

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

February 25, 2011 meeting minutes

Attendance: Members from Phase II sites were Grafton, Grand Forks, Fargo, Jamestown, Harvey, Minot and Bismarck. Deb Hibbard from Therap was also on the call.

The team reviewed the meeting minutes from 2/11/11. No corrections or changes were noted.

We conducted follow-up on the following questions/answer section from 2/11/11 meeting just to assure that everyone was aware of the process and Deb could clarify any information.

- **Are there limits to what can be put into Therap?** A: NO-as long as it's specific to a consumer and items are attached if not used by the whole group, there isn't a limit. Per Deb Hibbard: There is a 10MB limit/IDF/person.
- **How long does it maintain the information?** A: it's all inclusive and needs to house long term data for licensing items and to be able to retrieve historical data, much like the archives you currently have on paper somewhere in a storage place (Go Green). Deb also commented that there are no plans to delete any of this information as this is the client record and needs to be accessible, much like the paper trail that we used to have to warehouse this data.
- **Are you able to remotely access this information (mobile access, iPod, blackberries etc.)?** A: As long as you have internet access through these technology devices, you will be able to input the information from anywhere, provided that you also have a secure connection. Deb just reminded the group that we need to make sure that everyone that is to use Therap has their provider code and access information if they are trying to get to the data remotely. Staff is also able to enter this information from their own homes.

In the IDF, each of the regions had to have this information in order to be able to input the basic information to create the profile. There is more information that can be filled into this document. It was recommended to the group to go back and talk to their Therap database administrator to give them access to this form so that they can start to input more information on each of the consumers. During this time frame of trying this out, Don Nelson from Alpha ran into a snag. He was able to contact Kara from Therap who could assist him to get to the information. Deb stated again that the provider administrator for your respective agency needs to give themselves privileges to access the IDFs in their regular user account. If you do not recall how to do that, you can certainly get in touch with Therap by using the 'live help' feature at bottom of any page, sending us an email, or finding the information in our help and support section. Here is Kara's information also:

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PCSP – Sherry (MVAW), Lori (DDPM), Val (Pride), Sargianna (Community Options) and Wendy presented on the PCSP. The IFSP and the PCSP will still need to be two different documents due to the dynamics of each entity. As far as the PCSP checklist that was sent out to the group, we discussed that we will need to work with the providers to know how to be able to link the programs so that we would be able to pull data (charts and graphs) from this information (the DDPM's that do have access have found this to be useful). There was further discussion on how the PCSP is developed and then linked within Therap, so we had a computer for Val to access her information and show the group again where things can be found and how to enter the information.

There was also discussion on the assessments, particularly the Self-assessment that was sent out. This form is known as the Valued Outcomes in Therap and we will change the header to reflect this information. Val commented that in the valued outcomes, this is where the service type objectives will be placed (things that staff need to do, but not necessarily needing a graph/chart of outcome measurement). The service objectives will be tracked with a running narrative where a behavioral objective will be the ones that the team is looking for specific progress from a consumer. This information will jive with both the CMS and CQL guidelines.

Also for purposes of this group, we will be changing the wording on the DDPM's activities so that they will only need to create the ISP and not a PCSP. The PCSP will be developed by the provider PC/QMRP roles, unless there is not a provider working directly with a consumer, but rather just a DDPM, who would then create this information for the individual (like for folks in extended services).

Mary had previously commented that Therap has its logo on the header and footer of every page. This really does take up space. Can we get rid of one of them? Also would it be possible for each individual provider to be able to put their logo on the paperwork to identify where the information is coming from (i.e. like for a referral packet). Wendy noted that in subsequent pages of a form (i.e. PCSP), this information is much smaller and will not overpower the page. Deb will check with Therap when they are here to see what the possibility would be to take some off, or make it smaller. She also mentioned that the provider administrator is capable of adding their own logos to forms, if they would like. If they need further assistance with this, they can also contact Therap for tips on how to do this.

It was suggested that all the assessments in Phase II go to the ND providers for final perusal prior to Therap inputting this info. The group stated that since this is a task force type of group, they are willing to show them the information, but all items that this group decides should be final, unless CMS or CQL come in and find fault with a form. Then we will re-look at the information and revise as needed.

Next work groups:

- The PCSP group will finalize and present the final draft at the next meeting (will be sent out prior to for your input and perusal)
- Vocational assessments – we need to get vocational assessments from various providers so we can get started on this section. Is this going to be needed in Therap or will this be one of the attachments to the PCSP?
- IFSP and extended services
- RMAP for kids
- Monthlies/quarterly reports

Next meetings:

- March 11th and 25th

Final to do's:

- All pending assessments completed by 3/11/11 so that Wendy can get these out to the group
- RMAP info to Therap for the updates
- Final PCSP checklist/worksheet out to group that includes the PCSP checklist that had been developed in 2009 and is currently being used by all providers and DDPM's to form the annual PCSP for each person.
- Finalize the presenters at NDACP May 4-6th

Therap to NDACP in May
Therap conference in June