Documenting Client Progress Using S. O. A. P. Method

Example of Acceptable S.O.A.P. Note

GRP GROUP SESSION_TOPIC: Recovery Skills 01/03/2013; 1330 hours; Duration: 40 minutes

- S: Client stated that "I wanted to talk to my kid about how guilty I feel about my drinking, but I don't know what to say." Group gave him some positive feedback and he practiced a role play of talking to his teenaged daughter about his drinking.
- O: Tearful at times; gazed down and moved anxiously but smiled and more animated when getting support from the group
- A: Client seems to have gained awareness in how drinking behavior has embarrassed and hurt his teenage children and appears to assume responsibility for his past behaviors. Client making progress on improving relationship with family (Goal 2, Objective 2) and using the group (non-using coping skill) for strong emotions rather than drinking (Goal 1; objective 3)
- P: Client to complete Goal 2, Objective 2 by talking to his daughter about his drinking in next family group session.

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Example Less Acceptable S.O.A.P. Note TYPE OF NOTE

GROUP SESSION_TOPIC: Recovery Skills

01/03/2013; 1330 hours; Duration: 40 minutes

- S: Client attended group but did not verbally participate.
- O: Client seemed alert and attentive
- A: Client still getting comfortable with the group process and talking about personal issues
- P: Continue treatment.

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OR-

GROUP SESSION TOPIC: Recovery Skills

01/03/2013; 1330 hours; Duration: 40 minutes

- S: Client attended group and talked about a county worker who is "Messing up with my pay. I went to get my G.A. check and all they did was make me wait and I never did get my check."
- O: Client angry and agitated
- A: Client vented for some time and was finally able to calm himself down. He resisted taking any feedback from the group, claiming they don't understand his situation.
- P: Continue to support client.

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General Checklist

- DOES THIS NOTE CONNECT TO THE CLIENT'S INDIVIDUALIZED TREATMENT PLAN by reflecting:
 - a. CLIENT'S PROGRESS and/or
 - b. (Change in/New Information Regarding) CLIENT'S STATUS which may affect treatment
- 2. Is this note dated, signed, and legible?
- 3. Is the theme or topic of the session included?
- 4. Is the client name and identifier included on each page?
- 5. Are the abbreviations used standardized and consistent?
- 6. Would someone not familiar with this case be able to read the case notes and understand what has occurred in treatment FOR THE CLIENT?
- 7. Has referral information (if given) been documented? Are any non-routine calls, missed sessions, or professional consultations regarding this case also documented?

Case Note Scenario

You are a case manager in an adult outpatient drug and alcohol treatment program working with adults many of whom have some sort of involvement with the criminal justice system.

Amy is your patient and has been in treatment for about 2 months. In the past three weeks she has missed two group sessions, one individual session and has been 15 minutes late to another individual session. Amy is on probation for possession of a controlled substance. Some of the problems on her treatment plan include:

- a) Difficulty maintaining abstinence and reporting requirements of probation (legal)
- b) Impaired ability to secure and maintain employment and independent housing
- c) Difficulty managing cues and triggers to compulsive and harmful use of alcohol and other drugs, especially strong emotions

You have asked her to attend this individual session to discuss her attendance

Case Manager: "I'm glad to see you made it today. I was worried because you've missed several sessions in the past three weeks."

A.: "I've just been really busy. You know, it is not easy doing all this stuff--staying clean, trying to find a job, and making all these appointments. Anyway, are you really worried about me or are you just trying to get info on me.

Case Manager: Information for?

A.: Well, how about for my mom and probation officer!

Case Manager: "You seem a little defensive and irritated. Are you upset with me, your Mom, your probation officer, or with all of us?"

A.: "I don't know...it just feels like everyone is on my case. I'm tired of having to report to everyone where I am going, what I am doing; why I am doing things, and why I'm not doing others.

Case Manager: "You've got a lot of pressure on you."

A.: "I am just tired of being watched. By everyone. That includes you."

Case Manager: "So I am included on this list of people who watch over you. How did I get on this list?"

A.: "You told my P.O. that I had missed treatment sessions."

Case Manager: "Well. .."

A.: "Without talking to me first!"

Case Manager: "And that makes you feel..."

A.: "I'm pissed off. I thought you were different. I thought I could trust you, but you're just like everyone else in my life."

Case Manager: "Just like everyone else, meaning?"

A.: "You go over my head, treating me like a child, not talking with me first. I hate it when people do that. Why did you have to even talk to my P.O.? Why couldn't you just have talked to me?

Case Manager: "It sounds like I hurt your feelings; that maybe I broke some kind of trust with you."

A.: "Yeah, it feels like that." (She stops talking and looks at the ground)

Case Manager: "Have you felt this way before; like a person you trusted let you down?"

A.: (slowly raises her head) Sure, all of the time.

Case Manager: "When did you feel like this, Amy?"

A.: What's the use of talking about who's been a jerk in my life! Like that'll change anything!

Case Manager: "I know talking out strong feelings is hard for you, but we need to do this. How are the feelings you have about trust related to your alcohol and drug use?"

A.: "I said I don't want to talk about it!"

Amy. grabs her backpack and walks out of the counseling room. The Case Manager attempts to get her to return, but she keeps walking.

WRITE A S.O.A.P. NOTE USING THE ABOVE SCENARIO