

# Building a Data Management Training Program for Initial Hiring, Onboarding and Ongoing Competency

Claudette Edwards, MSN, RN; Laurian Walters, MPH; Juliana Norat, BSN, RN; Gregory Gibbs, MA;  
Ann Martin, BHSA, RN; Fiama Reyes, MPH, CCRP

Presenter: Laurian Walters, MPH

University of Miami Sylvester Comprehensive Cancer Center

TCT Clinical Research Professional / Data Management Conference



The CIBMTR<sup>®</sup> (Center for International Blood and Marrow Transplant Research<sup>®</sup>) is a research collaboration between the National Marrow Donor Program<sup>®</sup> (NMDP)/Be The Match<sup>®</sup> and the Medical College of Wisconsin (MCW).

# Disclosures

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- No relevant disclosures

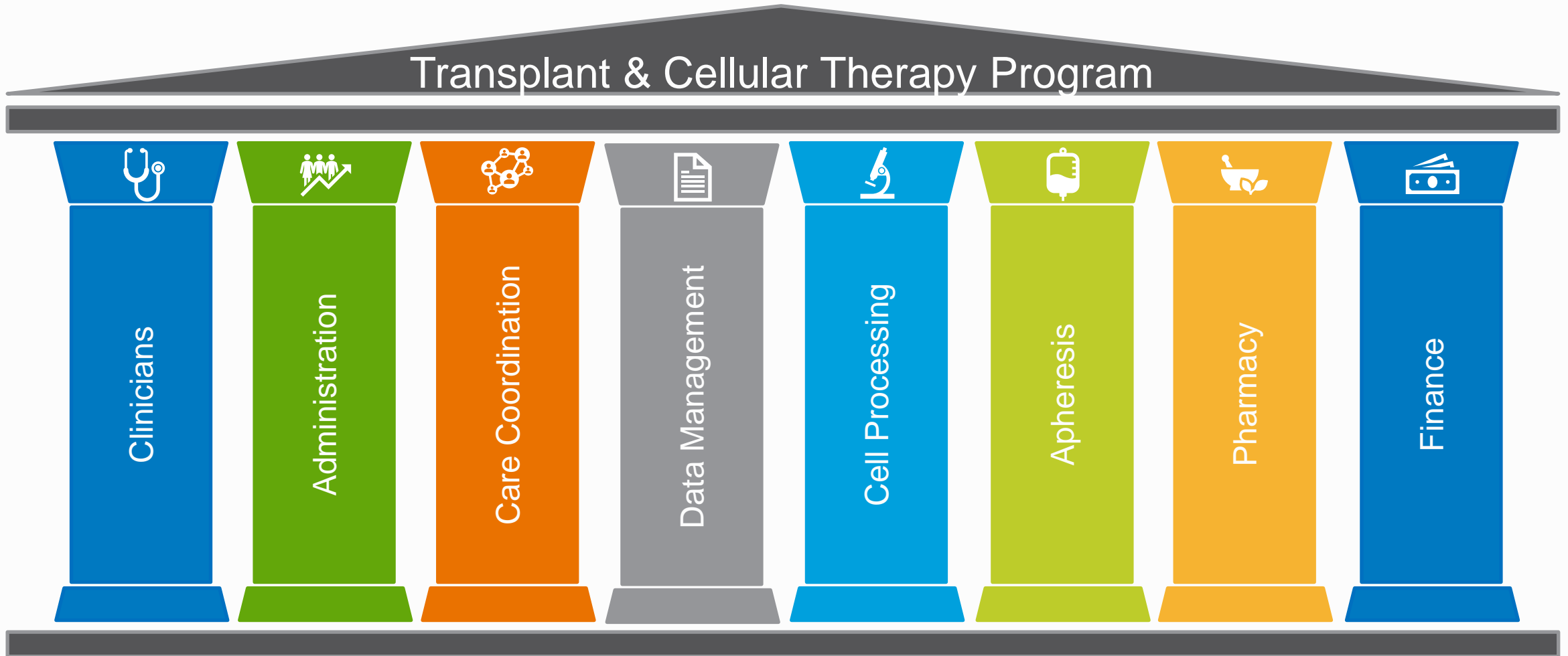
# Learning Objectives

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- Explain the various steps utilized to develop a comprehensive educational plan
- Identify rationale for providing an integrated approach to data management onboarding
- List the benefits of having a comprehensive onboarding plan for data management

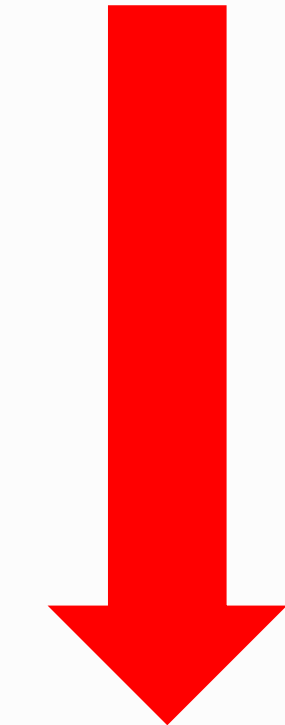
# Pillars of Success

## Transplant & Cellular Therapy Program



# Limited Hiring Pool

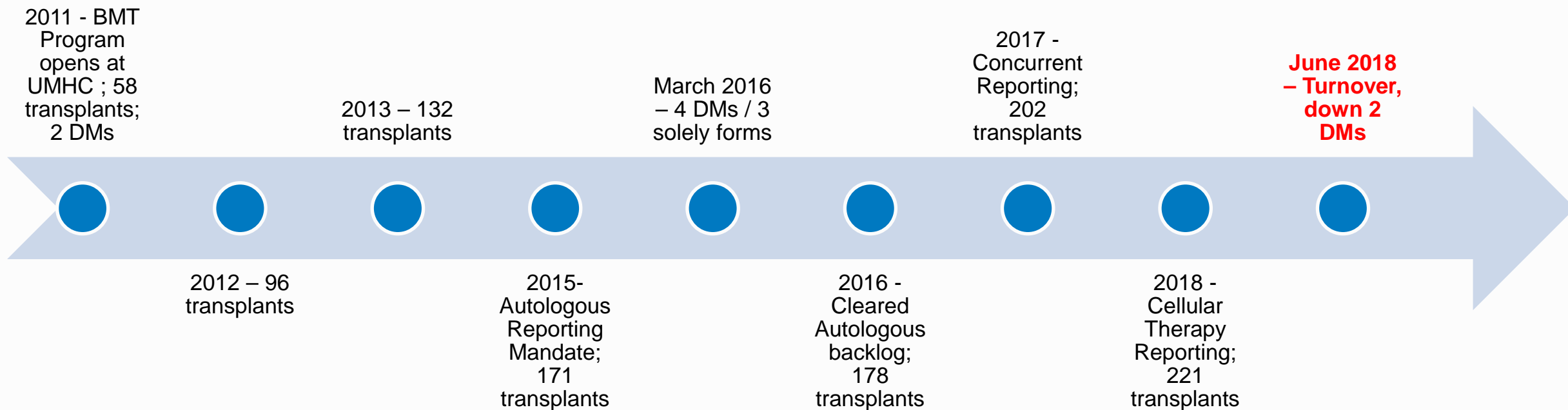
Demand  
Expansion of  
TCT  
Increased data  
capture



Supply  
Qualified DMs

- Qualified TCT Data Manager
  - Comprehensive knowledge of:
    - Transplantation and Cellular Therapy
    - Hematology / Oncology
    - Research
    - Data Collection and Quality
    - Technical knowledge

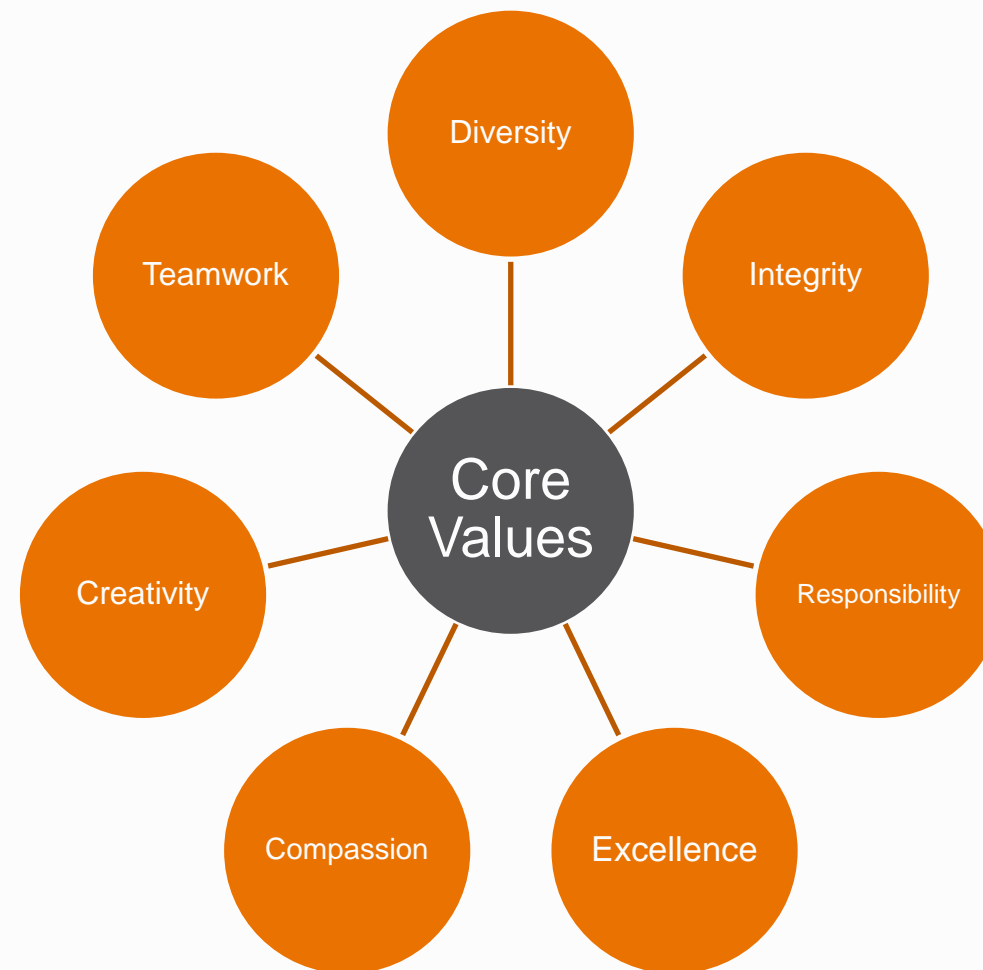
# Our Journey



- Rapid Growth
- Turnover/Loss of seasoned DMs
- No centers to poach from
- No formal training programs

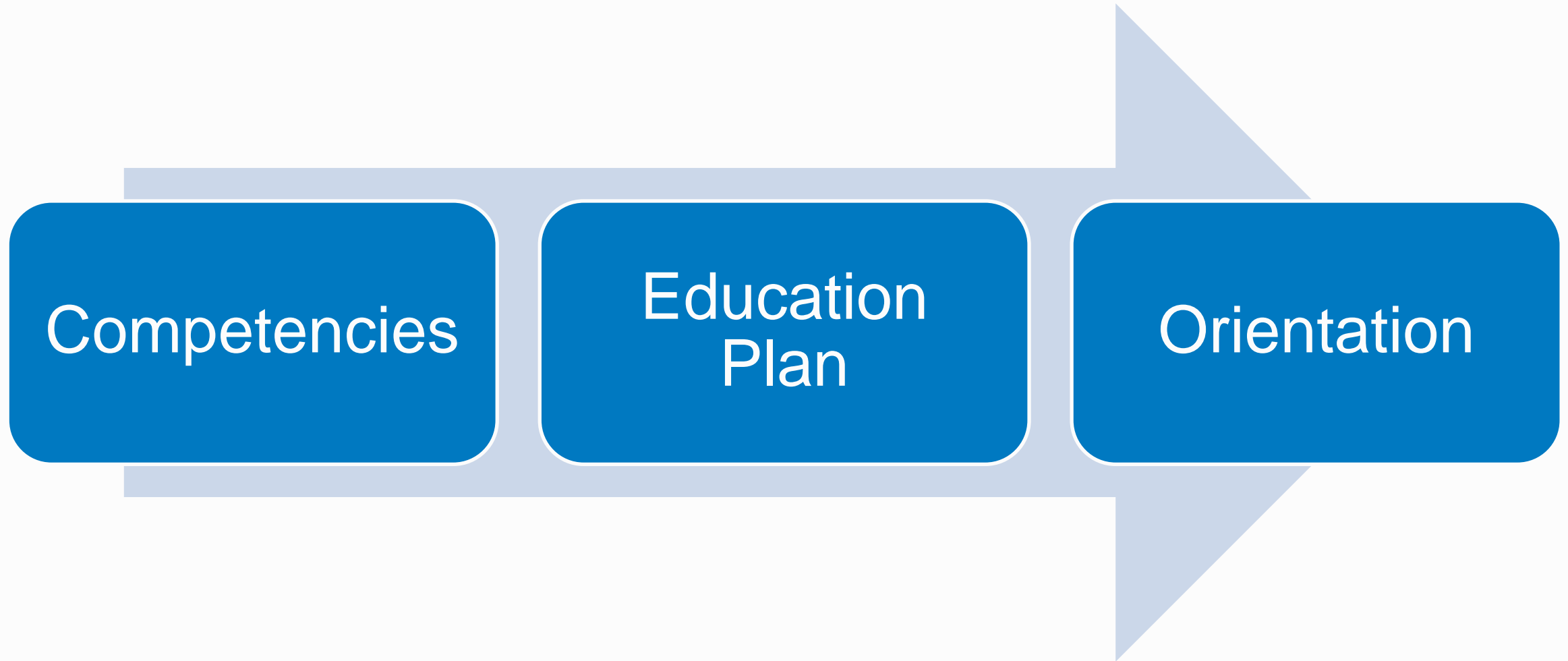
# Hiring

- Identified key characteristics for potential hires:
  - Demonstration of the University of Miami Core Values
  - Hard skills: clinical, research, quality, registry or regulatory experience
  - Soft Skills: critical thinking, problem solving, and initiative
  - 2 Year commitment



# Development of Training Program

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# Competency

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- Utilized CIBMTR Data Collection Forms and Forms Manual as a foundation
- Leveraged the experiences of current data managers to determine the content of competencies
- Mapped internal transplant process from a data management perspective
- Adapted format from nursing competency checklist

# Competency



**Adult Stem Cell Transplant Program**  
**Research Data Manager**  
**Initial Competency and Validation**

<b>EMPLOYEE NAME:</b>		<b>DATE:</b>		<b>TITLE:</b>
<b>NOTE:</b> This is a representative sampling of the competencies necessary for safe, effective performance.				
<b>K E Y</b>	<b>SELF ASSESSMENT:</b>	<b>COMPETENCIES:</b>	<b>METHOD OF EVALUATION KEY:</b>	<b>LEVEL OF COMPETENCE:</b>
	1 No experience  2 Some experience/ needs practice  3 Can safely perform without supervision  <b>Note:</b> This section to be completed by employee	The employee will demonstrate the following skill competencies listed below   <b>Note:</b> Competencies should be written using <i>measurable verbs</i> (i.e. demonstrate, comprehends, understands, provides, displays).	A. Post-test B. Return Demonstration C. Observation of Daily Work D. Case Study E. Exemplar F. Discussion/Reflection Group G. Mock Event H. Presentation I. Quality Improvement J. Monitor K. Other	1 Met objective 2 Met objective with minimal assistance 3 Not met (see action plan)

Department Specific Initial Skill Competencies	Self-Assessment				Date	Measure	Initials	Level of Competence		
	N/A	1	2	3				1	2	3
<b>Transplant Specific or General Objectives</b>										
<b>Basic Knowledge for Hematopoietic Progenitor Cell (HPC) Transplantation</b>										
Understand rationale for type of transplant and the determination process (Autologous vs. Allogeneic)										
<ul style="list-style-type: none"> <li>• Indications for autologous transplant and rationale               <ul style="list-style-type: none"> <li>○ Disease Indications</li> <li>○ Rationale for HSCT after conditioning</li> </ul> </li> </ul>										
<ul style="list-style-type: none"> <li>• Indications for allogeneic transplant and rationale               <ul style="list-style-type: none"> <li>○ Disease Indications</li> <li>○ Types</li> <li>○ Rationale for HSCT after conditioning</li> <li>○ GVL effect</li> </ul> </li> </ul>										
<b>Selection of Suitable Recipient (B3.3.4.2)</b>										
Understand selection of suitable recipients										
<ul style="list-style-type: none"> <li>• HCT Comorbidity index</li> </ul>										
<ul style="list-style-type: none"> <li>• Donor evaluation and management (B3.3.4.3)               <ul style="list-style-type: none"> <li>○ NMDP Registry</li> <li>○ Rationale for using MRD vs. MUD vs. MMUD vs. Haploidentical</li> </ul> </li> </ul>										
<ul style="list-style-type: none"> <li>• HLA Typing               <ul style="list-style-type: none"> <li>○ Basic understanding of the HLA matching process</li> <li>○ Rationale for HLA typing</li> <li>○ Matched donor vs. Unmatched donor</li> <li>○ Minimum HLA Matching Requirement</li> <li>○ Understanding of MHC type 1 and type 2</li> <li>○ Locate HLA report</li> </ul> </li> </ul>										

Department Specific Initial Skill Competencies	Self-Assessment				Date	Measure	Initials	Level of Competence		
	N/A	1	2	3				1	2	3
<ul style="list-style-type: none"> <li>Organ specific toxicities</li> <li>Infections</li> </ul>										
<b>Cellular Therapy (non-HSCT)</b>										
<p>Understand the following concepts associated with CAR-T and other novel cellular therapy treatment modalities:</p> <ul style="list-style-type: none"> <li>Cytokine Release Syndrome (CRS)</li> <li>Neurotoxicity (NT)</li> <li>Grading and management of CRS</li> <li>Locate CRS and NT flowsheets</li> </ul>										
<b>CIBMTR / Data Management Processes</b>										
<p>Comprehend and perform the following data management processes and tasks:</p> <ul style="list-style-type: none"> <li>Admission Flow <ul style="list-style-type: none"> <li>Accession Log</li> <li>Velos</li> <li>Forms: 2804, 2814, 2400, 2402, Baseline forms</li> <li>Randomization: TED vs. CRF</li> </ul> </li> <li>Follow-up Flow <ul style="list-style-type: none"> <li>Forms: 2450, 2100, 211x</li> <li>Send fax requests to outside providers</li> </ul> </li> <li>Platelet Engraftment</li> </ul>										

Department Specific Initial Skill Competencies	Self-Assessment				Date	Measure	Initials	Level of Competence		
	N/A	1	2	3				1	2	3
<b>Disease Specific Objectives</b>										
<b>Acute Myelogenous Leukemia (AML)</b>										
<ul style="list-style-type: none"> <li>Know disease process for AML</li> </ul>										
<ul style="list-style-type: none"> <li>Distinguish between AML subtypes</li> </ul>										
<ul style="list-style-type: none"> <li>Understand tests required for diagnosis and management               <ul style="list-style-type: none"> <li>CBC/Peripheral smear</li> <li>Bone marrow</li> <li>Molecular (i.e. BCR-ABL)</li> <li>Cytogenetics (Karyotype &amp; FISH)</li> <li>Flow Cytometry</li> </ul> </li> </ul>										
<ul style="list-style-type: none"> <li>Explain testing used to identify minimal residual disease</li> </ul>										
<ul style="list-style-type: none"> <li>Understand disease staging and response criteria (basic terms of remission)</li> </ul>										
<ul style="list-style-type: none"> <li>Identify treatments for AML including treatment intent/purpose</li> </ul>										
<ul style="list-style-type: none"> <li>Review and be familiar with the following forms:               <ul style="list-style-type: none"> <li>2402 – AML section</li> <li>2010/2110</li> </ul> </li> </ul>										
<b>Acute Lymphoblastic Leukemia (ALL)</b>										
<ul style="list-style-type: none"> <li>Know disease process for ALL</li> </ul>										
<ul style="list-style-type: none"> <li>Distinguish between ALL subtypes</li> </ul>										
<ul style="list-style-type: none"> <li>Understand tests required for diagnosis and management               <ul style="list-style-type: none"> <li>CBC/Peripheral smear</li> <li>Bone marrow</li> <li>Molecular</li> <li>Cytogenetics (Karyotype &amp; FISH)</li> <li>Flow Cytometry</li> </ul> </li> </ul>										
<ul style="list-style-type: none"> <li>Explain testing used to identify minimal residual disease</li> </ul>										
<ul style="list-style-type: none"> <li>Understand disease staging and response criteria (basic terms of remission)</li> </ul>										

# Education Plan (EP) [Lesson Plan]

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- Used competencies as roadmap for lesson plan
- Designed the EP as a stepwise approach with opportunities for discussion, evaluation, and the application of knowledge.
- Reviewed reputable journals, articles, etc. to support the content
- Determined best teaching method as it related to the content
  - Lecture
  - Self-paced modules
  - Case Review (previously completed cases)
- Assigned an experienced DM as a preceptor for each topic

# Education Plan

	Start	Monday	Tuesday	Wednesday	Thursday	Friday	End
Week 1	26-Aug-19			8 am - 5pm DM Team -Housekeeping -Department Orientation -Staff Meeting  11 am - 12pm Systems DB Engineer -Database Access -Database Reports	9 am -11 am Intro to SCT - DM Staff -Overview (SCT Flowchart) -SCT Tour  1 pm - 5pm -Meet w/ DM Manager -Review Orientation Material -NMDP E-Learning	8 am - 4 pm - Cancer Basics SSB Room 160	30-Aug-19
Week 2	2-Sep-19	HOLIDAY	9:00 am - 11:00 am DM Staff -Protocol Training  1:00 pm - 5:00 pm Web-based Training - Introduction to HLA - Basic Biology of HLA - Advanced Biology - Genetics of HLA - HLA Reporting (Form 2005)	8:30 am - 12:30 pm TCTP Coordinator Manager  1:30 pm - 2:00 pm DM -Telos Training -HLA & Chimerism Application -Final Typing DB -Q&A / Debrief  2:30 pm - 3:30 pm Independent Study	8 am - 12 pm TCTP Coordinator Manager (Competency Sign Off - Need to Highlight on Competency which ones)  1 pm - 5 pm Web-based Training - FomsNet3 Recipient Training - CRID 2804 - Indication for CRID - Pre-TED Form 2400 - Reporting Prep Regimen on 2400 and Form 2000	8 am - 12 pm DM -Admission Process -Source Document Review (i.e. CMI, PFT, Labs, etc.) -Review Forms 2804, 2814, 2400  12 pm - 4:30 pm Web-based Training -Baseline Form 2000 -Review Completed Baseline Form -Infusion Data (Form 2006)	6-Sep-19
Week 3	9-Sep-19	8:00 am - 12:00 pm off	8:00 am - 10:00 am Apheresis Manager - Collection Center  10:00 am - 5:00 pm Director of CTL -Stem Cell Processing Lab	8:00 am - 10:00 am DM Staff -Admission Process  10:00 am - 11:00 am Finance Manager -Finance Orientation  12:00 pm - 5:00 pm Webinars - Lymphoma Pre-Infusion - Lymphoma Post Infusion - Cellular Therapy	10:00 am -3:30 pm DM Staff -Assess Understanding of Webinars -Didactic training (Lymphoma) -Lymphoma Case Review (CRID XXXX MRN XXXXX, Patient Name- Mantle cell) Reviewed 2400- DM Staff -Assigned to look up LDH (lab) and read on Cytogenetics in the manual	8:00 am - 10:00 am Self Paced Learning -Case Reviews -NMDP Curriculum  1- 3 pm DM Staff - Case Review (Completed 2402) - Didactic Training (Lymphoma) Completed 2018	13-Sep-19

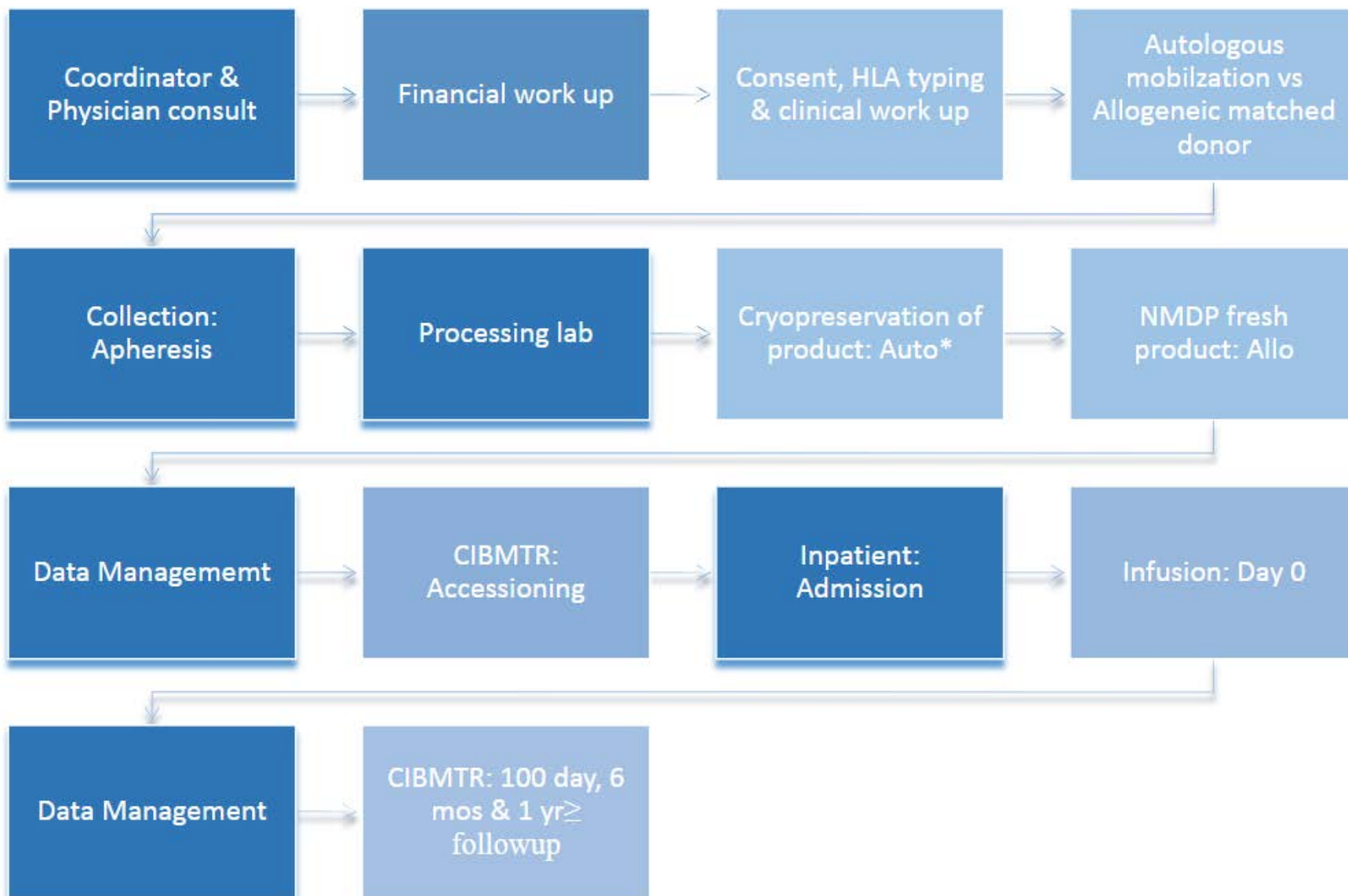
# Orientation Plan

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- Set an expectation that new hires would have an observational rotation through the clinical and non-clinical areas of the transplant program
- Used transplant flow as the basis of programmatic orientation
- Identified key individuals from each of the departments and set the objectives/key topics they would cover with new hires
- Aligned orientation schedule to coincide with topics in education plan



# Stem Cell Transplant Process



# Summary

## Competencies

### Development

- Based on prior DM experience
- CIBMTR data collection forms and manual = foundation
- Format adapted from nursing

### Execution

- 10-page (landscape) competency checklist
- 2 main categories:
  - Transplant Specific & General Objectives
  - Disease Specific & General Objectives

## Education Plan

### Development

- Based on competencies
- Used varied approaches for effective learning
- DM preceptor assigned for each topic

### Execution

- Detailed schedule of assigned topics, preceptors, and method of training

## Orientation

### Development

- Mapped transplant process from data management perspective
- Identified key individuals
- Established objectives for rotation
- Aligned rotation schedule with education (lesson) plan

### Execution

- Schedule of clinical and non-clinical areas to be observed
- List of point of contacts for each area in transplant program

# Culmination and Execution of Training Program

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- Successfully onboarded 3 novice data managers in the span of 12 months
- Each data manager was given an Orientation Folder containing:
  - Data Management Orientation Checklist
  - Education Plan (calendar of assigned topics)
  - Interdepartmental Orientation Schedule (calendar)
  - Data Management Competencies
  - Organization Chart
  - Phone Rooster
  - Internal Data Management Manual

# Culmination and Execution of Training Program

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- New hires spent a minimum of 10 weeks in didactic training and 8 weeks of guided forms submission
- Competencies periodically reviewed and checked off by both new hire and preceptor
- Personalized education plans were developed to bridge knowledge gaps uncovered in evaluation phase

# Example of Focused Study Guide for a Personalized Education Plan

## Post-Transplant Complications

### Complications:

#### 1. General

- Identify common complications post-transplant and treatment
- ❖ Define and understand each:
  - neutropenia
  - mucositis
  - catheter related complications

#### 2. Infection

Transplantation related factors affecting the risk of infection- Refer to Table 1 [link](#)

- ❖ Define the 3 phases for infection risk:
  - Pre-engraftment: 2-4 weeks post HSCT
  - Post engraftment: 2-3 months post
  - Late phase: beyond 3 months after engraftment

### Objectives

- ❖ Define each complication.
  - Identify vaccination schedule post-transplant
  - Identify what infections/complications occur in each phase include neutropenia etc and rationale\*
  - Identify prophylaxis treatment for each infection or complication, length of tx
  - Identify differences between treatment and prophylaxis (common medications, ex dosages)
  - Identify causes and rationale for prophylaxis and infection risks
  - Identify laboratory tests available for each infection
  - Identify manifestations and/ or presentation of each infection
- ❖ Refer to [risk stratification](#) and management for further understanding
- ❖ [Post-transplant care recommendations](#) (NMDP)
- 1. Infections- vulnerability to infection and immune reconstitution (finalizes 2-3 yrs post)
  - a. Fungal (mold) Infections
    - i. Aspergillus -PJP
    - ii. Non aspergillus
  - b. Bacterial Infections
    - i. Blood stream infections
    - ii. Gut Infections e.g C-Dificile
    - iii. Staph infections
    - iv. Pseudomonas

# Ongoing Competency

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- Continued use of individual education plans beyond onboarding period
- Mandatory annual education in transplantation and cellular therapy
- Performance of data validation audits
- Case discussion and presentation
- Presence in clinical conferences (i.e., Tumor Boards, etc.)

# Outcomes / Benefits

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- Plan is structured, formal and reproducible
- Ensures consistency in training and knowledge base
- Establishes transparency and clearly outlines job performance and expectations
- Allows the department to be prepared for turnover and growth
- Helps to hard wire internal processes
- Creation of a center specific data management manual

# THANK YOU!

## Quality and Data Management Team

