

**DMHAS WISE Program
Person Centered Recovery Plan**

Initial Plan Final Plan

Client Name: _____

Goal #: _____ Date Goal Established: _____ Linked to _____ Assessment dated _____

Participant's Desired Goal (Note: In the person's own words): _____

Strengths: <ul style="list-style-type: none"> • • • 	Barriers: <ul style="list-style-type: none"> • • •
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Objective: _____

Specific Services/Activities/Supports/Tasks

Provider/Service Type	Intervention & Purpose (Actions by person served/staff/ and natural supports)	Frequency, (e.g., 1X/wk)	Intensity (e.g., 30 min.)	Duration (e.g., for 3 mos.)

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Recovery Plan

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Recovery Plan

Client Involvement:

- I have actively participated in the development of this assessment/plan.*
- I have had an opportunity to review it and to ask questions.*
- I have been offered a written copy to keep for my reference.*

Comments: _____

Client Signature: _____ **Date:** _____

Community Support Clinician Signature: _____ **Date:** _____

Community Support Clinician & Credential (please print):

Representative Signature: _____ **Date:** _____

Representative Name & Relationship (please print):

Reviewer/Supervisor Signature: _____ **Date:** _____

Strengths = Past accomplishments, current aspirations, personal attitudes, attributes, etc. which can be used to help accomplish goals.

Barriers = Challenges to reaching the goal. Be certain to identify barriers as a result of the mental illness or addictive disorder. You may also identify resource or environmental barriers.

Objectives = Incremental step toward goal/measure of progress. HOW will person know they are making progress? Using action words, describe the near-term **specific changes expected** in measurable and behavioral terms. Include the target date for completion, e.g., "Within 90 days, Mr. S will..."

NOTES: Participation in services is NOT an objective; Maximum of 2-3 objectives per goal recommended

Services/Activities/Action Steps = Consider Action Steps Person in Recovery will take; Services to be Provided by STAFF; Services/Assistance to be provided by Natural Supporters. Include PURPOSE of support.)