

**SUMMIT POINTE
COMMUNITY LIVING SUPPORTS (H2015)**

Customer's Name: _____ Reporting Period: _____ (Mon/Year)
 Provider Agency: _____ Date of PCP: _____ Shared Staffing () Ind () Time in/Time Out/Shift: _____
(Shared Staffing – Indicate Identified Hours per Contract/Day _____)

Goal 1: Take from current Person Centered Plan

Objectives: You only need to track the objectives that are not tracked elsewhere, for example “will take all medications with zero refusals”, this is documented on the medication log, so would not need to be listed here. Same with behaviors, if they are tracked on a behavior data sheet, then they do not need to be tracked here.

Staff initials and data go here. Depending on the obj, it could be number of prompts plus staff initials or “+” or “-“ for completion of task plus staff initials

Community Living Supports	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Obj #1 here																															
Obj #2 here																															



