

Implementation Plan for: Art Work Care ID: TX0X0X0 Comp Code: 8FV

Service Component: Social Work Back-up Plan Required: yes no Date IP Developed: 1/13/13

IPC Begin Date: 3/21/2013 IPC Effective Date: _____ IPC End Date: 3/20/14

Desired Outcome(s)/Purpose(s) from PDP Action Plan for this Service Component:

1.	Art would like to be able to better deal with his grief over the death of his grandfather.
2.	Art would like to have better memories of his grandfather rather than those around the time of his death.
3.	
4.	

In Addition to the PDP, Development of Implementation Strategies Based On (check all that apply):

Conversation(s) with: Art Work

Observation Formal Assessment(s):

Implementation Strategy Objectives:	Start Date:	Targeted Completion:	Calculation of Units (If applicable)	Total Units (per strategy)
Assessment by LMSW	4-10-13	4-11-13	2 hours	2 hours
LMSW will meet once/month until issue is resolved. Will project thru end of IPC year.	5-15-13	3-15-14	11 hours	11 hours
Total IPC Units Needed for this Service Component:				13 hours
Requisition Fee (if applicable)				n/a

Signature for Implementation Plan:

Signature sheet for implementation plan(s) on file

or

Signatures below:

Art Work
Signature-Individual

Signature- Legally Authorized Representative

Family Member/Advocate

Imma Goode
Signature-HCS Provider Representative

Signatures for Discontinuation of Implementation Plan:

Signature – HCS Provider Representative or Individual LAR Date