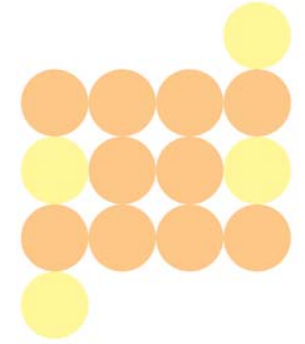


# STOP Program



## STOP Online Portal Q&A





# Logging In

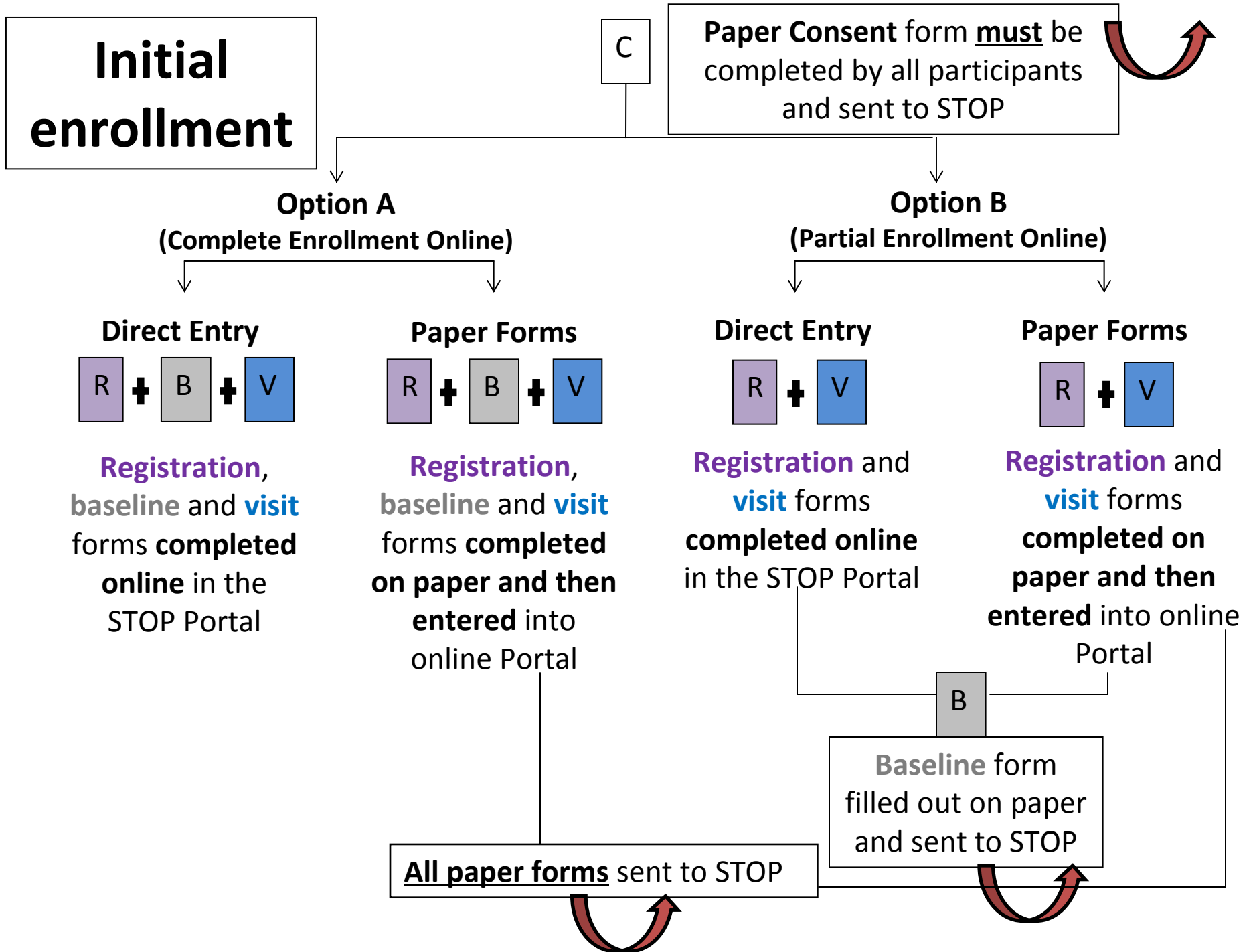
**I've tried to log in several times and my password doesn't work.**

- Please be sure to use the temporary password sent in the email from STOP Study and not the Initial Login Key that was sent by a STOP Coordinator
- If still having trouble, please contact a STOP coordinator and he/she will reset your account

# Enrolling Patients

**I've completed the registration on paper for a new client. Should I send you the paper or enter myself?**

- To take full advantage of the portal, for both viewing the most up to date information on a patient/client, or to use the online inventory, clients should be enrolled online, either directly or by entering their data soon afterwards at your site
- Consents must be completed on paper and always sent to us. Any other forms completed by a patient/client on paper must also be sent to us as they are a source document, according to our research ethics board.
- The flowcharts on the following 2 slides explain



# Filling out visit forms

Direct Entry



**Visit** forms are entered **directly** into the online Portal

Paper Forms



**Visit** forms completed on paper and then entered into online Portal

All paper forms sent to STOP



# Enrolling Patients

**Do the baseline and visit forms become part of the patients profile because I sometimes refer back to the paper ones for certain information?**

- All the patient surveys are available to download to a pdf and saved to your patient's online records.
- All forms which you fill out online remain in the system and can be reviewed by you at any time

**The forms become part of the patient profile, can they be changed at any time?**

- Contact information can be updated, but no registration/baseline data can be changed
- We are investigating the ability to make changes to the intervention/visit forms online in the event that some information is entered incorrectly, such as number of weeks, and saved accidentally

# Follow-Ups

## **Are doing the follow-ups mandatory?**

- Typically, our staff at STOP conduct the 3, 6 and 12 month follow-up surveys. Some sites have asked for the ability to conduct a follow-up survey themselves in order to increase the response rates.
- Increasing the response rate helps to provide more accurate quit rates as we make a conservative estimate on non-responses being not successful in quitting smoking

# Follow-Ups

## **Is there a way to know in advance which clients at my site are due for a follow-up?**

- The patients/clients due for follow-up survey will soon be available to you on the STOP Portal. This will be in the form of a screen displaying follow-ups due by their patient/client ID.
- For individual patients in for a visit, their patient profile will also highlight whether a follow-up is due.
- STOP staff will not be sending a list to sites informing them of upcoming follow-ups due.



# Follow-Ups

**When viewing some of my patient profiles, I noticed that some of my clients had not conducted a follow-up for some time. Can I withdraw them from the program?**

- Regardless of when your patient/client last completed a follow up survey, their consent is valid for one calendar year unless they explicitly withdraw from the program.
- Due to the large volume of calls that our STOP staff are required to place, the number of calls each participant receives is limited. If the contact information is out of date, or if the patient/client does not answer their phone the limited times that they are called, then a follow-up survey does not happen.
- Practitioners can help to improve the response rates by conducting a follow-up survey if it is due, or making sure a patient's profile has up to date contact information. The surveys are also sent via email for anyone with an email address. This information is missing for many patients/clients.

# Multi-Site vs. Individual Site

**We are a multi-site but we noticed only 1 inventory and only 1 site name when logging in. Why is that? How do we place NRT orders for different sites?**

- If you are a multi-site, and you only see 1 inventory and only 1 site when logging in – your organization selected the collapsed model.
- Collapsed model – patients will have the ability to participate in STOP by going to all sites interchangeably (i.e. Site A this month, site B next month).
  - Downside of this model is that the inventory is also shared.
  - Under the collapsed model, when you place the NRT order using the Portal, the NRT will be delivered to only 1 site. To find out which site, please look at the 3-digit code printed on your forms (ignore the site name section as the code is more important for the collapsed model).
  - If you would like to place the NRT order to one of the other participating sites, please fax us the NRT order form as you did before and write the delivery address on the form.
- Individual model – patients can participate in the STOP program only at the site they initially enrolled because the system treats the 2+ sites as different organizations.
  - Upside is that the inventory is accurate for individual sites.

# Inventory

## Why am receiving a lot of emails notifying me of negative inventory?

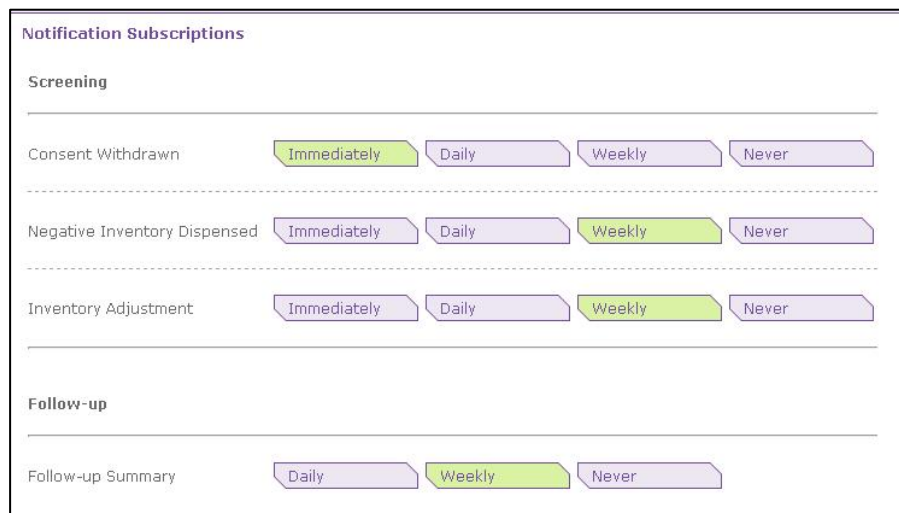
- Practitioners will receive notification that the site has a negative inventory when more NRT is dispensed than is present at the site. All sites had zero inventory when the portal launched, and every visit form entered will result in a negative inventory.
- Once you are certain all visits are entered directly online (and no more visit forms sent to STOP), you should make an inventory adjustment to update the portal with your actual inventory.

## How do I turn off the notifications?

- Until you are ready to use the inventory online after your site is entering all the visit forms into the portal, you will receive negative inventory notices.
- You can change the setting for your notifications under the Administration tab
- See images on next slide on where to change notifications

# Inventory

How to turn notifications off or make less frequent:



# Inventory

## **Do we still need to keep paper copies of inventory?**

- For transition period, continue to track your site inventory on paper until you have all your visits entered online and done an inventory adjustment.
- You may order your inventory online once you are using the portal however.

## **Does Total NRT Dispensed display accurate number of weeks for patients/clients enrolled before January?**

- No, as we did not collect the amount of NRT dispensed prior to the new visit forms being used starting January 1, 2014. The number of weeks of NRT displayed for each patient/client enrolled before that time only includes data entered in the new year.
- For these patients/clients, you will need to consult your patient files (and add what is being displayed in the portal) in order to ensure that clients are not exceeding the 26-week NRT limit. Cumulative NRT dispensed can be added to the comments section on the intervention form.

# Weeks Dispensing NRT

## **How do I calculate a week's supply of NRT for short-acting NRT? i.e. 1 box gum to last 2 weeks**

- Use your best estimate of how long you expect the short-acting NRT to last. Number of weeks dispensed is intended primarily for the patch.

## **Does the portal flag when 26 week limit is reached?**

- Yes it does. You may open a new intervention form, but if the 26 week limit has been reached, no inventory can be added to the system.
- You may not give that client/patient any more NRT during their active consent period. You may be able to dispense NRT again after their year is complete.

# Weeks Dispensing NRT

**In the inventory log, we were previously able to write in "sample" to use the short acting for clients to try. Will we still be able to do so on the portal? If so, where do we input it?**

- If you open a pack of short-acting NRT for a patient/client to sample in the office, then it will need to be noted, otherwise the inventory at your site will be off.
- If you are still tracking inventory on paper, then note the opened short-acting NRT in those logs.
- If you are already using the online inventory, then an inventory adjustment can be made to note that in the portal

**If I double up the patch for a client, do I double the number of weeks NRT dispensed?**

- No, the number of weeks should reflect the actual number of weeks a client will be requiring the patch, regardless of the dosage.



# Ongoing training

## **Can the videos be posted so we can do them on our own time?**

→ We have posted all the training videos and added a link for downloading the PDF manual on our website.

<https://www.nicotinedependenceclinic.com/English/stop/Pages/STOP-Portal-Training.aspx>



Thank you!

Questions?

