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(CVCTF Draft form) Offender Name DOC

Date of Birth Rotta, Randy 80599

02.08.1957 Date of Admission Date of

Discharge Status 01.05.15 04.24.15

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Completed w/ Aflercare Therapist Name 1
Agent # Ms. WiTheim-Copas, CSAC 32006
COURSE OF TREATMENT: Mr. Rotta
was recommended for treatment by an A &
B assessment. After an initial

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Rotta, Randy 80599 02.08.1957 Date of
Admission Date of Discharge Status
01.05.15 04.24.15 Completed w/ Aflercare
Therapist Name 1 Agent # Ms. WiTheim-
Copas, CSAC 32006 COURSE OF
TREATMENT: Mr. Rotta was
recommended for treatment by an A ...

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Copas, CSAC 32006 COURSE OF
TREATMENT: Mr. Rotta was
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assessment. After an initial AODA
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create proper ideas to create enlarged future.
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substance abuse discharge summary name (offender): agency: date: 1. stage of change: 2. reasons for termination (check one):
successful discharge unsuccessful discharge

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interruption of treatment vendor comments explain (use additional pages if needed): 3. recommendations for community based aftercare:

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DISCHARGE SUMMARY Date of Exam:
7/4/2012 Time of Exam: 7:14:10 PM Patient
Name: Anna Smith Patient Number:
1000010544165 DATE ADMITTED:
3/12/2012 DATE DISCHARGED: 7/4/2012
This discharge summary consists of 1. The
Initial Assessment, 2. Course of Treatment,
3. Clinician's Narrative, and 4. Discharge
Status and Instructions

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AODA DISCHARGE SUMMARY
(CVCTF Draft form) Offender Name DOC # Date of Birth Rotta, Randy 80599 02.08.1957 Date of Admission Date of Discharge Status 01.05.15 04.24.15 Completed w/ Aflercare Therapist Name 1 Agent # Ms. Date of Discharge/Transfer _____ Patient Name _____ Chemical Dependency Professional (CDP) summary report of patient progress towards meeting short and long range treatment goals for each Dimension listed on the Individual Treatment Plan, based on the Chemical Dependency ...

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Rotta, Randy 80599 02.08.1957 Date of
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01.05.15 04.24.15 Completed w/ Aflercare
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Discharge Summary. Sample Substance Use Disorder Program Discharge Summary. Table. DISCHARGE SUMMARY. DISCHARGE SUMMARY -- CONT. DISCHARGE SUMMARY - CONT. Table. Treatment Parole Officer. RELAPSE PREVENTION PLAN. Prepare list of personal early warning signs. Develop new responses to those signs. ...

Each year, more than 33 million Americans

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receive health care for mental or substance-use conditions, or both. Together, mental and substance-use illnesses are the leading cause of death and disability for women, the highest for men ages 15-44, and the second highest for all men. Effective treatments exist, but services are frequently fragmented and, as with general health care, there are barriers that prevent many from receiving these treatments as designed or at all. The consequences of this are serious — for these individuals and their families; their employers and the workforce; for the nation's economy; as well as the education, welfare, and justice systems. Improving the Quality of Health Care for Mental and Substance-Use Conditions examines the distinctive characteristics of health care for mental and substance-use conditions, including payment, benefit coverage, and regulatory issues, as well as health care organization and delivery issues.

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This new volume in the Quality Chasm series puts forth an agenda for improving the quality of this care based on this analysis. Patients and their families, primary health care providers, specialty mental health and substance-use treatment providers, health care organizations, health plans, purchasers of group health care, and all involved in health care for mental and substance use conditions will benefit from this guide to achieving better care.

Clinical supervision (CS) is emerging as the crucible in which counselors acquire knowledge and skills for the substance abuse (SA) treatment profession, providing a

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bridge between the classroom and the clinic. Supervision is necessary in the SA treatment field to improve client care, develop the professionalism of clinical personnel, and maintain ethical standards. Contents of this report: (1) CS and Prof ȳ I. Develop. of the SA Counselor: Basic info. about CS in the SA treatment field; Presents the ȳ how to ȳ of CS.; (2) An Implementation Guide for Admin.; Will help admin. understand the benefits and rationale behind providing CS for their program ȳ s SA counselors. Provides tools for making the tasks assoc. with implementing a CS system easier. Illustrations.

Today, most substance abuse treatment is administered by community-based organizations. If providers could readily incorporate the most recent advances in

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Understanding the mechanisms of addiction and treatment, the treatment would be much more effective and efficient. The gap between research findings and everyday treatment practice represents an enormous missed opportunity at this exciting time in this field. Informed by real-life experiences in addiction treatment including workshops and site visits, *Bridging the Gap Between Practice and Research* examines why research remains remote from treatment and makes specific recommendations to community providers, federal and state agencies, and other decisionmakers. The book outlines concrete strategies for building and disseminating knowledge about addiction; for linking research, policy development, and everyday treatment implementation; and for helping drug treatment consumers become more informed advocates. In candid language, the committee discusses the policy barriers and

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the human attitudes--the stigma, suspicion, and skepticism--that often hinder progress in addiction treatment. The book identifies the obstacles to effective collaboration among the research, treatment, and policy sectors; evaluates models to address these barriers; and looks in detail at the issue from the perspective of the community-based provider and the researcher.

A substance use problem exists when one experiences any type of difficulty related to using alcohol, tobacco, or other drugs including illicit street drugs or prescribed drugs such as painkillers or tranquilizers. The difficulty can be in any area of life; medical or physical, psychological, family, interpersonal, social, academic, occupational, legal, financial, or spiritual. This expanded new edition of the successful Graywind Publications title provides the reader with practical information and skills

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to help them understand and change a drug or alcohol problem. Designed to be used in conjunction with therapy or counseling, it focuses on special issues involved in stopping substance use and in changing behaviors or aspects of one's lifestyle that keep the substance use problem active. The information presented is derived from a wealth of research studies, and discusses the most effective recovery strategies from the examination of cognitive-behavioral treatment. TreatmentsThatWork™ represents the gold standard of behavioral healthcare interventions! - All programs have been rigorously tested in clinical trials and are backed by years of research - A prestigious scientific advisory board, led by series Editor-In-Chief David H. Barlow, reviews and evaluates each intervention to ensure that it meets the highest standard of evidence so you can be confident that you are using the most effective treatment

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