**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Facilitator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Due Date:** Click here to enter a date.

Schedule Recovery Team Meeting

* Invite all recovery team members including MHP
* Invite school personnel (if a child)

Request any Mental Health/ Physical Health Records including updated Medication List

Physician’s Prescription

PPS in MyEvolv

Update Assessment/Summary with any life changes

Update Recovery Plan

* Document progress, barriers, and whether objectives will continue.

Update TARP note with new goal(s) if needed

Attend Recovery Meeting

* Complete Annual Functional Screen **Due Date:** Click here to enter a date.
* Functional Screen Consent (adult or youth have one)
* Informed Consent
* Client Policies
* Determination of Need/Authorization for Services
* Admission Agreement
* Completed Updated Financial documents- see Billing for forms

* Complete new Releases of Information
* Text/E-mail Authorization
* Telehealth Authorization

E-mail correspondence:

* Contracted Providers: new/updated Recovery Plan and TARP Note (if needed)
* Lead Facilitator: new goal and completion date for tracking.

**\*\*\*\*TURN INTO MHP AS A PACKET\*\*\*\***