

Generate ISP Report - Data Collection Monthly

Generate ISP Reports on the services provided to the Individuals to track service delivery and progress towards goals.

Users with the **ISP Report** role can create reports on ISP Program for the individuals on their caseloads. Reports can be generated for Approved and Discontinued ISP Programs.

1. Click on the **Report** link available in the **ISP Data** row in the Individual tab.

Program: No Program Selected Choose Program Profile: Initial Module: <input type="text" value="Search"/>		
<div> <div>To Do</div> <div>Individual</div> <div>Health</div> <div>Agency</div> <div>Admin</div> <div>Agency Reports</div> <div>Individual Home Page</div> </div>	<div> <div>Care</div> <div> <div>T-Log</div> <div>New Search Archive</div> </div> <div> <div>Case Note</div> <div>New Search Archive Bulk PDF</div> </div> <div> <div>ISP Data</div> <div>New Search Report Search Report Archive</div> </div> <div> <div>ISP</div> <div>New Search Review Acknowledge Archive</div> </div> <div> <div>ISP Program</div> <div>New Search Archive Acknowledgement Report</div> </div> <div> <div>ISP Program Template Library</div> <div>New Draft Published Search</div> </div> </div>	<div> <div>Issue Tracking</div> <div>My Issues</div> </div> <div> <div>SComm</div> <div>Inbox</div> <div>Sent Items</div> <div>Compose</div> <div>Drafts</div> <div>Custom User Group</div> </div> <div> <div>Classes</div> <div>Overdue</div> <div>Due</div> <div>View Sign ups</div> <div>View Results/Notes</div> </div>

2. Select the program from the **Select Program for ISP Program** page.

Select Program For ISP Program

All
A
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Filter

15
▼
Records

Program Name	Site Name	Program Type	Cost Center Number	Program ID
Child Care Center	Care Home	School		01
Day Shift	Special School	School		01
Demo Program	Demo Site	School		555

Showing 1 to 3 of 3 entries

3. Select the individual from the **Individual List for ISP Program** page.

Individual List for ISP Program

Program: Demo Program (Demo Site)

All
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M
N
O
P
Q
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Z

Filter

15
▼
Records

Last Name	First Name	Individual ID
Tareq	Taufiq	

Showing 1 to 1 of 1 entries

4. Select the ISP Program name and click on the **Next** button to generate the report.

ISP Program List

You have selected 1 items.
15 Records

<input checked="" type="checkbox"/>	Form ID	Program Name	Site Name	Individual	ISP Program	Entered By	Program Creation Date	Approve Date	Status Approved ▼	Time Zone
<input checked="" type="checkbox"/>	ISP-DEMOTPHL-H9Q4NFNYTMULU	Demo Program	Demo Site	Tareq, Taufiq	Speech Therapy Plan	Sonia Ferdous, Therap Admin	05/01/2019	07/22/2019	Approved	Asia/Dhaka

Showing 1 to 1 of 1 entries
Previous 1 Next

Cancel
Next

There are four types: **Programmatic Report**, **Clinician Report**, **Data Collection Monthly Report**, and **Hab Documentation Record**.

5. Select the **Report Type** as **Data Collection Monthly** on the **Report Criteria** page and select the appropriate **Month** and **Year** from the drop-down lists. Click on the **Generate** button to generate the report.

Report Criteria

Report Type

Data Collection Monthly ▼

Time Zone

Asia/Dhaka

Show Report without ISP Data

☐ Yes ☒ No

Show Initials only

☐ Yes ☒ No

Month

June ▼

Year

2019 ▼

Selected ISP Program

Form ID	ISP Program	Approve Date
ISP-DEMOTPHL-H9Q4NFNMTULU	Speech Therapy Plan	07/22/2019

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Generate

6. The **Data Collection Monthly Report** displays the data collected for each day of the selected month for the selected ISP Programs. The scores will show only the first score entered for that task for the day. If you want to save the report, enter the report name in the **Report Description** field. When finished, click on the **Save** button to save the report.

Data Collection Monthly - Individual Summary Sheet

Status: New

Report Description: June Report

Report Type: Data Collection Monthly

PROVIDER: Therap Global Demonstration Provider
 INDIVIDUAL: Taufiq Tareq, Individual ID: MONTH & YEAR: 06/19
 SITE LOCATION: 531 Road No 11, Dhaka, Bangladesh Medicaid #:

Generated Report

ISP Program : Speech Therapy Plan

Scoring Method: Level of Independence

Score(s):

DECL Declined
 FULL Full Physical Prompt
 PART Partial Physical Prompt
 DEMO Demonstration
 VRBL Verbal Cue
 INDP Independence

DESCRIPTION OF THE INDIVIDUALIZED STAFF SERVICE/ ACTION PROVIDED	STAFF PROVIDING SERVICE/ACTION MUST INITIAL THE DATE THE SERVICE/ACTION WAS PROVIDED. (NOTE: by entering initials, staff are attesting that the service/action was provided on that day. Initialing must occur at the same time as service delivery.)																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Give me Ball	VRBL SF	VRBL SF	VRBL SF							DECL SF	DEMO SF		VRBL SF				VRBL SF	VRBL SF												
Clap Hands	DEMO SF	DEMO SF	DEMO SF							DECL SF	VRBL SF		VRBL SF				VRBL SF	INDP SF												
Say Hello (maintains eye contact for 5 sec)	DECL SF	DECL SF	DECL SF							DECL SF	FULL SF		FULL SF				VRBL SF	DEMO SF												

Staff Signature Log

SIGNATURE	PRINT NAME	INITIALS	TITLE
	Sonia Ferdous	SF	Therap Admin

By signing below staff are verifying that on each service date recorded on this form, the program day duration is accurately documented.

SIGNATURE PRINT NAME TITLE

DATA COLLECTION MONTHLY SUMMARY NOTE

PROVIDER: Therap Global Demonstration Provider
 INDIVIDUAL: Taufiq Tareq, Individual ID: MONTH & YEAR: 06/19
 SITE LOCATION: 531 Road No 11, Dhaka, Bangladesh Medicaid #:

Provide a narrative that addresses the individual's response to the services provided and any issues or concerns.

10000 characters left

SIGNATURE OF STAFF PERSON WRITING THE NOTE

TITLE

DATE



Display PDF

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Save

To know about **Programmatic Report** click [here](#).

To know about **Clinician Record** click [here](#).

To know about **Hab Documentation Record** click [here](#).