

	OCTOBER 3
8:00	
8:30	Meet with Bob
9:00	
10:00	
11:00	
12:00	Lunch at Main Street
1:00	
2:00	
3:00	
4:00	
5:00	
6:00	Meeting at Club
7:00	Dinner

Helpful Hint: Many patients are hesitant to relinquish appointment cards or “sticky notes” in favor of writing all information into the calendar. Consider incorporating an envelope into the organizational book to keep these cards.

Once events that have already been scheduled are entered on the calendar, begin to train the patient to consistently enter all new appointments and obligations directly into the calendar.

At each session, review the calendar:

- Ask patients whether they carry the calendar with them everywhere.
- Have any appointments, obligations, parties, meetings, etc., been scheduled since the last treatment session?
- Have these new events been documented in the calendar system?
- Are the events documented in the appropriate location?

Documentation:

- What percentage of appointments/events were written down?
- How many were not written down correctly?
- What kept the patient from entering the correct information consistently?
- Was there a pattern to the errors?
- What type of cues assisted the patient in improving his or her accuracy?

Now that those appointments and obligations determined by others have been accounted for, it’s time to fill in the remainder of the tasks needed for each day.

Divided Attention

The ability to do more than one thing at a time is **divided attention**. Dividing attention occurs often in daily life, such as when someone is driving, cooking, or working. The difficulty arises in determining how many tasks can attention successfully be divided among.

There are several variables of difficulty that contribute to divided attention skills.

- **Difficulty of each task:** It is easier to divide attention between simple tasks.
- **Familiarity of each task:** It is easier to divide attention between known tasks.
- **Enjoyment:** It is easier to divide attention between enjoyable tasks.
- **Number of tasks attention is divided between:** The more tasks involved, the more difficult.
- **Length of time you must persist with these tasks:** It is easier to divide attention for shorter periods of time.

To assist patients in becoming aware of the number of tasks they function between, ask them to complete the **Simultaneous Tasks Worksheet** on page 142 (a completed chart from the worksheet is on the next page). Having the patient complete the chart during a treatment session will be difficult, since it requires the person to recall the number of functions he or she attempted at one time. Therefore, this is an activity that a patient frequently needs to complete as homework and review during the session.

Divided attention tasks can easily be simplified by switching them to alternating attention tasks. For example, instead of making the coffee and the toast at the same time, make the coffee and then make the toast.

Helpful Hint:

Both alternating attention and divided attention fall under the heading of “multi-tasking.” Today’s society values the ability to “multi-task,” which is essentially the ability to alternate or divide attention. The data is beginning to show, however, that multi-tasking is not saving any time, in fact it may be taking longer to complete tasks and they may be less accurate than if they are done one at a time. Helping the patient to be sharply aware of his or her abilities and limitations with alternating and divided attention will ultimately assist the patient in being successful in completing tasks, whether they are done one at a time or simultaneously.

Begin with the letter *A* and draw a line to the number *1*. Continue by drawing a line to *B*, then *2*, and so on, alternating letters and numbers, in order.

The trail activity consists of the following elements scattered across the page:

- Letter *A* (top right)
- Number *1* (middle left)
- Letter *B* (bottom right)
- Number *2* (middle left)
- Letter *C* (bottom left)
- Number *3* (bottom left)
- Letter *D* (middle right)
- Number *4* (top left)
- Letter *E* (middle left)
- Number *5* (middle right)
- Letter *F* (top center)
- Number *6* (bottom center)
- Letter *G* (middle right)
- Number *7* (bottom right)
- Letter *H* (middle left)
- Number *8* (middle left)
- Letter *I* (middle right)
- Number *9* (middle right)
- Letter *J* (middle right)
- Number *10* (middle left)

Sample Treatment Sessions

(Examples for all treatment areas are modeled in these samples of documentation; however, all are not typically accomplished in a characteristic 1-hour session.)

#1 Early in Treatment

1. Organizational System (Level 2–3)

- Does the patient have the organizational system with her?
- What percent of the time has she carried it since last session?
- How many appointments/obligations were written into the system this period?
 - Did the patient fail to write any in? Why? How did she come to realize this?
- Did the patient participate in the **Time Estimation Worksheet**?
- What percent of activities were estimated within 5 minutes? Overestimated? Underestimated? Discuss.
- Specific work on time estimation:
 - Patient will estimate within 1 minute how long a newspaper article of interest will take to read (6-8 paragraphs).
 - Patient will estimate within 1 minute how long it will take to travel to the cafeteria.

2. Attention (Sustained Attention Level)

- Restate the 5 types of attention.
- Can the patient provide examples of when she used each type in her life?
- Did the patient participate in the **Activity Worksheet**? Discuss.
- Did the patient report instances of losing sustained attention to a task?
- What percent of today's situations requiring sustained attention can the patient identify?
- Has the patient identified time limits and breaks for these tasks?
- What percent of upcoming situations can the patient identify as taxing sustained attention?
- Specific practice with sustained attention:
 - Patient will read an article of interest for 2 minutes, take a break, and read for 2 more minutes.
 - Patient will read an article of little interest for 1 minute, take a break, and read for 1 more minute.
 - Patient will visually scan for 1 target letter in medium-sized print for 2 minutes
 - Patient will identify 1 target word from an auditory listing for 1 minute.