

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 5/2/2022 15:00

Psychological Services Psychotherapy Progress Note

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

Date of Service: 5/2/2022
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 one thing 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:

Leila shared that she was unable to complete a homework task at her fathers house, as prescribed by her teacher, secondary to her caregivers beliefs about technology. Based on her report, Leila did an excellent job sharing information about the task, and her anxiety around it. She also engaged well in flexible thinking with the goal of compromise. However, she struggled to move forward when her caregivers did not concede. Discussed how Leila may revisit the conversation with the goal of problem solving and/or understanding their perspective.

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
5/2/2022 17:10

Notes Shared by Your Providers

Progress Notes

Rebecca Owen Ruid, PhD at 4/28/2022 14:00

Psychological Services Psychotherapy Progress Note

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

Date of Service: 4/28/2022
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 feel like we do a lot of talking about the same thing at my dads."

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 there are many conversations in her fathers home that occur repeatedly and she does not like this. Introduced the steps to problem solving. Leila responded well to these and agreed that resolution of an issue would eliminate these ongoing conversations. She asked that I email her parents problem solving steps.

Leila would like to redo her room at her fathers. She stated that she does not need new items but would like to "change the feeling" as she has not done so since she was much younger.

Identified how Leila can navigate anxiety about going to her fathers. She agreed that thinking of things she can look forward to will be helpful. Role-played how she can share this with her father and step-mother given their propensity for surprises.

Leila identified frustration about use of her phone at her fathers. She was able to easily share the rules in place, which she is accepting of. However, she feels that there was an agreement that caregivers would only look at her phone with her present and this was violated. To "test" this Leila changed her password (a rule violation) and caregivers then told her they learned she had done this after she went to bed. Encouraged Leila to engage in a discussion about this rule to obtain clarity.

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
5/2/2022 18:04



Nancy duMont <nancyjdumont@gmail.com>

PROBLEM SOLVING

1 message

Ruid, Rebecca O. <Rebecca.Ruid@uvmhealth.org>

Mon, May 2, 2022 at 6:02 PM

To: Leila duMont <leilajosephine@icloud.com>, Nancy duMont <nancyjdumont@gmail.com>, Ed Flanagan <stoweseafood2@myfairpoint.net>

Hi Leila, Nancy & Ed,

I am realizing that Leila and I spoke about this process in therapy last week and I had offered to send the information via email and forgot to do so. Attached is a problem solving worksheet aimed to help in any setting. Leila identified that she feels there can often be "a lot of talking" about the same topic so I suggested perhaps this occurs because there is no resolution. These steps are a simple way to move towards resolution! Feel free to email me with any questions.

Best,

Rebecca

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PROBLEM SOLVING

The problem solving model below can be used for various problem situations ranging from the very minor problem to the most severe. You likely use the model, either in its entirety or just some aspects of it, on a daily basis. Put a check mark by the steps that you feel you do well on a regular basis.

☐

Describe the problem in detail.

☐

Define the goal - if the problem were solved.

☐

Brainstorm solutions.

☐

Evaluate and weigh the solutions.

☐

Pick the best solution(s).

☐

Implement the solution.



Evaluate the solution and problem solve as again as needed.

The Steps in Detail

1. Describe the problem.
Gather the facts.
Describe the problem and include who, what, when and where the problem occurs.
2. Define the goal.
What would it look like if the problem were to be solved.
3. Brainstorm solutions.
The more solutions, the better. Try to list at least 5-8.
Avoid evaluating solutions while brainstorming - even "bad" solutions should be included.
4. Evaluate the solutions.
Think in terms of "What will happen if....." and fill in each solution.
Think about both positive and negative outcomes of each solution.
Think both long and short term consequences.
Give each solution a rating (from 1=very bad to 5=very good).
You may wish to combine solutions if you realize that several may go together to form a better solution than a single one.
5. Pick the best solution(s).
6. Implement the solution.
7. Evaluate the solution and return to step 3 as needed.
How well did the chosen solution solve the problem?

If it worked well, problem solved, and remember the solution for future similar situations.

If it didn't work well, go back to step 3 and either brainstorm additional solutions or select the next best option from those originally thought of.

Practice Makes Perfect!

Use this handout to practice your problem solving skills. As with anything, the more you practice, the better at it you will become!

The Problem: _____

The Goal: _____

Solutions:

Rating:

The Best Solution: _____

How Did It Work:

