		Roles List	
#	Roles	Description	NM and UT Comments etc.
1.	Abstractor	 Abstracts/synthesizes medical records Includes circuit riders who work in the field primarily May also be known as 'Medical Record Abstractor' 	•
2.	Coder	Assign numeric values to medical informationIncludes circuit riders	•
3.	Editor	Checks the information that has been coded and abstracted	• Similar to #5
4.	Super Editor	 A person who checks the editors' work, typically in a random sample. May arbitrate if two people have differences mainly in coding. 	• Similar to #5
5.	Consolidator	• Person who takes potentially matched records and merges and summarizes the information.	• See #3 & #4
6.	Registry manager	Person who operates the Registry. Responsible for day-to-day operations.	
7.	QC person	• Quality control for both the Central Registry, but also potentially for the hospitals.	•
8.	Principal investigator (PI)	 In charge of the scientific aspect of the Registry. They have ultimate responsibility for ensuring that contract with SEER is met. The Registry Manager reports to them. May only work part time in the role. 	•
9.	Programmer/systems analyst	 Person that currently holds the computer systems, data entry systems, tracking systems, etc. together. Oversees development of IT. Their role will change with this system to be more database maintenance, administration, etc. Responsible for programming and ad-hoc reporting. 	• See #10
10	Data manager	•	• See #9
11.	Network	Keeps the network going.	•
	administrator	Aka System Administrator, multiple per registry	

		Roles List	
#	Roles	Description	NM and UT Comments etc.
12.	Filing Room clerk	 In charge of where all the records are in the files. They do scanning and archiving of records/abstracts, too. 	• See #13 and #14, subsets
13.	File clerk	 Think this role will be eliminated or have reduced role by automation. They count the incoming non-electronic abstracts (other records?) to confirm. Manages the batch process. 	• Subset of File Room Clerk (#12)
14.	Data entry clerk (?)	• Think this role will be eliminated or have reduced role by automation.	• Subset of File Room Clerk (#12)
15.	SEER Rule Setter ("Rule Fairy")	Sets rules that SEER Registries for data collection and coding.	• Borderline scope: interested in rules, not really in the person who sets
16.	SEER QC Auditor	• Run the audits to QC the data in case finding, abstraction, and coding.	• Not in Scope (they wouldn't normally use registry software)
17.	SEER Trainer	• Conducts workshops or goes to the Registries to make sure they follow rules (correctly) and are consistent in following the rules.	• Borderline scope: would probably have to work with software tools, but they aren't trying to affect the database.
18.	Case Finder/ Screener	• Responsible for identifying possible new cancer/tumor/cases (CTC).	•
19	Abstracting Supervisor	• Sets up work load for where abstractor goes, how many CTCs they need to do, etc.	•
20.	Coding Supervisor	• Someone who sets work load for the coders. Done in Seattle and Utah.	•
21.	Follow-up manager	• Person who manages any follow-up clerks and is responsible that incoming follow-up information updates the files appropriately.	•
22.	Follow-up clerk	 Reads the obituaries in some registries. Processes the follow-up responses that come into the Registry. 	

		Roles List	
#	Roles	Description	NM and UT Comments etc.
23.	Death Clearance	Clears up DCO cases	
	Manager	Follows back on Death Certificates	
		Communicates with facilities to find more information	
24.	Special Studies	• In charge of all SS aspects such as criteria, contracts, contacting patients	• AT,NM,UT
	Manager	and MDs, and getting SS Data to the SS Coordinator	
25.	Office Assistant	Person who keeps the office up and running	• AT,NM,UT
26.	Regional Coordinator	 In Georgia registries only GA has been divided into 5 regions. This person resided in region and is responsible for hospital contact – making sure cancer data gets in to CRO, death certificate follow-back, path lab follow-back, etc. One coordinator covers the Metro region which is larger than just SEER. Another covers a region which includes our 10 rural counties. 	• NCS: this seems similar to IA field staff. This is a person's title, not their role. The role changes by what the task is.

			Synthesized List of Roles	
1)	Central	Frequent Participants	Abstractor	
	Registry		• Coder	
			Editor	
			Super editor	
			Filing room clerk	
			Follow-up clerk	
			QC person	
2)		Occasional Participants	Principal investigator	Eliminated Data Manager and QC auditor for
			• Supervisors – a. abstractor	reasons stated above
			B. coder	
			Registry manager	
			Follow-up manager	
			Trainer	
3)		Roles going away	File clerk	
			Data entry operator	
4)		Central Registry	Programmer	Network Administrator may be external to the
		Application Support Staff	Systems analyst	registry
			• DBA	
			Network administrator	
5)			• Rule setters	
	Personnel		Standard setters	
			QC auditor	
			Trainer	

	therwise stated, the pro	cess ID and N	Name is from	the 5 – NL BPN	1 models								
A = Appr	rmer (Po – performs occa over/Reviewer/Consult /Recipient of Information	sionally)					S = Support/S O = Source of N = Inform/No	Information					
Tt Silit	Role:				- Frequen		ants						1
Process ID	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/ Screener	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application Support	SEER Person- nel
13.1	Confirm Data Transmission	N (abs.)		NN (supp)		NN (supp)	NN	NN (paper)	N (follow- up record) (supp)	PPPP	Abstr Supv - NNN FUP Mgr - NNN Registry Mgr - NNN Data Mgr - NNN Office Assistant - PPP (13.5np)	РРР	
13.2	Confirm Data is Valid	NN (abs.)		NNN	NNN, OOO	NNN, OOO	NN, P(13.6np)	NN	NN	РРРР	Abstr Supv - N FUP Mgr - N Registry Mgr - N Data Mgr - N	PP	
13.4.1 (13.3, 13.8 np)	Convert Data to Local Registry Standards	P-(as coder)	P (paper)				PPP (paper) (as coder)			PPPP	Abstr Supv, Registry Mgr, Coding Supv - SS,OO	PPP	
13.4.2	Convert ICD Codes & Decipher Disease Text		PPP (paper)				(as coder)			PP	Not Done		00

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	Role:				- Frequen	t Participa	ants						
Process ID	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/ Screener	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application Support	SEER Person- nel
13.4.3	Determine Residency						Screence	CRIK	CRIK	PPPP		Бирроге	Her -
13.4.4	Convert Other Codes & Other Text		PPP (paper)				PP (paper) (as coder)			PP	Registry Mgr – O Not Done Not Done		
13.3 (13.4 np)	Check for Duplicate Records	NN (abs.)				KKK				PPPP	Data Mgr – N		
13.2 np	Complete Pre- Processing of Electronic Records									P		P	
13.7 np	Scan Data							P					
8.1 np	Store Follow-Back Need	PPP	РРР	PPP	PPP	РРР	PPP		РРР		Data Mgr – P Registry Mgr – P,SS,OO Supv – P,SS,OO		
8.3.2 np	Return Follow-Back Response									PPP		PP	
8.2 np 8.3.1 np	Create Follow-Back Query										FB Clerk – PP FB Mngr – P		

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	Role:				- Frequen		ants						
Process	D N	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/	Filing Room	Follow Up	Auto- mated	Occasional Participants	Registry Application	SEER Person-
ID	Process Name:	D (C 11)					Screener	Clerk	Clerk			Support	nel
8.4 np	Research Follow- Back Need	P (field)											
15.1	Search for Patient Match	N		N		N				PPP			
15.2	Resolve Poss. Pat. Match												
	Obvious Matches			PP							FUP Mgr – PPP (as editor)		
	Non-Obvious			PPP									
15.4	Search for CTC Match			NN						PPP			
15.3	Resolve Possible CTC Match	N		NN PPP		N	Po		Po		CF & FUP clerk use SREC w/in main activity		
15.5	Search for Facility Match			N						PPP			
15.6	Search for Treatment Match			N PPP (to be automated)						PPPP,SSS			
1.1	Determine Potential CTC	PPP (to be automated)					NN			PPPP	Office Assistant – PPP (shredding)		

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	Role:				- Frequen		ants						
Process	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application	SEER Person-
1.2	Screen for Possible Local and Seer Reportablility	PPP (as CF/S)					Screener PPP	Cierk	Cierk	PPP (auto part now 1.1.2np)		Support	nel
1.3	Screen for Possible Special Studies Eligibility	PPP					PPP				Not Done SS Mngr – PP		
2.6	Determine if Abstract is Needed	N,PPP (auto: determine rpt 2.1)								PPP		PPP	
2.4 np	Request Abstract (manual)										Office Asst -		
2.6.2 np	Automatically Request Abstract									PPP		PPP	
2.3	Request Patient Medical Records	PPP									Death Clearance Manager – P Office Assistant – S		
2.1	Create Abstract	PPPP	P-(as abstractor)										
2.2	Schedule Abstraction	PPP									Abstract Mngr - PP		
2.7np	Add or Modify AFL	P									Abstract Mngr - P		

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	Role:				- Frequen		ants						
Process ID	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/ Screener	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application Support	SEER Person- nel
4.1	Consolidate Patient Set for Facility View		PP (as editor)	PPPP	AAA					PPP			
4.2	Consolidate Patient Set for Registry View		PP (as editor)	PPPP	AAA					PPP		P,SS	
4.3	Establish Patient Set as Consolidated		PP (as editor)	PPPP									
7.1	Determine Eligibility for Active Follow-Up									PPP	FUP Mngr - S		
7.2	Determine Type of Active Follow-Up									PPP			
7.3	Perform Follow-Up Action								PPP	PPP	Office Asst - PPP		
7.4	Evaluate Active Follow-Up Responses								PPP	PPP			
7.5	Select Best Value from Active Follow- Up								PPP	PPP			
5.2	Determine & Reset Data Items			NN						PPP			
5.1	Assign Ethnicity			NN						PPP			

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	Role:				- Frequen		ants						
Process ID	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/ Screener	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application Support	SEER Person- nel
5.6	Determine if Missing Critical Data Items			NNN						PPP			
5.4	Assign Census Tract		PP	PP						PPP (5.1.4np)		SSS (5.1.4np)	
5.3	Evaluate Census Tract	NN	NNP	P						PPP (5.1.4np)		SSS (5.1.4np)	
5.5	Establish Patient Set as Submissable			NNN	NNN					PPP	SEER Rule Setters – OOO		
17.1	Compare Individual Value to Rules	NNN	NNN	NNN	NNN	N				PPP		NNN	
17.2	Validate Value versus Other Data Items	NNN	NNN	NNN	NNN	N				PPP		NNN	
14.0	Update Data Source									PPP	Desired, not done now	PPP,SS	
3.2	Evaluate Updated Research Information			(done in 4.0)					PPP (done in 4.0)		SS Mngr– PPP/KK	PPP, SS (done in 13.0)	
3.1	Select Patients or Health Records or Supplemental Records for Special Study Inclusion									PPP (desired)	SS Mngr – PP Registry Manager – S	PPP	

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S = Support/Secondary Performer O = Source of Information

N = Inform/Notify

	Role:				- Frequen	t Particip	ants						
Process ID	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/ Screener	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application Support	SEER Person- nel
10.1	Manage Abstraction Facility Leads									P (10.1.3 np)	Death Clearance Manager – P Abstract Supv – P		
10.2	Manage Cancer/Tumor/Case Information Acquisition	NNN S (10.2.2np)								PPP (10.2.6np)	Regional Coordinator - N Registry Manager - NNN,PPP Abstract Supv - S	P	
10.3	Manage Follow- Back Queries			N,P						P	Death Clearance Manager – P Regional Coordinator – N,P Those who issued the follow-back (NM, UT) FB Mngr - P	SSS	

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	Role:				- Frequen	t Participa	ants						
Process ID	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/ Screener	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application Support	SEER Person- nel
10.6	Manage Follow-Up								PPP	P	Registry Manager – PP Follow-Up Manager – PP	S	
10.5	Manage Information Reporting Obligations									P (desired) 10.5.1.2np	Registry Manager – PPP PI – P Info Distr Mngr - P	SSS	
18.1	Compare and Resolve Text to Codes	PPP	PPP	PPP	AAA								
18.3	Conduct Patient Set- to-Patient Set Matching			NNN	NNN					PPP	Check 15.0 and 4.0	SSS	
18.4	Assess Likelihood that Treatment is Complete	PPP	PPPP	P PPP	OO					P (Seattle)	Not formally done		
18.2	Delete Patient Set Information			PPP	PPP								

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	Role:				- Frequen	t Particip	ants						
Process ID	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/ Screener	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application Support	SEER Person- nel
10.9	Manage Supporting Data Stores		P								Registry Manager – O Office Assistant – P	P PP,NNN	
10.8	Manage Supplemental Info Acquisition								P PP	P	Registry Manager – SS,OO FUP Mngr - P	SSS, P	
10.10	Update Patient Set With Randomly Obtained Knowledge	P	P	P	P	P	P				All Managers – P		
10.4	Perform Reliability Studies	PPP	PPP	РРР	PPP	PPP					All Managers – SS Registry Managers – PPP		

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	Role:												
Process ID	Process Name:	Ab- stractor	Coder	Editor/ Consolidator	Super Editor	QC Person	Case Finder/ Screener	Filing Room Clerk	Follow Up Clerk	Auto- mated	Occasional Participants	Registry Application Support	SEER Person- nel
12.0	Reporting			S (12.5.1np)						РРРР	Registry Manager – PPP,AA PI – PPP,AA Info Distr Mngr – P 12.5, 12.6, 12.7 may be delegated to other staff FB Clerk - P 12.8	PPP,KKK	
6.1	Gather List of Needed Death Certificates									P		S	
6.2	Go to Vital Statistics Bureau and Acquire Death Certificates										DC Mngr - P DC Staff - P		
6.3	Send List to Vital Statistics Bureau										DC Mngr - P Office Asst - P		
9.0	Remove Non-CTC Records									P	Office Asst?	Р	
11.0	Maintain Security									Р	Reg Mngr - P	P	

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	Role:		Frequent Participants										
		Ab-	Coder	Editor/	Super	QC	Case	Filing	Follow	Auto-	Occasional	Registry	SEER
Process		stractor		Consolidator	Editor	Person	Finder/	Room	Up	mated	Participants	Application	Person-
ID	Process Name:						Screener	Clerk	Clerk			Support	nel
11.6	Update Password	P	P	P	P	P	P	P	P		Any		
	•										Registry Org		
											Rep - P		

Assumed Property	Participant: Editor/ Consolidator					
1)Document participant properties						
a)Brief description	•					
b)Credentials						
i)Certifications	• CTR					
	• ART					
	Would be nice: ICD and CPT4					
	•					
c)Role Features						
i)Explicit Authorities	•					
d)Responsibilities	•					
e)Population						
i)Assumed Literacy						
(1)General literacy:						
(a)General level of Educat.						
(2)Medical/Cancer Registry Literac.	Medical/Anatomy/Physiology terminology					
(3)Technology Literacy	Basic Computer Skills					
ii)Language(s) (assumed) read/write	English					
iii)Tenure in role (e.g. Mean time in job)	Lower turnover					
iv)Special accommodation needs (disabils.)						
(1)Vision						
(a)Color blindness						
(b)Impaired vision						
(2)Hearing						
(3)Speech impairment						
(4)Mobility impairment	Wheelchair accessible					
(5)Dexterity impairment						
f)Other Properties						
i)Work Period (time & days)	Regular business hours					
g)Implementation considerations						
i)Receptivity						
(1)Loss – Perceived	 None, good job security and flexible to new technology 					
(2)Loss – Real	•					
(3)Gain – Perceived	Easier due to having online coding manuals					
(4)Gain – Real	•					
Other Comments:	Like big screens					
	Some abstracting required, usually move up from abstracting					

Assumed Property	Participant: Super Editor
2)Document participant properties	
a)Brief description	(NM) Coming from the editor pool
	(UT) Would also be the QC person

b)Credentials					
i)Certifications	 Manager trust/ Prove track to move up from editor Good people skills Able to give feedback 				
c)Role Features					
i)Explicit Authorities	 Override editors & consolidators (NM) Involved in hiring, firing, employee problems 				
d)Responsibilities	 Accountable for editor staff New SEER coding changes implementations and training 				
e)Population					
i)Assumed Literacy					
(1)General literacy:					
(a)General level of Educat.	College Degree Not Required				
(2)Medical/Cancer Registry Literac.	Medical/Anatomy/Physiology terminology				
(3)Technology Literacy	Basic Computer Skills				
ii)Language(s) (assumed) read/write	English				
iii)Tenure in role (e.g. Mean time in job)	Low turnover				
iv)Special accommodation needs (disabils.)					
(1)Vision					
(a)Color blindness					
(b)Impaired vision					
(2)Hearing					
(3)Speech impairment					
(4)Mobility impairment	Wheelchair accessibility				
(5)Dexterity impairment					
f)Other Properties					
i)Work Period (time & days)	Work hours that people under them are				
g)Implementation considerations					
i)Receptivity					
(1)Loss – Perceived	Secure in position				
(2)Loss – Real	•				
(3)Gain – Perceived	Online help for improved accuracyEasier way to do their job				
(4)Gain – Real	•				
Other Comments:	Some traveling out of town				

Assumed Property	Participant: Abstractor
3)Document participant properties	
a)Brief description	Lowest rung in the registry in NM, UT; other registries may start as coders and move up to abstractors
b)Credentials	

i)Certifications	SAME AS EDITOR/CODER
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Good understanding of what is in a medical record
	(NM) CTR is not a necessity
c)Role Features	(1411) CITC IS NOT A NECESSITY
i)Explicit Authorities	View records in facility
d)Responsibilities	Keep good PR
	Looking follow-up/back for that facility
	Collect data for SS
	Case finding in facility
e)Population	Cust manig in memory
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	No College Degree Required
(2)Medical/Cancer Registry Literac.	Medical/Anatomy/Physiology terminology
(3)Technology Literacy	Basic computer skill
ii)Language(s) (assumed) read/write	English
iii)Tenure in role (e.g. Mean time in job)	Variable (higher turnover than other roles)
iv)Special accommodation needs (disabils.)	
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	
(5)Dexterity impairment	
f)Other Properties	
i)Work Period (time & days)	Work around hospital hours
	Need some flexibility
g)Implementation considerations	•
i)Receptivity	
(1)Loss – Perceived	• "In the dark at this point"
(2)Loss – Real	•
(3)Gain – Perceived	Online/Electronic help systems
	Happy w/ carrying less manuals
(4)Gain – Real	•
Other Comments:	Sign confidentiality agreements (Applies to all
	registries, roles)
	Flexible to odd working conditions
	Good people skills for facility staff
	Quite a bit traveling
	Have their own transportation
	Path people have hand scanners
	They get used to change

Assumed Property	Participant: Case finder/Screener
4)Document participant properties	
a)Brief description	In the field same as abstractor
b)Credentials	
i)Certifications	SAME AS ABOVE
c)Role Features	
i)Explicit Authorities	•
d)Responsibilities	 Accountable for missing CTCs
e)Population	
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	No College Degree Required
(2)Medical/Cancer Registry Literac.	Medical Terminology
(3)Technology Literacy	Basic Computer Skills
ii)Language(s) (assumed) read/write	English
iii)Tenure in role (e.g. Mean time in job)	Same as abstractors
iv)Special accommodation needs (disabils.)	
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	
(5)Dexterity impairment	
f)Other Properties	
i)Work Period (time & days)	Pretty flexible
g)Implementation considerations	
i)Receptivity	Y 4 1 1
(1)Loss – Perceived	In the dark
(2)Loss – Real	
(3)Gain – Perceived	Free time for other tasks
(4)Gain – Real	•
Other Comments:	•

Assumed Property	Participant: Special Studies Manager				
5)Document participant properties	•				
a)Brief description	In charge of all aspects of SS				
	Working with the SS staff				
b)Credentials					
i)Certifications	Some experience working w/ research studies				
	Some registry experience would be nice				
c)Role Features					
i)Explicit Authorities	•				

d)Responsibilities	 Accountable for getting researchers the correct info. Responsible for signed consents for patients, physician, etc. Give the finding to the PI or Registry Manager Coordinate who is going out and getting the info and in a timely manner w/ no gaps looking at by year or month Contacting patients Getting data to the special studies
e)Population	
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	No college degree required
(2)Medical/Cancer Registry Literac.	Cancer Registry Terminology
(3)Technology Literacy	Need good computer skills
	DB Skills
ii)Language(s) (assumed) read/write	English
iii)Tenure in role (e.g. Mean time in job)	Very Low (people under is very low)
iv)Special accommodation needs (disabils.)	
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	
(5)Dexterity impairment	
f)Other Properties	
i)Work Period (time & days)	Regular hours plus Weekends and EveningsTraveling is required
g)Implementation considerations	
i)Receptivity	
(1)Loss – Perceived	•
(2)Loss – Real	•
(3)Gain – Perceived	REALLY Happy!
	Consolidate SS Databases
(4)Gain – Real	•
Other Comments:	•

Assumed Property	Participant: Supervisors
6)Document participant properties	
a)Brief description	
b)Credentials	
i)Certifications	• Exceptional medical terminology understanding (more important some i.e. abstracting)

	Need trust of manager and good track record
c)Role Features	
i)Explicit Authorities	Make sure staff is adequately trained
	Overall staff issues (invlolved, but no solely
	responsible in hiring, firing, etc.)
d)Responsibilities	Involved w/ SEER changes (eg. Coding changes,
, 1	manuals) training and implementation
e)Population	·
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	
(2)Medical/Cancer Registry Literac.	•
(3)Technology Literacy	
ii)Language(s) (assumed) read/write	
iii)Tenure in role (e.g. Mean time in job)	Very low
iv)Special accommodation needs (disabils.)	
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	
(5)Dexterity impairment	
f)Other Properties	
i)Work Period (time & days)	Be in the office same time as staff
g)Implementation considerations	
i)Receptivity	
(1)Loss – Perceived	•
(2)Loss – Real	•
(3)Gain – Perceived	Make job easier especially w/ better tracking
	•
(4)Gain – Real	•
Other Comments:	Abstracting Supv. Need better people skills
	Traveling is involved
	Adaptable and have some vision by coming up w/
	ideas to make job/procedures better
	Follow-up supv. has to have specific skills in dealing
	w/ patients and physicians
	Irate physicians may deal w/ registry managers

Assumed Property	Participant: Death Clearance
7)Document participant properties	
a)Brief description	Done by supervisor,
	CTC identifications supv. do path only

	Follow-up do DCO cases
b)Credentials	
i)Certifications	
c)Role Features	
i)Explicit Authorities	•
d)Responsibilities	
e)Population	
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	
(2)Medical/Cancer Registry Literac.	•
(3)Technology Literacy	
ii)Language(s) (assumed) read/write	
iii)Tenure in role (e.g. Mean time in job)	
iv)Special accommodation needs (disabils.)	
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	
(5)Dexterity impairment	
f)Other Properties	
i)Work Period (time & days)	
g)Implementation considerations	
i)Receptivity	
(1)Loss – Perceived	•
(2)Loss – Real	•
(3)Gain – Perceived	•
(4)Gain – Real	•
Other Comments:	Path only clearance need good physician interaction skills

Assumed Property	Participant: Programmer/Systems Analyst
8)Document participant properties	
a)Brief description	New SEER, aCos changes implementation
	 Hardware Support (help desk stuff)
	 Special Studies, tracking systems, transfer of data
b)Credentials	
i)Certifications	UNM policy requires a degree for some roles
c)Role Features	
i)Explicit Authorities	Grows w/ time as they prove themselves
	Responsible and independent
d)Responsibilities	•

e)Population	
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	
(2)Medical/Cancer Registry Literac.	•
(3)Technology Literacy	Practical Experience
23	Strong PC background (lots of help desk support)
	Good programming background
ii)Language(s) (assumed) read/write	Occupiogramming cacaground
iii)Tenure in role (e.g. Mean time in job)	Low (NM)
myrenare in role (e.g. Wean time in job)	Medium (UT)
iv)Special accommodation needs (disabils.)	Modern (C1)
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	Wheelchair access
(5)Dexterity impairment	Wilderenam decess
f)Other Properties	
i)Work Period (time & days)	Regular hours for user support
) · · · · · · · · · · · · · · · · · · ·	Work late during crisis, needs to be available
	Early morning, weekends for shutdown level
	maintenance
	Otherwise flexible hours for developers
g)Implementation considerations	otherwise nexion hours for developers
i)Receptivity	
(1)Loss – Perceived	Giving up a little bit of control (across all registries)
(1)2000 1 01001100	 Step forward, worried being worse than what they
	have
(2)Loss – Real	nute
(3)Gain – Perceived	Lessen their burden
(4)Gain – Real	
Other Comments:	• Impossible for them to find and hire Orgale DDAs
Outer Comments.	Impossible for them to find and hire Oracle DBAs, usually need to hire and train
	TITOL TELEVISION OF THE PERSON
	more system admin, PC hardware experience
	NM: Strong interpersonal skills, write understandable instructions
	Need to be adaptable, willing to learn Multitacking of projects, can deal w/interpretions
	Multitasking of projects, can deal w/ interruptions

Assumed Property	Participant: Registry Manager
9)Document participant properties	

a)Brief description	
b)Credentials	
i)Certifications	 Medical record background CTR Very good knowledge of anatomy Accounting (oversee spending) Oversee training Hiring, firing Good people skills
c)Role Features	
i)Explicit Authorities	Anything w/ some input from PI
d)Responsibilities	Accountable for everything
e)Population	
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	
(2)Medical/Cancer Registry Literac.	•
(3)Technology Literacy	
ii)Language(s) (assumed) read/write	
iii)Tenure in role (e.g. Mean time in job)	Very Low (retirement concerns)
iv)Special accommodation needs (disabils.)	
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	
(5)Dexterity impairment	
f)Other Properties	
i)Work Period (time & days)	Must be able to travel
	Very flexible hours
	Work evenings, weekends, anything
	Give up life in July
g)Implementation considerations	
i)Receptivity	
(1)Loss – Perceived	Loss of consistency between registry and facility software and training needs
(0)1	Hospitals dependency of the registry's software
(2)Loss – Real	•
(3)Gain – Perceived	Very helpful
	Better than current system and more
(0.2.1	Major Concern is that hospital are on same system
(4)Gain – Real	•
Other Comments:	A lot of vision of where the registry goes

Aggressive makes sure things get done
Flexible mindset
 Determination
 May need to distribute this system (some variant) to
Utah and New Jersey facilities for free

Assumed Property	Participant: QC Person
10)Document participant properties	
a)Brief description	SEER has given funding for one person
b)Credentials	
i)Certifications	Same as coder, consolidator, editor
	Registry experience is a plus
	Proven track record
	Knowledge of SEER rules/requirements
c)Role Features	
i)Explicit Authorities	•
d)Responsibilities	Have to travel
	Doing QC at different registries
	Responsible to find problems
	Involved w/ edits
e)Population	
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	
(2)Medical/Cancer Registry Literac.	•
(3)Technology Literacy	
ii)Language(s) (assumed) read/write	
iii)Tenure in role (e.g. Mean time in job)	
iv)Special accommodation needs (disabils.)	
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	
(5)Dexterity impairment	
f)Other Properties	
i)Work Period (time & days)	Flexible
	Go out for weeks at a time on travel
	May have to work around a facility's hours
g)Implementation considerations	•
i)Receptivity	
(1)Loss – Perceived	•
(2)Loss – Real	•

(3)Gain – Perceived	•
(4)Gain – Real	•
Other Comments:	Need good people skills
	Have to travel

Assumed Property	Participant: Trainers
11)Document participant properties	
a)Brief description	Training of registry staff
	Supervisor train area people
	Overall registry training
	Abstractor training
	Facility trainers
	Training for new registrars
	Overseen by registry managers, could be coders, case
	finders, and IT actually doing the training
b)Credentials	
i)Certifications	•
c)Role Features	
i)Explicit Authorities	•
d)Responsibilities	•
e)Population	
i)Assumed Literacy	
(1)General literacy:	
(a)General level of Educat.	
(2)Medical/Cancer Registry Literac.	•
(3)Technology Literacy	Basic Computer needed and becoming more important
ii)Language(s) (assumed) read/write	
iii)Tenure in role (e.g. Mean time in job)	
iv)Special accommodation needs (disabils.)	
(1)Vision	
(a)Color blindness	
(b)Impaired vision	
(2)Hearing	
(3)Speech impairment	
(4)Mobility impairment	
(5)Dexterity impairment	
f)Other Properties	
i)Work Period (time & days)	Travel required
g)Implementation considerations	•
i)Receptivity	
(1)Loss – Perceived	•
(2)Loss – Real	•

(3)Gain – Perceived	•
(4)Gain – Real	•
Other Comments:	People skills neededVery well educated in what their trainingAbility to give clear explanations