30-DAY PLANNER

The First Week Home

An expanded 30-day recovery transition planner after withdrawal management, stabilization, treatment, or a decision to begin again.

Plan fewer gaps and reduce last-minute decisions. Includes the first seven days, practical transition tools, twenty-one continuation check-ins, and a thirty-day review.

THE RECOVERY DESK

Practical tools for recovery

Before you begin

Use these pages at your own pace. You may pause, skip a question, or complete a page with a trusted support person.

Safety first

- If you may hurt yourself or someone else, call 911. In Canada, call or text 988 for suicide crisis support.
- Call 911 for overdose, severe withdrawal, chest pain, trouble breathing, seizure, severe confusion, or if someone cannot be awakened.
- Do not stop prescribed medication or make withdrawal decisions based on this workbook. Speak with a qualified health professional.

What this resource is

- General education and structured reflection for recovery planning.
- A way to prepare questions, notice patterns, and organize practical next steps.

What it is not

- Medical advice, diagnosis, individualized therapy, legal advice, or emergency care.
- A guarantee of abstinence, safety, or treatment outcome.

Licence

How to use the week

This planner is designed for a vulnerable transition period. It is not a test and does not need to be completed perfectly.

Before day one

- Confirm where you will sleep and how you will get there.
- Review medication and follow-up directions with a qualified professional.
- Choose one person who knows your first-day plan.
- Reduce unnecessary access to substances, money, risky contacts, or high-risk places.

Each day

- Use the morning page to choose priorities and anticipate risk.
- Use the evening page to notice what helped and adjust tomorrow.
- If you miss a page, return at the next available moment. Do not restart the whole week.

A workable day

- One body need, one recovery action, one useful task, one point of connection, and one period of rest or enjoyment.

My transition snapshot

Write what is already known and circle what still needs confirmation.

Housing and access

Address, entry time, key or contact person, substances in the environment, and backup option.

Health and medication

Pharmacy, prescriptions, appointments, transportation, and questions for a professional.

Support and structure

People, meetings, programs, cultural or spiritual supports, and meaningful activities.

My first-night plan

The first evening deserves its own plan. Reduce empty time and avoid unnecessary high-risk stops.

From discharge or departure to the door

Route, ride, fare, stops, phone charge, and who knows when I arrive.

Food, medication, hygiene, and rest

What do I need and where will it come from?

Evening connection and activity

Who will I contact and what will I do until bedtime?

If the night becomes unsafe

Where will I go, who will I call, and what access will I reduce?

My personal evidence check

A tool earns a place in your plan by being safe, usable, and helpful in your real context.

What I tried

Name the page, skill, plan, or conversation and the situation in which you used it.

What changed

Intensity, access, time, connection, safety, clarity, or the next action—before and after.

What I will do next

Keep, adapt, combine, stop, or bring to an appropriate professional.

Evidence and source notes

This resource is evidence-informed, not a substitute for assessment or a promise of outcome. Sources were selected for authority, relevance, and direct connection to the workbook methods.

Core references

- SAMHSA. TIP 35: Enhancing Motivation for Change in Substance Use Disorder Treatment (2019). store.samhsa.gov/product/tip-35-enhancing-motivation-change-substance-use-disorder-treatment/pep19-02-01-003
- SAMHSA. TIP 41: Substance Abuse Treatment: Group Therapy (2005). store.samhsa.gov/product/tip-41-substance-abuse-treatment-group-therapy/sma15-3991
- SAMHSA. TIP 57: Trauma-Informed Care in Behavioral Health Services (2014). store.samhsa.gov/product/tip-57-trauma-informed-care-behavioral-health-services/sma14-4816
- SAMHSA. TIP 63: Medications for Opioid Use Disorder (2021). library.samhsa.gov/product/tip-63-medications-opioid-use-disorder/pep21-02-01-002
- National Institute on Drug Abuse. Principles of Drug Addiction Treatment: A Research-Based Guide, third edition (2018). nida.nih.gov/publications/principles-drug-addiction-treatment-research-based-guide-third-edition

Research and safety references

- Bowen S, et al. Relative efficacy of mindfulness-based relapse prevention, standard relapse prevention, and treatment as usual. JAMA Psychiatry. 2014;71(5):547-556. doi:10.1001/jamapsychiatry.2013.4546
- World Health Organization. Community management of opioid overdose (2014). who.int/publications/i/item/9789241548816
- Health Canada. Naloxone (updated 2026). canada.ca/en/health-canada/services/opioids/naloxone.html
- 9-8-8: Suicide Crisis Helpline. 988.ca

How to read these claims

- The workbook combines established practice principles with original educational exercises; the complete workbook has not itself been tested in a clinical trial.
- Evidence describes average findings and professional guidance. Fit, access, culture, readiness, health, and circumstances still matter.
- Source links were checked in September 2026. Guidance and local services can change; verify current instructions with the source or a qualified professional.