

Mental Health Services: Individual Treatment Plan

My long-term goal(s):

My long term goals are to actively address and overcome symptoms of depression due to diagnosis of Major Depressive Disorder. Also, I would like to consistently take my HIV medication and further understand my diagnosis in order to be well educated on my medical needs. In addition, I would like to actively attend church and engage in church functions as well as speak publically on a consistent basis at the health clinic about HIV prevention.

Unmet Service needs/needs that will not be meet at this time and why:

N/A

Adult Out-Patient Service Discharge Plan/Criteria for Discharge:

(For ADOP clinician only: Do not fill out. For Clinician Only)

N/A

Adult Case Management Service Discharge Plan/Criteria for Discharge:

D/C Criteria: The client will be eligible for discharge when...

The client will be eligible for discharge when they have made significant progress with an outpatient counselor in terms of depressive symptoms related to their Major Depressive Disorder, more specifically in regards to their feelings of not wanting to live. Also, when the client has returned to their HIV prescriptions and has shown stable change for a period of six months. The client will be eligible for discharge when they have shown social engagement, more specifically, attended church once weekly for six months as well as returned to public speaking at the health clinic once a month. All goals will be monitored for a period of six months to determine stable change.

Discharge Plan: With the support of my CIS worker I will...

With the support of my CIS worker I will attend weekly sessions with a outpatient counselor to address depressive symptoms relating to my Major Depressive Disorder. With the support of my CIS worker I will connect with a medical doctor at the health clinic to discuss medication management and my HIV diagnosis with the goal of returning to consistently taking my medication. With the support of my CIS worker I will return to social engagement, more specifically, I will attend church once a week and return to public speaking on HIV prevention at the health clinic once a month.

Medication Management Discharge Plan/Criteria for Discharge:

MM Discharge Criteria: The client will be eligible for discharge when...

N/A

MM Discharge Plan: With the support of my medication management provider I will...

N/A

Treatment Plan

Strength (protective factor) 1

Client has strong support system consisting of close friends and neighbors.

Barrier (risk factor or resource problem) 1

Client is currently not taking his HIV medication.

Strength 2

Client is financially stable relying on full disability benefits.

Barrier 2

Client does not have a strong relationship with family and no consistent visitation.

Strength 3

Client has a safe and stable living situation - a studio apartment.

Barrier 3

Client is HIV positive.

Status	Date Established	Target Date	Date Resolved
A	4/7/16	11/7/16	N/A

Problem 1.1: CIS - Other psych/environmental

Problem – “I have stopped taking my HIV medication to not prolong the inevitable. If I didn’t feel so depressed, I wouldn’t be doing this.”

Goal 1.1A

Client will establish effective coping skills with the help of a counselor to deal with symptoms of depression related to diagnosis of Major Depressive Disorder.

Objective 1.1.A1

With the support of my CIS worker I will work to find/research a counselor, specializing in depression by April 14, 2016.

Intervention:

CIS Planning Services

Objective 1.1.A2

With the support of my CIS worker I will be referred to a counselor, specializing in depression by April 21, 2016.

Intervention:

CIS Referral Adult Outpatient Services

Objective 1.1.A3

With the support of my CIS worker I will schedule an appointment with the referred counselor by April 28, 2016.

Intervention:

CIS Coordinating Services

Objective 1.1.A4

With the support of my CIS worker I will attend the first appointment with my counselor by May 12, 2016.

Intervention:

CIS Planning Services

Objective 1.1.A5

With the support of my CIS worker I will discuss and monitor the progress in each session for the next 6 months (November, 2016)

Intervention:

CIS Planning Services

Status	Date Established	Target Date	Date Resolved
A	4/7/16	11/7/16	N/A

Problem 2.1: CIS- Access to Health Care

Problem: Client states he has “disconnected taking his HIV medication, no longer wishing to prolong the inevitable.”

Goal 2.1

Client will be taking his HIV medication as prescribed for at least six months.

Objective 2.1A:

With the support of my CIS worker I will get linked back to the medical doctor at the HIV health clinic by May 12, 2016.

Intervention:

CIS Planning Services

Objective 2.1B:

With the support of my CIS worker I will make an appointment to meet with my medical doctor at the HIV clinic to discuss prescriptions and HIV diagnosis by May 19, 2016.

Intervention:

CIS Coordinating Services

Objective 2.1C:

With the support of my CIS worker I will attend the first appointment with my medical doctor to discuss prescriptions and HIV diagnosis by May 26, 2016.

Intervention:

CIS Planning Services

Objective 2.1D:

With the support of my CIS worker I will report/discuss progress made in meetings with medical doctor and will be monitored for prescription usage for the next six months - November, 2016.

Intervention:

CIS Planning services

Status	Date Established	Date Resolved	Target Date
A	April 7, 2016	N/A	Nov 7, 2016

Problem 3.1: CIS- Problem related to social environment

Problem: Client states he has “terminated his church attendance and no longer performs public speaking at the HIV clinic because ‘what is the point in doing these things?’”

Goal 3.1A

Client will return to his “normal” church attendance, once a week, for a period of 6 months.

Objective 3.1A:

With the support of my CIS worker I will contact my pastor and determine the correct time of Sunday services by June 2, 2016.

Intervention:

CIS Planning Services

Objective 3.1B:

With the support of my CIS worker I will attend the Sunday service at my church on June 5, 2016.

Intervention:

CIS Planning services

Objective 3.1C:

With the support of my CIS worker I will continue to attend Sunday service weekly and will be monitored for active participation for the next six months - until November, 2016.

Intervention:

CIS Planning services

Goal 3.2

Client will resume public speaking on HIV prevention at the health clinic once a month.

Objective 3.2A:

With the support of my CIS worker I will contact my the program supervisor at the health clinic to discuss my interest in continuing to speak by June 2, 2016.

Intervention:

CIS Coordination services

Objective 3.2B:

With the support of my CIS worker I will schedule a time to speak about HIV prevention at the health clinic by June 9, 2016.

Intervention:

CIS Planning services

Objective 3.2C:

With the support of my CIS worker I will have prepared my speech for my first public speaking performance at the health clinic by June 16, 2016.

Intervention:

CIS Planning services

Objective 3.2D:

With the support of my CIS worker I will attend the health clinic and give my first public speech on HIV prevention by June 30, 2016.

Intervention:

CIS Planning Services

Objective 3.2E:

With the support of my CIS worker I will continue to public speak at the health clinic once a month and will be monitored for participation for the next six months - November, 2016.

Intervention:

CIS Planning services

Intervention1: Case Management Planning Services

Intervention2: Case Management Problem Solving

Intervention3: Case Management Coordinating Services

Intervention4: Referral Group Work

Intervention5: Referral Adult Out-Patient Services

Intervention6: Referral Medication Management Services

Backup CIS Worker:

Olivia Brown, MHRT/C

Plan Participants :(Name, agency, relationship)

CIS Worker: Rylee L'Italien, MHRT/C

Adult Out-Patient Clinician: Mary Applewood, LCSW

Medication Management Provider: Dr. Sarah Ashgrove, M.D.

Client:

Andrew Welker

I have developed this plan with:

Rylee L'Italien, MHRT/C

It accurately represents my goals and objectives at this point in time. We have discussed, to my satisfaction, how my participating in this plan can help me, as well as the possible risks involved in my participating in this plan.

For CIS Clients Only:

Initial ITP Date: April 7, 2016

1. My signature indicates that my Releases of Information have been reviewed with me and updates if needed.
2. All ITP Goal/Domain areas have been reviewed for this ITP period and the following are currently being addressed:
 - a. Vocational
 - b. Medical
 - c. Other (specify) (X)

If other, specify: (i.e., developing assertiveness skills, DBT group, anger management, etc.)

With the support of my CIS worker I am working on engaging in my social environment, medication management, and receiving counseling services.

I have reviewed my vocational needs with my CIS worker and have developed a goal to address my needs.

Yes No (X)

If a vocational goal is not being developed, please explain further:

Vocational goal have not been developed as client does not wish to seek employment, fully financially supported by Disability Social Security.

Signature of person receiving services

Name: Andrew Welker Date: April 7, 2016 Time: 1:30 pm

Legal Guardian Signature (If Applicable) Date: Time:

N/A

Consumer\Provider Comments about Plan:

N/A

Plan offered to consumer or guardian on:

April 7, 2016

Copy of plan was accepted or denied:

Accepted

Signatures of Service Providers:

Name: Rylee L'Italien, MHRT/C Date: April 7, 2016 Time: 1:30 pm

Name: N/A Date: N/A Time: N/A

Signature of Supervisor:

Name: Date: Time