

Name: Conner Client

DMH ID: \_\_\_\_\_

Treatment Goal: I would like to continue to live in my own apartment

Rehab Goals: Conner will improve mental and physical health as evidenced by a decrease in symptoms and will increase independent skills.

Target Date: \_\_\_\_\_

<p style="text-align: center;"><b>ASSETS/SKILLS</b></p> <p>Assets or Skills are related to achieving the desired outcome. Assets are attributes, e.g. personality, motivation, interests, mental ability, and aptitudes. Skills are purposeful and intentional. They are the combination of knowledge and behaviors. Skills are physical, cognitive, and emotional.</p>	<p>Conner has lived independently for the last year. He is able to access public transportation, complete activities necessary to purchase food items, maintains supportive relationships with a core group of friends, is able to articulate his needs/wants, and seeks to increase independent activity</p>
<p style="text-align: center;"><b>OBSTACLES</b></p> <p>Obstacles prevent achievement of the outcome. They can be related to the functioning of the person, which includes: psychiatric/ medical symptoms or resources needed to achieve the outcome.</p>	<p>.Conner continues to struggle with weight loss, diabetes, and smoking cessation. Over the last year, Conner has lacked some insight into the need to keep appointments with his team members and requires some prompting to attend to this.</p>
<p style="text-align: center;"><b>RESOURCES</b></p> <p>Community resources are those supports which the client has available to achieve the outcome. They can be physical, fiscal, or human.</p>	<ol style="list-style-type: none"> <li>1. Conner</li> <li>2. Conner's support group</li> <li>3. Team members including:</li> </ol>

OBJECTIVES Client actions/ responsibilities to achieve outcome.	INTERVENTION Staff actions/ responsibilities to achieve outcome.	FREQUENCY	Responsible person/ monitor	Achievement revision date
I will keep 75% of appointments with Dr. Hogan. I will discuss transportation issues with Carmen.	CSS will attend appointments with Conner to assist with communication barriers, provide collateral information to Dr. Hogan, and ensure Conner's ability to follow up on recommendations.	Monthly	Conner, CSS, Dr. Hogan	
I will discuss concerns about taking medications before I stop taking medications.	CSS and/or LPN to provide medication education, CSS to promote medication adherence by assessing barriers and developing coping strategies for barriers to adherence,	Weekly	Conner, CSS, LPN,	

I will maintain all entitlements and financial supports necessary for me to live on my own.	CSS will assist in accessing community resources to facilitate communication barriers and ensure ability to accurately complete processes/documents.	Weekly	CSS and Conner	
I would like to lose some weight and better manage my diabetes so that I can stop taking insulin	CSS will assist in accessing community resources; CSS will provide education; CSS will assist in accessing primary care visits to coordinate care and provide collateral information; HCH will provide group and individual education; HCH will provide interventions to decrease HA1C by 2 points; CSS will assist in developing a budget to accommodate healthy eating plan developed by HCH; CSS and HCH will educate on mind/body connection and assess mood related to physical health.	CSS- weekly HCH team- at least monthly	CSS, HCH team and Conner	
I will develop a budget that will ensure all my basic needs are met.	CSS to assist with budget development; assess how symptoms of illness impact ability organize a budget and develop coping strategies	Weekly	CSS and Conner	
I would like to have more days where I feel good and less days where I feel like my moods are up and down.	CSS to provide education on Bipolar disorder, assess level of mania/depression, provide strategies to track mania/depression and review weekly, develop coping strategies to decrease depression/mania;	Weekly	CSS and Conner	
I will agree to meet with my healthcare team at least quarterly to discuss my readiness to cut down smoking or quit smoking.	CSS and HCH team will meet with consumer quarterly to provide education relative to impact of smoking; provide smoking cessation materials, encourage cutting down on smoking, and assessing stage of change; CSS and HCH will provide interventions to move from pre-contemplation to contemplation this year. HCH team to use MI and CSS to provide feedback.	Quarterly	CSS and HCH team	

Name: Conner Client DMH ID: \_\_\_\_\_

Treatment Goal: I would like to have more friends and stuff to occupy my time. I don't want to be lonely.

Rehab Goals: Conner will increase the number of social contacts weekly by addressing/improving symptoms of illness and developing positive peer contacts.

Target Date: \_\_\_\_\_

<p style="text-align: center;"><b>ASSETS/SKILLS</b></p> <p>Assets or Skills are related to achieving the desired outcome. Assets are attributes, e.g. personality, motivation, interests, mental ability, and aptitudes. Skills are purposeful and intentional. They are the combination of knowledge and behaviors. Skills are physical, cognitive, and emotional.</p>	<p>Conner has a few friends whom he has know for a while. Conner is able to access public transportation and can easily identify activities that he enjoys participating in. Conner's family lives in the area and he is motivated to begin interacting with positive family members more.</p>
<p style="text-align: center;"><b>OBSTACLES</b></p> <p>Obstacles prevent achievement of the outcome. They can be related to the functioning of the person, which includes: psychiatric/ medical symptoms or resources needed to achieve the outcome.</p>	<p>Conner's family will require education on substance abuse and will need to work with staff/Conner on not blaming him. Conner has experienced some difficulty in the community due to symptoms of illness which become exacerbated.</p>
<p style="text-align: center;"><b>RESOURCES</b></p> <p>Community resources are those supports which the client has available to achieve the outcome. They can be physical, fiscal, or human.</p>	<ol style="list-style-type: none"> <li>4. Conner</li> <li>5. Conner's support group</li> <li>6. Team members including:</li> </ol>

OBJECTIVES Client actions/ responsibilities to achieve outcome.	INTERVENTION Staff actions/ responsibilities to achieve outcome.	FREQUENCY	Responsible person/ monitor	Achievement revision date
I will go to relapse prevention group at 901 Felix and will develop a relapse prevention plan that I can share with my family.	CSAC will assist in developing a relapse prevention plan; CSS will assist in developing coping strategies centered on triggers to relapse; CSS will provide education regarding interaction of substance abuse and mental illness; HCH team will provide education on interaction between substance abuse and physical health; HCH team and CSS will provide collateral to Dr's.	Monthly	Conner, CSS, HCH team	
I will attend one community outing	CRR staff will provide instruction and	Weekly	CRR staff,	

per week.	supervision of groups which focus on improving skills on interacting cooperatively with others; CRR will provide groups which focus on improving social interaction skills; which increase ability to engage in normative recreational activities and which teach problem solving.	Recreational groups shall only be attended 3 hours per week  Skills groups may be attended up to 10 hours per week.		
I want to spend some time with my family	CSS will provide education to Conner on symptoms/signs of illness and will meet with family with Conner present to provide education and assist in developing use of natural supports	Monthly	CSS and Conner	