Therap's Person-Centered Documentation System.

When Therap began to develop a documentation system for providers of services to people with developmental disabilities in 2003, the team made decisions to use a Commercial Off the Shelf (COTS) system, using a Software as a Service (SaaS) platform, and to develop a person-centered data storage system. Consequently, Therap's comprehensive electronic record-keeping system has been able to meet the changing needs of its customers for nearly twenty years. During those years there have been profound changes in theory and in the overall approach to providing services and support to individuals with developmental disabilities. The development of Home and Community Based Service (HCBS) Waivers spurred a transition from congregate to community living situations. Work for people with developmental disabilities is transitioning from sub-minimum wage jobs in sheltered workshop types of settings to community employment. Service record keeping expectations have become more stringent and agency records are increasingly subject to automated audits. The list goes on and on. Therap's initial decisions have allowed these fundamental changes to be integrated into Therap's documentation system as enhancements, rather than as changes that required starting over. This white paper takes a look at early decisions and how they have allowed Therap to respond to changes that enhanced the system over time. This paper looks at those early decisions and how they allowed the Therap system's evolution to be responsive to the changing needs of service and support providers over time.

Organizations that support people with disabilities operate in an environment with regulatory stability. Prior to 1983, Medicaid did not pay for long term care outside of institutional settings. The 1983 Section 1915(c) of the Social Security Act established an alternative to institutionalization. Alternatives were required to be the result of a person-centered planning process that emphasized self-direction. The HCBS Waiver regulations established consistent annual requirements to maintain the integrity of Medicaid, which is a health insurance program, while giving states the flexibility to develop programs to give individuals receiving support the opportunity to develop programs that promote an individual's rights and capability to live a socially integrated and independent life. A summary of Section 1915(c) follows:

- Eligibility is based on an individual having an institutional, nursing home, or hospital level of care and is reviewed annually.
- Service plans provide medical assistance consistent with written plans of care for case management services, homemaker/home health aide and personal care services, adult day health services, habilitation services, and respite care
- Service Plans are reviewed and revised as necessary at least annually.
- Habilitation services are services designed to assist individuals in acquiring, retaining, and improving the self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings including prevocational, educational, and supported employment services as long as those services do not supplant other publicly available services.

In Therap's documentation system, the individual is the nexus of data entered into the system. In designing the system, the goal was to develop a database that, like the five-ring binders paper systems of the past, was a single system for data entry and data review.

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The central component of Therap's record system is the Individual Data Form (IDF).

- The IDF is a detailed description of an individual's history and it can be established while the individual is an applicant for services, receiving services, no longer receiving services, or deceased. At the time an individual applies for or is referred to an agency, documents and notes can be attached to the IDF to evaluate eligibility for services.
- When an individual is accepted for services, the IDF is used to link the individual to planning services to establish a service plan. Once the person is accepted for services a variety of other data sets, such as health, behavior, medication, diagnosis, and other data can be collected about the individual.
- With the IDF as the Core Record for an Individual, the capability of accessing data about that individual is intuitive. Users can easily access Individual Service Programs, Health Records, and other data relevant to the Individual to enter data and to retrieve data.

Over the years, the medical model terminology and assumptions from before 1983 have become a thing of the past. HCBS Waivers did not develop immediately with many states transitioning to ICFsMR, then to congregate HCBS Waivers, and then to community settings.

Care Plans:

Therap's COTS system was developed with rule-based flexibility. A central component is the Individual Service Program.

- Individual Service Program (ISP) is the term Therap uses for service or care plans used to develop habilitation plans to assist individuals in acquiring, retaining, and improving the self-help, socialization, and adaptive skills necessary to reside successfully in community-based settings
- Settings include prevocational, educational, and supported employment services.
- The rule based habilitation plans (referred to as Individual Service Plans in Therap) are developed and maintained by the organization providing services
- Plans can be modified to respond to the changing expectations with detailed person centered descriptions, scoring, standard evaluation reports, and simple data collection screens.

During 2016 and 2017 Therap also developed a Care Plan / Individual Support Plan that was consistent with the changing approach to Person Centered Planning.

- The Individual Support Plan has a Personal Focus Worksheet to capture the individual's personal goals identified by working with the individual's personal and professional Circle of Support.
- The Individual's personal preferences are then linked to an Individual Support Agenda that captures the dates and events necessary to meet CMS requirements for person centered planning as well as required notes, questions, and links to store documents such as the Eligibility assessment and Level of Need assessment.

The final component is the actual Individual Support Plan. The ISP:

- captures the individual's broad goals
- in accordance with CMS requirements for health and welfare
- links the goals to the Individual Service Programs that are used to record and score the day to day to day delivery of services.

The Individual Service programs also have standard reports that can be used to to evaluate the effectiveness of Individual Service programs whenever necessary.

One of the most important features of Therap's COTs approach with rule based modifications is that the organization providing services can develop, adjust, modify, and report on an individual's Individual Service Programs without assistance from Therap.

Therap is currently working with University of Missouri Kansas City (UMKC) Institute of Human Development (UMKC IHD), a University Center for Excellence in Developmental Disabilities (UCEDD), to implement Charting the LifeCourse, a Person Centered Planning program to help individuals and families of all abilities and ages develop visions for a good life, identify how to find and access supports, and discover how to live the lives they want to live.

One of the most effective ways to view the functionality and intuitive approach Therap offers is to look at an individual's Individual Home Page that provides a single screen that can be used to review the individual's Individual Service Programs, IDF information and other relevant information and attached documents. In summary, as person-centered supports evolve, Therap is equipped and committed to the continued evolution and best practice of individuals served.