

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 4/5/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 4/5/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Adjustment disorder with anxiety
2. Family discord

Start Time: 3:00 PM
End Time: 3:40 PM
Duration of Session: 40 minutes
Session Type: 90834: Psychotherapy, 38-52 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good!"

Objective:
Appearance: Healthy, Well-groomed, Relaxed posture and Comfortable
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

-Leila continues to want to change rooms at her fathers house but is nervous to ask.

Practiced and role played worst case outcome. ^{texting}

-Leila wants to speak with father about being on phone while driving. Helped her shift from "telling" an adult what to do to asking and sharing why this is important to her.

-Leila did not bring up OCD but when queried shared that she does experience this "sometimes". Compulsions seem to be primarily repetitive behaviors (ie, a number of steps, spinning, blinking). Anxiety seems to be general. Discussed OCD and the treatment for this. Briefly reviewed ERP. Leila feels confident can do. Reviewed with mother.

-Excoriation Disorder may also be present. Will speak further about next visit.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
4/5/2021 16:13

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 4/12/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 4/12/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. **Adjustment disorder with anxiety**
2. Family discord

Start Time: 3:00 PM
End Time: 3:40 PM
Duration of Session: 40 minutes
Session Type: 90834: Psychotherapy, 38-52 minutes with patient
..TELEMEDICINE VIDEO VISIT

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The location of the patient : Home
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Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good!"

Objective:
Appearance: Healthy, Well-groomed, Relaxed posture and Comfortable
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

-Processed ongoing challenges with "using my voice" when with her father - current concerns include her nickname, wanting to change bedrooms, and clothing preferences. Processed and role-played how Leila can express her thoughts around these and how she may expect various adults to respond (differently but appropriately)
-Leila feels that OCD has decreased notably with ERP strategies recommended last week
-Excoriation Disorder may also be present. Will speak further about next visit.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
4/12/2021 16:12

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They call her "yaya" and she hates it. Has asked them to stop. They refuse.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 5/3/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 5/3/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. **Adjustment disorder with anxiety**
2. Family discord

Start Time: 3:00 PM
End Time: 3:40 PM
Duration of Session: 40 minutes
Session Type: 90834: Psychotherapy, 38-52 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good!"

Objective:
Appearance: Healthy, Well-groomed, Relaxed posture and Comfortable
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

-Processed ongoing challenges with Leila's relationship with her step-mother. Highlighted that both seem to struggle to hear one another and are emotionally reactive during interactions.

-Leila feels that OCD has increased again but is uncertain why. However, in reviewing compulsions it seems Leila is engaging in only two compulsive behaviors, a decrease from when this issue was initially discussed. In addition, these do not appear to be interfering with functioning though she does report they are "annoying". Reviewed ERP strategies which Leila will try to utilize.

-Excoriation Disorder may also be present. Will speak further about next visit.

Plan: Stress related skin picking

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
5/3/2021 22:08

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 5/10/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 5/10/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. **Adjustment disorder with anxiety**
2. Family discord

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good!"

Objective:
Appearance: Healthy, Well-groomed, Relaxed posture and Comfortable
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

-Overall things are going well; father using nickname less which Leila is pleased with but has not let him know; introduced "DEAR" acronym from DBT to assist with communication and self-advocacy - Describe (the problem or concern), Express (thoughts and feelings about it), Ask (for what you want), Reinforce (when others do)

-Leila feels that OCD has decreased again but is uncertain why. She endorsed "forgetting" to attend or address them. Suggested this could indicate they are not problematic but also offered an app that may be beneficial.

-Mother expressed vague concerns in recent email and requested to meet. Leila is amenable to this. At this time it does not seem necessary to include father in the visit as discussion will center around Leila and maternal concerns when she is with her. However, will be mindful if visit should be postponed and father should be present.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

5/11/2021 12:39

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 5/20/2021 9:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 5/20/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 9:00 AM
End Time: 9:55 AM
Duration of Session: 55 minutes
Session Type: 90847: Family psychotherapy (conjoint psychotherapy) (with patient present), 26+ minutes - Today I interviewed the patient's mother, present with the patient, to observe and correct, through psychotherapeutic techniques, the patient's interaction with family members.
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient, pt's mother

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:

"I'm ok."

Objective:

Appearance: Healthy and Well-groomed

Behavior: appropriate and tense

Speech: of normal rate, tone and volume

Mood: anxious, sad and down

Affect: congruent with reported mood

Thought Process: logical and organized

Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts

Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Mother still concerned Leila is struggling to use her voice when with her father; marked progress in not getting involved per her report. Validated this as the most healthy approach and shared that this has been the focus of sessions. Agreed that a visit with Leila and her father could be beneficial; disagreed with Leila's suggestion that she be with her mother for this meeting and processed concerns with that approach.

- Continued to promote healthy parent-child boundaries and responsibility

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
5/20/2021 12:01

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 5/24/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 5/24/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm ok."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Processed Leila's desire to meet together with her father and concerns with her desire to do that from her mother house; Leila agreed
- Processed Leila's increased emotional reactions when meeting together with her mother
- Allowed Leila to share what she is hoping to cover with her father including wanting to bring her cell phone (to keep in touch with friends and "because I am used to having it"), bring things from each home to the other such as clothes and a toothbrush (wanting to clarify these are "her" belongings not her mothers), wanting to share her thoughts/opinions/needs without negative consequence, wanting to transition homes closer to when her father is home from work.
- Leila requested that I email her father to request the appointment

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
5/25/2021 18:08

Dad works late
7-8pm earliest
home arrival

Leila's dad is at work 99%
of the time.
only available
Sundays for
all
family
members.
every other
Sunday for
Leila due to
schedule.

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Dad/Stepmom refer to Leila's things as mine
"your mother's backpack"
"your sneakers with your mom"

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 6/7/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 6/7/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm ok."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Processed the plan to meet with Leila's father and shared that we have been discussing scheduling but not yet solidified a date

- Leila shared that her mother gave her an AppleWatch for her birthday. After initially wearing it to her father's house she was told that her father emailed her mother requesting this not go with her to his home or it will reside on a shelf in the kitchen for the duration of her time with them. Leila would like to wear the watch in all settings as she uses it to navigate time, connect with others via text, to monitor her activity (ie, steps) for the map function, and for several features that help her with her emotional regulation (ie, Calm app, reminders to breathe when heart rate increases). She stated that her father has not commented that she is wearing the watch. Encouraged her to discuss the watch with her father to share why she would like to have it across settings as well as if/why he is opposed to her wearing the watch at his home.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
6/8/2021 13:42

< this meeting has never happened

would not allow watch or phone

the reason is to prevent contact with me.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 6/14/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 6/14/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:10 PM
End Time: 3:30 PM
Duration of Session: 20 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

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The location of the patient : Home
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Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm ok."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Processed the plan to meet with Leila's father and shared that we have been discussing scheduling but not yet solidified a date

- Leila shared that her father and step-mother took her Apple Watch during her time with them. She did not further discuss this. Shared that I have provided the link to the technology plan suggested to her in the previous visit to her father and this can be a discussion we have together once a visit is scheduled. *never happened.*

- Leila shared that she started skateboarding and enjoyed this

- Leila endorsed low level OCD symptoms but denied any distress around them

skateboarding only at our house.

Plan:

1. Continue psychotherapy as described in treatment plan.

2. Patient and/or their family knows to contact me if needed.

3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

6/15/2021 10:48

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Leila's activities of interest (Skateboarding, Skiing, horse back riding only allowed w/ mom.)

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 6/28/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 6/28/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:25 PM
Duration of Session: 25 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

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Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm ok."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Home phone and email being set up in fathers home; pleased with this
- Anxious to speak with stepmother about not wanting to participate in running program; processed and Leila agreed to speak with her
- Discussed normal anxiety experienced today about dental procedure tomorrow; processed anxiety in global manner

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
6/28/2021 15:21

Very
scared
of

Step mom who is mean to her & abusive.

They gave to her for 1 week
and took her phone away
as punishment
for reaching
out to me.

Leila was extremely
upset by this and told
them she didn't want
the phone back so they
could use it to punish
her.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 6/29/2021 16:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 6/29/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 4:00 PM
End Time: 4:45 PM
Duration of Session: 45 minutes
Session Type: 90846: Family psychotherapy (without the patient present), 26+ minutes - Today I interviewed father and stepmother, to assess the conflicts or impediments within the family and assist, through psychotherapy, the family members in the management of the patient.
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"We just want to check in on how things are going."

Objective:
Pt not present

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:
Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

Provided brief overview of progress in treatment. Stated that, though some symptoms of OCD have been reported by Leila, she is not particularly distraught about these and understands tools to use if/when she feels she would like to. Not recommended specific treatment for OCD at this time. Stated that anxiety regarding transitions, particularly over the summer, remains high. Highlighted role of longstanding parent conflict in anxiety and suggested this be addressed by adults. Overall, Leila is doing well and moving towards termination of treatment.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
6/30/2021 15:01

they
refuse
family
parenting
therapy
I do
attend
w/ my
partner
for help

this obviously has not been the case
as things have remained very
difficult for Leila.
therapist
Michael Gillman was
suggested by Rebecca
Ruid.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 7/26/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 7/26/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:25 PM
Duration of Session: 25 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm ok."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila shared that she experienced anxiety while spending 2 weeks away from her mother - she went on to clarify that she missed her mother which made "little things feel bigger and made me more anxious"
- Leila identified that distraction (riding her bike, exercising, spending time with a friend) was helpful and an available option; she identified that thinking positively (ie, I'm going to see my mom soon) and thinking about a fun event to look forward to were helpful and she was able to do this
- Leila identified that she does feel that the information her mother provides to her when she is anxious (ie, facts and information) is helpful and that her father and step-mother don't offer this and simply offer broad statements she finds less helpful. Leila agreed this would be good for them to know and they can likely shift slightly which would benefit her
- Leila denied any OCD symptoms
- Leila denied other concerns

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
7/27/2021 17:14

Dad and
Stepmom
Seem to
heighten
Leila's
anxiety
through
negative,
non-
supportive
response.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 8/2/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 8/2/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm ok."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

10+ years of massive anxiety related to transition to Dad.

Session content:

- Leila shared that she experienced anxiety when it was time for her to transition from her mother back to her father on Friday; she shared that her mother encouraged her to focus on enjoyable things she may do while with her father which was "sort of" helpful; Leila was able to arrange to see two friends right at transition which was helpful
- Introduced the concept of "lid flip" from The Whole Brained Child so that Leila could understand what happens when she becomes anxious and why tools recommended may be helpful.
- Leila denied any OCD symptoms
- Leila denied other concerns

Calm App helps Leila but Dad refuses to allow her access to a phone / iPad.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
8/2/2021 15:34

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 8/16/2021 14:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan

MRN: 0014829279

DOB: 6/4/2009

Date of Service: 8/16/2021

Referring Provider: Paul Jon Parker, MD

Primary Care Provider: Parker, Paul Jon, MD (General)

Diagnosis Code: 1. Anxiety

Start Time: 2:00 PM

End Time: 2:45 PM

Duration of Session: 45 minutes

Session Type: 90834: Psychotherapy, 38-52 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home

The following individual(s) participated in today's visit:

Patient

The location of the provider: VT home office

The following staff and their role did participate in today's encounter visit:

Rebecca Owen Ruid, PhD

Subjective:

"I'm ok."

Objective:

Appearance: Healthy and Well-groomed

Behavior: appropriate

Speech: of normal rate, tone and volume

Mood: good and worried

Affect: congruent with reported mood

Thought Process: logical and organized

Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts

Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila shared that she is worried she will have to stay with her father this coming weekend "even though it is my moms time". Leila queried how to speak with her father about this.

Role-played. Overall, this seemed to offer little relief for Leila's worry as her primary goal is to identify how to return to her mother this weekend.

- Met privately with Leila's mother. Shared concern that Leila is being provided with "adult" information (ie, that her father has not responded to her mother regarding weekend plans, that this weekend is legally supposed to be her time with her mother). Processed how this makes it difficult for Leila to enjoy both her homes while empathizing with how difficult it is not to share this information with Leila. Suggested that discussing uncertainty (as with this weekend's plans) also seems to only increase Leila's anxiety; recommended information only be shared once known. Encouraged maintaining a focus on what is in Leila's best interest, which is low parental conflict. This seems consistent with what is being encouraged by the provider working with Leila's mother and her partner.

Michael has
been excellent.
Ed refuses to
attend.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
8/17/2021 7:35

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I am very careful sharing adult information with Leila. Leila is 12 and knows her schedule. Dad was not responding and I had to tell Leila she may be staying with him. Leila was repeatedly asking me. Information was not randomly shared w/o repeated request by Leila.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 8/23/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 8/23/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm ok."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good and worried
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila shared that the weekend went well as she did not remain with her father for an extended time; did not require discussion with him
- Leila shared an incident involving her mother bringing her bike to her per her fathers request; role-played how Leila may speak with her father about his reaction to this when she returns to that home on Friday. Ongoing concern that unhealthy adult interactions and responses continue to be pervasive.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
8/24/2021 7:37

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Ed demanded bike be returned to his house through Leila, involving her in an unhealthy way. Delivered bike to house. Derek's daughter (Leila's sister) (my partner) walked bike to door. Derek in car I was not present. Leila's dad hid, turned out lights! Leila was punished. They said it was rude of Quincy (Derek's daughter) to approach the house. More to this bizarre story.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 9/20/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 9/20/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:

"I'm ok."

Objective:

Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good and worried
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila shared that she continues to share her thoughts and feelings with her father.

Discussed how his responses when she does choose to share are mostly positive.

Encouraged an exposure task in which Leila will share something unprompted 1x/day when with her father.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

9/23/2021 11:06

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 9/27/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 9/27/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:

"I'm ok."

Objective:

Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good and worried
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila shared that she completed the prescribed exposure task in which Leila shared something unprompted 1x/day when with her father. She found this went positively, informed her father about her, and visa versa.

- Leila has not experienced symptoms of OCD

- Processed anxiety around concussion care and bugs. Focused on the importance of graduated exposure which Leila seemed to understand well.

major, intense anxiety
related to bad things
happening. Bugs, tick etc
when at dad's house.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

9/28/2021 15:41

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 10/4/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 10/4/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:

"I'm good. Going to a dentist appointment so a little worried."

Objective:

Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good and worried
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila shared anxiety about a dental visit; reviewed anxiety management tools
- Leila is unsure if scalp picking behavior is a symptom of OCD; reviewed habit reversal training
- Discussed recent discussion with father about bringing items between homes; some paternal resistance



"Things" with dad a major theme.
Dad can't separate Leila from me.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
10/4/2021 16:57

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 10/18/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 10/18/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good and worried
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila continues to struggle to communicate with her father and step-mother. Encouraged recognition of her progress in this domain and she agreed to discuss two concerns in the coming week (her phone, her bedroom).

Leila has slept in a loft bed for years and she doesn't like

Plan:

1. Continue psychotherapy as described in treatment plan. this. She has asked
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP. to not have this set up but they refuse even though other beds are available.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
10/19/2021 16:41

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It's also dark in her room but Dad won't allow her to have a night light b/c she brought it from my house. He removed it from the room.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 11/1/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 11/1/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila continues to struggle to communicate with her father and step-mother. Encouraged recognition of her progress in this domain and ongoing barriers.

- Processed Leila's feelings regarding the phone in her father's home. She expressed feeling that her father creates rules but refuses to explain them which makes her not want the phone. She is also upset that she is able to reach out to him at any time when with her mother but is restricted to set days/times when she is in his home - often resorts to sending a "goodnight email" to her mother on "off" days. Step-mother walked in recently when sending and then suspicious because Leila quickly shut her device; helped understand that this looks potentially concerning and encouraged open communication about what she is doing

- Of note, Leila's father has reached out via email to request support in having Leila keep the phone he purchased at his home and navigating her violation of this. Continued to express concern that parent conflict places Leila in the middle which is uncomfortable for her and not appropriate. Offered that I am happy to support parental rules in each home; however, I am concerned when these rules are harmful to Leila such as keeping information from one home private from the other.

Leila has been punished for sharing anything about her life/plans with us.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Leila reports dad says "what happens in this home stays in this home"

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
11/2/2021 12:12

Dad shuts Leila down when she asks questions she can repeatedly ask and he won't give her an answer.

Leila has full communication with Dad while with us. She has never had any restrictions on communication with us.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 11/10/2021 16:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 11/10/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: No diagnosis found.
Start Time: 4:00 PM
End Time: 4:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila continues to struggle to communicate with her father and step-mother. Encouraged recognition of her progress in this domain and ongoing barriers.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

11/10/2021 16:10

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 11/16/2021 16:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 11/16/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 4:00 PM
End Time: 4:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila notes improved communication with her father. Encouraged recognition of her progress in this domain and ongoing barriers.

- Leila has started basketball to participate in her school team; family members are all supportive

Very long history of Dad not allowing sports, attending sports extremely rarely

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Email from Dad to me stating

he will only allow sports if I don't coach or volunteer.

School asked me to coach

I coached H.S. Soccer in the past and played Soccer in college. I have since refused to coach so Leila can play.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
11/16/2021 16:05

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 11/29/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 11/29/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Adjustment disorder with anxious mood

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila notes improved communication and self-advocacy overall; very pleased with this
- Leila shared a positive text exchange with her father which is new. She recognized that this may be due to the fact that she typically only texts to ask things and on this occasion instead just shared something he would have interest in. Encouraged this to continue
- Leila has continued basketball to participate in her school team; family members are all supportive
- discussed anxiety regarding health and Leila was able to connect this to her recent concussion; normalized and provided review of CBT to address anxiety; also helped with trauma narrative around this experience

Leila continues to have
extreme anxiety related
to being sick or injured
Interfering w/
School -
only
while at
Dads house

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
11/30/2021 14:28

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 12/6/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 12/6/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Adjustment disorder with anxious mood

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila has continued basketball to participate in her school team; family members are all supportive and Leila continues to enjoy this activity
- Leila shared that she is upset that she is not permitted to have her elves at her fathers house and uncertain of why she is not able to do so. Encouraged her to discuss this with her father and role played how she anticipates the conversation going. She endorsed feeling less anxious following this. Suggested she speak with her father driving home from his workplace after today's appointment as they will be alone in the car; though anxious Leila reluctantly agreed to do this. *never happened.*
- Leila shared that her mother requested she use some time today to discuss "clothing sensitivity". In hearing about challenges with dressing learned that sometimes Leila struggles to find clothing she feels looks good together and/or is comfortable depending on mood and physical comfort. Normalized this as Leila is growing and developing. Role-played how Leila can explain this to her mother.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
12/8/2021 21:42

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Emails from Dad this year, telling me not to send "my elves" at Christmas. I sent them anyway and they did NOT appear but Leila's Sisters elves did. Leila's Step mom says that Leila's elves have no magic.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 12/13/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 12/13/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Adjustment disorder with anxious mood

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila has continued basketball to participate in her school team; family members are all supportive and Leila continues to enjoy this activity

- Leila did not speak with her father about her upset regarding her elves. She cited "I was nervous" as the reason for not doing so. Helped Leila develop a word, "scopeful", a combination of "scared" and "hopeful" to indicate when she is fearful of doing something but hopeful it will result in a positive and important outcome. This is to help her determine when she should push past her fear versus when she should listen to it.

- Discussed picking behaviors noted by Leila's mother via email. Leila acknowledged picking and that she would like to stop the behavior "because it does hurt sometimes". Leila identified that she most often picks at her scalp. This occurs most frequently when watching T.V. Introduced the idea of an incompatible behavior (ie, playing with slime) as well as barriers (ie, wearing a hat) that can help disrupt this habit.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

12/15/2021 0:28

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slime not allowed
at Dads
fidget toys not
allowed at
Dads
either
although
very helpful
to Leila her
Stepmom
doesn't like
the noise.

Leila picks her skin until it bleeds.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 12/20/2021 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 12/20/2021
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Adjustment disorder with anxious mood

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila has continued basketball to participate in her school team; discussed her feelings about playing on a 6th grade team now that her two other 7th grade teammates are no longer on the team

- Leila did not speak with her father about her upset regarding her elves. As the time for this has passed, suggested that Leila continue practicing discussing her experiences, thoughts and feelings with her father by sharing her mixed feelings about her basketball team with him

- Leila shared that her step-mother addressed concerns that Leila brings many clothing items purchased by her mother with her when she is with her father/step-mother. She (step mom) expressed feeling that this is "hurful" and makes her feel that the items they purchase for her "aren't good enough because they aren't that expensive". Based on what Leila shared today, it does sound like she offered her step-mother validation and empathy while also trying to clarify that she has clothing preferences and would like that to be respected.

- Discussed picking behaviors noted by Leila's mother via email. Leila did not attempt strategies recommended citing "I forgot".

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

12/21/2021 11:49

"Things" remain a major issue

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When Leila was 2 1/2 years old her ^{age} dad made her change out of her mom's clothes in his truck before taking her to daycare. Leila attended daycare 5 days per week only on dad's weeks 8-6pm even though I was fully available to care for her. He refused, ^{until} [↑] school

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 1/3/2022 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 1/3/2022
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Adjustment disorder with anxious mood

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

- Leila shared miscommunication that occurred with her mother that resulted in significant adult conflict and possible police involvement. Processed Leila's feelings and fears about this event as well as possible repercussions. Leila requested that I share concern with her parents about their breakdown in communication and the negative toll this took on Leila.

- Discussed picking behaviors noted by Leila's mother via email. Leila did not attempt strategies recommended citing "I forgot".

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

1/3/2022 17:21

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Leila was left home alone on Christmas Eve while very sick. Administered albuterol Inhaler 4x the dose. Called me to tell me her heart was racing. I called her Dr. Meanwhile I called her Dad he refused all communication. I texted and went to his Store unsure if she was in need of emergency help. He refused all communication but told Leila that I called the police. Leila's Step mom, upset that Leila called me told Leila next time ^{she left Leila alone} she would disconnect the phone.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 1/10/2022 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 1/10/2022
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90847: Family psychotherapy (conjoint psychotherapy) (with patient present), 26+ minutes - Today I interviewed the patient's mother, present with the patient, to observe and correct, through psychotherapeutic techniques, the patient's interaction with family members.
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

Due to travel in the car for an unexpected appointment, Leila's mother was present for the visit today and requested to participate with Leila. Discussed ongoing concerns with anxiety and Leila's tendency to reach out to her mother when not in her care. Leila's mother is working with her own clinician to recognize how this triggers her own anxiety and how she can respond in a more helpful and productive manner. Reviewed the need for Leila to speak with a present caregiver about challenges and why this is recommended. Reviewed strategies that Leila finds helpful when she feels anxious and discussed how she may have a list of these strategies available to access in either home. Responded to concerns that Leila does not have her phone when with her father so unable to access some helpful tools (ie, Calm app) by reminding Leila that all strategies will not always be accessible (ie, she is not able to shower at school) and thus the importance of having a list of possible strategies.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD

Licensed Psychologist - Doctorate

1/11/2022 22:12

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I consistently for years have reminded Leila to look to caretakers for help. Leila has access to only very few resources to help w/ anxiety because there are so many rules ie; no slime, no fidget, no phone, no calm app, can't go take a walk etc. very extreme control.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 1/24/2022 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 1/24/2022
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 4:00 PM
Duration of Session: 60 minutes
Session Type: 90837: Psychotherapy, 53+ minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:
"I'm good."

Objective:
Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:
Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

Clarified current experience of anxiety given discrepancy between what I see/hear (mild anxiety), mother sees (severe anxiety and panic), and father sees (no anxiety). Leila offered that her anxiety is variable ranging from none to extremely high and acute. She expressed frustration with how her father offers support in the past so discomfort in sharing anxiety with him. Suggested that I share information discussed today via email with both parents to ensure both parents understand current anxiety and how to be most helpful. Leila agreed.

Reviewed the cognitive triangle. Leila was visibly frustrated with this. Processed and ultimately identified that Leila would like more adult support in management of anxiety rather than having to navigate it using tools independently. Discussed this.

Leila stated that she would like to discuss parental oversight of email. She said that her father has requested her email login information on her school laptop after learning that she emails her mother daily. She is "uncomfortable" with this. Leila offered that she has asked her father why he would like to oversee this and he sighted concern with who has access to Leila. Supported concern with this on any social media, email and/or texting. Suggested Leila try to collaboratively problem solve with her father (for example, Leila could sit with her father to look at her various media's so her father can see who she has contact with; no need to read if known and safe contact). Leila agreed to try this.

Plan:

1. Continue psychotherapy as described in treatment plan.
 2. Patient and/or their family knows to contact me if needed.
 3. Case discussed with Outpatient team, including the referring physician or qualified NPP.
- this never happened
Wonder if Dad asked
School for her
email
password*

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
1/25/2022 14:04

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 1/31/2022 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 1/31/2022
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:

"I'm ok. There is something I want to talk about"

Objective:

Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in

multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

Prior to today's visit the following email was received from Leila's mother:

Hi Rebecca,

I just got off the phone with Leila who is at her Dad's house. I'm very concerned over events that took place that Leila has shared where Tina was again physical with Leila. Leila just shared that while Ed was at work Tina forced Leila to sit in a chair for close to 2 hours and then lifted the chair up while Leila was in it, throwing it and Leila onto the floor. I don't know what to do but this has to stop. I want to reach out to Ed but I can't do so as I know Leila will be punished. I would like to be sure that you will be meeting with Leila tomorrow and will talk to her about this experience. Please let me know if you have any questions or if you have suggestions for how I can handle this ongoing situation.

Thank you,

Nancy

Leila shared that she would like to discuss "something that happened at my dad's house" and proceeded to share her recollection of the event above. Leila stated that she and her father had a disagreement the night before and her step-mother entered her room requesting they discuss it the next day. Leila shared that she simply stated she didn't want to talk and ignored her step-mother. Per Leila, this frustrated her step-mother who, over time, offered various choices when Leila maintained a refusal to talk (ie, "You can sit in this chair until you are ready to have a conversation with me" to which Leila shared she opted to remain in the chair doing her nails and engaging in other activities. "You can come out and fake it till you make it or go to the shop and work with your dad." to which Leila shared that she stated she did not want to do either and was going to remain in her room). Both Leila and her step-mother seemed to escalate emotionally and verbally with Leila becoming increasingly belligerent and her step-mother becoming more controlling of choices. Leila did share that her step-mother "picked up the back of the chair I was sitting in to get me up" after Leila refused to get up. She demonstrated this motion with her chair. This resulted in Leila sliding to the floor. She denied injury, or that she or the chair were "thrown". Leila has not discussed this incident with her father or step-mother. Processed why doing so is important as well as what Leila may wish to share about the incident. Agreed that we will develop a list of points Leila would like to make next visit after Leila has time to consider this. Processed how Leila's choice to provide minimal communication and behave in a defiant manner likely escalated the situation and how Leila could have more clearly communicated her thoughts and feelings as well as understand what her step-mother was asking of her.

Responded briefly to maternal email to inform her that the issue was discussed and reassure her that a plan is being made to discuss the incident with Leila's father and step-mother in addition to Leila taking accountability for her choices that did not seem to be communicated with her mother in the moment.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
2/1/2022 12:32

(much more available on these events.)

Psychologist still hasn't met w/ Leila and dad Step mom together.

Leila had a very stressful call with her dad where he stated she was lying. No support.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 2/7/2022 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 2/7/2022
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 4:00 PM
Duration of Session: 60 minutes
Session Type: 90837: Psychotherapy, 53+ minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:

"I'm ok. There isn't anything specific I want to talk about."

Objective:

Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

Prior to today's visit the following email was received from Leila's mother:

Hi Rebecca,

I am thankful that you were able to meet with Leila and process this with her. She is also looking forward to meeting with you today. Can you please find out from Leila if she feels safe to go back to her Dad's house on Friday? She has expressed concerns and hesitations to me and honestly, I don't know how to handle this situation. How do I reassure her if I am not confident that things are ok in the house?

I think it is very important that Leila shares these events with her father and processes with Ed and Tina as soon as possible and has support around doing so. In my opinion this needs to happen before she returns to the home. Wouldn't you agree? I feel that her transistion would be massively stressful not having had this conversation prior to going back.

Leila should not be physically handled to the point where she is not in control of her body and can be injured. The adult in the household should not be tipping over chairs causing Leila to fall and throwing things around the house. The adult should not be shaking her or the other children in front of her. The adult should not be grabbing her body, threatening to unplug phones and having adult altercations in the presence of Leila. This is completely unacceptable and unsafe.

Leila had an appointment with Dr. Paul Parker for a skin issue 2/3rd and shared these events and other past experiences where Tina has been physical with her. He said that he would be contacting you. Have you connected? He also said that he would be contacting Ed to discuss this with him. He said what Leila told him was completely unacceptable and he was concerned. He set an appointment with Leila for 2/14th where he will be meeting with her for a follow up.

I know that my past involvement with Ed in trying to advocate for Leila has been problematic and worsens things. I am trying to do better. I continue to tell Leila that I can't help her in the other home and that she needs to use her tools, look to you and communicate with her father. I know that Leila has your positive influence and feedback, that she has support which gives her confidence and I see her using her voice more and more but it seems that she is repeatedly punished for doing so. Leila must advocate for herself and look to the professionals for help but I also need to know that she is going to be safe in the home. The things that I am hearing from Leila as well as my interactions with Ed are making me concerned for Leila's safety. I'm trying to let the professionals help Leila through this but at the same time, if things are going to continue down a physical path, I want to know at what point enough is enough.

In summary, I'm trying really hard to do what's best for Leila but I do not want her to be physically harmed or feel unsafe. I trust that you and Dr. Parker as well as her school counselor will continue to give Leila the skills she needs to get through this but I also want to know what is being done to make sure the adults are being held accountable for their roles in this situation. I have been hearing that you were going to meet with Ed. Has that happened? What is the current plan? Can we all meet together so that Ed and I have the opportunity to meet with you and Dr Parker? I have been engaging in regular sessions with Michael for at least a year now. Ed has refused to do anything the professionals have advised. Things are not getting better and the rate of decline is deeply troubling to me.

Thank you for your time.

Nancy

Responded by clarifying information shared by Leila differed in many ways from that reported by mother; that information shared by Leila does not warrant safety concerns or change to visitation, and that mother (and/or PCP) are welcome to contact DCF if they feel strongly that behaviors in the paternal home are at a level warranting such a call. Provided the phone number toward this end. Expressed willingness to meet together with parents and PCP but uncertain of the purpose. However, suggested it may be beneficial for me to meet with Leila, her father, and her step-mother to discuss Leila's concerns in that home and/or with both parents to discuss treatment progress overall and barriers.

Leila stated that she had not yet spoken with her father or step-mother about the incident that transpired but had, as agreed upon, developed a bulleted list of her concerns. She shared this list:

- She would like to communicate with family and friends without feeling sneaky and be able to spend more time with friends
- She would like to bring "as much stuff as I want to my dads"
- she would like to be able to express feelings/thoughts without feeling she is getting in trouble or feeling guilty
- She does not like them calling her Ya-Ya
- She would like them to stop "bad-talking" mother/family/Quincy
- She is frustrated that her father often times won't answer questions or say why he won't
- She doesn't like everything being a "surprise" as this increases her anxiety
- Leila shared that she is not comfortable when adults put their hands on her or maneuver her body when upset
- She does not feel safe when her father texts while driving

Asked Leila to identify what she feels would be important to speak with her father and step-mother about either before she transitions to their home Friday or immediately upon arrival. She identified discomfort with physical contact during conflict. She expressed feeling comfortable asking her father if they can talk on the phone and sharing this concern with him. She also expressed interest in meeting together with him on Monday next week for our visit.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

no meeting w/ Dad
↳ counselor

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
2/8/2022 12:19

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 2/14/2022 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 2/14/2022
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Car
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:

"I'm ok. I talked to my dad but it didn't go very well."

Objective:

Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

Discussed Leila's attempt to speak with her father and Tina about physical contact when angry in their home. Praised Leila for using some IPT skills encouraged including trying to identify an appropriate time and not giving up. Identified possible missteps including failure to use "I statements" or remain calm. Will attempt to revisit this conversation together with Leila and her father in the next visit as this remains important to Leila per her report today.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
2/15/2022 12:55

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Tina refused to speak with Leila until in person @ 11pm acc to Leila she made Leila repeatedly state, "You can put your hands on me".

Leila told her Dr. this he emailed Leila's Dad and I stating that Leila has every right to refuse to be handled or touched, especially by an angry adult.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 2/28/2022 15:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 2/28/2022
Referring Provider: Paul Jon Parker, MD
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

Today's visit was provided through telemedicine video conferencing secondary to the Covid-19 crisis:

The location of the patient : Home
The following individual(s) participated in today's visit:
Patient

The location of the provider: VT home office
The following staff and their role did participate in today's encounter visit:
Rebecca Owen Ruid, PhD

Subjective:

"I'm ok. There are things that I want to talk to my dad about."

Objective:

Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

Alerted Leila to ongoing plan to meet together with Leila and her father given challenges Leila has shared. Difficulty with scheduling this as Leila has primarily been with her mother for visit days.

Reviewed many past issues Leila has wanted to process with her father. She added that she feels "forced" to say things she doesn't necessarily agree with in order to end conversations with her father and step-mother. Processed how this is not "forced" but that Leila makes this choice to escape an uncomfortable situation. Discussed alternative responses she may try.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
3/9/2022 10:54

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Ed (Leila's Dad) is 100% avoiding this meeting.

Also, next meeting 3/17/22 has not been confirmed by Ed although psychologist has made multiple attempts by e-mail. I have the emails.

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 3/9/2022 14:00

Psychological Services Psychotherapy Progress Note

Name: Leila J Flanagan
MRN: 0014829279
DOB: 6/4/2009

Date of Service: 3/9/2022
Referring Provider: No ref. provider found
Primary Care Provider: Parker, Paul Jon, MD (General)
Diagnosis Code: 1. Anxiety

Start Time: 3:00 PM
End Time: 3:30 PM
Duration of Session: 30 minutes
Session Type: 90832: Psychotherapy, 16-37 minutes with patient
..TELEMEDICINE VIDEO VISIT

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The location of the provider: VT home office
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Rebecca Owen Ruid, PhD

Subjective:

"I'm ok. There are things that I want to talk to my dad about."

Objective:

Appearance: Healthy and Well-groomed
Behavior: appropriate
Speech: of normal rate, tone and volume
Mood: good
Affect: congruent with reported mood
Thought Process: logical and organized
Thought Content: is free of evidence for psychosis and contains no expressed suicidal thoughts
Cognitive (MMSE if indicated): WNL

Assessment:

Leila presents as a pleasant pre-adolescent that has struggled with significant parental discord and the impacts of this on her splitting her time between two homes. Anxiety in multiple forms appears present perhaps related to, or independent, of family stresses.

Summary of Goals:

Goal 1: decrease anxiety

Goal 2: improve coping

Goal 3: Improve family relationships within and between homes

Session content:

Leila shared that she feels frustrated that a conversation about the amount of items she brings to her fathers home is ongoing and unresolved. Queried her understanding of why her father and step-mother are upset by this and Leila offered that her understanding is that it makes them feel that items they have purchased for her are not appreciated. She stated that she has said that she very much appreciates items they have given her and that she often brings items from their home to time with her mother. She offered that they responded that the amount is not equal. Concerns about ongoing competition between homes will be discussed with adults. With Leila, focused on re-iterating appreciation and on easing the burden of the amount of items by managing them herself. She offered that she has now placed bags she cannot carry to school outside on the porch of her mothers office which is on the way between school and her fathers home. She is also ensuring items remain in her room and are clean and neat.

Discussed using reflective listening as Leila's step-mother reported "not feeling heard" by Leila.

Finally, discussed a school project in which Leila will be using an iPad from her mothers home. Discussed the option to find a safe place within school together with her teacher or discussing where Leila can place the iPad when with her father as this item is not permitted in his home. Leila will discuss this with her father tomorrow, before going to his home.

Plan:

1. Continue psychotherapy as described in treatment plan.
2. Patient and/or their family knows to contact me if needed.
3. Case discussed with Outpatient team, including the referring physician or qualified NPP.

Rebecca Owen Ruid, PhD
Licensed Psychologist - Doctorate
3/9/2022 15:02