Plan Overview

A Data Management Plan created using DMPonline

Title: Structured Risk-based Peer Evaluation System Study (StRiPES Study)

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Template: University of Bristol General Template

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Project abstract:

General practice in England is changing quickly, driven by an expanding, aging and increasingly complex population. Changes to GP services include new staff doing work traditionally done by GPs, and increased use telephone and online consultations. Such changes present opportunities to improve patient care, but questions remain regarding the safety of these changes. General practice in England is changing quickly, driven by an expanding, aging and increasingly complex population. Changes to GP services include new staff doing work traditionally done by GPs, and increased use telephone and online consultations. Such changes present opportunities to improve patient care, but questions remain regarding the safety of these changes.

This uncertainty highlights the need to ensure we have effective ways of ensuring patient safety in general practice. Existing patient safety processes are challenged by a number of barriers to engaging, such as the costs, time and potential for legal consequences. Further, there are concerns over the usefulness of staff assessment processes that rely heavily on self-collected data, infrequent assessments and inconsistent assessment detail across staff groups. All this highlights the need to explore alternative approaches.

One such alternative, is a structured, risk-based, peer

evaluation system that has been used at an ‘out of hours’ general practice service provider in Bristol, UK over the last 8 years. The system works by screening a percentage of all clinicians' consultation notes based on their perceived ‘risk’ status. ‘Risk’ status is worked out by factors such as concerns over previous work or how long the clinician has been working with the organisation. Screened cases causing concern are reviewed by a peer group, who assess the case in detail and feedback learning points to the clinician or escalate further if required.

The proposed study will interview 18 participants, including 12 clinicians who have been subject to the peer evaluation system, 3 members of the peer review team and 3 senior management team members. The purpose of the interviews will be to understand the usefulness and acceptability of the system, identify how it might be improved, and explore views on the use of this system to 'in-hours' general practice.

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Copyright information:

Structured Risk-based Peer Evaluation System Study (StRiPES Study)

Project Summary

Provide a brief description of the project and the research being carried out. State if the research is part of a larger project, if there are any funders involved, and how data fits in.

General practice in England is changing quickly, driven by an expanding, aging and increasingly complex population. Changes to GP services include new staff doing work traditionally done by GPs, and increased use telephone and online consultations. Such changes present opportunities to improve patient care, but questions remain regarding the safety of these changes. General practice in England is changing quickly, driven by an expanding, aging and increasingly complex population. Changes to GP services include new staff doing work traditionally done by GPs, and increased use telephone and online consultations. Such changes present opportunities to improve patient care, but questions remain regarding the safety of these changes.

This uncertainty highlights the need to ensure we have effective ways of ensuring patient safety in general practice. Existing patient safety processes are challenged by a number of barriers to engaging, such as the costs, time and potential for legal consequences. Further, there are concerns over the usefulness of staff assessment processes that rely heavily on self-collected data, infrequent assessments and inconsistent assessment detail across staff groups. All this highlights the need to explore alternative approaches.

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Data Types

What types of data will be involved?

This project will generate data in the form of study protocol and related materials, a database of participant contact information, physical signed consent forms, approximately 18 encrypted audio interview recordings lasting 30mins each (9 hours total), anonymised interview transcripts, a separate database to identify which participant the recording pertains to, and resulting NVIVO files documenting transcript qualitative analyses.

What file formats will be used?

This project will generate data in the form of study protocol and related materials (word files and PDFs), a database of participant contact information (excel files), physical signed consent forms, approximately 18 encrypted audio interview recordings lasting 30mins each (9 hours total) (encrypted audio), anonymised interview transcripts (PDFs), a separate database to identify which participant the recording pertains to (excel files), and resulting NVIVO files documenting transcript qualitative analyses (NVIVO files).

What will be the approximate size of the files?

- 0 - 50 GB

Data Capture

How will the data be generated and/or gathered?

This project will generate a database of participant contact information, physical signed consent forms which will be scanned to protect against the risk of physical copies being lost (physical copies will be retained), approximately 18 encrypted audio interview recordings lasting 30mins each (9 hours total), anonymised interview transcripts, a separate database to identify which participant the recording pertains to, and resulting NVIVO files documenting transcript qualitative analyses.

Folders and files will be named using the following general principals:

A parent digital folder will contain a number to order the information in a list, and a title that clearly describes it's contents e.g. "1. Participant contact information database". Within this folder will be a version of the study file, follwed by the date written in the form: year_month_day file title. For example "Participant contact information database 2018_03_01". Within each folder there will be a digital folder entitled 'past versions', in which all historical versions of data will be placed. For example the Participant contact information database folder will have within it a 'past versions' folder, in which past versions of participant contact information databases will be placed.

Audio recordings and transcripts will be labelled with a corresponding participant study number, which will correspond participant numbers in the participant identification database, followed by the date written in the form: year_month_day file title , for example

"1. Interview audio recording 2018_03_01". Again old versions of this data will be placed in a digital folder entitled 'past versions'.

These general principals will guide the storage of all study data to ensure it is easily accessible during and following study completion

Data Storage and Preservation

How will the data be backed up?

All data will be stored in The University of Bristol Research Data Storage Facility (RDSF), which provides secure, long-term storage for research data. This major investment provides nightly backup of all data, with further resilience provided by three geographically distinct storage locations. A tape library is used for backup purposes and also for long-term, offline data storage. Only authorised users can access data stored within the RDSF. The RDSF is managed by Bristol's Advanced Computing Research Centre (ACRC) which has a dedicated steering group and a rigorous data storage policy (https://www.acrc.bris.ac.uk/acrc/RDSF_policy.pdf). The RDSF upholds and reinforces Bristol's wider Information Security Policy(www.bris.ac.uk/infosec/policies/docs/isp-01.pdf).

The consent forms from the study - the only physical data generated, will be scanned and stored electronically. The physical copies of the consent forms will be retained in a locked storage cupboard, in a locked room at the University of Bristol.

Do you have security procedures in place for sensitive data?

The data generated in this research is sensitive in the sense that it pertains to interview responses of individuals that will be anonymised at publication. However, the interviews discuss only staff members views on the acceptability and usefulness of a quality management system used in their workplace. The harm that would come from a breach of confidentiality from these interview results is minimal. However the interviewees expect that this data is kept confidential - and so this will be ensured.

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What are your plans for long-term storage of the data?

Anonymised study data and related materials will be retained for 7 years. This time period is adequate for the findings of the study to be published, considered and interrogated by the academic community. This is a small evaluative study principally exploring the acceptability and usefulness of an intervention, to understand whether further research into this area is justified. As this study designed only to inform decisions on whether further research is merited, rather than impacts on patient care, there is no discernible in storing study data longer than the proposed 7 years.

After 7 years the University of Bristol will destroy all stored study materials.

Data Organisation

How will data be organised?

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These general principals will guide the storage of all study data to ensure it is easily accessible during and following study completion

Data Documentation and Description

What documentation will you keep?

We will keep an index of the data that has been generated as a consequence of this research in word document format. It is not anticipated that the data generated from this small evaluative study has any reuse value, and so guides to the use and generation of the data will not be produced, beyond the methodology information presented in the study protocol and write up itself.

Will you be using any metadata standards?

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Data Sharing and Publication

What data do you plan to share?

We do not intend to share the data generated from this small evaluative interview study, beyond that which is published in the final write up, as it is of limited value for reuse.

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Are there any ethical, commercial, legal or IPR issues which might apply when publishing your data?

This study will published anonymised quotations from interviewees only. No identifiable information will be published in this study. No commercially sensitive information is being generated in this study.

How will your data be shared?

We do not intend to share the data generated from this small evaluative interview study, beyond that which is published in the final write up, as it is of limited value for reuse.

Will there need to be controlled access procedures in place for your data?

We do not intend to share the data generated from this small evaluative interview study, beyond that which is published in the final write up, as it is of limited value for reuse.