Checklist for:

Guardianship Annual Plan

Statutory requirements: Florida Statutes § 744.3675 – Annual Guardianship Plan

| Guardianship of: |
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| | File #: |  | Date: | |  | | --- | --- | --- | --- | --- | | Attorney: |  | |  |  | |

| Docket# | Item# | Date |  |
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|  |  |  | **Are there any comments from the clerk on the review sheet\_\_\_\_\_\_\_\_\_\_\_\_?** |
|  |  |  | 1. Each plan for an adult ward must, if applicable include: |
|  |  |  | 1. Information concerning the residence of the ward, including: |
|  |  |  | 1. The ward’s address at the time of filing the plan. |
|  |  |  | 1. The name and address of each place where the ward was maintained during the preceding year. |
|  |  |  | 1. The length of stay of the ward at each place. |
|  |  |  | 1. A statement of whether the current residential setting is best suited for the current needs of the ward. |
|  |  |  | 1. Plans for ensuring during the coming year that the ward is in the best residential setting to meet his or her needs. |
|  |  |  | 1. Information concerning the medical and mental health conditions and treatment and rehabilitation needs of the ward, including: |
|  |  |  | 1. A resume of any professional medical treatment given to the ward during the preceding year. |
|  |  |  | 1. The report of a physician who examined the ward no more than 90 days before the beginning of the applicable reporting period. The report must contain an evaluation of this ward’s condition and a statement of the current level of capacity of the ward. |
|  |  |  | 1. The plan for providing medical, mental health and rehabilitative services in the coming year. |
|  |  |  | 1. Information concerning the social condition of the ward, including: |
|  |  |  | 1. The social and personal services currently used by the ward |
|  |  |  | 1. The social skills of the ward, including a statement of how well the ward communicates and maintains interpersonal relationships. |
|  |  |  | 1. The social needs of the ward. |
|  |  |  | 1. Each plan filed by the legal guardian of a minor must include: |
|  |  |  | 1. Information concerning the residence of the minor, including: |
|  |  |  | 1. The minor’s address at the time of filing the plan. |
|  |  |  | 1. The name and address of each place the minor lived during the preceding year. |
|  |  |  | 1. Information concerning the medical and mental health condition and treatment and rehabilitation needs of the minor, including: |
|  |  |  | 1. A resume of any professional medical treatment given to the minor during the preceding year. |
|  |  |  | 1. A report from the physician who examined the minor no more than 180 days before the beginning of the applicable reporting period that contains an evaluation of the minor’s physical and mental conditions. |
|  |  |  | 1. The plan for providing medical services in the coming year. |
|  |  |  | 1. Information concerning the education of the minor, including: |
|  |  |  | 1. A summary of the school progress report. |
|  |  |  | 1. The social development of the minor, including a statement of how well the minor communicates and maintains interpersonal relationships. |
|  |  |  | 1. The social needs of the minor. |
|  |  |  | 1. Each plan for an adult ward must address the issue of restoration of rights to the ward and include: |
|  |  |  | 1. A summary of activities during the preceding year that were designed to enhance the capacity of the ward. |
|  |  |  | 1. A statement of whether the ward can have any rights restored. |
|  |  |  | 1. A statement of whether restoration of any rights will be sought. |

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| Comments: |
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