

## IDDT Stage of Treatment Review

Client Name: \_\_\_\_\_ MPI: \_\_\_\_\_

Staff Completing Tx Plan: \_\_\_\_\_ Program: \_\_\_\_\_

1. Which "Stage of Treatment" is checked under the SATS Section of the current Treatment Plan?

- Pre-Engagement
- Engagement
- Early Persuasion
- Late Persuasion
- Early Active Treatment
- Late Active Treatment
- Relapse Prevention
- Recovery
  
- NONE CHECKED

2. Does the Stage of Treatment checked appear to be accurate based on information contained in the medical record?

- Yes
- No

3. Is the SA diagnosis addressed in the current treatment plan?

- Yes
- No

4. Is the intervention in the current treatment plan appropriate to the identified Stage of Treatment?

- Yes
- No

Reviewer: \_\_\_\_\_ Review Date: \_\_\_\_\_