

Mindful Charting: Language that Heals

**A Workbook for Trauma-Informed, Strengths-Based
Documentation**

Created by With + For Consulting

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Land Acknowledgement

This workbook was created on the traditional, ancestral, and unceded lands of the M̓athexwi and Sema:th First Nations, in what is colonially recognized as Abbotsford, BC, Canada. We also acknowledge the ongoing relationships between Indigenous peoples and these lands since time immemorial.

With + For Consulting honours the stewardship, resistance, and knowledge of Indigenous communities and commits to practices that reflect accountability, repair, and relational care.

We invite you to reflect on whose lands you are on and how you can apply the Truth and Reconciliation Commission's Calls to Action 18 to 24 in the spaces you hold as you engage with this work.

Welcome

Welcome to the Mindful Charting Workbook. Whether you work in healthcare, social services, education, outreach, or any other field where documentation matters, you are part of how stories get written. This workbook will help you reflect on the language you use and offer tangible shifts toward strength-based, trauma-informed charting.

Because language isn't neutral. The words we choose shape how people are seen, treated, and remembered.

Let's write with care.

This workbook was created by With + For Consulting, a community-rooted consulting practice, as a free resource to be shared and copied.

The Power of a Sentence: Two Charts, Two Futures

Client: Jaya (she/they), 28, recently housed, living with complex trauma and chronic pain.

Path 1: Standard Charting

"Patient is non-compliant with pain medication plan. Presented as agitated and manipulative, demanding early refill. Has history of unstable housing and poor follow-through. Denies current drug use but is not a reliable historian."

Outcome:

Jaya is flagged. Future providers skim the note and approach her with skepticism. When she returns in pain, staff keep her at a distance. Jaya leaves feeling ashamed and unheard. She doesn't come back.

Path 2: Mindful Charting

"Jaya reported a recent increase in pain and requested an early refill, citing past challenges with pain management. She shared her experience of not being believed in previous care settings, which contributed to her current distress. Jaya communicated clearly and openly about her recent housing transition and identified stability as a key goal in her health journey. Jaya demonstrated engagement and a desire to collaboratively explore pain management options."

Outcome:

The chart frames Jaya as honest and engaged. A provider greets her with curiosity. She's offered pain support and linked to a community nurse. She feels seen and returns for follow-up care.

Reflection: How Did That Land?

- What words or phrases stood out to you?
- Which version have you seen more often in your workplace?
- How might each version influence how someone is treated?

What Is Mindful Charting?

Mindful charting means writing with:

- **Curiosity and compassion** instead of judgment
- **Context** instead of assumption
- **Collaboration** instead of control
- **Clarity** while still holding complexity

Being mindful doesn't mean sugar-coating or omitting safety concerns. It means reflecting humanity and reducing harm. Most importantly, if this were you or a loved one, how would you want to be seen?

Language Swaps

<i>Instead of this...</i>	<i>Try this...</i>
Non-compliant	Experiencing barriers to care
High-risk patient	Needing additional support
Refusing care	May not trust the system May not be ready
Attention-seeking	Communicating distress
Drug addict	Person who uses substances
Poor historian	Shared experiences to the best of their ability
Escalated quickly	Expressed distress
Transient	Experiencing housing insecurity
Unemployed	Not currently working
Yelled	Express frustration at the system
Non-adherent	Previous treatment plan may have been unclear.

Practice

Scenario 1: "Client yelled at front desk staff, stormed out before being seen. Has a history of this behavior."

Mindful Rewrite:

Scenario 2: "Patient insists on a specific medication. Refuses alternatives. Claims they 'know their body better.'"

Mindful Rewrite:

Scenario 3: "Patient continues to make poor lifestyle choices despite repeated education. Non-adherent to diabetes management plan."

Mindful Rewrite:

Scenario 4: "Mother is overly emotional and difficult to redirect. Appears anxious about child's care plan and struggles to accept professional recommendations."

Mindful Rewrite:

Scenario 5: “Patient is an addict who presented to clinic demanding narcotics. Claims to be experiencing pain. Not interested in recovery.”

Mindful Rewrite:

Quick Reference: Charting Dos and Don'ts

Do:

- Use factual observations
- Center the person's voice
- Acknowledge social context
- Use language that maintains dignity

Don't:

- Label people by diagnosis or behavior
- Assume intent without evidence
- Use stigmatizing shorthand
- Forget that someone may read their own chart

Final Words

You're not just a witness. You're a narrator. Thank you for choosing to write in a way that protects dignity, builds trust, and opens doors.

With care,

With + For Consulting

Want more tools? Stay tuned for our printable reference sheets, sector and population-specific language guides, and story-based training kits.