

The Defensible Note Checklist

12 checks your documentation should pass before you sign — built for auditors, supervisors, and boards.

BEFORE YOU WRITE

- ☐ **The time math is exact.**
Start and stop times are recorded and match the duration of the billed service — no rounding, no vague “~1 hour.”
- ☐ **The service matches the treatment plan.**
Today's session clearly connects to a goal or objective that exists in the client's current plan.

THE NOTE ITSELF

- ☐ **Behavior is observable, not just labeled.**
“Tearful, spoke rapidly, avoided eye contact” survives an audit; “client was anxious” alone does not.
- ☐ **The intervention is named and clinical.**
The technique appears by name — cognitive restructuring, 5-4-3-2-1 grounding — not “provided support.”
- ☐ **The client's response is documented.**
How the client engaged with the intervention: participated, practiced, resisted, reported relief.
- ☐ **Progress ties to a measurable goal.**
Movement toward (or away from) a stated objective is noted — lack of progress is documented too.
- ☐ **Medical necessity is visible on the page.**
Current symptoms or functional impairment make clear why treatment at this level continues.
- ☐ **The plan states the next step.**
Frequency, focus, and any homework for the next session — the note points forward, not just back.

BEFORE YOU SIGN

- ☐ **Risk is addressed — even when absent.**
If risk was assessed, say so; “client denied SI/HI” belongs in the note when that screening occurred.
- ☐ **No clones, no unexplained gaps.**
Copy-paste identical notes and missing sessions are the first patterns an auditor searches for.
- ☐ **The language is objective and professional.**
No judgments or speculation about character; quotes are brief, accurate, and clinically relevant.
- ☐ **You could defend every sentence out loud.**
The final test: if an auditor asked “what does this mean?” about any line, you'd have an answer.

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