

ATM

A clinician manual to
conduct money
management with your
clients

ATM

Developed by:

Marc I. Rosen, M.D.

Staff Psychiatrist

VA Connecticut Healthcare System

Associate Professor of Psychiatry

Yale University School of Medicine, New Haven, Connecticut

Robert Rosenheck, M.D.

Professor of Psychiatry and Public Health

Director of the Division of Mental Health Services and Treatment Outcomes

Research, Department of Psychiatry

Yale University School of Medicine, New Haven, Connecticut

Karen Ablondi, MPH

Research Associate

Yale University Money Management Research Studies

Yale University School of Medicine, New Haven, Connecticut

Acknowledgments

This manual was developed with the support of the National Institute on Drug Abuse (NIDA) Grant R01-DA12952, and the Department of Veterans Affairs VISN 1 Mental Illness Research Education and Clinical Care Center, VA Health Services Research & Development Grant (MHI20-100) and P50-DA09241.

Some of the concepts of ATM are based on those of the money management program at the Connecticut Mental Health Center and Margaret Bailey, L.C.S.W., who played a crucial role in its development.

The manual development team acknowledges Nancy Petry, Ph.D. who provided valuable consultation concerning treatment contracting. Ryan Black PhD., Richard Carson, L.C.S.W., Andrea Weinstein, MA, C.R.C and Kristin Serowik B.A. for their editorial suggestions and assistance in putting the manual together.

Table of Contents

Introduction.....	v
Why Money Management	v
Manual Chapters.....	v
Tips for using this manual.....	vi
Chapter 1 Overview of ATM	1
Conceptualization of ATM.....	1
Types of Money Management Assistance.....	2
Three T's of ATM.....	3
Teller Function.....	3
Training Function.....	3
Treatment Linked Spending.....	3
Counselor Stance and Practice.....	4
Scheduling.....	4
Target Population for ATM.....	5
Money Management Risks.....	6
Staff Risks.....	6
Client Risks.....	7
Practicing ATM Safely.....	9
Chapter 2 Engagement & Enrollment Phase.....	11
Objectives.....	11
Objective 1 - Develop Rapport.....	12
Objective 2 - Provide Overview of ATM.....	13
Objective 3 - Determine Level of motivation and readiness.....	15
Objective 4 - Complete ATM Intake forms.....	16
Objective 5 - Complete ATM Enrollment forms.....	17
Chapter 3 Conducting ATM Therapy.....	19
Outline of Phases.....	19
Starting ATM - Session 1.....	19
Maintenance Phase - Sessions 2-24.....	19
Ending Therapy Phase - Sessions 24-36.....	20

Starting ATM	22
Objectives	22
Objective 1 - Set Financial Goals	22
Objective 2 - Learn how to track expenses.....	23
Objective 3 - Develop a spending plan (aka Budget).....	24
Objective 4 - Develop weekly activities budget	25
Objective 5 - Plan how funds will be managed for the week	26
Maintenance Phase	28
Weekly Sessions	28
Objectives	28
Objective 1 - Conduct urine toxicology and breathalyzer tests.....	28
Objective 2 - Modify budget as needed	29
Objective 3 - Review last week's ATM Weekly Activities Budget	29
Objective 4 - Complete New Weekly Activities Budget	30
Objective 5 - Plan how funds will be managed for the week	30
End of Month Session.....	31
Objectives	31
Objective 1 - Conduct urine toxicology and breathalyzer tests.....	31
Objective 2 - Review and modify budget.....	31
Objective 3 - Develop next month's budget	31
Objective 4-5 - Activities Budget Review.....	32
Objective 6 - Plan how funds will be managed for the week	32
Ending Therapy Phase.....	33
Objectives	33
Objective 1-5.....	33
Concluding ATM Participation (The Last Session).....	35
Resources.....	36
Common Financial Terms & Definitions.....	37
Budgeting Tips	42
References	54
Form Appendices.....	57

Appendix A: Clinician Intake form	58
Appendix B: ATM Referral form	66
Appendix C: Non budgeted Request form.....	68
Appendix D: Client's Agreement to ATM form	69
Appendix E: Client Budget and Consent form.....	73
Appendix F: Direct Deposit for Federal Benefit Payments	74
Appendix G: Initial Information from Clinician form	75
Appendix H: Goals.....	77
Appendix I: Weekly Expense Worksheet	78
Appendix J: ATM Monthly Budget Worksheet	79
Appendix K: ATM Weekly Activities Budget Worksheet	80
Appendix L: Suggested Activities form.....	82
Appendix M: Notification of Ending Participation form	84
Appendix N: Certificate of Completion.....	85
Notes	86

Introduction

Why Money Management?

Many clients with mental illness or addictive disorders misuse their funds, leaving them without money for food, shelter, or clothing. A therapy that targets substance use and helps them manage their money better may help them use less drugs. Money management and substance use are linked in several ways. Money is spent to buy drugs, and choosing not to use drugs involves spending the money differently.

Manual Chapters

Chapter One: Overview of ATM

This chapter provides the rationale for Advisor-Teller Money Management therapy. This chapter will help clinicians understand the mechanisms by which ATM is thought to reduce substance use.

Chapter Two: Engagement & Enrollment

Successful enrollment requires building a treatment alliance with the client. This chapter offers strategies for enrolling and engaging clients in ATM.

Chapter Three: Conducting the ATM Therapy

This section describes ATM sessions after the client has been enrolled.

Tips for using this manual

This manual contains materials for structured ATM sessions. To learn to conduct ATM, it is helpful to review the training materials on our website, in addition to reading this manual. Information regarding the training session and additional Yale Money Management Training Materials are available on our website at <http://www.behaviorchange.yale.edu>. These additional materials include:

- \$ A Guide to a Pooled Account and Debit Card Procedures
- \$ ATM Workbook
- \$ Money Management Training Workshop
- \$ Budgeting Tips
- \$ Avoiding Money Traps

In conclusion, this ATM manual has been designed to teach therapists to conduct ATM. It is hoped that by offering this program, clients can learn better money management skills and reduce their substance use.



Overview of ATM

Conceptualization of ATM

Money is a well-recognized cue for drug use and several studies have suggested that there is more cocaine use around the beginning of the month, when benefit checks and paychecks are received, than at other times of the month (Shaner et al., 1995). Other studies suggest that disability payments may not alter the overall amount of substance use (Frisman & Rosenheck, 1997) although payments may alter the timing of substance abuse. In either case, breaking clients' link between their money and substance use is a promising approach to fostering abstinence.

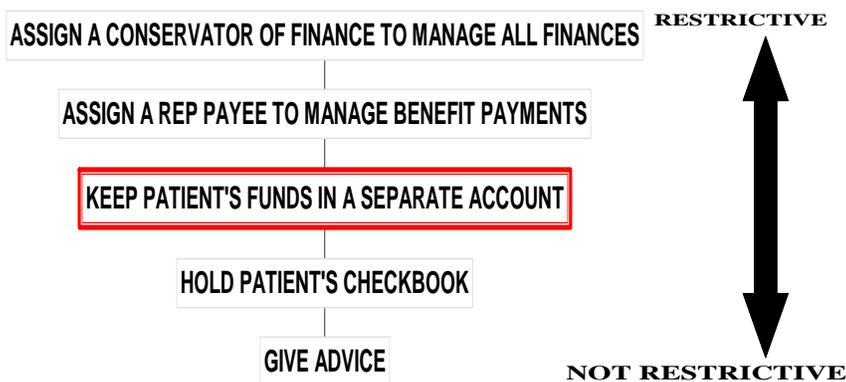
In Advisor Teller Money Management (ATM), a therapist attempts to break the linkage between the client's money and cued associations to drug use by storing a client's funds and training clients to budget their funds. When clients make budgets, they are taught to mentally associate their money with planned non-drug expenditures that in turn are linked to long-term goals. Economists have described how budgeting money for one goal makes it less likely that the money will be spent on extraneous items (Thaler and Shefrin, 1981), and this process of valuing money based on its source and budget plan is called "mental accounting."

Clients' desire for more money is a potentially powerful motivation to stop using cocaine. In Maslow's Hierarchy of Needs, the satisfaction of material needs takes precedence over others, so focusing clients on material needs helps them consider an important adverse consequence of drug use—namely, not having money for other things. People who are poor and disadvantaged indicate a desire for help with concrete financial concerns, a desire that is addressed by treatment in ATM.

Types of Money Management Assistance

Money management based interventions can be seen as occurring on a continuum from interventions such as advice which impose few restrictions on a client's ability to manage funds, to interventions such as assignment of a conservator which turns control over to a third party. The figure below describes the hierarchy of Money Management Assistance. ATM is described in this manual for clients who have not been assigned a payee or conservator, but the principles of ATM can be applied by representative payees or conservators.

Figure: 1
Hierarchy of Money Management Assistance



The Social Security Administration mandates the assignment of a representative payee when a beneficiary is not capable of managing the benefits. The representative payee receives the check in an account that the beneficiary cannot access directly and manages disbursements from the account. Because payee assignment restricts the beneficiaries' liberty to manage their financial affairs, it is typically initiated when less restrictive measures have failed or the person is severely disabled. Anyone can contact Social Security and suggest that a beneficiary is not able to manage his or her benefit check. The agency may then request an opinion from a physician concerning the person's ability to manage the funds. Payee assignment may be justified when clients spend significant amounts of their disability payments to purchase drugs or alcohol, are substantially harmed by these purchases, are not likely to improve with less restrictive interventions, and have a payee available who is likely to improve the situation (Rosen and Rosenheck, 1999; Black et al., In Press).

3 T's of ATM

ATM involves having a therapist assist in budgeting a client's income by having the client go to the therapist to access his/her funds. ATM has three functions: Teller Function, Training Function, and Treatment-Linked Spending. Each function is briefly described below.

Teller Function: The therapist helps the client manage money in the client's best interests. The client arranges for deposit of his/her income into a program account and also arranges for a personalized debit card that allows the therapist to monitor the client's account. The client makes and reviews a budget weekly with the therapist. The therapist strongly encourages the client to arrange for checks to be written directly to creditors for housing, utility bills, and as many other expenses as possible. The therapist loads the debit card as needed for other expenses, such as groceries, toiletries, and discretionary funds. The client can use the debit card to make cash disbursements at ATMs and to pay for purchases at retail locations that accept debit cards.

Training Function: The therapist helps the client learn to budget his/her own funds. The client will meet regularly with the therapist to plan a budget. They will collaboratively arrange for the dispensing of checks to pay for expenses and to determine weekly debit card disbursements. Disbursements are made to the client by reloading this debit card. Loading funds to the debit card involves planning and budgeting for how the money will be used so that it is not misspent.

Treatment-Linked Spending: The therapist and client develop Activity Budgets, in which disbursement of discretionary funds is linked to completion of particular activities. In ATM, the therapist works with the client to allocate discretionary funds in ways that reinforce constructive weekly activities and abstinence. However, the client does not have to follow the therapist's recommendations about how to manage funds if the client does not want to.

Counselor Stance and Practice

1. The ATM therapist views the "Client as Colleague" (Heinssen, Levendusky et al. 1995). ATM is a voluntary, client-centered therapy. The client is responsible for making spending decisions, not the therapist, and the client is responsible for the consequences of those decisions.

2. Workbook Focus: The therapist spends time educating the client concerning how to use and complete the financial worksheets and encourages the client to bring the workbook and bills to the sessions.

3. Substance Abuse focus: ATM limits client's access to funds in an attempt to limit substance use. The therapist encourages the client to become abstinent. The therapist encourages referrals to further treatment. The client's clinician is notified of toxicology and breathalyzer results in order to encourage collaboration.

List of prescribed and proscribed therapist behaviors:

Prescribed	Proscribed
Support client as colleague with direction	Authoritative stance
Help client to set financial goals	Therapist sets goals. Therapist conveys value judgments about client's goals.
Both client and therapist takes initiative to schedule ATM sessions	Therapist does not attempt to contact client who misses sessions
Plan specific abstinence-compatible activities with client	No activity budgeting
Direct deposit of client funds to limit spending on drugs	Therapist stores client cash

Scheduling

Enrolling in ATM may take several sessions. It is important for the therapist to schedule as many appointments as necessary for clients to have their questions answered. . It is important that clients, who are being asked to share personal financial information with a therapist, feel in control of the process and don't feel bamboozled or pressured into it. If a client is ambivalent after an initial discussion of ATM, offer further discussion until the client makes a decision.

After enrollment, weekly appointments should be scheduled and daily “drop-in” hours should be offered for unscheduled crises. The ATM Therapist should seek out clients who miss appointments by calling them and by asking their other clinicians to direct them back to ATM.

Target Population for ATM

1. A monthly income

Income can be disability payments (e.g. SSI/SSDI) and/or employment income. A client who has been assigned a representative payee or fiduciary can have this person conduct ATM. The client may also agree that the payee or fiduciary will allocate funds to a second therapist who then conducts ATM. For example, a client whose checks are mailed to a representative payee can have an arrangement in which the payee pays rent and a second therapist provides ATM.

2. Willingness to accept money management assistance

ATM is voluntary. It has been developed for clients who understand how ATM works and want to participate in ATM. Clients who are temporarily unable to participate, who choose not to participate, or who terminate participation may elect to resume participation at a later date.

3. Use drugs and/or alcohol

ATM is designed for clients who either spend or are at high risk to spend their money on drugs and/or alcohol.

4. Have had other difficulties managing funds

The therapy helps the client see how finances may be used for other expenses that are often missed or neglected when using drugs or alcohol. ATM involves the 3 T's of money management (Teller, Training, and Treatment-Linked Spending) to assist the client in reducing their drug and/or alcohol use.

5. No history of violence or aggression towards treating clinicians

When screening for potential clients to engage in ATM, examine their history for any violence towards a clinician or person helping them manage their money. Consider excluding those who are too psychotic to benefit from ATM or whose behavior poses a substantial risk to staff.

Clients interested in money management will be screened using the *ATM Intake Form* (Appendix A) to determine eligibility for study participation.

Money Management Risks

Staff Risks

Money management carries risk. Therapists need to be aware of the following risks of practicing ATM:

1. Clients may become very angry at the ATM clinician

Clients having their money managed may become angry if things do not go well and may feel that it is the therapist's fault. This could manifest itself as a verbal outburst towards the study therapist, or actual assault. The relationship between clients and clinicians who manage their money is complicated and can lead to misunderstandings of the clinicians' role, Brotman and Muller (1990) described clients who felt engulfed by the clinician-money manager, controlled by the clinician, suspicious, dependent and other strong emotions. Most of the literature concerning the risk of managing a client's funds is drawn from studies of involuntary payee arrangements.

Conflicts between ATM therapists and clients may escalate to verbal threats or violence, in part, because clients may feel pressured to continue to see the ATM therapist to access funds, despite being angry at the therapist. Retrospective analyses suggest that people with schizophrenia are four times as likely to be violent towards people they are financially dependent on (Estroff, Swanson et al. 1998) and an analysis of people with severe mental illness who received disability benefits found that those whose family member served as a representative payee had approximately double the risk of an episode of family violence (Elbogen, Swanson et al. 2005). Although clearly there are some episodes of violence that are related to conflict with a representative payee, the overall direction of the association between violence and payee assignment is unknown, and it is possible that rather than payeeship precipitating violence, the converse is true and beneficiaries with histories of violence or with factors associated with violence risk are more likely to be assigned payees. In fact, clients with more severe problems are more likely to be assigned representative payee (Ries and Comtois 1997; Appelbaum and Redlich 2006). It is also noteworthy that some of the

conflict between payees and clients is associated with payees' efforts to pressure clients, using control of the client funds as leverage (Angell, Martinez et al. 2007). Pressuring clients to perform activities they do not want to, is contraindicated in ATM.

Steps to mitigate the risks of conflict between the client and therapist are described under Protection from Risks.

Client Risks

1. Limited Access

ATM makes it harder for the client to get his/her money because the therapist holds the client's funds. The client will be encouraged to wait 48 hours ("48-hour hold") for discretionary non-budgeted funds to avoid impulsive spending. During the 48-hour hold period, the therapist counsels and encourages the client to stick to the planned budget.

2. Bad Advice

There is the risk that the client will get advice from the therapist that causes the client to get into financial trouble, either because the therapist makes a mistake or because the therapist does not have enough information. For example, it is possible that a cell phone plan will be more expensive than anticipated. It is also possible that a therapist may advise a client to pay a certain bill without anticipating a more pressing expense that arises after the first bill was paid. Clients, not therapists, decide how the money is spent and clients will be reminded frequently that they are responsible for making their own decisions. It is important for the client to communicate all financial transactions to the therapist.

3. Restrictions

In ATM, the client can always suspend the ATM teller function, although fiduciary arrangements may remain in place as required by law. Important restrictions around how clients manage their money are:

- Clients may be delayed in getting access to their funds because of the administrative procedures that require the therapist's involvement before

funds can be spent. Thus, for example, it will be difficult for clients to access funds on the weekends when therapists are unavailable.

- Clients cannot withdraw more money than they have.

4. Disclosure

If the client has a VA fiduciary, representative payee or conservator, the client needs to allow the ATM therapist to report to the VA fiduciary, representative payee or conservator about how the client is managing his/her money. A release of information form will need to be signed to allow the therapist and this person to exchange confidential information.

Part of money management involves talking to the client's other clinicians about involvement in ATM. The clinician will be informed about toxicology screenings and breathalyzer readings, in addition to how well the client is following the budget. Other clinicians may be consulted when the client requests non-budgeted funds. This is done so the client gets extra support during the 48-hour hold period.

5. Information from the ATM Therapist being told to other clinicians at the treating agency

The client's agency clinicians will know that the client is enrolled in ATM. The ATM Therapist works collaboratively with the agency clinician. The information exchanged is about the client's treatment, how the client is managing money and the client's substance use.

It is possible that by "shining a light" on the client's money management habits, the agency clinician will conclude that an involuntary payee must be assigned. In literature published by our group and others, high proportions of surveyed beneficiaries with representative payees indicate that clinicians or people other than the client initiated the payee assignment (Dixon, Turner et al. 1999; Rosen et al. 2005). Assignment of a payee occurs in ordinary clinical care but may be more likely when clients receive ATM than when they don't, so clients should be apprised of this possibility when they begin ATM.

Another exchange of information that the client may consider to be a risk is having the treating agency clinician told if the client reports using drugs or alcohol. This can have important implications for clients who may be facing loss of custody of a

child, or other situations that would be impacted if clinicians learn of substance use. Treating agency clinicians will be told if clients report substance use but will not be told the results of on-site urine toxicology tests because such tests are not conducted under sufficiently controlled laboratory conditions (CLIA certification).

6. Information being revealed when bills are paid

Making payments from the program account may reveal to the person or organization receiving the checks that the client has some connection to the ATM program. If a client's bills are paid from the ATM pooled account, the payments should say "Resource Allocation Program" on them.

Practicing ATM Safely

1. Don't escalate conflicts with clients over money

Should a client become agitated while discussing financial matters, it is important to give the client space and allow him/her to feel a sense of control over his/her funds. The therapist should not take an authoritative or expert role; instead validate the client's feelings of frustration and anger.

ATM Therapists should receive training in de-escalating agitated clients. This training involves role plays, review of problematic scenarios, recognition of escalating agitation and strategies to deal with these crises. ATM Therapists should be trained to de-escalate anxious clients by empathizing with their feeling agitated. ATM Therapists should be instructed not to confront a client who is agitated but instead to give the client space, time and options to calm down.

An important aspect of this training is teaching ATM Therapists to avoid meeting with clients in unsafe circumstances. It is imperative for the therapist to watch for behavioral cues that a client is agitated. If the client appears to be agitated, intoxicated or high, or potentially threatening, meet with him or her in a common area. Invite another person to sit in the session.

2. Keep Client Information Secure

Client financial records should be stored in a secure location. Financial data about client accounts will contain identifiers in that it contains signatures, addresses and creditors who are paid. QuickBooks data should be password protected in order to maintain client privacy and security.

Communication of clients' financial records and transactions between the Accountant and the ATM Therapists should be by secure fax and direct delivery of documents only.

3. Know your procedures for managing the client's money

An important protection against client frustration is the ATM therapist's history of being a competent and helpful manager of client funds.

Make sure you know how to:

- \$ find out the client's balance
- \$ track the client's purchases
- \$ obtain money for the client during an off-hours emergency
- \$ have someone available for off-hours emergencies

2

Engagement & Enrollment Phase

Objectives **ATM Therapist will:**

- 1) **Develop rapport**
- 2) **Provide overview of ATM**
- 3) **Determine level of motivation and readiness to begin ATM**
- 4) **Complete ATM Intake forms**
- 5) **Complete ATM Enrollment forms**

The circumstances surrounding the referral to ATM will impact the enrollment process. Clients may be referred by clinicians, peers, or may be self-referred. Clients referred by clinicians ideally have had the clinicians complete the *Clinician Referral Form* (Appendix B) and this form should be reviewed prior to meeting with the client. On this form, clinicians indicate why they are recommending the client enroll in ATM (e.g. persistent substance abuse, repeated evictions, persistent homelessness or difficulty organizing or paying bills), and suggest goals for the clients' money management. Clients who are referred by peers may have heard good things from peers who enrolled in ATM, and this should be discussed with the client.

While collecting the intake information, the key to understanding the client is communication. It is important for the ATM therapist to use sound clinical interviewing skills to develop and maintain the client connection and avoid rapport destruction. This is accomplished by weaving between directive and non-directive interviewing approaches.

Furthermore, observe the client's behavior: appearance, manner, orientation, thought processes, mood and affect. A thorough intake will allow the ATM therapist to get a clear picture or "snapshot" of the client. This snapshot will begin to establish an understanding of the client and identify specific areas to keep in mind while providing ATM.

Objective 1 - Develop rapport

Building Rapport:

1. Exchange Greetings
2. Inquire about how the client heard about the program. If another clinician referred the client, mention this to the client to find out what the client's feelings are about this.
3. Begin to assess client's mental status for ATM participation.
4. Inquire about how the client feels about meeting with you.
5. Make a connection between the client's goals and how ATM works, e.g. "You want to stop using drugs and ATM is designed to help you do that."

Examples of Rapport-Building Prompts:

ATM Therapist: It's a pleasure meeting you.

ATM Therapist: I was wondering if you could tell me how you heard about our program.

ATM Therapist: What are your immediate reasons for coming in today?

ATM Therapist: Are you talking with anyone else about your finances?

ATM Therapist: This program may be able to help you address your concerns about _____.

Note to ATM Therapist: Practice good listening skills: Be interested and attentive, Maintain eye contact, and Listen to nonverbal messages.

Objective 2 - Provide overview of ATM

The ATM therapist provides a description of the ATM program to the client: including the 3 T's of ATM and money management risks (see chapter 1).

Suggested Opening Statement:

***ATM Therapist:** ATM is a money management program that will provide education and training on how to better manage your money and reduce your substance use. I believe this program would be helpful for you because you have a tough financial situation and use Name of Substance(s).*

***ATM Therapist:** I'd like to tell you more about it.*

Suggested Description of ATM and the 3 T's of ATM

ATM involves meeting with your ATM therapist once a week over a 9-month period for money management training. In providing ATM, I am going to do three things for you. We call them the 3T's of ATM: Teller, Training, and Treatment-Linked Spending (See Table 1).

***ATM Therapist:** Let's spend a few minutes going over them.*

In the **T**eller function, your SSDI/SSI check gets directly deposited into a bank account. The account will not be in your name but the money will still be yours. I will store your money in the account, pay certain bills such as your rent and utilities, and reload your debit card with cash disbursements. In doing so, this will limit your access to cash. If you request non-budgeted funds, you will be asked to complete the *Non Budgeted Request Form* (Appendix C) and wait 48 hours to collect the money. During the 48 hours, I'll ask you to consider whether it's really a good idea to use the extra money.

In the **T**rainning function, I will teach you how to develop a budget and together, we will look for ways to reduce certain expenditures such as the money you spend on drugs and alcohol, high cell phone bills, and impulsive spending.

In the **T**reatment-Linked Spending function, I will encourage you to set aside a certain amount of money each week for budgeting activities. At each meeting I will work with you to develop weekly constructive activities and abstinence-linked goals. Each week we will discuss the previous week's activities. If the activities were completed or accomplished, you will receive the money set aside. If not, you will be encouraged to save the money and negotiate new activities for the next week.

ATM involves trying to decrease the amount of cash you have available for drug use by (1) directing you to contact the ATM therapist when you want to access your money and (2) advising you to spend money on things other than drugs.

Note to ATM Therapist: The client does not have to adhere to the conditions of the activity, and can ask for his/her money out of the account whether or not the activity has been completed.

Function	Goals of the Function
T eller	<ol style="list-style-type: none"> 1. Store money 2. Limit direct access to cash 3. Pay certain bills 4. Reload debit card
T raining	<ol style="list-style-type: none"> 1. Teach money management skills <ul style="list-style-type: none"> \$ Financial goals \$ Planning budgets \$ Tracking expenses 2. Learn how to avoid money traps
T reatment-Linked Spending	<ol style="list-style-type: none"> 1. Contract for abstinence-linked activities 2. Reinforce completion of abstinence-linked activities

Table 1: 3 T's of ATM

Suggested Risks and Benefits Statement:

ATM Therapist: *Before you decide to participate, there are some potential risks and benefits I'd like to tell you about. These include:*

- \$ *discussing personal finances as it may be a sensitive issue*
- \$ *difficulty accessing money*
- \$ *failure to provide full financial disclosure resulting in inaccurate advice*

- \$ discussing toxicology results with your clinician
- \$ revealing your connection with the ATM program (e.g. bill payments mailed on your behalf indicate the agency's name)

The potential benefits include that you will receive education and training on how to manage your money and how to reduce substance use.

Suggested Voluntary Participation and Withdrawal Statement:

ATM Therapist: *You are free to decide whether or not to participate in the ATM program. You do not have to follow the ATM therapist's recommendations about how to manage your money if you do not want to. You are also free to withdraw from the program at any time, although there will be a delay of two working days until your money can be refunded.*

Note to ATM therapist: At this point provide sufficient time for any questions or concerns the client may have about the ATM program.

Objective 3 - Determine level of motivation and readiness to begin ATM

Based upon the client's responses to the overview, the ATM therapist will be able to assess the client's motivation and readiness to participate in the ATM program. If the client is ambivalent about participating, the ATM therapist may address the client's readiness by asking some questions. This discussion with the client may clarify his/her concerns and better prepare him/her to enroll in the ATM program.

Suggested Questions:

ATM Therapist: *What do you think you will do about your financial situation?*

ATM Therapist: *What are your other options beside the ATM program?*

ATM Therapist: What would be some of the good things about participating in the ATM program?

Note to ATM Therapist: If the client declines participation, propose future contact at a more appropriate time.

Objective 4 - Complete ATM Intake forms

The ATM therapist introduces the ATM Intake forms.

ATM Therapist: So, if you are interested, we are going to continue with the intake forms. I'm going to be asking you questions about your finances, drug use and goals for ATM participation.

ATM Therapist: This part is going to take about an hour to complete.

1. The ATM Therapist and client complete the *ATM Intake form* to learn about the client's current money management practices, needs and goals. In addition, the intake will capture critical information pertaining to the client's mental status. These behavioral observations will allow the ATM therapist to tailor ATM in a way that will be more beneficial for the client.

Examples of mental status observations:

- √ A client's psychotic experiences may require the ATM Therapist to not store client funds in the program account to avoid making the client too paranoid.
- √ Clients who present as grandiose may require further rapport-building to identify things the client wants help with. The therapist should maintain the *client as colleague* model.
- √ Clients who are particularly impulsive may require extra reinforcement of the client's adherence to the budget and contracted activities so that it is easier to resist impulsive wishes when they come.

- √ For the client who is cognitively impaired, the ATM Therapist may need to adjust the amount of information delivered to the client. Repetition of materials and more frequent meetings may be necessary.
 - √ A client who with severe and persistent substance use may require coordination with more intensive substance abuse counseling such as residential treatment, detoxification, and hospitalization.
2. Complete a release of information form for open communication with treating providers, Social Security and involved family members or friends. Inform the client that ATM involves a collaboration with the client's primary clinician. The collaboration is designed to better help the client meet his/her ATM goals.

Objective 5 - Complete ATM Enrollment forms

In this exercise the client agrees to have the ATM therapist serve as "Teller" for the client's funds by signing the following forms:

1. *Client's Agreement to ATM form* (Appendix D) this agreement details the Risks, Rights, and Responsibilities of participating in ATM
2. *Client Budget and Consent form* (Appendix E) an analysis of the client's sources of income and expenses, which allows the Money Management program to deposit, budget, and disburse subject monies as outlined on the form.
3. *Direct Deposit for Federal Benefit Payments Form* (Appendix F) complete and forward copy to the Accountant to fax to the Social Security Administration.

Provide wrap-up and closure for the session. Highlight the following:

***ATM Therapist:** In the weeks ahead, we'll be exploring your financial goals, issues related to learning new skills and developing a more effective money management style.*

ATM therapist: Thank the client for coming and for their participation. Invite the client to return to the next session. Make an appointment and give the client a reminder card.

After the session contact the primary clinician:

After the initial meeting with the client, the ATM therapist contacts the primary clinician and solicits the clinician's input concerning the client's past money management difficulties and the clinician's goals for the client by completing the *Initial Information from Clinician form* (Appendix G).

3

Conducting ATM Therapy

This section of the manual, *Conducting ATM Therapy*, is divided into three sections. The outline of phases is:

Starting ATM (Session 1)

- ◆ Help the client set financial goals
- ◆ Teach the client how to track expenses
- ◆ Teach the client how to develop a spending plan
- ◆ Develop ATM weekly activities

Maintenance Phase (Session 2-24)

Weekly Sessions

- ◆ Conduct urine toxicology and breathalyzer
- ◆ Discuss results with client
- ◆ Review last week's Activity Budget Worksheet
- ◆ Complete new Activity Budget Worksheet
- ◆ Review and modify monthly budget
- ◆ Plan how discretionary funds will be managed for the week

End of Month Sessions

- ◆ Conduct urine toxicology and breathalyzer
- ◆ Discuss results with client
- ◆ Review and calculate monthly budget
- ◆ Develop next month's Budget
- ◆ Review last week's Activity Budget Worksheet
- ◆ Complete new Activity Budget Worksheet
- ◆ Plan how discretionary funds will be managed for the week

Ending Therapy Phase (sessions 24-36)

Training into Practice

- ◆ Continue Maintenance Phase activities
- ◆ Advanced skill building
- ◆ Determine and discuss recommended level of money management assistance post-ATM with both client and clinician

Ending ATM Participation

- ◆ Wrap up
- ◆ Complete a Notification of Ending Participation Form.

During each session, the ATM therapist will conduct urine toxicology and breathalyzer testing. This is especially important at unscheduled visits when clients may request non-budgeted funds. The results are discussed. Clients who report abstinence which is confirmed by the toxicology and breathalyzer results should be supported for their achievement. Clients who have tested positive should be engaged in a discussion of the circumstances around the substance use. The ATM therapist will explore any connections between the substance use and money management, including how the money to pay for the substances was obtained, how much was spent, and whether other expenditures were postponed.

The therapist may reschedule the session if the client's blood alcohol content (BAC) is extremely high, and may have to obtain a medical evaluation before allowing the person to leave. Make arrangements based on specific policies and procedures at your agency. Explain to the client why these steps are being taken.

It is important to establish clear expectations for the client concerning the content of ATM, the ATM therapist's duties, and the client's responsibilities. The following areas should be reviewed and discussed.

- ◆ Scheduling of sessions and length of program
- ◆ Importance of regular attendance
- ◆ Informing the ATM therapist if the client plans to miss the session or be late
- ◆ Collection of urine specimen and breathalyzer reading at each session

Money management sessions typically last about 30 to 45 minutes, although they can be longer, depending on the circumstances. ATM therapists have latitude to see clients as frequently as necessary during the first month of ATM, but after

that, clients should be scheduled for weekly appointments. Clients should be informed of daily "drop-in" hours during which they can come for unscheduled appointments. Clients should not be discouraged from using these "drop-in" hours, as therapist availability is important to clients who are voluntarily restricting access to their funds.

ATM therapists should be willing, on certain occasions, to see clients in the community. Make arrangements based on specific policies and procedures at your agency. There are obvious risks to bringing money to a community visit, or becoming known as someone who is carrying large amounts of cash. There are very few financial situations that justify a clinician putting him or herself at risk of harm.

Throughout the course of therapy, the ATM therapist should address the following issues by offering financial skill-building techniques:

- Funds paid directly to creditors and what, if any, debt remains
- Total client discretionary funds used/available
- Special appeals for discretionary funds
- Forty-eight hour holds proposed by the therapist including changes in spending plans clients make as a result of having to wait forty-eight hours to access their funds

Starting ATM

Objectives

The ATM Therapist will:

- 1) Help the client set financial goals
- 2) Teach the client how to track expenses
- 3) Teach the client how to develop a spending plan
- 4) Introduce ATM Weekly Activities
- 5) Plan how funds will be managed for the week

Objective 1 - The ATM therapist works with the client to set financial goals

Prior to this exercise the ATM therapist should review the *Initial Information from the Clinician form* and *ATM Intake form* for goals the client may have previously identified. The client is asked to set goals for participation in ATM and the ATM therapist helps translate the client's goals into three financial goals. Writing down specific goals (See Appendix H) often requires the client to think about whether he/she really needs or wants a particular goal. It also helps the client to decide whether spending the time or money necessary to achieve the goal is worthwhile.

Note to therapist: This exercise centers on the ATM therapist and client collaboratively exploring the client's hopes and dreams, and encouraging the client to set attainable short and long term goals. Keep the goals realistic. Goals that are 1) vague, 2) rigid or 3) very difficult will frustrate the client and motivation will be lost.

Examples of Translating Goals into Financial Goals:

1. A client wants to improve the relationship with his children. This goal can be translated into three broad financial goals: (1) include child support in his budget, (2) spend less money on drugs and (3) budget funds for outings and gifts for the children. Note that in this example, the therapist is not making a value judgment about the quality of the relationship with the children, but is supporting the client's goal to the extent it is reasonable and facilitates abstinence.
2. A client wants to obtain his or her own apartment. In order to reach this goal, the ATM therapist and client translate this goal into three financial goals: (1) saving \$50.00 a month toward the security deposit, (2) securing part-time employment, and (3) improving credit by paying current bills on time.
3. A client wants to obtain and maintain a cell phone. Again, this goal is translated into a three financial goals, including (1) saving, (2) researching affordable cell phone plans, and (3) avoiding excessive charges.
4. A client wants to repair credit. The financial goals include (1) contacting creditors to establish a mutually agreed-upon payment plan, (2) improving credit by paying current bills on time, and (3) avoiding establishing new debt.

Objective 2 - Learn how to track expenses

The ATM therapist encourages the client to record all his or her expenses on the *Weekly Expense Sheet* (Appendix I). This exercise allows the client to get an accurate picture of how his or her money is spent. The ATM therapist and client review the expense sheets weekly to gain insight into spending habits and patterns. This exercise sheds light on excessive, impulsive or harmful spending.

Note to Therapist: Remind the client that every time we spend money, we make choices - "yes" to one item means "no" to another. Money Management is really a series of decisions.

Using the most recent Weekly Expense Sheet completed by the client, the therapist helps the client identify three types of expenses:

1. **Fixed monthly expenses** or items that are the same or stay at nearly the same amount from month to month. Examples of these types of expenses are rent, utilities, telephone and cable TV.
2. **Additional monthly expenses** or items that occur during the month but the overall cost may vary due to the level of consumption or use. Examples of these types of expenses are groceries, transportation costs, laundry, cigarettes, clothing, health care, alcohol and drugs.
3. **Debts.** Examples of these types of expenses are credit card bills, loans from friends or family and past utility or telephone bills.

It is common in conducting this review to identify expenses that clients want help with. For example, several clients receiving ATM have been confused by their cell phone bills, and have been unable to consider other alternatives. Clients have been grateful when their cell phone plans were explained to them. In several instances, clients were helped to negotiate better plans and contest bills that appeared to be unfair. Another issue that arises concerns intra-family transactions. Making a budget can make it apparent that a client is unable to meet pressing needs because the client is supporting a family member.

For example, one of our client spent much of her SSDI check for a large apartment that her adult daughter lived in without paying rent. After consideration of her overall financial situation, the client decided to charge her daughter rent.

Objective 3 - Develop a spending plan (aka "Budget")

The therapist encourages the client to examine his or her current financial situation and develop a spending plan. At the beginning of each month, the therapist sits down with the client and records how much income he or she expects to receive as well as all anticipated expenses (using the most recent Expense Sheet). Using the *ATM Monthly Budget Worksheet* (Appendix J), the client is asked about all sources of income including illegal sources of income. The ATM therapist and client record all expected income and expenses for the next month

under column A (Expected Amounts.) This can be an estimate if the client is unsure how much he or she will earn or receive. Ideally, the income should be more than the expenses. If it is the other way around, in the coming weeks the ATM therapist and client will need to adjust the budget (column B, Actual Amount) and discuss alternatives to limit spending.

ATM Therapist: Could you tell me your sources of income? And how much you receive from each source? Are there any other sources of income including illegal sources, working under the table, collecting cans, gifts from family, etc.?

ATM Therapist: Let's talk about your expenses. What do you pay the same amount for every month? What are your expenses that change from month to month (e.g. cell phone, food, utilities)? Have you had any unexpected expenses recently?

For many clients, budgeting is a new experience. Before enrolling in ATM, many clients do not have a budget. They simply check if there is enough money on hand to buy what they want and if there is, they buy it. The process of making a budget concretizes the trade-offs in making one purchase and forestalling another. It shows that money spent for drugs is not available for other purchases. Much of the training around budgeting consists of helping the client appreciate how his/her income is being spent and developing an abstinence-promoting spending plan.

Refer back to the *Client Budget and Consent Form* (completed during the enrollment phase) to determine which expenses the ATM therapist will pay. The remaining account balance will be deposited over the course of the month on the debit card to enable the client to pay for additional expenses.

Note to Therapist: Help clients apply for rent subsidies and/or food stamps if they are eligible.

Objective 4- Develop weekly Budgeting Activities

Activity budgets involve an agreement to manage money a particular way based on whether the client engages in pre-determined treatment-related, abstinence-

promoting activities. The client is rewarded for completing a task with the client's own money. However, the client may instead choose to save money for a specific goal if the client completes the planned activity (e.g. put extra money into the "dinner with friend" account).

The client has wide latitude to pick activities, and the therapist should follow the client's suggestions when possible. Over time, the therapist may more directly introduce abstinence-related goals. Ideally, the activities should be steps towards achieving the goals the client identified in the goal setting activity.

***ATM Therapist:** Many people in recovery report that part of staying clean involves trying new activities or doing things you enjoyed prior to using drugs and alcohol. Let's take a few minutes and explore activities that may help you to stop using drugs and alcohol."*

The ***ATM Weekly Activities Worksheet form*** (Appendix K), provides eleven categories from which to select. After selecting the broad category a specific activity related to the category is agreed upon by the ATM therapist and client. If the client is unable to come up with activity ideas, this manual includes a list of suggestions in the ***Suggested Activities form*** (Appendix L). On the worksheet, the therapist documents goals for the week, the time and day by which the goals will be accomplished, potential problems achieving the goals and the amount of discretionary funds (reward) the client will receive for achieving the goal. During the next session, the worksheet is revisited and evidence of completion is documented. The client is then financially rewarded for all completed activities. If the client lacks discretionary funds to build activities around, no or low cost activities will be explored (e.g. walk in the park, attendance at a meeting).

The initial contract item should be to perform a leisure activity that the client enjoys. This item should preferably be free. After the client has become engaged in money management, one of the activity goals will be having a negative drug toxicology result and/or a zero breathalyzer reading.

Note to Therapist: Abstinence promoting is broadly-defined to mean activities that promote well being, and make it less likely for the client to use drugs. For example, going for a walk with a non-drug using friend is abstinence-promoting in that it is an alternative to using drugs.

Because participation depends on making activities interesting and rewarding for the client, every effort should be made to reinforce readily achievable activities. The therapist should select easier tasks if the client fails to receive reinforcement. For instance, a client who identifies a goal of making abstinent friends might be rewarded for going to a meal with those friends (and bringing the receipt). Failing that, the client might be reinforced for making a list of places to go meet abstinent people.

Explain to the client that completed activities will result in disbursement of the agreed-upon amount. If the activity is not completed, the therapist will ask about possible reasons for not completing the activity (e.g. unable to attend a doctor's appointment due to funds for transportation, did not take the walk with non-using drug friend due to feeling depressed, not attending an NA meeting as a result of relapse). Attempt to negotiate more easily- achieved activities.

Note to Therapist: If the client insists on receiving funds in violation of his/her contract, encourage him/her to take a lesser amount.

Objective 5 - Plan how funds will be managed for the week

The ATM therapist and client should determine how much money will be loaded to the debit card (i.e. disbursed to the client). In determining the amounts consider the following:

- Expenses that must be paid in cash by the client
- Funds for weekly grocery and household purchases
- Funds allocated to complete budgeted activities
- Financial rewards for completing budgeting activities

Maintenance Phase (sessions 2-24)

Weekly Sessions

Objectives: ATM Therapist will:

1. Conduct urine toxicology and breathalyzer. Discuss results with client
2. Review and modify budget
3. Review last week's Activity budget Worksheet.
4. Complete new Activity Budget Worksheet.
5. Plan how discretionary funds will be managed for the week.

Objective 1 - Conduct urine toxicology and breathalyzer tests. Discuss results with client

If the client used substances, as evidenced by positive toxicology results, breathalyzer and/or self report, consider the following steps:

- Validate the challenges of staying clean (e.g. acknowledge that becoming abstinent is difficult)
- Explore events that led to relapse or continued use (e.g. conflict with significant other → angry feelings → desire to escape → relapse → non-payment of rent)
- Discuss alternatives to relapse-related behaviors (e.g. attend treatment and/or AA and NA, seek support from family and friends)
- Discuss how funds budgeted for other purposes were spent for drugs.
- Offer money management interventions to prevent diversion of funds for substances—(e.g. more direct payments to creditors, smaller direct payments to the client)
- Consider an "all treaters" meeting to discuss continued substance use.

If the client was able to stay clean during the preceding week, the therapist will take the following steps:

- Praise the client for continued abstinence
- Explore response to events, that led to continued abstinence (e.g. conflict with significant other → feeling of anger → desire to escape → attend NA meeting → resolve conflict with significant other and pay rent)
- Encourage the client to continue to utilize these behaviors
- Note the financial benefits of abstinence

Objective 2 - Modify budget as needed

During the course of the prior month, the therapist encourages the client to keep track of his or her expenses by recording daily or weekly expenses on the *Weekly Expense Worksheet*. The therapist and the client then meet to review these new expense worksheets to determine how accurately the budget had been planned. The therapist's role is to check that the client is completing the budgeting pages accurately.

Note to Therapist: Discuss with the client that sticking to a budget is similar to sticking to a diet. It takes hard work and discipline. Encourage clients to discuss their feelings about budgeting.

Objective 3 - Review last week's ATM Weekly Activities Budget Worksheet.

The ATM therapist and client review last week's Activity Budget and discuss whether or not the contracted activities were completed.

For Successful Completion:

ATM Therapist: Congratulations! This is a wonderful accomplishment.

For Incomplete Activity:

ATM Therapist: You seemed to be really interested in completing the activity last time we met. Let's discuss what challenges you faced after we met.

Objective 4 - Complete new Weekly Activities Budget Worksheet.

Based upon experiences from last week's session a new Weekly Activities Worksheet will be completed. This will involve selecting easier tasks if the client failed to complete the activity and more difficult tasks if the client succeeded. After the client has mastered a few activities, the ATM therapist should introduce abstinence as one of the new activities.

Note to Therapist: Remember we are trying to build upon successes, Incorporate more challenging activities while keeping some of the easier ones. This should maintain the client's motivation.

Objective 5 - Plan how funds will be managed for the week

The ATM therapist and client should determine the amount of funds that will be loaded to the debit card. In determining the amounts consider the following:

- Expenses that must be paid in cash by the client
- Funds for weekly grocery and household purchases
- Funds allocated to complete budgeted activities
- Financial rewards for completing budgeting activities

End of Month Session

Objectives: ATM Therapist will:

1. Conduct urine toxicology and breathalyzer. Discuss results with client
2. Review and modify budget
3. Develop next month's Budget
4. Review last week's Activity Budget Worksheet.
5. Complete new Activity Budget Worksheet.
6. Plan how discretionary funds will be managed for the week.

Objective 1 - Conduct urine toxicology and breathalyzer. Discuss results with client

As in other sessions, the therapist may reschedule the session if the client's blood alcohol content (BAC) is extremely high, and may have to obtain a medical evaluation before allowing the person to leave. Make arrangements based on specific policies and procedures at your agency. Explain to the client why these steps are being taken.

Objective 2 - Review and modify budget

The client and ATM therapist compares the income and expenses that were anticipated for the month with what actually was spent during the month. The budget review may highlight information that was omitted from the prior budget. Smaller, hard-to-notice purchases are often forgotten and not recorded. This is an ideal time to capture those expenses.

ATM Therapist: Based upon what we learned from the last month's spending plan let's try to develop a budget that better fits you.

Objective 3 - Develop next Month's Budget

At the end of each month the therapist and client record all actual income and expenses on the *Budget Worksheet*. This involves the following steps:

- List all actual expenses and record how they were paid (check written directly to creditor or client paid using discretionary funds).
- List actual budget income to see if it covered expenses and how, or if not, why. Upon completion and review of the monthly budget, the therapist and client prepare next month's budget by completing expected amounts of income and expenses on new *Monthly Budget Worksheet*. The goal is to base next month's plan on the successes and lessons learned from the previous month.

Objectives 4 & 5 - Activities Budget Review

As part of this objective the ATM therapist and client review last week's contracted activities and discuss whether or not the activities were completed.

Based upon experiences from last week's session a new *Weekly Activities Worksheet* will be completed.

Review progress towards treatment goals (activities accomplished, chemical tests completed). This summary review may provide constructive feedback, not only for the client, but the therapist as well.

Objective 6 - Plan how funds will be managed for the week

The ATM therapist and client should determine based upon the completed budget the amount of funds that will be loaded to the debit card. In determining the amounts consider the following:

- Expenses that must be paid in cash by the client
- Funds for weekly grocery and household purchases
- Funds allocated to complete budgeted activities
- Financial rewards for completing budgeting activities

Note to therapist: For clients who have not achieved consistent abstinence, consider whether the client needs more intensive treatment: detoxification, residential treatment, day hospital treatment or inpatient.

Ending Therapy Phase (sessions 24-36)

During this phase, the ATM Therapist will prepare the client for graduation from the program. This will involve continued weekly reinforcement of abstinence-related activities, development of budgeting skills, and planning for the future.

During this phase of treatment, the ATM therapist will remind the client of the progress that has been made. The ATM therapist will also explore potential referrals to other people who might help the client manage funds such as a representative payee or a case manager.

Objectives: ATM Therapist will:

1. Conduct urine toxicology and breathalyzer. Discuss results with client
2. Review and modify budget
3. Review last week's Activity budget Worksheet.
4. Complete a new Activity Budget Worksheet.
5. Plan how discretionary funds will be managed for the week.

Objectives 1 - 5

Complete objective 1 -5 in the same format as indicated in previous phases.

In this phase clients should have achieved abstinence or a substantial reduction in substance and/or alcohol use and have developed improved money management skills. In the event that the client has not progressed as expected in the ATM program, explore with the client and primary clinician the obstacles and barriers preventing progress.

Successful completion

ATM therapist: *Congratulations, you have been able to achieve (insert completed goal). All of your hard work and discipline has paid off. As you*

have learned maintaining a budget is not easy but rewarding. I strongly recommend we use the remaining time to continue building on these skills.

Unsuccessful completion

ATM therapist: *Although you have has some difficulties with (insert issue) you have been able to accomplish (insert accomplishment). How would the remaining sessions be helpful to you?*

Concluding ATM Participation (The Last Session)

Upon completion or termination from the program, the Therapist should:

- Complete a *Notification of Ending Participation Form* (Appendix M). The form will be signed by the client and by the Therapist. The client's account will be reconciled and all funds will be returned to the client. Two working days will be required for this transaction
- Return all financial materials to the client.
- Provide financial materials to the client for ongoing independent efforts.
- Give the client the *Certificate of Completion* (Appendix N).
- Notify the primary clinician about ATM completion.

Resources

Common Financial Terms & Definitions

Account balance - credits minus debits at the end of a reporting period.



Asset - any item owned by an individual that can be converted into cash (balance in checking/savings accounts, auto, home, etc.)



ATM (Advisor-Teller Money Management) - a money management-based therapy that targets substance-abuse. ATM functions using the "3 Ts" (Teller, Training, and Treatment-linked spending).

Teller - limiting access to patient's funds

Training - teaching the patient to make a budget and plan expenses

Treatment-Linked spending - uses discretionary funds to support abstinence-linked goals

ATM machine - stands for Automated Teller Machine. A machine is located outside banks or in shopping malls. When a personal coded card is used it gives cash. The magnetic strip on the back of the card holds personal bank account information. The ATM machine can also be used to deposit checks in a checking or savings account. The bank may charge a fee when using an ATM.



Bankruptcy - The main purpose is to give an honest person a "fresh start" in life by relieving the debtor of most debts and to repay what is owed to the creditor in a timely manner to the extent that the debtor has the means available for payment.



Budget - a spending and savings plan that lists your available money to meet your needs and wants. Following a budget is a good way to track your spending.

Checking account - A bank account in which checks may be written against amounts on deposit.

Confirmation number - a number assigned to a transaction for future reference or as proof of purchase.

Confirmation page- is a statement after a purchase has been made over the internet. The seller sends a message that describes the purchase. Included are what the item is, how much it cost, plus any taxes, shipping fees or other fees.



Coupon - a printed certificate that can be used for a discount



Credit card - A credit card allows you to purchase goods or services and pay at a later date. If you don't pay the full amount within 30 days, the credit card company charges you a lot of interest.



Credit History - A record of an individual's past borrowing and repaying behavior. It will list personal information, credit lines currently in the person's name, and risk factors like late payments or a recent bankruptcy.



Credit Report - A report containing detailed information on a person's credit history, including identifying information, credit accounts and loans, bankruptcies and late payments, and recent inquiries. It can be obtained by prospective lenders with the borrower's permission, to determine his or her creditworthiness.



Credit Score - A measure of credit risk calculated from a credit report using a standardized formula. Factors that can damage a credit score include late payments, absence of credit references, and unfavorable credit card use. Lenders may use a credit score to determine whether to provide a loan and what rate to charge.

Creditor - A person or organization which extends credit (lends money) to others.



Debit Card - A card much like a credit card, but takes money directly from the bank account rather than borrowing money at a rate of interest, and uses a PIN instead of a signature



Debt consolidation - combining multiple loans into one single loan. This process lowers monthly payments and finance charges.

Debtor – an individual who owes a creditor; someone who has the obligation of paying a debt



Direct Benefit Card ETA - electronic transfer account - automatically receives deposits of your federal payments each month. For a low monthly fee (\$3-\$4), it usually provides 4 free cash withdrawals and 4 free balance inquires. A safe low-cost convenient way to store and access funds.



Direct deposit- automatic deposit of wages or benefits to a person's bank account.



Five "C"s"- lenders use these to decide if an individual is credit worthy- capable of paying back a loan - capacity, capital, character, collateral, conditions.

Character - a person's attributes that speak to their moral and ethical values.

Capital - things a person owns. It can be money in checking or savings accounts or property owned like a house and car.

Capacity- the ability of a person to repay based on their income.

Collateral - something that must be given if the loan is not repaid.

Conditions - rules for a loan repayment. The amount a person must pay per month, the interest rate, or late payments are examples.

Encrypted – information is written in a secret code before it is sent from one computer to another. This secret code stops anyone from getting another person's information.



Financial goals - They are what will motivate you to stay on track with your spending plan or budget.



Gift card- A card that can be used like cash to buy something in a store.



Gross income - a person's total income prior to taxes and other adjustments.



Income - money earned through employment and benefits (social security, VBA, food stamps, etc.).



Interest - money paid for the use of money. It is computed as a percent of the money borrowed.



Liabilities - money that is owed to creditors (also known as debt)



Money Management- assistance given for income, expenses, and saving. Goal setting and monthly budgeting is used.



MyMoney card- a prepaid card used like a credit card. It is unlike a credit card because you have a specific amount of *your* money encoded on the magnetic strip.



Net income - a person's total income after taxes and other deductions



On-line banking - A system allowing individuals to perform banking activities at home, via the internet.



Pay day loans - Payday loans are extremely expensive cash advances that must be repaid in full on the borrower's next payday to prevent the personal check from bouncing. Cash-strapped consumers run the risk of becoming trapped in repeat borrowing due to triple-digit interest rates and unaffordable repayment terms.

Prepaid card - a plastic card with a specific amount of money encoded on a magnetic strip. It is for a specific use, for example, a phone card.



Receipt- a piece of paper that shows payment has been received. Most receipts will show the item purchased and specific amount for each item. Keeping receipts is a good way of tracking your expenses.



Rent to Own - A way to purchase goods that requires no credit check. Cash-strapped individuals are charged a very high interest rate which makes the purchase more costly, typically 3-4 times more than the sticker price.



Savings account- A deposit **account** at a bank or **savings** and loan which pays interest, but cannot be withdrawn by check.



Shipping fee - amount charged for shipping an item to the customer. The amount varies. It is a flat rate based on distance sent or dollar amount of purchase.

Sales tax- added to the cost of an item purchased. It is calculated as a percent of the purchase price. The amount varies from state to state. The tax is used for state services.



Transaction fee - an amount charged to use a service.

Budgeting Tip of the Week

Organizing your finances can save you time and money when it comes to paying bills.



To avoid late fees, keep current bills in a visible place so you will not forget to pay them on time.

Budgeting Tip of the Week

Work on arts and crafts projects. They can be given as gifts to loved ones in place of store-bought items.



Budgeting Tip of the Week

Credit cards encourage spending funds that you may not have. If full payment is not made, finance charges will add up quickly.



Budgeting Tip of the Week

Good reasons to budget:

- 💰 Following a budget can help you get out of debt and stay out of debt.
- 💰 A budget may create extra money for you by keeping track of your spending.
- 💰 A budget can help you save, so you are not living paycheck to paycheck.



Budgeting Tip of the Week

A budget is comprised of three areas:

Net income: Your net income is what is you receive from salary, wages, child support, social security, pension, etc. Net income is the amount you bring home after deductions (such as taxes).

Living Expense: Includes rent, food, utilities, insurance, transportation expenses, entertainment, etc.

Debt: Money owed to a person or organization that is required to be paid by a specific date.

Budgeting Tip of the Week

Before buying an item, ask:

- 💰 Do I really need it?
- 💰 Do I really have to have it now? Or can I wait for a sale or to save up for it?
- 💰 Can I substitute it for something that costs less?
- 💰 Do I have enough money available now or will I need to use credit?



Budgeting Tip of the Week



Learn to cook and save
money on eating out.

Budgeting Tip of the Week

Over half of all grocery purchases are impulse purchases.



Don't grocery shop when you are hungry because you will tend to spend more.

Make a shopping list, and stick to it!

Budgeting Tip of the Week

Little expenses really do add up. Be aware of small daily/weekly expenses, such as coffee, cigarettes or lunch.

Buying a cup of coffee three times a week, at only \$1.50 a cup, can cost over \$200 a year.



Budgeting Tip of the Week

People who have financial goals and stick to them, can save about twice as much as people who do not set financial goals.



Budgeting Tip of the Week

When you receive money unexpectedly, such as from a gift, use it to pay off debt or save it.

Since you did not anticipate this income, you will not notice a difference in your finances.



Budgeting Tip of the Week

Before buying an item, ask:

- 💰 Do I really need it?
- 💰 Do I really have to have it now? Or can I wait for a sale or to save up for it?
- 💰 Can I substitute it for something that costs less?
- 💰 Do I have enough money available now or will I need to use credit?



References

- Angell, B., N. I. Martinez, et al. (2007). "Payeeship, financial leverage, and the client-provider relationship." Psychiatric Services 58(3): 365-72.
- Appelbaum, P. S. and A. Redlich (2006). "Use of leverage over patients' money to promote adherence to psychiatric treatment." Journal of Nervous & Mental Disease 194(4): 294-302.
- Black, R.A., B.J. Rounsaville, R.A. Rosenheck, K.J. Conrad, S.A. Ball, M.I. Rosen (In press). "Measuring money mismanagement among dually diagnosed clients." Journal of Nervous and Mental Disorders.
- Brotman, A. W. and J. J. Muller (1990). "The therapist as representative payee." Hospital & Community Psychiatry 41(2): 167-71.
- Dixon, L., J. Turner, et al. (1999). "Case managers' and clients' perspectives on a representative payee program." Psychiatric Services 50(6): 781-6.
- Elbogen EB, Swanson JW, Swartz MS, Van Dorn R. (2005). "Family representative payeeship and violence risk in severe mental illness." Law & Human Behavior 29(5):563-74.
- Estroff SE, Swanson JW, Lachicotte WS, Swartz M, Bolduc M. (1998). "Risk reconsidered: targets of violence in the social networks of people with serious psychiatric disorders." Social Psychiatry & Psychiatric Epidemiology 33 Suppl 1:S95-101.
- Frisman, L.K., and R. Rosenheck (1997). "The relationship of public support payments to substance abuse among homeless veterans with mental illness." Psychiatric Services 48(6): 792-795.
- Johnson, L.S. (1997). "Therapist's Guide to Clinical Intervention". Academic Press: San Diego, CA.

National Institutes of Health. (2005). "Helping Patients Who Drink Too Much: A Clinician's Guide." Bethesda, Md: NIH publication 05-3769. Available at: <http://pubs.niaaa.nih.gov/publications/Practitioner/CliniciansGuide2005/guide.pdf>. Retrieved March 26, 2008.

Pettinati HM, Weiss RD, Miller WR, Donovan D, Ernst DB, Rounsaville BJ. (2004). "Medical management treatment manual: a clinical research guide for medically trained clinicians providing pharmacotherapy as part of the treatment for alcohol dependence." Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism; Report No.: DHHS Publication No. (NIH) 04-5289.

Ries, R.K. and K. A. Comtois (1997). "Managing disability benefits as part of treatment for persons with severe mental illness and comorbid drug/alcohol disorders. A comparative study of payee and non-payee participants." American Journal on Addictions 6(4): 330-8.

Rosen, M.I. and R. Rosenheck (1999). "Substance use and assignment of representative payees." Psychiatric Services 50(1): 95-98.

Rosen, M.I., Bailey, M., Dombrowski, E., Ablondi, K., Rosenheck, R.A. (2005). "A comparison of satisfaction with clinician, family members/friends and attorneys as payees." Community Mental Health Journal 41(3): 291-306.

Shaner, A., T.A. Eckman, L.J. Roberts, J.N. Wilkins, D.E. Tucker, J.W. Tsuang, J. Mintz (1995). "Disability income, cocaine use, and repeated hospitalization among schizophrenic cocaine abusers - a government-sponsored revolving door." New England Journal of Medicine 333 (12): 777-783.

Thaler, R.H., H.M. Shefrin (1981). "An economic theory of self-control." Journal of Political Economy 39: 392-406.

ATM Forms

ATM Intake Form

Instructions:

In order to foster feelings of concern and compassion towards the client, proceed with the questions in a natural conversational manner. Use your judgment to decide if you need to ask additional questions or skip questions that do not apply. Use this intake form to record behavioral observations and factual information

ATM Therapist: I'd like to talk to you about your finances, drug use and goals for ATM participation. The purpose of this questionnaire is to obtain a comprehensive understanding of your circumstances. I'm going to ask you a lot of questions. Is that okay with you? This part is going to take about an hour to complete.

Personal Data:

Date: _____ Client Name: _____

DOB: _____ Telephone numbers: _____

Address: _____

By who were you referred? _____

With whom are you now living? _____

Where do you reside? _____apartment _____hotel _____sober house
 _____room _____homeless _____other

Significant Relationships (prompt: Who are the most important people in your life?
Who are the people you see regularly? Family members? Friends?)

Financial:

ATM therapist:
Let's talk about how much money you have been getting over the last six months.

Do you receive money from Social Security? If "Yes", how much? _____

What is your monthly income? _____

Are there other places you get money from? (If "Yes," ask for sources and amounts received. If client is unable to come up with any other sources, ask "What about Food Stamps, employment, under the table work, lottery or gambling, winnings, illegal activities, family or friends...")

Source:	Amount:
_____	_____
_____	_____
_____	_____
_____	_____

Is your check(s) deposited into an account? _____

If so, where do you have the account? _____

Who has the account checkbook? _____

Do you access the account online? _____

Is the account in your name? _____

Tell me about what you spend your money on. (If client is unable to list expenses, ask "What about Utilities, Rent, Food, Clothing, Transportation, Alcohol, and Drugs, Gambling, Cigarettes..."). Do you save some of your money for later in the month?

Are there people you owe money to? Do you have any other debts? If the client says, "no", ask "What about credit cards, back rent, unpaid bills, family or friends, etc.")

Creditor:

Amount Owed:

_____	_____
_____	_____
_____	_____
_____	_____

Funds Mismanagement

Now I'm going to ask whether some of your money has gone to things or people, resulting in more harm than good. In past 12 months, has someone stolen money from you? _____

In the past 12 months, did someone pressure you into giving him/her money even though you did not want to? _____

Have you gone without basic necessities (food, shelter, and clothing) during the past 12 months? If yes, explain: _____

Prior History of Assistance with Money Management and Behavioral Response:

Have you ever had a checking account? _____

Have you ever had a savings account? _____

Would the bank allow you to open a bank account now if you did not want to? _____

Please describe prior efforts made to help you manage your money:

What are your goals for participating in the ATM money management study?

Occupational: *(may have come up when discussing finances)*

Are you currently working? If "yes", tell me about your job.

If "no", are you interested in working? If "yes", what sort of work do you enjoy?
Tell me about employment you have had in the past.

Legal:

Do you have any legal issues pending? If so, please explain.

Family:

Now I'm going to ask you about your family and close friends. Tell me about your father/mother/sister/brother/wife/significant other (in terms of support system).

Do you provide any of them with money or things worth money? If "yes", how much and how often? _____

Do any of them provide you with money or things worth money? If "yes", how much and how often? _____

Clinical:

State in your own words the nature of any emotional problems you have had and how long they have been present: Are you taking any medication? If "yes", is it helpful? _____

How do you spend your free time?

Substance Use:

Use of alcohol and/or drugs

Type how used amount frequency last time used _____

At what age did you start using? What was the first substance you used?

Have there been any changes in the pattern of alcohol/drug use in the last 6 months to 1 year _____Yes _____No. if yes, describe:

Preferred alcohol or drug _____

Longest period of time you have gone without using alcohol or drugs? _____

Have you ever felt annoyed when other people criticize your substance use? _____

Have you ever felt the need to cut down on the use of alcohol/drugs (if yes, explain): _____

How do you feel about your use of alcohol/drugs? _____

Have you ever attended AA/NA meetings? What's your experience been? Do you currently attend? How often? Have a sponsor?

Treatment History:

Number of attempts to stop alcohol/drug use _____.
By what means?

Why did you start again? _____

Previous treatment experiences (list problems, type of treatment, location, and what you learned and accomplished):

Amenability to Money Management:

Is there a person or organization that helps you manage your money? _____
Would you like to have someone help you manage your money? _____
Would you like someone to give you lessons on how to make a budget? _____

Would you like to have someone talk over your finances with you once a week?

Impressions and Plan: *(To be completed by the ATM Therapist after concluding the session).*

So let's summarize. I've heard some issues that I may be able to help you with. They are (check off):

- problem having a safe place to store your money
- not having enough money coming in
- spending more money than you want to on
- wanting to have enough money to do
- having this complicated bill you don't understand etc.

I have some ideas for how we can help you with these things. For example, we could work on (problem above) by _____. Let's meet again to start working on this.

You may think of other things to work on before our next meeting. Write them down so you remember to discuss them with me at the next meeting. Bring any paperwork you think would be helpful (e.g. bills, cell phone plan, etc.).

Therapist Formulation of Key Financial Goals for Client:

Therapist Formulation of Relationship Between Drug Abuse and Money Management

Therapist Formulation of How to Manage Client Funds to Minimize Drug Use

Therapist Formulation of *Client's Psychological Goals and Defenses*, and approach the therapist will take.

ATM Referral Form

Date: _____ Name of Referring Provider: _____

Name of Client: _____ Phone: _____

Address: _____

I. Reason for Referral: Check all applicable items:

1. _____ Client has experienced repeated evictions due to failure to pay rent and/or persistent homelessness.
2. _____ Client is repeatedly delinquent in the payment of utility bills, leading to the shut-off of electricity or other essential utilities.
3. _____ Client's difficulties in managing money have resulted in repeated episodes of criminal misconduct.
4. _____ Client's difficulties in managing money are related to persistent substance abuse.
5. _____ Client's difficulties in managing money are related to severe clinical instability.
6. _____ Other: Please explain: _____

II. Prior history of assistance with money management:

a. Please describe prior efforts made to assist the client in the management of his/her money: _____

b. Does the client have a history of actual or threatened violence toward others who have attempted to assist in the management of his/her money? ___Yes ___No
If yes, please describe (include specific nature of violence and approximate date of last occurrence): _____

III. Client attitude towards this referral:

IV. Client goals for involvement in the money management program:

ATM Program
Non Budgeted Request

Use this form when client requests disbursement of discretionary funds beyond the amount budgeted/contracted.

I am requesting _____ **(Amount)**

Purpose of funds:

- Unexpected travel expenses
- Unexpected health care expenses
- Substance use
- Impulse purchase
- Mutually agreed upon abstinence promoting activities
- Other

Client Name _____

Date of Request: _____

Date Needed: _____

Client Signature: _____

ATM Therapist remarks/recommendations: _____

ATM Therapist Signature: _____

ATM Enrollment Client's Agreement to ATM

You are invited to participate in a Money Management program, ATM in which your ATM therapist will assist in the management of your money. ATM involves a trade-off (e.g. a deal)—

What you give: You agree to certain procedures that make it harder for you to get immediate access to your money.

What you get: You get your ATM therapist's advice around how to manage your money, training around budgeting, and records kept by your ATM therapist of where your money comes from and what it is spent on.

ATM therapy makes it harder for you to get access to your money because there will be an extra step before you can access your spending money. In ATM, you will usually need to work with your ATM therapist before you can access your funds. You and your ATM therapist will meet at the beginning of each month to plan a budget. Then, you will meet with your ATM therapist at least once a week to plan how you will spend your money and discuss ways to help prevent you from spending your money on things you cannot afford. You will be encouraged, but not required, to take extra steps to keep you from spending money on things that you cannot afford. ATM involves learning to plan how to spend your money so that you make better spending decisions. However, you do not have to follow the ATM therapist's recommendations about how to manage your money if you do not want to.

ATM also involves arranging to receive your money when you have reached goals you have set for your treatment. Each week, your ATM therapist will encourage you to set aside a certain amount of money that you will get only if you meet two treatment goals that you negotiate with your ATM therapist. Each week, you will be asked if you met the previous week's goal and if you did, you will receive money from your account. If not, you will be encouraged to save the money, and to negotiate new goals for the next week's session. In addition, you will work with your treating clinician to help you achieve your treatment goals.

Before you decide whether you want to participate in ATM, you should know about the “Three R’s”; your Risks, your Rights, and your Responsibilities.

Risks and Inconveniences to You:

1. Limited access to your funds. Your ATM therapist can only guarantee to be available at one time each workday, so you may have trouble getting access to money in your accounts if you do not contact your clinician during those specified times. Debit cards will not be loaded over the weekend. For example, if you do not have enough money at home over the weekend to pay for food, you may need to go to a soup kitchen for food.

2. Holds on your funds. If you request money that you did not plan to spend at the beginning of the month when you planned your budget, your ATM therapist will ask you to wait for 48 hours before reloading the debit card. However, you do not have to wait for the 48 hours if you do not want to. Funds may be loaded that day.

3. Discussing personal finances. This can be a sensitive issue. You may feel uncomfortable talking about your finances with your ATM therapist. ATM therapists trained in a variety of situations that may arise while helping you manage your money.

4. Getting advice from your ATM therapist that causes you to get into financial trouble. Your ATM therapist may give you advice that causes your money to be misspent, either because the clinician makes a mistake or because the clinician does not have enough information. For example, your ATM therapist may advise you to pay a certain bill that you do not have enough money to pay, thus overspending your account. Note that although your ATM therapist will give you advice about how to manage your money, you, not your ATM therapist, decide how the money is spent. Therefore, you, not your ATM therapist, are responsible for these decisions.

This program is voluntary. If you do not want to participate in the ATM program, there are other ways you can manage your money. For example, you could ask your clinician for advice about managing your money as part of your regular treatment.

Participation in the ATM program affords you certain rights, and requires you to assume responsibilities.

Your Rights are:

1. To be treated with respect and courtesy by your ATM therapist.
2. To participate in the development of your own budget.
3. To ask questions about your budget and to request modifications as your needs change.
4. To discontinue your participation before the end of the program. If you want to discontinue participation in the program, you can receive all the funds in your account as soon as we can arrange it. The only exception to this is if you have someone legally appointed to manage your money, in which case we will return the funds to that person (conservator, representative payee, fiduciary) and have him/her decide whether or not to give you the funds.
5. To request a meeting with Administrator, if you are dissatisfied with this service.

Your Responsibilities are:

1. To accept that spending decisions can only be negotiated with your ATM therapist at the agreed-upon times.
2. To know that debit cards will only be given to you and that no one else will be permitted to pick them up for you.
3. To submit a 48 hour request form to your clinician if you would like to request non-budgeted funds.
4. To notify your ATM therapist of any changes which may affect your budget and/or your involvement in this program such as changes in address, telephone number, entitlement status, the number of people in your household, etc.

In addition, if you do not follow the program rules or you are unable to participate in any part of the program, the treatment team has the right to end your participation. The treatment team also has the right to end your

participation if they believe that continuing would be harmful to your physical or mental health.

CLIENTS RIGHTS: I have read or have had read to me all of the above.

_____ has explained the program to me and answered all of my questions. I have been told of the risks or discomforts and possible benefits of the program. I have been told of other choices of treatment available to me.

I understand that I do not have to take part in this program, and my refusal to participate will involve no penalty or loss of rights to which I am entitled. I may withdraw from this program at any time without penalty or loss of VA or other benefits to which I am entitled.

I understand my rights as a client, and I voluntarily consent to participate in this program. I understand what the program is for and how and why it is being done. I will receive a signed copy of this enrollment agreement.

Client Signature

Date

Signature of ATM therapist

Date

ATM therapist (print)

ATM Client Budget and Consent Form

Client: _____ Date: _____

Address: _____ SS#: _____

Income - Check those to be managed by the Program

<u>Sources of Income</u>	<u>Amount per Month</u>
<input type="checkbox"/> SSI	\$ _____
<input type="checkbox"/> SSDI	\$ _____
<input type="checkbox"/> Other	\$ _____
Total Monthly Income	\$ _____

Expenses

<u>Expense Type</u>	<u>Payee/Account #/Description</u>	<u>Amount per Month</u>
<input type="checkbox"/> Rent	_____	\$ _____
<input type="checkbox"/> Telephone	_____	\$ _____
<input type="checkbox"/> Electricity	_____	\$ _____
<input type="checkbox"/> Gas	_____	\$ _____
<input type="checkbox"/> Credit Cards	_____	\$ _____
<input type="checkbox"/> Transportation	_____	\$ _____
<input type="checkbox"/> Other	_____	\$ _____
<input type="checkbox"/> Food	_____	\$ _____
<input type="checkbox"/> Cable	_____	\$ _____
<input type="checkbox"/> Debit Card Allowance	_____	\$ _____

I hereby give consent to the ATM program to deposit, budget and disburse my monies as outlined above. I understand that my monies will be deposited into a non-interest-bearing checking account and that I will incur no bank charges through my participation in this program. The ATM program will assume responsibility for safeguarding my monies while such monies remain in the possession of the ATM Therapist. I understand that requests for additional money or withdrawal of money from the program will be processed as described in the signed Consent.

Client

Date

ATM Therapist

Date

ATM Program

Direct Deposit for Federal Benefit Payments

Name of Federal Benefit Recipient

Address

Telephone Number

SS#

I, _____ request that my SSDI/SSI benefits be directly deposited into the following account:

Checking Account Title:	ATM Program
Digit Routing Number:	
Account Number:	

I authorize this payment to be sent to the financial institution named above, to be deposited into the account above.

Client

Date

ATM Therapist

Date

Initial Information from Clinician

Client Name _____ Clinician _____

Please describe prior efforts made to assist the client in the management of his/her money _____

Has the client ever assaulted or fought with someone who managed their money?

If yes, please describe: _____

Does the patient have a history of any assaultive behaviors?

Has the patient ever done anything to make you afraid of meeting in your office alone? _____

What works to calm the patient down when he/she is agitated?

Describe client's attitude towards this referral

Client goals for involvement in the money management program

Goals

Client Name _____

<p><u>Goals</u></p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p>

Financial Goals	Short-term	Long-term
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Goals:

1. _____ Steps to achieve this goal:

2. _____ Steps to achieve this goal:

3. _____ Steps to achieve this goal:

Weekly Expense Sheet

Client Name _____

How did you spend your money? Record both your daily and weekly expenses. At the end of the week, you will know where your money went and have a better idea how you want to spend it in the future.

Item

Cost

ATM Budget Worksheet

Description	A: Expected Amount	B: Actual Amount
1. Beginning Account Balance: (Money from last month)		
Income:		
2. Income from employment		
3. Benefits / Entitlements		
4. Family / Friends		
5. Other		
6. Food Stamps		
7. Income total (Sum of rows 1-6)		
Expenses		
8. Rent		
9. Telephone		
10. Utilities		
11. Health Care Products		
12. Clothing		
13. Groceries		
14. Bus Fare / Gasoline for car		
15. Laundry		
16. Cigarettes		
17. Entertainment/Restaurants		
18. Deposit to Savings		
19. Debt		
20. Other		
21. Total Monthly Expenses: (sum of rows 8-19)		
22. Net Income=(Total income)- (total expenses):		
23. Ending Balance for this month:		

ATM Weekly Activities Budget

Client Name _____

From the categories below, please code 3 activities that the client plans to complete this week.

- | | | |
|---|---|--|
| <input type="checkbox"/> Education | <input type="checkbox"/> Education | <input type="checkbox"/> Education |
| <input type="checkbox"/> Financial | <input type="checkbox"/> Financial | <input type="checkbox"/> Financial |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Employment | <input type="checkbox"/> Employment |
| <input type="checkbox"/> Family | <input type="checkbox"/> Family | <input type="checkbox"/> Family |
| <input type="checkbox"/> Health | <input type="checkbox"/> Health | <input type="checkbox"/> Health |
| <input type="checkbox"/> Social | <input type="checkbox"/> Social | <input type="checkbox"/> Social Recreational |
| <input type="checkbox"/> Recreational | <input type="checkbox"/> Recreational | |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Transportation | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Housing | <input type="checkbox"/> Housing | <input type="checkbox"/> Housing |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Legal | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Personal | <input type="checkbox"/> Personal | <input type="checkbox"/> Personal |
| <input type="checkbox"/> Improvement | <input type="checkbox"/> Improvement | <input type="checkbox"/> Improvement |
| <input type="checkbox"/> Abstinence | <input type="checkbox"/> Abstinence | <input type="checkbox"/> Abstinence |

Activity 1 _____

Amount activity will cost _____

Completion Verification _____

Activity 2 _____

Amount activity will cost _____

Completion Verification _____

Activity 3 _____

Amount activity will cost _____

Completion Verification _____

I understand that I will spend \$_____ to complete these activities by

Date

Client

Date

ATM Therapist

Date

Were activities agreed upon for last week? If yes, complete the following:

How many?	How many attempted?	How many completed?
-----------	---------------------	---------------------

Client Comments:

ATM Therapist Comments:

ACTIVITY SUGGESTIONS

1. EDUCATION

Register/pay for classes
Study for exam
Further education
Get information about
courses/programs

2. FINANCIAL

Accept money management Assistance
Cut down on spending
Pay bills
Save money
Apply for food stamps, cash
assistance
Apply for ssa/vba benefits
Develop improved budgeting/money
management skills

3. EMPLOYMENT

Go to work
Look for employment
Create a resume
Sign up to volunteer
Go to job interview
Job training/vocational services

4. FAMILY

Spend time with family/kids
Attend family function
Write/call/email family/kids
Attend family counseling
Help with home improvement
projects

5. HEALTH

See a physician
Eat healthier/diet
Take prescribed medication as
directed
Cut down, quit smoking
Practice stress relieving techniques
Go grocery shopping

6. SOCIAL/RECREATIONAL

Attend religious function
Go to movies, dinner, theater
Spend time with friends
Go on a trip/vacation
Participate in outdoor activity
Read a book /do crossword puzzles
Go to library/shopping center

7. TRANSPORTATION

Repair vehicle
Get insurance
Pay off tickets
Secure bus pass
Arrange for medical transportation

8. HOUSING

Obtain sober housing
Update change of address
Buy furniture, etc. for home
Save money for 1st months rent
Apply to residential programs
Look for apartments in newspaper

9. LEGAL

Improve legal status
Go to court
Pay court fines
Seek legal counseling
*Comply with conditions of
parole/probation*
Resolve legal problems
Attend anger management group
*Practice skills for managing aggressive
behavior*

10. PERSONAL IMPROVEMENT

Clean house/vehicle/do laundry
Workout
Pray
Improve time management
Improve personal hygiene/get haircut

11. SOBRIETY

Attend AA/NA meeting
Attend community event
See clinician/case manager
Attend outpatient treatment
*Comply with meds to help with
cravings*
Get info about 12-step meetings
Look into getting a sponsor¹

Certificate of Completion

ATM

Presented to

In recognition for outstanding accomplishments

ATM Therapist

Date

Notes