Group Therapy Progress Note

Client: __________________________________________________ Date: ___________

Group name: ____________________________________________ Minutes: _______

Group session # ______ Meeting attended is #:______ for this client.

Number present in group ______ of ______ scheduled Start time:_________ End time: ________

Assessment of client

1. Participation level:  ❑ Active/eager  ❑ Variable ❑ Only responsive ❑ Minimal ❑ Withdrawn
2. Participation quality:  ❑ Expected ❑ Supportive ❑ Sharing ❑ Attentive ❑ Intrusive
   ❑ Monopolizing ❑ Resistant ❑ Other: _____________________________
3. Mood:  ❑ Normal ❑ Anxious ❑ Depressed ❑ Angry ❑ Euphoric ❑ Other: ______________
4. Affect:  ❑ Normal ❑ Intense ❑ Blunted ❑ Inappropriate ❑ Labile ❑ Other: _____________
5. Mental status:  ❑ Normal ❑ Lack awareness ❑ Memory problems ❑ Disoriented ❑ Confused
   ❑ Disorganized ❑ Vigilant ❑ Delusions ❑ Hallucinations ❑ Other: ______________________
6. Suicide/violence risk:  ❑ Almost none ❑ Ideation ❑ Threat ❑ Rehearsal ❑ Gesture ❑ Attempt
7. Change in stressors:  ❑ Less severe/fewer ❑ Different stressors ❑ More/more severe ❑ Chronic
8. Change in coping ability/skills:  ❑ No change ❑ Improved ❑ Less able ❑ Much less able
9. Change in symptoms:  ❑ Same ❑ Less severe ❑ Resolved ❑ More severe ❑ Much worse
10. Other observations/evaluations: ____________________________

In-session procedures:

❑ ____________________________________________________________________________

❑ ____________________________________________________________________________

❑ ____________________________________________________________________________

❑ ____________________________________________________________________________

❑ ____________________________________________________________________________

Homework:

1. ____________________________________________________________________________

2. ____________________________________________________________________________

3. ____________________________________________________________________________

Other Comments:

________________________________________________________________________________

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Signatures __________________________ Date __________________________