REDCap at University of Vermont – Policy

Availability

Based on our license agreement with the REDCap Consortium, REDCap is available to any UVM personnel. Allowed uses include research, quality improvement, and operational support.

Persons desiring a REDCap account should fill out the REDCap request form:

https://redcap.med.uvm.edu/surveys/?s=AJ3L7R9RKJ

Research users should either upload (via the request form) or send the REDCap administrator a copy of their protocol and IRB approval (or exemption) memo.

Up to 5 hours of assistance are available from the REDCap administrator. More extensive help would need to be paid for on a percent FTE basis.

Data Retention

Data are kept indefinitely in REDCap for current UVM personnel. When a REDCap user leaves UVM they are requested to download their data, if needed, and delete the project, unless the project is continuing at UVM with other personnel. REDCap projects with no current UVM personnel will be deleted after a number of years depending on regulatory and institutional policy.

Super Users

Two members of the Larner College of Medicine IT group are responsible for installing and maintaining the REDCap application and database. Two other users function as administrators, with responsibility for overseeing user accounts and REDCap configuration. "Super User" privileges will be removed from a user on notification of job change or termination.

User Accounts

REDCap users must set a password in order to access REDCap. The REDCap password must be at least 9 characters in length and must consist of at least one lower-case letter, one upper-case letter, and one number. Passwords expire every 180 days, and users may not re-use their 5 most recent passwords. Users may set up a password recovery question to allow them to reset their own password. A user account expiration date can be explicitly noted. If no date is specified, user accounts are suspended after 365 days of inactivity. In addition, project owners can specify expiration dates for user access to their project.