Connect Care Research Wave 1 Update [May 11th, 2020]; Charting for your relocated studies outside of AHS settings; new encounter types; Virtual training offerings; Discontinuing Meds, etc.

May 11th, 2020

Connect Care Research Wave 1 Update (.pdf version attached to this email)

Happy May! I hope everyone is getting a chance to get outside and walk barefoot in the grass 😊. As ever, please send any questions you may have in relation to the information below or if there are questions that have not been addressed to cc.research@ahs.ca.

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   a. **Guidance on transferring your studies outside of AHS clinical and workflow implications**

   During the COVID-19 pandemic, the access to AHS clinical spaces are limited and many research studies have been put on hold. Only studies deemed essential may continue.

   To ensure continuance of interventional studies involving investigational medications and the care provided to the participants, some study teams may request to transfer the study investigational medication from AHS Pharmacy to another designated space (e.g. a University owned space). In these cases the study visits will take place outside of an AHS department.

**IMPORTANT:**

- These **temporary** out-of-system workflows are only applicable to the studies that are not on hold and will continue their activities outside of an AHS space. If your study is still ongoing and you are still working in your AHS department the same way you were prior to the pandemic, you must continue to perform all of your study related workflow in Connect Care.

- This is a **temporary** change and once the holds have been lifted and study teams are able to go access their AHS departments, the study teams will be required to resume their in-system workflows.

- These exceptional steps have been put in place to ensure patients can continue to receive their study medication when deemed medically required.

**If you are temporarily relocating your study to be managed out of a non-AHS space due to the COVID-19 response**, please review the recommended approaches to documenting and performing workflows as part of Connect Care.

- Since the study visits will take place outside of an AHS department, the study team will not be able to schedule the study visits in system;

- Study teams will not have access to Connect Care printers;

- Some of the research workflows will need to be completed on paper (outside of Connect Care). Please note the study teams will still be required to make note in Connect Care of the workflows done on paper. This documentation may be done through Documentation-Only, Orders-Only and Telephone encounters.

- See below the different workflows separated by area/functionality and the temporary changes.
  - **Scheduling**
    - Study teams won’t be able to schedule appointments in their CC departments and will need to use Orders-Only, Documentation-Only...
and Telephone encounters to continue to document the study related visits.

- **Medication ordering and Pharmacy Services**
  - If your study drug is currently set up as “Pharmacy Dispensed”, the study team will need to open and IT ticket to Pharmacy requesting the change to “Study Dispensed”.
  - Study teams will not be required to send the “dispensing sheet” since they will not be using the AHS Pharmacy services.
  - All meds will need to be ordered as Home Med as the administration of the medications will be done outside of an AHS care setting.
  - The administration of the medication will be documented in the research notes or progress notes, not in the MAR.
  - All orders will need to be placed in a Orders-Only encounter.

- **ECG**
  - If using AHS services to perform and/or read the ECGs, the study teams will need to connect with the ECG people to ensure they will still be performing the ECGs during the COVID-19 for research patients. If yes, the study teams will continue to order the ECGs as they do it today. If the AHS department decides to no longer perform ECGs for research patients during COVID-19, study teams will need to consult with sponsors and PIs to determine the contingency plan.
  - All orders will need to be placed in a Orders-Only encounter.
  - If not using AHS services, the ECG is not ordered in system (same as today)

- **Diagnostic Imaging**
  - Study teams should consult with the AHS DI performing the services to ensure they will continue to do so for research patients during COVID-19. If yes, continue with current ordering workflows. If no, study teams should discuss with PIs and Sponsors their options.
  - All orders will need to be placed in a Orders-Only encounter.

- **Lab**
  - Without being able to schedule appointments in your CC department and without access to printers, study teams will be unable to perform the specimen collection workflows and print patient labels.
  - Study teams are to use paper requisitions only. The paper requisition must include all the patient information required for patient identification (similar to the pre-Connect Care workflows).
  - Ensure to write on the paper requisition the following message: “No Connect Care access due to COVID 19”, this will let lab know the reason why you have not completed your order in Connect Care
b. Tips to using encounters to assist virtual or distance visits (telephone and virtual visit encounters)

While COVID-19 precautions are in effect, there are still a number of ways that research teams can use Connect Care to document the care provided while you are physically distanced from your patient. Work with your clinical departments to schedule visits as Telephone or Virtual (virtual visit or virtual visit follow-up), as appropriate. Where shared visits still apply, if a patient is also meeting with other clinicians, you can include your documentation on that scheduled visit, just as if they were in person. It is also ok to continue scheduling Research visits; just include in your note that the visit was done as a phone call, for example.

**Documentation only encounter**

This encounter type is recommended when:

- Updating a patient chart with information collected outside of a normal visit
- Writing Research Note to track patient progress on a study

**Telephone encounter**

This encounter type is recommended when:

- Documenting a phone call with a patient, and can include planned or unplanned calls.
- You can document call-specific items, such as who you contacted and the reason for the call.
- You can enter orders and send a chart, just like other encounter types.

* And remember to link your encounters to your research study*
c. AHS Scientific Advisory Group develops resources to help us answer questions about COVID

Do you have questions about all the conflicting clinical information being released related to COVID-19? You can visit the Scientific Advisory Group insite page to see the COVID-19 Resources for AHS staff and health professionals.
d. Links to COVID advisory resources for Wave 1 research end-users

How to apply for remote access to Connect Care for research staff? Find more info on the Research IT Request page.

Please continue to visit the Health System Access resource page for the most up-to-date information.

2. Research IT:

a. Security Update: Research Coordinators role updated to enable documenting study medication administration on the MAR

Issue: Research coordinators role does not currently give users access to document study medication administration on the MAR. This is resulting in incomplete documentation of med administration for research study participants.

Description: A security update is required to allow end-users with the research coordinator role access to document on the MAR.

Date of Fix: This security update was updated April 21, 2020. Confirmation of the update will be provided in the next CC Research Wave 1 update release.

Impact to Users: All research coordinators will be expected to document their own medication administration for their research studies on the MAR. Until this access is released it is recommended that research end-users continue to ask clinical staff associated with the research study to perform the documentation in the MAR and/or document the administration in a research note. It is not expected that research end-users will be able to retroactively go back to previously held research encounters to document on the MAR. Please see the educational instructions in this document below to familiarize yourself and your team members on how to perform MAR documentation in advance of the security update.

b. System Update: Enhancement to Telephone Encounters for Research Coordinators

Issue: Research-only visit type had different associated ambulatory tools than the telephone visit encounter visit type.
**Description:** Work was completed to consolidate functionality from research-only visit types into telephone encounter visit types.

**Date of Fix:** This update was migrated to production on May 5th, 2020.

**Impact to Users:** Research coordinators will find the telephone encounter type available in their list of encounter types. Training resources to assist in the use of these visit types are available on the Research Coordinator Learning Home Dashboard. In general, this visit type aligns very similarly workflow-wise to the orders-only encounter type.

3. **Education:**

   a. **Are your research team access roles up to date for your research studies? Is your team access up to date?**
   A quick reminder for research teams to **notify the Health System Access team of any changes to your research staff** especially as it relates to access to health information, EMRs and the Connect Care Clinical Information System. Send an email to research.administration@ahs.ca to request the modification or removal of access for team members. This may include changes to PhD investigators, billing staff, research nurses, managers as well as other research study coordinators. Individuals found to be accessing patient charts outside of their approved access may be subject to penalties.

   b. **Documenting med administration on the MAR**

   As reviewed during training and during previous Research Updates, whenever a medication is administered inside an AHS care setting, the **administration of the medication must be documented in the system** using the Medication Administration Record (MAR) functionality. This documentation must be completed by the user who actually administered the medication and/or witnessed the administration by the patient. In order to do so, the medication needs to be ordered as a Clinically Administered Medication – CAM (if ambulatory context) or as a During Visit – Bed Med (if inpatient context), and the ordering user is required to enter the expected date and time for when that medication will be administered. Once the CAM or Bed Med order is signed, the medication will be listed in the MAR on the expected date/time as per the order, and the user will be able to complete the administration during the respective scheduled appointment in Connect Care. To learn more about this workflow please review the guides available in your Research Coordinator Learning Home Dashboard.
c. Do all your study participants have an Active Start Date? The active start date is a required field for every active patient. Check your research coordinator dashboard for a report called “Patients missing an Active Start Date” to find out if you have missing data.

To date, in the system, we have 311 patients who are not currently marked with the date they were consented to the study (active start date) on the patient enrollment tab. As per your responsibilities and outlined in the Charting Etiquette for research guide on your dashboard, this is a required field for the use of the system for research workflows for all active participants. For any patients enrolled after November 3rd, 2020, you must also upload the research study participation consent letter as per your research training.

d. Medication discontinuation

Similar to the medication ordering workflow where research coordinators require a physician to sign off on the orders, only clinicians are able to discontinue a medication in Connect Care. If a patient must be discontinued of a medication (investigational or standard of care), the research coordinator will have to request a physician to do so. The research coordinator can use the in-system functionalities to complete the request such as the “Inbasket Messaging” or the “CC’d Chart”. The in-system steps required to discontinue an investigational medication is similar to discontinuing a standard of care medication, therefore the physician should be familiar with the workflow.

4. Training:
   a. Research Staff ILT Course Update – virtual offerings May, June
   Research Staff ILT Training for the date of May 13th, will be provided virtually as a pilot. Currently, both May and June sessions will be offered via Zoom. Users must confirm that they have the required technical access requirements for the course. Credentialed trainers are working with users to ensure this access before training dates. Any new users applying for Research Staff ILT training will be contacted to confirm whether their training can be provided virtually or in-classroom as this training will resume in-person training at a time to be confirmed. Of note, the prerequisite course for Research Staff ILT, Ambulatory Nurse Shared will continue to be provided as an in-classroom training.
b. Reporting training overview
   i. Basic reporting – will continue to be offered virtually. All research end-users who have taken the Research Staff ILT course are encouraged to take this virtual learning course at it explores how to pull and customize reports introduced in their research staff course.
   ii. Power reporting training transitioning to exclusively virtually May 14

c. Next dates: Research Staff ILT Course - Virtual June 10 & 11th 8am -12pm (currently full); July: dates/format TBA

5. Communications:

a. Most recent Clinical Inquiry Newsletter
   You can find the most recent version of the provincial Clinical Inquiry newsletter (Research & Analytics) here if you did not receive it in your inbox.

b. Next Research Webinars
   Our monthly open webinars are a great way to stay informed about research functionalities in Connect Care and upcoming readiness activities, such as training. Please join our monthly open sessions (via Skype). To request a webinar invitation, please contact: CC.research@ahs.ca
   Upcoming session dates: (third Monday, of each month) May 19 12:00-1:00
   The next Connect Care Research Webinar is scheduled for Tuesday, May 19, 2020 where the focus will be ‘Connect Care Research Functionality Updates’. Your research support team will summarize research functionality modifications and new releases in Connect Care effective as of mid-January 2020.

Our April 20th, 2020 webinar featured an overview of ‘COVID Support for Research’. You can find links to previously recorded webinars, here under the heading ‘Presentations and Videos’.

c. Have you missed an update? Previously Released Newsletters archive
   We have an archive of previous Wave 1 Connect Care Research updates at https://extranet.ahsnet.ca/teams/AHSRA/SitePages/Home.aspx under ‘Newsletters’
   For further reading on Connect Care Inquiry and Research we encourage you to read the following:
   - Connect Care Byte
   - All research stakeholders (including non-AHS employees) can access an assortment of Connect Care research related information at: https://extranet.ahsnet.ca/teams/AHSRA/SitePages/Home.aspx (the right-hand side of the AHS Health System Access Resource Page in a section called ‘Connect Care Resources’)
6. Finding help for your questions and requesting on-site assistance *NEW comprehensive list of supports*

- Ask a local research super-user first, your colleagues are your first best resource.

For urgent issues (including log-in issues) or technology related issues with patient impacts, call 1-877-311-4300. If a Patient Safety Event has occurred (hazard up to harm), it is recommended that you submit an RLS (include your service desk ticket number in your RLS report).

I Can’t Log-In, My Password Doesn’t Work, or I’m Having an Issue with a Device. In line with security policies established by Alberta Health Services, password resets can only be completed over the phone. You may also contact the service desk if you are experiencing issues with your computer, printer, other non-medical devices, or you are a clinician who requires Solution Centre support. Call the IT Service Desk & Solution Centre immediately at 1-877-311-4300.

For non-urgent research-specific system issues, submit a Connect Care IT ticket (https://insite.albertahealthservices.ca/Main/cc/SitePages/ConnectCareHelp.aspx). Under ‘Clinical Area’, select ‘Research’. Under ‘Connect Care Department Name’ enter EDM STO WMC PED CIU or EDM UAH WMC CIU. We are in the process of populating all department names here. Things were you might want to submit a ticket include:

- A functionality or report in the Connect Care research module is not working as expected
- A workflow that you are trying to perform in-system support of research is interrupted, delayed or does not transmit
- You are requesting access, functions or reports that are not currently available to the research coordinator role, etc..
- There is an issue related to how information is tracked, entered, transmitted or reported in a research visit

For assistance with study and study team member approvals and or study set-up in Connect Care. Please submit the appropriate form on the Health System Access (HSA) website (https://extranet.ahsnet.ca/teams/AHSRA/ITAccess/SitePages/CC%20Research%20Resources.aspx) for Connect Care requests related to:

- Adding your study to Connect Care
- Updating Connect Care study records (add/remove research staff, notification preferences, study description, etc.)
- Requesting Connect Care training

For status updates on submitted requests to HSA, contact research.administration@ahs.ca.
If your workflow or service-related issue relates to performing research care workflows in combination with pharmacy, lab or diagnostic imaging, please directly email or call your service area contact. These service areas are best able to speak to resolution of issues.

For questions related to research conversion, or site readiness for Connect Care Wave-specific launch, or if your question does not meet any of the criteria above, and you are unable to find a local super user, we will answer your email through the cc.research@ahs.ca.

Wave 1 Onsite Assistance. We are suspending on-site visits temporarily to limit visits to clinical centers. Please reach out to cc.research@ahs.ca and we will provide virtual support as needed.

5. More resources for Research end-users
   Please remember to check your Research Coordinator - Learning Home & Research Coordinator – My Studies Dashboards for more training materials, tip-sheets and other documents that were developed to help you perform your Connect Care workflows. We also have some great material at our AHS/HSA Webpage. https://extranet.ahsnet.ca/teams/AHSRA/SitePages/Home.aspx

Best,

On behalf of the Connect Care Research team cc.research@ahs.ca