

ITPS Release Notes PND Version 4.3

Stu Forman
January 21, 2008

Version 4.3 of ITPS contains a number of enhancements that have been requested by users. These include the following:

You are now able to change the status of Domains from within a treatment plan. You therefore no longer need to create a new Functional Assessment. You will find the relevant button on the first screen of the treatment planning section.

For units with rapid turnover and which do a lot of psychoeducational, leisure and milieu support groups composed of all the members of the unit (and no one else), there is a new utility that will reconcile a group with the current unit census. It will remove patients no longer on the unit and add patients who have been recently admitted to the unit. As it adds new patients, it will insert the group default Interventions and Objectives (if they exist). Note that this utility should not be used for Psychosocial Rehabilitation groups and Psychotherapy Groups, which should not consist of a unit's full membership. This utility will also cause problems in groups containing patients from other units. You will see the new button on the Group Setup screen.

When a member is added to a group, the system now looks first for an electronic plan from which to import relevant Interventions and Objectives. If it doesn't find a plan containing this information, it next looks for a Group Referral. If it fails to find one, it looks for default Interventions and Objectives for the group. If it can't find any of the above, it reports this depressing situation.

When a group progress note of type "Other" is now printed, the printed document is slightly different. (The heading, for example, says "Progress Note" rather than "Group Progress Note.") This is to better accommodate other uses of this module. This is only true when notes are printed one at a time.

You now have the option to exclude type "Other" group notes from the Group Summary Report.

On the Suicide and Risk Assessments, the printed reports will now indicate that the document has been electronically signed by the person who created it. If another signature is required, please use the signature line to sign the printed document.

There were some potential problems in deleting Unduplicated Barriers and Unduplicated Services; these have been corrected.

A number of additional features to further streamline our work will be added over the next couple of weeks. These will include the addition of curricula for groups, a utility to automatically import group services into treatment plans, and assorted shortcuts associated with the general medical aspects of the treatment plan. I will also update the mechanism for removing duplicated clients, which have begun to appear in substantial numbers. There is much to be thankful for.