## Drug treatment and recovery CARE PLAN

Patient details (Use patient sticker)	Plan discussed with GP/Nurse

What is the current	<u>Aim</u>	<u>Objective</u>	When will
situation or problem?	How do you want it to be	What needs to happen and	we discuss
	when we review this?	who will help?	this again?

Signed (patient)	Signed (GP/Nurse)	Date