

# *The Grandberry Intervention Foundation*

## *Child Placement Agency*

### **Instructions for Weekly Progress Report**

#### **PAGE ONE**

- Note the **LEVEL OF CARE** and the level of supervision needed for the child as noted in the child's Service Plan.
- Mark only those areas that are pertinent to the child during the week. Mark only with **Y, N, or NA** as appropriate. .
- Use the "Notes" area at the bottom of the page to further describe any significant behavior or occurrence noted on the top of the page.  
**BE SPECIFIC!**

#### **PAGES TWO & THREE**

##### **Weekly Routine**

- **Describe General Routine:** Describe, in general, the child's weekly routine. Please note any changes to the routine applicable only to the week at hand.
- **Education/Day Care:** Describe **positive** and **negative** behavior, meetings, grade reports, activities, etc...
- **General Behavior:** Describe, in general, the child's behavior for the week, including both **positive** and **negative**. Attach completed ***INCIDENT REPORT*** if applicable.
- **Minor Incidents/Developmental Milestones/Significant Events:** Describe any notable occurrences for the child during the week. Attach complete ***INCIDENT REPORT*** if applicable.
- **Appointments:** List date, time and summary of appointments completed by or on behalf of the child during the week. (i.e. Caseworker, doctor, therapist, med review, CASA, attorney, family visits, etc...)
- **Significant\* or REPORTABLE Incidents\*\*:** List date, time and summary of any significant incidents, or incidents serious enough to report to DFPS. Attach completed ***INCIDENT REPORT***.

##### **Recreational Activity Log**

Child must have at **least two recreational activities per week** unless otherwise approved by the Administrative Director. Any approved exception is to be noted in the log. The therapeutic value of each activity **must** be noted using the scale provided. Each activity must be directly related to the therapeutic, medical and/or developmental needs of the child as listed in the child's current service plan.

***NOTE: Weekly Progress Reports are due to the Agency on the 5th of the following month. Example: March weekly progress reports are due April 5th. All applicable Incident Reports describing Significant or REPORTABLE incidents are due to the Agency within 24 hours of the occurrence of the incident.***

# *The Grandberry Intervention Foundation*

## Weekly Progress Notes (5 yrs – 18 yrs of Age)

Month:                      Year:

Child's Name:                      Age:                      Week of:                      through                      Foster Home:

Service Level of Care:                      Supervision Required per Plan of Service:

*(Mark with Y, N, or NA ONLY, as appropriate.)*

BEHAVIOR	S	M	T	W	TH	F	S	BEHAVIOR	S	M	T	W	TH	F	S	BEHAVIOR	S	M	T	W	TH	F	S
Follows Bedtime Routine								Lying								Sexual Acting Out							
Follows Morning Routine								Defiant/ Oppositional								Inappropriate Sexual Talk							
Appropriate Hygiene								Demanding/ Bossy								Profanity							
Appropriate Dress								Verbally Aggressive								Alcohol/Drug Use or Possession							
Completes Chores								Explosive Outburst/ Tantrum								Criminal Activity							
Completes Homework								Physically Aggressive w/Adult								Enuresis							
Expresses Feelings Appropriately								Physically Aggressive w/child or peer								Encopresis							
Uses Good Manners								Refusal to Take Medicine								Refusal to Eat							
Follows Instructions								Stealing								Overeating							
Participates in Family Activity								Property Destruction								Other:							
Negative School Report								Immature/Not Age Appropriate								Other:							

NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Weekly Routine

<p><b><u>Describe General Routine:</u></b> (Describe, in general, the child's weekly routine. Please note any changes to the routine applicable only to the week at hand.)</p> <p><b>Monday thru Friday:</b></p>    <p><b>Saturday and Sunday:</b></p>	<p><b><u>Education/Day Care:</u></b> (Describe <b>positive</b> and <b>negative</b> behavior, meetings, grade reports, activities, etc.)</p>
<p><b><u>General Behavior:</u></b> (Describe, in general, the child's behavior for the week, including both <b>positive</b> and <b>negative</b>. Attach completed <b><i>INCIDENT REPORT</i></b> if applicable.)</p>	<p><b><u>Minor Incidents/Developmental Milestones/Significant Events:</u></b> (Describe any notable occurrences for the child during the week. Attach completed <b><i>INCIDENT REPORT</i></b> if applicable)</p> <p>.</p>
<p><b><u>Appointments:</u></b> (List <b>date, time and summary</b> of appointments completed by or on behalf of the child during the week. This may include case worker, doctor, therapist, med review, CASA, attorney, family visits, etc.)</p> <p>CPS Worker:</p> <p>Family Visits (with whom?):</p> <p>Therapist:</p> <p>Case Manager:</p> <p>Medical (Type):</p>	<p><b><u>Significant* or REPORTABLE Incidents**</u></b> (List date, time and summary of any significant incidents, or incidents serious enough to report to DFPS. Attach completed <b><i>INCIDENT REPORT.</i></b>)</p>

Attorney (with whom?):

Other (with whom?):

***\*Must Complete an Incident Report    \*\*Must Also Call Hotline, obtain ID number***

## **Weekly Recreational Schedule Log**

<b>Date of Activity</b>	<b>Time/Length of Activity</b>	<b>Descriptions of Activity</b>	<b>Goals/Therapeutic Value of Activity**</b>	<b>Level of Supervision Provided</b>	<b>Supervisor</b>	<b>Comments</b>

***\*\* Guide to Goals/Therapeutic Value***

- 1. Develop motor skills**
- 2. Promote teamwork/cooperation/sharing**
- 3. Build self-esteem/self confidence**
- 4. Positive peer interaction/social skills/ interpersonal communication**
- 5. Promote physical fitness/maintain health**
- 6. Develop general communication skills**
- 7. Outlet for displayed anger & aggression**

- 8. Relationship builder/allows bonding**
- 9. Build trust in others/integrity**
- 10. Decrease anxiety/anxious feelings**
- 11. Educational/increase knowledge**

**12. Individual Goal-**

**13. Individual Goal-**

**Foster Parent:**

**Date:**

**Case Manager:**

**Date:**