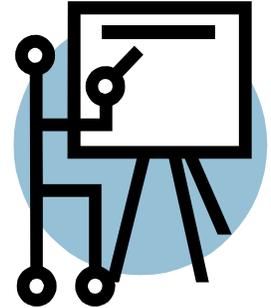




MAP Trainer Updates

March 2012



Testing Policy Reminders

1. **Test schedules will be filled morning first.** If your candidate is unable to schedule at the time available in the database, please contact our office for alternative arrangements. Alternative arrangements will only be made for special situations.
2. For candidates using ADA Accommodations the following has been added: **Be aware that there are extra costs associated with providing reasonable accommodations (translators) for testing and that you are expected to notify D&S directly of the need to reschedule or cancel more than 48 hours before any scheduled examination or as soon as you become aware at 877-851-2355.**
3. The following notes have been added to the Medication Administration Skill Instructions: **Please be aware that medications provided in blister packs may have been popped out of sequence by previous candidates. There will be a sticker on the package calling your attention to this. In such a case, you will need to count each tablet separately. This is not an attempt to “trick” you.**
4. We will no longer be mailing out reminder cards to Certified staff members to remind them of their certification expiration date. We have added the following information to the candidate handbook. **Your certification is valid for a two year period. You must recertify within 90 days of the expiration date. If you do not recertify within that 90 day recertification period, your certification will lapse. You are eligible to recertify for up to one year from when your certification expired however you will no longer be eligible to administer medication.**
5. For candidates scheduled by our office the following has been added to the candidate handbook and online registration instructions. **PLEASE CALL 877-851-2355 IF YOU DO NOT RECEIVE AN EMAIL OR REGULAR MAIL RESPONSE WITHIN FIVE DAYS OF SCHEDULING TO VERIFY YOUR TEST DATE. IF YOU DO NOT RECEIVE A NOTIFICATION FROM US AND DO NOT CALL US TO VERIFY, YOU WILL STILL BE CONSIDERED A NO SHOW FOR ANY MISSED TEST DATE.** If you scheduled the candidate, you are required to notify them of their testing information. If you do not notify them, they will still be considered a no show.

Newsletter Distribution



To ensure that all instructors have access to the updated newsletters, we will no longer be mailing them to the facilities. Instead we will be posting them to our website at www.hdmaster.com, on the MAP page. You will be able to print/view them as needed. Make sure you watch the MAP page for update newsletters!

Recertification by Testing with D&SDT vs. In-House testing

♦ For scheduling of candidates who will be recertifying by testing with D&SDT

1. From the WebETest page, you will need to select the **Provider Initiated Recertification** button.
2. Then you will need to login to complete the request for recertification by testing.
3. Complete the information required on the Renewal Testing Login Screen that will appear after you login (see below). Then click **Submit** Request.

4. The candidate record will open in WebETest after submitting the request. You will be able to schedule the candidate for testing at this point if they are state funded. If they are unsponsored, the candidate will need to make payment prior to scheduling.

♦ For In-House Recertification's

1. Go to the MAP registry at www.hdmaster.net and login as the Trainer.
2. Locate the candidate on the registry through the search criteria you choose to use.
3. Click on the candidate name to enter the record for that candidate.
4. If you do not have access to the Renew button on the right side of the screen, you will need to first select the **Disband** button and then Select **Adopt**. This will allow you to select the **Renew** button.
5. Click the **Renew** button and the screen to the right will appear. You will need to enter the test date and then for Transcription and Medication Administration, you will indicate if the candidate has passed or failed each portion of the test date. Click **submit** to save the information.
6. Recertification's may be entered on the test date or a prior date, you can not enter a future date as the test date. If you do not enter a date, the date of the data entry will automatically be assigned.
7. The registry will be automatically updated with the new certification expiration date.

| RENEWAL WINDOW HISTORY | | | |
|------------------------|------------|--------|------------|
| | Test Date | Trans. | Med. Admin |
| 1 | 03/05/2012 | Passed | Passed |

Changes to Information on the Registry

If you need to update candidate demographic information (i.e. address, phone number, email address...) on the registry, you will log into their record and simply type in the new information and click the **Update** button to save the new information.

For other changes that would need to be made such as: name change, correction of the social security number, correction of certification date, etc., you will be required to provide documentation for the change to be made. The documentation should be faxed or emailed to our office Attn: Sheri.

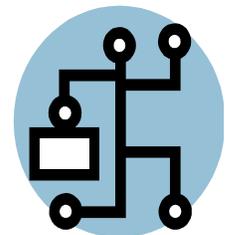


Abuse History on the Registry

If a staff member has Abuse History indicated in their record on the registry, please contact us with the staff member name and social security number. Sheri will then have to verify with Sharon Oxx, if the issues indicated are substantiated abuse or if there were issues related to testing with the Red Cross. For detailed information on substantiated abuse issues, please contact Sharon Oxx. We do not have information related to those situations at our office.

Registry Website Information

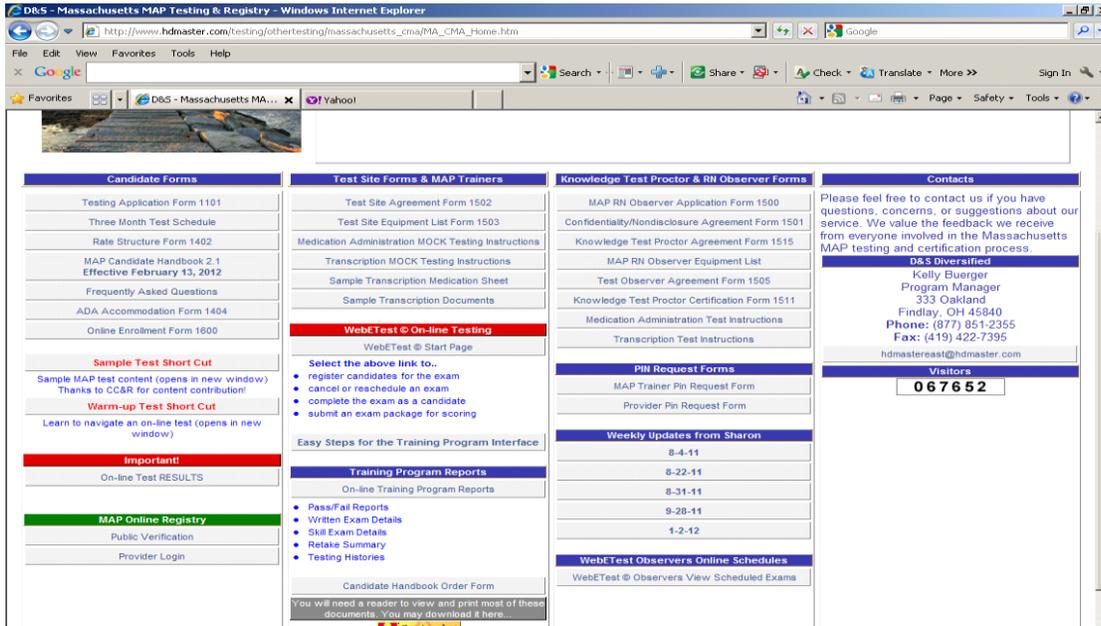
1. The registry software works best if you are using Firefox instead of Internet Explorer. You can download Firefox from the internet free of charge. Internet Explorer will work, but if you have version 7.0 or older you will have issues with the display on the page.
2. Registry certification cards can be printed from the staff member record on the registry. They will print out the size of a postcard and can be folded and carried with the staff member. We do have laminated credit card size registry cards available through our office. Those may be ordered by calling our office. There is a \$25.00 fee for the laminated cards.
3. In order to make changes to the staff members file you will need to enter through the provider/trainer link. If you search for the staff member through the public search, you will be able to view some information but will not be able to make any changes to the record.
4. The phone number for the registry is 1-888-734-6211 and the fax number is 419-422-7935. The registry staff is available from 8:30 to 5:30 Monday thru Friday. Please ask for Sheri or email her at hdmastereast@hdmaster.com.



Online Training Reports

Did you know that you can increase your test results by 15 to 20%????

First, did you know that you can monitor your individual training programs by using the on-line training reports available to you on our web site at www.hdmaster.com simply click on your state then “On-line Training Reports”



You have a choice of 5 training reports to choose from. You can individualize your reports by time frames. There are four simple steps to producing these reports as seen below:



D&S Diversified Technologies LLP
Headmaster LLP

Massachusetts MAP Reports

Innovative, quality technology solutions throughout the United States since 1985.

These reports are made available to MAP training programs courtesy of D&S/D.T. Please contact D&S/D.T. staff for your secure PIN. **Note:** You must select a **Date Range** for your report and [mm/dd/yyyy] = today's date.

If you are an approved provider with a number of trainers (a parent program), each trainers' individual report can be accessed using your six character PIN and the trainer's D&S/D.T. training ID. If you use your "parent" ID you will receive a summary of all instructors.

Step 1

Select the report you wish to view.

Knowledge Exam Details

Pass/Fail Report

Skill (Transcription/Med Admin) Exam Details

30

Retake Summary

No-Show Summary (Beta 3-23)

Testing Histories (for the following...)

Step 2

Select a date range for the report.

From:

To:

(Date not used for Testing Histories)

Step 3

Enter your facility ID and PIN.

ID:

PIN (four digits):

Check for Graphic Details

Step 4

Click this button when steps 1-3 have been completed.

Login

Date ranges can begin as early as July 1st, 2011 when D&S started testing in Mass..

Your ID is the 4-digit # provided by D&S and your PIN is a 6-digit letter that must be entered in all caps. If you have not received these you can log onto the www.hdmaster.com web site and print off the "pin request" form and fax it into D&S Attn: Heather Fax # 1-419-422-7395

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Please refer report inquiries to : hdmaster@hdmaster.com

One of the most important parts on utilizing the on-line training reports is that you can use the “Skill Exam Detail Report” to develop a check off for mock skill testing as seen on the next page.

Reports Available Through the Training Reports Page

Reports can be created by Provider and/or Trainer

Trainer reports will only show results for that trainer. Provider results will show all candidates associated with that provider. Provider results will **not** be broken down by trainer except for the Retake Summary report.

Knowledge Exam Details

This report will give details in regards to the Knowledge test and all candidates tested under the login provided.

Pass/Fail Report

This report breaks down the percentage of passes for both the Knowledge and the Skills test for the Trainer/Provider.

Skill Report

This report breaks down each skill by step so that you can determine how your candidates are performing on both portions of the skills exam.

Retake Summary

This report shows per login how many times candidates needed to take each portion of the test in order to successfully pass.

Test Histories

This report allows you to enter a social security number or test id number for a candidate or candidates to view their individual testing history.

No Show Report

This report allows you view a list of candidates that did not show for testing as scheduled.



Transcription Task Checklist

1. ___ Candidate marks through all the boxes where the medication was scheduled to be given.
2. ___ Candidate draws a single diagonal line to cross out the medication description for the correct medication.
3. ___ Candidate draws a diagonal line through the grid for the correct medication.
4. ___ Candidate writes discontinued (D/C) in medication description portion of medication sheet for the correct medication.
5. ___ Candidate writes discontinued (D/C) in grid portion of medication sheet for the correct medication.
6. ___ Candidate writes discontinuation date in medication description of the medication sheet for the correct medication.
7. ___ Candidate writes discontinuation date in grid portion of the medication sheet for the correct medication.
8. ___ Generic name of medication is accurately transcribed onto medication sheet for the correct medication.
9. ___ Brand name of medication is accurately transcribed onto medication sheet for the correct medication.
10. ___ Strength of the medication is accurately transcribed onto medication sheet for the correct medication.
11. ___ Amount of medication is accurately transcribed onto medication sheet for the correct medication.
12. ___ Dose of medication is accurately transcribed onto medication sheet for the correct medication.
13. ___ Frequency of medication is accurately transcribed onto medication sheet for the correct medication.
14. ___ Route of administration is accurately transcribed onto medication sheet for the correct medication.
15. ___ Start date of medication is accurately transcribed onto medication sheet for the correct medication.
16. ___ Stop date of medication is accurately transcribed onto medication sheet for the correct medication.
17. ___ Appropriate medication times are written in the hour column on the medication sheet for the correct medication.
18. ___ Grid accurately shows when first dose is to be administered for the correct medication.
19. ___ Grid accurately shows when last dose is to be administered for the correct medication.
20. ___ Candidate only transcribes the new medication.
21. ___ Candidate does not sign off newly transcribed medication as given.

Medication Administration Task Checklist

1. ___ Candidate locates the correct individual in the medication book.
2. ___ Candidate identifies the correct medication on the medication sheet.
3. ___ Candidate selects the correct medication from the medication box.
4. ___ Check #1: Candidate clearly demonstrates a comparison of the five rights between the HCP order and the pharmacy label and then demonstrates a comparison of the five rights between the pharmacy label and the medication sheet. Must include - Individual, Medication, Dose, Route, Time
5. ___ Check #2: Candidate again clearly demonstrates a comparison of the five rights between the pharmacy label and the medication sheet. Must include -- Individual, Medication, Dose, Route, Time
6. ___ Candidate pours the correct number of tablets.
7. ___ Check #3: Candidate clearly demonstrates a comparison of the five rights between the pharmacy label and the medication sheet. Must include -- Individual, Medication, Dose, Route, Time
8. ___ Candidate gives only the right medication.
9. ___ Candidate gives the right dose of medication.
10. ___ Candidate gives the medication to the right person.
11. ___ Documentation Med Sheet: Candidate initials the correct medication sheet under the Right date.
12. ___ Documentation Med Sheet: Candidate initials the correct medication sheet across from the right time.
13. ___ Documentation Med Sheet: Candidate initials the correct medication sheet across from the right medication.
14. ___ Documentation Count Book: Candidate records the appropriate date on the correct page
In the count book. Acceptable date format includes "year" or "yr" or **actual current year**.
15. ___ Documentation Count Book: Candidate records the right time on the correct page in the count book.
16. ___ Documentation Count Book: Candidate records the right route on the correct page in the count book.
17. ___ Documentation Count Book: Candidate records the right number of tablets on hand on the correct page in the count book. **Please be aware that medications provided in blister packs my have been popped out of sequence by previous candidates. There will be a sticker on the package calling your attention to this. In such a case, you will need to count each tablet separately. This is not an attempt to "trick" you.**
18. ___ Documentation Count Book: Candidate records the right number of tablets used on the correct page in the count book. **Please be aware that medications provided in blister packs my have been popped out of sequence by previous candidates. There will be a sticker on the package calling your attention to this. In such a case, you will need to count each tablet separately. This is not an attempt to "trick" you.**
19. ___ Documentation Count Book: Candidate records the right number of tablets remaining on the correct page in the count book.
20. ___ Documentation Count Book: Candidate signs name on correct page in the count book.
21. ___ Candidate secures all medication(s).

These check lists can be utilized for mock skill testing and peer checks. If used, this will significantly improve your students overall pass rates for their skill test.

Business Name

Primary Business Address
Your Address Line 2
Your Address Line 3
Your Address Line 4
Phone: 555-555-5555
Fax: 555-555-5555
E-mail: someone@example.com

We look forward to seeing you at the MAP Trainer Meeting on May 16th. at the Worcester Public Library. The meeting will be held from 10am–2pm.

NOTES FROM SHARON OXX

In order to assure that payment by DDS/DMH for testing is only being provided to those candidates employed by DDS or DMH providers, any MAP Trainer who works independently and is not “tied” to a provider will not be able to enter anyone as “sponsored” into WebEtest. All such candidates must be entered as “unsponsored” and their employment will be verified by D&SDT if they do work for a DDS/DMH provider.



With the increase in travel costs for testers and proctors, D&SDT will be consolidating testing whenever possible. Skills testing will only be conducted when 10 or more people are scheduled. If a test needs to be canceled or rescheduled, D&SDT will notify providers(s)/candidate(s) 8 business days prior to the test date that is being canceled or rescheduled. Knowledge test dates and locations will be consolidated to ensure maximum capacity each test day. The condensed Knowledge and Skills test schedules will be in effect as of **April 1, 2012**.

Test Scheduling and Test Day Reminders

1. Candidates must be at the test site 15 minutes prior to their scheduled test time for check in. If they are not at the facility at that time they will be considered a No Show.
2. Candidates scheduled for paper testing must be scheduled at least 8 days prior to the test date. If you are having issues with scheduling your candidates, please contact our office. We will gladly walk you through the steps so that you fully understand how to complete the process. Make sure that you are at a computer with internet access when you call.
3. Documentation supporting a legitimate reason for a No Show must be submitted to D&S dated the same date as the test or in accordance with the instructions in the Candidate handbook.
4. Candidate handbooks should be given to every candidate prior to attending testing. These handbooks can be ordered from our office at no charge to the Trainer or printed directly for the website (www.hdmaster.com) The candidate is required to follow testing policy information included in the handbook.

