

# **CHAMP Study Research Workflow**

The basic research workflow for the CHAMP Study, which indicates what REDCap forms to use and when to use them.





# Suggested Consent Workflows by Consent Approach

Below are 4 consent process workflows to consider using depending on which approach is right for your patient. Workflows 3 &4 have additional detail to walk you through how to use the e-Consent Form in the context of each scenario.

# 1. CONSENTING IN-PERSON WITH PAPER CONSENT FORM



# 2. CONSENTING IN-PERSON WITH E-CONSENT FORM ON TABLET OR COMPUTER

Perform consent process <b>in-person</b>	Fill out the <b>Consent</b> <b>Tracking Form</b>	Staff signs e-Consent Form	Patient completes e- Consent Form (IMPORTANT: READ BELOW)	Track completed consent process in Consent Tracking Form
<ul> <li>Use consent form as a guide.</li> <li>Review CHAMP Consent Training Materials if needed.</li> </ul>	<ul> <li>Open Consent Tracking Form, complete below fields, then save form.</li> <li>MRN</li> <li>Consenter Name</li> <li>Type of Consent</li> <li>Date Consent Obtained</li> <li>Attestation Checkbox</li> </ul>	<ul> <li>Staff MUST sign e-Consent Form BEFORE patient signs form.</li> <li>Open e-Consent Form, complete staff section</li> <li>Click "Save &amp; Stay"</li> <li>When error message appears, click "Okay"</li> </ul>	<ul> <li>Before patient completes the form, the Consenter must do the following:</li> <li>Scroll to top of e-Consent Form.</li> <li>Click the "Survey Options" drop- down menu in top right.</li> <li>Click "Log Out &amp; Open Survey"</li> <li>Patient can now complete and submit the e-Consent Form.</li> </ul>	<ul> <li>Complete below fields <ul> <li>Date Consent Signed</li> </ul> </li> <li>Download a PDF of signed e-Consent Form and either email or print and hand it to patient.</li> </ul>

### 3. CONSENTING VIRTUALLY WITH PAPER CONSENT FORM

Prepare the **Paper Consent** Form to mail or hand to patient

- Print copy of current consent form for your clinic.
- Hand **Paper Consent Form** to patient to take home or mail to patient's home.

Perform consent process virtually by phone or televideo

- Ensure patient has the consent form in front of them during review, you may:
  - •Screen share
- Email PDF of consent form ahead of time.
  Review CHAMP Consent Training Materials if needed.

If patient consented and returns their form, **review** the consent form

• Ensure all fields are complete.

• Give copy of signed form to patient.

• <u>Keep in mind</u>: patient has 2 weeks from date consent obtained to sign the form. Mailing form back may delay its return. Track completed consent process in **Consent Tracking Form** 

• Complete all pertinant fields

Scan and upload signed consent form.

### 4. CONSENTING VIRTUALLY WITH E-CONSENT FORM



# CHAMP REDCap Quick Reference

Log in: REDCap

\* =triggers email or text to Patient or Staff or Study Team.

## **CHAMP Eligibility & Consent Project**

### Eligibility Form

- · Record ID (auto)
- · MRN
- NMA screen date Within past 6months
- NMA prescription score
- · NMA street score
- · DSM-5 screened/date
- # of DSM-5 dx met
- · PHQ9 screened/score
- · GAD7 screened/score
- · PCPTSD screened/score
- · Exclusion Criteria check
- · Recruitment outcome

### Consent Tracking Form

Patient has 14 days to sign the consent form. Record ID (auto)

- MRN
- Consenter Name
- Type of Consent (e\* or paper)
- Choice/Email, Text, Both E-Consent invites/reminders to patient by email/text/or both. Reminder emails to BHCM/Consenter.
- · Date consent obtained
- · Reconsent sent date (>14dys)
- Consenter Attestation
- Date consent signed
- Paper consent uploaded
- Patient did not consent

### E- Consent Form

Name of staff/date

Name of subj/date

Patient (e)signature

### <u>HIPAA Form</u>

- · Name of health org
- · Permission initials
- · Patient name/date
- Patient DOB
- Patient (e)signature

### Patient submits\*

Email goes to BHCM/Consenter If Patient's email on file, email goes to Patient with copy of signed consent

# **CHAMP Registration & Adverse Event Project**

### **Registration Form**

Completing this form triggers the baseline survey window to open. Patient has **14 days** to complete.

### • Study ID (auto) • MRN

### · CMTS ID (clinic staff enters)

- Date consent signed
- · Patient first Name
- · Patient last name
- · Patient address
- · Phone# (home)
- · Phone #(cell)
- · Email address
- · language
- · Back up Contact 1/phone
- · Backup Contact 2/phon
- Consent to text and/or email\* Web survey invite to patient by text/email
   Survey pref: home/cell

For use by the CHAMP UW Pl

- · Patient withdrew from survey
- · Date of withdrawal
- · Reason for withdrawal

# Reportable Events Form • Study ID (auto) • Event Date • Category of event Adverse Event\* Serious Adverse Event\* Protocol Violation • Degree of study relatedness • Nature of event • Event description • Update/Resolution description • Name of reporter (staff) • Email of Staff • Phone of Staff • Save Form\* Email to CHAMP research team

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