Configuring T-Res for Your Program

T-Res is a highly flexible software application.

We understand that no two medical disciplines or programs are completely alike. We discuss with each program the key configuration decisions required to get the most out of our software. That conversation starts with:

1) Defining a discipline standard or elements that may be relevant to multiple programs in the same discipline.
2) Defining elements relevant to the individual training program, such as the list of attending physicians or sites.

Below is an overview of the elements of configuration we will discuss with you to ensure T-Res fits your program needs perfectly.

**General Principles**

We suggest only collecting data at first that you know will be used. It is a common mistake to include too many fields, with the thought that the data may potentially be useful. If the information will most likely not be used by the learners or the program, it’s best to leave it out at first. From a habit and training point of view, it is much easier to add fields later than to remove established but unnecessary ones.

**Activity Forms**

First, we’ll discuss with you and decide which input forms are necessary for your program. These forms identify the distinct types of activities that will be recorded. From this non-exhaustive list, you may choose to include:

1) **Interventions**: Learners often gain their core experience by providing a specific treatment activity to a client or patient. We generally call this form ‘Procedure’, but it could refer to any kind of therapy or treatment.
2) **Patient Assessment**: The learner’s diagnostic skills can be distinctly recorded.
3) **Academic Activities**: Knowledge and skills gained through research, presentations, or other academic activities can be recorded to complete a learning portfolio.
4) **Administration**: Although used more often by practitioners, at times activities such as scheduling might be a crucial part of training.
5) **Reflections**: Providing a form in which learners can record reflections on experiences facilitates learning and may be reviewed by directors or preceptors. Reflection fields can be tied to individual encounters or done on a separate form to cover a period of time.
6) **Plans**: Learners can develop a ‘learning plan’ that can be reviewed.
7) **Clinical Activities with Multiple Patients (CAMP)**: Sometimes an activity includes a number of patients or clients, and it does not make sense to record each individual encounter. Examples include a psychiatrist leading group therapy sessions or a surgeon doing ward rounds.
8) **CanMeds Roles for Types of Activities**: CanMeds are a Canadian Royal College framework that describes the different roles a physician must be able to practice competently. These include roles defined as *Communicator*, *Collaborator*, and *Technical Expert*.

**Choosing the Fields**

Each form can have different fields that are logically grouped. A date field and a private notes field are always included. The latter, as the name implies, is only visible to the person who enters its contents.

The kinds of fields include:

1) Date fields
2) Pick lists (drop down menus)
3) Multi-pick lists where more than one value can be chosen
4) Short text fields
5) Long text fields
6) Check boxes
7) Scale fields (a scale of 0-5)

The questions to ask when setting the fields up include:

1) What information is needed?
2) How should this information be collected?
3) In what order should the fields appear?
4) What label should each field have?
5) What sections of the form will there be?
6) Which field falls within each section?

**Evaluations**

Activity-based evaluations can be configured. If this is one of your program’s needs, then we will discuss the following questions:

1) Which forms will you want to have evaluated?
2) Which fields will be seen by the individual (e.g. preceptor) completing the evaluation?
3) What strategy is followed for the evaluation of each form? Will all activities be evaluated? If not, will evaluations be triggered for specific procedures, by request, or by lottery specified by probability percentage?
4) Which fields will be completed on the evaluation itself?
5) Which of these evaluation fields will be visible to the learner so that the preceptor can give feedback to the learner to guide their learning as it happens?

**Validation**

It is possible with T-Res, if requested, to have a teacher, preceptor, or any other supervising individual simply validate that a field note a resident creates is accurate. With the validation feature, the teacher can view a summary of each activity that has been performed, and can simply confirm or invalidate each one by essentially ticking a box. If the teacher wishes to add a comment as well, that option exists.

The configuration for this feature involves deciding which fields a program wishes to have appear on the validation page.

**Reports**

As each program can have very different activity forms, fields, or workflows, all reports in T-Res should be reviewed after your program is fully configured. Most of our reports are designed to be useful to a broad range of training programs.

However, you may want reports specific to your program’s needs. We offer custom report development so that you can extract maximum value from the data that you are collecting. For more information about custom reporting options, please feel free to contact us.