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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Dx Code** | **Service Modality** | **Service Code** | **POS** | **Start Time** | **End Time** |  | **Duration** | |
| F33.1 | Treatment Plan | H0032 | 53 | 11:50 AM | 12:50 PM | 60 | 1 |
|  | | | | | |
| Minutes | Event |

**Level of care**: X Outpatient therapy Medication Management X PSR Clubhouse

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| **INITIAL DISCHARGE CRITERIA:**  Client will be discharged from services upon meeting the goals and objectives proposed in the Initial Treatment Plan. |
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| **Code** | **Diagnosis** |
| F33.1 | Major depressive disorder, Recurrent, Moderate |

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| **Who will do that** | **Modality** | **Frequency** |
| Client and Facilitator | PSR | Four times per week |

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| **Treatment Plan Problem Area** | | | | |
| **Area of Focus 1:** PSR-Depressed Mood. Client reports the following symptoms of depression: low motivation, sadness, crying spells, and low self-esteem. | | | | |
| **GOAL#1:** “I want to enjoy every day of my life without thinking negative about the future.” | | | | |
| **Objective** | **Measurable Objective**  **(Short Term Goal) to be met in 6 Months** | **Date**  **Opened** | **Target**  **Date** | **Date Resolved** |
| 1.1 | Client will improve her mood and ability to manage symptoms of depression by using adequate coping skills.This objective will be measured through verbalization during sessions. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will aid client in identifying coping skills.  This objective will be measured through verbalization during sessions. | 07/09/2020 | 01/09/2021 |  |
| 1.2 | The client will report and demonstrate during the session that crying spells have been reduced. This objective will be measured through verbalization during sessions. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will teach the client to stop stopping techniques to decrease crying spells. | 07/09/2020 | 01/09/2021 |  |
| 1.3 | Client will learn at least 3 techniques that can help increase her self-esteem (i.e., practice self-care, building self-confidence, changing negative thinking for more positive ones), which will also bring more and better social interactions. This objective will be measured through the client’s report. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will encourage client to incorporate coping skills learned in the session. | 07/09/2020 | 01/09/2021 |  |

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| **Area of Focus 2:**  Mood Swings. Client reports the following symptoms of tormenting mood: irritability for minor things almost every day. | | | | |
| **GOAL#2:** “I want to be able to control my mood and don’t feel angry most of my days.” | | | | |
| **Objective** | **Measurable Objective**  **(Short Term Goal) to be met in 6 Months** | **Date**  **Opened** | **Target**  **Date** | **Date Resolved** |
| 2.1 | The client will report feeling less irritable as evidenced by decreasing feelings of frustration and showing a decrease in abrupt and impulsive responses.  This objective will be measured through the client’s report. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will teach client coping skills she can apply daily to help reduce her mood swings. | 07/09/2020 | 01/09/2021 |  |
| 2.2 | The client will reduce anger from occurring daily to less than three times per week. The client will identify and discuss sources of excessive anger and its relation to depression. This objective will be measured through verbalization during sessions. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will help client to make insight into sources of anger. | 07/09/2020 | 01/09/2021 |  |
| 2.3 | The client will identify thoughts and events that trigger feelings of guilt. The client will incorporate techniques and coping skills to decrease feelings of guilt as needed throughout the day. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will teach the client coping skills and techniques to decrease feelings of guilt. | 07/09/2020 | 01/09/2021 |  |

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| **Area of Focus 3:**  Improve Eating Habits: The client reports that since she has lost a lot of weight since she is not eating well. | | | | |
| **GOAL#3:** “I want to learn how to eat better and control my weight.” | | | | |
| **Objective** | **Measurable Objective**  **(Short Term Goal) to be met in 6 Months** | **Date**  **Opened** | **Target**  **Date** | **Date Resolved** |
| 3.1 | Client will identify 3 negative outcomes that come from not eating her daily meals and how it affects her health and overall mood. Client will develop a morning routine checklist that will help her in following a healthy lifestyle that she will follow on a daily basis that includes, planning and preparing 2-3 healthy meals with 2 snacks in between for the next 6 months. This objective will be measured through homework assignments. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will encourage the client to identify foods they enjoy in order to stimulate their appetite. | 07/09/2020 | 01/09/2021 |  |
| 3.2 | Client will learn and adopt 3 healthy lifestyle changes (i.e. eating right, exercising, getting a good night sleep, mastering a new skill) to improve her eating habits. This objective will be measured through verbalization during sessions. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will use cognitive-behavioral and supportive interventions to assist client’s increased appetite. The therapist will also assist the client in developing a meal plan. | 07/09/2020 | 01/09/2021 |  |
| 3.3 | Client will consume 3 healthy and balanced meals daily and report progress during weekly group activities.  This objective will be measured through verbalization during sessions. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will review dietary guide with client (ex., making wise choices from every food group, finding a balance between the food you eat and the energy you burn, getting the most nutrition out of calories) from the Dietary Guide for Americans booklet to assist client in making healthy food choices. | 07/09/2020 | 01/09/2021 |  |

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| **Area of Focus 4:**  PSR- Personal Functioning. Client reports poor motivation to accomplish house activities. | | | | |
| **GOAL#4**: “I wish to be able to accomplish my daily activities with more energy” | | | | |
| **Objective** | **Measurable Objective**  **(Short Term Goal) to be met in 6 Months** | **Date**  **Opened** | **Target**  **Date** | **Date Resolved** |
| 4.1 | Client will identify 2 to 3 precipitating events or factors that prevent her from engaging in daily tasks (such as, cleaning, organizing, etc.) and a minimum of 2 positive changes she can implement in her daily routine that will increase her participation in daily activities. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will actively engage client in increasing daily level of activity and implementing changes in her daily routine that will promote increased involvement in daily chores. | 07/09/2020 | 01/09/2021 |  |
| 4.2 | Client will compile a list of financial obligations and he/she will determine which ones are priorities (such, as rent/mortgage) and necessary to maintain a stable living environment (paid electricity bill, paid water bill, etc.) that includes an adequate supply of food and water for a week. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will assist client in compiling a list of financial obligations and setting priorities on spending money responsibly. | 07/09/2020 | 01/09/2021 |  |
| 4.3 | Client will reward herself with small positive phrases or a small treat when she has accomplished a task or applied a skill learned in group therapy 1 time daily in order to help improve her mood and decrease depressive levels. This objective will be measured through verbalization during sessions. | 07/09/2020 | 01/09/2021 | On going  Partially completed  Closed  Date: \_\_\_\_\_\_\_\_\_  Initials: \_\_\_\_\_\_ |
| Intervention | PSR Facilitator will introduce the topic of healthy living and coping skills and will stress the importance of improving motivation to help improve her mood and decrease depressive levels. | 07/09/2020 | 01/09/2021 |  |

**ANTICIPATED LENGTH OF TREATMENT:**   1 month  3 month  6 month Other:\_\_\_\_\_\_\_\_\_\_\_

Date of next scheduled Treatment Plan Review: 01/09/2021

Certification of need for outpatient treatment: As a Licensed Practitioner to provide Mental Health Services in the State of Florida and trained in the diagnosis and treatment of psychiatric illnesses, I certify that services are medically necessary and appropriate to the patient’s diagnosis and needs.

Patient has reviewed and agreed to comply with the goals as established in the Master Treatment Plan. This service plan has been explained to the patient in terms that patient can understand, and a copy has been provided to the patient.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lidia Gonzalez 12/06/2019

Client Signature Printed Name Date