DOB: 4/3/2005

SAMPLE

Shared Care Plan

			PEDIATRIC						
		Ра	tient Informat	tion					
					Email Address: Peeler@mycarenav.com				
Birthdate: 4/3/2005	Age: 14	Gender: Male	Identified Gender: Male		Secondary Phone: 802-549-5831	Type: Mobile			
Address: (Street, Windsor Vermo		Preferred N communica Mobile			Communication Challenges:				
Legal Guardian: Parents		Advanced I No	Directive:		AD Location:				
Primary Contact:	Parents: Jeanr	nie & James Peele	er Primary Contact#: 802-123-4569						
		ไทรเ	Irance Inform	ation	l				
'		Current PCP: Dr. Martin Simm	rent PCP: Martin Simmonson		Attributed Provider:				
Member ID:		Current PCP#: 802-568-9685		Attri	buted Practice:				
		Em	ergency Crisis	Plan					
ED/Crisis Plan: Co Jennifer Peeler (8 the ED. She is ver	needs to go to	Crisis Plan Uploaded: No							
			About Me						
Preferred activitie and is interested		Tips to avoid triggers/behaviors: Please don't treat me like I am sick							
How I learn: I like my health	s going on with	Physical Mobility: Extensive Assistance							
Interaction tips: I	out music	Mode of transportation: Support Person							
Communication s	y friendly	Important Family information: Both parents work full time. This is becoming more difficult as Sean's care needs are growing.							
			My Strengths	S					
I have a lot of frie	ends								

I love to read

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Sean made the	e honor roll	this fall	!!										
Sean is able to	advocate fo	or hims	elf										
					My C	Care Te	am						
Lead Care Coordinator:Organization:Phone#:Elizabeth Roach802-847-4035						5	Email: elizabeth.roach@onecarev				evt	.org	
Other Support: Marion Anderson-School Nurse Other Support: Hayley Peeler-Sister 802-358-8521 802-789-4562													
Name	Organiz	Organization Description			Ro	Role Email				Ph	one Number		
Robyn Skiff		ABC Care Pediatrics Coord RN Care Coordinator			ator	robyn.skiff@onecarevt.org				802-847-0606			
Kathleen Cami	sa		Bayada RN Care Coordinat	Co	re ordina	ator	kathleen.camisa@onecarevt.org tor		org	g 802-847-0446			
Elizabeth Roac	h	S	Bayada Social Worker	So	cial W	'orker	elizat	elizabeth.roach@onecarevt.org			rg	802-847-4035	
Danielle Palme	er	Са			re Ma	e Manager Danielle.palmer@onecarevt.org				org			
				Cor	nmui	nity Pro	ogran	าร					
		Pro	gram					Dat	te Of Enrolln	nent		En	d Date
Children with S	Special Heal	th Nee	ds (CSHN)					10/1/	/2018				
Home Health (Case Manag	ement						9/3/2018					
Social Worker								2/5/2018					
Self-Management Program (Diabetes, Chronic Conditions) 11/5/2018								12/10/2018					
					Μ	y Goal	S						
PERSONAL													
GOAL		ACHIE GOAL	CHIEVE MY PRIC		RITY	ITY STATUS			PERSON SPONSIBLE	ACTUAI START DA		E	DATE COMPLETED
attend workshop with peers to gain skills on depression	attend wor peers to ga depressior	ain skil		Vediur	n	In Pro	gress		istina iting				
Complete science project	Complete project	scienc	e l	High		Compl	eted	Pati	ent	9/3/2018		•	10/8/2018

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Eat a vegetable with dinner 5 times/week	Eat a vegetable with dinner 5 times/week	Medium	Completed	Kathleen Camisa	4/5/2018	4/25/2018					
Get a wheelchair that can go on trails in the woods	Get a wheelchair that can go on trails in the woods	High	Completed	Patient	10/8/2018	10/8/2018					
TREATMENT											
GOAL	STEPS TO ACHIEVE MY GOAL	PRIORITY	STATUS	PERSON RESPONSIBLE	ACTUAL START DATE	DATE COMPLETED					
Maintain current muscle mass	Maintain current muscle mass	High	In Progress	Patient	8/27/2018						
	Do my exercises morning and night every day.	High	In Progress	Patient	9/3/2018						
	Use my new calendar to record my progress	Medium	In Progress	Patient	9/4/2018						
Process feelings about my decreasing physical abilities and changing relationship s with friends.	Process feelings about my decreasing physical abilities and changing relationships with friends.	Medium	In Progress	Patient	9/3/2018						
	Meet with my school counselor weekly.	Medium	In Progress	Patient	9/10/2018						
		F	AMILY								
GOAL	STEPS TO ACHIEVE MY GOAL	PRIORITY	STATUS	PERSON RESPONSIBLE	ACTUAL START DATE	DATE COMPLETED					
Obtain lift system and modify bathroom for safe transfers.	Obtain lift system and modify bathroom for safe transfers.	High	In Progress	Robyn Skiff	9/3/2018						
	Price ceiling mounted electric lifts	Medium	In Progress	Robyn Skiff	9/19/2018						
	Parents, OT, PT, DME supplier work with contractor.	High	In Progress	Robyn Skiff	9/20/2018						
FUTURE											
GOAL	STEPS TO ACHIEVE MY GOAL	PRIORITY	STATUS	PERSON RESPONSIBLE	ACTUAL START DATE	DATE COMPLETED					

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Attend college for computer programmin g & live on campus	Attend college for computer progra & live on campu	amming	Medium	Not Started	Patient				
Go to Universal Studios and see the Wizarding World of Harry Potter	Go to Universal Studios and see the Wizarding World of Harry Potter		High	Completed	Patient	10/8/2018	10/8/2018		
Possible Challenges with Meeting My Goals									
CHALLENGE			TYPE		PLAN FOR HOW TO HANDLE THE CHALLENGE				
Lift and renovations not fully Financial covered by insurance.					Pediatric Care Coordinator to assess available funding resources.				
Insurance plan limits PT/OT Physical treatments.			health		Pediatric CC will assess other resources to cover visits.				

My Signature_____

Parent/ Legal Guardian Signature_____

Lead Care Coordinator's signature _____

Date:_____

Date:_____

Date:_____