

CTI RRH Phase Plan



SILBERMAN SCHOOL of SOCIAL WORK
HUNTER COLLEGE | CUNY

Phase #:

Phase One: Transition

Phase Two: Try-Out

Phase Three: Transfer

Today's Date:

Month

Day

Year

Client's Name:

Date Phase Starts:

Month

Day

Year

Due Date for End of Phase:

Month

Day

Year

Check the areas for this Phase: (Choose 1 to 3 areas)

- | | |
|---|--|
| <input type="checkbox"/> Benefits | <input type="checkbox"/> Natural Supports |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Budget Management |
| <input type="checkbox"/> Survival Needs (food, clothing, furniture, etc.) | <input type="checkbox"/> Health and Mental Health |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> Children's Health and Mental Health |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> House |
| <input type="checkbox"/> Education (child/adult) | <input type="checkbox"/> Legal Concerns |

Area #1 _____

Reason for choosing this area:

Overall goal for this area:

Area #2 _____

Reason for choosing this area:

Overall goal for this area:

Phase #:

Phase Plan Date:

Client's Name:

Area #3 _____

Reason for choosing this area:

Overall goal for this area:

Summary of Achievement in Each Area

Complete this section at the end of **Phase One** and **Phase Two only**. Use this information to play for the next phase. At the end of **Phase Three**, write the Closing Progress Note instead.

Area #1 _____

Area #2 _____

Phase #:

Phase Plan Date:

Client's Name:

Area #3 _____

CTI RRH Worker Signature: _____

Today's Date: _____

Supervisor Signature: _____

Today's Date: _____