

# Treatment Plan

**Date:** November 23<sup>rd</sup>, 2022

**Demographic information:** Decideria Velez

**DSM 5 Diagnosis:** Moderate Major Depressive Disorder, Generalized Anxiety Disorder

Patient strengths: Religious beliefs, family support

Patient barriers to progress: Poor judgement, few life goals, unmotivated

**Psychosocial Formulation of client's situation:** Client is a 38- year Hispanic Female, Spanish -speaking, undocumented, employed as a housekeeper, living with her 6 year- old autistic son. History of domestic violence, history of self-injurious behavior (via cutting), last episode 10/5/22, no history of inpatient or outpatient psych treatment. Client was referred for psych evaluation after client reported moderate symptoms of depression, anhedonia, poor motivation, difficulty sleeping, eating, and concentrating, feeling tired, and low self-esteem.

**Care Plan:** Depression

**Problem 1:** Feeling unmotivated

**Patient's view of the problem:** Client reports the current symptoms have furthered worsened her performance at work and her frustration tolerance with her autistic son has increased.

Client Goal 1- "I want to work on my motivation to enjoy life and feel happy".

Clinic Goal: Long range term. As a single mother, the increase of socioeconomic stressors has been the primary psychosocial stressor for the client. Client would like to feel motivated to complete goals and to make healthy decisions. Client scored 12 on the PHQ-9 questionnaire, meeting criteria for moderate major depressive disorder.

- o Objective 1: Client will develop 1-2 goals related towards improvement and making healthier changes.
- o Intervention:
  - o Individual Therapy with SW
  - o 30- minute session
  - o weekly
- o Objective 2: Client will openly verbalize challenges experienced in maintaining a consistent motivation for her work and healthier changes.
- o Intervention:
  - o Medication Management
  - o Monthly 30-minute session with MD
- o Objective 3: Client will report using coping skills 3x week, and client will report decrease 25% in symptoms as evidenced by lower PHQ-9 scale and self-report.
  - Intervention:

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- o CBT therapy with SW, 45-minute session, biweekly
- o Medication management

## **Problem 2: Depressed Mood**

Goal 2- Client will reduce symptoms of depressed mood

Clinic Goal: Long term, Depression is manifested by increase in frustration and low motivation. Client will acknowledge depression verbally and resolve its causes.

Client Goal 1- Client stated "I want to stop feeling sad and hopeless". Client reported desire to "feel more connected to others and emotions, and learn to express herself.

- o Objective 1: Client will identify 1-2 coping mechanisms and implement them when encountering a trigger to her depressive symptoms.
  - o Intervention: Individual therapy, 30- minute sessions, weekly.
- o Objective 2: Client will report coping skills 3x week and client will report 25% decrease in symptoms as evidenced by (lower PHQ-9 scale and negative CSSRS screener).
  - o Intervention: Individual Therapy with SW, 30-minute sessions, weekly
- o Objective 3: Client will be free of suicidal ideation and verbalize safety plan
  - o Intervention: Medication management
  - o Individual therapy with SW, weekly 30- minute session.

## **Problem 3: Self-mutilating behavior/non-suicidal self-injurious behavior**

Goal 3- Develop ability to manage stress, self-soothe and tolerate affective instability without self-harming.

Client Goal 1- Client stated she has a history of intermittently harming self via cutting her arms superficially to release her emotions.

Clinic Goal: Client will articulate at least 1 interpersonal trigger to self-injurious behavior per occurrence and client will be monitored for self-harm urges or behavior utilizing daily CSSRS screener

- o Objective 1: Client will engage in self-reflective practices in therapy.
  - o Client will receive education on coping skills and stress management from care coordinator and providers within 6 months.
- o Objective 2: Client will be able to identify cognitive distortions and apply cognitive restructuring skills.
  - o Intervention: Weekly Psychotherapy and monthly medication management
- o Objective 3: Client will develop strategies to reduce symptoms of anxiety.
  - o Intervention: Client will learn CBT techniques to increase ability to recognize maladaptive thinking and to increase ability to calm thoughts.

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Psychotropic Medications? Zoloft 100mg, 1 tablet daily, Klonopin 0.5mg, 1 tablet twice a day as needed.

Do you want your family involved in treatment? Yes or No? no

**Date of Next Review: November 23<sup>rd</sup>, 2023**

## **Termination Criterion and Plan for Termination:**

Client agrees with current treatment plan and oral medication regimen. Client to continue psychotherapy sessions. Client to continue using appropriate coping mechanisms to address stressors. Safety procedures reviewed. Client advised to call 1-00-NYCWELL number or 911 and or go to the nearest emergency room if client feels overwhelmed or feels worsening symptoms.

Treatment plan will be re-evaluated in 6 months.

**Signature of Therapist: Kathy E. Salazar, SW Intern**

**Signature of Supervisor**

**Signature of Psychiatrist**