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ABSTRACT

The reanalysis of data to answer the original research question with better statistical techniques or to answer new questions with old data is not uncommon in quantitative studies. Meta analysis and research syntheses have increased with the increase in research using similar statistical analyses, refinements of analytical techniques, and the advent of computerized literature searches. No analogous definition of secondary data analysis from a qualitative point of view has been proposed, but the primary component would include analysis by a researcher removed from the process to continue the original analysis to address different questions or to use different methods to address the original research question. Discussion is just beginning about the possibilities of secondary analysis of qualitative data. A typology of secondary analysis of qualitative data is proposed that includes secondary analysis, meta-analysis, and collaboration for qualitative inquiry. A classification of models for research synthesis for qualitative study can be conceived of as a series of cells that embody the time of the analysis, reanalysis, and the data set or sets. Because qualitative analysis is very time intensive, considerable savings might be realized with reanalysis of existing data sets. Issues involved in the accessibility of research, its validation, and the education of researchers are discussed, as are concerns about the limitations of reanalysis of qualitative studies. (Contains 2 tables, 4 figures, 4 charts, and 62 references.) (SLD)

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### Secondary Analysis of Qualitative Data

A Roundtable Discussion  
1997 Annual AERA Conference  
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## Secondary Analysis of Qualitative Data

### Quantitative and Qualitative Perspectives

#### Quantitative Secondary Data Analysis

The reanalysis of data for the purpose of answering the original research question with better statistical techniques or answering new questions with old data (Glass 1976).

#### Meta-Analysis

“The statistical analysis of a large collection of analysis results from individual studies for the purpose of integrating the findings” (p.3).

In essence, meta-analysis is a term describing a variety of statistical procedures used to aggregate and quantitatively summarize the *results* of multiple studies on a common topic. The technique summarizes a set of empirical findings (usually in terms of a measured “effect size”) and tests their distribution for sampling error as an explanation for the inconsistency. Some methods (i.e., Hunter and Schmidt 1990) further adjust for correction of results due to statistical or methodological artifacts inherent to the studies.

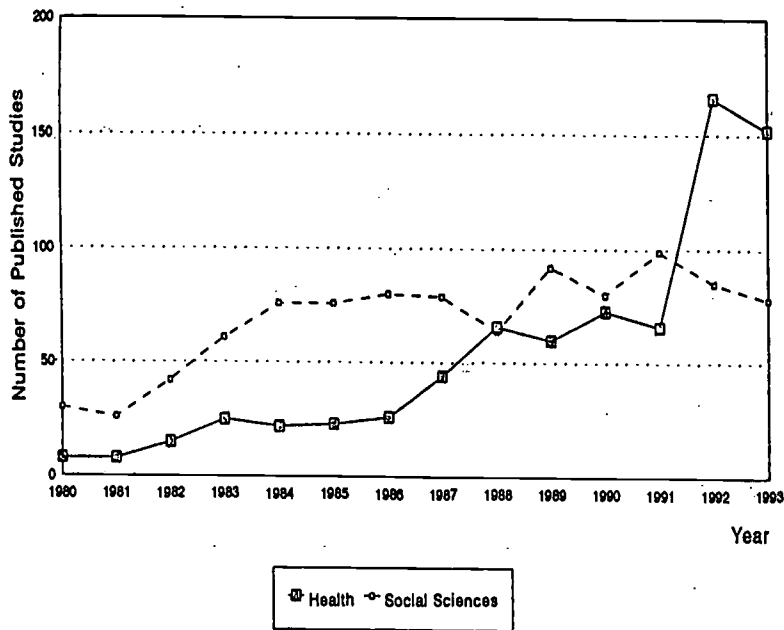
#### Research Synthesis

Research synthesis (integrated research review) is a process of combining and comparing empirical research for the purpose of creating generalizations. This process includes: the *a priori* formulation of hypotheses and problems; the search and evaluation of the primary studies involved, and; the analysis and interpretation of the integrative studies.

Research syntheses almost always (a) pay attention to relevant theories, critically analyze the research they cover, (b) try to resolve conflicts in the literature, and (c) attempt to identify central issues for future research. The statistical analysis in a research synthesis is what Glass termed meta-analysis (Cooper and Hedges 1994).

Meta-analyses have proliferated since Glass’s original 1976 article introducing the concept. Figure 1 below illustrates the growth of meta-analyses in the literature compared between the social (education, psychology, and sociology) and health sciences.

**Figure 1: Health and Social Sciences Meta-Analyses Published from 1980-1993**



\* From *Evaluation and the Health Professions*, 18(3), R.B. Bausell et al., 1995, p.246.

Three events have been credited for this proliferation of quantitative literature synthesis in recent years (Cooper 1989):

1. The growth of research utilizing similar statistical analyses
2. The advent of the computerized literature search
3. The refinement of statistical procedures for aggregating similar studies (i.e., meta-analysis).

The limitations and related misunderstandings surrounding meta-analyses are just beginning to be realized and discussed as summarized in Table 1 below.

**Table 1: Issues Regarding Meta-Analysis**

Source	Issues
Selection of Studies (Jeng et al. 1995; Khan, Daya, & Jadad 1996)	<ul style="list-style-type: none"> <li>• Publication Bias</li> <li>• Data Source (i.e. from the literature vs. field)</li> <li>• Quality of Studies</li> <li>• Missing Data</li> </ul>
Methodology (Hasselblad et al. 1995)	<ul style="list-style-type: none"> <li>• Which method of aggregation should be used?</li> <li>• Should quality measures of individual studies be used?</li> <li>• How are different forms of measures combined?</li> <li>• Should a Fixed-Model or Random-Model be used?</li> </ul>
Common Misunderstandings (Bangert-Drowns 1995)	<ul style="list-style-type: none"> <li>• There is one best meta-analytic method.</li> <li>• Meta-analysis is better than a narrative review.</li> <li>• Meta-analysis culminates the research in a given domain.</li> <li>• The most important product of a meta-analysis is the average effect size.</li> </ul>

In essence, a meta-analysis or research synthesis is a study of studies and should be thought of more as a perspective than a statistical technique. It is not superior to primary research or narrative literature review, but offers a broader interpretation of disparate studies by facilitating the identification of specific patterns.

### Synthesis

An activity or product of an activity where some set of parts is combined or integrated into a whole. It involves some degree of conceptual innovation, or employment of concepts not found in the characterization of the parts as a means of creating the whole (Strike and Posner 1983).

Thus, all syntheses are inductive, whether quantitative or qualitative in nature. However at this time the most developed ones are inductive and positivistic (i.e., meta-analysis and quantitative research synthesis). Syntheses which are inductive and interpretive are just beginning to receive attention.

## Qualitative Secondary Data Analysis

While no analogous definition of secondary data analysis has been offered from the qualitative perspective, the primary component would include the following:

Analysis of qualitative data by one removed from the process with the purpose of either continuing the original research analysis, addressing different questions not addressed in the original research, or using different methods to address the original research questions.

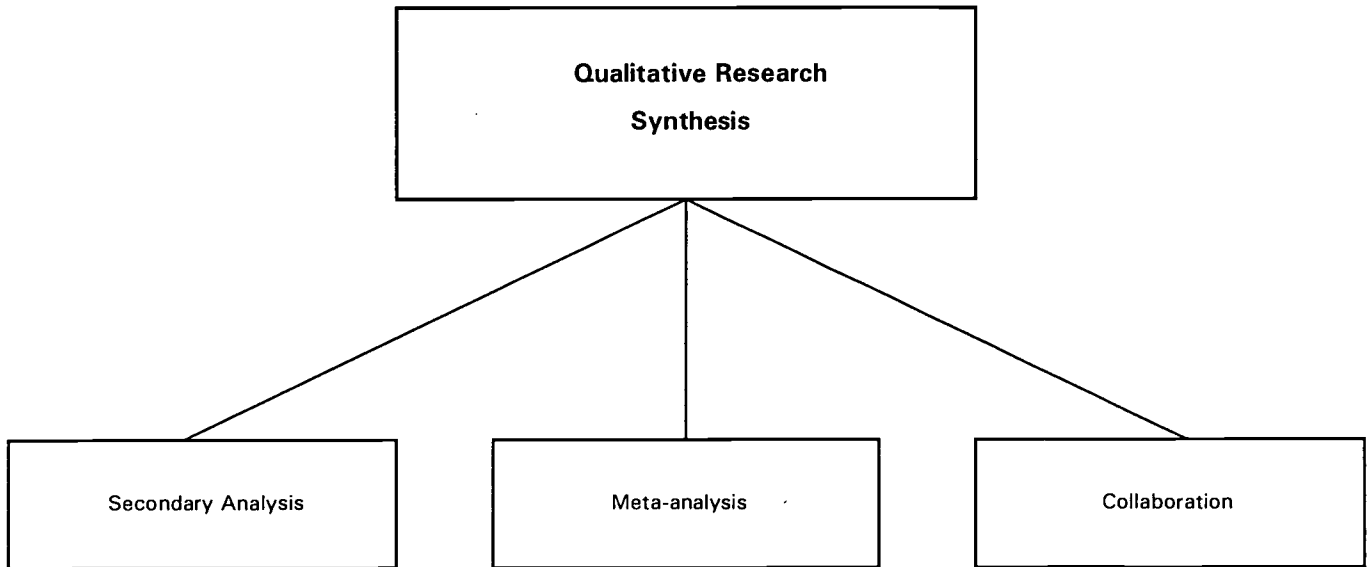
Discussion is just emerging on the possibilities of secondary analysis with qualitative data. At this time, the literature includes three primary discussions on the concept (Noblit and Hare 1988; Thorne 1994; Estabrook, Field, and Morse 1994). Table 2 summarizes the implied typology of the current literature.

**Table 2:** Qualitative Secondary Data Analysis Typology

Secondary Analysis Strategies	Description
Analytic Expansion (Thorne 1994)	The primary researcher uses the original database to progress to the next level of analysis or explore new and evolving questions as theory emerges.
Retrospective Interpretation (Thorne 1994)	New or unanswered research questions are explored from the data which were not fully examined or explained in the original research study.
Armchair Induction (Thorne 1994)	Textual or content analysis by those experienced in theory development and talents lie therein, rather than the phenomenon under investigation.
Amplified Sampling (Thorne 1994)	The development of broader theories through comparison of several distinct and theoretically representative databases.
Cross-Validation (Thorne 1994)	Other databases are used by the researcher to confirm or discount new findings and/or suggest patterns related to his/her own sample and research.
Meta-Ethnography (Noblit & Hare 1988)	The comparative textual analysis of published field studies through the translation of qualitative studies into one another, and as such, avoids the <i>aggregation</i> of studies attempting to create generalizations and general conclusions.
Aggregated Analysis (Estabrook et al. 1994)	Aggregation, analysis, and synthesis of the <i>findings</i> (i.e., not the original data) of multiple studies for the primary purpose of developing mid-range theory.

Conceptually, I would propose a typology more intuitive to that of a research synthesis which would include three basic approaches as illustrated in Figure 2:

**Figure 2: Approaches to Qualitative Research Synthesis**



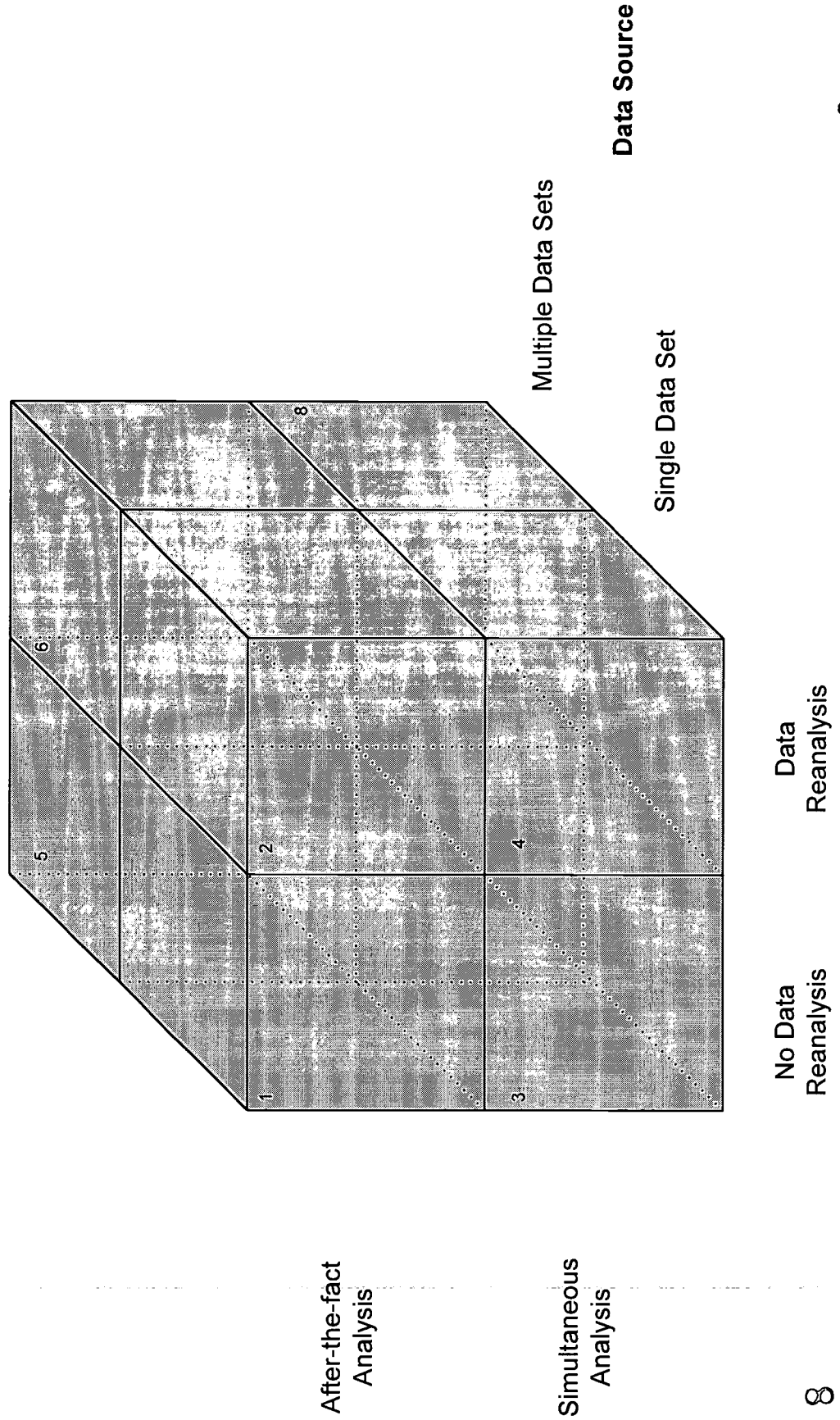
**Secondary Analysis:** Analysis of an existing qualitative database, or databases, for the purpose of reviewing the literature, answering the original research question(s) using different methods, or answering new questions with “old” data.

**Meta-Analysis:** An analysis of the results or original data from multiple studies. The inductive integration of interpretive studies (published or unpublished) so they may be reduced, compared and translated as a way of synthesizing knowledge.

**Collaboration:** The joint intellectual effort involving the on-going interaction of qualitative researchers, and any stakeholders outside the context of the study (e.g., policymakers, evaluators, practitioners), contributing to the interpretive process of qualitative inquiry.



# Research Syntheses: Classification of Models





## Review of Models

### Cell 1: After-the-fact analysis/no reanalysis/single data set

A critical review of a study by someone who does not have access to the primary data and consequently critiques/discusses the primary research based upon:

- methodological considerations
- examining the data as presented (e.g., text, narratives, etc.)
- interpreting the data which is presented

Ex.: • Editorial/review in a journal in response to a published article or book.

- Hickson, G.B., Clayton, E.W., Entman, S.S., Miller, C.S., Githens, P.B., Whetten-Goldstein, K., & Sloan, F. (1994). Obstetricians' prior malpractice experience and patients' satisfaction with care. *Obstetrical & Gynecological Survey*, 50, 351-353.

### Cell 2: After-the-fact analysis/data reanalysis/single data set

I perceive this cell representing where most of the qualitative secondary analyses have and will occur, however from two different perspectives or goals:

- Using the primary data to either continue investigation of the original research question or to address new research questions. This may either involve the re-analysis of the primary data of a single study or of a large archived qualitative database.

Ex.: • Handout (PIPP)

- Murdock, G. *Outline of Cultural Materials*. Human Relations Area Files, Inc. New Haven, CT.
- Murdock, G. *Outline of World Cultures*. Human Relations Area Files, Inc. New Haven, CT.

- Mead, J.V. (1993). A guide to the Teacher Education and Learning To Teach Database. (Technical Series 93-2). East Lansing: Michigan State University, National Center for Research on Teacher Learning.
- McGrath, J.W. (1991). Biological impact of social disruption resulting from epidemic disease. *American Journal of Physical Anthropology*, 84, 407-419.
- The *audit* of an entire study may be one goal of a secondary analysis for the purpose of establishing credibility (e.g., validity). An audit may be either independent of the primary investigator(s) or an actual component of the primary research design. Audits usually involve a series of steps similar to those proposed by Schwandt and Halpern (1988) for evaluation studies.

Ex.: Handout (LB506 and AHCPR)

### **Cell 3: Simultaneous analysis/no data reanalysis/single data set**

This cell represents two potential applications. The first is what McCracken (1988) refers to as “commissioned” qualitative research in which an administrator conducts the investigation from a distance through directing the work of others. As defined, "This may be a project director of a large omnibus project or the party charged with commissioning single, purpose-built pieces of ad hoc research" (p.59).

Ex: • Handout (AHCPR).

The second application is more along the line of consultants and research advisory boards who are contracted to assist with a research study. The optimal use of such individuals is that as simultaneous "reviewers" throughout the time frame of the study - posing alternative explanations of interpretations, critiquing data collected and analyzed, and providing insight from the interpretations shared with them. A more commonly used approach is to hire consultants for special sessions or retreats with the primary investigators for similar reasons.

Ex.: • Handout (AHCPR.)

#### **Cell 4: Simultaneous analysis/data reanalysis/single data set**

Within this cell is where most qualitative collaborative research occurs. This most likely involves a team approach where division of labor is accomplished at different levels. For example, you may have specific investigators responsible for the fieldwork, while others for analysis. It may also be feasible for the analysts to work separately, thus allowing the pursuit of different questions/issues they view as important.

Ex.: • Handout (AHCPR)

- Liggett, A.M., Glesne, C.E., Johnston, A.P., Hasazi, S.B., & Schattman, R.A. (1994). Teaming in qualitative research: Lessons learned. *Qualitative Studies in Education*, 7(1), 77-89.
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#### **Cell 5: After-the-fact analysis/no data reanalysis/multiple data sets**

This cell is most analogous to the quantitative meta-analysis and literature synthesis through its focus upon synthesizing the *results* of multiple studies/databases. As with its quantitative counterpart, there are specific issues needing to be addressed or acknowledged as identified earlier in Table 1, and summarized as follows:

- Sampling: how and which studies are chosen (e.g., published vs. unpublished studies)
- Quality control: deciding which studies to include and which to exclude based on their quality
- Relevance: after deciding on quality, then one must decide which high quality studies are of greatest relevance.

- Results: how does one deal with inconsistent findings and missing data.

The problems are accentuated in this cell, as opposed to the next cell (Cell 6), because the secondary analyst is not privy to the original data of the studies.

Ex.: • Corbin, J. & Strauss, A.L. (1987). Accompaniments of chronic illness: Changes in body, self, biography, and biographical time. *Research in the Sociology of Health Care*, 6, 249-281.

#### **Cell 6: After-the-fact analysis/data reanalysis/multiple data sets**

This cell is more along the line of Noblit and Hare's *Meta-ethnography* (1988) in that the secondary analyst is interested in synthesizing multiple studies through the analysis of the *original* data. Here the key issue becomes how to combine the data of studies and is most useful for those wishing to review the qualitative literature on some area of interest.

#### **Cell 7: Simultaneous analysis/no data reanalysis/multiple data sets**

This cell is rarely realized in contemporary qualitative researcher. It basically consists of a secondary analyst or "meta-analyst" who is commissioned to oversee two or more related studies concurrently under investigation. This could possibly occur in the larger national funding agencies and would have some definite advantages which will be discussed in the final cell.

#### **Cell 8: Simultaneous analysis/data reanalysis/multiple data sets**

This model is more along the lines of programmatic research and consists of running two or more studies back-to-back, or consecutively, beginning one study immediately after the other study's data collection and analysis are completed, but no final report has been published. The advantage to this model is that one can learn from the mistakes and insights of the preceding study to help inform the subsequent one. They also prove helpful for purposes of generalizations and theory development through replication and modification. However, a limitation is that such studies may be prohibitively expensive.

Ex.: • Handout (DOPC, LB506 study, and AHCPR)

## **Rationale**

### **1. Review of Literature**

Researchers may wish to gain new knowledge by comparing across studies within a specific subject area of interest, or even reanalyze a specific study of interest. The knowledge and insight gained by many qualitative studies is not static. The knowledge gleaned in the original research may be progressed by the new insight or "lens" of other researchers. Likewise, such progress of knowledge may be realized through the passing of time. New insights, theories, and studies may evolve which are very pertinent and give an added perspective useful to the original research. Secondary analysis would provide the opportunity to re-enter the original research and develop a new layer of analysis.

### **2. Economy**

Qualitative research is very time intensive, beginning well before the data collection (e.g., issues of gaining access) and continuing after (e.g., analysis and verification). It is not uncommon for a qualitative database to represent years of work by the primary investigator and substantial funding through a variety of sources (e.g., universities, grant agencies). Considerable time, money, and personnel could be saved through secondary analysis of an already existent data base or a research team approach.

This may becoming a critical and viable issue for qualitative researchers. The attenuation of federal funding for research appears inevitable. The implications, according to some, is that the future for many researchers lies in private industry funding (Morone and Belkin, 1995). Such funding frequently comes with inherent agendas which most likely include the economy of resources and a historical predominance of quantitative research. While qualitative research is recognized as useful, it is often viewed as prohibitive in terms of time, personnel and money. Future funding for research, regardless of methodology, will most likely have a strong component based on economic restraint related to what useful outcomes are generated by such research.

### 3. Accessibility

Gaining access through gatekeepers can be difficult, depending on the focus of the study. Analysis of an already existent database which has addressed such an issue may be advantageous in such cases. Likewise, collaborating with individuals with access to an otherwise restrictive field of interest may be the only way of obtaining the data necessary for a specific study.

There are cases which involve the study of rare events or infrequent cyclic occurrences in a life cycle of an individual or sample of interest. Secondary analysis may provide a unique opportunity to access otherwise unique and scarce data.

### 4. Verification (Validation) Through Triangulation

Triangulation is not a tool or a strategy of validation, but an alternative to validation (Fielding and Fielding 1986, Denzin 1989a, 1989b, Flick 1992). Denzin (1978) and Janesick (1994) identified five types of triangulation: data, investigator, theory, methods, and disciplinary. The combination of multiple methods, data types, theory, perspectives and observers in a single study is best understood, then, as a strategy that adds rigor, breadth, and depth to any investigation.

Unfortunately, many qualitative researchers primarily think of triangulation in terms of data triangulation and more recently, secondarily as methodological triangulation. With regards to investigator and interdisciplinary triangulation, such approaches are usually incorporated into an audit as a "post hoc" form of verification. I believe that such forms of triangulation when *incorporated into* the methods of a research synthesis aid in verification by narrowing the distance between the field and the analyst(s).

### 5. Education/Training

The reanalysis of data from original investigations can be fundamental in the training of researchers, evaluators, and practitioners. In fact, it may be more ubiquitous to training than to research per se. If such use of secondary analyses are successful in educating others regarding the solutions, or possible solutions, to the problems which arise in collecting, analyzing, and interpreting data, a subsequent outcome may be the improvement in the quality of primary research.

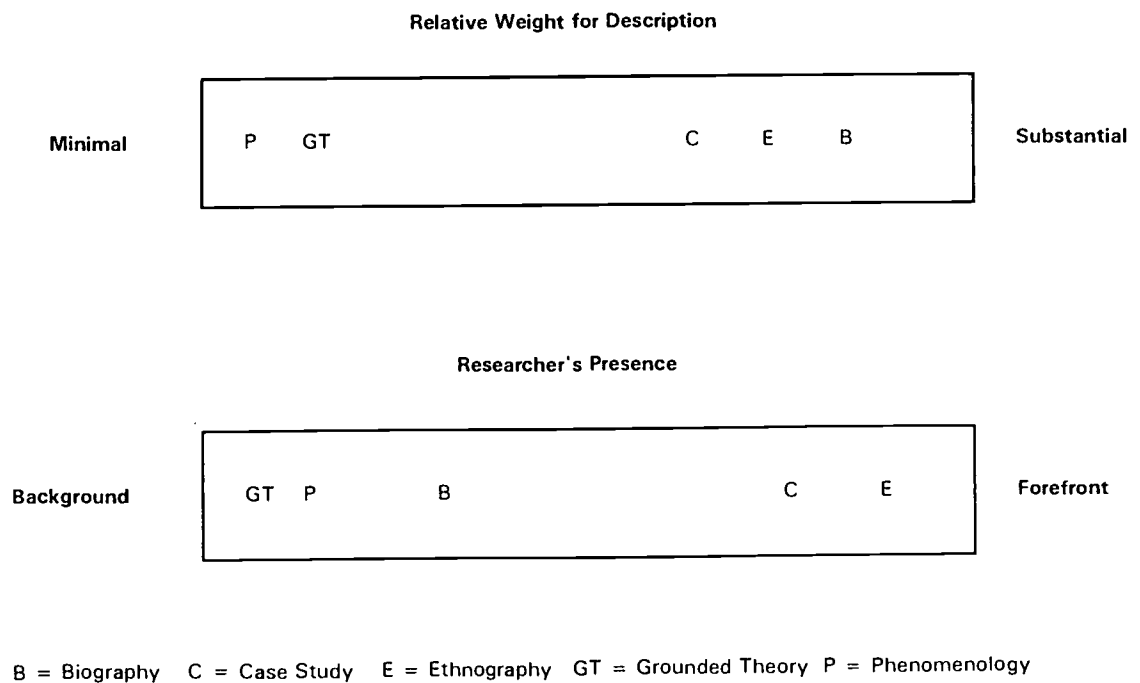
## Limitations/Issues

### 1. Field Absence

With qualitative studies, the researcher is the research instrument (Guba and Lincoln 1981; Patton 1990; Bogdan and Biklen 1992; Marshall and Rossman 1995). One brings their own unique experiences, perspective or "lens", bias, and interpretive style to the collection of data and analysis. The absence of the secondary data analyst from the data collection raises serious questions regarding the misinterpretation of the data. There may be no substitute for the intimacy and context one develops with their data when it comes time to "make sense" of it at the analysis stage.

I would suggest that this problem may be the result of the specific qualitative strategy used. As discussed by Creswell (1995), the importance of the research's presence in the study and the relative weight given to description varies with different strategies (Figure 4).

**Figure 4: A Comparison of Five Strategies**



\*From *Qualitative Strategies of Inquiry and Design Procedures*, J.W. Creswell, 1995.



For example, substantial weight on thick description is seen with a case study and ethnography while less is emphasized in phenomenology and grounded theory. The presence of the researcher from data collection to the actual write-up is seen as being in the forefront with an ethnography whereas, the researcher is more in the background with a grounded theory and phenomenological study. Such issues need further investigation, but at this time, it appears intuitive that specific qualitative strategies may be more accessible to secondary analysis than others.

## 2. Lazy Research

Thorne (1994) describes "lazy research" as data sets which are used due to their convenience, and as a result, become overly available and overused. This often will result in exaggeration and misinterpretation of any of the peculiarities of the overused sample database.

I would also extend this to those researchers, for whatever reason, merely want to avoid the time and inconvenience of data collection. This is also not uncommon in the quantitative arena - there are those who do not want to go through the inconvenience of random assignment, and therefore will perform excessive covariance procedures (e.g., ANCOVA, MANCOVA) in attempts to minimize any systematic bias in the treatment groups. Frequently, this may cause a subsequent decrease in the statistical power and findings. Researchers need to defend their means of analysis regardless of methodology.

## 3. Ethical Issues

As previously discussed, the rationale for secondary analysis relate to economy and access issues. The researcher may be able to avoid such issues as gaining access, identifying willing informants, and a variety of IRB-based requirements. However, if the secondary analysis is being conducted with a new and different research question than the original research, one should not assume that the original informants' complied consent is universal or omnipresent. This raises specific ethical considerations not only for the secondary analyst, but also the original researcher who is making his/her data set available for such purposes.

## Considerations

I would propose the following six questions be considered by any qualitative researcher contemplating a secondary analysis.

### 1. What is the specific qualitative strategy employed by the study?

Due to the pivotal and variable role of the researcher in the different qualitative strategies, certain ones may be conceived as more viable than others. A continuation of this question is to also evaluate the qualitative design for any flaws which would interfere with the data analysis. Questions needing to be asked are: Does the strategy match the research question?; Are the appropriate types of data present for the specific strategy?; and, Are appropriate techniques used by the data collector?

### 2. Who was responsible for the original data collection and will they be available to you throughout the analysis?

At the risk of being redundant, the researcher is the research instrument. The training and expertise of the researcher conducting the data collection is critical. Also, since numerous questions or problems may occur during the secondary analysis, one may need to ask the data collector specific questions regarding the data which only he/she could answer.

### 3. What is the quality of the data?

The data needs to be carefully scrutinized for its representiveness of the particular qualitative strategy and its overall quality for credibility reasons.

### 4. What is the format in which the data is stored?

Data accurately transcribed and imported into a qualitative software package is more accessible, organized, and easier to work with than the researcher's original data and notes, or their remnants after the original analysis. Through the increased use of computer software for data analysis, secondary data analysis may already be currently used more than realized.

5. Are there supplementary data types which may be helpful?

As identified by Denzin (1978), there are four basic types of triangulation; data, investigator, theory, and methodological triangulation. The importance of data triangulation cannot be over emphasized with regards to secondary data analysis. The use of all types of data collected, regardless of the intended or original use in the study, should be evaluated for their usefulness in narrowing the distance between the data collection and the analyst.

6. How will the final product be written and used?

The question of how, or whether, the use of secondary data analysis will be discussed in the final project is difficult to answer. With the emphasis by editors for parsimony and the descriptive and interpretive demands of qualitative studies, authors must frequently be concerned about the length and content of their manuscript. Shortening the methodology section for the sake of keeping the narratives, descriptive data, and interpretive analyses, is probably the path of least resistance. It is much easier, and raises less methodological questions, to explain the methodology from the standpoint of a research "team" approach, rather than discussing the role of each. Until more inquiry and discussion on the use of secondary analysis is realized, its acknowledgment in the literature will most likely remain obscured.

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## Qualitative Secondary Data Analysis

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## Put Prevention Into Practice (PIIP)

--- Collaboration - Primary analysis

..... Secondary analysis

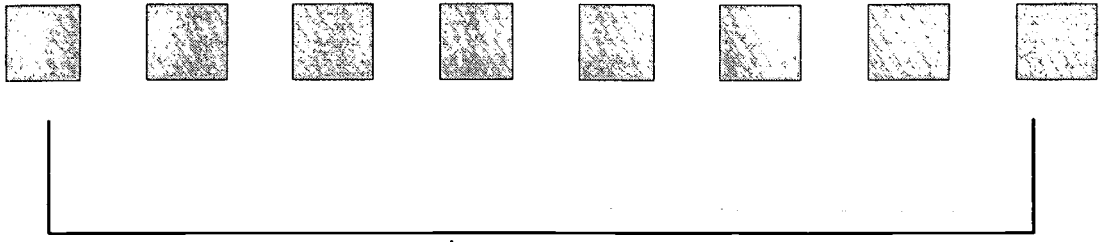
### Primary Research Question

What is the effectiveness of the PIIP program when applied to family physicians in private practice?

Qualitative Investigator

UNMC  
Dept. of Family Medicine

n = 8 practices



### Secondary Research Questions

1. What is the process involved in implementing a preventive care program in a family practice setting?
2. What is a "typical" day within a family medicine practice?
3. How do family physicians and other health care professionals view their patients?
4. What do professionals learn from each other?
5. What are the shared beliefs of those involved?
6. How do professionals interact with their patients beyond the basic history a physical examination?
7. What barriers to implementing a preventive care program exist?

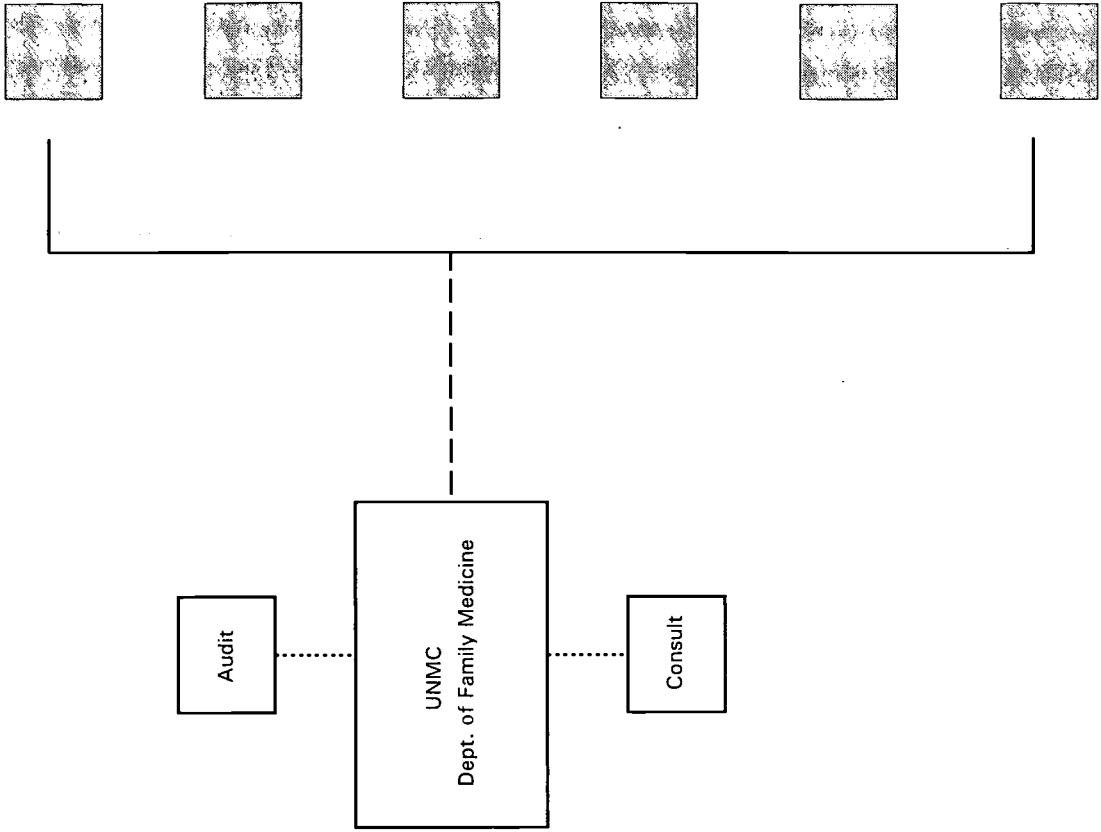
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# LB506: Successful Cancer Prevention Strategies in Primary Care

## Research Questions

1. How does the office environment (e.g., solo vs. group) affect preventive service delivery?
2. How are preventive strategies modified to fit with the practice environment?
3. How are recommended cancer preventive services delivered to eligible patients during medical encounters for patients with specific illness complaints?
4. What are the strategies for implementing cancer preventive services when other competing demands for time exist?
5. What are the trade-offs, if any, of implementing more preventive services?
6. How do office strategies helpful for counseling complement or compete with those helpful for screening?
7. What are the limits of current models of preventive care and how can these be enhanced to provide higher levels of preventive care?

n = 6 practices



Data Collection Strategies For Each Practice		
Observation of Office Practice	Key Informant & In-depth Interviews	Additional Data Collection
Unstructured	Physicians	Documents
Structured	Office Staff	Chart Audits
<ul style="list-style-type: none"> <li>dictated field notes</li> <li>mapping</li> <li>checklists</li> <li>matrices</li> </ul>		

Data Collection/Analysis for Each Site	
Week 1	Orient to practice and develop rapport with staff Observe patient care & complete post-observation checklists Perform key informant interviews Send fieldnotes back to UNMC for transcription
Week 2	Observe patient care & complete post-observation checklists Perform chart audits Conduct in-depth interviews
Week 3	Work in UNMC office; review/expand fieldnotes Transcribe in-depth interviews Review notes with study team and analyze data

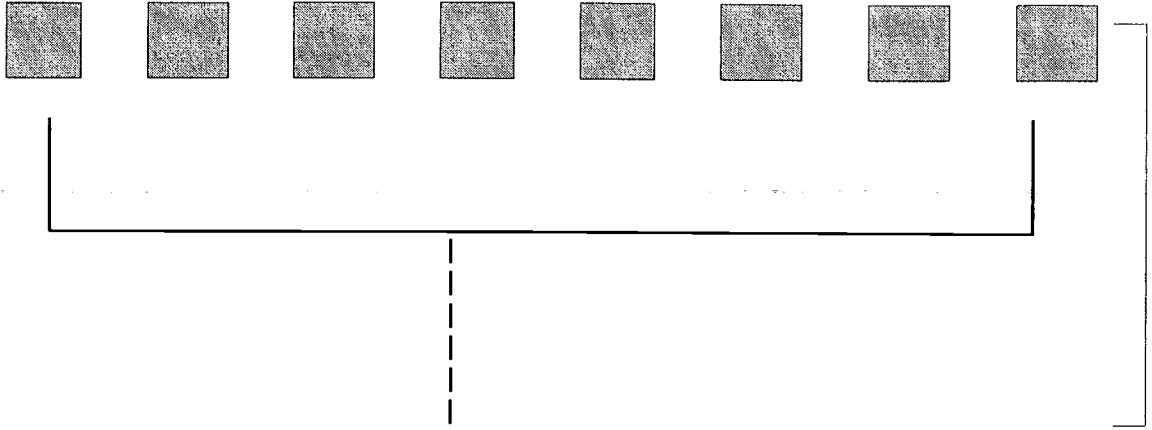
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AHCPR: Prevention and Competing Demands in Primary Care

Data Collection Strategies		
Observation of Office Practice	Documents from Office Practice	Indepth Interviews & Focus Groups
<ul style="list-style-type: none"> <li>•Unstructured dictated fieldnotes</li> <li>•Structured mapping checklists matrices</li> <li>•Participant working as a nurse</li> <li>•Key Informant Interviews</li> </ul>	<ul style="list-style-type: none"> <li>•Chart Reviews</li> <li>•Billing Data</li> <li>•Patient Materials</li> </ul>	<ul style="list-style-type: none"> <li>•Physicians</li> <li>•Office Staff</li> <li>•Patient Focus Groups</li> </ul>

Data Collection/Analysis Process						
	Case 1 Week 1	Case 1 Weeks 2-3	Case 1 Weeks 4-5	Case 1 Week 6	Case 1 Weeks 7-8	Cases 2-8
Research Nurses	<ul style="list-style-type: none"> <li>•orient to practice &amp; develop rapport with staff</li> <li>•observe patient care of each physician in practice</li> </ul>	<ul style="list-style-type: none"> <li>•key informant interviews</li> <li>•observe in practice</li> <li>•collect material on prevention</li> </ul>	<ul style="list-style-type: none"> <li>•participate as office nurse</li> </ul>	<ul style="list-style-type: none"> <li>•work in UNMC office and review fieldnotes and expand if necessary</li> <li>•arrange focus groups with patients</li> </ul>	<ul style="list-style-type: none"> <li>•observe &amp; interview focusing on follow-up concerns</li> <li>•conduct in-depth interviews</li> <li>•conduct focus group interviews</li> </ul>	<ul style="list-style-type: none"> <li>•repeat process as described for Case 1</li> </ul>
UNMC Study Team 2 teams: •research nurse •2 analysts	<ul style="list-style-type: none"> <li>•review week 1 notes and provide feedback</li> </ul>	<ul style="list-style-type: none"> <li>•review weeks 2-3 notes and provide feedback</li> </ul>	<ul style="list-style-type: none"> <li>•intensive review of notes 1-5 suggest follow-up questions for week 8</li> </ul>	<ul style="list-style-type: none"> <li>•write initial summaries for 2 case studies &amp; send to auditors</li> </ul>	<ul style="list-style-type: none"> <li>•writing of case study summaries continued</li> </ul>	<ul style="list-style-type: none"> <li>•receive and review case study summaries from previous block and "audit"</li> </ul>
Auditors (2)						

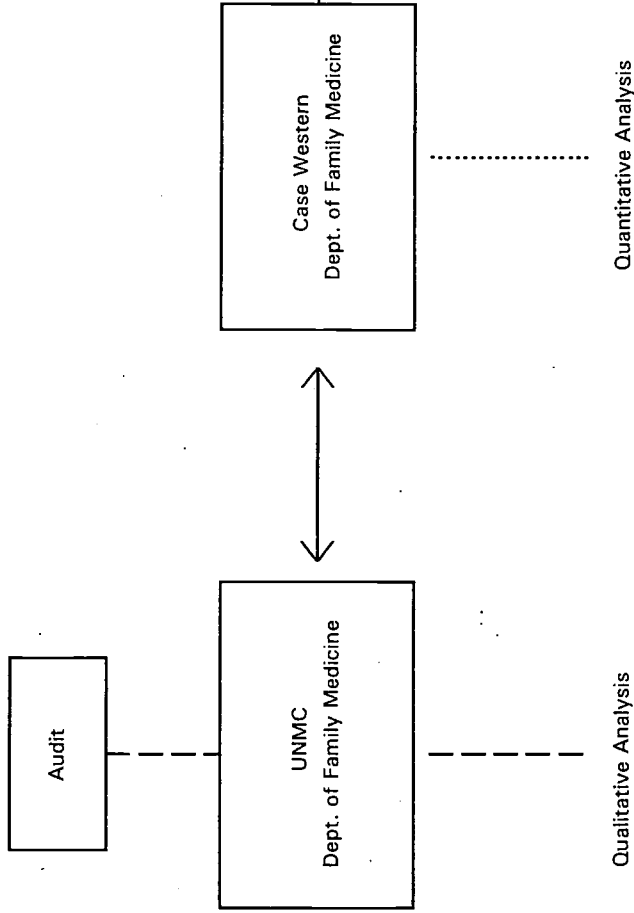
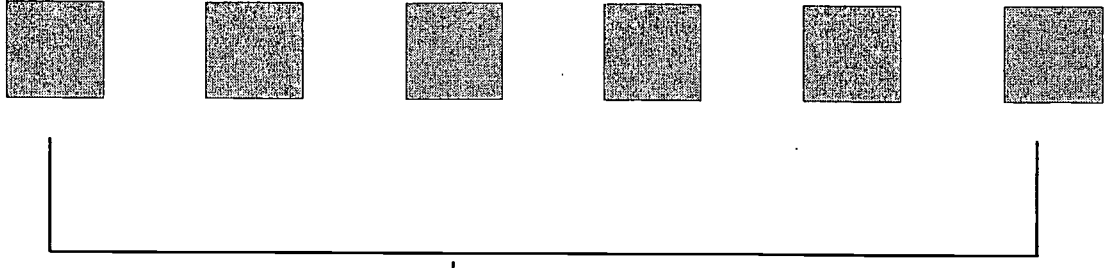
n = 8 practices



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# Direct Observation of Primary Care (DOPC)

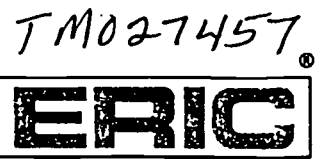
n = 84 practices  
138 physicians



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