

Leonard Treatment Plan Goals, Objectives and Measurable Outcomes

**Note that this TX Plan is for exemplar purposes only and does not represent a recommendation of format by VA DMAS*

Leonard identified the following four general goals during assessment session:

- 1) Increase positive self-regulation coping skills (Resilience Skills: Ability to Be Calm; Show Empathy (Self-Compassion), Hope, and Sense Triggers that Create Negative Behavior) that he could access easily when feeling distressed
 - a. Leonard reports that he would know he was making progress if he could slow himself down (ex: tactical breathing) and express his feelings (ex: use of “I” statements) before reaching the point where he is yelling or arguing with an adult.
 - b. Leonard reports he would know coping skills work if he sees a decrease in verbal and physical fighting with authority figures and peers (Ability to Be Calm; Communication Skills; Express Emotions)
- 2) Improve positive self-identity primarily through being able to see himself and his strengths (Resilience Skills: Showing Empathy; Teach Self Discipline; Learn to Show Appreciation; Accept Ownership for Behavior)
 - a. Leonard reports he would know coping skills work if he can count more than 6 positive thoughts about himself and his family each day (Hope – Future Sense of Self)
 - b. Leonard reports he would know that he is feeling more positive about himself if he is able to decrease the number of times he imagines himself as only possessing the negative traits of his father (ex: capability for violence, verbal abuse).
- 3) Improve communication with his mother and overall interpersonal effectiveness (Resilience Skills: Develop Communication Skills, Express Feelings, Sense of Belonging, and Ability to Be Calm)
 - a. Leonard reports he would know that his Mom and his communication was better if there was an increase in positive time spent with her (ex: Family Meetings; Mastering a New Skill or Activity Together; Giving Back to the Community Together; Expressing Feelings)
 - b. If both of them develop capacity to walk away prior to a verbally threatening or physical altercation occurred (ex: determining safe words where they walk away; practicing empathic communication skills; using the GIVE skill)

In most settings of clinical practice it is critical to be able to demonstrate treatment planning skills that are SMART (specific, measurable, achievable, realistic, and time specific). An example of moving from a general goal in this case to measurable objectives, interventions and completion criteria would be as follows

<p>Objective (must be measurable and objective)</p>	<p>Intervention (Brief Description)</p>	<p>Success Criteria (Leonard Centered Outcome)</p>
<p>Goal 1: APPROACH GOAL</p> <p>Objective A: Leonard will brainstorm and write down a list of 10 self-regulation activities that he can practice using in the classroom and/or home when he notices feelings of frustration or irritability.</p> <p>Objective will be met when Leonard agrees on list of 10 self-regulation activities and counselor and Leonard review the list together.</p> <p>Objective B: Leonard will practice using 3 self-regulation activities from his list each school day as evidenced by consumer report and completion of his text feedback each day. Leonard will receive a text 2 times daily which asks him if he has used a self-regulation activity today (yes or no), if yes, he will enter his SUDS scale (1-10) prior to using activity and after using activity. Counselor and Leonard will look at this feedback in their weekly session. Expectation for this objective is for him to respond to text reminders 80% of the time.</p>	<p>Clinical Social Worker will provide Leonard as his mother with a self-regulation and mindfulness workbook so that Leonard and his Mom can both pick out strategies for self-regulation activities that they think they would enjoy. Mother will prompt Leonard daily to practice one of three skills when he is calm. Leonard will text back twice a day to report his progress. Leonard and social worker will review texting feedback data and see if his level of irritability has decreased and if his level of happiness has increased.</p>	<p>Leonard will be able to show his mother, clinician and school personnel his list of 10 self-regulation activities (linked to resilience skills)</p> <p>Leonard will be able to describe what each activity is and demonstrate how to use this activity to a teacher, his mother, and his clinician.</p> <p>Leonard will keep a journal and document each day his utilization of his self-regulation activities (Diary Card format). Goal is to practice 3 times a day.</p> <p>On the Symptom Severity Functioning Scale (SFSS), Leonard will decrease the following items by 2 points on the SFSS:</p> <p>Item 1 – throwing things when mad (current 4)</p> <p>Item 9 – hard time controlling temper (current 4)</p> <p>Item 23 – Get into fights with family/friends (current 5)</p> <p>Item 30 – Argue with adults (current 4)</p> <p>Counselor and Leonard will look at text feedback in their weekly session. Expectation for this objective is for him to respond to text reminders 80% of the time.</p>

<p>Objective C: Leonard will practice self-regulation skills 3 times a day and on average experience between a 5-7 on his SUDS scale after using the self-regulation skill.</p> <p>Leonard has set a goal of achieving this objective within 2 months.</p> <p>Scores will be reviewed by Leonard and counselor based on texting feedback.</p>		<p>Counselor and Leonard will monitor his journal and texting responses to review his progress with this goal over the next 2 months.</p> <p>Leonard will increase these items on the Youth Hope Scale (CHS):</p> <p>Item 1: “Doing Pretty Well” will move up 2 pts (2 to a 4)</p> <p>Item 4: “Things in the Past Can help Future” will move up two points (1 to a 3)</p>
<p>GOAL 1: AVOIDANCE GOAL</p> <p>Objective A:</p> <p>Leonard will reduce number of times he engages in acts of physical aggression at school as evidenced by teacher’s reports and school records. Leonard will move from resolving conflict with physical violence from 5 times a week to 0 times per week over next 3 months.</p>	<p>Clinical Social Worker will teach mother and Leonard 3 distress tolerance skills in session and practice each skill with Leonard. Mother will prompt Leonard daily to practice one of three skills when he is calm. Leonard will journal each night and record his level of irritability, aggression and happiness each day as well as if he used a distress tolerance skill that day. Next session, Leonard and social worker will review journal and skills and see if Leonard’s level of irritability and aggression has decreased and if his level of happiness has increased.</p>	<p>Leonard does not engage in physical violence to resolve feelings of aggression for a continuous period of 3 months.</p> <p>On the Peabody Symptoms and Functioning Scale, Leonard moves from high clinical range in externalizing behaviors to mid-range in externalizing behaviors.</p> <p>(Overall SFSS score of 72 to 55)</p> <p>On Peabody Youth Scale, Leonard moves from a “2” to a “4” on the “doing well with others” item.</p>

<p>Goal 3:</p> <p>Objective A: (Strength Based-approach objective)</p> <p>Leonard will identify 3 positive and engaging activities he would like to participate in with his mother and begin to engage in one of these activities with mother for one hour each week.</p>	<p>Leonard and Mother will work with clinical social worker to brainstorm activities that each of them enjoy and schedule a strength based date one time each week for one hour. Clinical Social Worker and Leonard and mother will create ground rules for disagreements during this time with one another and safety plans including Leonard calling aunt to pick him up if Leonard and mother begin to argue and feels unsafe or the desire to use physical aggression.</p>	<p>Leonard will move from a 1 to a 3 on the “family life” item on the Peabody Youth Life Satisfaction scale</p> <p>Caregiver will move from a 5 to a 3 on the items “sad or unhappy” and “tired/strained” on the Peabody Caregiver Strain Scale.</p>
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NOTE: For illustration purposes one approach objective and one avoidance objective has been utilized. In general, approach goals and objectives are more often achieved by Leonards given they are strength based focused. Additionally, for illustration purposes one individual and one family objective has been provided.