This tool is a guide for staff to aid in the completion of the GPS and the Treatment plan—It is not all inclusive and may not apply to all individual plans.

ACT Individualized Person Driven/Person Centered Goal Planning

This is an exciting time as we meet together to discuss your goals and your treatment. It is the goal of ACT to assist and support you in the life you want to live. This GPS (Goal Planning Sheet) is called Person Driven and Person Centered because it about YOU and how YOU Want to live and how YOU want ACT to assist you.

- It is Person Driven because it will be your goals in your words; and
- It is Person Centered because it is created around your wants and needs.

There are 10 areas, or domains, that are part of each Person Driven/Person Centered planning. You may or may not have goals in each area. You will be asked to rank in order of importance these goals that you want to address. The areas and some examples are:

- Psychiatric Illness, symptom reduction and management, medication education, counseling and monitoring.
  - Medications
  - Self Esteem
  - Learning how to manage symptoms (anxiety, panic, hearing voices, depression)
  - Issues you work on in individual or group therapy

STAFF—This is where you can address and include the following:
- Visits with the psychiatrist (should be minimal of monthly if the individual is on medication)
- Medication management and education by psychiatrist
- Symptom management through IMR (Illness management and Recovery curriculum—either group of individual—usually provided by the Peer Specialist); Personal medicine; WRAP planning
• Individual therapy using an EBP modality such as CBT (Cognitive Behavioral Therapy),
• Psycho education—providing and teaching information about the individual’s mental health diagnosis. Ideas for treatment (EBP’s that are shown to be helpful for specific issues such as medication, CBT for Depression and anxiety; DBT for anxiety, borderline personality disorder, etc)

• Physical Health
  o PCP or Dentist
  o Walking
  o Going to a gym
  o Losing weight

Staff—This is where you address and include the following:
• Nursing support for physical health issues (coordination and communication with PCP and medical specialist)
• Nursing support for medication education
• Nursing support for docu-dose and communication with the Pharmacy
• Doc to Doc consultation (psychiatrist to PCP or medical Specialist when applicable)
• Schedule Clozaril labs and other required labs such Lithium levels, etc (generally coordinated by Primary Case coordinator)
• Dental appointments; eye care (generally coordinated by primary case coordinator)
• Nutritional concerns; weight loss (generally coordinated by primary case coordinator)
• Exercise regime (generally coordinated by primary case coordinator)
• Sleep hygiene (generally coordinated by primary case coordinator)
• Smoking Cessation (generally coordinated by primary case coordinator)

• Activities of daily living and daily routine
  o Ordering your day or finding a routine
o Goals of cleaning/cooking/laundry/checkbook keeping/budgeting/shopping
o Personal hygiene
o Do you have a payee?

Staff-This is where you address and include of the following:
- **Daily/Weekly routine and independent scheduling skill development** (typically done by the team Psych Rehab Spec)
- **Daily living skills-cleaning, shopping, budgeting, laundry, personal hygiene, etc.** (typically skill building provided by the team psych rehab specialist)
- **Primary Case Coordinator assisting with monthly budget for Rep Payee requirements.**

- **Education and employment**
  o Do you want a job or go to school

Staff-This is where you address and conclude interventions of the following:
- **The SE (Supported Employment) activities such as Vocational profile, job development, follow along supports; resume building, job search through internet and other sources; interviewing techniques, skills related to filling out job applications.** These services are typically provided by the Vocational Specialists.
- **Exploration and referral to educational or training programs.**
- **Coordination of access to Benefits Counseling and how individual benefits may change with employment**
- **Other areas may include support to get current ID; information on background check and criminal history; Accessing interview clothing or work required uniforms, etc. These services may be provided by the Primary Case coordinator, Peer Specialist, psych rehab specialist or other ACT staff in an effort to support the vocational/educational goal.**

- **Natural Supports (Family and social relationships)**
  o Is there someone in your family that you want to see again?
Is there a broken relationship that you want to fix?
Do you want to find people who you can do things with?
Do you have a landlord or neighbor that you talk with often?
Do you have a boyfriend/girlfriend? Are they interested in being supportive of your ACT services?
Do you have co-workers or a boss who you would like ACT to get involved with?

Staff-This is where you address and include the interventions of the following:

- The EBP of Family Psycho education through group or individual-usually provided by the Psychiatrist or Primary Case Coordinator
- ACT coordination and communication with other supports such as the landlord, neighbors, friends, significant others (anyone who is not a paid mental health provider or other professional). (IMPORTANT TO GET RELEASE OF INFORMATION SIGNED). If the support people are job related-work with the Vocational specialist to get SE: full disclosure“ permissions.

- Legal Issues
  - Do you have any legal troubles?
  - Do you have any old court cases that the charges were dismissed?

Staff-This is where you address and include interventions of the following:

- In most situations, the intervention is provided by the Forensic Specialist-case coordination with the probation, courts, magistrate; development of mental health services plan for the courts, procure legal charges information, assist with plan to follow related legal agreements, etc.
- Forensic Specialist is also the staff on the team who is cleared to visit individuals when in jail or at Torrance State Hospital Forensic Unit. The FS will provide communication with the jail and TSH social workers.

- Trauma and violence and risky behaviors
  - Did something happen in the past that causes you to react in a way you don’t like?
Are there things in your past that you want to explore and discuss with ACT?

Staff - This is where you will address and include interventions of the following:

- **Individual or group therapy sessions aimed at Trauma Informed Care and may include the EBP's DBT and or CBT.**

- **Housing**
  - Where do you want to live?
  - What kind of place?
  - What do you need to successfully live independently?
  - Do you currently have any difficulties with your landlord or neighbors?

Staff - This is where you address and include of the following:

- **Philosophy of the EBP Tool kit of Housing first—individual goals of independent living.**
- **Interventions are geared to skill development related to effective communication with landlords, utility companies, neighbors etc. (typically done by Primary Case coordinator—but may access Psych Rehab specialist for targeted skill building)**
- **Understanding safety concerns and accessing community emergency services such ambulance, fire department, police, etc. (typically done by Primary but may access Psych Rehab specialist for targeting skill building)**

- **Accessing Community Resources**
  - Bus routes/mobility
  - Transportation programs such as the MAPT bus pass program or ACCESS.
  - Food banks
  - Religious services
  - Benefits such as SSI; SSDI; Health Insurance; DPW benefits (cash assistance and food stamps)
  - Energy/Heating costs benefits
  - Current state issued I.D.
  - Local Library card
Staff-this is where you address and include the following:

- **Case management services provided by the Primary Case Coordinator, Peer Specialist, Psych Rehab specialist or other team members who have special knowledge to assist in the area of concern.**

- **Substance use/abuse**
  - *Is there anything in your life around drugs and/or alcohol you want to address?*
  - *Do you use alcohol or drugs to help cope with other problems such as anxiety and depression?*

Staff-This is where you address and include of the following:

- **Individual or Group therapy under the EPB Tool kit of IDDT (Integrated Dual Disorders Treatment).**
- **The interventions include use of Motivational Interviewing and Motivational Enhancement; harm reduction plans and Cognitive Behavioral Therapy; Social skills development, groups (Active, mountainous and or persuasion).**
- **Inclusion of psycho education for dual disorders and skill building in managing stress and anxiety**
- **May include assistance with accessing 12 step programs such AA, NA.**
- **Trigger identification and management may be included as a key part of the WRAP plan.**
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For each goal area/domain you will be asked a series of questions:

What is your long term goal?
What is your short term goal?

For each short term goal-the questions are:

1. How can ACT help me?
2. Who on ACT can work on the goal?
3. How often will we meet?
4. How will we meet (group or individual)
5. Where will we meet?

ACT looks forward to helping you plan for your goals and your life!