

**RESIDENTIAL OR WITHDRAWAL MANAGEMENT - DAILY PROGRESS NOTE**

Client Name: John Doe

Client ID: 123456

Date: 10/18/18 Shift Time: All Day

Contact Type		Service Type			EBP Utilized
F-F = Face-to-Face	TEL = Telephone	AS = Assessment	DC=Discharge	FT = Family Therapy	MI = Motivational Interviewing
TH = Telehealth	COM = In Community	GR = Group	IND = Ind. Counseling	TR = Transportation to & from medically necessary treatment	RP = Relapse Prevention
		CR = Crisis	TP = Tx Planning	O = Other	O = Other
		CO = Collateral	PE = Patient Education		N/A = Not Applicable

<b>Topic</b>	Identifying Triggers			<b>Language of Service (if other than English):</b>	☒N/A		<b>Translator Utilized?</b>	☐Yes ☐No ☒N/A			
<b>Start Time</b>	☒am 9:00	<b>End Time</b>	☒am 10:30	<b>Total Duration</b>	90 mins	<b>Contact Type</b>	FF	<b>Service Type</b>	GR	<b>EBP Utilized</b>	RP

<b>Topic</b>	Family Dynamics			<b>Language of Service (if other than English):</b>	☒N/A		<b>Translator Utilized?</b>	☐Yes ☐No ☒N/A			
<b>Start Time</b>	☒am 11:00	<b>End Time</b>	☐am 12:00	<b>Total Duration</b>	60 mins	<b>Contact Type</b>	FF	<b>Service Type</b>	IND	<b>EBP Utilized</b>	MI

<b>Topic</b>	Heroin and It's Impact			<b>Language of Service (if other than English):</b>	☒N/A		<b>Translator Utilized?</b>	☐Yes ☐No ☒N/A			
<b>Start Time</b>	☐am 1:30	<b>End Time</b>	☐am 2:30	<b>Total Duration</b>	60 mins	<b>Contact Type</b>	FF	<b>Service Type</b>	PE	<b>EBP Utilized</b>	NA

<b>Topic</b>	Priorities in Sober Life Choices			<b>Language of Service (if other than English):</b>	☒N/A		<b>Translator Utilized?</b>	☐Yes ☐No ☒N/A			
<b>Start Time</b>	☐am 3:30	<b>End Time</b>	☐am 5:00	<b>Total Duration</b>	90 mins	<b>Contact Type</b>	FF	<b>Service Type</b>	GR	<b>EBP Utilized</b>	RP

**Narrative must include: 1) Provider support and interventions, 2) Client's progress on treatment plan: problems, goals, & action steps, 3) Client's ongoing plan including any new issues, and 4) If service(s) provided in the community, identify location(s) and how confidentiality was maintained.**

Client participated in 5 hours of services on this day and 4 hours were clinical services. His first group was "Identifying Triggers" where the counselor prompted a group discussion about various coping strategies for clients to utilize when confronted with their unique triggers. Relapse Prevention strategies were used to review how a person's affect and cognitive factors influence a person's behaviors that may lead to relapse. Client was able to process how being out in the community near where he used in the past is one of his biggest triggers and how he avoids that area and what he does when he has to go near that community. He was able to discuss tools he will use to cope, such as going with a friend or meditation techniques, when he is in that community (treatment plan goal #1). During client's individual session with his primary SUD counselor, client disclosed that he is hopeful to improve the relationship with his parents. The counselor utilized MI techniques, including open ended questions, to help the client be open and honest and identify behaviors he could change to improve this relationship which was damaged from his previous drug use behavior of lying and stealing (treatment plan goal #2). Client also participated in one hour of Patient Education where he learned about Heroin's impact on the body and brain and he expressed an understanding of the physical changes in the brain and body from Heroin use. Client participated in the "Priorities in Sober Life Choices" group, which reviewed relapse prevention strategies, and the group leader had each person list their current priorities in sobriety and share their list with the other group members. Client shared that his goal (treatment plan goal #2) is to "work on improving myself and my relationships." He discussed how his primary focus is to be mentally and physically healthy and to also work on repairing the damaged relationships with his family and friends.

Client continues to be motivated for sobriety and reported minimal cravings today. He actively participated and engaged in treatment. Client has an appointment on 10/26/18 with a primary care physician to complete his physical exam which will meet one of his treatment plan goals (Treatment goal #3). He also plans to set up a family therapy session with his parents next week to work on their relationship (Treatment plan goal #2).

<b>Counselor/LPHA Printed Name, Title</b>	<b>Signature, Credentials</b>	<b>Date of Completion</b>
Sally Sue, AOD counselor	<i>Sally Sue, CAODC</i>	10/19/2018