

Cyberseminar Transcript

Date: March 20, 2018

Session: Secure Messaging for Researchers with Limited Experience Using Secure Messaging

Presenter: VA Research Team

Good afternoon everyone and welcome to today's Cyberseminar. We'll be focused on using My HealtheVet, Secure Messaging for researchers. So my name is Soundia Duche. I'm a program analyst here in PRIDE, the Program for Research Integrity Development and Education, located within ORD. In the room with me today is Dr. Karen Jeans, who is the Associate Director of Regulatory Affairs for CSR&D, which is the Clinical Science and Research and Development Program, here in ORD and also Ms. Lucinda Shouse, whose a program analyst within CSR&D as well. And joining us remotely, we have the pleasure of being accompanied by the My HealtheVet team which is led by Dr. Kim Nazi. Now ORD recently released a Guidance Document on using Secure Messaging for researchers and that Guidance Document was done in collaboration with the My HealtheVet team so we really want to thank them for all their hard work in helping us with getting that document published. This training will be led by Kim Adams, who is a member of the My HealtheVet training team. Kim is a nurse, trainer, and technical writer who has conducted trainings on various software since the early 90s and she has been doing training for the VA for the past six years and so, Kim, if you're ready, I'd be happy to turn it over to you so that we can get started.

Thank you Soundia, let me get my presentation up and running. Well, good afternoon, my name is Kim Adams, and I'll be your presenter today and we're going to learn how to use Secure Messaging with research studies. As Soundia just mentioned, the guidance for VA researchers in use of the My HealtheVet Secure Messaging Document was recently released and this document provides guidance on the use of My HealtheVet Secure Messaging for communicating with the VA subjects. This course was designed for researchers who are not familiar with Secure Messaging and, therefore, it includes step-by-step instructions for using Secure Messaging. Just a few housekeeping items, as Heidi mentioned, this audio has been placed in listen only mode but I do want you to ask questions, so please be sure to use the chat window to ask questions at any time. That way they'll be there when we stop for questions at the end and you won't have to worry about remembering them. Also, you do have the presentation available for you to follow on and take notes. There is a link in your reminder for today's CyberWebinar. Now, Secure Messaging is a great tool that's currently being used between Veteran's and healthcare providers. Today we are going to go through the 14 questions that are covered in the Guidance Document and learn how to use Secure Messaging with research studies. So, upon completion of this session, you're going to be able to describe My HealtheVet Secure Messaging, explain how Secure Messaging can be used by VA Researchers, state why Secure Messaging can't be used for research recruitment, explain the requirements to use Secure Messaging to communicate with consented VA subjects, understand the decision making process for using Secure Messaging for research, describe the format for naming a Secure Messaging Triage Group for a specific study, list the steps to use Secure Messaging by VA researchers for an approved VA study, explain how to ensure messages from subjects in a VA study are received, also describe how VA study subjects can

register for My HealtheVet, list considerations for instructions for Veterans for the use of the Secure Messaging with a study team, describe the steps to handle a secure message received in error for the healthcare team, list the business rules for timeliness of response to a Veteran's secure message, explain the process to handle complaints through Secure Messaging, and explain how to document communication with VA research subjects. As I said, Secure Messaging are...

Soundia: Kim, this is Soundia, you have to accept the screen so that we can see.

Kim: Oh my apologies. I just took right off.

Soundia: Do you see that box.

Kim: I do not. I'm still seeing the box I was referring to earlier.

Soundia: Okay. It might be, I don't know if you can minimize the box that you saw earlier and then you'll probably see it below a pop-up and it says View My Screen, or Accept?

Kim: Let me see if I can just move it around because when I minimize it, it takes the whole Web-X down.

Soundia: If you are already showing your PowerPoint, you have to get out of that mode. You won't be able to see it if you've already launched your PowerPoint presentation.

Kim: Okay. I did. Let me get back out. No mam. I do not have a little box to select.

Soundia: Try to minimize everything.

Kim: I did.

Soundia: Do you have your windows screen up? Are you seeing your window screen?

Kim: I do and that's it. There's nothing else.

Soundia: No pop-up?

Kim: Nope.

Soundia: Alright. Just one second everyone. Sorry for the difficulties. Let's see what's going on. Heidi said she sent it a few times so my fear is just that sometimes if there is anything, you know, layered on top of it, you're not seeing that, it's a little pop-up.

Kim: No. The only thing I have on my screen is the Web-X information itself.

Soundia: Please forgive us everyone. We're just going through some technical difficulties.

Kim: Which of course when I finally did our test.

Soundia: Of course. Heidi sent it a few times. She has to call back in.

Heidi: Sorry my audio died on me here so I will take this back. Kim I'm making you the presenter right now so it's just that pop-up on your screen with that big blue button to show your screen.

Kim: No mam.

Heidi: Click on what looks like the big blue flower in your task bar at the bottom.

Kim: I just did. I just did everything you know by minimizing and then click the Web-X link in the bottom and there's nothing there. I even hid the control panel just to make sure it wasn't hiding behind it. Is there someone else that can share their screen and I can talk to it?

Heidi: I'll pull the slides up on my screen. We're going to have to start up at the top and you're going to have to give next screen, next screen . . .

Kim: Will do. I don't know what's, where it is.

Heidi: I also cannot do questions, Soundia, you're going to have to do questions.

Kim: Now, Alicia could also, if you could make her presenter she could present for me and that would enable you to do questions as we have her her on back up in case the weather was bad.

Heidi: Alicia, do you have the slides up on your screen?

Alicia: Yup. I do have the slides up on my screen so if you would like to make me presenter, I can drive those.

Heidi: Did you get the big blue button that says show my screen?

Alicia: Yes. I did get it so let me know if you are seeing my screen.

Heidi: We can see your screen. Yes.

Alicia: Okay. Great and you're seeing the PowerPoint.

Heidi: We can see everything on your screen just to let you know so if you get pop-ups from Outlook or Instant Messaging we will see those. You need to put the slides in the slideshow mode.

Alicia: I can get that.

Heidi: Okay so right now you're in presenter mode and so you need to go to display settings.

Alicia: Yup. I'm pulling this over to my other monitor here so, just a second. Sorry about that.

Heidi: Okay. There we go.

Alicia: We're good? Okay?

Kim: However, I cannot see them. I don't know what is going on. I cannot see them otherwise but I think we can still do this. If you could go to the slide that is #4, Overview of Secure Messaging for Researchers, and we'll start from there because we just went through the agenda, the objectives, so we don't really need to see that and we can list slide #4. Are you there Alicia and I'm sorry I'm doing this blind.

Alicia: That is okay. I am on slide #4 Kim.

Kim: Okay, thank you. As I started to say this Secure Messaging is already being used to improve the communication between healthcare providers and Veterans, and research studies can utilize Secure Messaging in a variety of ways also. Secure Messaging for Researchers is an easy-to-use online messaging system that is available through My HealtheVet for the research subjects. It's safe and secure, and is a valuable tool that can be used for communicating with consented VA study subjects. Now today's presentation is geared towards Researchers that are not currently using Secure Messaging and want to add using it with their research studies. So, therefore, it includes step-by-step instructions for the use of Secure Messaging. Now, if you're currently using Secure Messaging, there will be a presentation available to you that is called the Secure Messaging for Researchers Course 1 and it just contains the information for the research study set up and does not include the step-by-step instructions. So let's look at some of the benefits to using Secure Messaging for research studies next. Next slide.

Secure Messaging is a convenient method of communication for both subjects and Researchers. It's confidential and a secure method of communication because the subjects have been authenticated and the subjects can respond at any time, not just during routine office hours. There's a distribution list that we're going to look at later in the presentation where Researchers can use that to send secure messages to up to 250 people at one time. It's also easy to add the contents of Secure Messaging in the Computerized Patient Record System, or CPRS when it's appropriate. We are going to cover these benefits and how to set up and use Secure Messaging with your research study in today's presentation. Let's start where the Veterans go to use Secure Messaging, which is My HealtheVet. Next slide.

The web address for My HealtheVet is www.myhealth.va.gov. Now My HealtheVet has a ton of information available. It is available 24/7 for Veterans and their families, and using My

HealtheVet can help improve access to services, enhance health literacy, improve communication, foster integrated care coordination, and enhance satisfaction with patients. It has links to health information articles and access to health data that is either self-entered from their VA health record, or both. Let's take a look at those features. Next slide.

There are many different features on My HealtheVet and which of these features can be accessed is determined by the account type. Even a visitor, without registering for an account, can access the mental health tools and the medical library sections in research health. There are a lot of areas on My HealtheVet where all of the different account users can self-enter health information. That information can then be printed and shared with family members, caregivers, and non-VA health providers at the Veteran's discretion. The basic account holders can do all of the self-enter information and also the healthy living assessment. There are two other account types with access to more features. Next slide.

The advanced My HealtheVet account holders can refill their VA prescriptions, review and maintain their medication history, and also view their VA allergies. You can see the different items that can be done by the different accounts with the different little symbols next to them here on the slide. Now, the premium account holders, have access to everything that My HealtheVet has to offer, including Secure Messaging. The non-Veterans that are participating in a research study can have a premium account also. So, as we just saw, which of the features in My HealtheVet they can utilize is determined by their account and let's just review those different accounts again. Next slide.

Anyone, Veteran and non-Veteran, can register for a basic account and that basic account allows for self-entering of information and then they can print it. An advanced account provides more access, while the premium account allows access to everything including Secure Messaging and a user can see their account type each time they log in. It's located next to their user name which you can see on the image to the lower right on your screen. So let's look at how users can register for My HealtheVet. Next slide.

First, the user goes to myhealth.va.gov and selects the Register button. A registration form displays to be completed. Next slide.

If the research study subject is a Veteran receiving VA medical care, they must select both VA patient and Veteran under the relationship to the VA section. You can see that to the right on your screen. When registering for My HealtheVet, a non-Veteran research participant needs to select the VA patient. The participant must have a treatment facility that belongs to one of the VA Medical Centers and then the My HealtheVet System will verify that they are a VA patient and, if true after they complete the registration process, the non-Veteran gets an advanced account. Now, we said that you are going to need a premium account so let's see the rest of the steps to continue registering and then what we have to do for registering for premium. Next slide.

The user then accepts the My HealtheVet terms and conditions if they have not already accepted them, and selects the Create Your Account button and they now have an advanced account and can upgrade to the premium account. Remember, in order to access Secure Messaging, you need that premium account. Next slide.

To obtain a premium account, they must be authenticated, that is, being certain of their identity and then linking their VA account with My HealtheVet so that information can be shared. There's a couple ways of accomplishing this that we're going to look at next. Next slide.

One way is in person. They're going to authentic in person by going to the local VA facility, showing their government issued photo ID, and signing the VA Release of Information form. Now this can either be the paper form or, at some facilities, can be electronic using the signature pad. Then, once they are authenticated, the subject will be upgraded from advanced user to a premium user with access to all of My HealtheVet. Now, if the user has DS Logon Level 2 credentials, there is yet another way to have premium access. It can be done all online. Next slide.

A research subject with a DS level 2 Logon will automatically be an advanced user when they log in to My HealtheVet and they're going to see an Upgrade Now button in the header. Once selected, it will display the account upgrade page. They select the box in front of *I certify that I am the account holder of this My HealtheVet account and authorize a requested upgrade to premium My HealtheVet user account* to certify that they are the account holder. They are immediately upgraded to a premium account. Now, if any time any of the research subjects have any difficulty in registering or upgrading to a premium account, please refer them to your local facilities My HealtheVet Coordinator and they can help them get settled. Well we've looked at what is necessary for the research subject to participate in Secure Messaging. Now let's look a little more at what Secure Messaging is. Next slide.

Secure Messaging is an easy way to keep in contact with your research subjects and they with you. Secure Messaging had many updates in this latest release and is even easier for My HealtheVet users. Users can see how many unread messages that they have, can compose messages, and manage their files from the homepage itself without having to use a dropdown menu or having any more landing pages. Composing the secure Messages is also streamlined and easier to use. You can see an example of the home page and also the page they'll see when they begin to compose a secure message there on your screen. So you can see it's very convenient for subjects to use. Next slide.

There are multiple ways for them to access it. It can be accessed directly from My HealtheVet as we saw, or indirectly through a link to My HealtheVet on vets.gov, access.va.gov, and even if it's va.gov using a DS logon, and, of course, it can be done on a smartphone, tablet, laptop, or desk top. Being available 24/7 makes it easy to reach out to the research team. Now, let's talk about the research team members. Is there anything special that they need to do to be able to use Secure Messaging? Next slide.

Well, the first requirement is that the research team member must be a CPRS user. Then they must complete the mandatory education and training for your local facility and once that is completed, they are going to need to have the My HealthVet Coordinator, or the Secure Messaging Administrator for your facility, whichever you have, now typically it's more often My HealthVet Coordinator so from here on out, I'm just going to say My HealthVet Coordinator to cut down on doing the either/or. They're going to have the my My HealthVet Coordinator then activate them within administrative or Admin Portal and once the team member has been activated in the Admin Portal, then the research team themselves, needs to identify the triage method of incoming messages and each team member then sets their preferences accordingly, and we're going to go through those steps. Now in the research study itself, Secure Messaging must be specified as the method of communication and an alternative specified for subjects not desiring to participate in Secure Messaging unless the nature of the study itself requires participation in Secure Messaging. So we've looked at what each team member must do in order to use Secure Messaging in a research study and now let's see what must be done in the paperwork of the study itself. Next slide.

Secure Messaging can be a very valuable communication tool in your research study, even for VA sensitive information since the subjects have been authenticated. Before your research study paperwork is submitted to the Institutional Board of Record, any learning needs need to be identified as part of the standard operating procedures for this study. As I mentioned before, in the research study itself, Secure Messaging must be mentioned as the method of communication and also, again, the alternative must be specified for the subjects not desiring to participate in Secure Messaging unless the nature of the study requires participation in Secure Messaging. If the research study requires access to Secure Messaging, then this should be noted in the study eligibility criteria and also outlined in the study protocol. Now it's very important to note that you cannot recruit for research studies using Secure Messaging. Let me explain why. Next slide.

There is no way for a Secure Messaging user to opt out of receiving research recruitment messages or flyers currently. So, recruitment by Secure Messaging will not be permitted until the functionality to opt in, or opt out, of receiving research recruitment messages is available. Let's look at the Institutional Review Board requirements next. Next slide.

Now these requirements are not changed. As part of the IRB's evaluation of non-exempt research, the IRB must apply the approval criteria in 38 CFR 16.111. These criteria include evaluation of communications provided to study participants in order to ensure that appropriate safeguards exist to protect the rights and welfare of research subjects and, when appropriate, that there are adequate provisions to protect the privacy of subjects and to maintain the confidentiality of data. If the research study involves medical intervention, then any research related notes saved in CPRS, could be viewed by any VA staff with appropriate access to view the subject's VHA electronic health record so this should be considered during your study's planning phase. Let's look at a few more IRB requirements next. Next slide.

The specific types of communication that will be utilized in a particular research study must be specified in the study protocol. The IRB application, or supplement to the IRB application as part of the IRB application process. Now please note that the applicable information security and privacy requirements must be adhered to in addition to the IRB approval requirements for non-exempt human subject research activities. If a VA researcher is planning to use templated messages that will be sent to research participants through Secure Messaging, the content of these messages must be reviewed by the IRB of record for the research activity. So, again, not really any new requirements, just applying them to this method of communication with subjects. Let's look at the various ways of communicating within a research study next. Next slide.

A research activity may use multiple methods to communicate with research subjects: U.S. mail, Secure Messaging, e-mail, text messaging, telephone calls, or a combination of any of these methods. Whatever is decided for the communication type, or types, must be specified in the study as the method of communication and, as we said earlier, there should be an alternative method of communication available and listed in the study when the subject is not wishing to use Secure Messaging, again, unless that's an inclusion criteria for the research study. Now you may be thinking there's a lot to do to use Secure Messaging in your research study but, don't worry, you have help available. Next slide.

The My HealtheVet Coordinator will help you set up Secure Messaging for your research study and we've also developed some tools for you to use so that you can know that you have everything needed before you consult the My HealtheVet Coordinator. These resources will be found on your My HealtheVet Product Site. Let's take a look at these tools, starting with the Decision Tree first. Next slide.

When you're looking at the slide of the Decision Tree we're going to start in the upper left hand corner with the blue box. So, the first thing to consider is, will this study involve medical intervention? If yes, then we are going to follow the green arrow over to the yes and then you're going to proceed to the next question. If no, then you're not going to need to create a new Secure Messaging workload clinic and you can skip to the next slide. Alright, so the answer was yes. The study will require medical intervention. The next question is, will documentation need to take place in CPRS? Again, if the answer is no, then you will not need to create a new Secure Messaging Workload Clinic and can skip to the next slide. If the answer is yes, that the study will be involving medical intervention, and documentation will need to take place in CPRS, then ask yourself if workload credit or increments of time will need to be captured. Again, if the answer is no, you can skip to the next slide. Now, if you've answered yes to all three questions, then a new Secure Messaging Workload Clinic will need to be created and the My HealtheVet Coordinator will need to know this so we've created a checklist for you. A setting up Secure Messaging for research study list has been provided for you and it will be there on the Product Site also. Then, if you said yes to those three questions, you're going to answer yes to question #1 on that list and then continue to the next slide. Now this Decision Tree is also going to be available for you as a quick reference guide so that you can have it easily available

to utilize these steps. The next steps are going to need to be completed no matter what answers you have for these first questions. Next slide.

There is a specific naming convention for the Secure Messaging Triage Group that we're going to cover next after we get through with the Decision Tree. So, you're going to enter that name for question #2 on the checklist. Next, you're going to enter the research team members that are going to be using Secure Messaging in the study, and that have all of their education completed for question #3. Next, you're going to finalize your list, your initial list of subjects to be associated to the Triage Group just created and enter that for question #4. Now we know that both of these lists that we just talked about, your team members and your subjects can change with time and you're going to need to have people both added and removed which can be done. These are just the team members and subjects to start the study with. Now, the setting up of Secure Messaging for research study list is complete and you can contact the My HealthVet Coordinator. Once Secure Messaging is set up for your research study by the coordinator, then a decision needs to be made for the triage process for incoming secure messages and each team member then needs to set their Secure Messaging preferences accordingly, and we are going to learn how to do that in this presentation also. So that completes the Decision Tree. Again, this second page here, all of these steps will need to be completed no matter what the answers were on the first slide. The first slide is just deciding whether a new Secure Messaging Workload Clinic needs to be created. So now let's take a look at the naming convention for Secure Messaging for Research Study Triage Groups. Next slide.

Now, there's a possibility that your research study subjects are already using Secure Messaging to communicate with their VA healthcare team. We want them to be able to distinguish between messages from the research study and the Healthcare team. For this to happen, a study specific name, utilizing the specific naming convention for Research Study Triage Groups must be used. So let's look at the specific naming convention next. Next slide.

First off, the character limit for the Secure Messaging Triage Group is 50 characters. The study specific name is created using a combination of four items; two standardized phrases and two study specific phrases. So it's going to begin with three letters indicating the study site, followed by the word "Research," and then it's going to be the study name or a short phrase that would allow identification of the message with the study, and then it's going to end with "STUDY_RES." So let's look at how this pulls together to describe this study that we have as an example there on the slide. Let's say that the Baltimore VA was a participating site in a multi-site study called "A comparison of Type II Diabetes and three modalities of activity to evaluate short-term and long-term effects on physical and psychological complications of diabetes." So the name then, the study specific name, for this associated Triage Group would be BAL-RESEARCH (which is a word that goes in all of them)-DIABETES AND ACTIVITY- (explaining the activity) STUDY_RES. Again, this is going to be available to you as a quick reference guide there on the Product Site so you can have that for easy reference. Now, let's look at the other tool we've been referencing, the check list. Next slide.

The setting up Secure Messaging for research studies list is a way for you to have all of the needed information together in one place. After using the Decision Tree to know if you need to have a new Secure Messaging Workload Clinic created, you're using the naming convention for research studies to name the study appropriately, and you've gathered the names of your research team and research subjects, you're now ready to complete the checklist and this is going to be found, as I said, on the My HealthVet Product Site and, once you have it completed, you'll know that you have all of the necessary information for your My HealthVet Coordinator to set up Secure Messaging for your research study. Let's review the needed information for the My HealthVet Coordinator. Next slide.

This is what you want to make sure you have ready and you'll have it if you have that checklist completed. The decision that whether a new Secure Messaging Workload Clinic is needed. Again, we use the Decision Tree to come up with that decision, the name for the study's Secure Messaging Triage Group using that specific naming convention, the team members for your Triage Group, the list of the subjects for manually associating in the Triage Group, and then you have it all in the checklist and when it's completed, you're ready to go ahead and contact your My HealthVet Coordinator. No let's talk about having your preferences set correctly when you're part of more than one Secure Messaging Triage Group. Next slide.

It's possible that researches could already belong to a Secure Messaging Triage Group and are now going to be belonging to a study specific Triage Group. It's possible for people to belong to multiple Secure Messaging Triage Groups but you can't have different preferences set for each of those different groups. We're going to go over each of the options and preferences and how to set them just a little later in the presentation but I wanted to emphasize that you can only have one set of preferences for your new message notification and your inbox views. What works well for both primary and secondary care teams is to have an initial reviewer that reads the secure messages as they come in and then assigns the messages to the appropriate team members and this can work for the research studies also. Assign one team member to be the initial reviewer and they will then review and triage the research study secure messages. The initial reviewer will either respond to the secure messages or reassign it to another team member as appropriate. Let's look at how you would set your preferences, depending on which triage type your Triage Group has selected. Next slide.

If you are having an initial reviewer for your research study secure messages and you are not that person, you're going to want to set your message notification to "On Assignment" and your inbox view preference set to "Only Messages Assigned to Me." If you do not have an initial reviewer assigned to the research study, or if you are the initial reviewer, you want to set your message notification to each message in your inbox view preferences set to "See All Messages." Now, if this is unfamiliar to you, don't worry. We're going to go through setting each of your preferences so that you don't miss any secure messages. It's very important that you set your preferences as soon as the Triage Method is identified. So, let's do a quick review of what's needed to set up Secure Messaging for a research study. Next slide.

After you have consulted with your local My HealtheVet Coordinator, you will have the Secure Messaging Workload Clinic created if needed. Again, that was decided using the Decision Tree the Triage Group created using a study-specific name and the specific naming convention, the research team members added as group members after they were activated within the Secure Messaging Administrative Portal, and the subjects associated with the study. And then, while you were going through the Decision Tree you decided who was going to be reading and responding to the messages from your research subjects, and lastly you make sure that everyone's preferences are set appropriately for the triage method that was chosen. Now let's look at the basics of using Secure Messaging. Next slide.

There are two ways to access Secure Messaging. If you receive an e-mail notifying you of a secure message you can just select the link in the secure message notification Outlook e-mail. Another way to access Secure Messaging is directly from CPRS. Next slide.

When you're in CPRS, go to the tools menu, and then select Secure Messaging. If you don't see Secure Messaging available in your tools menu, contact your facility's My HealtheVet Coordinator and they will get it added for you. Next, a window is going to display asking you to "Please Select Login to continue." Next slide.

You're going to select "Login." This is going to take you to the next slide where you'll see two options displayed to Login. Next slide.

You can select to "Sign In with your VA PIV card" but the recommended way is to select right below that which is "View Other Sign In Options." A window will display with two options and select a sign in with Windows Authentication. Now, typically, it doesn't require a User ID or password but if you're using a mobile device, it may require that to be entered. Let's start looking at the inner workings of Secure Messaging. Next slide.

The Inbox contains all secure messages received by the team and not yet marked complete. Users have the ability to search for a message within a folder and also move a message to a specified folder. We're going to see what can be done from the Secure Messaging Inbox next. Next slide.

Users can create new messages by using the new message button and also create personal folders to help organize your messages and there's also set folders already there that can be accessed. Now, let's learn how to navigate the Inbox. Next slide.

You can see an example of a screenshot of a secure message. Let's work our way down the column on the left of that. So at the top is the New Message button. From there, you can create and send new messages. Just below that is Inbox. All of the active messages are going to show there and that's also a way you can refresh and see if you have any new messages by selecting that Inbox again. Right below that is Escalated. Any messages will display there that have exceeded the three business day completion rule and still need to be completed so they

will be there in that folder. The one below that are Drafts. These are messages saved as a draft whether it is through auto save or manually saved. Next slide.

Continuing down that left hand column, the next one is Sent. These are only messages that you have sent but the completed folder contain all messages that the team completes, not just the ones that you do. Below that, is a Deleted folder. Now this folder is no longer functional but it does still show. The Reminder folder is, if a reminder is set, then a message will appear there. The Reassigned folder - that is where you can track your message history. The next folder is CPRS Progress Note Alerts. Now if any messages failed to save in CPRS they will be in that folder with the error explanation so that they can be fixed. Then below that, is My Folders. These are personal folders that you created within your own Secure Messaging account. Now let's take a look at the secure message itself. Next slide.

We're just kind of getting oriented here before we look at the different process. So at the top of each secure message, you're going to see first off on the left, the From. That is who the secure message is from. Next, on the right, is the To. That's the team that the secure message is addressed to. Next is Subject, of course that's the subject of the secure message and then to the right is the Date which contains the date and time. Now I want you to note, that this is always in eastern time and your three business day completion rule uses this date that displays here. Next slide.

Then the last two are the Assigned To. That's to whom the secure message is assigned to and, if it is blank, it means that message has not yet been opened. The last one to the right is Status. If the status is blank, the message has not yet been opened also and if it's been assigned, it's going to display there In Progress. Just so you know, secure messages will stay there for 12 months. Older than 12 months will be removed from your account and archived. So, we have gotten oriented in seeing what all the different areas are in Secure Messaging. Now, let's look at how you begin with Secure Messaging. Next slide.

You'll be activated for Secure Messaging by the My HealthVet Coordinator after completing the education that's required by your facility and each facility sets the requirements for that. It's very important that you set your preferences correctly to not miss any messages. To set your preferences, you select Preferences in the upper right hand corner from any screen when you're in Secure Messaging and this should be done the very first time that you log in to Secure Messaging. We are going to look at each of the different settings that were set in preferences next. Next slide.

First, the new message notification. You will receive a notification in the e-mail address that you set up for receiving these. There's a link in the email that you received that you can select and it will take you directly to that secure message. Now the new message notification will default to your VA email address used in Outlook. It can be changed, but it cannot be left blank. So to change it, you enter the email address where you want to receive the notifications and then select "Apply." Now right below that, in that same box, is the notify me and that's the next setting we're going to look at. Next slide.

You decide when you receive notifications by selecting from the dropdown menu under Notify Me. There are three options; Each Message, On Assignment, and Once Daily is the middle one and that's not recommended. You can see why because it could be a long time before messages got replied to, and the last one is On Assignment to me. If you are the initial reviewer, or the only person on your team, your notify preferences should be set so you are notified of Each Message. If you are not the initial reviewer, or the back-up initial reviewer, you may wish to set yours as being notified On Assignment. So, whichever the case may be, select one of the three options from the dropdown menu under Notify Me and then select "Apply." So we've made the selections of how we're going to receive secure messages, let's look at some of the options under Preferences for sending them. Next slide.

Distribution groups are a convenient way to send the same message to multiple people at one time. Let's learn how to set one up. Next slide.

As you can see on your slide, that one is right below the New Message notification. So the first step is to select "Create a Personal Distribution Group" in that manage personal distribution group section of preferences. Now, important thing to remember is the person that creates the distribution group is the owner. This is important because the owner is the only one that can modify this group. So let's go ahead and continue with the steps to create this personal distribution group. Next slide.

Next you're going to decide a name for this distribution group and enter it. You can see that at the upper left hand corner there on your screen. Now right underneath that you see two radio boxes. Be sure to select the "My Group" radio button below, otherwise, everyone can see and use this distribution group and your distribution group might be getting some weird e-mails they don't know what they're about. Then, you're going to select the appropriate tab to search for the people you wish to be in this group. There are three different tabs, or groups, to choose from; Patients, Clinicians and Staff Within Your Facility, and Clinicians and Staff in Other VA Facilities. Select the tab that you want and then search for and select for your desired members. Now you can multi-select several people at once and then select "Add." Remember that you multi-select by pressing the CTRL key while selecting the multiple people to add and you can have up to 250 members in a distribution group. Once you have them selected, then select "Save Group." So you can see distribution groups can be quite the time saver especially if you have questionnaires or something to be sent to several people at one time. You're going to want to maintain this list. You are going to add and remove members to keep the distribution group current. Let's see how to do that next. Next slide.

Now, in that same section where you created the personal distribution group, you're going to select "View" or "Modify an Existing Group." Then you're going to select the group name desired from the dropdown list and choose "Select." Now, remember again, only the person who created the distribution group can make any changes to it. Next slide.

The Edit a Personal Distribution Group page displays and your chosen Personal Distribution Group name will display there at the top left. You're going to see the existing group members in the column on the right. If you want to add new members, you're going to select "Search For Users to Add to the Group" and then select the desired new members and, again, you can multi-select, and then select "Add." If that's all you're doing then you can select the "Save Group." Now, if you have some existing distribution group members that need to be removed, the whole list that are in your group will display there in that right hand column. Select the ones that you want to remove and, again you can multi-select, and then you select "Remove" and if that's all there is then you can select "Save Group." Now, as quite commonly, a lot of times you need to both add and remove distribution group members and so you can make all of the corrections that you need and then select "Save Group." No need to go back in and out of this area several times to accomplish this. Now, let's learn how to customize what you see in your Inbox. Next slide.

You have the ability to customize what messages you wish to display in your Inbox. In the section labeled Inbox View there are three options in the dropdown menu next to display. These are: All Messages, Only Messages Assigned to Me, or Only Unassigned Messages. It's very important that you set this correctly to make sure that your secured messages are not missed. If you're the initial reviewer, or the only person on your team, your Inbox View should be set so that you see All Messages. If you are not the initial reviewer, you may wish to set yours to see Only Messages Assigned to Me and then select "Apply." Another section under preferences is Signature. Next slide.

You can save more time by setting up a signature once to be included in each of your outgoing secure messages automatically. In the box under Name, enter your name you wish to appear on the signature block at the end of your secure message. Then, directly underneath that, is the box for you to enter your title. Now, right underneath that, it says Include Signature with a box in front of it. Be sure to select that before you select "Apply" so that it will display in your secure message as desired. Now let's look at the last option under Preferences: Surrogate Message Forwarding. Next slide.

When you're going to be out on leave you want to make sure that someone is covering your messages. You do that by designating a surrogate to respond to your secure messages while you're gone. You can set this up yourself in the Secure Messaging Forwarding section in Preferences. Now, in that section, you're going to select the staff or Triage Group that is going to be covering for you while you are gone from the dropdown list under Surrogate. Then, you're going to set the date that this is to begin under the From Date and the date that this is to end under To Date. Now both of these dates can be entered by either typing in the box directly underneath using two digit month, two digit day, and four digit year, or, you can select the calendar and then the date. You can either select the box under All Day or, if it's just for specific hours during the day, you can enter the hours desired for those days. If those dates or times are incorrect, or if your time off changes, you can clear the dates and time set by selecting "Clear." After you have everything just right, then select "Apply." You can set up to five surrogates, including different time frames, for each of them at one time. Just remember

that entering a surrogate in CPRS does not set a surrogate here in Secure Messaging. They are separate. Now, using the steps we just went through, you can set this yourself in Preferences or you can let your Gatekeeper know and they can reassign your messages to your coverage. So we just learned how to set up a surrogate to cover your secure messages while you're away but there is something else important to remember about surrogate coverage. Next slide.

We talked about setting your Inbox to view setting to be sure that the messages are seen. A lot of times it's going to be set to On Assignment. Even though you have set up the surrogate to receive the secure messages, if the designated surrogate doesn't have their Inbox view in preferences set to All Messages they won't see the forwarded messages. So any time you're serving as a surrogate, you need to make sure and change your preferences to All Messages and it might be good to remind the person serving as a surrogate for them to do the same. Alright, let's look at what all you can do in Secure Messaging. Next slide.

Users have the ability to Create a New Message, Reply to a Secure Message, Move a Secure Message to a folder under My Folders, Save a Secure Message as a CPRS Progress Note, Complete, Print it, Reassign, and Close a Secure Message and this is all done from the Tool Bar right above. Users can also Triage and Reassign messages as needed. Next slide.

Again, this is all there in the Toolbar Above. Now, when you open a secure message, it reassigns it automatically to you. If after you read it, you decide that someone else is better equipped to answer it, or it should have gone to someone else to begin with, you can reassign the secure message accordingly and we're going to learn how to do that in just a few slides. I want to just remind you that when you open it, as I said, it does assign it to you automatically so you can't simply close it and ignore it. You either need to respond to it, or reassign it to someone else. But first, let's look at how to create a new message from scratch. Next slide.

When you're in your Inbox, we're going to select the "New Message" from the top of the left column. Then, to the right, you're going to select the "Search for a Recipient Link." Now there's a couple of key things to remember when your initiating a message to a patient. First and foremost, if you're on more than one Secure Messaging team, the Triage Group field below your name is going to default alphanumerically to the Secure Messaging Team Name closest to A and that may, or may not, be the name to which the patient is associated. So make sure, before you send the message, that you're sending the message from the Triage Group to which the patient is associated and, if you don't, the patient will not be able to reply to the message and, sadly, this still happens a lot. After making sure you have the appropriate Triage Group that the patient is associated with, now we need to add the desired recipient. Next slide.

The preferred method which will provide the best result is to search for a patient by the first initial of the patient's last name in addition to last four of the patient's Social Security number. This is similar to searching for a patient in CPRS. The staff also has the option to search by name. Just please be aware of the labels for the fields requested. You can see them there on the slide; First Name, Last Name, and then that farthest one to the right asks for the First Letter of the Last Name and the Last Four of the Social. So using the recommended method,

we would enter the patient's first initial of the last name with the last four of the social into that field on the far right, select "Search," and when the patient name appears in the Select Recipient field, highlight the name and then choose "Select." That way the name and recipient information will show up in that Select Recipient field. Now, some important tips for searching for a recipient. Next slide.

Don't forget to have that first initial of the last name with the last four of the social because if you don't, you won't see any results. If you're looking for a very unusual last name, you can search by the last name but be aware it generates a list of all patient's with this last name so be very careful of using this method with very common last names. You could end up with a huge list. Here's just a few more tips. Next slide.

If the patient that you're searching for hasn't logged into Secure Messaging at least once, they're not going to show up in your search. If you don't find them, try again. Maybe try using a different method of searching but if you still don't find the desired patient, then it's probably because they're not yet using Secure Messaging and you need to contact them to. When you are successful and the patient's name appears in the Select Recipient Field, you must highlight the name, and then "Select" in order for the name and recipient information to show up in the Select Recipient Field. If it's correct, then select "Add" to enter the patient's name to the secure message. Alright? What's next. Next slide.

Now that you have got the recipient added in the To field, we need to select a message topic. The different options are: General, Appointments, Medications, Test, and Education. They are all there in that dropdown menu. Then, below that, you can enter a message subject. Next, you type your message in the large, white box provided. Now, just to let you know, if your message does include internet links, they're not going to show up as a hyperlink in the message as you are typing, but they will show as a hyperlink for the patient when they open the message on their end. You also have the ability to attach a file and we are going to go over the steps for that in just a moment. Next slide.

So before you send, you should always proofread your message, double check that you have the correct recipient and the correct Triage Group that they are a part of, if you did add an attachment review it, and then you can select "Send." Let's talk about attachments for a moment. Next slide.

Now both subjects and staff have the ability to send and receive attachments and it works the same way for both sides. Research staff can send a questionnaire to the subject, the subject can then download it, complete, rename, and send it back and there are quick reference guides to give to subjects for this process. By selecting "Browse" it will allow you to search through the folders on your computer and on the network for the file you wish to attach to the message, double select the file you want to attach to place it into the field to the left of the browse button and then select "Attach." Now you can attach up to four files and the different formats that can be used are displayed there on your slide. The file size for a single attachment cannot exceed 3 MB and the total size for our attachments cannot exceed 6 MB. Once the file

has been attached, the staff will not be able to preview the document. Let's talk a little bit more about attachments. Next slide.

You should wait to add your attachment to your message to just before sending it because if it's added and then it's saved as a draft, even by autosaving, that attachment is dropped so you should always wait until right before you send it and make that your last step. To check to make sure your attachment was included you should see a paperclip icon with your sent message and then you can also view the attachment by selecting the secure message from the completed folder. Now, we're not only going to be creating new messages but we are going to reply to messages also. Next slide.

Just like in Outlook, you can open a secure message by selecting the hyperlink in the subject column. Some of the messages will have attachments included. Next slide.

If the sender has included an attachment, it will display as a hyperlink just below the subject. You want to select the attachment hyperlink and a message is going to display asking whether you wish to Open, Save, Cancel the message. Attachments cannot be saved directly to CPRS from Secure Messaging but they can be saved to CPRS using two different methods. Let's look at these next. Next slide.

An attachment can be saved to VistA Imaging and linked to a CPRS Progress Note by one of two methods. The attachment can be directly saved to VistA Imaging Import folder and then indexed and saved to VistA Imaging and this the preferred paperless method, or, the attachment can be printed and then captured to VistA Imaging using a flatbed scanner. This way is commonly done with outside medical records. Now if you have any issues or questions in this process, you should contact your local medical records or Release of Information Office. Next slide.

Because we want you to be sure and follow your facilities policy for saving attachments, if the attachment is a PDF file, a message will display when you open it. The message informs you that opening and/or downloading it will create a temporary file that allows the information to be viewed by others if the computer is shared. There are two options in this message; Agree, which accepts the risk and then allows the attachment to open, or Decline which will not allow the attachment to open. Let's go through the process of saving the attachment paperless next because not only does it save paper, but it also gives you a better quality image. Next slide.

Not everyone has access to save files to VistA Imaging. If you do, then you can save the attachment paperless. From CPRS, first select "Tools" then from the Tools Menu select "Administrative Tools" and then select "VistA Imaging Capture." Now, we're ready to save the attachment. Next slide.

After you've selected the attachment hyperlink, there will be a message displayed at the bottom giving you the ability to Open, Save, or Cancel. You want to select the arrow that is next to Save, and that gives you three options; Save, Save As, or Save and Open. Select "Save

As” and selecting Save As allows you to save the attachment directly into a VistA Imaging import folder. Next slide.

You’re going to select the desired folder to select the image to, name the folder, and select “Save.” Next slide.

Now you’ll be able to view the attachment in the VistA import folder with all of the options for that folder available. Next slide.

You’re going to select “Capture” which is a little bit farther than half way down on your screen and a confirmation message displays. You’re going to select “OK.” Now let’s look at some of the benefits of saving the attachment this way rather than scanning it in and saving. Next slide.

When you’re looking at the image in the display application, you’re going to see the image as it was sent. If it was sent in color, you’re going to see it in color. If it was sent in black and white, it’s going to save in black and white. If you printed the image and then used a scanner to save the attachment, it would not be as good of a quality image. It would display in black and white only and it would be less defined. Remember, your local medical records staff are the experts and you can confirm with them the best way to capture secured messaging attachments to VistA Imaging at your facility. Now, let’s look at replying to those secured messages that are sent to us. Next slide.

Select the message and then read it through to determine if you are the appropriate person to respond to this particular Secure Messaging. If not, you can reassign it to the appropriate person, and we’ll cover that in just a little bit, but if so, we are just going to simply select “Reply.” Next slide.

After you select “Reply” you are going to type the message. Remember you can attach files as desired in case you want to send additional information and then select “Send.” Now, let’s learn about what to do when you determine you are not the appropriate person to respond to the secure message. Next slide.

The system automatically assigns a secure message to the first Triage Team member who opens the message. Now, although there may be team members that are designated to Open, Review, and Sort the messages, any of the Triage Team members can open the message so, if you open one by accident, you can’t just close it. You have to either respond or reassign it. The staff member who initially opens the secure message will see a red banner at the top of the message indicating that the message is assigned to that person. After asking yourself if you’re the best person to respond to the secure message and determining that you are not, then you’re going to need to reassign that message and there’s two ways to reassign the message to another staff member. One is through the Internal Healthcare Team Communications Box and the other is a Reassign Message button. Let’s look at the Internal Healthcare Team Communications Box first. Next slide.

You can see what the box looks like there on the right hand side of your screen. Let's look at the different areas in the box first. First, you can see who the message has been assigned to. Remember it displays the person who opened it or was assigned it last. Right below that, is the link to be able to reassign the secure message to another member in your same team or Research Study Triage Group. Below that, is the message status, followed by a link to change the status of the message followed directly below by any previous comments. Now, when you're reassigning, do not change that status. You want to leave it as In Progress. Then there at the bottom there is a place to enter a comment if you wish. Now, something important to remember about comments. The Internal Healthcare Team comments are not readily seen by the patients as the secure messages are exchanged, but they are ultimately discoverable by the patient and the representative by a release of information request. So a good rule of thumb anytime you're writing a comment, is to always write them as though the patient or representative is looking over your shoulder. Now, let's go through the steps to reassign to another member on your Research Study Triage Team using this Internal Healthcare Team Communications Box. Next slide.

To reassign the message to someone else in your Research Study Triage Group, you can simply select the "Reassign Within Your Team" link from this box to the right of the message. Next slide.

Select the intended triage method from the dropdown list. You should not change the status as we said when you reassign it, and remember about the comments, the precautions that they are not readily seen but they can be, and then send by selecting "Submit." Now the secure message will appear in the assigned Triage Team Members inbox as assigned to them with a message status of In Progress. Now the other way to reassign a message is to select the "Reassign Message" from the ribbon. Next slide.

Sometimes circumstances arise that should be handled or addressed by someone outside of your immediate Triage Group and there's a feature that allows the message to be reassigned to another Triage Group, or individual. First, you open a secure message by selecting the subject hyperlink and at the top of the open message, you'll see several different options; Reply, Move Selected To, Move, Save it as CPRS Progress Note, Complete Message, and Reassign Message. Next slide.

We are going to select from those options "Reassign Message" and by selecting that, you're going to get a reassigned message box superimposed over your message which will be grayed out in the background. When that pop-up window appears, you'll be presented with three different options. Next slide.

Those three options are: to a team member in your group, to a Triage Group within your facility, and to a Triage Group outside your facility and we're going to look at each option. Next slide.

The first option, which offers the ability to reassign the message to a team member in your group, looks and acts similar to the one that we just covered in the Internal Healthcare Team Communications Box. For this one we're going to select to a team member in your group and then select "Submit." Next slide.

After you select "Submit," a list of clinicians will display to choose from for reassigning and using the dropdown box, will present your Triage Team members, select a team member, enter any comments, again remembering the precautions, and this time you're going to notice that the option of completing the messages is missing from the box. It's just for reassigning, so you won't have to worry about changing the status by accident. Now, another option is if the Veteran's message could be best handled by another group or specialty at the facility besides your Triage Group. For example, if the secure message was actually meant for your subject's Healthcare Team. So let's look at how to reassign it for that circumstance. Next slide.

The second option is to reassign to a Triage Group in your facility so you would select the radio button in front of that and then select "Submit." Next slide.

Now this time it's going to give you two options on this screen. It can be reassigned by using the Clinician's and Staff tab, or Triage Group. It's encouraged, when you're reassigning a message to another Triage Group within your facility, that the best option is to reassign it to a Triage Group versus an individual, which is the default. If you do choose to reassign to a specific clinician or staff member, the tab Clinicians and Staff is where the user can enter the first name and last name of the staff member to whom the message is being reassigned. Let's look at using that default first. Next slide.

To begin your search, you must enter at least one letter into the last name field to begin a search for the staff member. It is best to enter the last name in its entirety and, additionally, entering the first name narrows the search. Highlight the staff member in the list that displays and then choose "Select." Next slide.

We've selected the clinician, now we need to select which of the Triage Groups they are associated with is the appropriate one. Once the clinician is selected, the Triage Group dropdown will only display the list of teams to which the staff member belongs. The user will select the desired Triage Group, add an optional comment if necessary, and then select "Submit." Now, if the staff member doesn't belong to any secured message Triage Group within your facility, there's going to be a message that will appear in red stating that another Triage Group is not available to reassign this message and the Submit button will disappear. Now, let's look at the preferred way to reassign to another team at your facility, which is to a Triage Group. Next slide.

The reason this is the preferred method is, less risk of the message being missed by it being assigned to a group rather than individual. If reassigning to a Triage Group using a Triage Group tab, you'll be presented with the Secure Messaging Triage Groups within that facility. Now, the teams that the patient is currently associated with will show in bold and will have the

letter (A) in parenthesis. Unassociated teams will also show as a reassignment option as well but they will not have those indicators. Select the desired Triage Group from the dropdown menu, add any comments and select submit. Now, when the receiving Triage Group opens secure message, they'll see the following message, "This message has been automatically reassigned to you and it was reassigned from Triage Group X, Y, Z." Now the patient that sent this secure message is now associated with this new Triage Group. If the Triage Group to which they've been reassigned does not want to maintain the association with this patient, they'll need to contact their My HealtheVet Coordinator to remove the association. What will we see if that the patient is not associated with this new Triage Group you've just reassigned a secure message to? Next slide.

There's a red message that will display. It states that the patient is not associated with the Triage Group and shows the name of the Triage Group. It's going to ask you if you still want to associate the patient with this Triage Group and reassign it, yes or no? If you select yes, the secure message is reassigned to this new Triage Group and the receiving Triage Group will see another red colored alert when they open the secure message letting them know that this patient is now associated with their Triage Group. If you select no, then the action is cancelled and the secure message is not reassigned. Now there is one last option. Let's take a look at it. It's reassigning to a Triage Group outside your facility. Next slide.

So you would select the radio button in front of that last option and select "Submit." Now on this one, you're going to need to first choose a VISN using the dropdown box. When the list appears, highlight the VISN and then choose "Select." The pop-up box will change and allow you to select a facility. Highlight the desired facility and then choose "Select." Now, if you're not certain which facility or VISN, you can use the VHA facility locator or contact your My HealtheVet Coordinator and that facility locator can be found on the My HealtheVet homepage, just above the red toolbar, or on va.gov/directory/guide/home. Now, again, the recommended path is to reassign to a Triage Group. Next slide.

Again, less chance of being missed so you're going to select this Triage Group tab and then select the desired Triage Group from the dropdown list of all of them for that chosen facility and you can see which ones the patient has been associated with here also, same way, bold and have an (A) after the group name. If you choose to reassign the message to an unassociated Triage Group it's a good idea to add a comment so that they'll know why it's being reassigned to them and select "Submit." Now, what happens if this is a new facility for the patient? Next slide.

If the message is being reassigned to a Triage Group outside the facility and the patient has no previous relationship with the Secure Messaging Group, there's going to be a message displayed indicating that the patient is not associated with this selected facility. It also asks if you want to send a notification to the facility Secure Messaging Administrator to associate the patient with this facility. The user can select yes and, if it does, the system is going to send an Outlook email notification to the receiving facility Secure Messaging Administrator. If no is selected, then the action is cancelled. The Secure Messaging Administrator is going to work

with the business office to add the patient to the reassigned facility VistA system. The secure message will not be automatically reassigned but once the patient is successfully entered into the receiving VA facility's VistA System, the original staff who initiated the reassignment will be contacted to, again, take steps to reassign the secured message and you can also choose to reassign the secured message directly to a specific clinician or staff person outside your facility. Next slide.

You would choose the Clinician and Staff tab then search and select a clinician. You're going to be prompted to select a team to which the clinician is associated, select the correct Triage Group, and then choose 'Select' and the secure message will be assigned to that individual. We've learned how to reassign messages. Now, let's talk about how to save the secured messages. Next slide.

All or part of a clinically relevant secure message, or message thread, should be saved as a Text Integration Utilities or TIU note in CPRS and then these notes can then be accessed by all VA staff with appropriate access to that individual's VHA Electronic Health Record. As we said earlier, that information should be included in the information given to the subject prior to becoming part of the study. This leads us to talking about a Certificate of Confidentiality. Next slide.

Now some of the research studies have a Certificate of Confidentiality. A Certificate of Confidentiality, or CoC, is a way to protect research subjects by preventing investigators and institutions from being forced or compelled to release identifiable information on the research subjects. A CoC is issued for applicable Department of Veteran's Affairs research by several different Department of Health and Human Resource Service Agencies. Let's look at what a Certificate of Confidentiality protects. Next slide.

It allows the investigator and others who have access to research records to refuse to disclose identifying information on research subjects in a civil, criminal, administrative, legislative, or other proceeding whether it's at the federal, state, or local level. The CoC helps to minimize risk by adding an additional level of protection for maintaining the privacy and confidentiality of research subjects in a VA study. Now, there's a difference depending on whether the study includes medical intervention. Let's look at the current policy for Certificates of Confidentiality in the VHA handbook next for studies not involving medical intervention. Next slide.

The current ORD policy in the VHA handbook 1200.05, paragraph 21, states that for studies with a Certificate of Confidentiality that do not involve a medical intervention, for example, observational studies including interviews and questionnaire, no annotation may be made in the health record. So, you'll note that this policy pertains to studies that are not involving a medical intervention. So let's look at the specifics for this. Next slide.

For studies that do not involve medical intervention, no annotation may be made in the health record. It cannot be saved as a TIU note in the VHA health record but it does need to be documented that all the communication in the investigator's research file and secure messages

are considered part of the investigators records. They must be retained, as required, by VHA's record control schedule 10-1. Investigators are strongly encouraged to copy all of the communication from secured messaging and just so you know, secure messages are viewable in the Secure Messaging folders for one year but they are then kept for additional 74 years. They can be retrieved but they have to go through the Release of Information Office. Now, let's look at the research studies that do involve medical intervention. Next slide.

Now we have two circumstances, whether the study does or does not have a Certificate of Confidentiality. If the study does not have a Certificate of Confidentiality and does involve medical intervention, then the clinically relevant secure messages are to be saved as a TIU note in CPRS. For studies that have a Certificate of Confidentiality and involve medical intervention, ORD policy states that any details that would affect the subject's clinical care are to be included in CPRS as progress notes as this information could be very important to their care. Let's look more specifically at the studies that do involve medical intervention and have a CoC. Next slide.

The VA Principal Investigator, or PI, will be responsible for determining if the secured messages will be documented in CPRS. If the PI determines that the secure message involves a subject safety issue, it must be placed in a TIU note in CPRS even if there is a Certificate of Confidentiality. Subject safety is always the first priority and we never want to compromise subject safety by withholding information that might be needed by their healthcare team. So we just talked about documenting secured messaging, now let's talk about timeliness in responding to the secured messages. Next slide.

Now any type of secured message, whether it's between a Veteran and their healthcare team or a subject and research team, should be responded to and marked as complete within three federal business days. Completing a secured message is the same, no matter what type it is, and after responding and taking care of the message, you just change the message status to complete after you respond to the message. Let's learn how to do that. Next slide.

Once you reply and select "Send" the response has been sent to the patient. You're then going to see the Finish Message Options Box. There are several options in the Finished Message Options Box with defaults and to save the message as a CPRS note, you're going to use most of the defaults. So here are the different options: Assign To, that defaults to yourself which you want to leave it as. Would you like to change the status of this message to complete? That defaults to yes and that's what we want. Save the message as a CPRS Progress Note? Now that defaults to no so change it to yes and then the one about, would you like to set a reminder about this message? This defaults to yes, but you can change that whether you want a reminder or not. Lastly, we have the Comments Box and then after completing the Finish Options Box, you select "Done." Now if there's been more than one message, you can decide which, or all, to save. Next slide.

If there've been multiple messages back and forth between the Veteran and you for this topic, you can select "All Message Threads" that you see there at the top, or you can go through and just select the ones that you want to save in the one progress note. Every time you save a

secure message as a CPRS Progress Note, you're going to see a notification. Let's see what it tells us. Next slide.

The message informs you that your request to save the secure message in CPRS has been sent and if it fails to save, you'll receive a notification in the CPRS Progress Notes Alerts folder and that folder is located just above My Folders in the left column. You can check here in CPRS Progress Notes Alerts folder or, whenever you log into Secure Messaging accounts you'll see a CPRS Progress Notes Alerts pop-up. That's going to notify you that a message was not successfully saved. No message means everything saved successfully. Next slide.

So, in review, if a secure message was sent successfully, you will not receive a CPRS Progress Notes Alert when you log in next. You'll be able to find it in the Completed folder and it will not be in the CPRS Progress Notes Alert folder. Now let's see what to do if you do receive a notification that the message did not save successfully. Next slide.

You'll see the notification when you log in, or you can look in the CPRS Progress Notes Alert folder. Let's see what message you'll see when you open a message that has been saved in the CPRS Progress Notes Alerts folder. Next slide.

It's rare for a secure message to fail to save. It could happen for a number of reasons including, but not limited to, the incorrect spelling of the staff or Veteran's name and the unauthorized use of abbreviations in the body of the message. So when you log into Secure Message, you'll receive a pop-up notifying you of a message that failed to save and the message will be in red above the message when it opens and will include instructions on what to do to successfully save the message. We know the time frame that a message should be responded to in, and how to complete the message, let's talk about what happens when that time frame is not met. Next slide.

We need to be sure and change the message status from In Progress to Complete. Now sometimes there are secure messages that do not require a response. They're rare, but they still need to be completed. Most things need to be responded to and then you can mark it as Complete but an example of one that would not require a response would be the Veteran replying thank you. It doesn't require a response. Now any messages that have not had their status changed or complete within three business days become escalated and they should be resolved immediately. Once a message is escalated, all team members receive an Outlook e-mail notification regardless of their preference settings and teams are responsible for ensuring that escalated messages are completed immediately and that steps are put in place that this doesn't happen again. The local Secure Messaging Administrator tracks all the escalated messages and will notify supervisors of teams failing to meet the three day standard of completion. Now, let's talk about how to handle complaints that are received through Secure Messaging. Next slide.

A complaint is evaluated in the same way, no matter how it's received. Always refer to your local human research protection policy procedures to determine when the complaint needs to

be reported to the IRB for the research study to which it refers. Now let's look at considerations for the subjects instructions. Next slide.

We talked a little bit about this at the beginning so let's just kind of recap here. When you're planning a research study you always need to decide how instructions will be given to the subjects, either orally, written, or both. Also, when are those instructions going to be given, and it's no different when you're using Secure Messaging for the research studies. Some specific instructions should include how to identify secure messages for the research study from those they may be receiving from their healthcare team. Another instruction should be how to contact the study team through Secure Messaging. Something else to include when you're planning for the research study is to identify training needs for both the staff and subjects as this needs to be done before the study is submitted. We just spoke about training needs for both subjects and staff, let's look at some of the resources available. Next slide.

Here are the different places that you can find resources for both subjects and research teams. They are found on the My HealtheVet Product Site. You have URLs there above also, the Secure Messaging SharePoint site, and also on the My HealtheVet website. First let's take a look at the resources available for subjects starting on the My HealtheVet Product Site. Next slide.

Here are some of the quick reference guides, or QRGs as we call them, that are available pertaining to subject use of Secure Messaging for My HealtheVet Product Site. These QRG's can be used by researchers to be able to help subjects on these topics or they can be printed out to give to subjects. Subjects and other users can also access reference materials directly on the My HealtheVet website. Next slide.

There are several different types of resources available directly on My HealtheVet: A Navigation Guide from My HealtheVet, more Quick Reference Guides, Quick Guides, User Guides, the Search feature, About, and in About that has different topics for tips and tools to use My HealtheVet. And all of this information is easily available to subjects directly from the My HealtheVet website. Subjects are not the only ones that have lots of resources available to them. Next slide.

On the My HealtheVet Product Site are quick reference guides specifically for researchers. On the Training and Education page, there will be sections for tabs for different types of roles and researchers will have their own section there. Then, of course, the use of Secure Messaging is the same for all VA staff no matter what purpose they're using it for. Next slide.

On the My HealtheVet Product Site, there are many different Quick Reference Guides for using secure messages. Again, they're going to be located on the VA staff section of the Training and Education Page and on the Secure Messaging Page. Next slide.

As you can see, there's lots of Quick Reference Guides available and this is not even the complete list. There is also another great resource available there. It's called the Secure Messaging Examples Documentation and Information Handbook. Now Quick Reference Guides

are not the only type of resources available for staff on the My HealtheVet Product Site. Next slide.

In the Secure Messaging section on My HealtheVet Product Site is a wealth of information. There are several different sections that you can see listed here with several different types of information and so be sure and go ahead and check out the My HealtheVet Product Site for all of these resources. Let's look at who you can contact if you have any specific questions. Next slide.

If after consulting the different resources available, you have a specific question about either accessing or using the My HealtheVet Secure Messaging, you can email MHVSecureMessagingFieldQuestions@VA.gov. Alright, let's do a quick recap. Next slide.

So during this session, and we're running short on time since we started late and I want to allow times for questions, these are the different objectives today that we covered today listed there on your slide. These are the 14 different points that are covered in your Guidance Document answering those questions so that you have all of the information pertaining to the Guidance Document here in the presentation and available in your resources. Next slide.

This contains the rest of the different questions that we addressed today. Plus, not only did we cover those different questions in the Guidance Document but we learned about the different resources that are available for both subjects and staff and where to find them. I know that's a lot of information that we covered today. You have the presentation, the link to it to refer to and also all of the reference materials that are going to be on the Product Site for you. Let's go ahead and check in, let me hand it back to Heidi to check in, for any questions, and thank you very much for your attention today and sorry for the technical difficulties.

Heidi: Okay. Can you hear me?

Kim: Yes.

Heidi: Sorry. I keep going back and forth to being able to unmute myself and not being able to unmute myself. It wouldn't go there for a second but now it seems to have gone. We do have many, many pending questions here so I'm just going to start at the top here and we will get to what we can possibly get done. If any of these were covered in your session, just let me know, as I often say, I'm not focused expert so I don't always catch everything that goes on during the session. Can Veterans sync My HealtheVet data with the HealthKit?

Kim: I'm sorry I didn't hear the last part, sync it with what?

Heidi: HealthKit?

Kim: HealthKit. I don't know the answer to that. That's not come up in any of my information. Any of the panelists have an answer to that.

Dr. Nazi: It's Kim Nazi. Can you hear me?

Kim: Yes.

Heidi: We can hear you.

Dr. Nazi: We are working on allowing Veteran's to access and download into interoperable file formats like CCDA. CCDA is a file format that contains not just the data, but metadata and it's accessible then through a variety of other systems. I can't speak today about Apple's new HealthKit but we are aware of it and we are investigating. Thank you.

Heidi: Thank you. Another question here. What is a DS level 2 logon?

Dr. Nazi: Hi. This is Kim again, so a DS logon credential is issued to service members in the military in more recent times so most often those military service members who could be accessing VA Healthcare in addition to still receiving DoD Healthcare, or they could simply be transitioning from service member to Veteran. For those that do have a DS logon level 2 credential that was issued to them by the DoD, they can actually use that then to log in to My HealtheVet and also upgrade their account to premium.

Heidi: Great. Thank you. The next question here, we document study involvement in CPRS, but only dates of enrollment. No study data or health information. Would we still cause a CPRS documentation that [unintelligible 1:37:20]?

Kim: I think we're a bit unclear on the question. So, in the interest of time, if whomever asked the question maybe they could resend it to us and clarify. I think that they're referring to a specific slide but given that we're 130 slides in, let's just move forward with the questions and if whoever sent that, just send us another email rephrasing that question please.

Heidi: Okay. Next question here. Can we have running updates to the list of subjects associated with the Triage Group as we recruit patients?

Kim: You can go into the Triage Group, the My HealtheVet Coordinator, and can make updates and see who is in there. I don't know if it will be allowed to the research studies that may be decided at each facility. But, you can, it is possible to see who all is associated with that study, the Triage Group.

Heidi: Okay, and they sent in a second question here. For multi-site studies, do we need to set up a Triage Group for each site?

Kim: Dr. Nazi, I'm going to refer that to you.

Dr. Nazi: I think that's a great question. I know that we talked about naming conventions recognizing that there are often multi-site studies. I think that the best thing to do for that one is to get more information from some of our Secure Messaging subject matter experts. So the question is, we'll take this one for further action. The question is, is it necessary to set up multiple Triage Groups for a multi-site study? We'll take that one to our experts and provide a response.

Heidi: Great. Thank you. I got a request in here. Can ORD remove the old link from the website about Secure Messaging? Unfortunately, the Draft Guidance Documents is at the top of the website and I did not realize that there was a new Final Guidance Document below. Thank you.

Karen: This is Karen from ORD and I appreciate the question. There are actually two separate documents. The ORD Guidance which is finalized, which was sent out last Tuesday is specific to use of My HealtheVet Secure Messaging System. The Draft Guidance, which has been very difficult to get finalized is about the use of e-mail through MicroSoft Outlook through the VA Outlook account, as well as using texting, using, for example, the VA I-phones. So, they are two separate, completely different types of guidances, and different uses. For example, there is issues on the other guidance about recruitment. In the interest of time, I won't get into all this but they are two separate guidances. I appreciate you asking that question so that we can indeed clarify they are not the same.

Heidi: Great. Thank you. The next question I have here, so if Secure Messaging is used for a research study, are those messages only accessible to the subject or the research team or can they be accessed by other VA providers that may work for that particular subject as a patient?

Kim: They are only between the research team and the subject unless they are, as we talked about, in the documentation of studies that have medical intervention. If it is information that would involve patient safety, then it would be saved to the progress note and then the healthcare team could see it, but just the secure messages going back and forth is just going to be seen between who it was sent to and the recipient.

Heidi: Great. Thank you. Can you tell me how I can identify one of the My HealtheVet Coordinators?

Kim: There should be, I don't know how your directory listings are at your facility, but each facility should have either a My HealtheVet Coordinator or a Secure Messaging Administrator.

Dr. Nazi: This is Kim and I can add that the Product Website, the My HealtheVet website on the internet that we will make sure that everyone will have the link for, we have a complete listing of all the My HealtheVet Coordinators by VISN and by facility so it's easy for folks to look up a particular contact at a particular facility.

Heidi: Great. Thank you. The next question here, how do we access messages that have been archived?

Kim: Those would have to be requested through your Request of Information. Anything greater than 12 months are not going to be able to be accessed through Secure Messaging.

Heidi: Okay. Thank you. The next question here, I have seen documentation that CPRS is considered compliant with 21 CFR Part 11. Since Secure Messaging seems to be managed and stored within CPRS, does the VA feel that it is similarly compliant with 21 CFR Part 11?

Karen: Hi, this is Karen here in ORD, and the answer is indeed yes. If it is indeed within CPRS, you are indeed correct that Vista as well as CPRS is considered, and it's 21 CFR Part 11 complaint, and so if it's within that space, it is considered to be compliant within the system. Excellent question. Thank you.

Heidi: Thank you. The next question I have here, they're wondering if they could include a hyperlink to REDCap in the secure message to implement a survey with Veteran patients. REDCap does not work outside the VA firewall but through My HealtheVet secure message wondering if they are able to use REDCap.

Kim: I'm sorry I haven't had that one has come up yet.

Dr. Nazi: Yeah. I was going to say, it is possible to insert a hyperlink into a secure message but I would imagine that if the recipient is outside the firewall, let's say, a study participant at home opening the secure message, than I don't think they would be able to access the REDCap if it's limited to the internal environment.

Karen: This is Karen again from ORD. It is indeed an issue of whether or not the REDCap they are using is within or outside the firewall because, just like regardless if it's My HealtheVet, Secure Messaging System, or use of e-mail, as in that other draft guidance, it can't refer to a site that's not considered to be as secure, or is not within our requirements. So I'd like to follow up on that one because I do think we could maybe issue a guidance about that question specifically. So, if whomever sent that in, email us separately. I would like to follow up on that question because I think that's going to be a common question. Thank you.

Heidi: Great. Thank you. The next question I have here, it was mentioned that My HealtheVet Secure Messaging is not currently an option for recruitment because an opt in, opt out option is not currently available. Is there a timeline for this?

Dr. Nazi: This is Kim Nazi. We do have a desire to add that kind of preference module in the future, however, I think it's important to note that we are in the process of implementing a website we designed for both the patient view of Secure Messaging changes for recently deployed and also now the staff to make both much more useable products so it's something that's desirable but it is not yet on the plate for development.

Heidi: Great. Thank you. The next question I have here. I was confused by slide 23 that lists email and text messages as means to communicate with research subjects. To clarify, those methods are not allowed in VA research, correct?

Kim: No. I clarified those and I was told that, yes, they were allowed. Go ahead, I'm sorry, I didn't mean to interrupt someone.

Karen: This is Karen and you're exactly correct. In ORD, it is an urban myth that email and texting is not allowed in VA research. We follow very similarly the requirements that our clinical side of the house follows, in that you can't use, for example, you can't send a sensitive message by texting because it can't be encrypted and if you do send sensitive information through email, it has to be encrypted. It's important to understand what is the content of the message and whether or not that message is sensitive or not. Again, all of these have to be approved for human subjects research through Institutional Review Board. I'm very glad that we are having a chance on this call to clarify that urban myth. I appreciate that question.

Heidi: Great. Thank you. The next question I have here, do Veterans receive a notification via text or via their usual email when they receive a message from My HealtheVet, or must they log in to see the message?

Kim: They will only see it through My HealtheVet. But now, after the 18.2 release that just came out, they will not have to go any further than the home page. On the screen it was very close to the front, I think it was like slide 6 or 7, there was a picture of the home screen and so now whenever they log into My HealtheVet, they'll be able to see the number of unread messages and click right on it and be sent directly to their inbox.

Dr. Nazi: This is Kim Nazi. I would like to add that they, also, can set their My HealtheVet preferences to receive an email notification when they have a new, unread, secure message so they can enter whatever email address they'd like to receive that notification in their profile and then they'll get a message just letting them know they have a new secure message to log into My HealtheVet and access that message.

Heidi: Great. Thank you. The next question I have here, I could not find the setting up Secure Messaging for Research Studies list on the Product Site, would you be able to provide a direct link?

Kim: A lot of those are still in review by the VA so they may not be there. They will be there. There is a section that says Training and Education and so, once they are approved, they will be added to that site and there will be different roll tabs added. Unfortunately, there's not much there yet. We're waiting for the review process.

Heidi: Okay. Thank you. The next question here. Are secure messages not subject to RCS 10?

Karen: So this is Karen here in the office of Research and Development, these [unintelligible 1:49:57] indeed if it constitutes federal record and when you're talking about studies, communication to and from a subject is a part of the documents that are part of the study records so, unless they are considered to be working documents we do, indeed, consider these to be records that are under the Record Control Schedule because they are federal documents necessary for the conduct of the study, reflected in the communication between you and the subject.

Heidi: Great. Thank you. The next question I have here is, if a participant has already been recruited, for example, has completed a phone screen and is scheduled for an initial visit but has not yet provided written informed consent, would it be appropriate to use Secure Messaging to send a reminder regarding the scheduled visit. In this case, the individual has opted in, is verbal consent acceptable if you have a waiver to defer written consent until the first face-to-face study visit?

Kim: I am going to defer that to the ORD office on that one please.

Karen: I want to make sure I understand that one correctly and I'm putting my glasses on people. This is Karen again. Because the whole issue that the IRB has to approve the use of My HealthVet Secure Messaging issue is that we wanted to be able to do this after the consent has been obtained from the subject. Now, what I'm hearing here and I'm looking at, your opting in. That's confusing to me because there's no such thing as opting in in the Common Rule. You may opt in to receive further information about the study, but you're not opting in to consent. Otherwise, you have a waiver of documentation of informed consent. So, there are nuances to this question that I'm not understanding because you can't just opt in based upon the Common Rule or FDA regulations.

Soundia: This is Soundia and one thing I would suggest in looking at the question for anybody in this situation, when you're coming up with your recruitment plan, depending on the nature of the study, this might be something you want to put in the plan, you know, as your IRB permits. Can we send a reminder email for scheduling subjects to come in to visit and what would that look like? You want to propose the plan and let them weigh in and decide if they feel you have adequately laid it out and have adequate protections. This would all be under recruitment and it's really up to them to say yea or nay, if that meets the requirements or not.

Karen: It can't be a reminder, by the way, we haven't heard from you. We want to recruit you for this study. You need to schedule a study visit because that does not meet the spirit nor the intent of ORDs guidance on the use of My HealthVet.

Heidi: Great. Thank you. The next question I have here, is there a way to export a group of messages as a file or batch of files?

Kim: Sorry. I had muted. When you saving to a CPRS note, if there's a long thread, you can select all of the thread and have all of that go into one progress note, but I don't know about

batching several secure different threads into one. I know you can put an entire thread into one note.

Heidi: Great. Thank you. The next question I have here, are there any plans to implement a video telehealth option to My HealtheVet? If not, do you know if there are any video telehealth options available for research?

Dr. Nazi: We are just rolling out in the office of Connected Care, a video connect app which can be used for a virtual visit. I don't know about the impact of that for research but the technology is coming about and so we will take that one for further action as well.

Heidi: Okay. We actually have gone a little bit past our time here. I'm not sure if any of our presenters or discussers have any final remarks they want to make as we wrap things up here.

Kim: Dr. Nazi, would you like to say anything as the chief leader of all of this excellent work. We really, really appreciate all you've done.

Dr. Nazi: Oh, thank you. I would like to say we've wanted to do this for several years and it's taken some time. I want to thank Karen and Soundia for their wonderful collaboration with us, really helping us to understand the nuances of research related communication and how to address them in Secure Messaging, in our Guidance Document. I think that finally enabled us to create this new guidance and we know that it will be somewhat of a learning curve for some but we also know that it will be a real benefit for our VA researchers and also the patients who participate in research. We are here to support you and thank you very much.

Karen: Thank you so much. Thank you Heidi. Thank you Kim for presenting. I really appreciate everyone for sticking around. I know that we went a little bit over but there was a lot of content here, some good content, some great questions, feel free to contact either the My HealtheVet team at the email address they gave if you have specific questions regarding accessing and using My HealtheVet. If you have policy related questions you can feel free to contact ORD regulatory group at our VHAcorddereulatory@va.gov. Thank you so much everyone. Have a great evening. Be safe for those who are going to be in the path of this storm. Thanks. Bye-bye.
[END OF AUDIO]

This is an unedited transcript of this session. As such, it may contain omissions or errors due to sound quality or misinterpretation. For clarification or verification of any points in the transcript, please refer to the audio version posted at <http://www.hsrdr.research.va.gov/cyberseminars/catalog-archive.cfm>