

# STATE OF OKLAHOMA DAILY/WEEKLY PSR NOTE

**Member Name:** \_\_\_\_\_ **ID#:** \_\_\_\_\_

**Attendance:**

DAY/Date	IN	OUT	IN	OUT	IN	OUT	TOTAL
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							

**Problem/Goals addressed:** \_\_\_\_\_ **(Taken from Treatment/Recovery Plan)**

**OPTION 1:**

**Class Participation:**

**Day:** \_\_\_\_\_ **Class Name:** \_\_\_\_\_ **Staff/Member ratio:** \_\_\_/\_\_\_

**Day:** \_\_\_\_\_ **Class Name:** \_\_\_\_\_ **Staff/Member ratio:** \_\_\_/\_\_\_

**Day:** \_\_\_\_\_ **Class Name:** \_\_\_\_\_ **Staff/Member ratio:** \_\_\_/\_\_\_

**(Repeat class template as needed)**

**OPTION 2:**

**Type of Skills Training Provided/Received (Mark all that apply):**

- |  |  |   |                                      |
|--|--|---|--------------------------------------|
| <input type="checkbox"/> Communication       | <input type="checkbox"/> Housekeeping    | <input type="checkbox"/> Organizational | <input type="checkbox"/> Social      |
| <input type="checkbox"/> Meal Preparation    | <input type="checkbox"/> Employment      | <input type="checkbox"/> Money Mgmt     | <input type="checkbox"/> Memory      |
| <input type="checkbox"/> Conflict Resolution | <input type="checkbox"/> Attention Span  | <input type="checkbox"/> Relationship   | <input type="checkbox"/> Planning    |
| <input type="checkbox"/> Menu Planning       | <input type="checkbox"/> Food Storage    | <input type="checkbox"/> Prioritization | <input type="checkbox"/> Relaxation  |
| <input type="checkbox"/> Self Motivation     | <input type="checkbox"/> Problem Solving | <input type="checkbox"/> Assertiveness  | <input type="checkbox"/> Coping      |
| <input type="checkbox"/> Self Care           | <input type="checkbox"/> Leadership      | <input type="checkbox"/> Teamwork       | <input type="checkbox"/> Other _____ |

**Overall Weekly Unit involvement:** \_\_\_\_\_

**Staff Intervention/Skills taught/practiced:** \_\_\_\_\_

**Progress toward goals and objectives:(Including members perception of progress)**\_\_\_\_\_



Level of Satisfaction - Supports/Intervention Received: None : 1 : 2 : 3 : 4 : A lot  
New Supports/Interventions Needed: \_\_\_\_\_  
Comments: \_\_\_\_\_

Member Signature: \_\_\_\_\_

**WEDNESDAY**

Goal(s)/objective(s) worked on: Progress made toward goal(s)/objectives:

	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot

Level of Satisfaction - Supports/Intervention Received: None : 1 : 2 : 3 : 4 : A lot  
New Supports/Interventions Needed: \_\_\_\_\_  
Comments: \_\_\_\_\_

Member Signature: \_\_\_\_\_

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**THURSDAY**

Goal(s)/objective(s) worked on: Progress made toward goal(s)/objectives:

	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot

Level of Satisfaction - Supports/Intervention Received: None : 1 : 2 : 3 : 4 : A lot  
New Supports/Interventions Needed: \_\_\_\_\_  
Comments: \_\_\_\_\_

Member Signature: \_\_\_\_\_

**FRIDAY**

Goal(s)/objective(s) worked on: Progress made toward goal(s)/objectives:

	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot

Level of Satisfaction - Supports/Intervention Received: None : 1 : 2 : 3 : 4 : A lot

New Supports/Interventions Needed: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Member Signature: \_\_\_\_\_

**SATURDAY**

Goal(s)/objective(s) worked on:

Progress made toward goal(s)/objectives:

	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot
	None : 1 : 2 : 3 : 4 : A lot

Level of Satisfaction - Supports/Intervention Received: None : 1 : 2 : 3 : 4 : A lot

New Supports/Interventions Needed: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Member Signature: \_\_\_\_\_