

Treatment Plan

Clients reason for referral: Client Robert Clinton has Intermittent explosive disorder.

Clinical Social Worker: Joshua Spence

Diagnosis: Intermittent Explosive Disorder DSM-5 312.34 (F63.81), category: Disruptive, Impulsive-Control, and Conduct Disorders.

Ethnicity: African American	Ethnicity: Black/African American
Age: 20	Date of Birth: 05/16/2001
Sex: Male	Occupational Status: Unemployed
Marital Status: Single	Parental Status: No children
Height: 6 feet 3 inches	Place of residence: SCO Family of Services AOBH foster home, Jamaica Queens, NY

Intermittent explosive disorder is defined as a recurrent behavioral outburst representing a failure to control aggressive impulses. This diagnosis is diagnosed within children as early as six years of age and until as old as the age of twenty years old. Due to this disorder Robert has had issues with relational and occupational opportunities. According to the DSM-5 this disorder is characterized by impulsive and aggressive outbursts. Some of these outbursts can be verbal and/or physical aggression.

Qualifications for diagnosis: Robert has been diagnosed with this disorder due to displaying this behavior for three months and a few times per week.

Intermittent explosive disorder Symptoms include:

- Angry outbursts
- disruptive or impulsive behavior
- excessive talking or movement

difficulty sitting still
problems with focusing or having a conversation
pacing or shuffling the feet
tension, anxiety, and irritability
wringing the hands or clenching the fists
Trouble with abuse, property damage
Verbally abusive words when offended,
Does not listen to case workers and those in leadership often

Long Term Goals:

Lower the chances of Client destruction of property
Client is convinced that violence is not the answer to his solutions
Client has increased ability to control his emotions
Client can identify his emotional responses to things.
Client has ability to know what triggers his to be angered and not respond negatively to it.
Client can verbally express fully his emotions about what has offended him
Has the ability to walk away from triggering events such as possibly fighting.

Short term Goals:

Encourage Client Robert to verbally communicate his thoughts and feelings about a particular topic or event that took place during the week.
This way the client can properly place his feelings in the right areas of his life.
Client will be made more aware of his decision-making process when angered and/or irritated and have positive coping skills.
Client will learn to discuss possible other ways a situation could have turned out although he was angered.
Client will journal his thoughts down on record and express it to clinician.

Clinical Treatment Invention: Psychotherapy intervention (Cognitive Behavioral Therapy)

Focus: Direct treatment to anger outbursts

Problem 1:

Client Problem: Cannot seem to manage his tone or choice of respectful words when upset

Client Goal: Wants to be able to not curse when someone gets him tight

Clinic goal: To influence client to verbally express what upsets him directly and the effects of it.

Objective 1: Client will verbally express what triggers him to speak disrespectfully when upset.

- Intervention: The counselor will go over the aftereffects of what happens after he is no longer upset. Regarding vocalizing his ability to destroy property when upset.

Objective 2: Increase client ability to notice to walk away from arguments

- Intervention: Clients will assess and recall what about the individual he is upset with threatens him.

Problem 2

Client problem: Punches walls or slams doors when really upset during arguments.

Client goal: to not destroy property in the group home

Clinic goal: To practice speaking about different alternatives to handling his problems instead of allowing his anger to overpower him

Objective 1: Client to discover if he feels powerful or stronger when he has anger outbursts.

- Intervention: With the counselor, client will address the direct root causes of anger and outbursts by journaling his immediate reactions and thoughts of a situation previously that made him upset.
- Client Robert will learn anger management techniques further practicing meditation.
- Client will also learn how to manage his reactions to situations that are triggering to him by recalling what triggered him during his last outbreak (CBT). This can be done through tracking thought record.

Objective: Client will verbally say positive words of affirmation which will elevate how he sees himself.

- Intervention: Client will process verbally or write a letter apologizing to case worker or to recipient who they had an outburst on and express their feelings thoroughly.
- Role play with client alternatives to solving issues.

How long will therapy last for client Robert Clinton? Four Months

Duration per session: 90 Minutes, twice per week

Assessment: Psychiatric Assessment, DSM5

Medication needed? No

Family needed to be apart of the process? No

Social Worker: Joshua Spence

Supervisor: Windy Vargus SCO Family Of Services

Date: 11/2021

References:

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