Case Management Note Template

A practical documentation worksheet designed to help capture the essential elements of a complete case management contact note.

Documentation reminder: Use this template with your organization's documentation, payer, program, privacy, consent, and billing requirements. Do not include information that is not necessary for the record.

Contact Information

Client / Individual

_____

Service Coordinator

_____

Date of Contact

_____

Contact Type

_____

Start Time

_____

Stop Time / Total Minutes

_____

1. Who Was Present or Contacted?

☐ Client / individual ☐ Family / authorized representative ☐ External provider ☐ Benefits caseworker ☐ Other: _____

Name(s), role(s), and relevant consent/authorization status:

_____

_____

2. Need or Care-Plan Goal Addressed

Identify the assessed need, care-plan goal, or reason for contact (for example: housing, benefits, medical linkage, transportation).

_____

_____

_____

3. Action Taken

Document what you did. Examples: referred, scheduled, advocated, coordinated, transported, verified, or educated.

Caretech
We Bring the Care to You. Anytime. Anywhere.

_____

_____

_____

_____

4. Outcome

What happened as a result of the contact? Examples: appointment scheduled, application submitted, service confirmed, or barrier identified.

_____

_____

_____

_____

5. Follow-Up: Owner + Deadline

Next Step	Responsible Person	Due Date

Avoid vague follow-up language. Document who is responsible for the next action and when it should occur.

6. Signature and Credentials

Service Coordinator Signature

_____

Credentials / Title

_____

Date Signed

_____

Quick Documentation Check

- ☐ Contact type, date, and duration are documented.
- ☐ Everyone present or contacted is identified.
- ☐ The need or care-plan goal addressed is clear.
- ☐ The specific action taken is documented.
- ☐ The outcome of the contact is stated.
- ☐ The follow-up owner and deadline are identified.
- ☐ The note is signed and dated with appropriate credentials.