

Client Name: RASPBERRY TEST

Welligent ID: 5161761

Birth Date: 08-Sep-1980


IBHIS ID (DMH Clients): _



Appointment Details

Date of Service: 04-Sep-2020
 Scheduled/Start Time: 04:04PM
 Appointment Duration or Face to Face: 14 (Minutes)
 Date Marked as Complete: 14-Sep-2020 09:12AM
 Non-Billable Time: (Minutes)
 Provider: Cardenas, Jennifer
 Other Time (Not Face-to-Face): 4 (Minutes)
 Travel Time: 0 (Minutes)
 Status: Completed
 Primary Action: Case Management
 Reporting Unit: County Mental Health
 Reporting Unit Address: 555 Main Street, Oakland, CA 94619
 Reporting Unit ID: SC
 Place of Service: Office
 Other Individuals Present: Family: Non-Family:
 Collateral Visit: No Specify:
 Service Strategy: 00-No Evidence Based Practice/Service Strategy
 Evidence Based Practice: 00-No evidence based practice
 Appointment Internal ID: 1377064537

Mental Health Notes

 Activities/Services	
Goals:	The purpose of this session was to provide linkage to the client in regard to their goal of effectively managing emotions.
Interventions:	This clinician contacted Bill Wilson Center and spoke with intake counselor (Susan) to obtain information about the appropriateness of their Healing Heart Program to meet client's needs. Clinician completed the referral process by summarizing client's anxiety symptoms and highlighting strengths, including supportive family members.
Response:	N/A
Progress:	N/A
Plan:	This clinician will continue to discuss this referral within the CFT and assist client in preparing to attend this support group.

Signatures

Electronic Signature/Credentials

Jennifer Cardenas, LCSW

September 14, 2020 09:12:39 am

Date of Signature

