### OPTIONAL MODULE 7: GOALS

**PURPOSE OF MODULE**
To map out a client's goals.

**WHO CAN ADMINISTER THIS MODULE?**
This module can be completed by the client with the clinician assisting through prompts that may reflect any earlier discussion about problems, goals, and priorities.

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**INTRODUCTION FOR CLIENT**
"Now I’d like you to think about your goals and some of the priority areas you’d like to address."

**INSTRUCTIONS**
1. Invite client to think about their satisfaction with a range of areas in their life out of 10.
2. Invite the client to think about what would need to happen to improve that area of their life.
3. Ask client to rank priorities (or reflect on which are the most important/urgent) in discussion with you.
4. Give client a copy of their goals form to take home as a resource they can refer to as desired.

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<table>
<thead>
<tr>
<th>PROBLEM AREA</th>
<th>SATISFACTION OUT OF 10</th>
<th>WHAT WOULD HAVE TO CHANGE TO INCREASE MY SCORE OUT OF 10?</th>
<th>PRIORITY</th>
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</thead>
<tbody>
<tr>
<td>ALCOHOL AND/OR DRUG USE</td>
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<tr>
<td>HEALTH (PHYSICAL &amp; MENTAL)</td>
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<td>SOCIAL LIFE &amp; FRIENDS</td>
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<td>RELATIONSHIPS (PARTNER OR FAMILY)</td>
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<td>HOUSING</td>
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<td>JOB/EDUCATION</td>
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<td>MONEY &amp; FINANCES</td>
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<tr>
<td>EXERCISE</td>
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<tr>
<td>LEGAL ISSUES &amp; CRIME</td>
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**FOR STAFF ONLY**

Clinician name: 
Position: 
Signature: 
Date: 

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**FOR STAFF ONLY**

UR Number: 
Surname: 
Given name: 
Date of birth: 
(Please fill in if no label available)