

## Chart Your Child's Progress

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### Learning Objectives:

1. Participants will understand the uses of charting in management of chronic mental illness.
2. Participants will learn how to decide on objective measures to chart and how these relate to target symptoms.
3. Participants will have an opportunity to set up a chart and get feedback from the instructor.

### I. You can't know where you're going until you know where you are.

- A. Many years of experience have taught me that parents and caregivers have short-term memories – they are focused on the problems of the day.
- B. Many psychiatric treatments show benefit only after days, weeks, or months of effort.
- C. It's often difficult to determine which changes in environment, schedule, medications, or interactions with others have made a crucial difference to the person with the problem.
- D. Without a way to track symptoms and change over time, good treatments are abandoned and we cling to things that seemed to work but are only chance associations.

### II. Careful selection of target symptoms and objective symptom measures is key to proving which treatments work for an individual.

- A. Target Symptom – a sign of the illness that is disrupting function and becomes the focus of treatment ---
  1. Symptoms of depression: hopeless and guilty thinking, suicidal thinking, social withdrawal, appetite disturbance, sleep disturbance, loss of pleasure, sad mood
  2. Target symptoms for a particular patient might be: suicidal thinking, sleep disturbance, social withdrawal
- B. Objective Measure -- A behavior that is strongly associated with a target symptom.
  1. The best objective measures are obvious even to people who don't know the patient well. In other words, a stranger peering through the windows of the home could say with certainty whether or not the patient showed the objective measure.
  2. An example of an objective measure of social withdrawal might be: patient does not eat dinner with the family
  3. An example of an objective measure of sleep disturbance might be: patient naps in the afternoon

### III. Having decided on a target symptom and an objective measure, the next task is to construct a simple method for tracking the objective measure:

- A. Families and caregivers of persons with mental illness are stressed and shouldn't be asked to spend a lot of time charting.
- B. The chart should be easily understood by everyone involved in the person's care.
- C. Since most of our patients show changes only over several days, charting a month on a page works well for many situations.
- D. Depending on the need for the chart – who is using it and why – different time periods may be useful (a week, two years, etc.)

#### IV. Samples of blank charts:

- A. The Medication Timeline (TR)
- B. Bipolar Mood chart
- C. Minimal requirements for being human (TR)
- D. Grade School Function (TR)
- E. The Universal Symptom Chart (TR)

#### V. Samples of Charts from my practice:

- A. Sarah Jane Smith – Three year saga of a chart that was used to minimize medications, optimize treatment, and finally eliminate the last troublesome symptom.
- B. K-9 -- The bipolar mood chart that shows that medicine is not enough.
- C. Adric -- The weekly function chart which Dr. Jenkins ignored and later regretted ignoring.
- D. Jo -- The bipolar mood chart that shows when we finally got it right.
- E. Jamie – The medication timeline combined with target symptom record demonstrating: simplifying meds, optimizing doses, and that meds are not enough.
- F. Mr. Toymaker – Demonstrating patience by group home staff in developing a chart that was simple and effective.

#### VI. Pitfalls of Charting

- A. Too much on the page –
- B. School behavior/progress charts do not correlate with target symptoms.
- C. Charting symptoms or measures that are not useful becomes discouraging.
- D. Setting the wrong time measure or charting the time measure incorrectly

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#### VII. Make your own chart -----

1. List the key target symptoms
2. List possible objective measures
3. Set up the time period
4. Decide who will chart and when
5. Bring them to appointments and review them