

***Problem Report***

Group Leader Name(s): \_\_\_\_\_

Progress Report Date: \_\_\_\_\_

Describe your primary need or problem.

What are your current process-oriented goals or planned actions for working through the need or problem?

Do you need help determining if a group member needs a mental health professional referral?

How can your peer group leaders help you out at this time?

What do group leaders perceive to be the appropriate next step?

Are there any continuing education topics you feel would be beneficial in helping with this problem or need?