

PERS ACTIVATION LOG

Consumer: _____

ISC Name: _____

Please forward a copy of the Detailed PERS Report after every instance of Consumer PERS Activation to:
David Frydman
Franklin Pierce Law Center
2 White Street
Concord, NH 03301

If you have any questions regarding this form contact David Frydman at 603-228-1541.

Please attach all Detailed PERS Reports to this log.

<u>#</u>	<u>Date</u>	<u>TIME</u>	<u>Day of Week</u>	<u>Reason (brief)</u>	<u>Outcome (brief)</u>
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

PERS ACTIVATION #: _____

DETAILED PERS REPORT

Consumer: _____

ISC Name: _____

Date: _____
(day of week, mm/dd/yyyy)

Time: _____

Who Responded? _____

REASON FOR PERS ACTIVATION:

Empty text area for Reason for Pers Activation.

OUTCOME:

Empty text area for Outcome.

CARE PROVIDED:

Empty text area for Care Provided.

FOLLOW-UP ACTIVITIES / REQUIRED CHANGES:

Empty text area for Follow-up Activities / Required Changes.