Using DataFax Standard Reports for Risk-Based Monitoring

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Presentation Roadmap

- Background
  - VA Cooperative Studies Program (CSP)
  - FDA guidance
- DataFax Standard Reports
- Monthly Data Quality Reports
- Site Performance Summary

VA Cooperative Studies Program (CSP)

VA Research and Development

- Plans and conducts large, multicenter clinical trials and epidemiological studies
- Mission:

  To advance the health and care of veterans through cooperative research studies that produce innovative and effective solutions to veteran and national healthcare problems

U.S. Department of Veterans Affairs

Veterans Health Administration
Research Development

CSP, continued

- Five coordinating centers (CSPCCs), additional epi centers
- One pharmacy coordinating center
  - Assist with drug/device studies
  - Adverse Event and SAE specialists
  - CSP monitoring and auditing team (SMART)

CSP, continued

- Examples of current PA-CSPCC studies
  - Comparative effectiveness of psychotherapies
  - Steroid treatment for severe pneumonia
  - Stents
- CSP studies are typically
  - Not IND/IDE with an NDA/PMA
  - Not usually funded for 100% on-site monitoring

From the FDA Guidance: Risk-Based Approach to Monitoring (RBM)

- August 2013: “Oversight of Clinical Investigations – A Risk-Based Approach to Monitoring”
- Guidance’s goal: enhance human subject protection and quality of clinical trial data by focused sponsor oversight
- Modern approach, risk-based

FDA Guidance on RBM, continued

- Regulations require monitoring, but do not specify how to do so

- Clinical Trials Transformation Initiative (CTTI) survey: wide range of monitoring practices

FDA Guidance, continued

- Advocates a combination of monitoring activities to oversee a study effectively
- Encourages greater reliance on centralized monitoring methods

  (vs. on-site monitoring)
- Focuses on critical data elements to perform risk assessment and to inform monitoring plans

Centralized Monitoring

Information on critical study parameters is used to:

- Identify high risk sites
- Define escalation path to resolve deficiencies
- Focus limited resources

Examples of Centralized Monitoring (From the Guidance)

- Routine monitoring of data quality by review of database
- Analyze performance metrics

- Conduct statistical analyses to identify unusual data trends
- Source data verification via remote data access
- Perform administrative and regulatory tasks and reviews

Monthly Data Quality Reports (MDQR)

- 15+ years at PA-CSPCC
- Patient and Center Tracking Reports → Graphs (via SAS, Excel, scripts, etc.)
- Screening and Enrollment Tables → Graphs
- Comparison across sites
- Not standardized across studies

DataFax Standard Reports
Patient & Center Tracking

Data Quality

- DF_PTmissing

  Overdue visits and missing plates, by patient

- DF_CTcrfs: summary of forms received, by site

CENTER Number	ACTIVITY Patients	Visits	Records	MEAN # DAYS FROM VISIT TO: Fax In	DB Entry	DB Clean	% RECORDS CLEAN On Arrival	Now
	9	327	1379	4.9	5.1	14.6	81.9	100.0
	4	126	969	20.7	21.0	43.0+	64.0	99.8
	9	457	2502	15.9	16.5	29.4+	78.3	99.8
	10	226	1208	112.4	112.9	175.3+	66.4	99.2
	17	532	3549	6.0	6.3	18.6+	84.8	99.9
	31	908	6691	2.7	3.4	9.7+	86.2	100.0

DataFax Standard Reports
Patient & Center Tracking

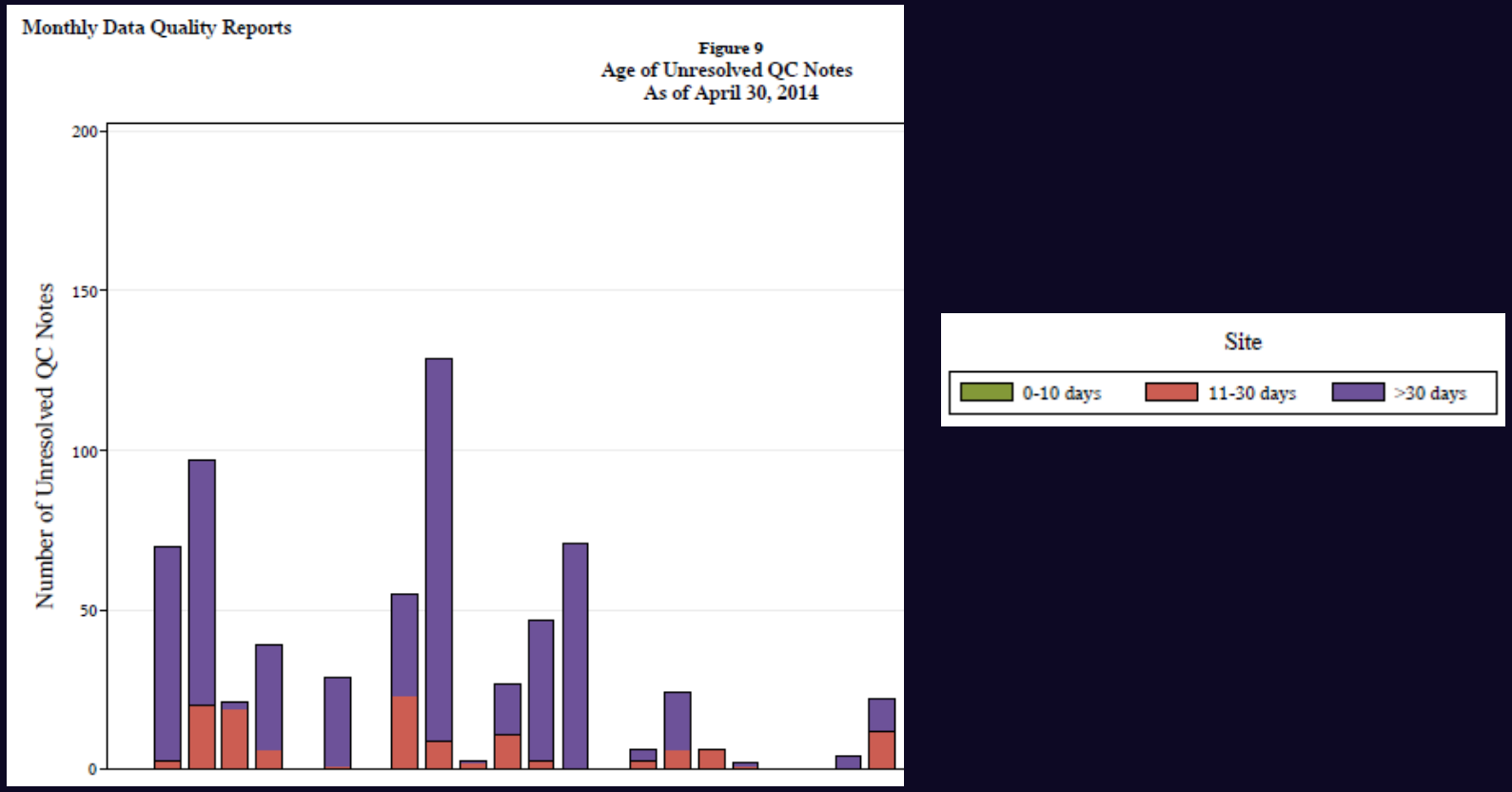
Data Quality (cont'd.)

- DF_CTqcs: summary of QCs, by site

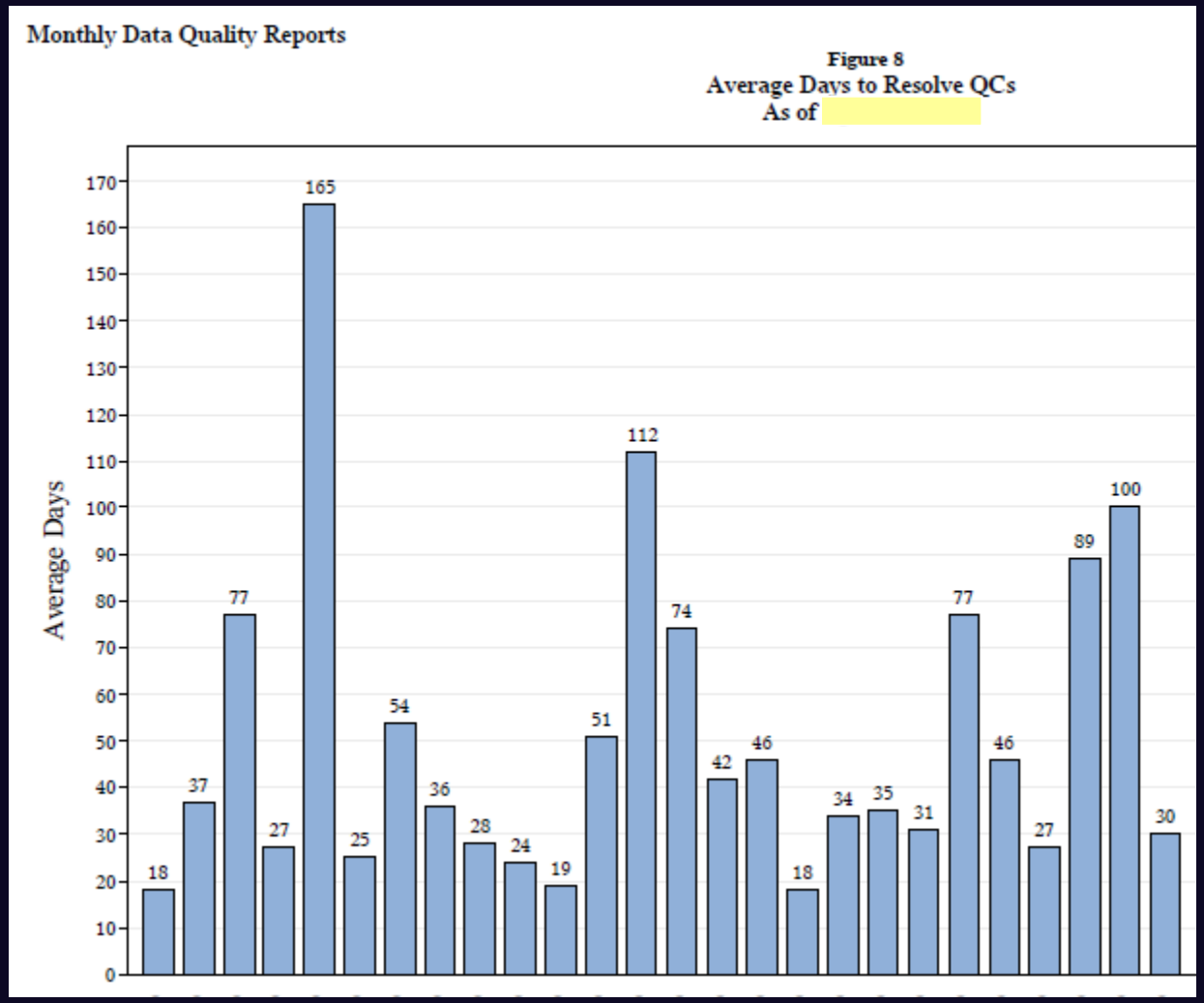
CENTER Number	TOTAL RECORDS	TOTAL QCS	RATE/ 100 REC	RESOLVED QCS #	RESOLVED QCS %	QC STATUS & TIME TO RESOLUTION Correct	N.A.	Irrel.	DAYS
	1398	252	18	252	100	184	11	57	23
	973	346	36	346	100	290	36	20	38
	2558	572	22	570	100	472	30	68	11
	1224	446	36	437	98	332	69	36	105

CENTER Number	AGE (DAYS) NEW/UNSENT QC NOTES 00-10	11-20	21-30	31-60	> 60	AGE (DAYS) SENT/UNRESOLVED QC NOTES 00-10	11-20	21-30	31-60	> 60
	0	0	0	0	0	0	0	0	0	0

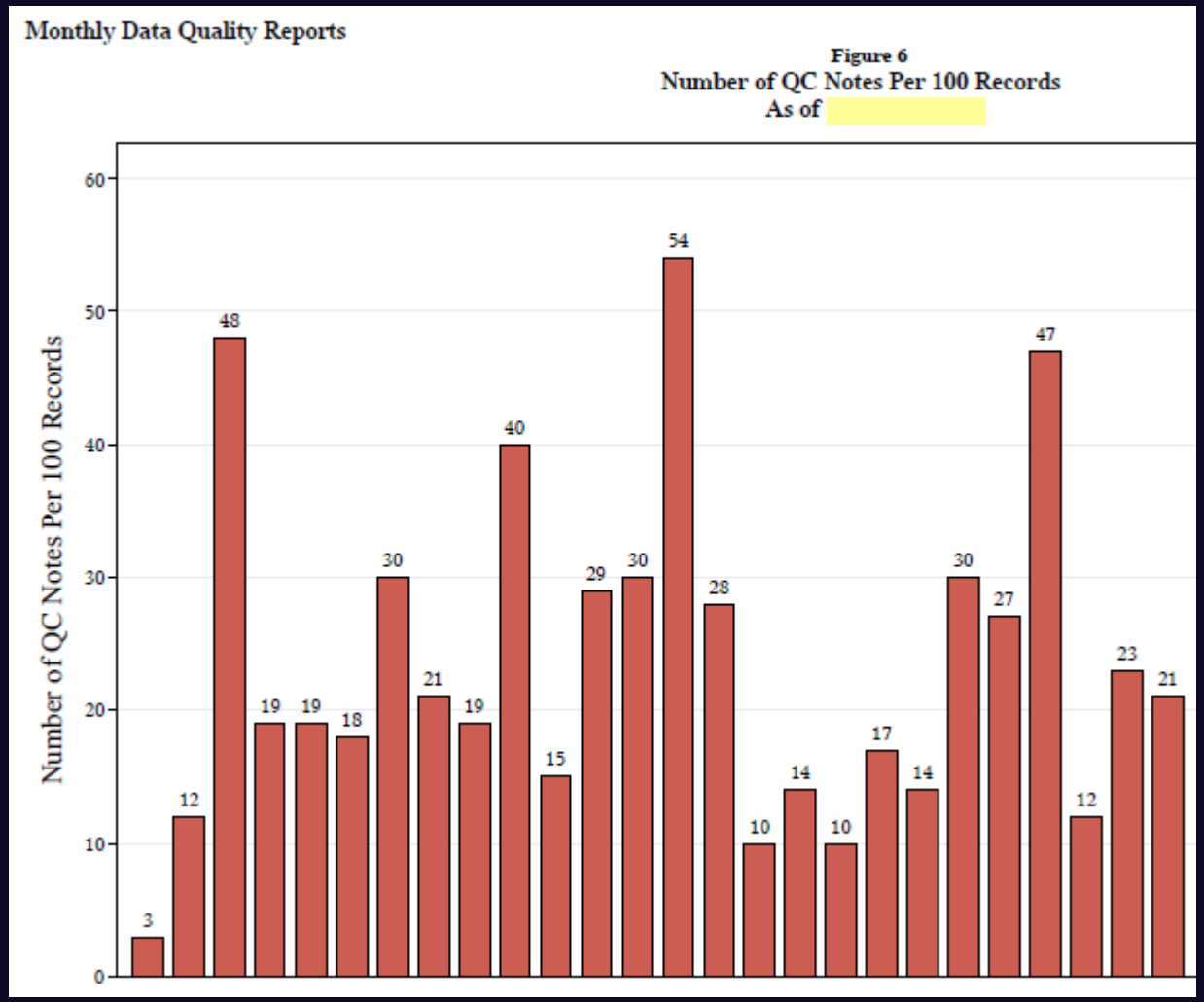
Monthly Data Quality Reports (MDQR)



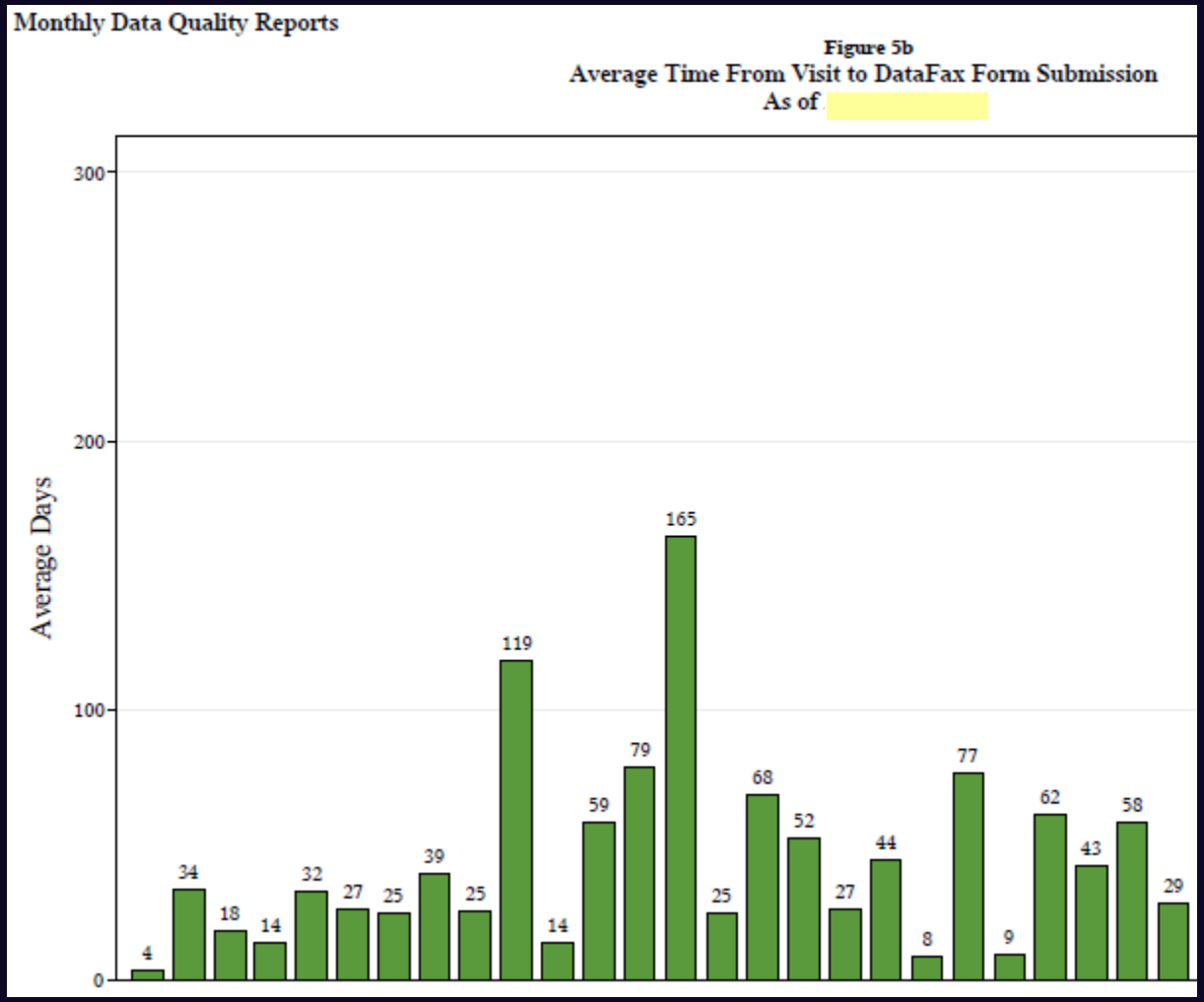
From DF_CTqcs



From DF_CTqcs



From DF_CTcrfs



RBM: Monthly Site Performance Summary

- Standardized across studies
- Focused on site performance metrics
  - Suggested flagging thresholds for assigning risk status
  - High and medium alerts
  - Allows study team to adjust status for mitigating factors
- Categories (some flexibility within)
  - Administrative
  - Safety
  - Data integrity

RBM Escalation

- High-alert sites: clear escalation paths
  - Sponsor staff (DM, PM) work more closely with site
  - Center Director, Study Chair
  - Request extra on-site monitoring

SPS: Data Integrity Issues

CSP XXX			DATA ISSUES							
Date: 11/30/2012	Site Approval Date	Rand	Avg Days from Visit to Form Submissio	Total # of QCs	#, % Resolved QCs among all QCs		#, % of Unresolved QCs among all QCs		# of Unresolved QCs ≥ 30 days	# of Overdue 60-Day FU Visits
					#	%	#	%		
North Pole	01/19/2012	10	5	45	40	89	5	11	4	0
Sombertown	01/19/2012	6	10	83	80	96	3	4	0	0
Whoville	02/07/2012	14	3	99	40	40	59	60	32	2
Pottersville	01/30/2012	14	1	34	15	44	19	56	11	1
Bedford Falls	02/13/2012	3	3	12	5	42	7	58	0	0
Bailey Park	01/20/2012	12	4	39	4	10	35	90	2	0
Mt. Crumpit	09/02/2012	2	7	58	45	78	13	22	11	0
TOTAL	.	61								

DF_CTcrfs

DF_CTqcs

DF_PTmissing

CSP RBM Pilot

- Extend from local to program-wide, work in progress
- Pilot underway for performance metrics
  - Proposed data integrity metrics
    - Rate of queries per x data elements
    - Percentage of unresolved queries
    - Average number of days from visit to form submission
    - Percentage of missing visits (of expected, for randomized patients)

Future Plans

- Layer in additional centralized monitoring, such as:
  - Data falsification detection methods
  - Remote monitoring
  - Standardization of Good Data Management Practices
- DF Reports?
  - Fine-tune usage of current reports, or use them to develop custom reports
  - DF_stats: untapped resource?

Sources and Resources

My thanks to:

- Jennifer Cockroft, Acting Associate Director of Quality, Palo Alto CSPCC
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