



The Prescriber's Role at Cutover

What is “cutover”?

Cutover is a process through which key pieces of information about admitted patients are entered into Connect Care prior to launch. Cutover includes both technical and clinical elements.

The primary concern for physicians and nurse practitioners (NPs) 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/NP's role?

Physicians and NPs will be asked to complete four primary tasks as part of the cutover process:

1. **Medication Orders**

Starting 40 hours prior to launch, inpatient pharmacists will enter medication orders into Connect Care for patient charts active at launch. The orders will be available to work with (“active” in the system) at launch 05:00, April 10, 2021. Prior to cutover, physicians and NPs should work with the patient medication profile in Meditech or the paper medication administration record (MAR) and document any necessary changes, so that these are communicated to inpatient pharmacists before medication orders are entered in Connect Care.

2. **Non-medication Orders**

Starting 72 hours prior to launch, physicians and NPs will complete a “Cutover Orders” form that lists all non-medication orders (activity, vitals, diet, fluids, ins and outs, etc.) attached to each patient. Assigned cutover nursing staff and dietitians will then enter these orders into the system during the 48 hours prior to launch.

3. **Order Validation**

On the first day after launch (April 10, 2021), physicians and NPs must review their patients' medication and non-medication orders in Connect Care, verifying that orders accurately reflect what was intended in steps 1 and 2 above. Cutover orders will already be active in Connect Care and will not need to be “signed”, only reviewed. Corrections and additions should be entered as modified or new orders. The post-cutover review need not take place at the moment of launch but should be completed as soon as possible to ensure safe and comprehensive patient care.

4. **Best Possible Medication History (BPMH)**

Every patient who is an inpatient at the time of launch needs a BPMH to be completed in Connect Care. The BPMH allows for accurate medication reconciliation upon subsequent transfer and discharge. There are two steps that physicians and NPs need to complete related to BPMH cutover:

- 4.1. Leading up to launch, validate and sign a **Netcare BPMH form** for all admitted patients. To streamline the cutover process, assigned nursing and pharmacy staff will help to enter **signed** BPMH forms into Connect Care.

- 4.2. **Reconcile BPMH** in Connect Care. After the BPMH is entered into Connect Care, prescribers are strongly encouraged to complete a BPMH reconciliation in the Admission navigator.

- **Tip: Medication Reconciliation at Cutover**



What if the orders change during the 48 hours prior to launch?

Medication Orders

Changes to pre-launch paper (or Meditech) inpatient medication orders are scanned, sent to pharmacy, entered into the legacy pharmacy system and reflected in Connect Care if possible.

The time window during which new medication orders may not get entered to Connect Care by pharmacy relates to site pharmacy closure times. Any medication orders written after pharmacy closure times on April 9 will need to be entered into Connect Care by the prescriber post-launch.

Wave 3 Site Pharmacy Closure Times (April 9, 2021)

- **15:00**
 - Beaverlodge Municipal Hospital
 - Central Peace Health Complex (Spirit River)
 - Fairview Health Complex
 - Fox Creek Healthcare Centre
 - Grande Cache Community Health Complex
 - Grimshaw Berwyn and District Community Health Centre
 - High Prairie Health Complex
 - La Crete Community Health Centre
 - Manning Community Health Centre
 - Northwest Health Centre (High Level)
 - Peace River Community Health Centre
 - Sacred Heart Community Health Centre
 - St. Theresa General Hospital (Fort Vermilion)
 - Valleyview Health Centre

- **21:00**
 - Queen Elizabeth II Hospital

After these times at these sites, medication order updates must be placed and validated in Connect Care post-launch, after 05:00 on April 10, 2021.

Non-Medication Orders

Any new or changed non-medication orders occurring during the 48 hours prior to launch should be noted by updating on the Non-Medication Order sheet (attached to the chart) up until the loading of that sheet is complete, at which point a prominent “Stop” sticker is attached to the chart. After that point, the prescriber must enter new or changed orders into Connect Care system post-launch, at the time of order review.

To avoid order changes being missed, physicians and NPs are encouraged to consider whether changes to the orders can wait to be entered directly into Connect Care after launch. If not, it will be vitally important for those orders to be entered by the physician or NP as soon post-launch (05:00, April 10, 2021) as possible.

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 1-4 above is accurate and complete.

Is there anything else I need to know?

Having to review orders for all inpatient patients on the day of launch may be time consuming; some inpatient services have chosen to schedule additional attending staff for the first day (or days) post-launch to help address the anticipated transitional work, while continuing to care for established and newly-admitted patients.



Timelines

Starting approximately	Days from launch	What to do
April 1	-10	Make every effort to discharge/repatriate patients, as appropriate, to lessen the burden of cutover activities (ongoing).
April 5	-5	Clean up medication lists in patient charts (remove all “stale” orders). Complete non-medication orders forms on all inpatients.
April 7	-3	Generate, review, edit, and sign a list of medication orders (for pharmacy) and non-medication orders for each patient.
April 7 to April 10	-3 to -1	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 10	0 to +1	Complete medication reconciliation and verify all nonmedication orders for admitted patients.

More Information

- [Manual: Cutover](#)
- [FAQ: The Long Term Care Prescriber’s Role at Cutover](#)
- [Tip: Best Possible Medication History Reconciliation](#)

Additional questions can be directed to:

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