Data Access Request Tracker (DART): Amend a DART, Paperwork and Tips

Ron D. Simpson, BSF VINCI Lead Concierge Specialist



DART-Data Access Request Tracker

- Follow me as we dive deeper into DART
 - Amend a DART Demo
 - Also see <u>Amending a DART IRB Research Request</u> video on VINCI Central
 - Discuss main forms needed for IRB Research Studies in DART
 - Questions and Answers



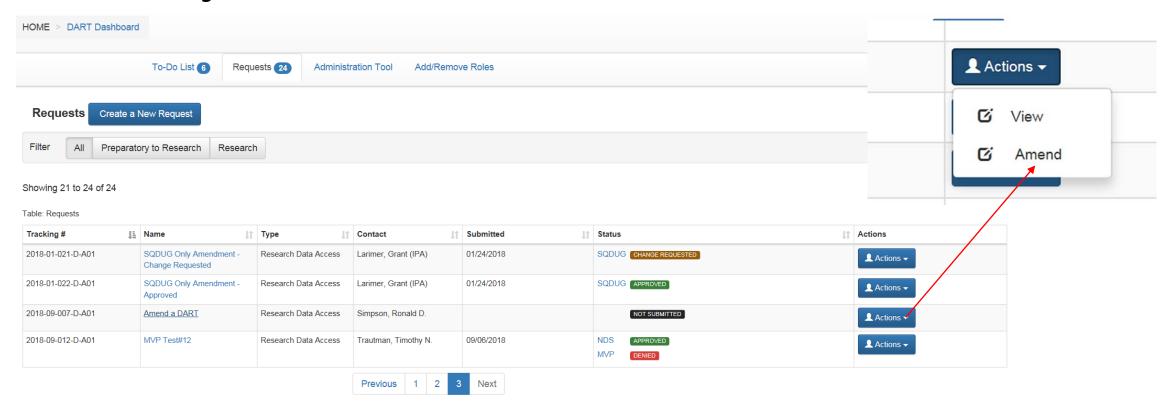
Poll

How familiar are you with amending a DART request?

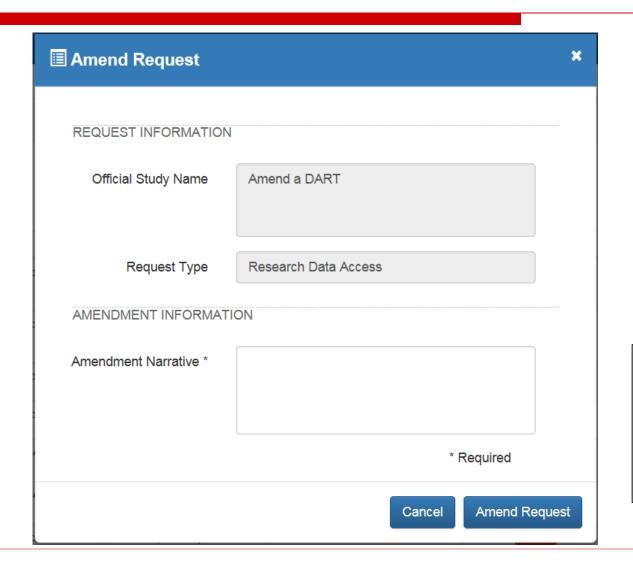
- I submit them often
- I watched someone amend a DART request
- I have never amended a DART request
- I would like to learn what is needed to amend a DART request



Start at your DART Dashboard

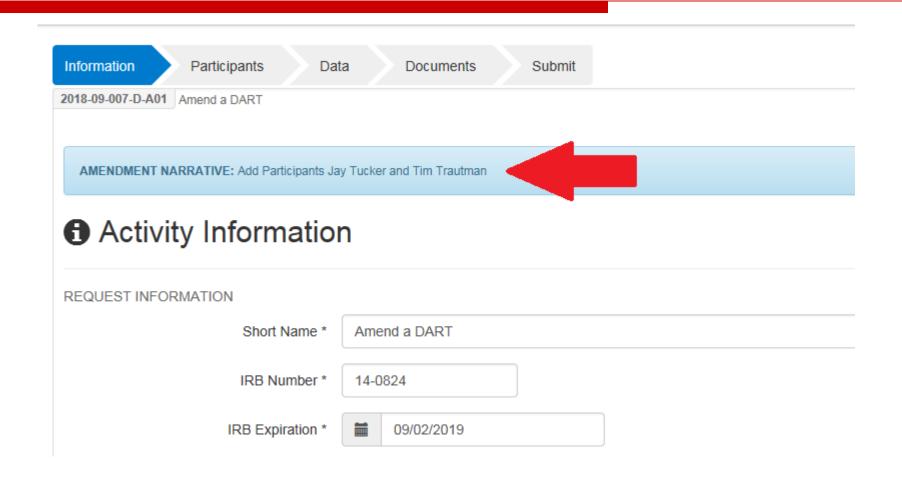






Contact VINCI@va.gov to change an amendment narrative.







AMENDMENT NARRATIVE: Add Participants Jay Tucker and Tim Trautman

Participants

PARTICIPANTS & LOCATIONS

Table: Participants

Name	Location	Notifications	Data Access	CAPRI/ VistAWeb Access	Delete
Simpson, Ronald D.	(660) Salt Lake City HCS (Salt Lake City UT)	\checkmark	V		
Tucker, Jay N.	(660) Salt Lake City HCS (Salt Lake City UT)	✓	✓		
Trautman, Timothy N. (UofU)	(660) Salt Lake City HCS (Salt Lake City UT)	✓	✓		
Q Find People	Q 508 Select a Location	✓	✓		Add

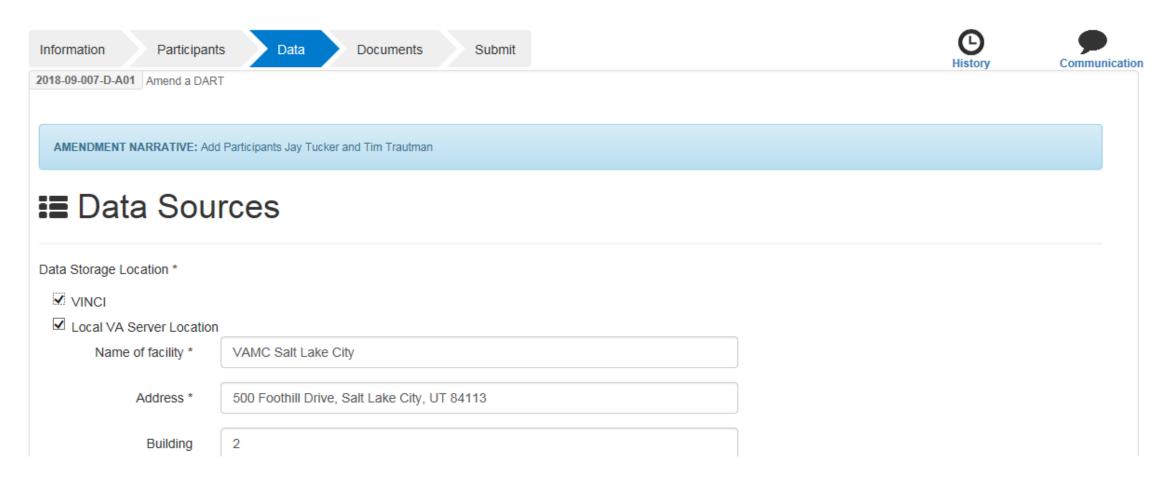
Important! Please select a Primary Location and a Principal Investigator **X** for each location.

Table: Locations

 Primary
 Location
 Principal Investigator

 ★
 (660) Salt Lake City HCS (Salt Lake City UT)
 ✓ Simpson, Ronald D.







Will data be transferred external to the VHA? *
Currently CDW cannot approve a research request that would include disclosing the CDW data (identifiable or de-identified) outside of VHA without a signed research consent and HIPAA authorization from the individual because of the risk of re-identification. The data may be used (internally or within VHA) for the approved protocol. If "finder" files are to be sent out to Federal or state agencies for the purpose of the Federal or state agency disclosing information on the individual back to VA per SOR 34VA12, a DUA between the PI and the external agency must be submitted with the DART application.
No No
O Yes (DUA is required)
IDENTIFIERS (More about identifiers)
☑ Real SSN
□ Scrambled SSN
☐ Identifiable data but no real or scrambled SSNs
REQUESTED DATA SOURCES
Corporate Data Warehouse (CDW)
SQL Format
✓ CDW Production Domains
□ CDW Raw Domains
□ CDW MCA (formerly DSS) NDE
☐ MedSAS Files including VetsNet Files
☐ TIU Text Notes (Requires Real SSN Approval)
✓ Vital Status Files (includes BIRLS)



Other Data
CAPRI/VistAWeb (Individuals needing Capri/VistA Web access are selected on the participants page and require real SSN approval)
☐ Care Assessment Need (CAN) Score (Requires Scrambled SSN Level Access)
☐ Health Economics Resource Center (HERC) Average Cost Data
☐ Health Economics Resource Center (HERC) V21 and Nosos Risk Scores Data
☐ Homeless Registry
☐ Legacy Data Warehouses (i.e. VISN 21)
☐ MCA (formerly DSS) Web Reports
OEF/OIF Roster File (DUA required for internal data distribution/use)
☐ Patient Aligned Care Team (PACT) Implementation Index (Pi2)
Surgery Quality Data Users Group (SQDUG)
☐ Veterans Affairs Surgical Quality Improvement Program (VASQIP)
☐ VSSC Web Reports
☐ Million Veteran Program (MVP) - Available only to MVP approved studies
Data Access Systems
□ SAS Grid
Does your study require Informed Consent and HIPAA Authorization?
○Yes
● No
Does your study require a HIPAA Waiver?
● Yes
○ No



2018-09-007-D-A01 Amend a DART

AMENDMENT NARRATIVE: Add Participants Jay Tucker and Tim Trautman

Documents

NOTICE: Always check the Data Steward's web site (DART Process and Forms) for the latest version of forms. Outdated (Salt Lake City UT).pdf (View) Upload IRB, combine them into one document before uploading. When you are required to replace documents after submission,

2018-09-007-D-A01 Research Request Memo-(660) Salt Lake City HCS

V3 🗤 Uploaded Sep 5 2018 2:47PM by Simpson, Ronald D.

Required Documents

REQUIRED DOCUMENTS

➤ (660) Salt Lake City HCS (Salt Lake City UT) (Primary Site)



Research Request Memo

Required for CDW Production Domains, Vital Status

Research Study Institutional Review Board (IRB) Approval Letter

Required for CDW Production Domains, Vital Status

Research and Development (RD) Committee Approval Letter

Required for CDW Production Domains, Vital Status

2018-09-007-D-A01 Research Request Memo-(660) Salt Lake City HCS (Salt Lake City UT).pdf (View) Upload

V3 v Uploaded Sep 5 2018 2:47PM by Simpson, Ronald D.

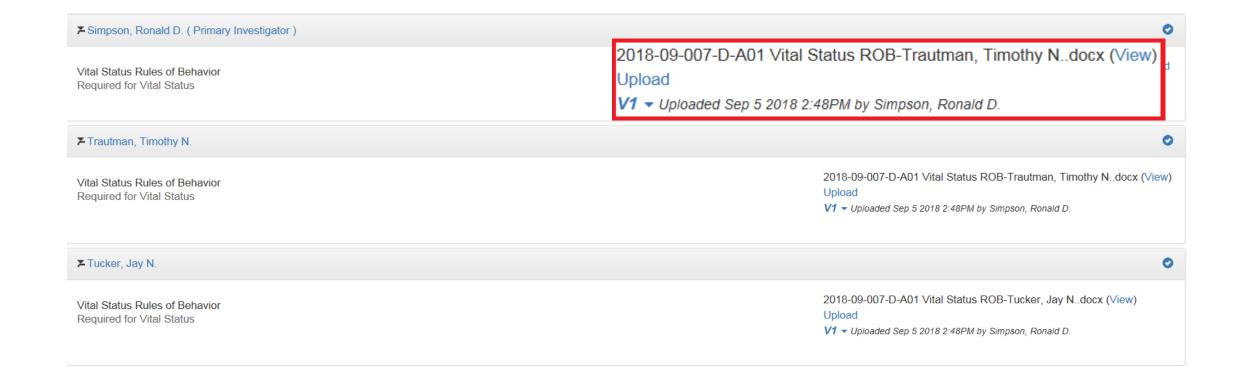
2018-09-007-D IRB Letter-(660) Salt Lake City HCS (Salt Lake City UT).docx (View) Upload

V1 v Uploaded Sep 5 2018 2:25PM by Simpson, Ronald D.

2018-09-007-D RD Letter-(660) Salt Lake City HCS (Salt Lake City UT).pdf (View) Upload

V1 v Uploaded Sep 5 2018 2:25PM by Simpson, Ronald D.







Information **Participants** Data Documents Submit 2018-09-007-D-A01 Amend a DART AMENDMENT NARRATIVE: Add Participants Jay Tucker and Tim Trautman ✓ Submit SUBMIT REQUEST Request form complete! You may now submit your request. Submit Request



DART Required Documents

- Research Request Memo
- IRB Approval Letter
- Research and Development Committee Approval Letter
- Research Protocol
- HIPAA Informed Consent/Authorization or Waiver
- Real SSN Access Request Form (if needed)
- CDW Domain Checklist
- Any additional data source specific forms
- Forms can be found on the VHA Data Portal:

http://vaww.vhadataportal.med.va.gov/DataAccess/DARTRequestProcess.aspx



Research Request Memo

Department of	N	lemorar	ndum			
Veterans Affairs						
Date:						
From: Principal Investigator	"Insert Name of Princip	al Investigator"				
Subj: Research Data Reques	t Memo for: "Tracking	Number - Name of F	Protocol"			
To: Director, National Data	Systems					
The following information is rec can take place:	quired and all signatures	must be obtained b	efore any review of this request			
Are all participants requesting access a VA employees or WOC employees? _Yes _No Is this request for data use for a VA research study (includes pilot studies)?: _Yes _No Is this request for activities preparatory to research? _Yes _No Select the type(s) of data needed: _Real SSN _Scrambled SSN _PHI but No SSN Is access to CAPRI / VistAWeb being requested? _Yes _No Is AITC Main Frame access being requested? _Yes _No Is access to VSSC and/or MCA Web Reports being requested? _Yes _No Will any requested data be transferred outside of the VA? _Yes _No Will the data be stored in the VINCI Environment? _Yes _No _Both						
Provide a high level summary of how the requested data will be used in the research study. If Real SSN access is requested, please provide a justification. List the participants names and whether they are VA Employee, Contractor, or Without Compensation (WOC).						
Estimated time the data will be	needed for:					
Approvals As the Principal Investigator, I certify that the data will be transferred, retained, utilized, and destroyed in						
accordance with VA and VHA policy including the following: VA Handbook 5011.5, Chapter 4 (Alternative Workplace Arrangements); VA Directive and Handbook 6500, Information Security Program; VA Directive and Handbook 6502, Privacy Program; and VHA Directive 1605, VHA Handbook 1200.05, 1605.1, and 1605.2. The data being requested will only be used in accordance with the protocol listed above. I acknowledge and affirm that I am the responsible party should there be any data incidents/ breaches involving downloaded data from this request.						
NAME OF PRINCIPAL INVESTIGATOR	· ·	DATE SIGNED	(D) NO.			
NAME AND TITLE OF SUPERVISOR		DATE SIGNED	(BANK)			
February 2018						

RRM instructions are in Appendix A of the DART User Guide.



IRB Approval Letter

- Can come from the CIRB, local VAMC or University Affiliate
- IRB letters are not standardized across the VA
 - IRB letters are needed from each site
- Key Items needed:
 - PI Name
 - Study Name
 - Approval Date
 - Expiration Date
 - Signed by the Chair of the IRB



Research and Development Committee Approval Letter

- Each VA facility has a local Research and Development Committee
- All IRB Approved Research studies in DART must have and R&D approval letter for each location participating in the study



Research Protocol

- Introductory paragraph
- Statement of the Problem
- Purpose
- Significance of the Study
- Research Questions and/or Hypotheses and/or Null Hypotheses
- Background
- Methodology
- Procedure and time frame
- Analysis plan
- Scope and limitations
- Use the most up to date Protocol



HIPAA Informed Consent/Authorization or Waiver

- HIPAA Waivers are not standardized across the VA
 - VA Facility Name
 - Title of Study
 - PI Name
 - Brief description of PHI used for IRB
 - Must have Chair of IRB Signature
- Form 10-0521 is available for use



Real SSN Access Request Form

	COM	A	Request
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This form is required for research requests for real SSN data requested through DART. Complete the information below and submit this form for approval by your IRB Chair and the Associate Chief of Staff for Research.

ection A. Principal investigator							
incipal Investigator:							
roject Name:							
heck the boxes below that indicate here this information is located in		ject requires	access to data with real SSNs. In	clude the pag	je number		
Link to primary data collection	p	Use of	VA data available only with real St	SNs	p		
Recruit subjects	p	Link to	non VHA data sources (specify)		p		
Use VistAWeb, CAPRI, TIU Not	es p	Other r	eason (describe)		p		
affirm the reasons checked abo	ve are consis	stent with th	ne protocol submitted for IRB ap	proval.			
gnature. Principal Investigator				Date			
gilature, i filicipal litvestigator				Date			
ection B. IRB Chair							
ame of IRB Chair:			Project's IRB #:				
B Committee Affiliation Name:							
	tocol, HIPAA		en submitted and approved for this n and/or Waiver of HIPAA Authoriz				
rotocol	■ Yes						
IPAA Authorization	☐ Yes	■ N/A	Waiver of HIPAA Authorization	Yes	■ N/A		
formed Consent	Yes	■ N/A	Waiver of Informed Consent	Yes	■ N/A		
affirm that the documents checked above are consistent with the use of real SSN data and the Human Subjects ub-committee (IRB) has determined access to real SSN data is justified for this research project.							
gnature, IRB Chair				Date			
3							
ection C. Associate Chief of St	aff for Resea	rch (ACOS-	R)				
ame of ACOS-R:			VA Facility Name:				
iffirm that the Privacy Officer has reviewed the protocol and that legal authority exists for use and disclosure of dividually-identifiable information, and that the Information Security Officer has reviewed for security measures protect SSNs in accordance with this facility's standard operating procedures.							
gnature. ACOS-R				Date			



CDW Domain Checklist

CDW DOMAIN CHECKLIST CDW Production CDW RAW* Allergy CAPRI Audit Trail table Appointment CliniComp Beneficiary Travel Echocardiogram Consult Equipment Inventory CPRS Orders FBCS (Fee Basis Claim System) Dental IFCAP (Integrated Funds Control, Accounting, and Emergency Dept. Int. Software (EDIS) Procurement) Health Factors Intravenous meds (IV) Health Benefits Request Oncology Immunization Prosthetics Inpatient Pulmonary Function Test (PFT) Talent Management System (TMS) Integrated Billing Lab Microbiology Unit Dose (Pharmacy) Lab Chem VACAA (Veterans Choice Program Eligibility) Mental Health Assessment Non-VA Meds Outpatient *CDW Raw data is data that has been pulled directly Patient from the VistA sites and the data has not been verified or Patient Associated had business rules applied. It may not be current and there is limited documentation for users. Requests for Patient Enrollment CDW Raw data require additional time for creating data Patient Insurance Patient Record Flag extracts and it is more difficult for studies to use. PCMM (Primary Care Management Module) Pharmacy BCMA (Bar Code Medication Administration) Pharmacy Outpatient Pharmacy Patient Purchased Care (formerly fee) Radiology Reengineered Primary Care Management Module (RPCMM) SPatient Surgery PRE, INTRA, and POST VistA Waitlist VistA Compensation & Pension Vital Signs Women's Health Other Data Department of Defense and Department of Veterans Affairs Infrastructure for Clinical Intelligence (DAVINCI) Lung Cancer Screening Demonstration Cohort OMOP Common Data Model (CDW Production/Raw Source) PSSG Geocoded Files SAS Fee (Formerly HERC FEE) VINCI NLP Output For additional information about the domains, please refer to the link below: http://vaww.virec.research.va.gov/CDW/Documentation.htm

CDW Checklist V 6.1 June 26, 2018. This document revision supersedes any previous versions.



CAPRI/JLV Access Form

Department of Veterans Affairs RESEARCH ACCESS TO VHA ELECTRONIC HEALTH RECORDS					IIC HEALTH RECORDS	
User Information						
Last Name, First Name, Middle Name, Suffix			2. VA E-Mail Address			
3. Job Title 4. Work Phone (Include Area Co			de) 5. Station (Facility) Number			
. Date of Birth (MM/DD/Y	YYY)	8.	ISO Name 9. I		9. ISO E-Mail Address	
			11. DART Tracking Number	er	,	
13. IF	RB Expiration Date (MM/DD/Y)	/YY)	14. Cooper	ative Studies Program Number (CSP#)	
Special User Access Requested for:						
	Level of A	CC	ess			
y National Data Syst	tems (NDS) of any chan	ge	in my position or dutie	es as relate	d to this protocol. I also affirm that I will	
	. ,				,	
ocation of the data i	s approved, i wiii not mo	•••	the data to other loca	ations unics	5 Specifically dutionized by National Bala	
1 7 1						
NAME OF INDIVIDUAL REQUESTING ACCESS			1	00000		
TANKE OF INDIVIDUAL NEGOCIOTINO ACCESS			DATE SIGNED (MM/DD/	(1111)		
NAME AND TITLE OF PRINCIPAL INVESTIGATOR						
THE ATT THE OF TRADE IN THE HINTER HONDON			DATE SIGNED (MM/DD/	77 7 7 7 7		
NAME OF APPROVING AUTHORITY (ACOS-R or COS)			DATE CIONED (MANDE)	AVVVV		
TRAINE OF APPROVING ACTION (ACCOUNT GOS)			DATE SIGNED (MM/DD/	(1111)		
	y National Data Systiew Protected Healt dor shared with othe location of the data in and the supervisor to the superviso	4. Work Phone (Include Area 7. Date of Birth (MM/DD/YYYY) 13. IRB Expiration Date (MM/DD/YY Special User Access Level of A 7. Date of Birth (MM/DD/YYYY) Special User Access Level of A 13. IRB Expiration Date (MM/DD/YY Special User Access Level of A 13. IRB Expiration Date (MM/DD/YY Special User Access Level of A 13. IRB Expiration Date (MM/DD/YY Special User Access Level of A 25. Access Approved the data is approved, I will not more and the supervisor to ensure training is com Approved 14. Work Phone (Include Area 15. Access 16. Access 16. Access 16. Access 16. Access 16. Access 17. Date of Birth (MM/DD/YYYY) Special User Access Approved Approved 18. Access 18.	4. Work Phone (Include Area Co 7. Date of Birth (MM/DD/YYYY) 8. 13. IRB Expiration Date (MM/DD/YYYYY Special User Access F Level of Acc 9 National Data Systems (NDS) of any change riew Protected Health Information (PHI). I acknown or shared with other research projects unless location of the data is approved, I will not move and the supervisor to ensure training is completed. Approva	User Information 2. VA E-Mail Address 4. Work Phone (Include Area Code) 11. DART Tracking Numb 13. IRB Expiration Date (MM/DD/YYYY) Special User Access Requested for: Level of Access y National Data Systems (NDS) of any change in my position or dutiview Protected Health Information (PHI). I acknowledge that user acced or shared with other research projects unless specifically authorized location of the data is approved, I will not move the data to other location of the supervisor to ensure training is completed every 365 days. Approval DATE SIGNED (MM/DD)	User Information 2. VA E-Mail Address 4. Work Phone (Include Area Code) 5. Station (Facility Coopers) 11. DART Tracking Number 12. VA E-Mail Address 13. IRB Expiration Date (MM/DD/YYYY) 14. Coopers 15. Special User Access Requested for: Level of Access 16. Yellow Protected Health Information (PHI). I acknowledge that user access to this of or shared with other research projects unless specifically authorized in the proportion of the data is approved, I will not move the data to other locations unless and the supervisor to ensure training is completed every 365 days. Approval DATE SIGNED (MM/DD/YYYY)	

For CAPRI/JLV access, you will need Real SSN approval.



Tips and tricks

- When do I need to update a new Research Request Memo?
 - Be VERY specific in the amendment narrative of exactly what is being changed.
- Are Digital Signatures required?
- What is a Change Request and how do I see it?
- I changed my last name. How do I update it in DART?
- I moved stations. How do I update this in DART?
- How long do amendments take for approval?



Did You Know About Our Resources?

- Available only on VA Intranet
- VINCI Central https://vaww.vinci.med.va.gov/vincicentral/
- VHA Data Portal DART http://vaww.vhadataportal.med.va.gov/DataAccess/DARTRequestProce ss.aspx
- CDW Metadata Documentation on Data Sources https://vaww.cdw.va.gov/metadata/Metadata%20Documents/Forms/All ltems.aspx
- CDW Documentation on Data Sources from VIReC http://vaww.virec.research.va.gov/CDW/Documentation.htm



Questions?

VINCI@va.gov

