INSTRUCTIONS FOR THE RECOVERY MANAGEMENT CHECK-UP

Recovery management check-ups are intended for clients who wish to receive a weekly call from a staff member at their recovery support program to keep them engaged and help them maintain their recovery plan. Recovery management check-ups also provide an opportunity for the staff member to identify clients who have severely relapsed and need to be encouraged to seek treatment.

The CARE protocol for the recovery management check-up service is a 15-20 minute telephone call to a client once a week after the client has completed 2-3 months of recovery support services. Providers and clients may begin the telephone protocol just prior to completion of the recovery support voucher to increase the likelihood of a successful transition from clinic-based to telephone-based services. The reimbursement rate for a completed check-up is $15. Either telephone calls or face-to-face check ups at the provider site are acceptable (telephone calls require prior client consent).

Develop a call completion plan with the client prior to beginning telephone sessions. Explore the client’s access to a telephone, his/her preference (calling in or being called), contingency plans for when initial attempts to complete a call fail, etc. Revisit this plan if modifications are necessary. The goal is to do whatever it takes to increase the likelihood of completed calls.

The space below each question includes prompts the staff member can use to help direct the conversation.

RECOVERY UPDATE

1. How have you been doing with your recovery?
   Recovery sustained? □ Yes □ No (skip to Question 4)
   
   PROMPTS: Reinforce client for keeping appointment. Quickly check to see if there have been any emergencies since the last contact. Review any anticipated high-risk situations from last contact—how did it go?

2. What has helped you sustain your recovery?
   
   PROMPTS: What are the most important things they are doing to remain AOD free? What are the best things about recovery? What are the most important reasons for staying in recovery now? What personal strengths do they draw on to stay in recovery?

3. Have there been specific things (stressors or triggers) that have been making it difficult to sustain your recovery? How have you been managing them? (Then skip to Question 9).
   
   PROMPTS: What are the people, places and things they know they need to stay away from in order to remain abstinent and in recovery? Are there particular dates or times of year when they will need more support to remain abstinent and in recovery? Identify upcoming high-risk situations; briefly help them problem-solve main concerns.

4. When did you relapse? Date: ________________________________

5. What triggered the relapse?
   
   PROMPTS: What led up to the relapse? What was different about this time? Are they attending needed appointments, taking prescribed medications, have sustained depression? Briefly debrief episode and review client’s efforts to contain the relapse.
6. What have you been using? How much and how often?
   **PROMPTS:** Acknowledge client’s honesty. Get enough information to determine whether referral for treatment should be considered/recommended.

7. What has worked well for you in the past when you have relapsed? What might you do this time to get back into recovery?
   **PROMPTS:** What do they need to do differently to succeed? Encourage client to talk about episode in self-help meetings and with a sponsor. Anticipate upcoming high-risk situations and help client identify coping skills to manage high-risk situations and cravings.

8. Can I help you access treatment services? (If so, document what action was taken)
   **PROMPTS:** If client has no intention of stopping use, encourage client to seek evaluation for treatment to help them regain abstinence.

**SOCIAL SUPPORT/ENVIRONMENT UPDATE**

9. Have you been going to self-help meetings such as AA or NA?
   [ ] Yes  [ ] No (skip to question 11)

10. How often do you attend self-help meetings? Do you have a sponsor?
    **PROMPTS:** How often do they share at meetings? How often do they do service? How often do they speak with their sponsor?

11. If you do not attend self-help meetings, do you have anyone in your life who you can talk to about your recovery? Have you been talking to this person(s) recently?
    **PROMPTS:** Do they have a relationship with a spiritual leader or mentor? Is a parent or other family member supportive of their recovery?

12. How often lately have you done things with people who are sober or who don’t have an AOD problem?
    **PROMPTS:** Assist client identify activities they might enjoy and that promote a pro-social network: family, church, community, hobbies.

13. Have you been progressing toward your goals?
    **PROMPTS:** What does successful recovery look like to them? What are they doing to help themselves? Help them identify one or two short-term goals for the next week (educational, vocational, legal, living situation, physical health, etc.).

**SUMMARY**

14. Is there anything else that you can think of that would be helpful to your recovery process?
    **PROMPTS:** Ask client to think ahead to the interval until the next phone call. What situations might they encounter that could increase risk for relapse?

15. Our next phone call is scheduled to take place on: Is that a good time and day for you?
    **PROMPTS:** Emphasize importance of calls and make sure they agree to the date/time. If compliance has been a problem, find out what might be getting in the way of completing the call.