



**MDT/Court Report Examples**

Client Name and PATH ID:	John Henry 123456
Date of Services:	List of all services and dates that actually took place. Example: SV1- 05/05/2025 Drug Screen- 05/04/2025, 05/07/2025
Dates services canceled and what services were canceled:	SV, SV1, SV2, IP, ALS, Drug Screens Why was it cancelled and who cancelled Example: Drug Screen-05/15/2025- Knocked on door several times, stayed for 15 mins, pictures are attached in the email. Drug Screen- 05/16/2024- Client did not answer the door, texted back that they were not going. Proof of texts have been attached. SV- 05/26/2025- Client cancelled due to sickness. SV- 05/29/2025- Provider cancelled due to flooding, rescheduled for 05/30/2025
Dates Failed Drug Screens:	(Dates) or (No Failed Drug Screens)
Issues that were addressed during the case and the dates:	Example: 05/01/2025- Client arrived at the visit with no food, bottle, diapers, etc for the children. 05/03/2025- Client arrived 15 minutes late due to not remembering the visit. 05/10/2025- Client refused to cooperate during the Individualized Parenting as they felt the class is not needed.
MDT Notes addressed:	Copy and Paste your MDT Notes
Deficits Unmet:	Client is still testing positive for fentanyl. Client is still homeless and has made no progress to change living arrangements. If no unmet deficits (NO UNMET DEFICITS)
Deficits Met:	Client had their water reconnected. Client was able to sign up for HUD. Client enrolled for their GED. If no deficit was met ( NO DEFICITS MET)
Recommendations:	This provider recommends the clients need family therapy, substance abuse recovery, family treatment court, continue services set by the department, increase visitation to 3x a week for 2 hrs, etc, etc.
MDT's Attended:	05/17/2024 Or NO MDT

Signature: **DIGITAL SIGNATURE**

Date: **Date of Report**