

Therap in South Carolina Newsletter

October 2016

October Spotlight on Marion-Dillon DSN Board

In May of 2015, staff at Marion-Dillon were trained on the use of Therap. They started out with T-Logs and S-Comms. Since then, their usage has skyrocketed. Says Rob Horton, Information Technology/Data Security Administrator, "We have added Time Tracking for accountability in Residential and Day Programs, sleep charts, and tracking compensable and non-compensable time in our Day Program.

Marion-Dillon stumbled upon Time Tracking by accident. In July of 2015, Jeff Covington met with Mike Keith and Rob. They were pleased to hear that in the previous month, they had written the third most T-Logs of any provider in South Carolina. The two agencies ahead of them had been using Therap longer and were quite larger. Turns out, Marion-Dillon was using T-Logs for accountability. Jeff showed them how to be more efficient using Time Tracking and they immediately implemented it. Mike and his staff were the first agency in SC to use Time Tracking to monitor accountability.

Marion Dillon also uses Health Tracking, including appointments, ISP Programs and data and GERs for non-critical incidents. Rob adds, "We have also implemented the optional Training Management System, which has been a huge benefit to our staff development program."

Rob credits a conservative and thoughtful process for achieving the level of success his agency has had with Therap implementation, "Many of our staff were initially both challenged and intimidated by the idea of being required to use a computer. For some, this was a new experience. We started with just T-Logs and S-Comms. We added Time Tracking which cut down on the number of T-Logs we were initially generating, and made for an easier experience for staff to get accustomed to the idea of using a computer. We've been adding modules slowly, a little at a time, to allow staff to gain confidence before new modules are added."

Marion-Dillon is using two modules that are not required and has implemented modules well ahead of required DDSN directives. Experimenting and self-education are keys to this success. Rob's advice is, "Don't be afraid to go in and explore features and modules you are not currently using. Take advantage of the Therap Training Academy to learn about new features, and encourage Direct Support Professionals to do the same. I'm looking forward to the day when a DSP will come to me and say 'why don't we use this module?'"

As many Therapites have found, Rob credits and increase in overall communication and real time data has benefits of rolling out Therap. Rob states, "It has been especially helpful to our nursing staff to have real-time health tracking information when monitoring blood pressure and blood glucose levels for consumers on some medications, without them having to go to different locations to check charts."

The Training Management System (TMS) has been a real benefit to Marion Dillon. Rob emphasizes, "It has also made it easier for Staff Development to notify staff of upcoming scheduled trainings. It is a tremendous benefit."

Rob has an eye to the future as the implementation in South Carolina continues to unfold, "I'm looking forward to our implementation of the MARs, as I hope to see a decrease in documentation errors with the switch to the Therap module."

Change is always a challenge for organizations and perceived fears can easily derail a project. Therap implementation was no different for Marion-Dillon. However, staff fears are often quickly evaporated. Rob illustrates, "One thing I think has been significant is the change in perspective as a feared potential downfall proved to be an actual benefit. Initially, staff were afraid the move to Therap would mean taking time away from the consumers

due to an increase in the amount of time spent on documentation, however, the opposite has been the case. DSPs have found that it takes less time to document in Therap than to document on paper.”

As Therap usage increases at Marion-Dillon, Rob has found changes need to be made, “we will be distributing guidelines for T-Logs with keywords to be used in the subject line to make it easier to search for and make use of information that has already been recorded.” Rob recognizes that as with any project of this scope, mistakes will be made and need to be corrected. Rob adds, “A second change is we will be replacing our residential Time Tracking charts, which were initially set up by shifts (a mistake on my part), with charts that cover a full 24 hours a day.”

Rob describes Marion-Dillon’s implementation of Therap as taking “baby steps”. However, if you look at the tremendous progress they have made of the past eighteen months, you’ll see that it is significant. They probably wouldn’t have envisioned this level of penetration into the system during those late May days of 2015 as staff began to learn how to use the system.

Documenting Accountability in Therap

Clemson or South Carolina? Ketchup or mustard based BBQ sauce? These are debates that rage on in the Palmetto State. Now there is a new one: ISP Programs or Time Tracking to document accountability? As with many things, there are advantages and disadvantages to both as well as similarities along with differences that make one more preferable to the other.

Time Intervals: Time tracking can be used in 15 minute, 30 minute, one hour, and two hour intervals. When documenting varying intervals such as 3 hours or 4 hours, it is preferable to use ISP Programs. Documenting with Time Tracking is a little quicker and can be less daunting for staff to complete with intervals of less than one hour.

Reporting: Reports generated through Time Tracking are much more visibly appealing and set up for user readability

compared to those reports made through ISP Data Reports. They are also much less time consuming than generating a ISP Data Report. Both are color coded, but the color coding in Time Tracking is user defined and can lend to more consistency in reporting than in ISP Programs.

Set Up: Both are fairly easy to set up. Either an ISP Program Template or Time Tracking Template can be made and assigned to as many individuals as you wish. Time Tracking Templates are a bit easier to create and assign. However, if you have multiple methodologies for collecting Accountability (15 minutes, 1 hour, 2 hours) you have to create multiple Time Tracking Templates. With ISP Data, you could create just one ISP Program Template in your Template Library to meet your entire Accountability tracking needs.

Staff Usage: It takes seven “clicks” to document one accountability instance in ISP Data. In Time Tracking it takes six. So if you do accountability for one hour, with four people; that’s 36 less clicks using Time Tracking over ISP Data.

Monitoring: Running reports to ensure accountability is being consistently and contemporaneously documented by staff is a far easier process using Time Tracking compared to ISP Data for an individual. However, to look at aggregate data over an entire program, ISP Data is the preferred module.

Comment Capability: For either making comments on single data collection and the end report, Time Tracking does not have that capability, in ISP Data Reports and ISP Data, that is allowable and for data can be required.

Which module should your agency use to document accountability? That’s not an easy question. Please look over the differences and figure it out. Go into test mode or use the DEMO-SC account to test each out. Network with your local providers to get their input. Currently, more providers are using Time Tracking than ISP Programs for accountability. Also, reach out to your favorite Therap staff to hash it out. There should be no debate about who that is!