## Discharge Planning Worksheet

| What are your biggest accomplishments in treatment? |
|---|
|   |
|   |
| What triggers are you most aware of now?            |
|   |
| List your support system (names, groups, sponsors): |
|   |
|   |
| What coping skills will you use post-discharge?     |
|   |
|   |
| List 3 goals for the next 90 days:                  |
|   |
| What services or follow-up do you plan to use?      |