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| **Shift/Daily Services Progress Note** |
| **Person’s Name (First/MI/Last):** Jane Doe | **Record#:** 1234 | **D.O.B.:** 10/10/2001 |
| **Organization Name**: Y.O.U. Inc.  |
| Type of Program:[ ] CSU [ ] Respite Bed [ ] DMH funded Supervised Living [ ] Detox[ ] Overnight Substance Use Program [x] Overnight Child/Adolescent Program [ ] Other : |
| [ ] **Shift Note:** [ ] 1st Shift [x] 2nd Shift [ ] 3rd Shift(Night)  | [ ] **Daily Note:** |
| **New Issue(s)****Presented** | [x] None Reported [ ] New Issue Resolved, no CA required [ ] CA Update Required |
| **Goal(s)/Objectives Addressed As Per Individual Action Plan:** |
| [x] G: (EEC Vocation) Jane will enhance at least 3 vocational skills and/or independent living skills. Jane will achieve this goal by her next treatment review in 3 months [x] O: Jane will attend PAYA twice weekly and off campus recreational activities to identify and support the enhancement of vocational skills [x] I: Program staff will provide PAYA twice weekly to enhance vocational and independent living skills.  |
| [x] G: (EEC Individual) Jane will increase her ability to manage overwhelming emotions as evidence by TOP outcome data, PLUS data and critical incidents at the program. She will manage her difficult emotions appropriately 3 out of 5 times and TOP outcome data will remain within normal limits. Jane will achieve this goal by her next treatment review within 3 months.  [x] O: Jane will identify 3 triggers and 5 coping skills she can use when experiencing difficult or overwhelming emotions. [x] I: Program and clinical staff will assist Jane in utilizing new coping strategies daily such as OT tools, relaxation, mindfulness, distress tolerance, cognitive coping and interpersonal effectiveness.  [x] O: When encountering a trigger, Jane will utilize new coping strategies and review their effectiveness with program and clinical staff. [x] I: Program and clinical staff will assist Jane in utilizing new coping strategies daily such as OT tools, relaxation, mindfulness, distress tolerance, cognitive coping and interpersonal effectiveness. |
| [x] G: (EEC Life Skills) Jane will improve interpersonal skills with peers and adults. She will utilize healthy and appropriate skills 85% of the time. Jane will achieve this goal by her next treatment review in 3 months.  [x] O: Jane will identify and explore 5 interpersonal skills in which she could further develop.  [x] I: Program staff will prompt Jane when she is demonstrating unhealthy or inappropriate interactions with peers or staff.  [x] I: Program and Clinical staff will assist Jane in utilizing new coping strategies daily such as OT tools, relaxation, mindfulness, distress tolerance, cognitive coping and interpersonal effectiveness.  |
| **Functioning (observed or reported):** Jane’s mood was labile. She was happy at times and angry at others. She was able to process all feelings with staff by the end of the shift.  |
| **Therapeutic Interventions Provided:** See Above |
| **Person’s Response to Intervention/Progress Toward Goals/Objectives:**During the shift, Jane returned from school and presented in negative space. She was offered a check-in with staff and refused walking to her room and slamming the door. Staff gave Jane space and then approached her again. This time, she agreed to process with staff, during which she reported difficulty during her school day. Jane was able to use the OT room with staff to cope with her feelings and return to the community within 15 minutes. Later in the shift, Jane was asked to clean her room and she initially refused. Staff engaged in collaborative problem solving and was able to develop a plan to clean her room in shorter time frames throughout the evening instead of in one large chunk of time. During the evening group (PAYA) Jane learned how to balance a checkbook and plan a monthly budget. She struggled at times with and staff assisted her in the process. At bedtime, Jane took her medications without issue. On her way to her bedroom, she got into a verbal altercation with a peer when she told the peer that her room smelled bad. Staff processed with Jane other ways she could have handled the situation and she was able to settle to bed.  |
| **Plan/Additional Information:**Jane is on a bedtime OT planThe supervisor emailed Jane’s clinician about difficulties Jane reported she was having in school |
| **Provider- Print Name/Credential:** | **Supervisor- Print Name/Credential** (if needed) |
| **Provider Signature:** | **Supervisor Signature:** |