

Recovery Support Planning & Completing an Episode of CoCM

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Purpose of Recovery Support

- **Patient empowerment**
 - Shift the focus from ending to celebrating
 - Information about risk of recurrence of depression symptoms
 - Tools for self-management and taking charge of care
- **Prevent recurrence of symptoms and/or help patient know when to seek help**
 - Identify what worked to get better
 - Recognize symptoms of depression or anxiety
 - A plan if symptoms return



Recovery Support Plan Template

Purpose: Behavioral health episodes can occur again during a person’s lifetime. The purpose of a recovery support plan is to help you understand your own personal warning signs. These warning signs are specific to each person and can help you identify when symptoms may be starting to return so you can get help sooner – before the symptoms get bad. The other purpose of a recovery support plan is to help remind you what has worked for you to feel better. Both of these put YOU in charge!

Instructions: 1. Fill out this form with your care manager. 2. Put it where you’ll come across it on a regular basis. 3. If you see signs of returning symptoms, use your prevention plan.

Maintenance medications:

Other treatments:

Personal warning signs:

Things that help me feel better:

Call your primary care provider or your care manager with any questions (see contact information below).

If symptoms return, contact:

Primary Care Provider Contact:

Care Manager Contact:

Next Appointment:

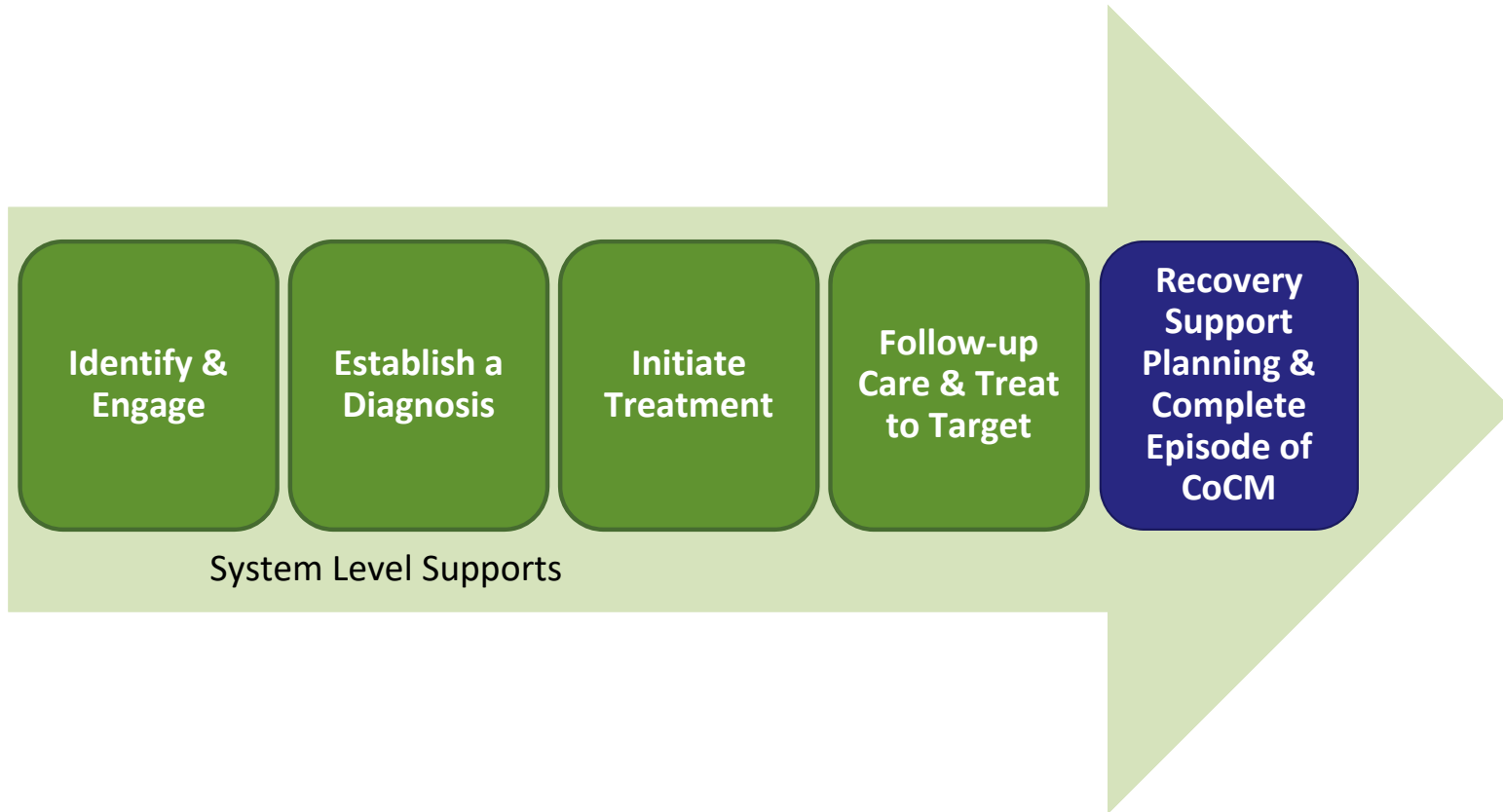


Example Recovery Support Plan

- **Medications and treatments**
 - **Prozac 20 mgs every am**
 - Remain on the medications for at least 6 months
 - Call the pharmacy for refills and have them contact PCP if you run out of refills
 - Talk to your PCP before stopping
 - **Continue attending AA meetings at the Cherry St Hall**
- **Warning signs of depression returning**
 - **Spending more time in bed, especially in the afternoon**
 - **Not returning friends' phone calls or turning down invitations**
 - **Low energy and lack of interest in getting out of the apartment**
- **Healthy behaviors**
 - **Walk 3 times a week with neighbor in the morning**
 - **Go to book club/read daily in afternoon**
 - **Deep breathing daily at 8 am**



Episode of CoCM





Timing the Introduction to Recovery Support Planning

- **Earlier is Best!**
- **Missed opportunity if patient drops from the program because they are feeling better**
- **More time to develop a thoughtful and detailed plan**
- **Maintains structure of episodic treatment**

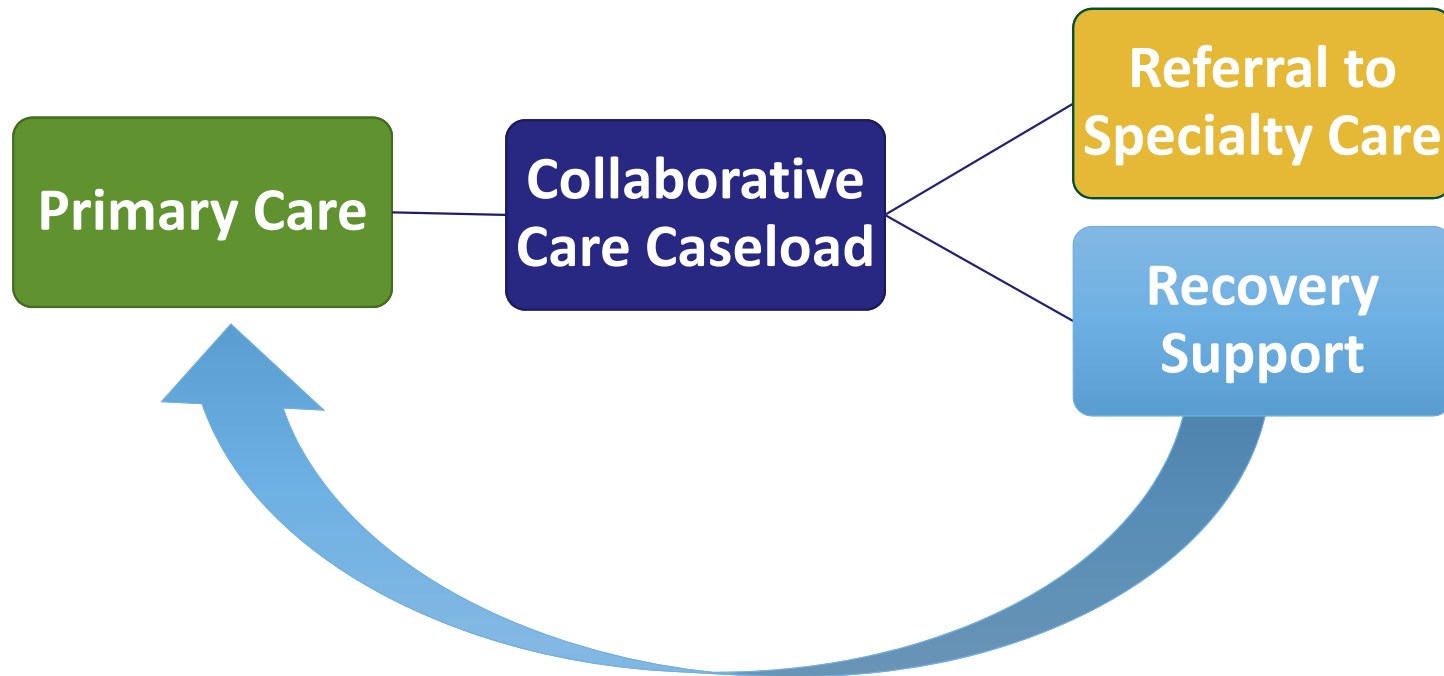


Timing Guidelines

Consider initiating RSP with patients who meet one or more of the following guidelines:

- Decrease in PHQ-9 and/or GAD-7 scores by ≥ 5 points from baseline**
- Decrease in the first 2 symptoms on the PHQ-9 (patient no longer scoring a 2 or 3 on the first two symptom questions)**
- Observed clinical improvement (improved presentation, engagement, self-management of symptoms, etc.) and/or psychiatric consultant agrees with timing/plan to initiate RSP**

Typical Course of CoCM Management





When Recovery Support Planning is *not* the Best Option...

- **Referral to specialty care**
 - Patient struggling with program parameters
 - Patient requires more intensive support for treatment success
- **Normalize option from outset**
- **Intensify treatment by:**
 - Changing setting
 - Adding psychological, recovery or social supports

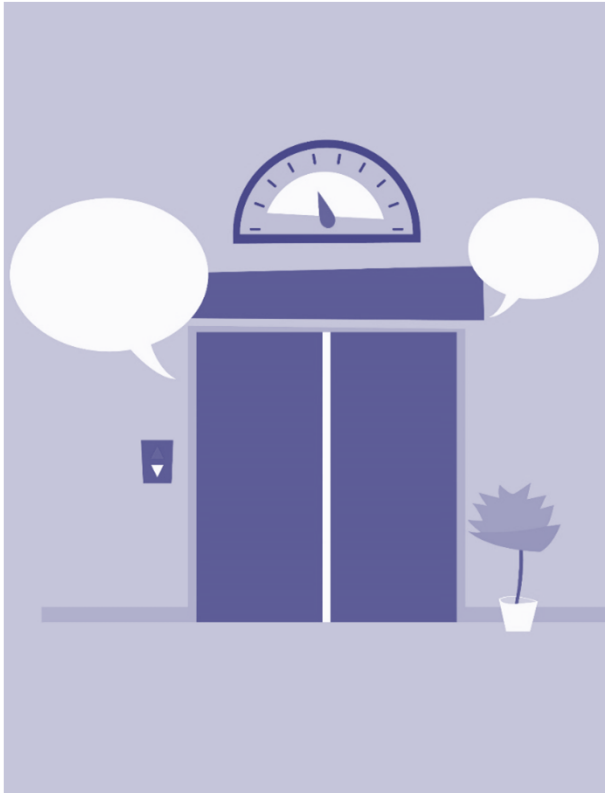


The Test Drive (Maintenance)

- **Facilitate transition from active phase**
 - Provide structure for step-down
 - Opportunity to test-drive the relapse prevention plan
- **Follow patient with monthly (brief) contacts**
 - Usually by phone
- **Review and finalize recovery support plan at termination**



Elevator Speech for Introducing Recovery Support Planning



- **Criteria for a good speech**
 - Brief
 - Clear
 - Sets expectations about RSP
 - Tailor speech to patient



Sample Elevator Speech





Practice: Elevator Speech for Early Introduction of the Recovery Support Plan

Scenario: *Your patient, Sue, started treatment in CoCM with a PHQ-9 score of 18. Sue has been in treatment for 7 weeks at this point and her current PHQ-9 score is 12. Sue reports getting out of the house more and has enjoyed working in her garden. You decide it is an appropriate time to initiate relapse prevention planning because Sue's PHQ-9 score has decreased by ≥ 5 points from baseline, and there has been observed clinical improvement now that she is consistently getting out of the house and enjoying activities.*

Draft your speech & consider the following:

- What is a recovery support plan? What is typically included?
- Why is it important? What is the purpose/goal of a recovery support plan?
- Explain the rationale for timing (tailored to patient)
- How recovery support fits into the episode of treatment?
- The patient creates the plan – BHCM's role is to facilitate the process.



Zoom Breakout Rooms

- Breakout rooms – pairs
- Notification when time to switch roles
- Return to main session will happen automatically
- Don't click “Leave Meeting”
- Need help?
 - Click “Ask for Help” then “Invite Host”





ELEVATOR SPEECH DEBRIEF





Communication with CoCM Team

- **Where in the EHR will the plan be stored?**
 - Within a progress note?
 - Scanned into the chart?
 - Problem-based charting (stored under a diagnosis on the patient's problem list)
 - Other?
- **How will team know patient has a plan?**
- **How will team know where to find the plan?**

QUESTIONS

