



Recovery Focus Plan

Recovery is a difficult journey. Success is part of the journey. So are mistakes. When residents begin to veer from the recovery path, this Recovery Focus Plan helps them get back on track.

What is a recovery focus plan?

1. how Stepworks Sober Living addresses non-compliance
2. the way we identify what may be causing non-compliance
3. how we help residents get back on track

Complete the Recovery Focus Plan by answering the questions below:

What behaviors do I need to improve?

1. _____

2. _____

3. _____

4. _____

5. _____

You have identified what needs to change. Good work. It isn't easy to admit when we are headed in the wrong direction. Now, what are you going to do about it?

What are “action steps”?

1. specific objectives you decide to complete
2. behaviors and goals to help you meet your greater goals: phase completion, graduation, and sobriety
3. objectives with a **due date**

What action steps will I take?

Due date

- | | |
|----------|--------------------|
| 1. _____ | ____ / ____ / ____ |
| 2. _____ | ____ / ____ / ____ |
| 3. _____ | ____ / ____ / ____ |
| 4. _____ | ____ / ____ / ____ |
| 5. _____ | ____ / ____ / ____ |

Pass restriction

After residents complete at least 60 days in the Stepworks Sober Living program, they are eligible for Overnight Passes and weekends away from the facility. Part of the Recovery Focus Plan is the **temporary removal of this benefit** until the resident demonstrates the ability to comply with the program and stay accountable offsite.

Pass restriction until this date ____ / ____ / ____

- I understand that I am subject to random drug screens.
- I understand that I am subject to random pill counts.
- I understand that if a drug screen or pill count is in noncompliance, I will be evicted from the program.
- I understand that if I fail to comply with this Recovery Focus Plan, I may be evicted from the program.
- I want to get back on track with my recovery and continued sobriety.

Resident Signature: _____ Date: ____ / ____ / ____

Sober Living Team Member Signature: _____ Date: ____ / ____ / ____

