

AWC Service Note for: Junior Barnes Staff Name: John Worker

Service Name: Habilitation **OUTCOME STATEMENT, GOALS, and ACTION PLAN:**
 JUNIOR CONTINUES TO WORK ON HIS COMMUNICATION SKILLS, AS THEY NEED TO BE ENHANCED SO THAT HE IS ABLE TO EXPRESS HIS WANTS AND NEEDS WITHOUT FEELING FRUSTRATED. JUNIOR WILL CONTINUE TO USE PECS SYSTEM TO AID IN COMMUNICATION. IN ORDER TO ENSURE HIS HEALTH AND SAFETY AS WELL AS SUPPORT HIS WITH HIS DAILY LIVING ACTIVITIES, JUNIOR REQUIRES SUPPORT WITH MEDICAL APPOINTMENTS, TRANSPORTATION TO AND FROM ACTIVITIES, COMMUNITY INTEGRATION ACTIVITIES, SUPPORT IN COMPLETING ACTIVITIES OF DAILY LIVING, AND MAINTAINING HEALTH AND SAFETY.

| Date | Start/End Time | Description of Activities | Location |
|------------|----------------|---------------------------|----------|
| Sun | : to : | | |
| | : to : | | |
| / / | | S A M P L E | |

| Date | Start/End Time | Description of Activities | Location |
|------------|----------------|--|----------|
| Mon | 7a- 8:30a | Assisted Junior in the shower by prompting him to wash certain parts of his body | home |
| | : to : | Junior used his PECS to ask for food during breakfast time with prompting | home |
| / / | | Assisted Junior as he got ready for his day program by assuring that he had his | home |
| | | Lunch and PEC book | |

| Date | Start/End Time | Description of Activities | Location |
|-------------|----------------|--|----------|
| Tues | 7a- 8:30a | Assisted Junior in the shower by prompting him to wash certain parts of his body | home |
| | : to : | Junior used his PECS to ask for food during breakfast time with prompting | home |
| / / | | Assisted Junior as he got ready for his day program by assuring that he had his | home |
| | | Lunch and PEC book | |

| Date | Start/End Time | Description of Activities | Location |
|------------|----------------|---------------------------|----------|
| Wed | : to : | | |
| | : to : | | |
| / / | | | |

| Date | Start/End Time | Description of Activities | Location |
|--------------|----------------|---|----------|
| Thurs | 3p - 11p | Assisted Junior in his transition to home. Junior put his coat away and unpacked | home |
| | : to : | His bag with little prompting. Junior requested snack in the kitchen and I assisted | home |
| / / | | Him to prepare it. Junior used his PECS to request a walk and bean bag toss. | home |
| | | Assisted Junior in preparing supper and preparing for bedtime. He needed one | |
| | | Prompt to use his PECS | |

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| Date | Start /End Time | Description of Activities | Location |
|------|-----------------|---|----------|
| Fri | 3p – 11p | Assisted Junior in his transition to home. Junior put his coat away and unpacked | home |
| | : to : | His bag with little prompting. Junior requested snack in the kitchen and I assisted | home |
| / / | | Him to prepare it. Junior used his PECS to request a walk and bean bag toss. | home |
| | | Assisted Junior in preparing supper and preparing for bedtime. He needed one | home |
| | | Prompt to use his PECS | |

| Date | Start /End Time | Description of Activities | Location |
|------|-----------------|---------------------------|----------|
| Sat | : to : | | |
| | : to : | | |
| / / | | | |
| | | | |
| | | | |

Staff Signature: *John Worker*

Instructions: This service note form must be filled out every time you provide services to a client. Remember you must follow the Individualized Service Plan (ISP) Outcomes and Action plan. Please remember to write in the date and the times working on the goals and activities. Please print the name of the client and your name on the front and sign your name on the back. It is not expected that you will be working on all of the Outcomes and Action Plan at the same time. One copy should be given to the Managing Employer to be used for completing the monthly progress notes and one copy should accompany the time sheets submitted to the AWC Program.

When writing the DESCRIPTION OF ACTIVITIES, please remember that these are the activities that the client is doing and should explain how you are supporting the client to work on the Outcomes and Action Plan as described in his/her ISP. When describing the activities use the words that describe the outcomes/actions from the client's viewpoint. For example, please write "the client needed assistance washing parts of his body as he showered" NOT "I gave him a shower"; or please write "The client needed 4 prompts to move his laundry from the washer to the dryer" not "I did the laundry." For Respite and Companion Services most of the time it will be described as "assuring the health and safety of the client" while the main caregiver is receiving relief from the main caregiving duties.

A word bank is below to help you write the notes.

WORD BANK:

Required words to describe your service:

Independent, Verbal Prompts, needed assistance

The LOCATION is where the services took place such as at home, at the mall, at a restaurant, at a volunteer job, etc. If there is more than one location, please include them all.

These Service Notes must be completed and included with your timesheets or payment may be delayed.



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