A Day in the Life of a Principal Investigator

February 21st, 2023

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Alberta Health Services
Connect Care

Welcome and Opening Remarks

They help keep Albertans healthy and independent

They improve the quality and safety of care for Albertans

They provide access to potentially life-changing treatments

They update or replace outdated treatments and technologies

They take good ideas and turn them into something even better

They shorten the pathways to diagnosis and treatment

They achieve more with the same or fewer resources

They improve conditions for the AHS workforce and other Albertans

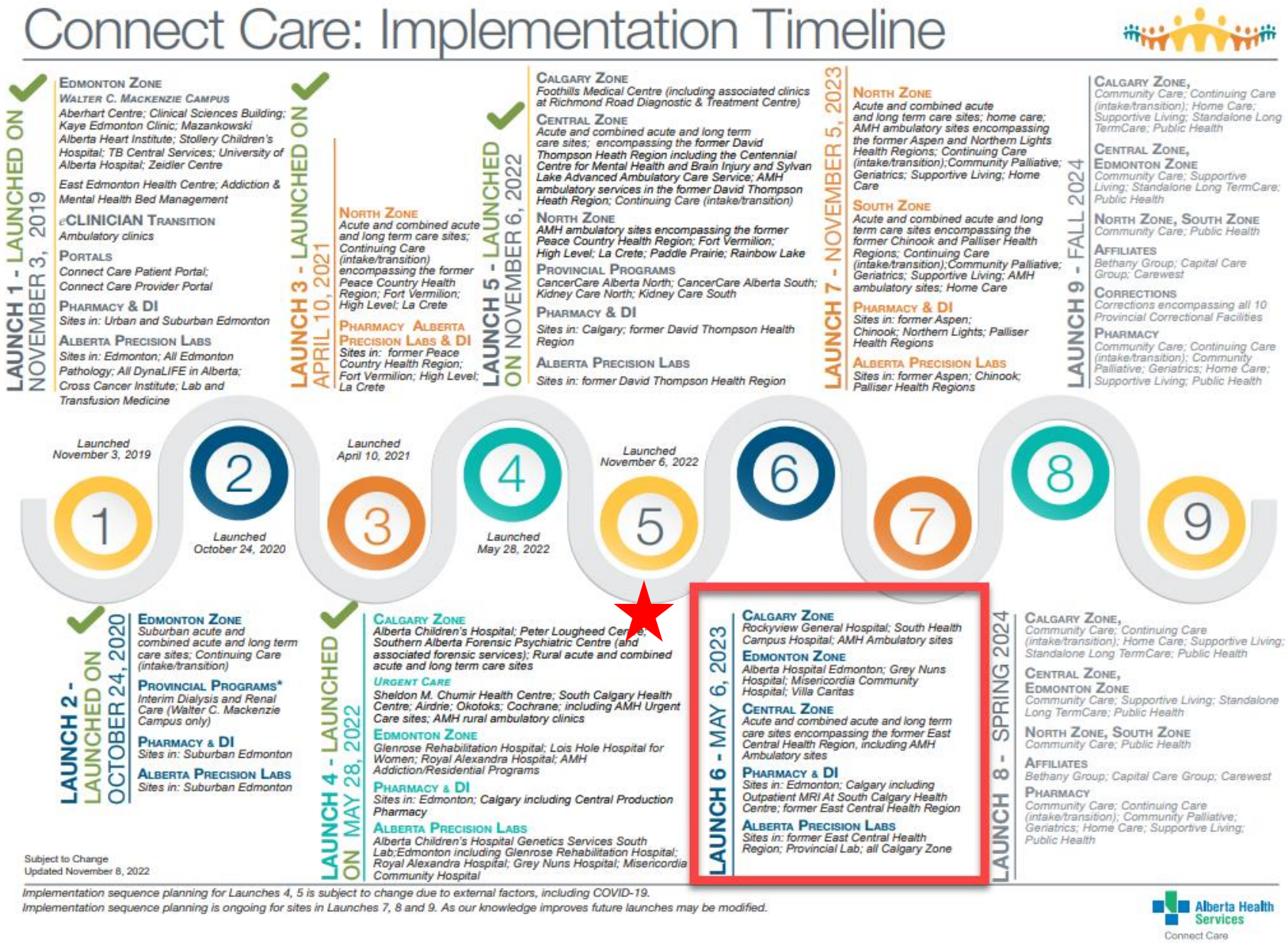
They encourage highly qualified professionals to join AHS

Do not distribute

Zoom Etiquette

- Remain muted if you are not speaking
- Be mindful of allowing others to participate, where appropriate
- Leverage the chat window to ask questions
- **Be mindful that you cannot be on a Skype, Microsoft Teams and Zoom call at the same time**

Research and Connect Care



Research in Connect Care

Current State: There are 1708 active studies currently in Connect Care.

- 1,337 Interventional studies
- 363 Observational studies
- 8 Unclassified

Patient Enrollment Statistics

- 10,121 patients enrolled in interventional studies
- 11,459 patients enrolled in observational studies
- 33 patient enrolled in unclassified studies

Research studies can take place in any location:

- Emergency departments
- Inpatient and Ambulatory clinics (including oncology)
- Surgery & transplant units
- Pediatric departments
- Diagnostic Imaging

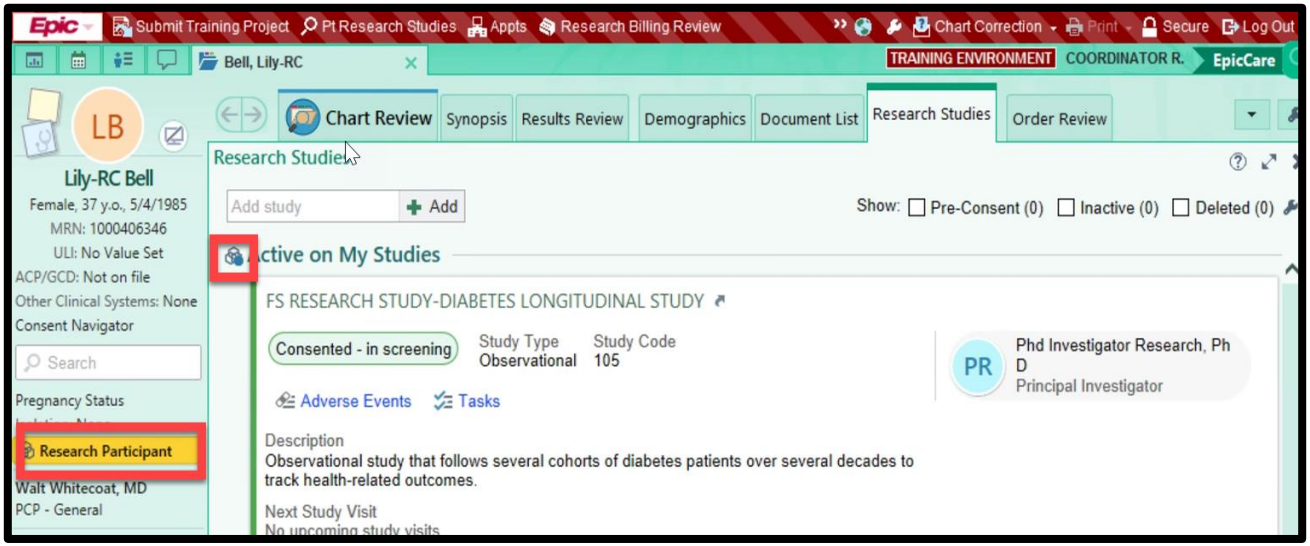
AHS collaborates with university affiliated staff to integrate additional research teams into Connect Care.

What You Should Know when Getting Ready for Launch

Research in Connect Care

1. Research is one part of the care journey.
2. There are a set of minimum use standards that apply to research team members using Connect Care.
3. Supporting research workflows (linking, ordering, scheduling) in-system will enhance patient safety, benefiting patients, healthcare providers and research teams.
4. Research and other care area workflows will be integrated in system. Research will be visible to all users.
5. Operational readiness includes readiness by research teams for new roles in the Connect Care research record.

Key Takeaways



- Integrated care means: One Patient = One Chart
- Importance of the research icon
- Roles and Access
- Training Sequencing and Requirements
- Communication is key

Research Aware Patient Care: Research Flag

Care Team

Nurse
Allied Health
Technicians
Physician
+
Research Study Coordinator (AHS/non)

Research Module

- STUDY STATUS
- VISITS
- ORDERS
- RESULTS

Do Not Distribute

What Studies are In-scope for Launch?

Clinical research projects that meet any of the following criteria:

- Interventional drugs trials and investigational device studies
- Requires the use of recruitment tools, or research-study specific order entry or documentation
- Requires release of information to external study monitors
- Coordinators require notifications of ED arrivals or admissions
- Incorporates billable items (i.e., observational studies with labs or other testing)

What Studies are NOT In-scope for Launch?

Clinical research projects that may be excluded for a research (RSH) record in Connect Care:

- RSH record creation is **optional for non-interventional studies with minimal patient care impact requiring only a single research order** (such as a blood draw or urine sample for enrollment eligibility) where the service area can support non-Connect Care requisitions and where patient consent permits linkage of study participation to their medical record. This includes:
- An RSH record for these studies may be created if all the following apply:
  1. Principal investigators and study teams expressly request the use of Connect Care to manage their patients;
  2. Study staff agree to take Connect Care training;
  3. Study staff agree to comply with RSH record and patient association maintenance workflows;
  4. Research orders cannot be accommodated outside of Connect care;
  5. Patients have explicitly consented to their research participation linked to their medical record.

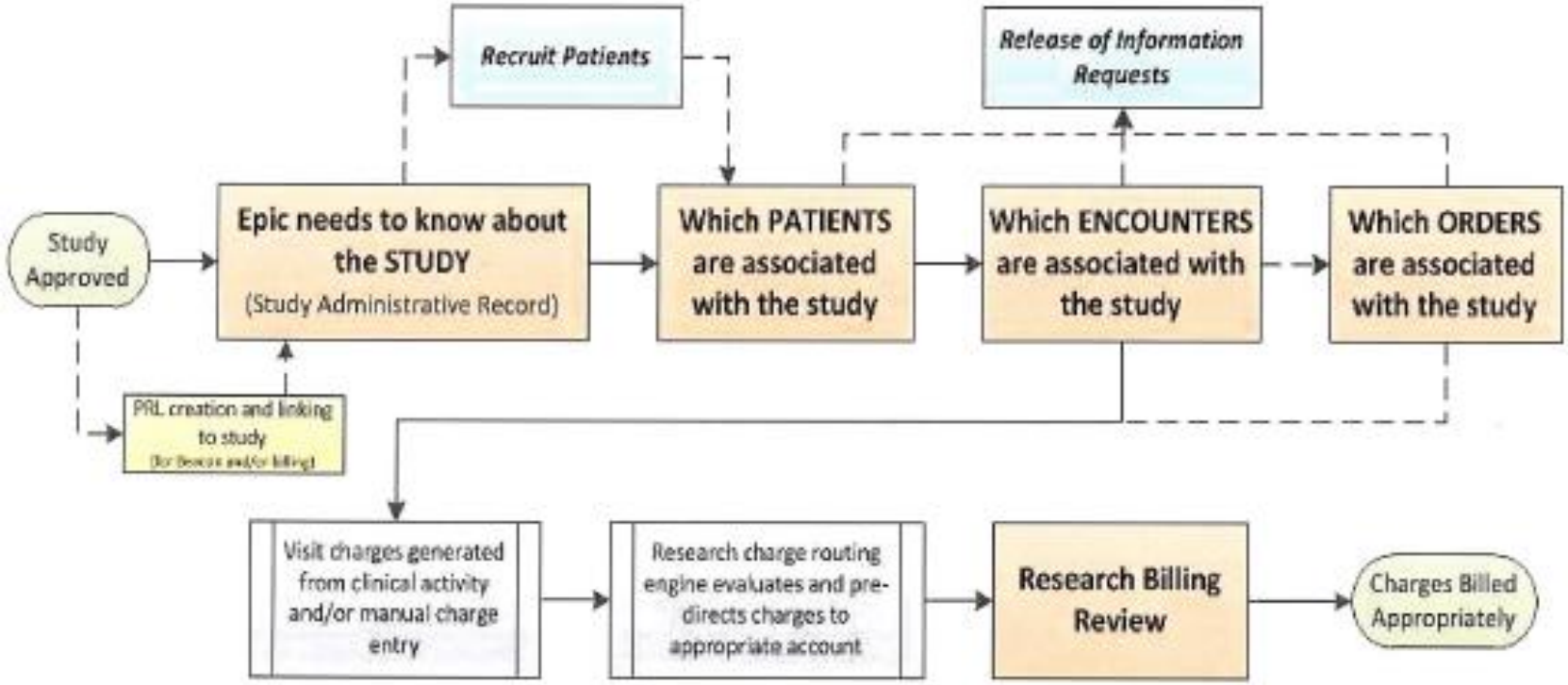
How do I Request Access for a Study?

1. Submit your study information including all the study team members associated with the study
2. Wait for an email request to submit preferred training dates → proceed to select your dates
3. Check your AHS email inbox for confirmation of training date and location
4. Attend training, complete the End User Proficiency Assessment (EUPA)
5. Test your access and confirm your study information at Conversion Lab

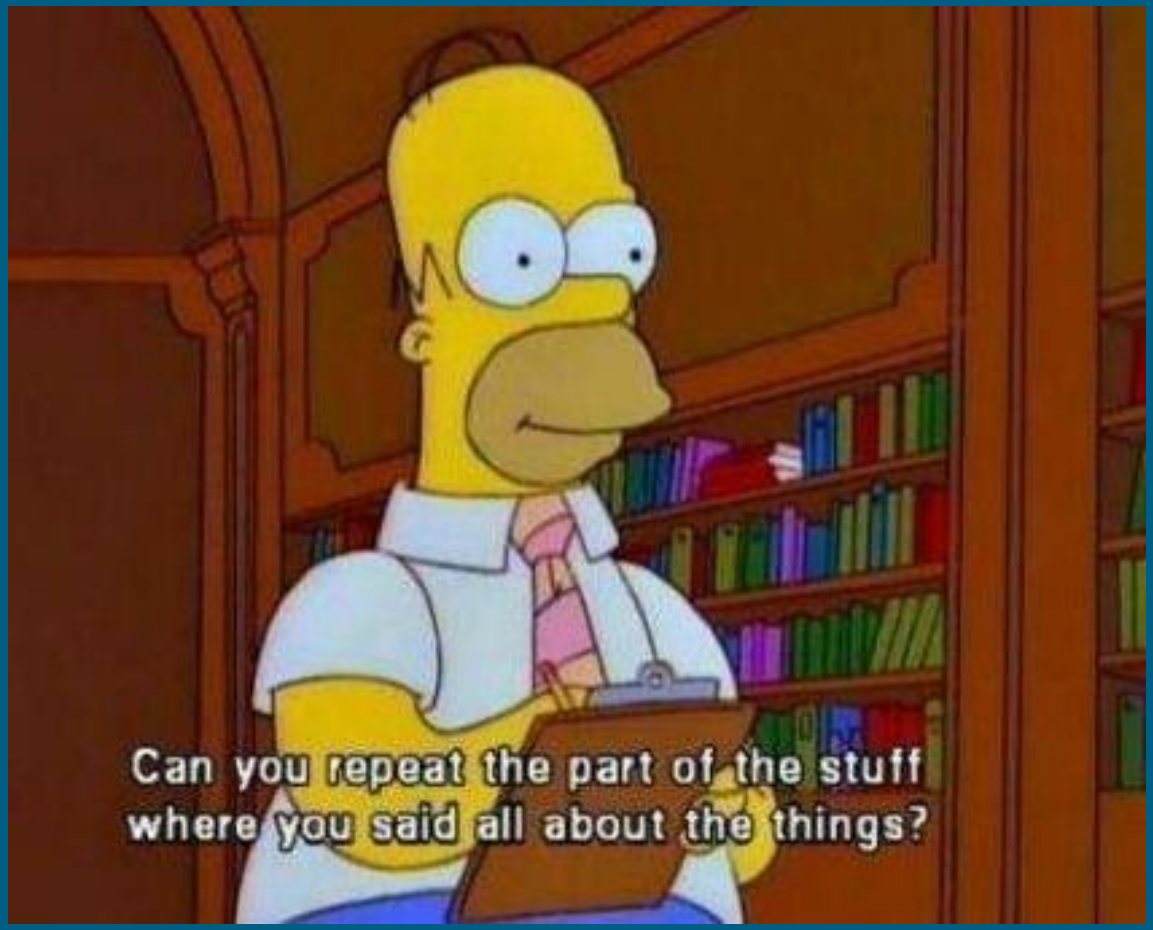
Even if you have already submitted your Research Conversion Intake form and you think your responses may have changed, you will have an opportunity to re-submit the form regarding the need of Connect Care access.

Visit the Health System Access Webpage for instructions.

How Clinical Workflows Complement the Research Workflows and What to be Expected



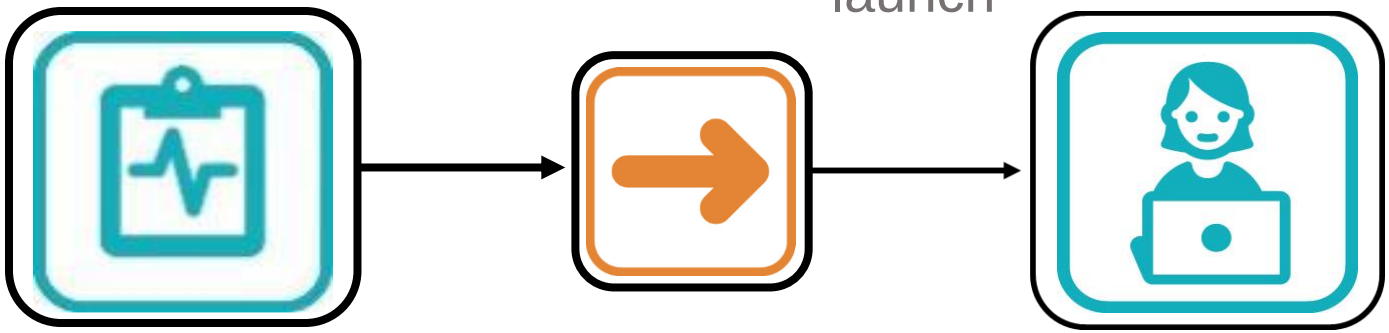
Important Reminders!!!



What will or will not change?

If you're doing it on *paper* today…

…You'll be doing it *electronically in-system* at launch



- Access to data for research studies
- Enter information into Connect Care to replace other EHRs
- Research records and workflows will be integrated within Connect Care

Principal Investigator – *Responsibilities Key Messages*

- **Provide** oversight of the study
- Clinical care workflows
- **Respond** to critical communications from cc.research@ahs.ca and Health System Access (HSA)
- **Ensure time** for coordinators/team to train and get familiar with workflows, participate in conversion

Research Related Roles and Access

What does Physician Training Look Like?

CMIO Training Tracks

Inpatient Admitting/Consulting	O & G
Ambulatory	Oncology – Medical, Pediatric & Radiation
Surgery	Pathology – Anatomical, Clinical & Hemo
Anaesthesia	Pediatrics
Emergency	Addiction & Mental Health
Cardiology	Radiology
Critical Care – Adult, PICU & NICU	Rural Medicine
Lumens	Medical Learner
Consult Only (Wave 4)	Medical Outpatient Unit Prescriber

EACH track will be compromised of THREE training modules:

- Basic: 6-12 weeks before go-live; basic skills/functionality
- Personalization: 1-4 weeks before go-live; specialized skills/specialty workflows
- Optimization: 4-6 weeks post go-live; increased proficiency (the spot where detailed Cogito analytic/reporting training will be provided)

Overview of Research Education in Training

- Recognizing a Research Patient - Basic Lesson
  - Participants in class will be shown the research icon within the patient's chart.
  - They will be shown how to access information related to the study such as the name of the study, a brief description and the name of the Principal Investigator.
  - Orders associated with the study are clearly identified within the chart, participants will be taught how to identify them.
- After Class Workbook Exercises
  - Recognizing a Research Patient and identifying pertinent research study information
  - How to Associate Orders with Research Studies – Recommended for Investigators
- Learning Home Dashboard
  - Research Quick Start Guide – access the Research Coordinator Learning Home Dashboard

Research Conversion

How is Study Information Converted into Connect Care?

- Research conversion is the **process of preparing research studies** that impact patient care for use in Connect Care. This includes:
  - **Loading and activating** research studies
  - **Building** research specific drugs and orderable items
  - **Linking patients** to research studies
  - **Linking research specific appointments** to studies
- Completing the Research Conversion activities will allow you and your team to be better prepared for Launch and be able to focus on your patients and your studies instead of the system during your Go-Live date.
- It's your chance to try the system before the "start date".

Additional Research Conversion Information

- Research Conversion is set to begin April 17-28, 2023 leading up to Launch 6 on May 6th, 2023.
- Virtual Conversion Classroom sessions will be scheduled with live support and 'how-to' guides for staff while working on their studies in the virtual session
- The conversion session will include:

  Part 1: Verify Studies and Enroll Patients

  Part 2: Link Encounters, Document Investigational Meds, and Personal Settings

- Most coordinators will need from 1 to 2 hours to complete all classroom activities that are included during research conversion.

1 representative per study (the person who will be performing the steps to set-up the study) is required in the virtual classroom

with the strong recommendation that the entire study team view the research conversion recorded guide on MLL.

Preparing for Conversion: What to Have Available

- Study information including (where applicable): study team members, REB approval and expiry dates, CTCAE version for adverse events, list of contraindicated meds, names of study arms.
- Your roster of patients actively enrolled or being recruited your studies
  - Access to multiple patient identifiers (Name, DOB, ULI) so you can search for your patients
  - Be prepared to access any information that may be stored in a document or another system

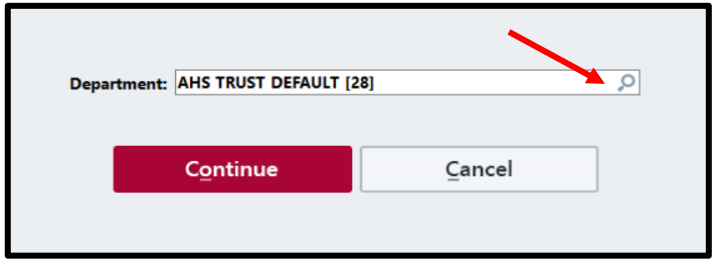
Template for Patient Data (to be sent via email following your registration to a virtual classroom session):

Required	**Required**	**Required**	**Required**	*Required if over 100 patients*	*Required if fewer than 100 patients*	*Required if fewer than 100 patients*	**Required**	*Optional*	*Optional*
Research Study Name (Short Title)	Site (Location)	REB Number	Patient ID Number (ULI preferred)	Patient ID Type (choose from list, ULI preferred)	Patient Name	Patient DOB (DD/MM/YYYY)	Current Enrollment Status	Study Arm / Branch	Study Participant ID
Sample Study	University of Alberta Hospita	Pro000012	123456789	ULI	Mouse, Mickey	25/01/1955	Enrolled		
Sample Study	University of Alberta Hospita	Pro000012	456789123	ULI	Duck, Donald	14/02/1965	On Follow-Up		

Department Naming Convention: How to Select the Right Department

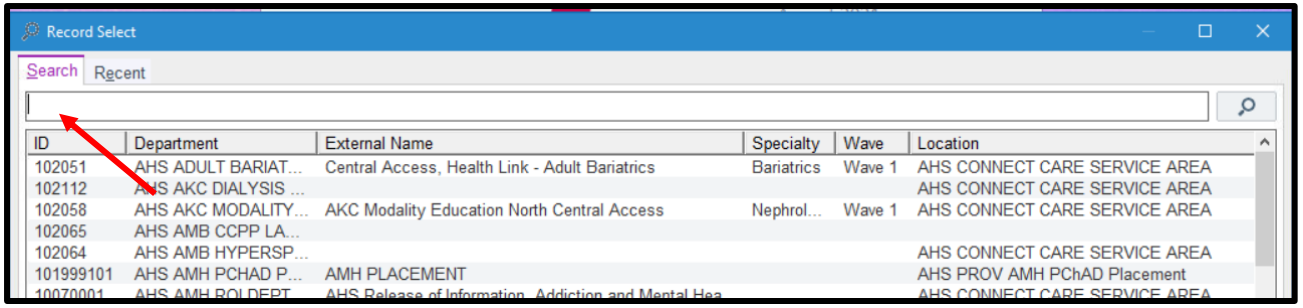
Step 1: Log into Connect Care PRD

Step 2: Click on the magnifying glass to search for your department



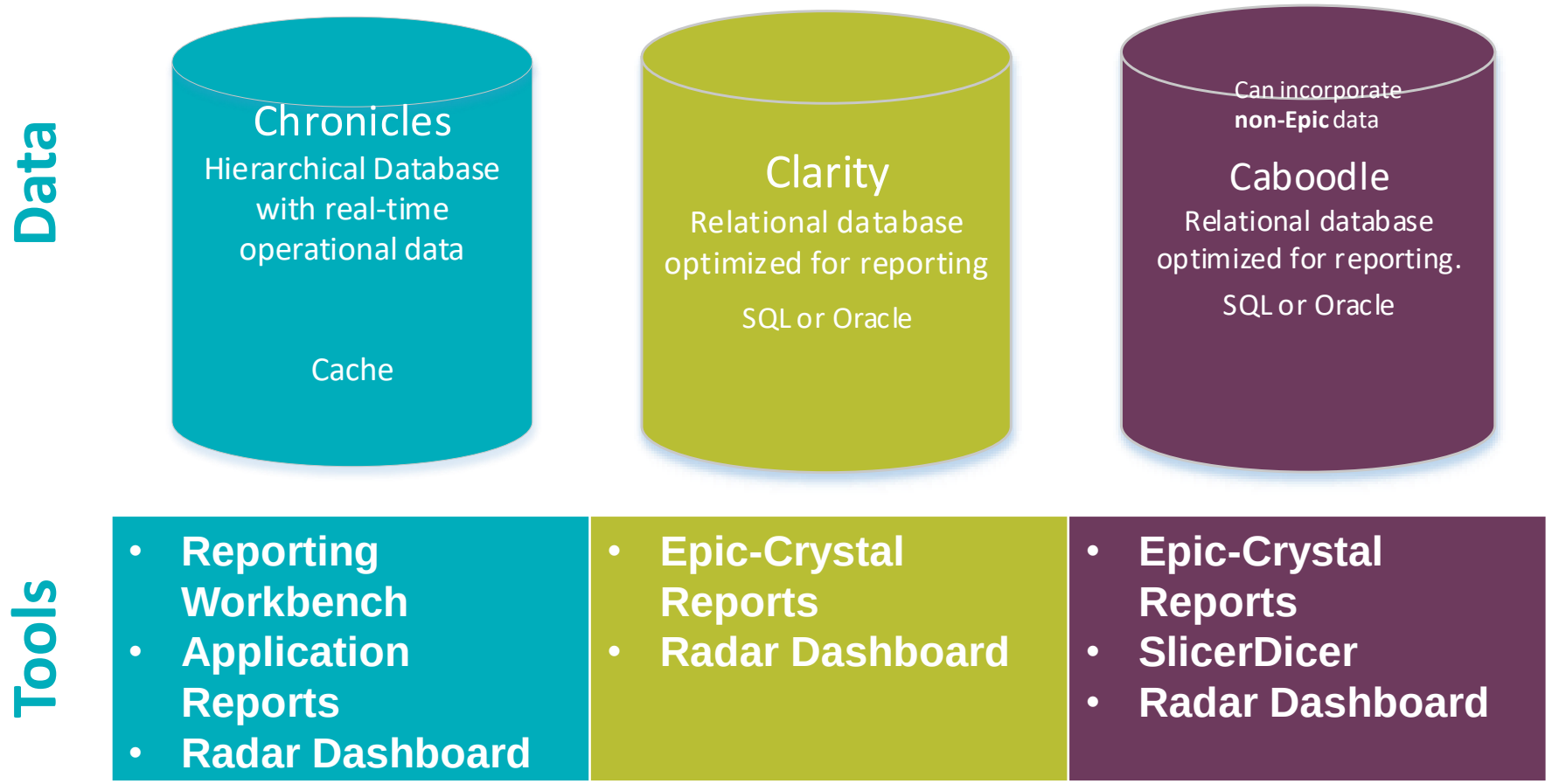
Step 3: Use the following naming convention; enter into the text field:

- Zone (i.e. – EDM) → Site (i.e. – RAH) → Area/Dept (oncology)



Research & Data and Analytics in Connect Care

Databases & Tools

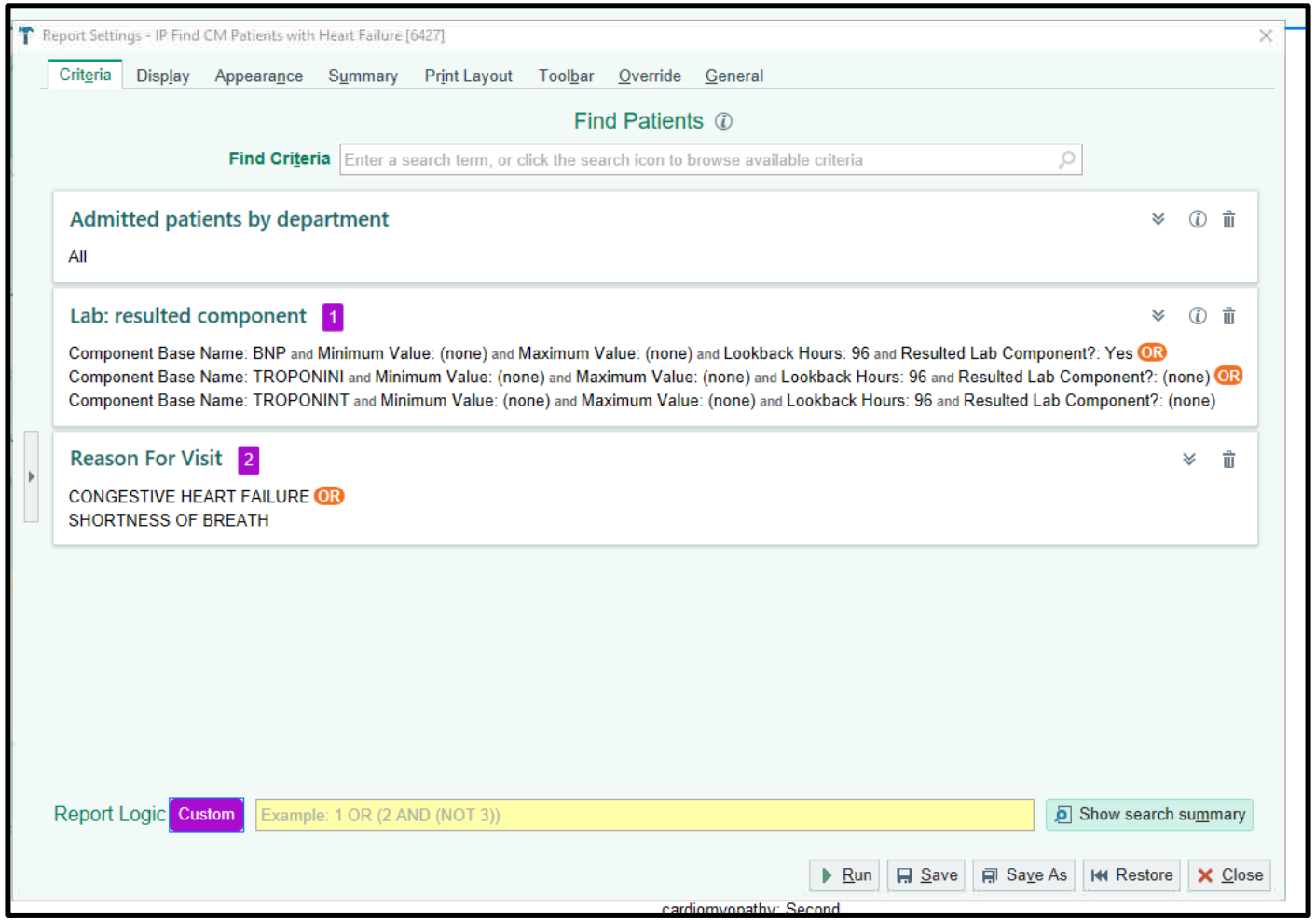


Radar Dashboards	SlicerDicer	Metrics	Reporting Workbench
Role-specific overview/central homepage Refresh: hourly	Data not real time (Caboodle) Refresh: daily	-KPIs/ Standardized Refresh: daily	Real time data
Customize, build your own (using S/D, Analytics Catalogue)	Self-serve/build own queries	Not customizable	Can customize from existing templates
Include RW summaries	Uses data models	Benchmarking across organizations	On demand, actionable (action buttons in results)
Drill down to pt. chart	Drill down to pt. chart and export to Excel		Drill down to pt. chart and export to Excel

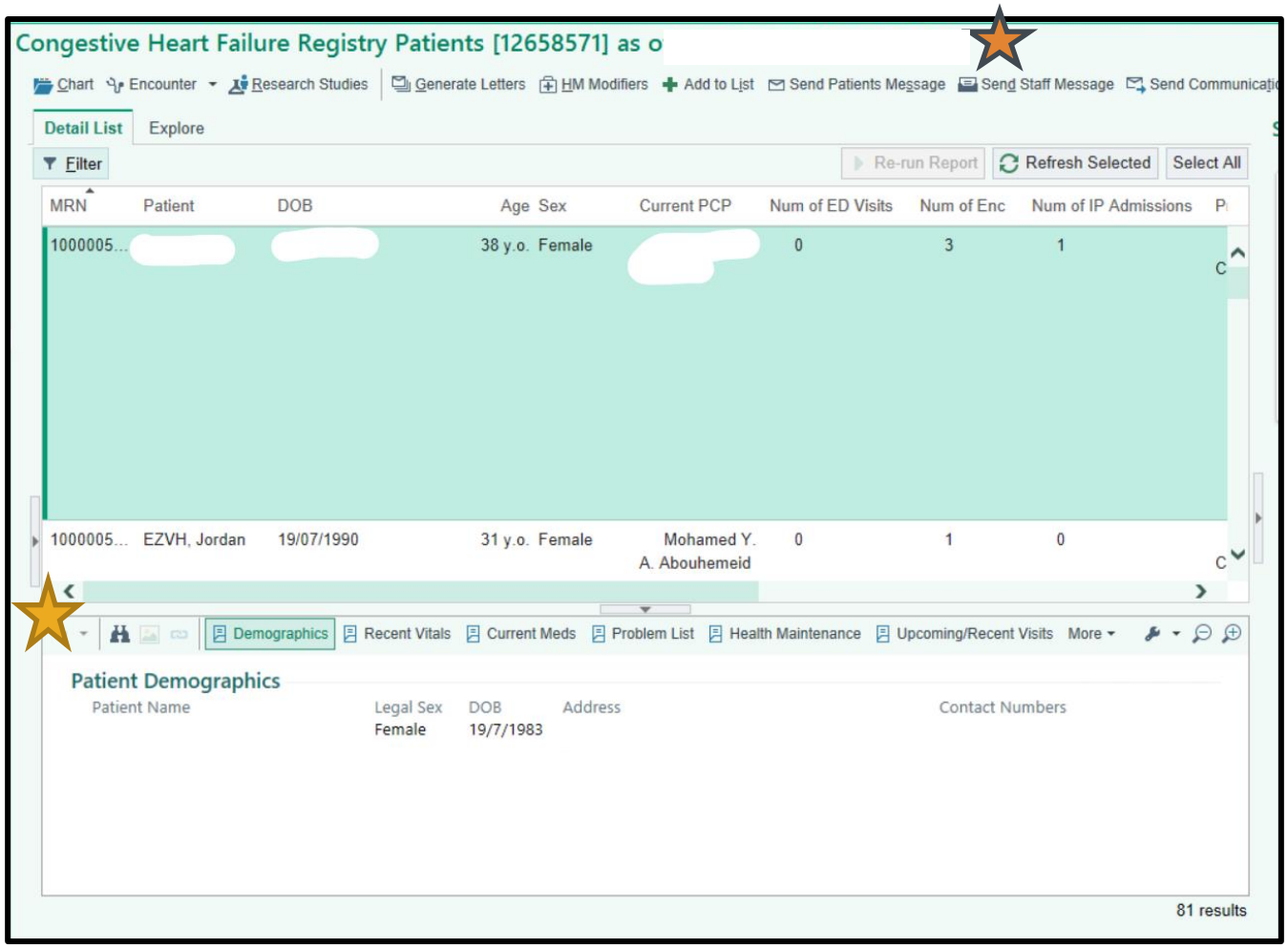
In-System Information:
Study Management Reports

Type	Purpose	Examples
Radar Dashboards	- Visualize real-time and analytical data from Epic and non-Epic sources - Integrated into workflows - Summarize data via charts and graphs	Research Reporting Home: a “home page” for coordinators to : • access tools for billing review, • release to external monitors, • research links, and • patients in pre-consent status awaiting follow-up
Reporting Workbench	- Real-time actionable data - Integrated into Hyperspace and workflows - Ad-hoc self-service reporting - Take action and make data driven decisions like jumping to patients chart - Export data	**Find Patients Associated with My Research Studies**: for research staff to keep track of patients who are involved with any study in which the user is involved **Find Upcoming Appointments for Patients on My Studies** **Find Research Adverse Events for Follow-Up**: coordinators can review adverse events that have been documented for patients enrolled in their studies

Let's look


Report Settings - IP Find CM Patients with Heart Failure [6427]
Criteria
Display
Appearance
Summary
Print Layout
Toolbar
Override
General
Find Patients
Find Criteria
Enter a search term, or click the search icon to browse available criteria
Admitted patients by department
All
Lab: resulted component
1
Component Base Name: BNP and Minimum Value: (none) and Maximum Value: (none) and Lookback Hours: 96 and Resulted Lab Component?: Yes OR
Component Base Name: TROPONINI and Minimum Value: (none) and Maximum Value: (none) and Lookback Hours: 96 and Resulted Lab Component?: (none) OR
Component Base Name: TROPONINT and Minimum Value: (none) and Maximum Value: (none) and Lookback Hours: 96 and Resulted Lab Component?: (none)
Reason For Visit
2
CONGESTIVE HEART FAILURE OR
SHORTNESS OF BREATH
Report Logic
Custom
Example: 1 OR (2 AND (NOT 3))
Show search summary
Run
Save
Save As
Restore
Close
cardiomyopathy; Second

Research and Connect Care



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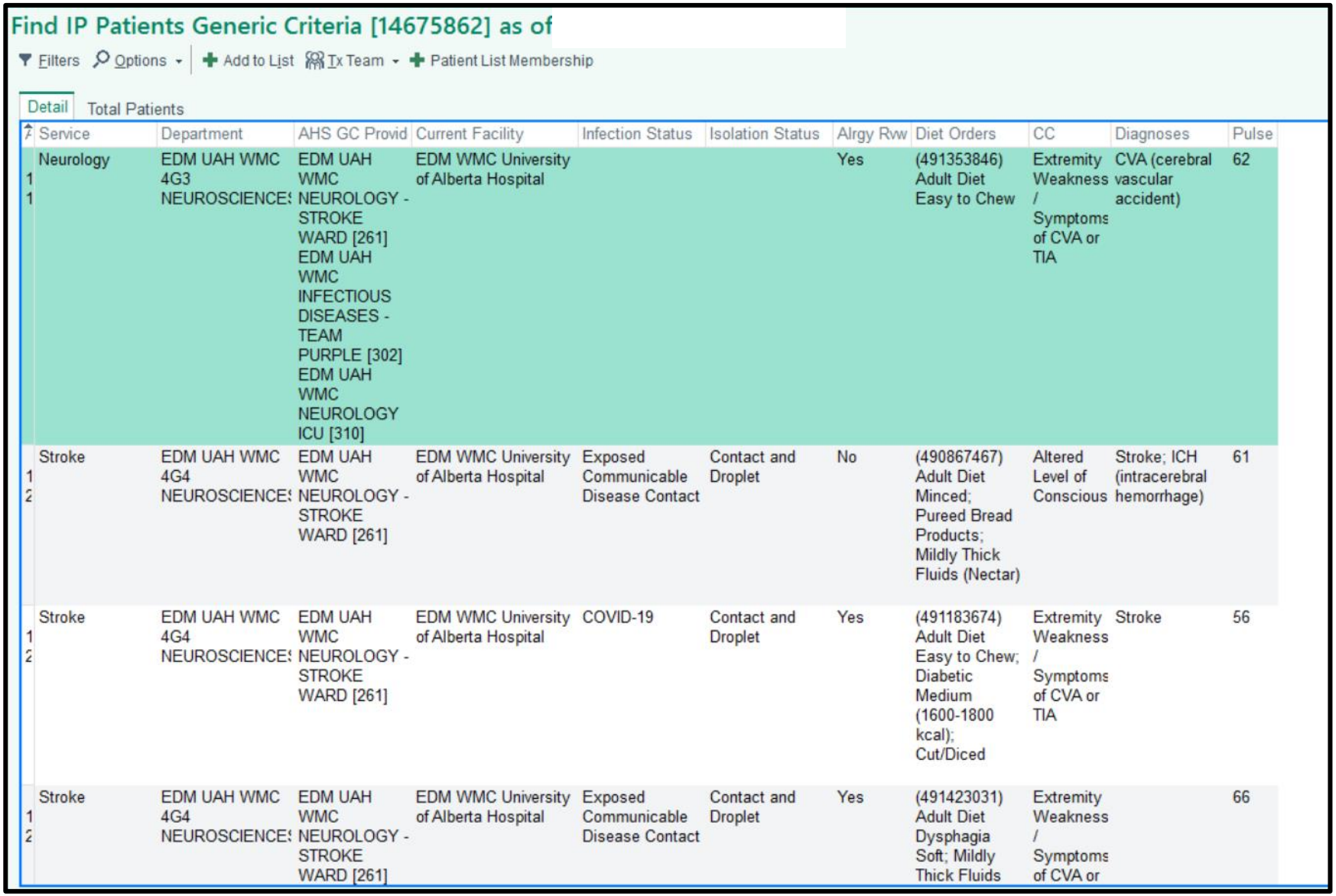


Find IP Patients Generic Criteria [14675862] as of

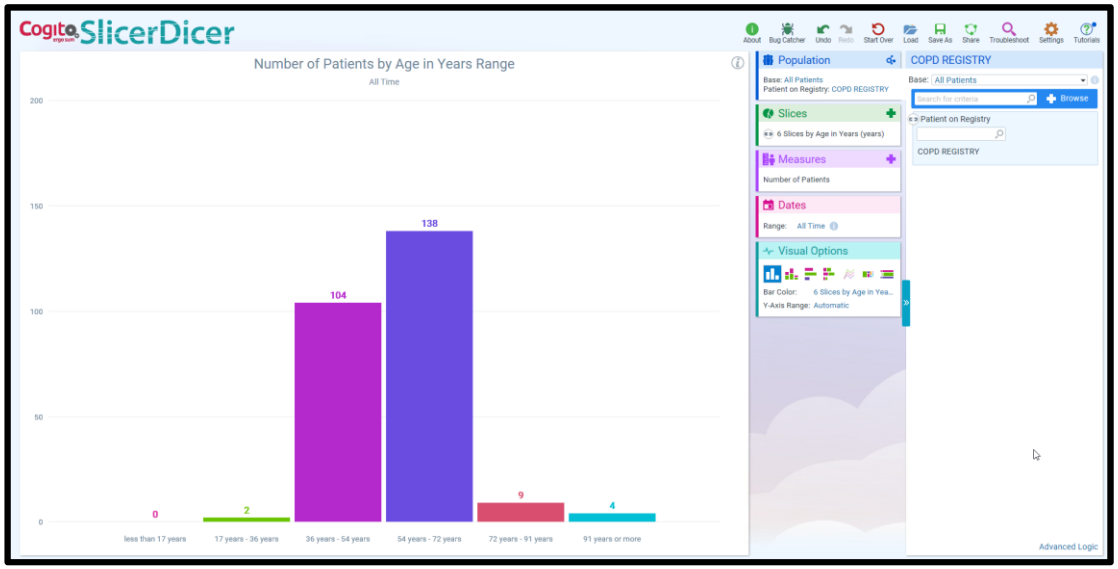
Filters | Options | Add to List | Tx Team | Patient List Membership

Detail | Total Patients

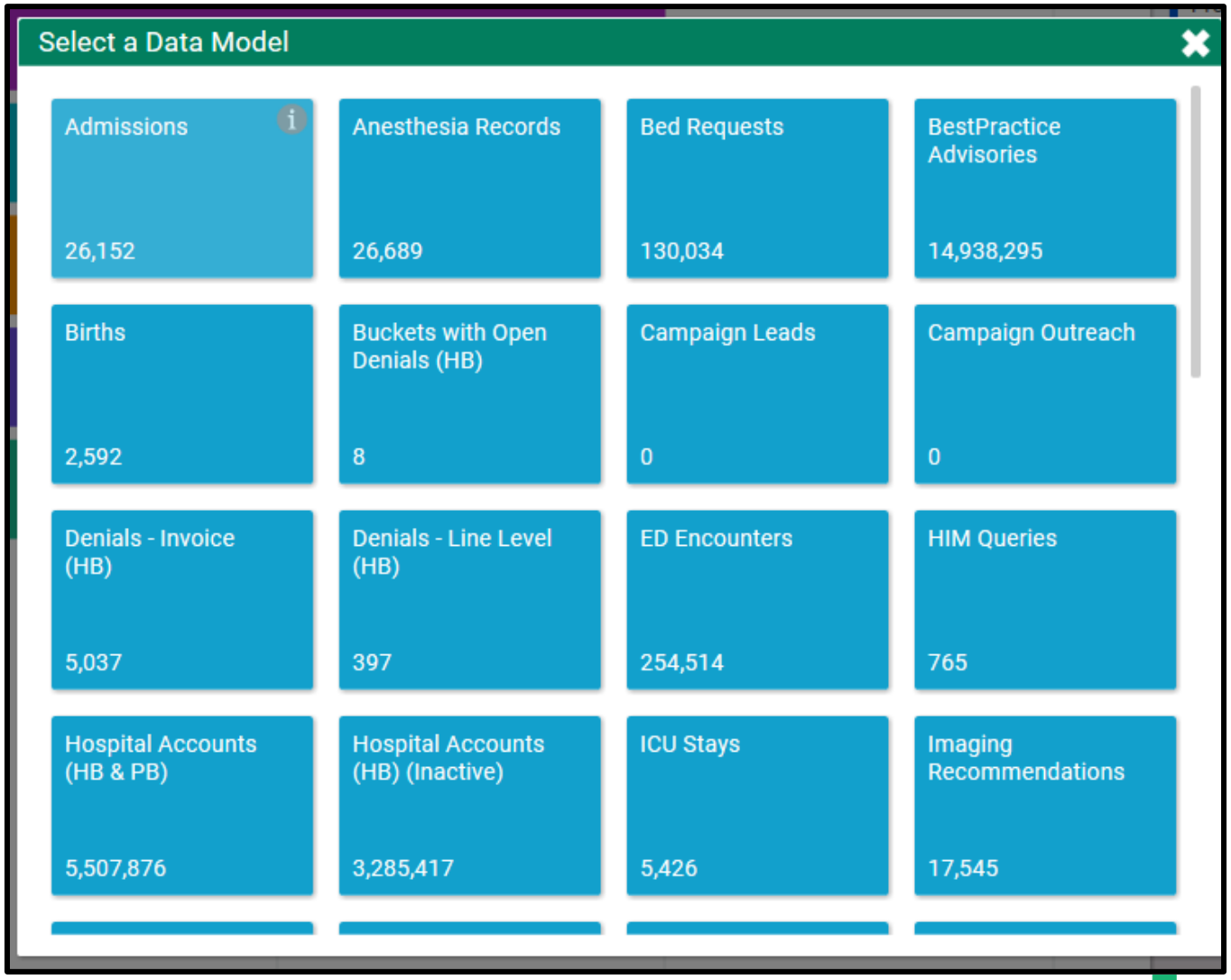
	Service	Department	AHS GC Provid	Current Facility	Infection Status	Isolation Status	Alrgy Rvw	Diet Orders	CC	Diagnoses	Pulse
11	Neurology	EDM UAH WMC 4G3 NEUROSCIENCES	EDM UAH WMC NEUROLOGY - STROKE WARD [261] EDM UAH WMC INFECTIOUS DISEASES - TEAM PURPLE [302] EDM UAH WMC NEUROLOGY ICU [310]	EDM WMC University of Alberta Hospital			Yes	(491353846) Adult Diet Easy to Chew	Extremity Weakness / Symptoms of CVA or TIA	CVA (cerebral vascular accident)	62
12	Stroke	EDM UAH WMC 4G4 NEUROSCIENCES	EDM UAH WMC NEUROLOGY - STROKE WARD [261]	EDM WMC University of Alberta Hospital	Exposed Communicable Disease Contact	Contact and Droplet	No	(490867467) Adult Diet Minced; Pureed Bread Products; Mildly Thick Fluids (Nectar)	Altered Level of Conscious	Stroke; ICH (intracerebral hemorrhage)	61
12	Stroke	EDM UAH WMC 4G4 NEUROSCIENCES	EDM UAH WMC NEUROLOGY - STROKE WARD [261]	EDM WMC University of Alberta Hospital	COVID-19	Contact and Droplet	Yes	(491183674) Adult Diet Easy to Chew; Diabetic Medium (1600-1800 kcal); Cut/Diced	Extremity Weakness / Symptoms of CVA or TIA	Stroke	56
12	Stroke	EDM UAH WMC 4G4 NEUROSCIENCES	EDM UAH WMC NEUROLOGY - STROKE WARD [261]	EDM WMC University of Alberta Hospital	Exposed Communicable Disease Contact	Contact and Droplet	Yes	(491423031) Adult Diet Dysphagia Soft; Mildly Thick Fluids	Extremity Weakness / Symptoms of CVA or		66

Overview of SlicerDicer

- Self-service reporting tool
- Create your own visualizations from curated Data models
- Share your reports
- Add them to your own dashboards
- Build your own dashboard sessions



Research and Connect Care



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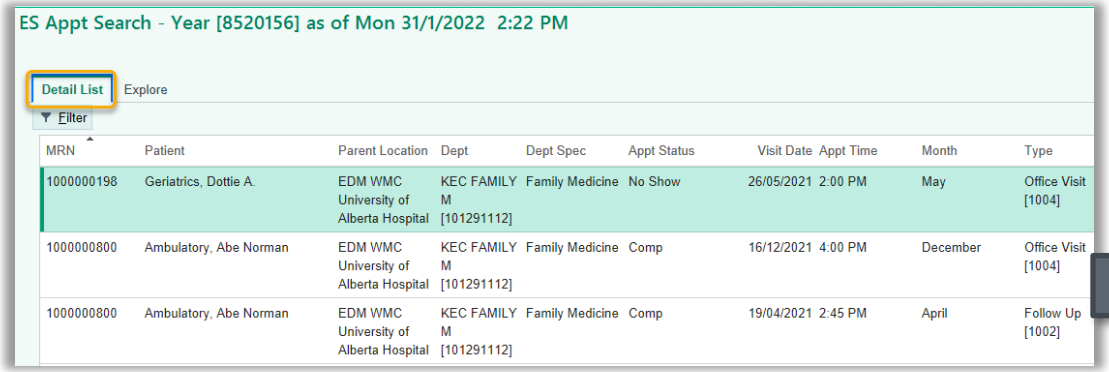
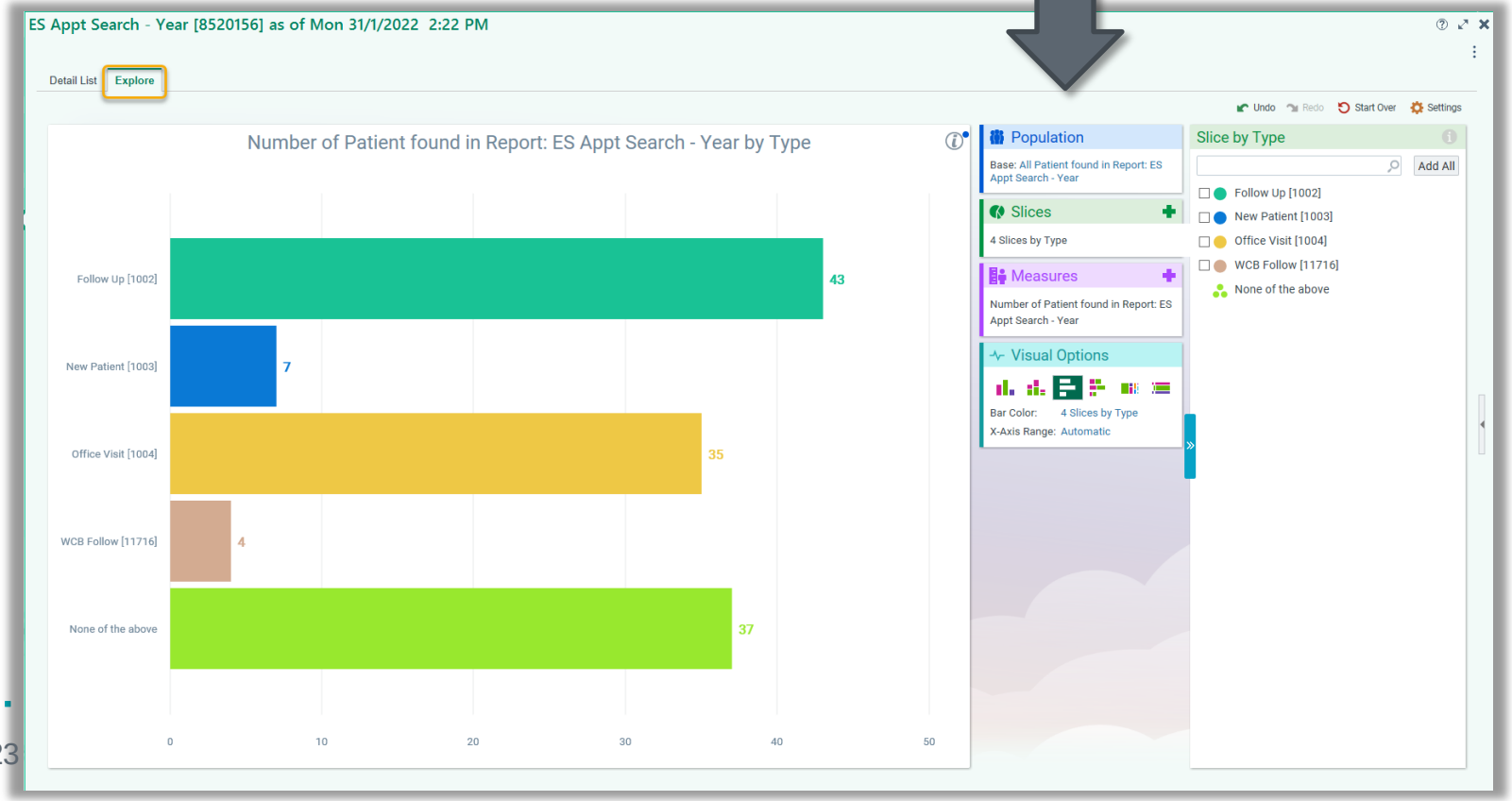
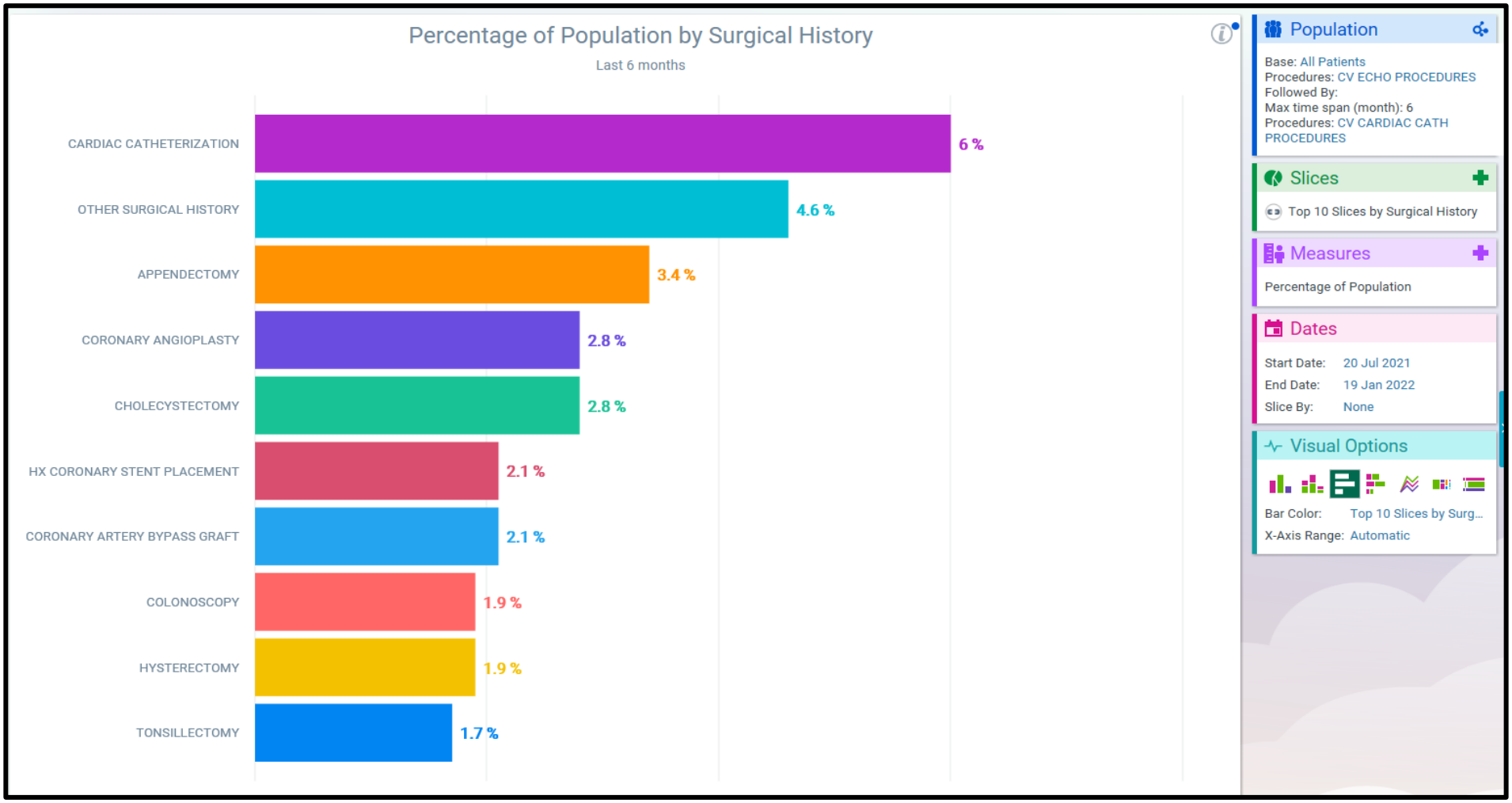
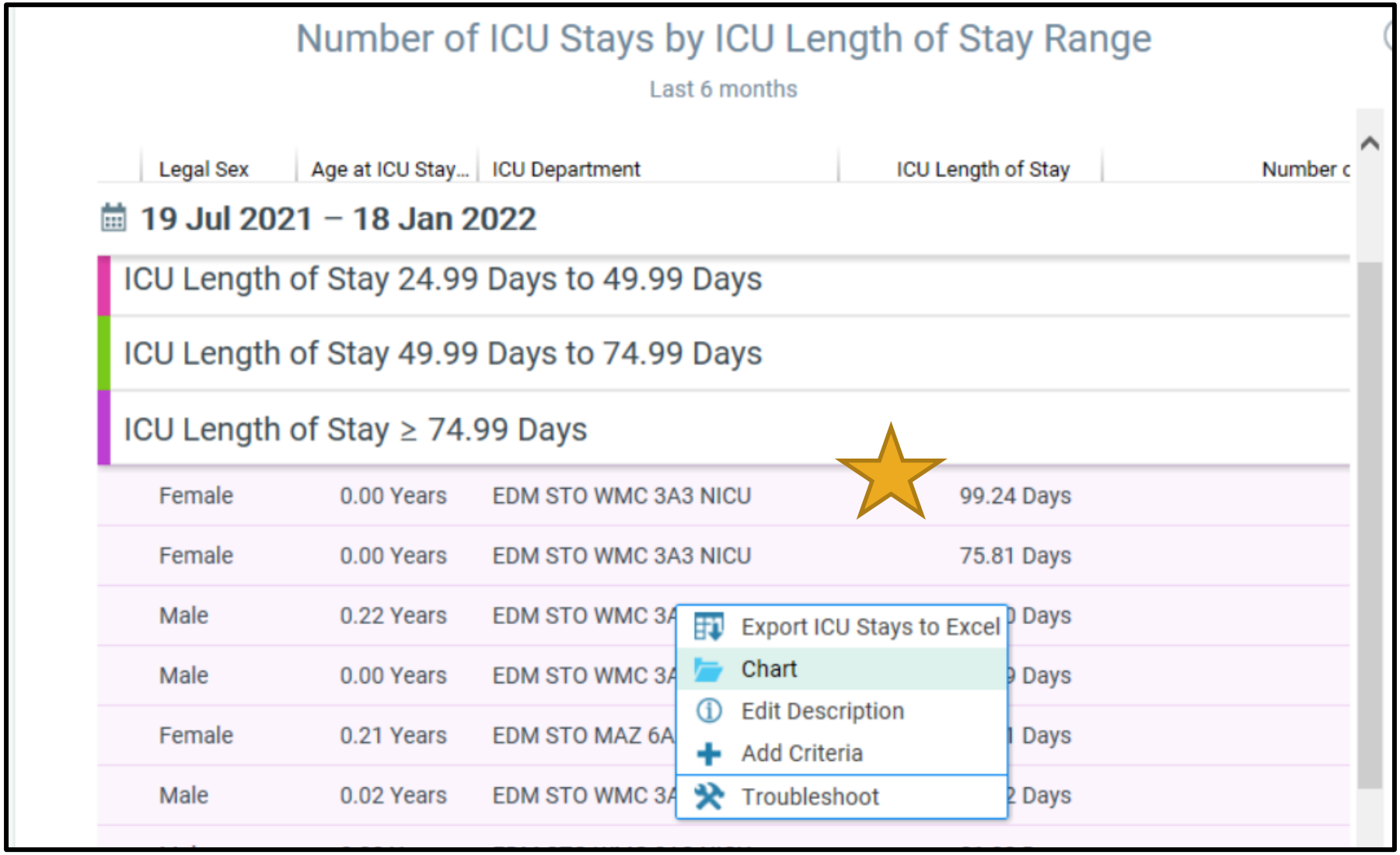


Group results by Appointment Type

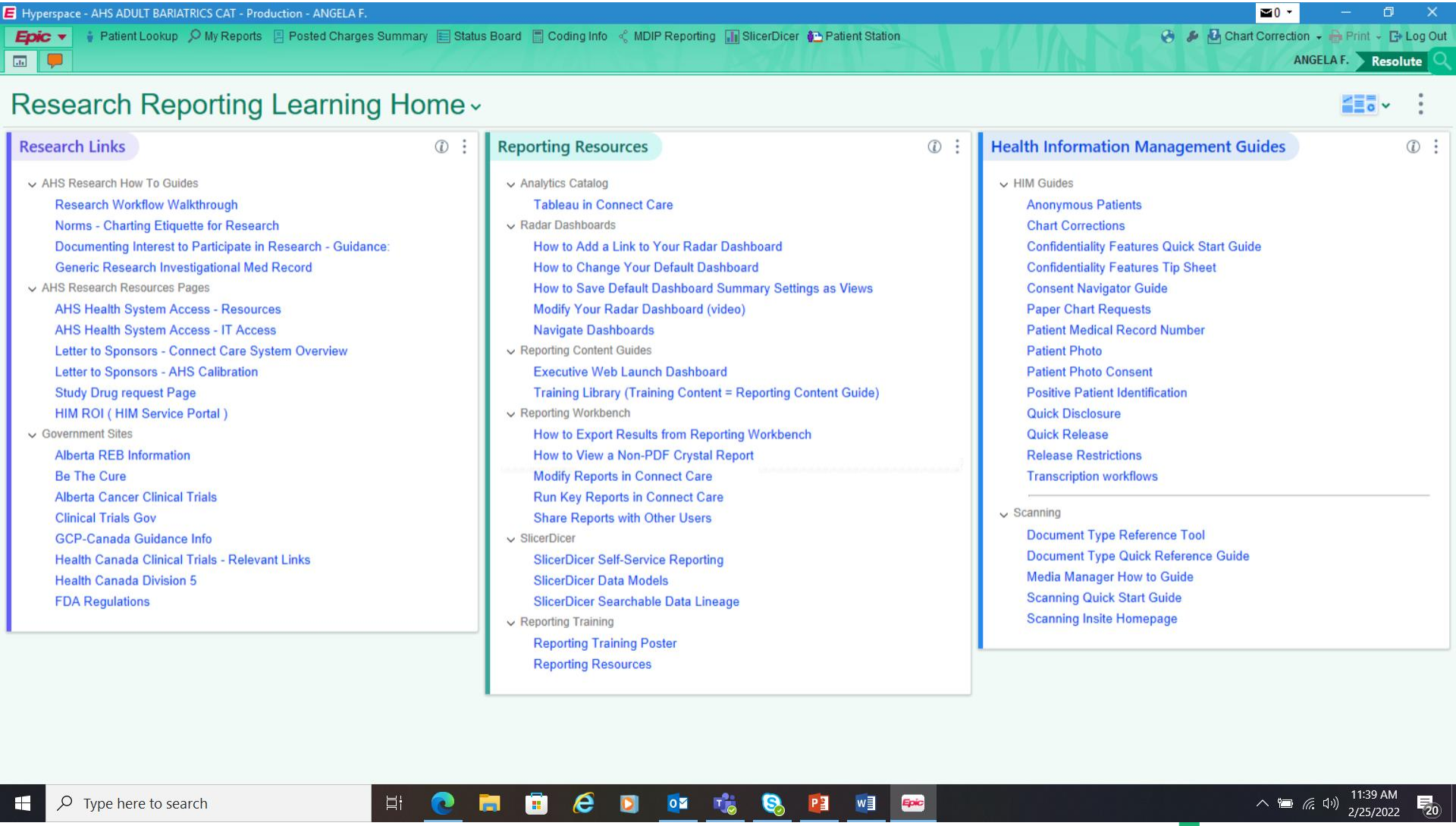


Research and Connect Care




Number of ICU Stays by ICU Length of Stay Range
Last 6 months
Legal Sex
Age at ICU Stay...
ICU Department
ICU Length of Stay
Number c
19 Jul 2021 – 18 Jan 2022
ICU Length of Stay 24.99 Days to 49.99 Days
ICU Length of Stay 49.99 Days to 74.99 Days
ICU Length of Stay ≥ 74.99 Days
Female 0.00 Years EDM STO WMC 3A3 NICU 99.24 Days
Female 0.00 Years EDM STO WMC 3A3 NICU 75.81 Days
Male 0.22 Years EDM STO WMC 3A
Male 0.00 Years EDM STO WMC 3A
Female 0.21 Years EDM STO MAZ 6A
Male 0.02 Years EDM STO WMC 3A
Export ICU Stays to Excel
Chart
Edit Description
Add Criteria
Troubleshoot

Research and Connect Care



Research and Connect Care

Reporting Training and Resources

General Reporting Resources:
Connect Care In-System Reporting Resources
Connect Care Manual - Inquiry (connect-care.ca)
Reporting Content Guides – Summary of all available reports (Under training content filter for Reporting Content Guide)
Self-Guided Analytics Education
Insite Reporting Tools Page

SlicerDicer:
SD Quick Start Guide
SD Data Models

My Learning Link Courses:
Overview of Reporting
Run and Manage Reports
Introduction to Radar
Modifying the Search Criteria of a Report
Defining a Timeframe in a Report
Create a New View of a Radar Dashboard
Basic Reporting User ILT
Reporting Power User ILT
Introduction to SlicerDicer IL

Support and Resources

Finding Help& Submitting Tickets

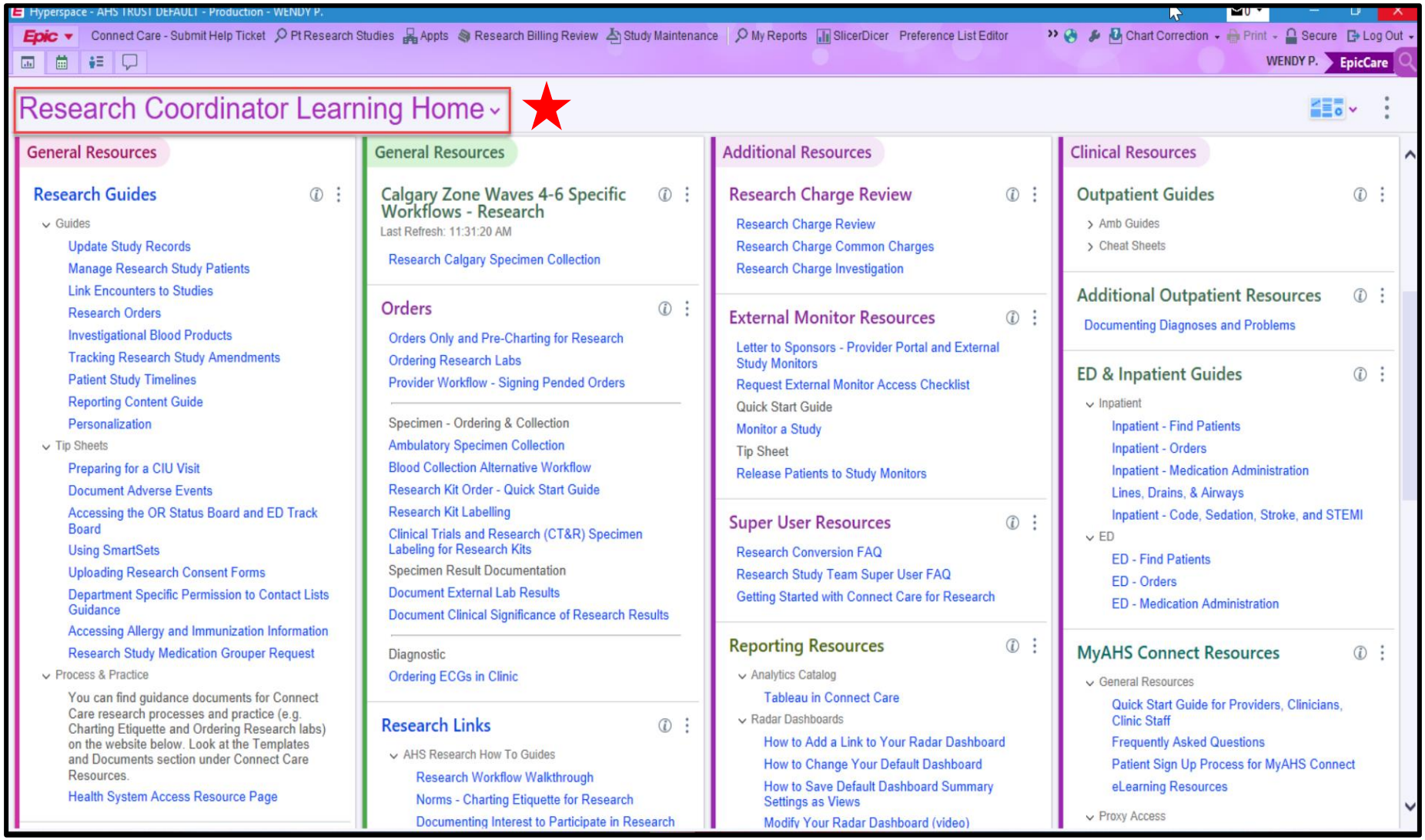
- **For urgent issues (including login or device concerns) or IT related issues call 1-877-311-4300** (Please visit: Insite IT Service Desk & Solution Center for more information).

- **For non-urgent issues**
  1. Ask a local research super-user first; your colleagues are your first best resource.
  2. You can also submit a Connect Care IT ticket for non-urgent research-specific system issues using our online concierge form – refer to Connect Care IT ticket. Under ‘Issue Type’, select ‘Research’.

Important Resources

- Health System Access Webpage
- Getting Started with Connect Care
- CC Research Coordinator Checklist
- CC Research Training Requirements and Sequencing
- CC Research_Clinical Department and Service Area Tip Sheet
- CC Research Charting Etiquette Guide

Research and Connect Care



Remember: Research is care!!

We are here to answer your questions!

For general inquiries and to sign up for Connect Care Research Communications, including event invites, email **CC.Research@ahs.ca**

For questions regarding the study intake process or approvals related to your study, contact **Research.Administration@ahs.ca**

For questions related to training requirements and role assignment, contact **HSAResearchITAccess@ahs.ca**