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PSYCHIATRIC CLINIC/HOSPITAL 2121 Main Street Milieu, USA 28214

Date of Exam: 9/29/2019 Time of Exam: 1:11:36 PM

Patient Name: Darrious Robinson

Patient Number: 123456 Patient DOB: 10/4/1995

SUBSTANCE ABUSE TREATMENT PLAN

Treatment Plan for Darrious Robinson

A treatment plan was created or reviewed today, 9/29/2019, for Darrious Robinson.

Meeting Start: 12:00 PM - Meeting End: 12:30 PM

This was an Initial Treatment Team Meeting.

Participant(s) Developing the Plan:

Courtney Kimmel, (MD) (Psychiatrist) Darrious Robinson (Client) Liz Brown, LCSW (Therapist) Jessica Abernathy (Case Manager)

Diagnosis: Alcohol dependence with alcohol-induced mood disorder, F10.24 (ICD-10) (Active)

Problem / Need: Recovery Environment

RECOVERY ENVIRONMENT

PROBLEM / NEED: Recovery Environment

Darrious's recovery environment has been identified as an active need that requires intervention. It is primarily manifested by:

*Environment is unsupportive of abstinence and emotionally unsupportive. Old friends associated with substance use are in the neighborhood.

LONG TERM GOALS:

Darrious will make changes to his recovery environment so that it becomes supportive of recovery and sobriety, including the development of a sober support network.

Target Date: 12/22/2019

SHORT TERM GOAL(S) & INTERVENTIONS:

Short Term Goal / Objective:

Darrious will meet with primary counselor for weekly 1 on 1.

Frequency: 1-4 times per week Duration: for three months Progress: Working on

Target Date: 10/19/2019

Intervention:

Therapist/Counselor to assign meeting with primary counselor for weekly 1 on 1. Progress will be monitored and documented.

Frequency: Once per week Initials: LCSW

Short Term Goal / Objective:

Darrious will develop a plan to find and maintain a sober peer group.

Frequency: once per episode Progress: Working on

Target Date: 10/13/2019 Completion Date: Status: _____

Intervention:

Therapist to review and provide feedback to Darrious regarding his plan for finding and maintaining a sober peer group.

Frequency: once per week Initials: LCSW

RELAPSE POTENTIAL

PROBLEM / NEED: Relapse Risk

Darrious's relapse potential has been identified as a need requiring intervention. It is primarily manifested by: Inadequate Insight into Addiction: Details are as follows:

LONG TERM GOALS:

Darrious will develop skills to prevent relapse.

Target Date: 10/13/2019

SHORT TERM GOAL(S) & INTERVENTIONS:

Short Term Goal / Objective:

Darrious will identify high risk situations with primary counselor and develop coping skills.

Frequency: As needed Progress: Working on

Target Date: 10/13/2019 Short Term Goal / Objective:

Darrious will write and sign an abstinence contract with primary counselor.

Frequency: immediately Target Date: 9/30/2019C

RECOVERY ENVIRONMENT

PROBLEM / NEED: Access to Health Care

Darrious's health care is an active need that affects his recovery environment and requires intervention. It is primarily manifested by:

Inadequate Insurance: Details as follows:

*Due to Unemployed Status

LONG TERM GOAL:

Darrious will have access to health care.

Target Date: 12/29/2019

SHORT TERM GOAL(S) & INTERVENTIONS:

Short Term Goal / Objective:

Darrious will seek and obtain appropriate insurance coverage to meet current needs.

Frequency: 100% of the time Progress: Working on

Target Date: 10/27/2019

Intervention:

Case Manager will assist Darrious with application processes to obtain appropriate insurance.

Frequency: As needed Initials: LCSW

Intervention:

Counselor will have Darrious complete all necessary applications for transportation options, so that follow up

appointments can be kept.

Frequency: As needed Initials: LCSW

STATUS:

9/29/2019: The undersigned clinician met with the patient (and family, as appropriate) on the date above in a face to face meeting to work with him/her in developing this Treatment Plan.

Strengths

Darrious's strengths include:

Cognitive

- Intellectually bright
- Can make needs known
- Verbal

Barriers

Motivational issues interfere with treatment.

- Therapy will focus on motivational problems first.

A copy of this treatment plan was: given to the patient

Electronically Signed By: Liz Brown (LCSW) On: 9/29/2019 1:11:50 PM