

# 14

## What to Expect Facilitator Notes

### Main Learning Points from last session: *Symptom Monitoring Tools*

1. A symptom monitoring tool can be used daily as part of your routine.
2. Symptom monitoring can help you learn if your medicine is working.

### Review Personal Practice Options from last session.



#### Note

This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

#### Tips for this Session

1. Make it clear in today's session, the last session of this workbook, that participants have the opportunity to continue to work on and maintain recovery as they leave this group. They have learned good information, and they have achieved an accomplishment by completing this workbook. Today's one-page session is a summary of the workbook. Cover the summary session in the usual manner, then move into a significant completion event. Ask participants if they would like to say a few words when they receive their certificates of achievement. You may want to ask a special guest to say a few words about the participant's achievement. Be creative and make the session unique.

2. The relationship between you and the participants has become important to everyone over the past weeks. End this workbook with good closure and good memories. If possible, give each graduate a graduation gift from you that is something meaningful and encouraging. At the end of this session is a bookmark that you could offer as a small gift if you want.

## Facilitator Notes

(continued)

### General Note

If you are interested in an outcomes measurement for this workbook, you may want to consider using the Short-Form-12 Health Survey (John E. Ware, Jr., 1994, revised 1998), the Quality of Life Index by Dr. W. O. Spitzer, 1980, or the COOP Chart for Primary Care Practices (Eugene C. Nelson, 1987).

The Short-Form-12 Health Survey (John E. Ware, Jr., 1994, revised 1998) is an abbreviated version of the Short-Form-36 Health Survey. This survey has 7 questions (using Likert scales from 1-5) regarding the person's views about their own health in the last four weeks. It addresses general health and how health affects the person's physical activities and daily activities. It also addresses emotional issues and feelings and whether either physical or emotional health has interfered with social activities. The Short-Form correlates extremely well with the longer, 36 health survey and offers a good way to gauge physical and emotional health. Cultural differences can create potential challenges in regards to the interpretation of questions and, ultimately, answers. A heightened awareness by clinicians can increase the reliability of results.

The Quality of Life Index, by Dr. W. O. Spitzer, has both a 5 topic self-rating scale and a 5 topic clinician

scale, which allows clinicians to compare their impressions to a client's perception. The dimensions measured Activity, Daily Living, Health, Support, and Outlook. The clinician version measures from 0 - 2 with 0 indicating lower quality and 2 indicating higher quality of life. This instrument has been used in many studies and is considered a reliable and valid tool.

The COOP scales (The Dartmouth/Northern New England Primary Care Cooperative Information Project) was developed to create a system to measure health status in physicians' offices. One of the basic tenets of the charts is that the functioning of the person as a whole is more important than that of separate organ systems. You may have seen some of the graphic charts (e.g., the "face" charts to measure feelings). Other graphic charts measure daily activity levels, social activities, physical fitness, change in health, overall health, social support, and quality of life. These charts are widely used in studies and are found to have good reliability and high validity. They are rated as useful by high numbers of office staff and clients.

The editors believe these scales fit the content of this workbook well. These and other health measures can be found in McDowell, (2006).

## Suggestion for Topic Introduction and Relevance to Participants

*"If you could do something that would help a friend, would you do it? We will assume that what you would need to do would not be too difficult."*

(Encourage responses.)

*"If you would do something good to help a friend, would you do something good for yourself? Do you treat yourself as good as you treat your friends?"*

(Pause)

*"Let's think about that! If you aren't good to yourself, maybe it's time you started."*

*"Today we will talk about what you can do to keep working on your recovery—lifestyle choices that can help you stay on your journey of recovery."*

*"Let's review the main points from our last session before we start."*

### Topic Assessment Answer Key

**There is no pre- or post-Topic Assessment for this session.**

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

## Review of Session 13: Symptom Monitoring Tools



### Main Learning Points of Session 13

What were the main learning points of Session 13? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. A symptom m\_\_\_\_\_g tool can be used daily as part of your routine.
2. Symptom monitoring can help you learn if your m\_\_\_\_\_e is working.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

**1. Yes.** How did it go? \_\_\_\_\_

\_\_\_\_\_

**2. No.** What got in the way of completing your practice?

\_\_\_\_\_

\_\_\_\_\_

If you still plan to complete your practice, when will you do it?

\_\_\_\_\_

\_\_\_\_\_

**3. I didn't choose a personal practice option.**

# Topic Assessment



Mark one:  Pre  Post

Your Score:  
+ \_\_\_\_ out of 4

**There is not a pre or post-Topic Assessment for this session.  
The emphasis today is review and the completion.**

**1. I am confident I know what to expect in the future and managing my illness.**

Strongly Disagree     Disagree     Neither Agree Nor Disagree     Agree     Strongly Agree     Unsure

**2. This information is important for me to know.**

Strongly Disagree     Disagree     Neither Agree Nor Disagree     Agree     Strongly Agree

**At the end of the session, answer these questions before turning in this paper:**

**3. This session helped me.**

Strongly Disagree     Disagree     Neither Agree Nor Disagree     Agree     Strongly Agree

**4. What I liked about this session:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. How this session could have been better for me:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Symptom Monitoring Tools

## Objectives for this Session

1. Identify 4 lifestyle choices to help you stay in recovery.

## What Can I Expect in the Future?

Most people want to know how their illness will affect their lives. “Will I ever get back to normal?” is a question they often ask their treatment team. No one can predict what will happen to you. Schizophrenia and bipolar disorder are ongoing mental illnesses that get better but cannot be cured. Most people who have schizophrenia or bipolar disorder will have to work at controlling their illness. It is very much the same way that people who have diabetes, asthma, or high blood pressure need to work at controlling their illnesses.

Frequent relapses can make your illness worse and make it harder for you to stay well. It is best for you to do everything you can to prevent a relapse. These six steps will help you:

1. Take your medicine regularly.
2. Have regular appointments to see your prescriber, who is your partner in treatment.
3. Keep track of your symptoms.
4. If symptoms get worse, tell your prescriber or treatment team immediately.
5. Live a balanced life that has enough sleep and rest, enough exercise, healthy eating, social networks, friends, fun, and good stress management.
6. Don't use alcohol or illegal drugs.

### Main Learning Point #1

**I am committed to managing my illness and getting on with my life.**

### Main Learning Point #2

**What I do in my life affects my recovery and how well I stay.**

As you continue with your treatment, your focus is recovery. Schizophrenia and bipolar disorder are medical illnesses that can be treated. There is no cure for these illnesses at this time. But for most people, symptoms can be managed. And you can get back to being healthy—a new level of healthy.

## Review & Moving Forward



The *main learning points* of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_

### Move Forward—Choose a Personal Practice Option

It's important to practice new knowledge and skills. Although this is the last session in this workbook, you may still want to practice this important subject. Please choose one option from the list below:

- 1. STUDY.** I am going to reread my handout at least once.
- 2. SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about six things to do to prevent a relapse.
- 3. LIST.** I will write the list of six things to do to prevent a relapse and post this list on my refrigerator, inside my room, or somewhere else where I will see it every day.
- 4. OTHER:** \_\_\_\_\_

### Take an “Extra Step Forward” (optional)

- 5. REMEMBER and WRITE.** I will write my story about my past relapses, and how they got me off track and made it harder for me to reach my goals. I will write what I learned and I will share that information with a member of my treatment team.

**Celebrate your accomplishments by doing something safe and fun today with someone you care about.**