

Rainbow Treatment Center Service Ticket

Date of Service:	7-19-11	Start Time:	9 AM	End Time:	10 AM
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Last Name

First Name

Client Name:	Altaha	Debbie	Date of Birth:
Social Security:			Diagnosis:

Provider Signature: _____

Counselor : Donna M. Stevens, R.N., Psy.D.

Reviewed By Behavioral Health Professional- Bill Arnett, Psy. D. _____

Licensed Psychologist

Type of Service	Service Code		Type of Service	Service Code
Individual Behavioral Health Counseling & Therapy- Office	H0004		Group Behavioral Health Counseling & Therapy	H0004HQ
Individual Behavioral Health Counseling & Therapy- Home	H0004		Alcohol and/or Drug Assessment (Comprehensive/Brief Assessment)	H0001
Family Behavioral Health Counseling & Therapy- Office with client present	H0004HR		Behavioral Health Screening to Determine Eligibility for Admission (Intake Testing)	H0002
Family Behavioral Health Counseling & Therapy, Out of Office, without client present	H0004HS		Mental Health Assessment by Non-Physician (Clinical Staffing/Certification/Determination of Need)	H0031
Family Behavioral Health Counseling & Therapy- without client present	H0004HS		Skills Training & Development- Individual (1:1 session)	H2014
Family Behavioral Health Counseling and Therapy-Out of Office, with client present	H0004HR	X	Skills Training & Development Group (Voc Rehab Program)	H2014
			Behavioral Health Prevention Education Services	H0025

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Social Security:			Diagnosis:

Signature: _____
 Clinician: Donna M. Stevens, R.N., Psy.D.

Reviewed By Behavioral Health Professional: Bill Arnett, Psy.D. _____
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Treatment Notes

Current Mental Status/Presentation

x	Alert, Orientated 4 spheres, Normal Affect	Depressed, blunted affect
x	Dress/Attire appropriate for situation	Agitated/Restless
x	Hygiene adequate	Angry, belligerent, uncooperative/refuses to answer
x	Cooperative and Attentive	Current suicidal/homicidal ideation
x	Able to express thoughts and feelings well	Hygiene poor
		Intoxicated/High

Welcomed group this morning. Group members returned their completed budget and this will be looked over and returned to them next time. Discussed the problem of "gossip" in the workplace with clients and how damaging this can be to productivity, reputation, and collegial relationships. Processed with group how gossip must be stopped when the following occurs:

- It disrupts the work place
- If the gossip involves whispering , talking behind people's backs, criticizing and making fun of people who aren't in the room
- Hurts others feelings
- Damages interpersonal relationships
- Hurts employee motivation and moral.
- Turns the work place into a negative one
- Breaks any part of confidentiality.

Individual Note:

Client participated actively in group discussion and was able to give personal life experience examples to group. Defensiveness low. Willingness to engage high.

Plan:

- Continue exploring work place behaviors which are harmful to productivity and team work.
- Look at confidentiality and it's importance in the workplace.