

NDIS mental health/therapeutic support 19/06/2024 16:30 PM

Notes updated 19/06/2024 07:28 PM

Michelle Hookham

Subjective

Home visit. Maree stated that she has been able to write today and shared some of her writings. Maree spoke about challenging emotions that have emerged after the death of a previous counsellor. She had gone to the funeral on Friday, which had been a beautiful celebration, however since then, she has been dwelling on past events. Stated that she had seen the counsellor for some time, and they had then asked Maree to work for them. First it was cleaning, then supporting another client. At some point she was told she was no longer required for those roles, which had been upsetting. She was given another role preparing meals for the counsellor, but had old resentments about not being reimbursed for the food she had purchased for meals. Maree spoke about feelings of being used and stated that she had often done that with people; that she liked to be kind and generous, but was often taken for granted. On further reflection, she concluded that perhaps she did that so that people would like her, given her history of not liking herself. These reflections led Maree to consider her foster mother's funeral, which she did not go to; and the emotional reaction that occurred afterwards, where she was unable to eat or drink and ended up needing a week long hospital admission (medical). Maree wondered why she had such a reaction when she didn't like her mother and had been treated badly by her. Discussed ACE and psychoeducation re victims feeling more angry to the person who failed to protect them that toward the perpetrator. Maree stated that she had never thought about that and that it was insightful. Maree's sciatica continuing to cause pain and mobility challenges. Did some gentle exercises to music, with very good effect. Maree's mood brightened and she was moving more freely by the end. Supervised medication and BSL (5mmol). Maree stated that she would eat dinner before going to bed.

Objective

Maree much improved from Monday. Mood more stable; no formal thought disorder

Homeopathic acute consult 17/06/2024 17:45 PM

Notes updated 18/06/2024 10:24 AM

Michelle Hookham

Subjective

Phone call with Maree yesterday, stating that she was not coping; was extremely irritable and losing temper. Had been unable to open a can due to her peripheral neuropathy, lost temper and threw the implement. Maree stated that she had also thrown one of her cats outside and was upset about that. Discussed emotional lability and Maree affirmed that she had not been able to get more medication/blister pack last week as planned. She stated that she had made an appointment with a new GP for Friday to get a new script, as Dr Morris and Dr Ruby are away atm. Maree stated that the pharmacist will not dispense more medication until she has a new script. I asked permission to contact Nick (pharmacist) to try and get an emergency supply, to which she agreed. Nick agreed to dispense another 7 days supply, which i collected and dropped off to Maree last night. Supervised Maree taking medication and wrote a schedule on her white board for medication schedule. Maree concerned about sleepiness when recommencing

medication, and psychoeducation provided about the need for her "brain to have a rest" after a couple of months with minimal medication. Maree agreed to adhere to the schedule. BSL 13.5 mmol (Maree had had chocolate). Insulin administration supervised during this home visit.

Objective

Maree's mobility impacted by sciatica, with visible pain on movement. Emotional lability apparent Open to discussing treatment and accepting of recommendations for recommencing medication

Assessment

Relapsed bipolar disorder

Plan

Recommence medication Home visit on Wednesday

NDIS mental health/therapeutic support 11/06/2024 16:30 PM

Notes updated 13/06/2024 05:37 PM

Michelle Hookham

Subjective

Home visit. Maree stated that she has been very emotional. Expressed frustration with friend who Maree considers has messed up her ipad connectivity. She had communicated with him her frustration via txt msg and was angry with their response. Spoke with Maree to help her see the other perspective, after which she stated she realised she had been taking her anger out on them, which showed good insight. Maree continues to not take her medication. Initially she refused to speak about it. However when she broke down, stating she didn't know why her mood was so bad; why she was losing her temper over the smallest things, that she was able to listen to psychoeducation re the importance of her medication for mood stability. Maree stated that she didn't know why she was so resistant, even after she had agreed to take a reduced dose, and the pharmacist had made up new blister packs. Maree reported that she had emptied her entire packs into a jar, which meant that she now was not able to follow her medication schedule and she is unable to get a new script filled until she found the scripts from her GP (which she is unable to find). Maree found a blister pack with 3 days of medication, and she took her evening dose. Maree stated that she has not been eating. She has a new Blood glucose monitor, however didn't know how to insert the needle. We worked it out and she took a test: BSL taken and 5.7mmol. She stated that she would take her insulin later. Maree has drafted a letter to SJOG to follow up with her application to support her autobiography publication. We worked through this letter and edited it together. She is happy with the revisions and will further refine herself. 12.06.24: phone call with Maree maree contacted me to say that she had felt dizzy after her medication and went to bed and slept 14 hours. Stated that she was nervous about taking the next doses. Discussed that she should eat regular meals today before taking medication.

Assessment

Emotionally dysregulated due to not taking medication.

Plan

Monitor mood Maree to get new script filled and has agreed to take medication.

NDIS mental health/therapeutic support 04/06/2024 14:00 PM

Notes updated 05/06/2024 10:26 AM

Michelle Hookham

Subjective

Meeting at Maree's home with Natasha from Axxess Disability to resolve issues related to bathroom renovation and care coordination. Revised building scope of works and realised that there were 2 line items for install of shower curtain and disabled bathroom for renovation period, totalling \$1000.00 that were not used in the renovation. Natasha questioned why this wasn't used to pay for the shower screen. Maree voiced her frustration with shower screen being the wrong size and very upset that the builder had stated in his email that she was 'taking advantage' by asking that this be replaced. Maree also upset re removal of backyard tap and difficulty getting builder to resolve the issue, even though they admitted fault. Maree denied she had ever requested the builders to tile from floor to ceiling (which the email from builder stated she had), and voiced distress that they had "lied" about this. The original quote was clarified and did not include floor to ceiling tiles. Natasha agreed to follow up with the builder, as it is causing undue emotional distress for Maree. Should the shower screen continue to be an issue, Maree to get additional quotes to resolve the matter herself, once she has the money to afford it. Maree stated that she felt so relieved that this had been resolved. Natasha reflected back to Maree that she gets very stressed about these issues. Took Maree out on her mobility scooter, along road and up to Richmond Village to the bank. This was to help Maree gain confidence to travel further in the scooter, with good effect. Maree stated that she felt much better to get out independently.

Objective

Maree stated that she felt much less stressed after resolving/planning to deal with building issues. Clearly enjoyed the scooter outing; chatting and laughing along the way. Bright and reactive on return home, with a renewed sense of confidence to be able to access the community independently.

Assessment

Good outcome from session today. Maree clearly less stressed and happier mood.

Plan

Continue with exercise focus and independence to get out when feeling low in mood to help maintain stable mood.

NDIS mental health/therapeutic support 22/05/2024 16:30 PM

Notes updated 22/05/2024 07:45 PM

Michelle Hookham

Subjective

Home visit. Maree stated that she had woken at 9am, took her medication, was very tired and went back to sleep for another hour; woke feeling better. She then spent the day with her neighbour and shared a cooking experience with her. Maree has new vital call delivered. Went through instructions together and tried to set it up. Maree will call the company tomorrow for additional instructions. Maree spoke about frustrations with her friend, Pete (who is also a client). I gave her feedback about his current low mood (with his permission), to let Maree know that he is needing some quiet time and will be back in touch when ready. Maree discussed increasing weakness and unsteadiness. We discussed ways to build strength and started some chair exercises. Maree will continue to do these and we plan to build on them from there.

Objective

Maree looking better today and stated that she feels better. Mood more stable and less dwelling on negative ruminations. Has started taking medication again after a week lapse in doses. I provided feedback that it makes a big difference to her mood stability, to which she responded that she is starting to realise. Discussed relapse prevention and the importance of medication to prevent hospitalisation.

Assessment

Stable mood when taking medication

Plan

Weekly exercise program. Will start Nia next week.

Mental health consultation 14/05/2024 15:00 PM

Notes updated 14/05/2024 06:20 PM

Michelle Hookham

Subjective

Picked up Maree and took her to appointment with Dr Morris. Discussed medication in relation to mood lability and tiredness and Maree requested stopping the medication making her drowsy. I outlined the challenge with consistency of medication since discharge from SJOG and the deterioration in mood since she stopped taking it. Dr Morris requested that she see Dr Ruby for a medication review, but encouraged her to keep taking it. Maree asserted her difficulty with sleeping all day and Dr Morris agreed to a reduction in dose until reviewed by Dr Ruby, as a compromise to ensure Maree continues to take her medication. Discussed Maree's increased unsteadiness and falls. Dr Morris did a medical assessment. No postural hypotension; would like a full suite of blood tests for analysis and brain scan. Unsure if Maree had a CT scan at SJOG after her fall. Dr Morris to contact Nepean Imaging and let Maree know if she does not need to have the scan.

Objective

Maree's mood is more stable today, which may be attributed to taking medication the past few days - week. No irritability and I noticed that she is working on her book again, which shows improved focus and concentration.

Assessment

Stable mood at the moment.

Plan

Next appointment, Maree to come in to the office with Pete.

NDIS mental health/therapeutic support 08/05/2024 16:45 PM

Notes updated 09/05/2024 10:05 AM

Michelle Hookham

Subjective

Maree contacted me on Wednesday distressed as believed she had engaged in a scam; also that she couldn't order her stoma supplies. Maree expressed feeling overwhelmed and not coping with financial management. Home visit today. Maree continues to report emotional instability. Reported bouts of irritability and anger, out of frustration for not being able to do things. She has been restricted to home whilst Peter away and is feeling more socially isolated. Maree showed me her bank statements from both accounts. She has spoken with Bendigo Bank and they are trying to resolve the issue. I could see that \$50 had come out of her account to Harvey Norman's iPad deal, but also \$50 returned. These transactions had occurred in both bank accounts, but she has been unable to get hold of St George by phone to discuss, which is causing anxiety and frustration. She plans to go in person to the bank with her carer on Friday. Maree spoke of conversation with Dani yesterday. This triggered unresolved emotions about feeling distant and cut off from the family. Discussed at length and Maree agreed that she needed to let go of the desire to resolve things with Karen for now; and to not ask Dani about this issue as Dani is not able to breach Karen's confidence. Supervised Maree's medication and diabetes management. BSL: 13.1. Insulin taken. Maree trying to be more regular with medication, after a 3 week period of irregularity, particularly her anti-depressant medication. Maree is concerned about her unsteadiness, increased falls and dizziness. I

Objective

Irritable mood; snappy; tearful.

Assessment

Labile mood. EWS of relapse of bipolar disorder.

Plan

have scheduled an appointment with Dr Morris for Tuesday and will attend this with her. Spend time with Maree to ride her scooter further afield to help her gain confidence.

Phone consultation - Short phone consultation 07/05/2024 12:15 PM

Notes updated 07/05/2024 11:25 AM

Michelle Hookham

Subjective

Struggling; close to tears Fell for a scam requested to change my account for TPG Had difficulty understanding staff Trying to transfer money from an account Went to put in my ostomy order and can't find the previous orders i've done. Now i have to get every item i use and put it in a new order.

NDIS mental health/therapeutic support 01/05/2024 16:45 PM

Notes updated 01/05/2024 07:53 PM

Michelle Hookham

Subjective

Home visit. Maree had a difficult day as her cat, Cannon had difficulty breathing. She had just returned from taking him to the vet with friend, Jarmilla. He has to return to vet tomorrow for further investigations. Maree upset that he may have an incurable disease, but would not want him to suffer. Maree spoke about her recent escapade of painting the front door. She painted all day without break, even though her neighbours suggested she take a break. She eventually went inside, however tripped over, spilling paint all over the floor and walls. Her neighbours came to the rescue. I asked Maree where her vital call was, and she replied that they are no longer using that system and the new system is \$700. Maree has had several falls lately and we discussed the importance of being able to call for help. She plans to ask the NDIS if they would pay for the new vital call. Maree is concerned about her balance, reporting that she frequently catches herself swaying and being unsteady and having dizzy spells. She has had a problem with peripheral neuropathy in her feet since chemotherapy, however she considers that this problem is different. I advised that I have also noticed her balance and suggested a medical review. I also advised that withdrawal from psychotropic medication can cause symptoms, and she is not regular with her medication. Maree requested that I attend the appointment with Dr Morris, and we will look to set a date later in the week. Maree stated that she is taking her medication sporadically, and has been unable to get to the chemist to fill her script. She will attend to this tomorrow when she has a support worker.

Objective

Labile mood. Inconsistent with medication. Pete is away, so Maree has less out of hours support.

Assessment

Early warning signs of relapse. Ongoing physical health challenges.

NDIS mental health/therapeutic support 24/04/2024 16:45 PM

Notes updated 25/04/2024 07:24 AM

Michelle Hookham

Subjective

Home visit. Maree distressed as she was experiencing abdominal cramping and her stoma (Molly) was overactive. She had to empty her bag several times. Stated that she had been constipated, so had stopped her gastrostop medication for a few days. Maree voiced frustration that SJOG is taking so long to get back to her re sponsoring her book publication. She had followed up and been advised that it's best to wait for a response rather than sending a formal request to the Board. Discussed Maree's will. She has met with a friend, Jarmilla, who has agreed to be her executor, power of attorney and enduring guardian. She feels positive about that. Maree expressed strongly that she doesn't want her daughter or biological siblings to be beneficiaries. Observed that Maree was recounting conversations with Pete with irritability. Discussed this with her as EWS of relapse. Maree shared that she hadn't been taking her psychotropic medication as it was sedating and she didn't want to sleep all day. Discussed at length about her emotional stability and relapse prevention and advised she speak to Dr Ruby or Dr Morris about it, which she agreed to do.

Objective

Emotional about stoma - understandably. Irritability with others, indicating lower tolerance and easy triggering to snapping at friends.

Assessment

Irritability; early warning signs of relapse, due to not taking her mood stabiliser medication.

Plan

Explore more about feelings towards her daughter. Arrange time with lawyers for pro bono will.

NDIS mental health/therapeutic support 17/04/2024 16:45 PM

Notes updated 18/04/2024 10:02 AM

Michelle Hookham

Subjective

Took Maree out for dinner for her birthday, with Peter. This was a social engagement activity and worked really well. Maree expressed gratitude for the outing. Conversation was general between the three of us. Maree spoke about her book and has the intention for it to be published this year. She expressed frustration at the delay and is awaiting feedback from SJOG re sponsorship. We explored different pathways to follow up and agreed that Maree should write a formal letter to the Board of Directors. Maree is gradually gaining confidence with her scooter, though is not ready to drive all the way to Richmond yet. She has had a couple of short trips out. Reported that Peter collected her medication last week. On the way home, Maree debriefed about her change of NDIS supports. She stated that she likes her new team, which shows in her mood. Anita is visiting tomorrow for a friendly catch up. She remains unaware of the reasons for being removed from Maree's carers. Maree has expressed her thoughts to Natasha, her support coordinator, that she is dissatisfied with Anita being told misinformation.

Objective

Maree engaged really well in conversation. Mood was bright and reactive; and neither elevated nor depressed = euythmic. SHe had made an effort for the occasion with clothes, hair and makeup.

Plan

Consider walking with Maree to Richmond, alongside her scooter to help her gain confidence.

Mental health consultation 12/04/2024 16:30 PM

Notes updated 14/04/2024 08:20 AM

Michelle Hookham

Subjective

Maree excited to have received her new mobility scooter, delighting in giving me a demonstration. To be able to go places on her own, is a positive thing for her mental health. For eg. she had run out of medication and said she could get herself to the pharmacy on Saturday for her new webster pack. Maree is feeling positive about her new NDIS carers. She has more hours per week, which is also supporting her wellbeing. They are keeping her occupied and facilitate good social engagement. Much of the session was spent discussing her will, as I have organised a pro bono arrangement with a local lawyer. This was emotional for Maree as she has no direct next of kin. Her 'surrogate' family, Dani and Trevor Wilson are older and ailing, so do not agree to have formal roles in Maree's affairs. Their daughter, Karen, and Maree were close, however have had a relationship breakdown, which is a constant source of sadness for Maree as she doesn't understand what has happened here. Maree spoke with Dani in the week, who affirmed that Karen would not be her executor of will, power of attorney or enduring guardian. Maree spoke about this and cried as she recalled the conversation with Dani. Maree considered her previous NDIS worker, Anita. I expressed hesitation, as when their relationship was breaking down, Maree lost trust with Anita due to boundary crossing. I suggested her biological siblings, however she didn't feel comfortable in the circumstances. Maree considered that her life-long friend, Jarmilla may be an appropriate person and she resolved to discuss this with her. Maree has her four cats back, which she is happy about.

Objective

Maree is transitioning well into home life. Her new bathroom, ramp and scooter are good diversions.

Assessment

Doing well; compliant with most of her medication. She informed me that she has not been taking the medication that is sedating in the morning. I recommended she continue taking until has spoken with Dr Ruby, but agreed that at the minimum, taking the nocte dose would ensure good sleep and help prevent relapse.

Plan

Weekly consultations.

NDIS mental health/therapeutic support 05/04/2024 16:45 PM

Notes updated 05/04/2024 07:11 PM

Michelle Hookham

Subjective

Home visit. Maree just discharged from SJOG yesterday. Had no medication until today as just filled script and collected. Happy to be home but missing routine and company of hospital.

Reminded that this is always an adjustment for her and takes her a week to settle into being home alone. Discussed the benefits of living in a villa in a village, which she had been keen on before, however now she doesn't consider it to be an attractive option, especially as she has a new bathroom. Maree inspired with home renovations and intention to par back to a less cluttered environment. Maree mentioned incident yesterday when Peter reversed into her letter box (dark). Her response was calm and kind to him, indicating improved and stable mood. ie. less irritability and dysregulation as per before admission. Positive feedback given for her supportive reaction. Maree stated that she felt tired all the time and that the pharmacist told her that one of the medications was sedating. Maree said that now she doesn't want to take it and that she felt so good and awake today having 24 hours without medication. Psychoeducation provided re mood stability and relapse prevention, with good effect. Maree took her insulin and medication whilst I was there. Maree stated that she will try to follow the medication routine. Maree reported a fall yesterday, tripping over the vaccuum cleaner cord whilst her cleaner was there. She does not appear to have sustained an injury. She continues to have physio for her shoulder injury and sore hip, which are gradually improving.

Objective

Bright; reactive; mood stable.

Assessment

Doing well; stable after SJOG admission.

Plan

Weekly appointments.

NDIS mental health/therapeutic support 27/03/2024 16:30 PM

Notes updated 30/03/2024 06:58 PM

Michelle Hookham

Subjective

Visited Maree at SJOG. Maree reported that her planned discharge is in another week. Stated that there are no services anymore that can attend to medication support on a daily basis. Maree stated that she will try to make more of an effort to take medication as prescribed. Maree spoke about her relationship with Dani and Karen. She had spoken with Dani and discussed how she had no idea what she had done to cause Karen to completely disconnect. Dani acknowledged that, without committing to helping to resolve the situation, as she doesn't want to be in the middle. Maree stated that she has reduced contact with Dani and that the relationship doesn't feel the same since they moved to Melbourne. She spoke of past hurts related to Dani's change of role with Maree's support. Informed Maree that Stonebraker Lawyers had agreed to complete her will pro bono. Maree expressed gratitude for that. We discussed the nature of the first meeting and the things that she will need to consider when she meets them - benefactor; power of attorney; enduring guardian etc. Maree unsure who she could ask, given change of situation with Dani and Karen. She might consider her biological brother, Peter. Maree continues to work on her book; is awaiting feedback from SJOG re sponsoring publication.

Objective

Maree relatively stable after a 2 - 3 month admission to SJOG. However, irritability of mood still close to the surface. Mobility continues to be deteriorating, however Maree appeared to have less pain today. She is awaiting results of her recent scans.

Assessment

Stable at the moment. Awaiting discharge.

Plan

Once discharged from SJOG, commence weekly consultations.

Mental health consultation 19/03/2024 14:15 PM

Notes updated 19/03/2024 02:07 PM

Michelle Hookham

Subjective

Still in SJOG Struggling with pain in leg. Had treatment for shoulder - dry needling which helped for 4 days, but still getting pins and needles. Dx bursitis left shoulder 3 days ago, difficulty walking; couldn't lift leg off the ground; and pain in leg and groin. Nurses concerned and got medical examination by 2 doctors --> could be hip or arthritis; that I'll have to use a wheelchair. I got upset. For xray tomorrow. Didn't tell staff for a few days Can't put pants or trousers or shoes on as can't lift leg. Have had pain for a few months - haven't been able to get in Pete's car for a while. Not allowed out atm as coming back too tired from leave and unable to walk. Bathroom almost finished. Looks great. A rail on side of toilet, which is great.

Objective

Anxious about leg, after Drs gave her the worst case scenarios. Discussed waiting until results are in before worrying about next steps.

Assessment

In SJOG and getting the support she needs.

Plan

Weekly appointments scheduled for after discharge.

Phone consultation - Short phone consultation 05/03/2024 09:00 AM

Notes updated 08/03/2024 08:34 AM

Michelle Hookham

Subjective

Maree contacted me by phone. Dr Ruby has scheduled discharge for early April. Maree concerned about how she will prevent relapse after discharge from hospital. Discussed that she now has more supports in place which will help her stability, including my increase to weekly consults. Appointments scheduled for the next month. Maree concerned about state of house whilst renovations going on and that it will be ready in time for discharge. Stated that it would be too stressful to return home before it's in order. Maree has contacted with previous NDIS support worker and communicated that she would like to stay in touch. NDIS support worker was told misinformation about why Maree decided to change support workers, which Maree is angry about. Allowed Maree to express feelings and discussed ways to settle her emotions, with good effect.

Assessment

Maree emotionally labile at the moment. Is in SJOG at the moment, so will be provided with support she needs.

Plan

Move to weekly appointments after discharge from SJOG.

NDIS mental health/therapeutic support 26/02/2024 16:00 PM

Notes updated 28/02/2024 09:55 AM

Michelle Hookham

Subjective

Visited Maree at SJOG. Maree spoke about her meeting with pastor at SJOG with regards to funding the publication of her autobiography. The response had been encouraging and she is looking forward to the outcome of this being taken to the board. Explored different options/packages with the publisher and discussed preferences. Maree decided that she should she receive funding, she will discuss packages with the funders as to how much they are prepared to provide. Maree is excited about her home modifications and new bathroom and ramp and spoke about the issues involved with this. I attended a review with Maree and Dr Ruby (unplanned, but timing worked out well). Discussed discharge planning, raising the following points for discussion: 1. Concern about medication compliance and how to best manage that, recommending community nurse for medication dispensing. Dr Ruby unsure if available, but will check with CMHN in the Hawkesbury, Maureen. Otherwise, I will consider other ways of supporting regular medication. Dr Ruby will also review medication to try and get as many as possible into the evening dose schedule. 2. Increasing weakness and unsteady gait, recommending exercise program. Dr Ruby spoke about the limitations to Maree's activities, as is not permitted to walk to the art room due to falls risk. I suggested that she could be taken in a wheel chair. Dr Ruby also explored vital call for Maree. She was informed that Maree already has one, but the account is not up to date and she tends not to use it. Plan: Maree to ask SJOG staff to help her activate the account. 3. Maree spoke about difficulty with other patients sharing traumatic experiences with her. Dr Ruby acknowledged that this was not optimal, but somewhat out of her control, since the patients had already been spoken to about talking about their mental health with other patients. Maree has learned to manage by removing herself to her room when needed.

Objective

Maree is improving. Mood is more stable. Some irritability is still there, when she gets frustrated, for example, not being able to find the right link on her computer or phone. Observed to throw her stick down in frustration. However, it passes quickly. Maree said goodbye with the expression 'i love you'. Whilst I know she appreciates my care and service, I need to ensure that boundaries are maintained.

Plan

Talk to Maree about boundaries.

Mental health consultation 14/02/2024 16:30 PM

Notes updated 14/02/2024 06:44 PM

Michelle Hookham

Subjective

Visited Maree at SJOG. Admission is going well. Medication still being adjusted. Maree very grateful for the visit. She spoke about past grievances with NDIS carer, who she recently discontinued services with. Also incident with night staff who walked into the bathroom whilst Maree was on the toilet. This had escalated to a formal complaint requiring mediation between staff, however Maree unhappy with the outcome, but has decided to drop the matter. Maree plans to attend the Pink Finss support group on Friday for the first time, with an NDIS worker. She feels positive about this and thinks it will be a positive experience for her. This led to her reflecting about her journey with bowel cancer and the difficulty adjusting to having a stoma. She shared her journey from diagnosis to recovery. Stated that she has never been able to accept the stoma, which she still feels is alien to her body. Most of her siblings have had cancer of some kind. Maree informed me that she had a second fall at SJOG, this time, hurting her left shoulder, which continues to be painful to move. SJOG have arranged for her to have an ultrasound on Friday at 3.20pm. Maree left her ipad on the roof of a car, and Pete drove off. The ipad has not been recovered and Maree is claiming through insurance.

Objective

Maree appears to be increasingly ruminating on negative past experiences, which she repeats often, seemingly unaware that she is repeating herself.

Assessment

Mood becoming more stable. Less irritable. Memory seems to be a problem, with Maree forgetting names and repeating herself.

Plan

Maree has requested that I participate in her discharge planning meeting, which I agree to. Maree to consider having a community nurse to dispense her medication twice daily. Also to consider exercise program to improve her balance and mobility and strength.