

QUARTERLY PROGRESS REPORT - LEVEL 3

Consumer: _____ Period Covered: _____ Date of Current IPP: _____

The quarterly report must include a summary of data collected on each ISP objective. Behavioral objectives - describe progress or lack of progress by documenting frequencies, specific exhibited behavior, consequences, use of interventions. Functional skill objectives, description of progress or lack of progress, barriers, and plans for next quarter.

Current medications (include strength and frequency): _____

Medical/Dental appointments and hospitalizations (including psychiatric) during last quarter. Summarize all significant information: _____

Summarize community outings/activities, overnight visits, and significant events over the past quarter: _____

Address each *training objective* below.

Objective #: _____ **(Circle One)** Improved _____ Maintained _____ Regressed

Monthly Progress

Month	
Month	
Month	

Next Quarter: Continue Plan: _____ Change Needed: _____ (Explain below)

Summary: _____

Objective #: _____ (Circle One) Improved _____ Maintained _____ Regressed

Monthly Progress

Month	
Month	
Month	

Next Quarter: Continue Plan: _____ Change Needed: _____ (Explain below)

Summary: _____

Objective #: _____ (Circle One) Improved _____ Maintained _____ Regressed

Monthly Progress

Month	
Month	
Month	

Next Quarter: Continue Plan: _____ Change Needed: _____ (Explain below)

Summary: _____

Signature/Date