



The Long Term Care Prescriber's Role at Cutover

What is “cutover”?

Cutover is a process through which key pieces of information about Long Term Care (LTC) residents are entered into Connect Care prior to launch. Cutover includes both technical and clinical elements.

The primary concern for physicians and nurse practitioners (collectively, “prescribers”) will be the management of medication and nonmedication orders, and the translation of important information about patients’ clinical status from legacy systems to Connect Care.

What is the physician's role?

LTC prescribers will be asked to complete three primary tasks as part of the cutover process:

- 1. Medication Orders:**
LTC prescribers will work with clinical teams to review medication orders (including ensuring that any home med list is empty) prior to cutover during regular medication review times. Starting 3 weeks prior to launch, pharmacists will enter current medication orders into Connect Care.
- 2. Non-Medication Orders:**
5 weeks prior to launch, prescribers will complete 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 weeks prior to launch.
- 3. Order Validation:**
The week prior to launch, prescribers must complete medication and non-medication order review 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 the Connect Care clinical information system. Any additional orders, entered after prescribers confirm active 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 cutover timelines for LTC. These better fit the clinical documentation requirements for long-term care residents. The LTC cutover period of starts with form completion March 8, 2021 and ends at launch on April 10, 2021.

Long Term Care Cutover Timelines:

Starting:	Days/Weeks from launch:	What to do:
January-March 2021	3 to 1 months prior	Review LTC medication orders and add details or indications where required to ensure orders are as accurate as possible. PRN indications are required as per the Continuing Care Health Service Standards.
March 8-12	5 weeks prior	Nursing completes cutover order and information forms. These order forms will require physician/NP signature.
March 22- April 2	3 to 2 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).
April 3-9	7 to 0 days prior	Physician/NP complete medication review (and possible reconciliation of any stray home meds) and verify all non-medication orders for LTC residents.

More Information

- General Questions: CMIO@ahs.ca
- Physician/NP workflow questions: Call Helpdesk at 1-877-311-4300 (#1 for Connect Care) or submit a ticket at help.connect-care.ca.
- LTC cutover questions: jessica.spence2@ahs.ca