

Recovery-Oriented, Client-Directed and Outcome-Informed Services Interaction Guide

I. Introduction: Begin with your recovery elevator speech, then:

- *I do things a little differently than you may have experienced before*
- *Because your ideas, resources and goals are the most important things for your long-term recovery*
- *The recovery support I provide focuses on getting what you need*
- *To do that, I need feedback from you. The forms that I use have been found to significantly improve my services if we score and chart the results as we go.*
- *To begin, the Outcome Rating Scale (ORS) helps us look at what has happened in four areas of your life in the last 7 days and it takes less than 5 minutes to complete.*
- *Would you be willing to do that now?*

II. Use the Outcome Rating Scale (ORS)

A. Explain each subscale one at a time and ask for a mark on each one.

- *I will ask you these same four questions each time we talk so that we can keep up with your progress and this is very important. First, **individually**, how have you been doing personally in terms of your physical and mental health? Do you feel well or nervous, anxious, or depressed. How you have been sleeping and eating.*
- *Marks on this line to the **left** of center is where someone would show that they are not feeling well. A mark in the **middle** would show that you feel OK most of the time but could be better, and a mark to the **right** of center would indicate feeling very healthy, personally doing fine, and things couldn't get any better than they have been in the last 7 days.*
- *Next, **interpersonally**, how are your relationships with your family, spouse or partner, children and others with whom you have a close personal relationship. Are your closest relationship going well or is this an area that has caused you distress in the last 7 days? Again, a mark toward this end of the line this end (to the **left of center**) would indicate you have a concern about your marriage, children or some other very important relationship in your life. In the **middle** shows that things are OK, or a mark to the **right** says you are getting along great with the most important people that you care about.*
- *For the **social** domain, think about how you are doing at school or work, and with your friendships beyond your family, people who you spend time with hanging out or having fun. If you are satisfied with main roles either as a student or employee and you have friends in your local neighborhood or community who support your interests and talents or skills and abilities, put a mark on the **right** side of the line. If school or work and your friendships are satisfying and enjoyable but could be better*



*put a line somewhere near the **center**. If you are not pleased with your job or school or sometimes feel isolated without friends, put a hash mark to the **left** of center.*

- *Finally, looking at the big-picture of your life. In the last 7 days, were do you see yourself **overall**. Marks in the show that you are OK, maybe some things could be better. Marks to the **right of center** say that you are great. Nothing needs to change. By contrast a mark on the **far left** end would be where you'd put a mark if things couldn't get any worse.*

- B. Use a ruler (centimeter side) to find the whole number closest to each mark. Write the number next to each line then total at the bottom. Transfer the total to the SCOREboard and put an "O" in the graph portion of the column that corresponds to the scale on the left.
- C. Clinical cutoff: 25+ = you are not feeling as much concern as people in a treatment program
Below 25 = you scored in a range that is typical of people in treatment
- D. Make sense of the score by correlating her/his described experience to the marks on the different subscales. If needed, revise marks to ensure that the rating represents the described experience.
- *On which subscale did you rate the highest? What happened in the last week in that regard?*
 - *On which subscale did you rate the lowest? What happened in the last week in that regard?*
 - *Let's compare today's rating to your previous ratings and your recovery goal(s).*
- E. Compare the current ORS score with the last rating. If change occurred, acknowledge the self-change effort(s) and review the Recovery Plan. If no change, discuss what needs to happen next to make progress toward the Recovery Plan goal(s). If little change persists over two contacts, have an urgent discussion to brainstorm options and entertain the possibility of a referral or transfer to a new resource or service.

III. Listen for Heroic Stories of Change:

Assist in telling his or her story of survival and courage. Spotlight the person's resources that may be available for further movement. Help the person acknowledge the link between past behavior changes and their role in making the change(s) happen (self-efficacy). Elicit self-change talk.

- *What have you tried so far to resolve your concern?*
- *Who has been most helpful (seems to have a special knack) with this concern?*
- *In what ways have your attempts proven successful even if only in part or temporarily?*
- *What are your ideas about why your attempts have worked (not worked)?*
- *What do you think might be preventing this concern from being resolved?*



III. Validate the Person's Experience:

Validation occurs when one's thoughts, feelings, and behaviors are understood, accepted, and believed. Accept the person at face value and search for justification of his or her experience - replacing other's invalidation that may be necessary. Affirm the person's concerns and highlight the importance of her/his struggle. Strive for a 5:1 ratio of positive (active and constructive) to negative (passive and destructive) statements.

- *How did you do that?*
- *Where were you when you decided to do that?*
- *When did you make that decision?*
- *What was better after that?*

IV. Match the Person's Theory of Change and Work on Her/His Goal(s):

The theory of change is one's ideas and preferences about how she or he can best be helped. This conversation unfolds from an expressed curiosity about the person's ideas, attitudes, and past successful methods of change. Honor the person's theory by following and encouraging change talk then assist in selecting a recovery pathway(s), technique(s) or procedure(s) that fits her/his beliefs. Ask directly about goals, and continuously monitor and discuss progress. Review the Recovery Capital Plan and Scale during each interaction.

- *What changes have occurred previously in your life? How does change usually happen?*
- *Many times people not only have a hunch about what is causing the concern but also what might help to resolve it. What ideas do you have?*
- *How do you (what is your role) initiate or facilitate change?*
- *Who is helpful to you in initiating, facilitating or maintaining change? What does s/he do?*
- *What events usually happen before you have made successful changes in the past?*

V. Craving Rating Scale

What has your craving level been during the last 7 days, including the last 24 hours. On a 0 to 10 scale with 0 meaning you haven't even thought about using or drinking, 5 = thought about using or drinking but didn't, and 10 = used or drank, how were your cravings in the last 24 hours?

Enter the Craving Rating on the SCOREboard.



VI. Review the Recovery Capital Scale and Plan

- *Many people find it helpful to periodically think about what they want to do to make progress in the next 5-7 days on their recovery. Here is a Recovery Capital Scale and Plan that may help you identify your strengths and areas where you can improve your recovery resources and supports. That's called recovery capital. Would you be interested in reviewing this?*

If this is your first interaction with this person ask:

- *If you left your glasses at home or otherwise need help reading, I'll be glad to go over the instructions on the Recovery Capital Scale with you.*

Assist with formulating goals and activities but allow her/him to write, or write for them, the goals and activities in their own words. Use resources that worked previously and suggest only culturally-congruent programs, facilities and agencies.

If this has not come up before now ask:

- *So one last thing. Do you have a safe and sober place to stay tonight?*

VII. At the end of each interaction, solicit feedback via the Session (or Relationship or Group Session) Rating Scale (SRS).

Review results and discuss, especially if the score is less than 36.

- *How could our next interaction be better or more useful?*
- *What could I do differently to make our conversations better?*

Adapted from:

1. Duncan, B. (2010). *Six skills of client-directed, outcome-informed services*. Available at www.heartandsoulofchange.com.
2. Rollnick, S., & Miller, W. R. (2002, 2nd ed.). *Motivational interviewing: Preparing people for change*. New York: Guilford.
3. Seligman, M. E. P.. (2011). *Flourish: A visionary understanding of happiness and well-being*. New York: Free Press.

