



## The Long-Term Care Prescriber's Role at Cutover

### What is “cutover”?

Cutover is a process through which key pieces of information about admitted patients and long-term care (LTC) residents are entered into Connect Care prior to launch. Cutover includes both technical and clinical elements. The primary concern for prescribers will be the management of medication and non-medication orders, and the translation of important information about LTC residents' clinical status from legacy systems to Connect Care.

### What is the prescriber's role?

LTC prescribers will be asked to complete three primary tasks occur during different periods of time, including:

1. **Medication Orders:** LTC physicians/NPs will work with the clinical teams to review medication orders prior to cutover during regular medication review times. Starting 3-4 weeks prior to launch, pharmacists will enter the medication orders into Connect Care.
2. **Non-Medication Orders:** 5-7 weeks prior to launch, LTC physicians/NPs will complete and sign a standardized form that lists all non-medication orders (GCD, activity, vitals, fluids, ins and outs, etc.) and standing medication orders attached to each resident. Nursing and dietitians will enter these orders into the system over 2-3 weeks prior to launch.
3. **Order Validation:** The week prior to launch, LTC physicians/NPs need to review all orders in Connect Care, to verify that those orders accurately reflect what was intended in steps 1 and 2 above. The orders will be active in Connect Care for launch. Any additional orders entered after physicians confirm the orders should be reviewed in a timely fashion.

### What if there are any changes to LTC orders?

#### Medication Orders

Any changes after medication orders have been entered will be processed in the legacy system and entered into Connect Care by the Pharmacy team.

#### Non-Medication Orders

Any changes after non-medication orders are entered by nursing and dietitians will be entered into the legacy system and Connect Care by nursing or dietitians, depending on the type of order.

### Who can help?

Any member of the professional care team can assist with the clinical cutover process; attending medical staff have the primary responsibility for ensuring that the information provided in steps 1, 2 and 3 above is accurate and complete.

### Is the cutover process different for Long-Term Care?

Yes, there are specific differences in timelines to support the clinical documentation requirements for LTC residents. The LTC cutover period of starts with form completion April 18, 2022 (or earlier, depending on the unit) and ends at launch on May 28, 2022.



### Long-Term Care Cutover Timelines

Starting	Days/weeks from launch	What to do
February to April	3 months to 1 months prior	Review LTC medication orders and add indications where required to ensure orders are as accurate as possible. PRN indications are required as per the Continuing Care Health Service Standards.
April 18–April 27	6 to 5 weeks prior	Complete cutover order and information forms. Will require physician/NP signature for order forms.
May 2–May 20	4 to 1 weeks prior	Assist pharmacy and nursing as required, with the interpretation and entry of complex orders (particularly important for high-risk orders such as TPN or insulin orders).
May 23–May 28	7 to 0 days prior	Physician/NP verify all orders for LTC residents.

### More Information

*Please note:* There is a separate inpatient/acute communication. The LTC communication is sent earlier due to the earlier dates impacting LTC cutover.

- [Manual: Cutover](#)
- Physician/NP workflow problems: Call Helpdesk at 1-877-311-4300 (#1 for Connect Care) or submit a ticket at [help.connect-care.ca](https://help.connect-care.ca)
- LTC cutover questions: [jessica.spence2@ahs.ca](mailto:jessica.spence2@ahs.ca)