Queens Coordinated Care Partners, LLC.

Initial Plan of Care Instrument

Client Name:	CIN:	DOB :	Date:

CHRONIC HEALTH CONDITIONS
1.
2.
3.
4.
CLINICAL GOALS:
1.
2.
3.
4.
NON-CLINICAL GOALS:
1.
2.
3.
4.

(√)	Strengths
	Patient Understands Diagnosis
	Patient Attends Medical Appointments Independently
	Patient is Adherent to Medication Regimen
	Patient is Willing to Make Small Changes
	Patient is Willing to Reconsider Treatment or Change at a Later Date
	Patient has Support Systems Available
	Patient has Overcome Past Trauma or Crisis
	Patient can Self-Identify Triggers
	Patient has Hope that Improvement is Possible
	Patient Acknowledges the Role Self Plays in Recovery
	Patient is Honest about Well-being or Struggles
	Patient has been out of Criminal Justice System for over 6 Months
	Patient is Motivated to Attend and/or Go Back to School / Work
	Patient has Strong Connection to Spirituality
	Patient Enjoys a Hobby
(√)	**Barriers**
	Patient is Not Engaged in Care
	Patient is Actively Experiencing Mental Health Symptoms
	Patient is in Pre-Contemplative Phase for ___________________________
	Patient Needs Additional Social Supports
	Patient is Not Ready to Explore Increasing Social Interactions
	Patient is Not Aware of Triggers
	Patient Requires High Level of Encouragement to Improve Sense of Hope
	Patient is Unstably Housed
	Patient Requires Transportation Assistance
	Patient has Recent Involvement with Criminal Justice System
	Patient has Limited Health Literacy
	Patient has Lack of Access to Kitchen/Cooking Devices

	Sign	Date
Client or Clients Representative Signature		
Case Management Agency Representative Signature		