Sometimes true Never true			
	Is this an emerge	O Yes O No				
<b>(</b>	Do you have tro	O Yes O No				
(2)	Do you have tro	O Yes O No				
9	Do you have tro	uble paying your heating or electricity bill?	O Yes O No			
	Do you have tro	O Yes O No				
	Are you currentl	y unemployed and looking for a job?	O Yes O No			
	Are you interest	ed in more education?	O Yes O No			



I do not want to answer these questions

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# Variables We Collected

#### **Variables**

City/State

Language

Marital Status

Provider Name

Education

Age, Sex

Insurance Carrier

Visit date/time

Lab date/time

Screening questions

Clinical: LDL, HDL, A1C, Total Cholesterol, Blood Pressure

Eligibility: has Depression? Diabetes? Hypertension?

# ...Objective #1 Continued

• Objective #1: The overall aim of the project is to examine the feasibility and potential impact of screening and referral for unmet Social Determinants of Health (SDOH) needs on chronic disease clinical outcomes among new BMC adult primary care patients with diabetes, hypertension, and/or depression. We also aim to better characterize the SDOH burden among adult primary care patients.

#### • Questions:

- 1) What platform (i.e. Excel) would you consider using to collect/store your data?
- 2) Where could you find the data needed to answer your research question?

# Social Determinants of Health Pilot Study

• Objective #2: Using a screening and referral process to address unmet SDOH needs in a subgroup of patients with hypertension (HTN), diabetes (DM) or depression, we sought to examine patients' connection to community and hospital resources.

**Question**: Based on the objective above, what is a data collection method, or methods, that can be employed?

# Three Key Reminders

- 1) Develop a data collection and training plan as needed
- 2) Follow your IRB protocol!
  - a) Study retention/closeout of data
- 3) Keep data secure
  - a) Protected Health Information (PHI) and stewardship of your data

