

County of San Luis Obispo Behavioral Health Drug & Alcohol and Mental Health Services Progress Report

Client Name

Client ID

<u>Date:</u>

<u>To:</u>

| Behavioral Health Clinic:                            | Atascadero<br>San Luis Obisp | Grover Beach<br>Do San Luis C | Justice Services<br>Dbispo County Jail | Paso Robles |
|--|------------------------------|-------------------------------|--|-------------|
| Date of Screening:                                   |                              |                               |  |             |
| Dates Progress Report covers:                        |                              | <u>to</u>                     |  |             |
| Current Level of Care:                               |                              |                               |  |             |
| Mental Health Outpatient                             |                              |                               |  |             |
| Walk-In, Pending Full Psychosocial Assessment & ASAM |                              |                               |  |             |
| Level 1.0 Outpatient                                 |                              |                               |  |             |
| Level 2.1 Outpatient                                 |                              |                               |  |             |
| Residential  |                              |                               |  |             |
| Does Not Meet Medical Necessity                      |                              |                               |  |             |
| Substance Use Disorder Jail Services                 |                              |                               |  |             |
| <u>Attendance Record:</u>                            |                              |                               |  |             |
| Groups Attended:                                     |                              |                               |  |             |
| Groups Excused:                                      |                              |                               |  |             |
| Groups FTS:  |                              |                               |  |             |
| Individual Sessions Attended:                        |                              |                               |  |             |
| Individual Sessions Excused:                         |                              |                               |  |             |
| Individual Sessions FTS:                             |                              |                               |  |             |



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Drug Testing Results:

Drug Testing Negative:

Drug Testing Unfavorable/Positive:

Drug Testing Dilute:

Drug Testing FTS:

Drug Testing Pending Lab Results:

**Testing Comments:** 

## Progress:

Participation is satisfactory

Participation is unsatisfactory due to:

Lack of adherence

Refusing Recommended Level of Care

Lack of attendance

Client was discharged from Behavioral Health Services on:



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- 1.0 Outpatient Treatment
  - \* Up to 9 hours of service per week of medically necessary services for adults.
  - \* Less than 6 hours of service per week for youth.
  - \* Includes recovery or motivational enhancement therapies.
- 2.1 Intensive Outpatient Treatment
  - \* Minimum of 9 hours per week and a maximum of 19 service hours per week of medically necessary services.
  - \* Minimum of 6 hours to a maximum of 19 service hours per week for youth.
  - \* Multidimensional instability is treated.

## Comments:

Counselor Signature/Date:

Supervisor Signature/Date: