



Post-Secondary Partners in Connect Care – Training Task Force Meeting Minutes

Meeting

Date/Time: April 17, 2023

Information: Virtual Meeting via [Teams](#)

Or call in (audio only)
+1 587-412-5456

Phone Conference ID: 680 257 96#

Agenda Item	Notes:	Action:
Welcome	<ul style="list-style-type: none"> • Please refer here for past taskforce meeting minutes. • March and April meeting minutes will be posted on the website shortly. 	
1) Availability 2) Student Emails 3) PITS	<p>Availability:</p> <ul style="list-style-type: none"> • Training will occur seven-to-10 business days prior to placement start date. • For awareness, there is no opportunity for training to take place on the weekends. • Experiencing challenges with unavailability that does not correspond to the training that the student requires, e.g., a student required four and a half days of training and the availability provided only corresponded for three days of training. • If a smaller availability is given, training may need to occur during placement. • We are experiencing increasing volume of schools indicating limited to no availability in the seven-to-10 days prior to training. As this is the agreed upon period for training, we are asking that schools follow the same metric AHS managers are adhering to: a minimum of two options must be provided that aligns with the number of training days the student's role assignment requires. • ILT training going forward is going to be a requirement for all placements and we are hoping we can work together to produce solutions. • Jacqueline will be speaking with AHS senior management regarding the time in which these requests are responded to. 	



	<ul style="list-style-type: none">• This discussion will allow the managers to gain better understanding of the importance of responding quickly because of the complexity of what placements has become.• To reiterate the data that must be present in HSPnet are the legal name of the student (spelled correctly), date of birth (DOB), and email address.• Please double check spelling, spelling errors are some of the biggest barriers to access, next to not entering a DOB, preferred email address, Connect Care role, activate RA IT provisioning and indicate if the ILT is required. See more resources in the links below <p>IT Provisioning - Information for Receiving Agency Automation - Video - Knowledge Base - HSPnet Knowledge Base (hspcanada.net)</p> <p>IT Provisioning - Information for Receiving Agency Automation - Entry of student information (for Placing and Receiving Coordinators) - Knowledge Base - HSPnet Knowledge Base (hspcanada.net)</p> <ul style="list-style-type: none">• If you are in the middle of data entry and you are not ready for enrollment to happen, please do not turn on the classroom training “true.” If report is pulled and the classroom training “true” is on, the student will be enrolled.• The students legal name must be provided, not their preferred name.• There have been instances when the student wants to use a preferred name, it must be their legal name, the name that they legally have, and the name that they will legally need to provide to get their license.• You must provide your licensing body with your legal name; this is based on the fact from the Health Information Act that the patient has the right to know the legal name of the person providing their care.• It is known that there is much stress around the province with all the changes happening from a government perspective. We have seen, on a few occasions, experienced a PC laving and no orientation is provided to the new PC. We would ask if each PSI can have an orientation ready for such situations. Our team is working on completing a new PC Onboarding checklist to help with PC orientation as well. <p>Student Emails:</p> <ul style="list-style-type: none">• The sunset date emails that the students receive should have stopped effective March 31, 2023.	
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	<p>PITS</p> <ul style="list-style-type: none"> The tab that was labelled Connect Care Cancellation Revisions has been updated. If not already, this will be uploaded to HSPnet. Ngaire will upload to the Connect Care website. 	
1) Roles Disappearing	<ul style="list-style-type: none"> There has been issues in the last semester and this semester of roles disappearing. The students suddenly come into their placement one day and they no longer can access Connect Care. We get an e-mail; IT gets an e-mail, and the student has done their training. They have done everything. They were provided access and suddenly they do not have a role anymore. IT is still investigating the issue looking at potential solutions. 	If you experience this issue, please advise ASAP.
2) Launch 6 – May 6, 2023	<ul style="list-style-type: none"> Any students at Launch 6 sites will require Connect Care training going forward. There is a blackout period for training the week before and after. IT service desk response times might be longer right around launch. The May 8 meeting has been cancelled due to the launch. 	
3) Student Roles and Access Working Group	<ul style="list-style-type: none"> Developing standard provincial guidelines for student training, roles, and access. 	
Questions/Comments		
	<p>Comments/Questions re: Availability:</p> <p><u>Denise - U of A, Faculty of Nursing:</u></p> <ul style="list-style-type: none"> Cannot ask students to come in prior to the term start date as per the calendar stipulations to make a calendar change, we must do that a year in advance. It is difficult with some of our programs, e.g., the after degree program must have a designated month off based on how that program is set up. We are supportive if the first two days of the clinical placement is used for Connect Care training. <p><u>Rita:</u></p> <ul style="list-style-type: none"> Received feedback from the programs that it is preferable to have the Connect Care training at the beginning of the clinical rotations. 	



	<ul style="list-style-type: none">• Having the training done prior to this can interfere with class and study times. If it is a seven-to-10 day window, students cannot plan for work in that time, childcare can also be challenging.• If you know the first couple of shifts of the clinical placement will be used for Connect Care training, it would then be easier to work around. <p><u>Kristina:</u></p> <ul style="list-style-type: none">• One of the challenges with getting the availability sooner is the data entry.• If only 1/3 of the schools is entering their data far in advance, it makes planning impossible.• I could plan 200 seats for Calgary for May 1 and then two weeks out, which is in the seven-to-10-day window, somebody turns on 40 extra seats.• That is two more classrooms of 20 students and two to four more trainers that we must find on the fly.• Part of the forward planning that we would need from all schools would be more accurate data entry sooner.• In agreement that doing the training in the first two days of placement would be ideal, however in January and September the volume is 3000 students, and we cannot guarantee everyone would be trained in those first two days. <p><u>Rita:</u></p> <ul style="list-style-type: none">• Completely understand the other side of it, the other huge piece is the responses from placements. Many times, the response time is past the 45 day window, sometimes even well within 30 day window. If there was some way, we could get placements all accepted in the timelines that are set out by HPSP, that is where the solution lies?• Look at more resources, training the DCs so that responses in HSPnet coincide with the deadlines that Connect Care has. <p><u>Kristina:</u></p> <ul style="list-style-type: none">• Of note, some AHS sites will turn students away if they are not trained on day one of their placement, this causes many challenges as well. <p><u>Denise:</u></p> <ul style="list-style-type: none">• As some sites do not allow students who are not trained, perhaps when speaking with the units provide information to help them see the value of students doing a buddy	
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	<p>shifts on the first day so that they can still get some time in, and it would support their Connect Care training.</p> <p><u>Jacqueline:</u></p> <ul style="list-style-type: none">• Highlighting what Kristina mentioned earlier, the sheer volume of students and we cannot train 5000 students the first week of the semester, it would be impossible.• This is where we need some flexibility and some other solutions. Although training the first two days makes sense in terms of having the dates available, it is not feasible for everyone.• Knowing when the classes are, and planning accordingly poses a challenge as well.• Kristina works with the credential training team and requests 600 nursing students that require “X” role and needs classes in the zone for training.• If the information is not in HSPnet we will not know how many seats are needed and do not know when the classes are. <p><u>Kristina:</u></p> <ul style="list-style-type: none">• We receive most of the data 45 days in advance, if lucky 30 days, data is still being entered three weeks from placement. With this we do not have the time to collaborate with the schools. Even if we were able to offer 600 students and offer 60 sessions to 10 schools and everyone picks the same dates, there will be disappointment.• While in theory this is a good idea, unless we can get to place where we are planning six months in advance, it is unlikely we could accommodate this request.• The preference for the training team would be to have the data six months in advance, but it is understood this information is not always known.• Hopefully in the future as we go forward and all the units have launched and the role requirements are clearer, this could be a possibility. <p><u>Kathryn – Academy of Learning:</u></p> <ul style="list-style-type: none">• Is there any possibility of doing the training online?<ul style="list-style-type: none">▪ This has been looked at over the last four years, and the issue with this for most of the classes is the equipment that is needed right with you as you need to do scanning.▪ There are certainly aspects of the training that can be done online, and the AHS teams are looking into this, but the equipment that is needed is the issue.	
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	<ul style="list-style-type: none">▪ There is no virtual option for training outside of the AHS network, which is the first complication.▪ Ngaire is still working on setting up satellite labs, but those have not been finalized.▪ Another complication is the ratio of CTs to students in the ILTs.▪ Certain devices that are shown in the classrooms, such as the Rovers, and you need to be able to see it.▪ Epic is quite strict with their licensing and training requirements which causes limitations as well. <p><u>Maggie – Red Deer Polytechnic:</u></p> <ul style="list-style-type: none">• Has the Standardizing Roles and Access working group been looking into streamlining some of the roles? Some of the role's e.g., med surge and rural nurse are more similar than different, this could help reduce the amount of ILT training.<ul style="list-style-type: none">▪ This has come up multiple times. As you may know that the roles were made for the staff, and the staff do not usually move month to month, so the ILT roles are comprehensive.▪ The first task for the newly create Connect Care Student working group will be to highlight what the guidelines are going to be for student roles and then it will be to define what is an appropriate role or not for a student for now on.▪ We will communicate with the destination saying that the process is no longer simple. It will have to go to the Connect Care Student working group where they will decide if it is an appropriate or not role for the student. After this it must go to the Provincial Connect Care Role and Access committee for approval.▪ We will have to be a lot more diligent at looking at what roles we have allowed, should they continue, and should there be some changes.▪ Hopefully in the next few months different solutions will be available, there is a lot of work involved. <p><u>Maggie – Red Deer Polytechnic:</u></p> <ul style="list-style-type: none">• Is this working group looking for members that are familiar with the clinical component of Connect Care to sit in as advisors?<ul style="list-style-type: none">▪ This will not be open to the outside because a lot of it will be dealing with very technical issues in terms of access and the development of roles.	
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	<p><u>Stacy – U of C</u></p> <ul style="list-style-type: none">• To be clear, buddy shifts prior to having Connect Care training is, okay? We were told that this was not allowed.<ul style="list-style-type: none">▪ The reason that we have said that was not okay is because the student absolutely cannot provide any care if the student has not had Connect Care training. They cannot document and by regulation you must document the care you provide.▪ If the shifts are going to be purely observation, they can happen.▪ We have heard from many schools, programs, and regulatory bodies that there are only certain hours as part of the clinical hours that can be used for observation. If there are too many, the student will not have enough clinical hours to pass and move to graduation and get their license. <p>Comments/Questions re: PITS:</p> <p><u>Rita:</u></p> <ul style="list-style-type: none">• Does this include extensions?<ul style="list-style-type: none">▪ It does unless the you changed the date within seven days of start of the placement you do not require a PITS. <p><u>Jean:</u></p> <ul style="list-style-type: none">• Just to note, when you're making a modification to a role on the new labeled tab, if you're removing or adding, can you make sure you put all the roles and sometimes maybe it's just me, but if you're adding a role, I need to know if the old role is being removed or this and that this is an additional role.• I am just asking that if you are removing a role, it goes in red and the other one goes in green. <p><u>Lori H:</u></p> <ul style="list-style-type: none">• Just to confirm that PITS is populated for placements still using legacy programs and/or changes re: ILT training?<ul style="list-style-type: none">▪ That is correct. Until we are completely using Connect Care, PITs are still populated for those using the legacy programs	
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	<p>Comments/Questions re: Cancellations:</p> <p><u>Jacqueline:</u></p> <ul style="list-style-type: none"> • As Kristina noted earlier, Epic is very proprietary, and we must report to them and to AHS. • There are external audits by the Auditor General as they want to ensure that once access is given to a student that they are only looking at their patient’s chart. • I have received requests from Privacy to ask where the students are from and to provide information from the school as many infractions are being discovered. • The student cannot have access to roles that have been cancelled. <p>Comments/Questions re: Launch 6</p> <p><u>Shantelle:</u></p> <ul style="list-style-type: none"> • Working extremely hard in the background to have the DCs accept/decline as soon as possible so that the schools can go in and complete their placements, but we are starting to see that there are some placements that have been confirmed and they're missing the key information to support automation and make sure that the students are trained for Connect Care. • Another key message we do not want our destination coordinators or unit managers, educators on the sites to be bombarded with messages about Connect Care and student roles. We would ask that you use the tools that AHS has so kindly developed. • It is highly recommended that you use the catalogue and the checklists. 	
Next Steps	Notes	Action
	<p>Date: June 12, 2023 Time: 11:00-12:00 Location: Virtual Meeting via MS Teams</p>	<p>May meeting cancelled due to Launch 6.</p>