# Q&A Coffee Sessions with EDGE super users

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EDGE?



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### How and why did you move into clinical research?

I was working in the Trust in Recruitment and saw the position come up. It looked interesting and challenging and allowed me the opportunity to develop the role and use key skills from my previous working life in financial services and sales. The opportunity to promote and grow research across the Trust for the benefit of local people really appealed to me.

#### What does your role as R&D Information and Finance Officer at Torbay and South Devon NHS FT entail on a daily basis?

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My team and I provide all research data for the Trust and produce dashboards internally and across the Trust to highlight what research is taking place. We also try and promote other areas to become research active. I work closely with clinical teams to provide them with the information they need to maximise recruitment and meet our Trust targets. We are also responsible for ensuring our data quality, so we produce regular monthly housekeeping reports to enable all of the research team to maintain quality data and prioritise the next month's workloads. Furthermore, I work on building and developing new workflows and attributes on EDGE to track our business and income, and to improve efficiencies in study management and set up - not just within central R&D, but also within support departments such as radiology, pharmacy, and labs who also use EDGE daily. This provides real time visibility to each other's progress and study management.

## How has your role within clinical trials changed over the past 12 months?

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**User!** 

We have had to adapt quickly and learn new ways of working. I worked with our clinical systems teams to manage ways to guickly identify and track our COVID patients through our clinical systems and EDGE, which allowed us to maintain recruitment and offer ground-breaking COVID trials to our local patients. We have had to adapt our reporting systems and, through making adjustments to EDGE, were able to track and monitor the pausing of studies at the start of the pandemic and then the Restart process. By tracking this through attributes in EDGE, we could efficiently progress back to normal activity. We are now using EDGE across the region to aid our Managed Recovery studies with our colleagues in the Network, allowing better communication between all parties.

### How do you utilise EDGE in your daily role?

EDGE is used every day for pulling data, and managing our pipelines for financial income, study management, and recruitment. We have a suite of reports that are managed daily, weekly, and monthly to monitor and progress all aspects of our business. EDGE is used across the Trust by central R&D and all key supporting departments, and is our chief means of communication particularly for study setup. Through our workflows and attributes, we are able to see each other's progress and activity, and this has helped improve our set up timelines. Activity is monitored through our use of recruitment and screening activity alongside appointments in the EDGE calendars and follow-up attributes (which has been explained in a previous webinar). This allows our clinical team to review activity and future capacity for clinical teams and specialities and adapt accordingly.

#### You have been using EDGE for almost 6 years now. In what ways has your use of EDGE changed and evolved over this period? Attributes have always been key for us. From early on in my role, I realised that capturing the right information upfront would allow us to improve our knowledge and reporting. However, this has been expanded over the years, particularly with the use of workflows to greatly enhance our reporting capabilities. Developing all research staff's use of the system has been key, and getting everyone to recognise the importance of data quality through monthly housekeeping reports is instrumental in evolving this. Working with key staff to develop workflows and attributes to capture vital data that can provide them meaningful reports is instrumental in getting their commitment and buy in to providing the quality data required. Training is also key. We have worked together as a team to develop a training suite of modules on EDGE that is delivered to all new starters and existing staff to ensure that everyone understands the importance of quality data, and is therefore equipped with the confidence to maximise EDGE to its full potential.

#### As an R&D Information and Finance Officer, what is your favourite functionality to use in EDGE, and why?

Building new attributes because they have endless possibilities. I love the challenge of identifying a new project, designing a way to capture the information needed, and then developing this into a new dashboard and visualisation for everyone to engage in.

You have previously ran a series of webinars sharing magic tips and tricks for bespoke reporting in EDGE. If you could offer one reporting tip to new R&D officers to the field, what would it be? Work with your end users to understand exactly what it is they want to achieve, and then look to visualise this in the simplest way possible. Understanding what you need to get out of your data will bring focus on what you need to put in. Be specific - anything vague with human input allows for error, so always use drop downs and never "other" or free typing!

#### What are your department's plans for using and developing EDGE over the next 12 months?

We are looking at further development of the calendars and our activity management to better understand our capacity and future planning. Working with the clinical team, we want to build on our "Treatment "and "Follow Up "attributes to fine tune this even further and provide an even better understanding of individuals and clinical teams' activities and workloads.

### One hope for the future of EDGE and research management?

I am hoping that some of the calendar functionality I have worked on with the EDGE team for EDGE 3 will be implemented. I am particularly keen for a scheduling option for future appointment building automatically rather than manually adding, as well as the option to remove all future appointments at once when a patient comes off study. Also, more reporting functions within the finance section as currently much of this has to be done externally via formatting to produce our pipeline activity and monitor our invoicing.

#### What is your "bigger picture?" That is, what do you find most fulfilling about your job?

Working in research and providing the data and support to the clinical teams allows me to play a part in vital research and developing new treatments for the benefit of all patients. This has never been more apparent than during the pandemic, where our vital work in research has helped develop treatments and a vaccine to help protect us all from COVID.

### One of your greatest personal achievements:

Having always been unfit, I decided that, I needed to keep up with my daredevil teenage son (he gets us doing all sorts of crazy things, like snorkelling in glaciers and abseiling down waterfalls), and that I'd better do something about it! I took up running last year and, from not being able to run to the end of the road, I now run 5-10km 5 times a week and strangely now enjoy it!

### One clinical research superpower that you wish you possessed:

I wish I had an autocorrect button on my keyboard to automatically correct any missing/data errors!

### One thing that people might not know about you:

Living in Torbay, I love the sea and we enjoy going out on our boat and paddle boarding around the bay. If we are lucky, we get to see the seals if the kids jumping off the boat doesn't scare them away!

## One new personal skill that you've learned over the past year/during the pandemic:

During lockdown, I learnt how to mix concrete and build walls as we built a pub in our garden to keep ourselves occupied!

By Ken Brackstone, Clinical Informatics Research Unit