

OUR GOAL: to integrate the PCSP/Risk Assessments/Provider Monitoring/Additional Assessments for the PCSP

March 25, 2011

Review meeting minutes. No changes noted.

We discussed the **Individual Data Forms (IDF)** and when all providers need to have their information updated by. After much discussion, the team felt that **all providers should have these completed by 5/30/11. A webinar will be set up for those wishing to learn more about it and assuring that they have all the information to complete each individual person's IDF.** Wendy will send out the dates and times of the sessions. Therap will also put it on their home page, but due to the fact that everyone does not get into Therap daily, a reminder from the State office will be beneficial. A couple of alternative sessions will also be set up for those that can't make the initial one. There is also the opportunity that they will record these and have them available on their website or on YouTube for future viewing. **You can go to YouTube now and search "Therap" and you will be surprised at how many webinars are already posted there!**

We reviewed the assessments that were on the table. All of the links were provided to the team prior to the meeting as well as ones that were attached to give everyone the opportunity to view them prior to our meeting. The team agreed that the IPOP's will be completed in the Residential and General sections for level II skills. We have some additions that will need to be added to the residential IPOP. The sections that needed to be added were bathing, toileting and transferring in the personal hygiene section. Shopping needs to be added to the money management section Meal preparation needed to be added to the daily living skills section. Finally, a new heading needed to be added for Recreation/Leisure that includes social roles and participation in the community. For future reference, the link to the IPOP is: http://www.therapservices.net/quickguides/ipop/ipop_GenInfo.pdf
http://www.therapservices.net/quickguides/ipop/ipop_ResInfo.pdf

As far as the level I assessment, Mary and Sheila had sent us out a copy of the assessment that they put together that they took information from a variety of assessments. However when I spoke with Mary and Sheila Friday prior to this, they stated that the risk assessment and the Health assessment (E-CHAT) would suffice and cover all areas identified for risks for level I clients. The one thing the team then started discussing is how thorough the ND RMAP is and that this would really cover all areas, could Therap get this format into the system also. The probing questions are critical pieces that remind those that are completing this form to get all areas defined. We then asked Deb Hibbard if the RMAP in Therap actually integrates itself into Therap and it does not. Essentially that is something that they would like to move to, so it really may be awhile before this can merge into the PCSP. Since we would be completing and attaching the Therap RMAP anyway, why don't we just keep the ND one and complete it as it is, scan it and attach it to the PCSP as a PDF file so that the team would be able to view this. The group, after much discussion, actually felt that the ND one is really very comprehensive and that they would like us to stay with it until such time Therap works with their integration. And since the ND RMAP already has the medical information, we would not need to complete the e-chat form at this time.

We discussed what would make the Therap RMAP document better and more pleasing to use. The team recommended that they add the probing questions (drop down menus), add boxes/lines to the areas to better define the area and add the communication piece as well as the service line piece that is on the last 4 pages of the current ND RMAP. If these things would happen, the team would be more

interested in using this form once it integrates itself within the PCSP. We will revisit and discuss the Therap RMAP once it is integrated.

Comprehensive Health Assessment Tool (eCHAT) – we will hold off using this form until a decision is made on the Therap RMAP. Until this time, providers will continue to update and complete the IDF as changes occur. Providers can use the Health Passport to print off current diagnosis, medications and other essential health information in order to take a client to a medical/behavioral appointment. This health passport is basically a health referral. Emergency data can also be generated once the IDF is fully completed. There was also discussion on the diagnosis being entered by a number of people. Once the systems are integrated, the hope is that the providers will keep this information up to date and the DDPM's and the State office will be able to access this as needed. The team agreed.

The group is aware that there are Vocational assessments available on the Therap website. Providers in these settings can certainly use one of the 4 assessments that are here, however they can certainly continue to complete their own assessments and scan it into a PDF format and attach it to the PCSP. If providers are interested in the Therap forms, they can go to:

<http://support.therapservices.net/display/support/Offline+Forms>

IFSP and the RMAP for kids were discussed. The state will keep the two forms, one for the PCSP and one for the IFSP. We talked about having the ability to pull information from an IFSP into a PCSP once the child graduates into the next program and we continue to provide services to them. Gary thought that this is a feasible request as we will have all the information on each person served in the State and this would be accessible to the provider as they age through the process. The intermittent providers and those that use the IFSP can to a consensus that RMAP #3 is typically completed for all children and those who receive intermittent services. This will continue. So, we will have to Risk Assessments, one for the adults and the other for the kids and intermittent services. Both of these will be completed in the word documents, scanned into a PDF format and then attached to the plans. Everyone was in agreement with this.

We discussed the 21 outcomes/values outcomes. Some people thought that this could be embedded into the PCSP plan that will be in therap. However, if we no longer use CQL to go through accreditation of our providers or they change their outcomes, what would that do in the plans in Therap? We discussed how these are completed now. Most everyone completes personal interviews with each person and then they go back and complete the form. With how Therap is now, plans need to be able to collect data on the outcomes (training objectives). There were comments on the valued outcomes basically being service objectives, things that staff are responsible to help the clients complete (things that we aren't really tracking, but things that they need to do for the health and safety of the consumer). Lisa has placed a number of service objectives under one goal, but if there is one in there that needs to be tracked, you can complete a separate outcome for that. This obviously will need some training for providers to know how to go through and implement these in the plan so that they can track what they want. Right now, REM and RRHSF is completing the ISP programs section in Therap where Pride is completing the ISP Plan which contains the programs within it. We will be setting up a webinar when we get to this phase.

Our timelines for rolling out information in Therap is that once we have the information in Therap to use and have set up a webinar for the information, we will be having the providers implement those sections, with the intent to have all the assessments rolled out and trained on by 6/30/11. There have been some webinars that have taken place and some of these have been recorded in a YouTube video.

There are some upcoming webinars in Therap and it was asked if these would be beneficial for folks to attend. Wendy and Deb Hibbard will review to see if these could be viewed by us and if it is geared to the modules that we will be using here in this State. Currently there was a webinar with an ISP plans and programs training. Deb H. will send Wendy the link to share with the group so that they can view this information prior to implementation of the plan being in Therap.

Here is the link for the ISP webinar <http://www.youtube.com/watch?v=hJTKkRwL91E>

The PCSP Plan: What will it look like? We reviewed the checklist that Wendy sent out. Basically after much discussion, the checklist is just an overview of what goes in each section. We may be able to embed parts of this in the template so that items will not be missed. The more specific you get in the plan, the higher quality of plan you have. Wendy will update the couple of changes and recommendations by the team and will re-submit this to the field.

We also addressed alerts. When will we be able to see each other's documents and who will manage the tasks? This piece we will be working on from the State office and IT side of things. We need to identify who will see what and when they will be able to view the information. We will also see if there are items where we can have the system define the tasks (like after a PCSP has been activated that the alert sets itself up automatically so that it will generate a message before the next year's PCSP plan is to be held.

As we wrap up part of phase II, the group agreed to be available for future meetings to help define and implement the phase II information as it's rolled out. Should there be questions, the group is willing to help out as needed, and we thank you ALL for that!

Final to do's:

- NDACP May5th – our training is at 10:15-11:45am that day. Lisa, Val and Wendy will be presenting.
- Set up webinars
- Open modules to this group once the assessments are updated in Therap

THANK YOU ALL!!!! 😊