## **Other Progress Note Instructions**

## WHEN:

This form is to be completed to document any activity that is **<u>not</u> a County, DMC, or Non-billable service**.

Timeline: Other Progress Notes should be documented as close to the completion of the activity as possible to assure important information is captured accurately.

## COMPLETED BY:

Each progress note is written by the program staff member who completed the activity or contact.

## **REQUIRED ELEMENTS:**

Reminder: Progress notes shall be legible

- Client Name: Complete client's full name
- **Client ID:** Complete the client ID number by entering the client's SanWITS' Unique Client Number (UCN)
- Date of this Activity or Contact: Complete date of the activity or contact that is being documented
- Contact Type (F-F = Face to Face, TEL = Telephone, TH = Telehealth, COM = In Community, O = Other, NC = No Contact)
- Language of Service (if other than English)
- Translator Utilized (if applicable)

# Progress Note Narrative Section

Document the type of activity or contact in this section (examples include clerical-type activities that are not part of a service e.g. documenting a voicemail left for or received by the client, documenting mailing information to the client, etc.)

Staff Printed Name: Staff completing note to print first and last name with title here

Staff Signature: Staff completing note to sign name here

Date of completion: Staff completing note to enter date note completed here