MARP Phase 2 (potential length 0-5 years)

Goal: Provide support for long term sober lifestyle, improved ability for deeper personal and professional relationships, improve quality of mentorship for newly sober pharmacists and technicians, improve retention of MARP activities for members after contract expiration.

Qualification for Phase 2 (maintenance phase) is:

- 5 years (Phase 1) compliance with no to contract infractions
- active participation in recovery within the MARP group
- no historic positive drug screens
- no outstanding dues
- completion of counseling with written completion/release or Licensed counselor admittance recommendation for Phase 2 with quarterly updates
 - Counselor must be licensed and may include LPC, LCSW, LMFT, PhD, PsyD
 - Any member with a mental diagnosis requiring strict medication adherence must have clearance from their licensed Psychiatrist or Psychiatric NP
 - Only Licensed providers will be recognized by MARP for admittance to Phase 2
 - MARP must have release of information and maintain open communication with provider

This maintenance phase "Phase 2" would require:

- Live scheduled MARP admin meetings 4 times calendar year (maybe reduced to 2 with 2 years compliance of 4 meetings in a calendar year while in Phase 2 and Executive Board approval)
- Yearly Seminar is required
- Live scheduled MARP admin meetings may be replaced with MARP approved Licensed Counselor quarterly reports addressing sober lifestyle, mental health, and any other sobriety related information as it pertains to member sobriety. (This must be approved by the MARP Executive Board and may be revoked at any point with 2 weeks notification).
 - Counselor must be licensed and may include LPC, LCSW, LMFT, PhD, PsyD
 - Any member with a mental diagnosis requiring strict medication adherence must have clearance from their licensed Psychiatrist or Psychiatric NP
- Geotracking of required number of monthly meetings(if geotracking required)
- Drug screens (may be quarterly hair/nails or monthly urine).

MARP retains the ability to increase any aspect of the monitoring for non-compliance or relapse concerns. These criteria will be vetted by three different mental health professionals or treatment groups. These items will be re-visited by our executive board periodically to remain current with the standard of care, should it change.