Psychiatric Service Provider Log

Student's name:			Provider's Name:	
Student's date of birth:	PA S	Secure ID:	Provider's Title:	
School:	Date	e:	Provider's Signature:	
Disability/symptom(s):			☐ Early Intervention ☐	School Age

Service	Treatment		Refer to the keys below for an explanation of the treatment codes and progress indicators				
Date	Start Time	End Time	Treatment Key (see Pg 2)	Group Size	Service Type	Progress Indicator Key	Description of Service

Service Type:

In-Person:			
D = Direct – In-person Session	DM = Direct – In-person Make-up Session		
Session Did Not Occur:			
PA = Provider Absent	PNA = Provider Not Available		
SA = Student Absent	SNA = Student Not Available		
Telehealth:			
10 = Direct – Telehealth	02 = Direct – Telehealth Session (student		
Session (student at home)	somewhere other than home)		
10M = Direct – Telehealth	02M = Direct – Telehealth Make-up		
Make-up Session (student at	Session (student somewhere other than		
home)	home)		

Progress Indicator Type:

Mn = Maintaining	Pr = Progressing	In = Inconsistent
Rg = Regressing	Ms = Mastering	

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Treatment Key:

1	Communicating with the student relating to student's history, mental status or behavior
2	Conducting individual psychotherapy
3	Conducting group psychotherapy
4	Crisis Assistance

Notes:

- All Direct Services should be provided in person with the student whenever possible.
- Services rendered via telehealth must be provided according to the same standard of care as if delivered in person.
- Use the "Service Provider Evaluation Log" for evaluations and/or assessments.

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