

Welcome to Therap Services!

Implementation Guidelines as Recommended by Therap

The following outlines some basic steps to implementation of the Therap system that we have found to be most successful. By following the guidelines offered by Therap, an agency significantly increases its chances of a smooth implementation process.

- ✓ **First and foremost, the State of Montana has chosen a deadline of October 2009 for all agencies to be utilizing the General Event Report (GER) module in Therap to replace your current paper incident reporting system. Agencies that are able to implement more of the system should consider**

The agency will identify primary provider administrators who will guide the agency and ensure deadlines are met. These will be the people who run the system, who coordinate the training, who learn the system inside and out. They should have a mixture of computer acumen and programmatic-based knowledge. These chosen individuals will also be instrumental in helping rewrite policies surrounding the use of an electronic data-keeping system.

- ✓ **The agency will develop a reasonable timeline with Therap staff from Provider Self Provisioning (PSP) to their first *live* date. Therap will help you with this.**

This is imperative. We all tend to do better when we have deadlines. Without deadlines, things are more easily put aside and postponed. This timeframe is based on the size of your agency, the availability of hardware, and any other considerable circumstances, and Therap will help you develop this plan. The most successful agencies implement throughout the entirety of their agency all at once on the chosen live date. Typically, what organizations will do is on the given date, the paper documentation simply stops with a notation that the information is now stored electronically. The paper documentation is filed away and unnecessary forms are shredded.

For most residential and day services programs, there will most likely be subsequent implementation of further components. These additional components should be delivered the same way: with scheduled training and a planned timeline until the agency has reached full implementation of its new system.

- ✓ **The chosen administrators will go through Provider Administration training and the initial set up of system (2 calls with Therap staff and the input of all sites/programs/individuals).**

It is imperative that the work ahead of time is complete and correct when setting up the system. The provider administrator(s) will also be instrumental in staff training as they will be activating user accounts and fielding agency-specific questions during the scheduled sessions. Agencies that work closely with Therap from the very beginning tend to have fewer technical and access issues later.

- ✓ **The agency should include as many programs as possible for the initial transition. Ideally, all facilities go live on the same day. Prior to this, ALL of the relevant staff needs to be trained.**

The agency will schedule an introductory session for management staff on Tlogs, GERs, and SComm.¹ Managers will need to go through self-enrolling and have an active user account by this time to complete the Training Checklist (Therap will produce report to ensure all staff complete).

The agency will schedule staff training in sessions of 20 individuals per session (if training is conducted onsite; over the web, more can certainly attend) on Tlogs, GERs, and SComm. Direct care staff will need to go through self-enrolling and have an active user account by this time to complete the Training Checklist (Therap will produce report to ensure all staff complete).

Some agencies have also successfully employed a “Train the Trainer” approach where their trainers work with Therap staff and conduct the internal training themselves, using the training materials provided on the website along with any necessary customized materials that Therap may be able to offer.

Regardless of the technique, immediately after training is completed, all facilities should go live with Tlogs, SComms, and GERs. It is crucial that all facilities make this transition uniformly by removing all paper-based documentation that is being replaced by Therap.

- ✓ **Continued implementation and live dates need to be firmly mapped out for the remainder of the system.**

This same process will be followed for subsequent implementation of Health Tracking, Behavior Tracking, and Individual Service Plans...Discussion surrounding use of Attendance & Billing, Training Management, and Staff Scheduling will also occur at this point. Timelines for each phase will be developed until the entire system is implemented.

- ✓ **Maintenance and Communication are vital to an agency’s success. Therap recommends the following:**

During this period, the agency’s CEO and primary Provider Administrator should participate in monthly status calls with Therap for first six months through the initial and subsequent phases of transitioning away from paper-based documentation.

The agency should also attend at least one Therap Conference, sending its key staff members to receive more intensive training and offer feedback on the system. The provider administrator of the given agency should also attend a provider administrator’s conference. We have found that these conferences offer platforms for valuable training, as well as networking with other agencies that are using Therap.

¹ Some agencies elect other modules as well as electing to include Health Tracking to begin with along with GERs, SComm and T-logs. This is part of the initial discussion when setting up the system with the provider administrators.