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| PROGRESS REPORT AND RECOMMENDATIONS | |
| Name: Alexis Mack  Report Completed by:  Jill Manthei, Program Coordinator | Date of Progress Report: 12/16/2015  Type of Progress Report (i.e. annual): Annual  Date of Review Meeting (if applicable): 12/21/2015 |
| To:  Person Served  Legal Representative  Case Manager  Other: | |
| Summary of Service Outcome and Support Progress | |
| The license holder must provide services in response to the person’s identified needs, interests, preferences, and desired outcomes. Services will be provided according to MN Statutes, chapter 245D and the applicable waiver plan for the person served. The following information will be assessed and determined by the person served and/or legal representative and case manager and other members of the support team. | |
| Before each meeting, the Program Manager will have a conversation with the person served to review the outcomes that were worked on for the last review period and the progress that the person served made.  Date this meeting took place: 12/21/2015  Summary of what was discussed: The team agreed outcome #1 needed to be changed, however guardian wanted to keep the basics of the tasks the same. The team decided not to change outcome #2. The team decided to change outcome #3 to make it more person centered.  Summary of what the person served would like to work on for the next review period: Alexis will continue to work on community inclusion, money management, and feelings/emotions, however some goals were modified to be more person-centered.  How does this relate to the person served interests, long-term goals, lifestyle change, or any other potential accomplishments the person would like to achieve?  Alexis likes to be out in the community but does not care for trying new activities, outcome #1 is going to help Alexis try new activities and see what else she likes to do in the community.  Alexis can have difficulty expressing herself appropriately if she is angered or does not like a situation, outcome #2 is a long-term goal and lifestyle change to help Alexis identify how she is feeling and appropriate ways to handle frustrations.  Alexis gets allowance once a month and spends her money right away, leaving her with no money for the month, outcome #3 is working towards a long term goal of money management to help her learn how she is spending money. | |
| **PERSON CENTERED OUTCOMES** | |
| **Outcome #1:** I would like to expand on my community and social skills by participating in a variety of activities outside of my home with my ILS worker.  **Date of development: 12/21/2016**  **Projected start date for implementation: 12/21/2016**  **Date by which progress towards accomplishing the outcome will be reviewed and evaluated: 12/20/2016** | |
| Outcome statement with measurable and observable criteria for outcome achievement:  Alexis will be successful in completing this goal by choosing a community activity and following through with it. | |
| Methods or actions that will be used to support the person and to accomplish the outcome:  Staff will provide transportation for Alexis into the community and offer her with choices and ideas of ways to be involved in the community. | |
| Changes or modifications necessary to the physical and social environments:  None | |
| Equipment and/or materials required:  Staff need to have a vehicle for transporting Alexis to different activities in the community, shift summary and pencil to complete shift summary, money for activities or preapproved money for activities. | |
| Techniques that are used that are consistent with the person’s communication mode:  None | |
| Techniques that are used that are consistent with the person’s learning style:  Offering choices or ideas and trying to plan ahead to try new activities. If you wait until the day of Alexis may not want to try a new activity. | |
| Data collection method:  Goal would be marked “yes” for achieved, if she went to a new place in the month | |
| Names of staff or positions responsible for implementing the supports and methods:  ILS staff, program coordinator, program director. | |
| **DATA COLLECTION KEY** | |
| |  |  |  |  | | --- | --- | --- | --- | | Month & Year | Percentage | A= Accomplished  MP= Made Progress  LP= Little Progress  NP =No Progress | Comments | | January, 2015 | 90% | A | Alexis went to Nickelodeon Universe, sledding, skiing, shopping and the humane societies. | | February, 2015 | 100% | A | Mall, nickelodeon Universe, walking dogs at the humane society, movies, board games, | | March, 2015 | 87% | A |  | | April, 2015 | 83% | A | Pet store, dog park, and mall, school to play sports, hidden falls and miniature golf. | | May, 2015 | 100% | A | Dog park, Fun Zone, pet store, mall, park, humane society, movie night at her school, archery banquet, feline rescue. | | June, 2015 | 100% | A | Mall, basketball, soccer, and dog park, Como Pool, pet store. | | July, 2015 | 100% | A | Fishing, pet store, feline rescue, dog park, humane society. | | August, 2015 | 100% | A | Rec. center, library, dog park, humane society, pet store, feline rescue, petting zoo, mall, state fair, and fishing. | | September, 2015 | 100% | A | Movie, Petco, Frisbee golf, dog park, feline rescue, Wild Rumpus Book Store, apple orchard, corn maze. | | October, 2015 | 100% | A | Humane society, mall, school conferences, park, pet store, apple orchard/petting zoo, Cat sanctuary, school Halloween party. | | November, 2015 | 87% | A | Game zone, humane society, old school, cat sanctuary, Edina outdoor obstacle course, Caribou. | | December, 2015 | 100% | A | Bowling, shopping, humane society, and movie. |   \*Summarize Performance toward Outcome using documentation from daily log and make recommendations using the following key. Be sure to include the measurement criteria in the summary to determine if progress has been made on the goal. | |
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| Summary of progress toward achieving this outcome:  This goal was completed 95% of the time this year. Alexis participated in activities in the community during her ILS shifts almost every time staff came out for a shift.  Recommendation for implementing this outcome:  Continue  Change  Discontinue  Rationale for the recommendation:  This goal should stay because it is helping Alexis with community inclusion, however some changes could be made to the goal. It was noted in shift summaries that Alexis is very consistent in what she chooses to do and many of the shifts went to an animal shelter, pet store, dog park, or feline rescue.  It is recommended to try to create more inclusion in the activities Alexis tries a new activity at least one shift per month. | |
| If changes were made to the outcome during the meeting, state here how the outcome will look for the next review period:  The goal is going to work on more specific social skills in community and home settings.  *I would like to work on my community integration and social skills 80% of my shifts with my ILS worker. I will achieve this goal by:*   1. *Researching, finding, and participating in new activities within my community.* 2. *Acquire skills to make and maintain visits and appointments within the home and community.* 3. *Learn appropriate social skills to navigate various communications and situations which may occur in my home or in the community.* | |
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| **Outcome #2:** I would like to work on my social skills. I would like to work on using my words to express my needs and wants and to ask for help. I would like to work on ways to handle getting upset through role playing, discussions, and then application when at home for the last 30 minutes of each shift for 80% of all ILS shifts.  **Date of development: 12/21/2016**  **Projected start date for implementation: 12/21/2016**  **Date by which progress towards accomplishing the outcome will be reviewed and evaluated: 12/20/2016** |
| Outcome statement with measurable and observable criteria for outcome achievement:  Alexis will utilize her staff to work on social skills of situations she is in or by role playing possible scenarios. Staff will help Alexis work through expressing needs and feeling she may have in an appropriate manner while at High Quality. |
| Methods or actions that will be used to support the person and to accomplish the outcome:  Role play and talking with staff will help support Alexis in accomplishing this goal. |
| Changes or modifications necessary to the physical and social environments:  Alexis may have to step away from a setting to talk through her feelings at the time to help her find an appropriate way to express herself. |
| Equipment and/or materials required:  Shift summary and pencil to track outcome. |
| Techniques that are used that are consistent with the person’s communication mode:  Listening to Alexis and being aware of signs or body language which could indicate Alexis is feeling upset. |
| Techniques that are used that are consistent with the person’s learning style: |
| Data collection method:  Yes on the shift summary if the goal was achieved. |
| Names of staff or positions responsible for implementing the supports and methods:  ILS staff, program coordinator, program director. |
| **DATA COLLECTION KEY** |
| \*Summarize Performance toward Outcome using documentation from daily log and make recommendations using the following key. Be sure to include the measurement criteria in the summary to determine if progress has been made on the goal. |
| |  |  |  |  | | --- | --- | --- | --- | | Month & Year | Percentage | A= Accomplished  MP= Made Progress  LP= Little Progress  NP =No Progress | Comments | | January, 2015 | 77% | MP |  | | February, 2015 | 66% | LP |  | | March, 2015 | 85% | MP |  | | April, 2015 | 66% | LP |  | | May, 2015 | 100% | A |  | | June, 2015 | 87% | MP |  | | July, 2015 | 87% | MP |  | | August, 2015 | 66% | LP |  | | September, 2015 | 57% | NP |  | | October, 2015 | 87% | MP |  | | November, 2015 | 77% | MP |  | | December, 2015 | 50% | NP |  | |  |  |  |  | |
| Summary of progress toward achieving this outcome:  Recommendation for implementing this outcome:  Continue  Change  Discontinue  Rationale for the recommendation:  Alexis has not been consistent with reaching this goal on a monthly basis, so will continue the goal to tray and reach a 80% achievement with goal. |
| If changes were made to the outcome during the meeting, state here how the outcome will look for the next review period:  This goal was discontinued and placed in as part of goal #1 and social skills. |

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| **Outcome #3:** I would like to work on money management and learning the value of money. I would like to learn the difference between “needing” and “wanting” items and will discuss this with staff when thinking about making a purchase. I would also like to have discussions, when with staff out in the community, about how much items cost.  **Date of development: 12/21/2015**  **Projected start date for implementation: 12/21/2015**  **Date by which progress towards accomplishing the outcome will be reviewed and evaluated: 12/20/2016** |
| Outcome statement with measurable and observable criteria for outcome achievement:  Goal will be measured yes when ILS staff and Alexis discuss money and “needs” and “wants”. |
| Methods or actions that will be used to support the person and to accomplish the outcome:  ILS staff will discuss money with Alexis, discuss the choices she makes on spending her money and help her in deciding if how she is spending her money is a need or a want. |
| Changes or modifications necessary to the physical and social environments:  None |
| Equipment and/or materials required:  Shift summary and pencil. |
| Techniques that are used that are consistent with the person’s communication mode: |
| Techniques that are used that are consistent with the person’s learning style: |
| Data collection method:  ILS staff will mark “yes” if money, needs and wants were talked about during shift |
| Names of staff or positions responsible for implementing the supports and methods:  ILS staff, program coordinator, program director |
| **DATA COLLECTION KEY** |
| \*Summarize Performance toward Outcome using documentation from daily log and make recommendations using the following key. Be sure to include the measurement criteria in the summary to determine if progress has been made on the goal. |
| |  |  |  |  | | --- | --- | --- | --- | | Month & Year | Percentage | A= Accomplished  MP= Made Progress  LP= Little Progress  NP =No Progress | Comments | | January, 2015 | 75% | MP |  | | February, 2015 | 33% | NP |  | | March, 2015 | 25% | NP |  | | April, 2015 | 33% | NP |  | | May, 2015 | 85% | MP |  | | June, 2015 | 87% | MP |  | | July, 2015 | 62% | LP |  | | August, 2015 | 88% | MP |  | | September, 2015 | 57% | LP |  | | October, 2015 | 55% | LP |  | | November, 2015 | 37% | NP |  | | December, 2015 | 100% | A | Only had two shifts to look at in during this month. | |  |  |  |  | |
| Summary of progress toward achieving this outcome: The data collected over the year long period was inconsistent of whether Alexis met the outcome or not. The team decided to modify the outcome to be more person-centered.  Recommendation for implementing this outcome:  Continue  Change  Discontinue  Rationale for the recommendation: Alexis was not meeting this goal and does not care for this goal. Due to this, it is found the goal should be modified to be more person-centered yet still help her with money management. |
| If changes were made to the outcome during the meeting, state here how the outcome will look for the next review period:  This goal has been revised to work on money management in a specific setting which is grocery shopping and cooking to increase these skills.  *I will utilize my ILS worker to assist me in learning basic cooking and shopping skills one time per month. To do this I will obtain a shopping list from my home and the money needed for the meal. I will use the help of my ILS worker to buy appropriate groceries for the meal, find deals and purchase groceries, return money and receipts back to my parents. My ILS worker will then assist me in cooking the meal.* |

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**SIGNATURE PAGE**

**By signing below, I am indicating the completion and approval of *Progress Report and Recommendations*.**

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| Person served: | Date: |
| Legal representative: | Date: |
| Case manager: | Date: |
| Licensed provider contact: | Date: |
| Other support team member (name and title): | Date: |
| Other support team member (name and title): | Date: |