Which method of recording is right for you?

This document is intended as an introduction to the two methods of adding data to the ROOT. We would advise you to discuss this with colleagues, where relevant, and contact the RCSLT Outcomes team via root@rcslt.org for bespoke advice on the best option for your service.

It is possible to start with one method and then change to another, or to use a combination (though it is important to ensure duplication is prevented).

Data upload

Data is pulled off your local system/database into a spreadsheet and then uploaded to ROOT at regular intervals.

This is likely to be the best option for services who are able to record information such as Therapy Outcome Measure (TOM) scores on an existing local system/database such as Systmone or RiO.

- Avoids therapists having to log-in to another system for entering data.
- Need to ensure your database structure meets the [specification for ROOT](). This often needs liaison between SLT service, IT department and RCSLT.
- Only able to upload completed episodes of care to the ROOT.
- Likely to have small number of people in team responsible for uploading information. Just need log-ins for these individuals and anyone who will need to access data and reports.
- Need to think about a schedule for extracting data from local database, 'cleansing' it and uploading to ROOT.
- Fairly quick to upload retrospective data if this is desirable.

Direct data entry

Therapists log-in to the online tool and enter data contemporaneously e.g. after an initial assessment a therapist would create patient on ROOT and add their initial TOMs scores. At the end of the episode of care, they would find that patient on ROOT and enter final scores.

This is likely to be the best option for services who do not have a compatible database system for recording TOMs scores e.g. therapists currently enter TOMs scores onto paper forms.

- Purpose-made online tool for recording TOM scores, which can be accessed on phone or tablet, as well as computer.
- System doesn't need to interact with any local software or database.
- Data is available in 'real time' (e.g. can view how many patients have open episodes of care at one time).
- Therapists will need to allocate time to enter TOMs ratings after scoring.
- All members of the team who carry out TOMs ratings will need a log-in.