South Central (Rural) MIRECC Clinical Education Product

ACCESS: Adjusting to Chronic Conditions with Education, Support, and Skills

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ACCESS
ADJUSTING to CHRONIC CONDITIONS
with EDUCATION, SUPPORT, and SKILLS

Clinician Manual
Version 3.1

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**Note:** Example clinician language *(in blue)* is intended for illustrative purposes only. You are encouraged to focus on the important concepts in each session or module rather than verbatim adherence to this example clinician language.
Overview

ACCESS (Adjusting to Chronic Conditions with Education, Support, and Skills) is a psychosocial intervention specifically designed to address the physical and emotional issues faced by chronically ill patients. ACCESS involves six active treatment sessions (weekly meetings of 45-60 minutes for session 1, and 30-45 minutes for sessions 2-6). Content in sessions 3-6 is flexible, allowing the flexibility to spend more than one session on focused skills, as needed. Follow-up booster sessions (10- to 15-minute phone calls) are used to help solidify changes over time. The length of the total treatment (active treatment and boosters) is 16 weeks.

The basic premise and novelty of ACCESS rest in the presentation of intervention concepts and treatment goals. ACCESS clinicians work with patients to acquire skills and strategies designed to address both their physical and emotional needs. For example, physical disease self-management strategies, behavioral activation, and changing thoughts (e.g., cognitive-behavioral therapy) all have the potential to impact physical and/or emotional health. Within the ACCESS intervention, these approaches have been modified to meet the unique needs of the medically ill by targeting both physical and emotional health outcomes (see figure below).

### ACCESS Intervention

**Goals:**
- Empower individuals via patient-centered education related to:
  - Chronic illnesses and physical symptoms
  - Emotional health and well-being
- Teach self-management strategies (to improve health/well-being).
  - Living healthy (exercise and nutrition)
  - Managing your physical health (talking to your doctor, managing medications, coping with flare-ups)
  - Using thoughts to improve wellness
  - Increasing pleasant events (changing behavior)
  - Learning how to relax
- Use goals and action plans to increase skill use and success.

**Physical Health Outcomes**
- Improve physical health and well-being.
- Live healthy (diet and exercise).
- Minimize physical symptoms.
- Improve physical functioning.
- Increase perceived control (reduce impact) of chronic illness.

**Emotional Health Outcomes**
- Improve emotional health and well-being.
- Instill hope.
- Instill sense of emotional control.
- Learn how to identify and manage negative emotions (depression, stress, worry).
- Increase pleasant events.
Intervention Outline

Core Sessions 1-2
1. Chronic Cardiopulmonary Disease and Stress (in-person appointment)
2. Understanding Personal Impact and Increasing Control (in-person or telephone option)

Elective Modules (Sessions 3, 4, 5) (in-person or telephone option)
A. Taking Control of Your Physical Health
   1. Living Healthy (Exercise and Nutrition)
   2. Managing a Chronic Illness (Talking to Your Doctor, Managing Medications, Coping with Flare-ups)
B. Using Thoughts to Improve Wellness
C. Increasing Pleasant Activities
D. Learning How to Relax

Wrap-up Session (Session 6; Week 6)

Booster Sessions (1 and 2 Months Post Active Treatment)

Patient Brochures
1. Cardiopulmonary Education
   a. Chronic Obstructive Pulmonary Disease
   b. Heart Failure
2. Emotional Health and Well-being
   a. Chronic Disease and Stress
   b. Sleep Skills
   c. Problem-Solving
   d. Dietary Guidelines
Core Modules
Session 1
Chronic Cardiopulmonary Disease and Stress

GOALS:
- I. Provide information about ACCESS – how we intend to help.
- II. Introduce the ACCESS materials and procedures.
- III. Learn from the patient about his/her chronic condition, including any feelings of stress or negative emotions he/she has experienced.
- IV. Discuss overlap between physical and emotional health, including concept of self-management.
- V. Discuss concept of quality of life as it applies to the patient.
  - 1. Quality of Life Worksheets
  - 2. Most pressing concerns
  - 3. Strategies for improving quality of life
- VI. Introduce home practice (narrative exercise, past attempts to cope).

Physical Health Outcomes
- Increase physical symptom recognition.
- Gain insight into your chronic illness and its impact.
- Begin coping strategies for symptom management.

Emotional Health Outcomes
- Increase sense of hope.
- Increase control and power.
- Increase your ability to recognize stress and depression.
- Begin coping strategies for managing stress.
Session 1
Chronic Cardiopulmonary Disease and Stress

Session content

☐ I. Provide information about ACCESS – how we intend to help.
☐ II. Introduce the ACCESS materials and procedures.
☐ III. Learn from the patient about his/her chronic condition, including any feelings of stress or negative emotions he/she has experienced.
☐ IV. Discuss overlap between physical and emotional health, including concept of self-management.
☐ V. Discuss concept of quality of life as it applies to the patient.
  1. Quality of Life Worksheets
  2. Most pressing concerns
  3. Strategies for improving quality of life
☐ VI. Introduce home practice (narrative exercise, past attempts to cope).

I. Provide information about ACCESS – how we intend to help.

A. Discuss confidentiality (some patient information may trigger a required release of information – e.g., suicidal or homicidal thoughts, child or elder abuse).

B. Introduce the purpose and rationale for the intervention.
- Instill hope.
- Empower individuals.
  - The purpose of this intervention is to empower you to take more control over your physical and emotional health. I want you to know that there is hope, and that I am here to help you to improve your health and well-being.

One main way our work will improve your health and well-being is by increasing your ability to effectively manage your physical and emotional health, or your ability to self-manage. As part of our work together, you will learn new or enhance existing skills to help you manage your physical and emotional health.

Bottom-line: What you do in your life can significantly impact your health and well-being. Being an active patient is critical.
II. Introduce ACCESS materials and procedures.

A. Discuss the ACCESS Workbook.
   - Give patient the workbook. Explain purpose and expected use (e.g., resource, workbook exercises, telephone sessions).
     - We are providing you with this workbook to assist our work together and to give you something to take with you after our sessions.
     - Please keep this binder and refer to it for each of our sessions, whether we meet in person or over the telephone.
     - The first few pages include the name of the program, names of individuals who contributed to its creation, and a table of contents.

B. Discuss ACCESS procedures and modules.
   Refer to workbook pp. 2-3, "Overview of ACCESS," and review.
   - Please turn to p. 2, which provides an overview of the ACCESS intervention. The next page lists the number of sessions and module topics. Each module can be customized to meet your specific needs.
   - During this intervention, you will choose skills related to self-management to help you improve your quality of life. For example, you may wish to know more about your medical condition; you may wish to learn how to better self-manage your physical illness; or you might want to obtain skills to improve your mood (or you may want to get a combination of these skills).
   - Every patient in the ACCESS intervention participates in the first two sessions. After the second session, you will work with me to select elective modules to meet your individual needs. Elective modules are listed in the middle of p. 3.

   - Summarize overview highlights (convey to patient in summary fashion):
     - ACCESS is a skills-based intervention to help you cope with the stress of chronic illness.
     - It involves an individualized plan of action.
     - Core sessions and elective modules allow you to choose what will work most effectively for your individual needs.
     - The treatment consists of six sessions with two follow-up booster sessions.
     - Each session will last approximately 30-45 minutes.
     - Telephone meetings are an option. You can decide whether you prefer to have any or all remaining sessions by telephone.
What is ACCESS?
A skills-based intervention specifically designed to help chronically ill patients acquire skills and strategies to address the physical and emotional difficulties that often arise in the presence of a medical illness.

How will ACCESS help me?
You and your clinician will work together to decide upon specific topics to cover and skills to learn ("plan of action") that meet your individual preferences and needs. Designing a plan of action will include choosing specific "modules" based on which modules you and your clinician think will most dramatically improve your life.

Each module covers a specific skill or set of skills that generally take one session to complete.

C. Introduce session diagrams.
Because each session targets physical and emotional health improvements, the workbook provides an overview of session goals at the beginning of each session.

- Direct patient to the "Session Overview (Goals and Possible Outcomes)" handout in the workbook on p. 5. Review handout with patient.

  - Here is an example of diagrams that we will use for each session. In today's session, the top box lists session goals, and the bottom circles list possible positive outcomes of the session.
  - We will begin future sessions with these diagrams so that we are both clear as to what we will cover during the session.
Session #1
Chronic Cardiopulmonary Disease and Stress

Session Overview (Goals & Possible Outcomes):

GOALS:
- I. Provide information about ACCESS - how we intend to help
- II. Introduce the ACCESS materials and procedures.
- III. Learn from you (the patient) about your chronic condition, including any feelings of stress or negative emotions you have experienced.
- IV. Discuss overlap between physical and emotional health, including concept of self-management.
- V. Discuss concept of quality of life as it applies to you.
  1. Quality of Life Worksheets
  2. Most pressing concerns
  3. Strategies for improving quality of life
- VI. Introduce home practice (narrative exercise, past coping).

PHYSICAL HEALTH OUTCOMES
- Increase physical symptom recognition.
- Gain insight into your chronic illness and its impact.
- Begin coping strategies for symptom management.

EMOTIONAL HEALTH OUTCOMES
- Increase sense of hope.
- Increase control and power.
- Increase your ability to recognize stress and depression.
- Begin coping strategies for managing stress.

D. Introduce patient brochures.

Direct the patient to the brochure portion of the Patient Workbook.

I would also like to show you some additional information in your workbook. This is optional, so review it at your leisure. I will only briefly introduce you to these materials today, but we can return to them in later sessions if you have questions.

I would like to highlight some important aspects of these brochures and leave the rest for you to explore after our meeting or periodically when you have questions.

1. One of the most important "take-home messages" from the cardiopulmonary brochures is that, although you have a chronic medical condition (or conditions), you can continue to make the most of your life.

2. In essence, the educational manual encourages you not to feel that your chronic condition dictates your life but, rather, that you control many aspects related to how you live. Our goal is to instill hope and increase feelings of control over your illness and mood.
Emotional Health and Well-being Brochures

Also included in your workbook are brochures on emotional well-being. These provide an overview of common stressors associated with having a chronic medical condition, ways to improve sleep, and ways to improve your ability to solve difficult or complex problems. We also have included handouts that might help us down the road. For example, there is a worksheet or log for monitoring or tracking your self-management skills or daily activities and some dietary guidelines.

Wrap-up the brochure introduction.

Do you have any questions for me about the educational materials?

III. Review the patient’s current physical and emotional health status (Clinician Notes).

I would like to now spend a little time getting to know you better.

- Physical health and well-being
  1. In your own words, please tell me a little about how you are doing.
  2. How is your physical health?
  3. How does your physical health impact your life?
  4. When are you most aware of your condition(s)?
  5. What in particular seems to trigger physical symptoms of your illness?

Given all the changes and challenges of having a chronic physical illness, it is very common for patients to experience higher levels of stress and/or depression. For example, you may feel emotional stress if you are having trouble catching your breath (directly related to physical health); or you may feel stress or depression about your future (possibly related to your concerns about your health); or you could be stressed about your family or friends (related or unrelated to your illness).

- Emotional health and well-being
  1. Are there times when you feel stress?
  2. How would you describe your mood over the past few weeks?
  3. Being more specific, have you experienced any times when you felt stress, depression, worry, and/or anxiety?
  4. If so, what was going on; and what are your thoughts about what triggered those feelings?
IV. Discuss the overlap of physical and emotional health status.

As you may already be aware, there is a **natural overlap between physical and emotional health**. For example, when you feel bad physically, your mood is likely to be poor as well. When your mood is very good, you may be less likely to recognize problems with your body (leading to your feeling better).

Because there is this overlap, the **ACCESS intervention was specifically designed to teach you skills that will affect both areas** (although some techniques may favor one or the other).

Discuss this issue with the patient, and get an understanding of his/her level of agreement.

In what ways have you noticed this overlap in your own life?


When I talk about skills to improve your physical and emotional health and well-being, I am specifically referring to your ability to "self-manage" issues as they come up in your life. Let's take a few moments and discuss what self-management entails. Take a look at page 7.

**Define self-management.**
Self-management is a person's ability to manage his/her symptoms, using skills and techniques provided by doctors and counselors.

**Give a little information about skills and techniques for self-management.**
These skills and techniques usually include making personal or lifestyle changes that work in combination with your medical providers to maximize your health. For example, increasing your amount of exercise can help you reduce physical symptoms, increase strength, and reduce negative emotions.
• Ask patient – What are your thoughts about self-management?
• Praise and reinforce positive responses.
  I think it is wonderful that you already see the benefits of being an "active" patient. I am looking forward to finding ways to introduce new skills to help you improve your life.
• Encourage patients who are uncertain or negative.
  I have seen this program work well for others, and I am hopeful that we can work together to help you manage your life more effectively.

V. Discuss quality of life as it applies to the patient (Clinician Notes).
  The overall goal of ACCESS is to improve your quality of life or well-being.

A. Discuss Quality-of-Life Worksheets.
  Direct patient to the "Understanding Your Quality of Life" worksheet and the "Improving Your Quality of Life" worksheet (pp. 9-10).

  o To improve your quality of life, I first need to better understand what areas of your life are going well and what areas you would like to improve. Let's look at a couple of worksheets that will help me better understand your quality of life.
  o Let's complete these worksheets together. I will take notes while you mark your responses in your workbook. Record patient responses on the worksheet in clinician's notes while the patient records his/her responses in the workbook.
B. Identify the most pressing concerns (Clinician Notes).

- Refer to p. 10 of workbook: "My Most Pressing Concerns."
- Let's both summarize your most pressing concerns by listing two or three difficulties in your workbook. Record patient responses on the worksheet provided in Clinician's Notes while the patient records his/her responses in his/her workbook.

My Most Pressing Concerns

Summarize the previous two worksheets and list your top 2 or 3 concerns.

1. ____________________________
2. ____________________________
3. ____________________________

List some possible coping strategies you might use to address these concerns.

1. ____________________________
2. ____________________________
3. ____________________________
C. Identify strategies for improving quality of life.

By identifying your most important concerns, you have helped me to better understand your unique needs so that you and I can work together to find skills most likely to help you.

I would like to spend a few minutes exploring your thoughts about how you might be able to improve or cope with the problems we just identified. I would like to see if you have already identified some coping strategies and explore some options with you.

During future sessions, I will draw heavily from your ideas about how to improve the quality of your life. Our discussion today has been helpful in providing me with a more thorough understanding of your current status, and I will try to use this knowledge to help you find the most appropriate skills for you.

D. Discuss home practice.

As part of our work together, I will be asking you to complete assignments between our meetings. We will meet weekly to discuss your progress and work on skills, but the time between sessions will be important for you to practice and see if what you and I came up with is working for you.

I am going to ask that you do two things this week before we meet for our next session: First, I would like for you to complete a writing assignment. . . .

**Narrative Exercise**

- **Explain the writing assignment.**
  - I would like for you to complete a writing assignment before the next session that will help both of us better understand the impact of your condition on your life. The information gathered from this assignment will help us choose which modules will most benefit you.

- **Direct patient to “Narrative Exercise” on pp. 11-12 of workbook.**
  - This first assignment consists of writing a narrative statement about the impact and meaning of your chronic condition on your view of yourself, others, and your future.
  - Please complete the questions in your workbook about what it means to you to have a chronic medical condition.
  - Consider the effects your illness has had on your beliefs about yourself, on your life (including work/hobbies and other people, including family), and on your thoughts about your future.
  - If you have difficulty with this exercise, or if you want to learn more, additional questions will help you express how you feel about having a chronic medical condition.
  - To reduce the amount of writing, you may want to simply write down some notes so that we can talk about your experiences and thoughts next session.
**Narrative Exercise**

Home practice #1 (Session 1)

Please respond to the following prompts/questions about what it means to you to have a chronic medical condition. Feel free to write notes rather than full sentences in order to save time:

- Consider the effects your illness had on your beliefs about yourself.

- What impact has your illness had on your life (including work/hobbies and other people including family)?

- What impact has your illness had on your thoughts about your future?

If you have difficulty with this exercise, or want to learn more, here are some additional questions designed to help you express how you feel about having a chronic medical condition.

- Has your physical illness impacted your sense of hope? If so, how?

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**What You Are Already Doing to Cope**

Home practice #2 (Session 1)

What are you currently doing (or have done in the past) to help you manage your physical and emotional health and well-being?

What is working for you now?

What did not work as well?

Examples of coping might include:
- working on hobbies, activities or staying busy
- working actively with your doctor
- talking to or getting reassurance from a friend or loved one
- using positive thinking to help cope with a difficult situation
- using skills such as breathing deeply to help you relax

---

E. Discuss past attempts to cope.

Refer patient to p. 13 of workbook.

Second, I would like for you to think more about your most pressing concerns and what you have tried in the past (what has worked, what has not worked) (see workbook, p. 13).
F. Wrap-up session and schedule next session.

- Do you have any questions?
- Do you have any feedback for me at this point (what is working, not working)?
- What are you taking away from our meeting today?

- Next appointment.
  - During your next session, we will review your home practice and discuss what intervention strategies will best meet your needs.
  - Let's schedule the date and time for that.

(Refer to page 1 of workbook.)

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**Scheduling Form**

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Session 2
Understanding Personal Impact and Increasing Control

Goals:
- I. Review the home practice:
  - A. Personal meaning of having a chronic illness
  - B. Past and current self-management approaches
- II. Set initial goals.
- III. Discuss intervention options and match to individual patient needs.
- IV. Discuss action plans.
- V. Next assignment: Apply and monitor first action plan.

Physical Health Outcomes
- Increase insight into struggles of having a chronic condition.
- Use of goal setting and action plans will help guide the way to improved health.

Emotional Health Outcomes
- Increase feelings of control and power.
- Build hope and confidence.
- Talking about concerns will decrease negative emotions.
Session 2
Understanding Personal Impact
and Increasing Control

Session Overview

- Refer patient to page 15 of workbook: “Session #2: Understanding Personal Impact and Increasing Control.”
  - As we discussed in the last session, we will use this diagram at the beginning of each session to give you an overview of the content and purpose of that session.
  - As with most handouts we will review together, I won’t go over every point; but I will provide a summary for you. The handouts are more detailed than necessary for the purposes of in-session discussion so that you can return to them later and read them on your own if you find them helpful.

- Review session content (see box at the top of preceding page).

- Review expected outcomes (see circles at the bottom of preceding page).
  - We will work together to establish goals and select intervention strategies that will best meet your needs.
  - These goals and strategies are both meant to provide a structure for future sessions and give you a sense of hope for and control over your future.
  - Ultimately, we hope to increase your quality of life by decreasing negative physical and emotional health outcomes.
I. Review the home practice.
   a) Review the Narrative Exercise.
   • Refer patient to the home practice “Narrative Exercise” on pp. 11-12 of the workbook.
     o I want to take a few minutes to go over the home practice we talked about during your last session. Please share any thoughts you have with me (either read your response or talk it through).

Workbook Pages 11-12: Narrative Exercise

Session #1 Home practice

Please write a few sentences about what it means to you that you have a chronic medical condition.

• Consider the effects your illness has had on your beliefs about yourself.
• What impact has your illness had on your life (including work/hobbies and other people including family)?
• What impact has your illness had on your thoughts you have about your future?

If you have difficulty with this exercise, or want to learn more, here are some additional questions designed to help you express how you feel about having a chronic medical condition.

• Has your physical illness impacted your sense of hope? If so, how?
• Has your physical illness reduced your feelings of independence or usefulness? If so, how?
• Have you recognized any losses related to your physical illness? If so, please explain.
• Do you feel you have control over your physical illness, or do you often feel that your physical illness controls you? Please explain.
• Do you feel overwhelmed, have trouble making decisions, or simply feel that you are stuck and need some help moving forward?

Discuss the patient’s response to the Narrative Exercise (Clinician Notes).

o What was your reaction to this work?

o What areas of your life did you identify as potentially important for our work together?

o Specific areas of potential intervention should be identified and written down (in the workbook and the Clinician’s Notes if appropriate). If the patient cannot identify how his/her life would be different through the changes he/she identifies, help to identify an area of his/her life in which change is possible. You may ask several optional questions to assist in identifying reasonable changes:

• Optional probes:
  • How would your life be different if you could make these changes?
  • What parts of your life could you change that would help you?
Summarize the Narrative Exercise, review Home Practice #2 – (what's working), and discuss module selection.

- Summarize the patient's response in relation to physical and emotional needs.
  - The ACCESS intervention is designed to address both physical and emotional needs. Based on what I am hearing, you appear to be struggling most with . . . (or you appear to be struggling with both).
  - Is this correct?
  - You may write these down in the Clinician Notes on the page titled “Intervention Focus” and then modify with patient feedback (Clinician Notes).

b) Review Home Practice #2 (“What You Are Already Doing to Cope”).
Refer to page 13 of workbook.
I asked you to also think about what has worked and not worked for you in terms of managing your physical and emotional health.
Let's take a couple of minutes and go over your thoughts about that assignment.
We have focused on a couple of “most pressing concerns” – what have you done to address these concerns already – what has worked, and what have you tried that has not helped?

Summarize these between-session assignments in a way that will foster a discussion focused on selecting ACCESS elective modules. Work to identify new and/or expanded skills to introduce to the patient (rather than trying something he/she has already done). For example, a patient may have already tried to change his/her diet/nutrition but been only partially successful. Try to work with what the patient found helpful and not helpful to identify avenues for future work / skill building (Clinician Notes).

II. Set broad patient goals (what the patient hopes to accomplish during treatment).

Refer to page 16 of workbook- “What I hope to accomplish . . .”

Given the discussion we have just had, what would be some specific goals that you would like to reach by the end of our work together?
Framed another way, if the ACCESS program were successful, what would be different about your life?

For patients who have difficulty answering these questions, you may have to help construct goals through informed questions. For example, identifying specific goals is sometimes a difficult process, and I have some ideas for potential goals based on what you have shared with me. Can I put these ideas out on the table for us to discuss? [Once the patient says yes, then proceed] “You told me that you are struggling with the physical limitations of having heart failure. You are no longer able to do the things you used to be able to do, and this frustrates and saddens you at times. Could one of our goals be to decrease the amount (frequency or intensity of episodes) of frustration you feel related to having heart failure? Might another goal be to reduce the number of times you feel limited by your heart failure?
Identify and list one or two broad goals for the intervention.

- Complete the top half of the worksheet:
  - The one or two goals for our work together are: (complete on worksheet)
- Note to clinician: complete bottom section of this form (listing of modules) after modules have been introduced in the next section).

III. Selecting ACCESS Modules

To meet your specific goals, you and I will select the type of sessions that we feel will benefit you most.

- Explain how the focus in the next several sessions will be the patient's individual needs.

ACCESS is all about teaching skills to help you self-manage the physical and emotional issues that go with having a chronic medical condition.

These first two meetings are designed to provide you with an overview and basic techniques. Our subsequent meetings will be highly focused on teaching and practicing self-management skills.

Refer patient to the "ACCESS Elective Modules" handout on page 17 in the workbook.
Earlier in our meeting today, we discussed that ___ and ____ were your most pressing concerns. We also discussed what things are working or have not worked to help you in these areas. Thinking about these current concerns, I would like to help you select some skill modules for our future work.

- I have some suggestions but, ultimately, I want you to feel comfortable choosing the skills that you think will benefit you the most.

- Page 17 of your workbook provides an overview of the skills offered in ACCESS. I would like to take a minute to introduce you to these skills and have you select two or three to focus on for our future meetings.

- Review the different modules with the patient.
  - Select specific modules for subsequent sessions.
    - What are your thoughts about which modules might best meet your needs?
    - On the basis of what I have learned from you and what you think might most help you, I would recommend (insert pick).
    - Negotiate which modules would most likely help the patient, being sure to take into account his/her preferences. (Clinician Note)
    - Let's decide on an order of approach to these modules, knowing that we can change our minds later. What is most important to you and what will have the greatest impact on your life should go first. Indicate the order on the page in the patient's notes listing the specific modules (see workbook, page 16).

**IV. Introduce action plans.**

- Define the term action plan and how action plans relate to modules.

Refer patient to page 18 of workbook

- You are making good progress. Now that we have identified several modules that will help you achieve your goals, I would like to take your goals and make them more detailed.

- To reach your goals, we will regularly use action plans. An action plan is a practical tool for accomplishing your identified goals. An action plan involves a specific action or set of actions that are realistic and accomplishable in the near future. It is a group of steps you need to take to reach your goals.

  Consider an analogy of taking a long driving trip across the country. When you start out, you decide where you want to end up – you decide where you want to go / your destination. In action planning terms – this is your goal – to make it to destination "X." In our work together your goal(s) is/are to... (tie in with previous discussion).
To make it to your destination (meet your goal), you need a specific plan of action. Back to the cross-country trip example for a moment... to make it to destination "X," you need a plan of action, meaning that you need to make sure you know how to get there and what you will require in terms of supplies, etc. So you would need to plan how many days you will be gone, what roads you will take, how much money you will need, etc. Once you lay out these specific requirements, you can then plan your next steps (e.g., saving money, asking for time off work, etc.)

When it comes to action plans for your health, you and I will need to identify the things you will need to do to reach your goals. So when I refer to an action plan, I am talking about the specific steps needed to reach your goals (not the goals themselves).

- Refer patient to the “Action Plan” worksheets on pp. 19-20 in the workbook.
- Today, I want to introduce you to our action plan worksheet and work with you to complete your first action plan.
  - **Explain the basics of a successful action plan.**
    - There are a few things you can do to make your action plans more effective. Make them
      1. Something YOU want to do.
      2. Reasonable (something you can expect to be able to accomplish that week).
      3. Behavior-specific (losing weight is not a behavior; walking 1 mile a day is).
    - Answer the questions:
      a. What?
      b. How much?
      c. When? (Think about your day/week—which days, times, etc.)
      d. How often?
      e. Where?

Let's pick one of your primary goals.

Can you think of anything you can do between now and our next session (in one week) that might help you to make progress toward your goal?

Guide the patient toward selecting a very simple behavior-specific goal for the first action plan.

If patient is stuck, you may need to help brainstorm possible ideas. It may be helpful to have in mind one or two examples of action plans that other patients who went through the ACCESS treatment have selected in the past.

If patient provides an idea or two, the therapist should work with the patient to complete the Action plan worksheet by answering the questions under what makes a successful action plan.

- **Work with the patient to complete the initial action plan (page 19).**
Instill hope and encourage patient participation.

- Basically, you and I have worked on laying the foundation of our future work; and I hope you are feeling a better sense of direction and maybe even increased hope about your future and control over your life.
- We have also taken some specific steps toward helping you to feel better. These goals and action plans will serve as the foundation of our work together.
- Most importantly, I want to thank you for being an active participant in this process. We have found that patients often provide the most creative and useful strategies. The more involved you are in this process, the better your chances of improving your quality of life because you know yourself better than I do.
- Additionally, strong involvement will enhance your sense of control.
  - Research indicates that a sense of control is very important in decreasing or even preventing feelings of anxiety and depression when stressors such as physical health problems occur.
  - All the changes you come up with and implement through this treatment should enhance your sense of control over your life.

V. Assign home practice.

Remember that your assignment is to carry out your first action plan. We can talk next week about what worked (or what did not work) and continue to improve your health and well-being.

We have also included a home practice log on page 20 of your workbook. This is another way to monitor whether your action plan is working that allows you to make comments about how things went for you over the past week. Let's plan to talk about your action plan first thing next session to see how you are doing.

Wrap-up and schedule the next session.

- Schedule the next session. This should be written in the patient's workbook (Clinician Notes).

For our next session, would you like to meet in-person or by telephone? Let's plan to meet for our next session on __/__/__. Before we end, go ahead and write down the date and time of our next session in your workbook on page 1 (behind table of contents).

Refer to page 1 of workbook.
Elective Module A

Taking Control of Your Physical Health
(Note to Clinician: Concept Review 1 (Heart Failure) and/or 2 (COPD) are additional resources to inform your use of Module A.)

Session Overview (Goals & Possible Outcomes):

Goals:

- I. Review home practice from prior session.
- II. Review module specifics, and discuss how controlling physical health symptoms can improve quality of life, well-being, and mood.
  - Living Healthy (exercise and nutrition)
  - Managing a Chronic Illness (How to talk to your doctor, managing medications, coping with flare-ups)
- III. Review concepts of self-management and goal setting.
- IV. Review what patient is doing and has done in the past to improve physical health.
- V. Select submodules.
- VI. Complete self-management skill submodules.
- VII. Set goals and action plan.
- VIII. Assignment- Apply and Monitor Action Plan

PHYSICAL HEALTH OUTCOMES

- Increase energy.
- Improve communication with your doctor.
- Better manage your medications and side-effects.
- Better manage symptom flare-ups.

EMOTIONAL HEALTH OUTCOMES

- Increase feelings of control and confidence.
- Decrease feelings of depression and low energy.
Module A
Taking Control of Your Physical Health

Session Overview
I. Review home practice from prior session.
II. Review Module A and rationale for selecting this module.
   a. Provide overview.
      Living Healthy (exercise and nutrition)
      Managing a Chronic Illness (How to talk to your doctor, managing medications, coping with flare-ups)
   b. Discuss how controlling physical health symptoms can improve quality of life, well-being, and mood.
III. Review concepts of self-management and goal setting.
IV. Review what patient is doing and has done in the past to improve physical health.
   a. What is patient doing currently (or has done in the past) to improve physical functioning?
   b. What skill(s) does patient want to develop / improve upon?
V. Select individual skills.
VI. Administer self-management skills.
VII. Set goals and action plan.
VIII. Assignment- Apply and Monitor Action Plan
   a. Implement action plan.
   b. Monitor selected Module A skills over the coming week.

Expected Outcomes
- This module will help you develop self-management skills for improving your health and well-being. These skills include:
  - Healthy eating and exercise to increase energy
  - Learning new skills to better work with your doctor and healthcare team
  - Managing your medications and their side-effects
  - Better managing symptom flare-ups
- Benefits:
  - Self-management skills will lead to feelings of control and power.
  - Self-management can directly improve your physical functioning, as well as your mood.
  - Feeling better physically may also decrease feelings of depression.

ANY QUESTIONS?
I. Review home practice from previous session.
   • Was patient able to carry out action plan?
     If so, was the plan successful? Did the patient meet his/her goals?
     If not, what got in the way? How can the plan be modified?
   • If patient has completed other skill modules, please also review use and/or challenges associated with those other skills.

II. Review content of Module A – Taking Control of Your Physical Health, and why patient chose this module
Refer to page 21 of the patient workbook.

A. Overview of Module A
This module was developed to help individuals feel more in control of their physical health. It includes ways to increase healthy living (diet and exercise), as well as ways to help to manage a chronic illness (how to talk to your doctor, managing medications, coping with flare-ups).

When we talked earlier in session #2, you and I discussed this module as another way for you to improve your physical health and overall well-being. I remember talking specifically about . . . (summarize discussion with a focus on needed skill development or expansion).

B. Discuss how controlling physical health symptoms can improve quality of life, well-being, and mood.
As you are probably already aware, changes in your physical health can dramatically impact your overall quality of life and well-being. The purpose of Module A ("Taking Control of Your Physical Health") is to provide you with strategies to improve your physical health.

It has been a little while since we spoke about this module; do you still feel it may be helpful? Do you have any questions?

III. Review concepts of self-management and goal setting.
Refer to workbook, page 7.

It is worth revisiting the self-management information on page 7 of your workbook. In this diagram it shows how physical health (e.g., having a chronic health condition) can lead to decreased quality of life but how self-management activities can improve feelings of control and improved quality of life by decreasing the impact of having a chronic health condition.

Bottom line . . . by changing what you do in your daily life, you can live a fuller, happier life with fewer restrictions. Even if you cannot stop your physical health symptoms, the thoughts or attitudes you have can make a huge difference in how you feel.

I would like to work with you today to identify some skills you can master to improve your physical health and to limit your physical health conditions so that they do not interfere too much in your life.
IV. Explore patient's current and past attempts to improve physical health.
   a. Explore what patient has done in the past (or is currently doing.
      What have you done already in these areas?
      What is working for you now (or what has worked in the past)?
      What have you tried that has not helped? (What should we stay away from?)
   b. What skills does the patient want to develop or improve upon?
      Where would you like to start today?
      Facilitate a discussion of physical health module and which skills the patient
      would like to focus on (*note: patients and therapists do not need to cover all
      of the skills in the Taking Control of Your Physical Health Module). For
      example, you are encouraged to customize the module to fit the individual needs
      of the patient (e.g., diet and nutrition only, or diet only, etc.).

V. Select individual skills,

You and the patient select individual skills to review in session (based on patient
interest and clinical need – as determined by you). Selection may include one or more
skills (but likely no more than two or three).

Instruct patient to turn to page 22 of the workbook, which outlines the skills
in Module A.

   Skills may include one or more of the following
      Exercise
      Nutrition
      Talking to Your Doctor
      Managing Medications
      Coping with Flare-Ups

*Note: “Talking to Your Doctor,” “Managing Medications," and “Coping with Flare-ups” are most
easily discussed as a collective group relating to managing a chronic illness.

VI. Administer / review selected Module A skills (see submodule
instructions).

VII. Set action plan for all skills covered (see instructions within each
submodule).

VIII. Assign home practice to carry out and monitor selected Module A
skills over the coming week.

Wrap-up and schedule the next session.
Living Healthy: Exercise/Fitness

- Refer to the Exercise/Physical Fitness handout on pp. 23-24 in the workbook. The patient can follow along with you as you give instructions throughout the session.

Exercise/Physical Fitness

What do you hope to accomplish?
1: __________________________
2: __________________________
3: __________________________

Steps for designing an exercise/fitness program
1. Begin by discussing and obtaining permission to undertake exercise with your doctor.
2. Keep your exercise goal in mind.
3. Choose exercises you want to do, and can do.
4. Choose the time and place to exercise; make an action plan designed to meet your goal.
5. Make an exercise diary or calendar to keep track of your progress.
6. Revise your program as needed.

Benefits of exercise
Physical activity and exercise are not only vital to your health but can actually be fun too. Exercise is a useful tool to manage your illness and for making everyday activities less stressful. Regular exercise actually improves your strength, energy, and self-esteem, and even lowers feelings of anxiety and depression.

Formal and informal ways to exercise
Daily exercise can include both formal planned activities and simply being more physical in everyday life. Your day is probably filled with great opportunities for being more active, or perhaps a formal exercise program is more helpful.

Schedule exercise
Setting aside specific blocks of time during the week is a great way to start a formal exercise program. An informal goal might not require a scheduled time but should include a plan to be more active in your daily life. Whether formal or informal, it is important to choose a goal (something you want to do) that exercise can help you reach.

Steps involved in choosing an exercise goal and making a plan to be more active
1. Choose a goal, thinking about why you can’t or don’t do this now.
2. Decide what about your abilities makes it difficult to do what you want.
3. Design your exercise plan. Remember to discuss and choose permission to undertake your exercise plans with your doctor.

Anticipating barriers
Despite our best intentions, common barriers to exercise can come up:
- Get creative and find better ways to counter the excuses and become more positive about exercise and its benefits.
- Remember that the best way to accomplish your exercise goal is to build a program that suits your needs.
- Give the plan a chance to succeed by setting reasonable goals and staying motivated.
- Remember to enjoy the exercise itself, not just its benefits to your health!

Goals discussion
- How would you like to improve your exercise level?
- List goals (see Clinician Notes).

- The following self-management steps are useful when designing an exercise/fitness program:
  1. Begin by discussing exercise with your doctor and obtaining his/her permission to undertake an exercise program.
  2. Keep your exercise goal in mind.
  3. Choose exercises you want to do and can do.
  4. Choose the time and place to exercise; make an action plan designed to meet your goal.
  5. Keep an exercise diary or calendar to keep track of your progress.
  6. Revise your program as needed.
• **Benefits of exercise**
  - Physical activity and exercise are not only vital to your health but also can actually be fun, too. Exercise is a useful tool to manage your illness and make everyday activities less stressful.
  - Regular exercise actually improves your strength, energy, and self-esteem and even lowers feelings of anxiety and depression.

• **Discuss formal and informal methods for exercise.**
  - Daily exercise can include both formal, planned activities and simply being **more physical** in everyday life. Your day is probably filled with great opportunities for being more active, or perhaps a formal exercise program might be more helpful.

• **Schedule exercise.**
  - Setting aside specific blocks of time during the week is a great way to start a formal exercise program. An informal goal may not require a schedule but should include a plan to be more active in your daily life. Whether formal or informal, it is important to choose a goal (something you want to do) that exercise can help you reach.

• **Re-review steps to choosing an exercise goal.**
  - So, the steps involved in choosing an exercise goal and making a plan to be more active involve:
    1. **Choosing a goal** and thinking about why you can't or don't do this now.
    2. Deciding what about your abilities makes it difficult to do what you want.
    3. **Designing your exercise plan.** Remember to discuss your exercise plans with your doctor and obtain his/her permission to undertake your program.

• **Anticipate barriers.**
  - Despite our best intentions, common barriers to exercise do come up.
  - Get creative. **Find better ways to counter the excuses** and become more **positive about exercise and its benefits.** Remember that the best way to accomplish your exercise goal is to build a program that suits your needs.
Give the plan a chance to succeed by setting reasonable goals and staying motivated. And, remember to enjoy the exercise itself not just what it does for you!

**Setting Concrete Goals** (see Clinician Notes).

- Ask patient to identify areas he/she is doing/not doing re exercise.
- Formulate an action plan together. Refer patient to "Action Plan" handout on page 25 in the workbook. (See Clinician Notes.)
- Select goals around patient choice areas for improvement.
  - For example, I want to exercise three to four times per week, or
  - I want to walk around my neighborhood three times over the next week

- Provide home practice instructions: Practice action plan and complete home practice log (with notes – whenever possible).
  

Your home practice is to carry out and monitor this action plan. We have included a home practice log on page 26 of your workbook. This is another way to monitor whether your action plan is working that allows you to make comments about how things went for you over the past week. Let's plan to talk about your action plan first thing next session to see how you are doing.

**Wrap-up and schedule next session.**

- Schedule the next session. This should be written in the patient's workbook (Clinician Notes).

For our next session, would you like to meet in-person or by telephone? Let's plan to meet for our next session on ___/__/___. Before we end, go ahead and write down the date and time of our next session in your workbook on page 3 (behind table of contents). (Refer to page 1 of workbook.)
Living Healthy: Nutrition and Healthy Eating

- Refer to the "Nutrition and Healthy Eating" handout on pp. 27-29 in the workbook.

- Goals discussion:
  
  Let's turn to page 27 of your workbook. What is it that you would like to get out of this skill module?

List patient goals (see Clinician Notes).

- The dietary guidelines provided to the patient should be tailored to accommodate his/her current medical conditions and should involve consultation with his/her physician and/or registered dietitian. Ask the patient or refer to the medical record to determine which of the following dietary recommendations would best meet his/her needs.

Congestive heart failure recommendations:

- Limit sodium intake to 2400 mg or 2.4 g per day.
  - Use spices and herbs to enhance food flavor rather than salt; and avoid canned and processed food, as they have high amounts of added salt.
  - Choose foods that contain high amounts of calcium (low-fat dairy products), magnesium (nuts and green, leafy vegetables), and potassium (bananas and oranges).
  - You may need to restrict your fluid intake; and don't forget that foods such as soups, gravies, and sauces contain high amounts of fluid as well.
  - Speak with your physician or registered dietitian to determine how much fluid you can consume in a day.

- Be cautious when using a salt substitute, as it may negatively interact with any diuretic (i.e., "water pills") you are taking and may be dangerous for your health. Consult with your physician or registered dietitian before trying these.
Chronic obstructive pulmonary disease recommendations: (Refer to page 28 of workbook.)

- Select nutrient-dense foods with adequate calories and protein to allow you to maintain a healthy body weight.
  - If you are gaining weight, you are eating more than your body needs and if you are losing weight, you are not eating enough.
- Eat six or more small meals throughout the day.
- If your appetite is poor, you may want to drink calorie-rich supplements between or with meals.
- Eat a diet with less carbohydrate and more fat (preferably monounsaturated and polyunsaturated fat).
- Consume adequate amounts of fluid.

Diabetes mellitus recommendations:

- In general, refrain from eating sources of carbohydrate that include refined carbohydrates and simple sugars (e.g., sweets, juices, soda, white bread, white rice, canned fruit) and substitute these foods with very low-carbohydrate foods (e.g., meats, nuts), low-carbohydrate foods (e.g., vegetables), and healthy carbohydrate foods (e.g., fresh and frozen fruit, beans, and whole-grain breads, pastas, and rice).
- Choose foods that are low in saturated fat, trans-fatty acids, and cholesterol (e.g., low or non-fat dairy products, lean meats such as poultry and fish, baked or grilled foods, and fresh fruits and vegetables).
- If you are having trouble managing your blood sugar, or if you are not regularly monitoring your blood sugar, and are therefore unsure of how controlled it is, consult your physician, registered dietitian, or certified diabetes educator.

General recommendations: (Refer to page 29 of workbook.)

- If you have multiple chronic medical conditions and are on multiple medications:
  - It is always best to work with your physician and registered dietitian to plan the best nutrition plan possible.
Take control through self-management.

- Remember that as a self-manager, it is up to you to identify and make the best changes for you.
- You don't need to change everything at once, or even today. If today does not seem right, identify a starting point sometime in the future and stick to it.
- Once you begin, start with what feels right, then keep track of what you are currently eating to identify how and where to make changes in your habits. Goal-setting and action-planning skills will help you to achieve your goals.

Learn to read food labels. (Provide education brochure from American Diabetic Association.)

- Also offer comprehensive dietary guidelines from the U.S. Department of Health and Human Services (PDF file) – refer to brochure section in Patient Workbook.

Set concrete goals (see Clinician Notes).

- Ask patient to identify areas where he/she would like to improve his/her nutrition.
- Select goals around patient choice areas for improvement.
  - For example, I want to eat more protein and less fat, or
  - I want to eat meals more regularly and with smaller portions
- Formulate an action plan together. Refer patient to "Action Plan" handout on page 30 in the workbook. (See clinician notes.)

Your home practice is to carry out and monitor this action plan. We have included a home practice log on page 31 of your workbook. This is another way to monitor whether your action plan is working that allows you to make comments about how things went for you over the past week. Let's plan to talk about your plan first thing next session to see how you are doing.
Wrap-up and schedule next session.

- Schedule the next session. This should be written in the patient's workbook (Clinician Notes).

For our next session, would you like to meet in-person or by telephone? Let's plan to meet for our next session on __/__/_. Before we end, go ahead and write down the date and time of our next session in your workbook on page 3 (behind table of contents). (Refer to page 1 of workbook.)
Managing a Chronic Illness: Communicating With Your Doctor

- Refer to the "Talking to your Doctor" handouts on pp. 32-34 in the workbook. The patient can follow along with you as you give instructions throughout the session.

Review current communication problems with healthcare professionals.

- Goals discussion:
  - Let's turn to page 32 of your workbook.
  - Are you currently struggling to get the support and/or information you need from your doctors?
  - What do you want to do together to improve how you communicate with your treatment providers?
  - List goals (see Clinician Notes).

- Emphasize the importance of good communication.
  - Good communication allows more efficient use of your time and your physician's.
  - Keeping lines of communication open with your doctor is important. Your relationship with him/her must be seen as a long-term partnership that requires work. It is important to remember that your doctor is usually on a very tight schedule but is often willing to answer your specific questions.
  - Good communication with your doctor is the foundation of managing your chronic health conditions including managing medication and coping with flare-ups. When you are able to talk openly with your doctor, they are better able to address your concerns. A good relationship with your doctor can help you feel more comfortable about your physical health. When this relationship is strong and effective, both the patient and the doctor are more likely to report feeling positive about the future.
  - Good communication starts with preparation.
    - Your next appointment can be more valuable for both you and your doctor if you come prepared to discuss the details of your health status and current medication habits. Preparation is important, therefore, to get the most from your visit.
    - We will discuss several ways in which you can prepare for your doctor visits.
  - Remember to take P.A.R.T. - Prepare, Ask, Repeat, and Take action (see the next page for further explanation).
• Introduce the P.A.R.T. concept. (Refer to page 33 of workbook.)

   o Remember, you need to take PART in your healthcare. You can use this word PART as an acronym to help you remember what to do.
   o Each letter stands for something you should do to take PART in your healthcare. It stands for: Prepare, Ask, Repeat, and Take action.

1. PREPARE an agenda before your first visit.
   a. Make a list of your concerns, and prioritize them from most to least important.
   b. Try to bring up your main concerns at the beginning of the appointment, and realize that it is unrealistic to expect a long list of items to be addressed in one appointment.
   c. Prioritize your concerns, be concise, and give the physician feedback about your treatment.
   d. It is often helpful to take notes or bring another person along as a second listener/questioner.

2. ASK your doctor questions.
   a. Diagnosis (What are your most pressing health issues?)
   b. Tests (What additional tests are needed and what information will they provide?)
   c. Treatments (What are the treatments and/or side-effects of treatment? What are the alternatives?)
   d. Follow-up to treatment (What are the next steps? What can you do in between doctor visits — e.g., self-management or lifestyle changes?)

3. REPEAT back important points.
   a. Remember to briefly repeat back important points from the visit to your doctor. This helps to avoid misunderstandings and miscommunication. This step is particularly important if you are unsure of something. It is important to clearly understand what to do next at the end of the visit.
   b. Plainly communicate any barriers to undertaking actions to your doctor. Remember, it is important that you and your doctor are on the same page regarding your treatment.
4. **TAKE ACTION.** (Refer to page 34 of workbook.)

a. Remember that if you are unhappy with your healthcare system, take action.
   i. Find out who is running the system and how decisions are made, and speak up.
   ii. Ask questions that can point you to the right person to call or write.
   iii. The more informed you are, the better partnership you can have with your doctor.

b. Finally, it is always acceptable to ask for second opinions, even if you have been with a doctor for a long time and like him/her. Good communication skills make it easier for everyone, including the doctor.

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### Set more concrete goals (see clinician notes).

- Also refer to Patient Worksheet "Getting Ready for Your Doctor Visit" (page 35 of patient workbook).
- Formulate goals. Refer patient to "Action Plan: What I Hope to Accomplish - Talking to My Doctor " handout on page 36 in the workbook. (See Clinician Notes.)
- Provide home practice instructions: Carry out action plan (refer to action worksheet log - whenever possible – page 37).

Your home practice is to carry out and monitor this action plan. We have included a home practice log on page 37 of your workbook. This is another way to monitor whether or not your action plan is working that allows you to make comments about how things went for you over the past week. Let's plan to talk about your action plan first thing next session to see how you are doing.
Wrap-up and schedule the next session.

- **Schedule the next session.** This should be written in the patient’s workbook (Clinician Notes).

For our next session, would you like to meet in-person or by telephone? Let’s plan to meet for our next session on / / .

Before we end, go ahead and write down the date and time of our next session in your workbook on page 3 (behind table of contents). (Refer to page 1 of workbook.)

**Managing a Chronic Illness: Managing Medications**

- Refer to the “Managing your Medications” handout on pp. 38-39 in the workbook. The patient can follow along with you as you give instructions throughout the session.

- **Goals discussion:**
  Let’s turn to page 38 of your workbook.

What is it that you would like to get out of this skill module?

List patient goals (see Clinician Notes).

- First, we need to review what the **benefits of effective medication management** are so that we know why this is important.
  - Medications are powerful tools and can often involve side-effects.
  - Managing your medication is vital to obtaining the best possible treatment for your condition and to experiencing the fewest possible side-effects.

- The goal of treatment is to maximize benefits and minimize side-effects; therefore, it is important to communicate with your doctor.
  - Ask your doctor about benefits and side-effects of the medication.
Communication ensures taking the fewest medications and the lowest effective doses for the least amount of time.

Also, remember to ask whether alternative medications with equal benefits and fewer-side effects are available.

- Keep lists and records of the following, and take them to your next appointment:
  - All medications you are taking
  - Allergies or strange reactions to medication
  - Major diseases and medical conditions you suffer from
  - Past medications used to treat your disease.
  - All supplements you are taking, including herbal products, vitamins, minerals, etc.

Examples of questions you may want to ask your doctor:
  - What is the name of the medication?
  - What is the medication supposed to do?
  - How and when do I take the medication and for how long?
  - What foods, drinks, other medications, or activities should I avoid while taking this medication? What are the most common side-effects, and what should I do if they occur?
  - Are any tests involved in monitoring the use of this medication?
  - Can an alternative or generic medication be prescribed?
  - Is there any written information about the medication?
- Become informed about what you are taking. Knowing more about your medications will motivate you to take them regularly.

- Medications can help or harm. The key is to remember that medications can help or harm and knowing more about them and maintaining good communication with your doctor (and pharmacist) are important to your treatment and well-being.

- Take medications as directed. Once you have been prescribed the medication, it is very important that you take it as indicated, or it may not be helpful.

- Setting routines or using different tools (pill organizers, etc.) to help you remember to take your medicines may be helpful.

- Introduce Patient Tool / Worksheet "My Medication List" on page 40 of Patient Workbook.

Set More Concrete Goals: (See clinician notes.)

- Ask patient to identify ways that he/she is or is not effectively managing his/her medications.

- Select goals around patient-choice areas for improvement.
  - For example, I want to remember to take my medications regularly,
  - I want to find a cheaper alternative medication, or
  - I want to find a medication with fewer side-effects.

- Formulate goals together. Refer patient to "Action Plan: What I Hope to Accomplish – Managing Medications" handout on page 41 in the workbook. (See Clinician Notes.)

- Provide home practice instructions: Carry out action plan (refer to action worksheet log – whenever possible – page 42).

Your home practice is to carry out and monitor this action plan. We have included a home practice log on page 42 of your workbook. This is another way to monitor whether your action plan is working that allows you to make comments about how things went for you over the past week. Let’s plan to talk about your action plan first thing next session to see how you are doing.
Wrap-up and schedule the next session.

- **Schedule the next session.** This should be written in the patient's workbook (Clinician Notes).

  For our next session, would you like to meet in-person or by telephone? Let's plan to meet for our next session on ___/___/. Before we end, go ahead and write down the date and time of our next session in your workbook on page 3 (behind table of contents). (Refer to page 3 of workbook.)

**Managing a Chronic Illness: Coping with Flare-ups**

- Refer to the "Managing Flare-ups" handout on pp. 43-44 in the workbook. The patient can follow along with you as you give instructions throughout the session.

  - Review current problems with managing flare-ups.
  - Discuss goals:

    Let's turn to page 43 of your workbook.

    What is it that you would like to get out of this skill module?

    List goals (see Clinician Notes).

  - Review the purpose of the section. This section will help you recognize, prevent, and handle possible flare-ups related to your medical condition.

    **Prevention.** You can take steps to help prevent flare-ups from occurring in the first place.

    **Monitoring is the key to handling flare-ups effectively.**

    If you are able to recognize ongoing versus new or severe symptoms, you will be in a better position to direct your own care.

  This section will help you recognize, prevent, and handle possible flare-ups related to your medical condition.

  **You can take steps to prevent flare-ups from occurring in the first place.**

  Things that are in your control include:

  - Remembering to take your medications
  - Better managing your medications and their side effects
  - Making healthy choices such as quitting smoking, eating healthy, and exercising
  - Monitoring your health
  - Getting a flu shot and/or a pneumonia shot
  - Consulting with your doctor and getting regular check-ups
  - Maintaining healthy surroundings (e.g., avoid smoking and smokers)

  **Be familiar with your body.**

  It is important to be familiar with your body and with your condition. This familiarity can be achieved through active participation in your health.

  Monitoring is the key to handling flare-ups effectively.

  If you are able to recognize ongoing versus new or severe symptoms, you will be in a better position to direct your own care.
Things that are in your control include:
1. Remembering to take your medications
2. Better managing your medications and their side-effects
3. Making healthy choices, including
   a. Stopping smoking
   b. Eating healthy
   c. Exercising
4. Monitoring your health
5. Getting a flu shot and/or a pneumonia shot
6. Consulting with your doctor and getting regular check-ups
7. Maintaining healthy surroundings (e.g., avoiding smoking and smokers)

- Be familiar with your body.
  - It is important to be familiar with your body and with your condition.
  - This familiarity can be achieved through active participation in things that are within your control, such as staying active with your health care and communicating with your doctors.
  - Monitoring is also important. It is the key to handling flare-ups effectively.
  - If you are able to recognize ongoing versus new or severe symptoms, you will be in a better position to direct your own care.

Control a flare-up once it occurs by doing the following:
- The first step is to see if you recognize the symptoms you are having. If you do, what action did you take last time? Were your actions successful?
- If symptoms are familiar, begin strategies for coping.
  - If you are having symptoms that you have experienced in the past and know that they are part of the daily management of your illness, you can begin coping strategies to cope.
- If symptoms are unfamiliar or severe, SEEK MEDICAL CONSULTATION IMMEDIATELY.
  - If you are experiencing severe symptoms, symptoms that you do not recognize, or symptoms that have required medical attention in the past – SEEK MEDICAL CONSULTATION IMMEDIATELY.
When to contact MD?
It is vital that you contact your doctor if things appear to suddenly become markedly worse with your condition.

Relaxation skills to lower stress (for familiar symptoms only)
- Reducing stress can help you prevent and cope with an exacerbation. You can begin by implementing skills designed to lower your stress. Reducing stress and increasing relaxation can help by keeping you in control of your emotions. These include:
  a) Deep breathing
  b) Visualizing pleasant surroundings and outcomes
  c) Making positive self-statements
  d) Changing your immediate surroundings if these are causing you physical or mental stress

Controlling a flare-up once it occurs
The first step is to see if you recognize the symptoms you are having.
- If symptoms are familiar, begin strategies for coping.
  If you are having symptoms that you have experienced in the past and know that they are part of the daily management of your illness, you can begin coping strategies.
- If symptoms are unfamiliar or severe, SEEK MEDICAL CONSULTATION IMMEDIATELY.
  If you are experiencing severe symptoms, symptoms that you do not recognize, or symptoms that have required medical attention in the past – SEEK MEDICAL CONSULTATION IMMEDIATELY.

When to contact your doctor?
It is vital that you contact your doctor if things appear to suddenly become markedly worse with your condition.

Relaxation skills to lower stress (for familiar symptoms only)
Reducing stress can help prevent and cope with an exacerbation.
You can begin by implementing skills designed to lower your stress. Reducing stress and increasing relaxation can help by keeping you more in control of your emotional health so that you are in a better position to cope with your physical health.
These relaxation skills include:
- Deep breathing.
- Visualizing pleasant surroundings and outcomes.
- Positive self-statements.
- Changing your immediate surroundings if these are causing you physical or mental stress.
Set more concrete goals (see Clinician Notes).

- Ask patient to identify ways he/she is or is not effectively managing flare-ups.

- Select goals around patient-choice areas for improvement.
  o For example, I want to recognize potential situations that may exacerbate my condition, or
  o I want to practice relaxation techniques before my condition becomes worse.
  o Consider setting a crisis-management plan (e.g., when to take action, how to take action, important phone numbers, contact list in terms of who to contact and for what level of care – e.g., 911 for emergencies, going to the doctor or ER for moderate concerns, calling doctor’s office for less immediate concerns, etc.).

- Formulate goals together. Refer patient to “Action Plan: What I Hope to Accomplish – Managing Flare-ups” handout on page 45 in the workbook (see Clinician Notes).

- Provide home practice instructions: Carry out action plan (refer to action worksheet log – whenever possible – page 46).
  Your home practice is to carry out and monitor this action plan. We have included a home practice log on page 46 of your workbook. This is another way to monitor whether or not your action plan is working that allows you to make comments about how things went for you over the past week. Let’s plan to talk about your action plan first thing next session to see how you are doing.

Wrap-up and schedule the next session.

- Schedule the next session. This should be written in the patient’s workbook (Clinician Notes).

For our next session, would you like to meet in-person or by telephone? Let’s plan to meet for our next session on __/__/__. Before we end, go ahead and write down the date and time of our next session in your workbook on page 3 (behind table of contents). (Refer to page 1 of workbook.)
Module B

Using Thoughts to Improve Wellness

(Note to Clinician: Concept Review 4 (CBT 101) is an additional resource to inform your use of Module B.)

Session Overview (Goals & Possible Outcomes):

Goals:
- I. Review previous session's assignment.
- II. Discuss the ways thoughts relate to mood and functioning.
- III. Identify negative thoughts.
- IV. Change thought patterns.
  - A. Modify negative thoughts.
  - B. Think of some coping self-statements.
- V. Set action plan.
- VI. Assignment: Monitor thoughts and increase use of coping self-statements.

PHYSICAL HEALTH OUTCOMES
- Feel better.
- Increase energy levels and decrease fatigue.
- Decrease pain.

EMOTIONAL HEALTH OUTCOMES
- Improve mood.
- Increase feelings of control.
- Improve relationships.
Module B
Using Thoughts to Improve Wellness

**Session Overview**
Refer patient to page 47 of Workbook: “Module B: Using Thoughts to Improve Wellness.”

- **Session Content**
  I. Discuss previous session’s assignment.
  II. Review why patient chose this module, and discuss ways thoughts relate to mood and functioning.
  III. Identify negative thoughts.
  IV. Change thought patterns.
    A. Modify negative thoughts.
    B. Think of coping self-statements.
  V. Set action plan.
  VI. Assignment:
    A. Monitor thoughts.
    B. Increase use of coping self-statements.

- **Outcomes**
  1. This module will help you to gain an understanding of how the way you think can affect you both physically and emotionally.
  2. Changing thoughts to be more positive or adaptive can affect:
     a. Energy
     b. Pain
     c. Mood
     d. Feelings of control
     e. Behavior
     f. Relationships
I. Review prior skills and home practice.

- Was patient able to carry out action plan?
  - If so, was the plan successful? Did the patient meet his/her goals?
  - If not, what got in the way? How can the plan be modified?
- If patient has completed other skill modules, please also review use and/or challenges associated with those other skills.

II. Review why the patient chose this module and/or the rationale for the module, and discuss the ways thoughts relate to mood and functioning.

- Thoughts often influence how we feel and behave.
- For example, some people view a glass as half empty; and others view it as half full.
  - Someone who is more pessimistic and tends to see the glass as half empty is more likely to focus on negative thoughts than a person who sees the glass as half full.
    - In the end, the amount of liquid in the glass is the same; but it is the way we look at the glass that determines how we feel about it (e.g., positive or negative).
  - Those that see the glass as half empty often feel disappointed and are likely to be depressed or down.
  - However, those that see the same glass as half full often feel a sense of optimism and are unlikely to feel depressed or down.
  - This is an example of how the way people think about the same situation varies and how these various positive and negative thoughts can also positively or negatively impact our feelings and behaviors.
    - Thus, two people may be in similar situations with similar life stressors; but their thoughts about the situation may cause them to feel, react, and behave quite differently.
  - This idea can also be applied to more meaningful and complicated situations, such as the struggles that come with managing a chronic illness.
  - Often, it is not possible to change the facts about a situation, or do things exactly the same as before you had a chronic illness, but you can change the reaction you have to the situation. In essence, you can change the way you think about your illness.
  - The way you think about your illness and overall life situation often influences the way you feel and behave.
    - Thus, the way each person interprets or THINKS ABOUT his/her situation directly relates to his/her overall quality of life.
Having a chronic health condition likely means that your life is not the same as it was before you had your illness. There may be many things that have been troubling or difficult related to your illness. However, many patients also report that there are important things about their life (or about themselves) that remain the same or similar.

Whether you choose to focus on the negative aspects of your illness (e.g., the things that have changed for the worse) or you choose to focus on the things that have remained the same (or even changed for the better) is an important thing to consider when it comes to your physical and emotional health.

Focusing on the positives or challenging unhelpful thinking may lead to improved mood and physical well-being. You may also want to focus on ways you can actively cope and address problem areas. Often there are options to improve your situation. Starting with your thinking can be a great place to find ways to feel better.

Refer to Page 48 in Workbook, “Thoughts, Behavior, Mood.”

- This diagram shows the cycle and influence of thoughts, behaviors and feelings.

- Make prior examples more concrete by showing how differences in thinking about one’s illness relate to mood and behaviors.

- Ask the patient for additional examples of times when 1) negative thinking likely interfered or made his/her physical or emotional health worse, 2) positive thinking helped him/her through a difficult situation.
III. Identify Negative Thoughts.

Refer to page 49 of workbook.

To improve mood and functioning, it will be important for you to be able to identify when you are having negative thoughts. Common types of unhelpful thinking patterns are listed on page 49 of your workbook.

Let's go over these common types of unhelpful thinking patterns.

<table>
<thead>
<tr>
<th>Situation</th>
<th>Thought</th>
<th>Feeling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example #1</td>
<td>Doctor visit: I just received some negative information about my medical condition (my condition got worse).</td>
<td>&quot;Now I have more bad news. Nothing good is happening to me lately.&quot;</td>
</tr>
<tr>
<td>Example #2</td>
<td>Out of breath when at the park with my granddaughter</td>
<td>&quot;I can't do what I used to do.&quot;</td>
</tr>
</tbody>
</table>

Describe and review examples.

Additionally, on page 50 there is a worksheet that shows three columns — situation, thought, and feeling. This workbook exercise will, hopefully, provide you with some insight as to how certain situations and thoughts impact your mood. A couple of examples are given, and space is provided for your own experiences.

Let's go over the example.

Describe and review example.

Summarize why this exercise is important (e.g., helps to identify problematic situations and problematic thinking that may lead to distress or poor functioning).

Ask patient whether he/she has any questions. Ask patient for examples of problematic situations and complete next row (or two) with the patient.
**IV. Change Thought Patterns.**

**A. Discuss how to modify negative thoughts.**

Refer to page 51 of workbook.

Go to the second workbook exercise for Monitoring Negative Thoughts (page 51).

The previous exercise is one way to help you identify negative thoughts that may require flexible thinking to improve your functioning. The next exercise asks you to use the same columns but adds a fourth column where you are encouraged to think about more flexible or adaptive thoughts. These exercises are designed to help you identify and then replace unhelpful thoughts with something that is helpful and realistic.

(Extra forms are available on pages 83 and 84 of the patient workbook)

### Identify and Changing Negative Thoughts - Continued

<table>
<thead>
<tr>
<th>Situation</th>
<th>Thought</th>
<th>Feeling</th>
<th>Alternative Thought?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Example #1</strong></td>
<td>Doctor Visit: &quot;I just received some negative information about my medical condition (my condition got worse).&quot;</td>
<td>&quot;Now I have more bad news, Nothing good is happening to me lately.&quot;</td>
<td>Down in the dumps, blue, depressed.</td>
</tr>
<tr>
<td></td>
<td>&quot;Although this is not good news, I have faced similar challenges in the past. I am sure that I am up to the task. I need to think about what I need to do to get better.&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Example #2</strong></td>
<td>Out of breath when at the park with my granddaughter</td>
<td>&quot;I can't do what I used to do.&quot;</td>
<td>&quot;I feel sad and somewhat worthless.&quot;</td>
</tr>
<tr>
<td></td>
<td>&quot;Because of my shortness of breath and because I am getting older, I have more physical limitations than I used to, and I do need my family's help from time to time, but I am able to offer them many valuable things and contribute to my grandkids' lives.&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Situation #1</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Situation #2</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
B. Introduce coping statements.

Discuss goals.

- Many people don't realize that their thought patterns can actually be changed so that they feel better.
  - The use of coping self-statements can improve your thought patterns by focusing on the positive (glass half full) and minimizing the negative.
  - What positive thoughts do you currently use?

Coping Self-Statements (Refer to page 52 of workbook.)

Please turn to page 52 of your workbook – at the top it is labeled “Coping Self-Statements.”

A coping statement is a statement that you make to yourself that helps to decrease stress, worry, and depression-related feelings.

It is a strategy for providing “instructions” to yourself about how to think positively in order to manage stress and depression and reduce how much negative thoughts get in the way.

This type of self-talk can help you perceive that some situations aren't as bad as you expect them to be - and help you realize that you can manage your worry and anxiety better than you thought.

Coping self-statements are often general statements that can serve as “alternative thoughts” when your thinking is not as positive as it should be.

Remember, coping self-statements are not “pie in the sky” statements but rather should be statements that you actually believe to be true.

- A coping statement is a statement that you make to yourself that helps to improve your mood and/or outlook.
  - Coping statements help your thoughts to be positive and adaptive.
  - You can also think of them as a strategy for providing “instructions” to yourself.
  - They are particularly useful in situations where you have had a tendency to think negatively, to feel bad, or to do things that you know are not in your best interest.
  - Coping self-statements are often general statements that can serve as “alternative thoughts” when your thinking is not as positive as it should be.
  - Remember, coping self-statements are not “pie-in-the-sky” statements but rather should be statements that you actually believe to be true.
• Now, please turn to the next page of your workbook – "Coping Self-
Statements Worksheet." copying self-statements worksheet. Refer to
page 53.
  o Review some example coping statements with the patient.
  o Help the patient to identify some coping statements and situations
and/or concerns that often cause him/her to feel negative, possibly
using these questions. (You may write initial responses in
Clinician Notes before
helping the patient to identify final
 coping statements and problems
or concerns):
  ▪ What are some difficult
   situations or concerns
   you think are negatively
   affecting your life? Explore
   and clarify.
  ▪ What are some coping
   statements that might be
   helpful in improving your
   stress, depression,
   functioning, or mood in
   response to these
   thoughts?

• Clinician tips for identifying
coping statements:
  o Make suggestions based on your knowledge of the individual.
  o After you and the patient together identify which two or three coping
    statements are the
    clearest and may most effectively improve mood or behavior, these
    should be written on
    the, "Coping Self-Statements Worksheet" page of the Clinician Notes
    (which is the
    same as page 53 of the Workbook).
  o This page should be given to the patient after you fill it out.

• This page also gives a few tips for using coping statements.
  o Coping statements or self-instructions may be more effective if you actually
    say them to yourself aloud, even though it may feel funny.
It may also help to record the statements on tape and listen to them.

Writing coping statements on note cards to carry with you or posting them where you will see them may also help you learn to use them more often.

Remember that it takes practice and time to make coping statements part of your everyday self-talk, as your usual thoughts are probably very well-engrained in your head from use over time. It will take a while and lots of practice for coping statements to take over.

Now you have a list of situations and/or concerns that may cause you to feel and behave in negative ways, and you have a list of positive coping self-statements you can say to yourself to help you feel and behave more positively. You may refer to these coping statements when you notice that you are having problematic thoughts or even when you first think that a situation is occurring in which negative thoughts are likely to lead to increased stress or sadness.

**Application of coping statements**

- **Using** these statements may also help you to feel more in control of your life, as you can influence your thoughts even when everything in your life seems to be uncontrollable.
  - This means that, if you take control of your thoughts, you will be more in control than it may have seemed in the past.
  - You may also want to pay attention to how much time you spend thinking about your physical health. If the amount of time you spend thinking about your physical health is getting in the way of things you want to do — or if it negatively affects your mood — you may want to take steps to reduce these thoughts.
  - One option to reduce the amount of time is to schedule focused time to think about your health every day. Use that time to problem solve and work through difficulties. At other times during the day (when you are not "scheduled" to think about your health) remind yourself to not think about your health at this time, and wait until your next scheduled time. *This does not apply to symptom difficulties that might require medical attention.*
  - Feelings of control, more positive feelings in general, and more positive behaviors that, hopefully, will result from use of these coping self-statements will help you to manage stress, worry, or depression.

- In the future, you may even want to think of more coping statements on your own now that you know how to do it!
V. Set action plan.

- Formulate goals, referring to page 54 of the Workbook, "Action Plan: Using Thoughts to Improve Wellness."
  
  o Let's make an action plan based on what we discussed today. How would you like to use coping statements in the next week?
  
  o Write down the action plan(s) in the clinician's notes section, and give this to the patient to take with him/her (for telephone sessions help the patient to write down his/her thoughts in his/her workbook).

VI. Assignment

Provide home practice instructions: Carry out action plan.

Refer to action worksheet log – whenever possible – page 55.

- The action plan should involve monitoring thoughts and increasing use of coping self-statements.

Your home practice is to carry out and monitor this action plan. We have included a home practice log on page 55 of your workbook. This is another way to monitor whether your action plan is working that allows you to make comments about how things went for you over the past week. Let's plan to talk about your action plan first thing next session to see how you are doing.

Wrap-up and schedule next session.

Schedule the next session. This should be written in the patient's workbook (Clinician Notes).

For our next session, would you like to meet in-person or by telephone? Let's plan to meet for our next session on __/__/___. Before we end, go ahead and write down the date and time of our next session in your workbook on page 3 (behind table of contents). (Refer to page 1 of workbook.)
Elective Module C

Increasing Pleasant Activities

(Note to Clinician: Concept Review 4 (CBT 101) is an additional resource to inform your use of Module C.)

Session Overview (Goals & Possible Outcomes):

Goals:
- I. Review previous session's assignment.
- II. Introduce "Increasing Pleasant Activities and Behavior Activation."
- III. Monitor behavior and mood.
- IV. Identify activities to improve quality of life.
- V. Use action plans.
- VI. Assignment: Apply and monitor skills.

**PHYSICAL HEALTH OUTCOMES**
- Further develop physical health skills and plans.
- Decrease fatigue.
- Decrease pain through activity and distraction.

**EMOTIONAL HEALTH OUTCOMES**
- Improve mood.
- Increase sense of accomplishment.
- Increase sense of control.
- Increase pleasurable activities.
Module C
Increasing Pleasant Activities: Behavior Activation

Session Overview
- Refer patient to Page 57 of Workbook, Module C. “Increasing Pleasant Activities.”
- Session Content
  I. Discuss previous session’s assignment.
  II. Review why patient selected this module, and introduce “Increasing Pleasant Activities: Behavior Activation.”
  III. Monitor behavior and mood.
  IV. Identify activities to improve quality of life.
  V. Use action planning.
  VI. Assignment: Apply and monitor skills.

- Outcomes
  o Improve mood through activity planning.
  o Increase pleasant events.
  o Decrease stressful life events.
  o Improve feelings about physical health and well-being.

I. Review previous session’s home practice.
- Was patient able to carry out action plan?
  If so, was the plan successful? Did the patient meet his/her goals?
  If not, what got in the way? How can the plan be modified?
- If patient has completed other skill modules, please also review use and/or challenges associated with those other skills.

II. Introduce patient to “Increasing Pleasant Activities: Behavior Activation,” and review why the patient selected this module.
- Explain the rationale for learning about increasing pleasant activities / behavior activation.
First, it is important to learn about how to increase pleasant activities and behavior activation and how they can be useful for improving depression and stress/worry.

When you feel a little down or when you are having a bad day and don’t feel well physically, it is likely that you will stop doing many activities that you usually find pleasant to do.

When this happens, you can get yourself into a habit of avoiding pleasant activities that might actually help you feel better.

However, there are ways we can stop this from happening. One of these ways is to choose an activity, or a few activities, that you like, and dedicate a regular time to do these things, just like dedicating a regular time to brush your teeth and take your medicines.

It is important to understand the connection between what you do and how you feel, both mentally and physically.

• Refer patient to page 58 of Workbook: “Thoughts, Behavior and Mood.”

• Use the cycle diagram to explain that increasing activity and/or taking action, even when we do not feel like it, will help the patient feel better physically, as well as decrease depression.

  ▪ For example, often people do not feel like visiting friends or participating in hobbies or other activities because they feel tired or unmotivated. However, when you overcome these feelings and participate, you usually feel much better and begin to enjoy the activity.

  ▪ Also explain that facing situations that make you anxious will decrease anxiety in the long term.

  ▪ For example, it would be normal to be afraid of flying if you fly very seldom or had been through a bad experience on a plane; but if you then begin flying often, your fear would decrease over the long term.
- Remember when you first learned to drive? Were you at all worried about your driving abilities? What about now – do you still have those same reservations? The point is that with exposure your anxiety usually decreases. You feel more competent and confident with exposure and practice.

  - Taking action requires some effort and courage, but it will have positive outcomes for your mood.

- Refer patient to page 59 of Workbook: "Behavior and Mood in Depression.”

  - Review it together to give the patient further rationale to increase pleasant activities in his/her life.

  - As these models indicate, mood and behavior are related to one another.

  - This means that, by putting some rewarding activities back into your life, mood and quality of life (and sometimes even physical symptoms) will get better by decreasing fatigue, pain, and self-focus.
III. Monitor daily activities, and record mood.

- Page 60 of workbook: “Record of Daily Activities and Mood Ratings”
  - I want you to think for a minute about what you did yesterday.
  - Complete worksheet with the patient, and identify fluctuations in mood, paying particular attention to activities that lead to increased positive mood. Both you and the patient can write in the Clinician Notes and in the Workbook, as appropriate.
  - Point out any activities that appeared to raise or lower the mood of the patient, and highlight how activities are related to mood.
  - Now that we can see how your activities affect your mood, are there any you did on this day that you think doing more often would positively affect your mood?

---

**Record of Daily Activities and Mood Ratings**

In order to understand your current mood and activity level, complete the following form for a recent “typical day” (possibly yesterday). This will help you to understand what activities may fit into your day and help your mood.

In the table below:

1. List what you did during each time period of the day.
2. Rate your mood for each time period (estimate how good or bad you felt) using the five-point scale. If you felt good, use 4; if you felt very happy, use 5. If you felt low or blue, mark 2 (poor) or 1 (very bad).
3. Give any reason you felt that way.

**Mood Rating:**

<table>
<thead>
<tr>
<th>Mood Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Bad 1</td>
</tr>
<tr>
<td>Bad 2</td>
</tr>
<tr>
<td>So-So 3</td>
</tr>
<tr>
<td>Good 4</td>
</tr>
<tr>
<td>Very Good 5</td>
</tr>
<tr>
<td>😊</td>
</tr>
</tbody>
</table>

**Date:**

<table>
<thead>
<tr>
<th>Time of Day/Activities</th>
<th>Mood Score</th>
<th>Reasons for my Mood Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morning Activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
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<tr>
<td>3.</td>
<td></td>
<td></td>
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<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Afternoon Activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evening Activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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60

61
Identifying Pleasant Activities

Each person has his or her own ideas about activities that are enjoyable or satisfying. Some activities involve social interaction with friends or family. Some activities are experiences that provide a sense of accomplishment.

1. Are there some things you currently do that you find pleasant in doing or that give you a feeling of satisfaction? If so, please identify and list these in the table below. Examples include reading, talking, walking, listening to music, visiting with a friend, playing cards or games, doing a favor for someone, cleaning the house, or cooking a meal.

<table>
<thead>
<tr>
<th>Current Pleasant Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

2. What other things or activities would you like to try that are not currently being done? What would be enjoyable to do right now? What would give you some satisfaction to do this? This could be something you have enjoyed or valued in the past or something new you want to try. List these ideas in the table below.

<table>
<thead>
<tr>
<th>Pleasant Activities Currently Not Doing</th>
<th>What Interferes With Doing This?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

IV. Identify positive activities.

- Discuss activities.
  - Adding activities that return pleasure to your life can help you to feel better and experience less sadness and negative mood.
  - Can you think of activities that you may have stopped doing or decreased because of fatigue or lack of ability, or because you felt sad or depressed?
  - Have a general discussion of types of things the patient would like to do but has not been able to do and activities he/she already does but would like to do more often, within the context of values or goals that are important to him/her.
  - You may want to ask if there is something that he/she needs to do that he/she has been unable to do or avoiding.
  - Some patients may want to accomplish something rather than focus on doing something pleasant. Be sure to reinforce the patient for making a personal choice of something meaningful or pleasant.

- Refer patient to page 61 of Workbook: “Identifying Pleasant Activities.”
  - Using the previous discussion, help the patient to identify some pleasant activities he/she currently does; and both you and the patient write these down on the worksheet and in the Clinician Notes in the first table.
In the second table, help the patient to identify activities he/she is currently not doing that he/she enjoys and the reason why he/she is not doing these activities.

If necessary, use the examples on the activities checklist on page 62 of the Workbook to extend this discussion. (Also see Clinician Notes.)

- Suggest some activities on this list, and ask the patient which ones might make him/her feel better.
- Don’t worry at this point about whether the patient thinks he or she can do the activity.
- For now, just try to create a master list of activities that might provide increased reinforcement and pleasure.

Refer to page 63 of Patient Workbook (“Tips for Managing Barriers to Doing Activities”).

**Tips for managing barriers to doing activities:**

- Break down difficult activities into small steps.
- Look for alternative behaviors that can help you accomplish a goal that is prohibited by a chronic illness.
- Look for ways that others can help.

**Summary**

- Acknowledge how difficult it is to change behavior.
  - Adding some pleasurable or satisfying activities back into your life will take some **time and effort at first** because when you get used to not doing these activities it is sometimes hard to start them again.
  - It also is a challenge to find new ways to do things that you used to enjoy because physical problems prohibit you from doing them the way you have done them in the past.
  - These changes will often cause you to feel awkward or unsure at first.

- Emphasize the importance of practice.
  - Change takes practice before it feels normal.
  - If you are uncomfortable doing this, that’s okay; just do it anyway, knowing that, in time, it will become easier as it becomes more of a part of your normal routine.
You may need to remind yourself that, as you add rewarding activities back into your life, mood and quality of life (and sometimes even physical symptoms) will get better.

Hopefully, knowing that doing positive activities will feel more normal with practice and how important rewarding activities are to your well-being will give you the motivation to work hard to start making them part of your routine this week and in the future.

Set goals and do action planning.

- Refer patient to page 64 of Workbook: “Action Plan” (also see Clinician Notes).

  - Let's use our positive activity list to plan some activities that are pleasant, help solve a problem, or give you a sense of accomplishment.

  - Remind the patient:
    - New activities should be specific, observable, and measurable.
    - The activities can be something new that you have not been doing or something that you already do but would like to do more often (e.g., exercise, talk to friends).
    - The activity can be something that will address negative feelings or help solve a problem.

  - Help the patient to formulate several action plans that seem realistic as a first step and will increase or implement some of the positive activities he/she identified.

  - Review any specific limitations that might get in the way of doing positive activities (e.g., fatigue or physical and sensory limitations), and note these on the action plan you complete with the patient so you can help address barriers in this session and in future sessions.

VI. Home practice: implement and monitor the action plan.

Your home practice is to carry out and monitor this action plan. We have included a home practice log on page 66 of your workbook. This is another way to monitor whether your action plan is working that allows you to make comments about how things went for you over the past week. Let’s plan to talk about your action plan first thing next session to see how you are doing. (Refer to workbook, page 66.)
Wrap-up and schedule the next session.

- *Schedule the next session. This should be written in the patient's workbook (Clinician Notes).*

For our next session, would you like to meet in-person or by telephone? Let's plan to meet for our next session on ___/___/____. Before we end, go ahead and write down the date and time of our next session in your workbook on page 3 (behind table of contents). (Refer to page 1 of workbook.)
Module D
Learning How to Relax

Session Overview (Goals & Possible Outcomes):

GOALS:

- I. Review home practice from prior session.
- II. Discuss worry, stress, and anxiety.
- III. Explain the purpose of relaxation exercises.
- IV. Learn how to relax, using diaphragmatic deep breathing and relaxed posture.
- V. Learn how to relax, using imagery.
- VI. Use techniques to help control emotional and physical sensations of tension.
- VII. Set action plan.
- VIII. Assignment - Apply and monitor skills.

PHYSICAL HEALTH OUTCOMES

- Obtain skills to reduce tension and help you to relax.
- Strengthen your stomach and chest muscles.
- Reduce pain associated with tension or self-focus.

EMOTIONAL HEALTH OUTCOMES

- Relieve stress.
- Learn how to visualize positive outcomes.
- Improve your mood.
- Feel better about yourself.
- Learn how to relax during times of stress.
Module D
Learning How to Relax
(can be used to cope with pain)

Session Overview

- Refer patient to the “Session Overview (Goals and Possible Outcomes)” handout on page 67 in the workbook.
- This module uses diaphragmatic deep breathing and guided imagery to help you achieve the following:
  - Obtain skills to reduce tension and help you to relax
  - Strengthen your stomach and chest muscles
  - Reduce pain associated with tension or self-focus
  - Relieve stress
  - Learn how to visualize positive outcomes
  - Improve your mood
  - Feel better about yourself

- Session Content
  I. Review home practice from prior session.
  II. Discuss worry, stress, and anxiety.
  III. Review the reason(s) this module was selected, and discuss the purpose of relaxation exercises.
  IV. Learn how to relax, using diaphragmatic deep breathing and relaxed posture.
  V. Learn how to relax, using imagery.
  VI. Use techniques to help control emotional and physical sensations of tension.
  VII. Set action plan.
  VIII. Assignment- Apply and monitor skills.

I. Review previous session’s home practice.

- Was patient able to carry out action plan?
  If so, was the plan successful? Did the patient meet his/her goals?
  If not, what got in the way? How can the plan be modified?
- If patient has completed other skill modules, please also review use and/or challenges associated with those other skills.
II. Discuss stress, worry, and anxiety.

- Refer to the “Learning How to Relax” handout on pp. 68-69 in the workbook. Review handout with patient.

- Physical signs of anxiety and worry such as muscle tension, sweating and trembling can be reduced by relaxation exercises. Relaxation exercises not only target the physical signs of anxiety but can ease racing thoughts and decrease feelings of fear and anxiety.

III. Review the reason(s) the patient selected this module, and discuss the purpose of relaxation exercises.

- The purpose of relaxation exercises is to teach your body to be in a physically relaxed state that is incompatible with feelings of worry, anxiety, or fear. For example, can your heart beat fast and slow at the same time? Can you be anxious and relaxed at the same time? No, relaxation and anxiety are incompatible states that cannot occur together.

- There are several options for types of exercises you can use to bring about relaxation. Your workbook discusses two different common exercises, namely, using deep breathing and relaxed posture, as well as imagery. We may have time to practice both; and, if we run out of time, you can find detailed instructions in your workbook.

Learning How to Relax

<table>
<thead>
<tr>
<th>Signs of worry and anxiety</th>
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<th>Deep breathing technique</th>
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<tr>
<td>One way to make your entire body more relaxed is deep breathing. Often when you're anxious, your breathing gets rapid and shallow. Rapid and shallow breaths can make you feel hyperventilating and feel dizzy and lightheaded. Experiencing these physical signs is stressful and causes you to feel anxious, which in turn can increase the physical signs of stress. By attending to your breathing and changing the rate and way you breathe, you can actually make your entire body more relaxed and function more effectively. This is beneficial for both your body and your mind. It can also strengthen the muscles in your chest and stomach, which can make it easier to breathe on a daily basis.</td>
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</tbody>
</table>

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<tr>
<th>Steps to deep breathing</th>
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</thead>
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<td>First, put one hand on your abdomen, with your little finger about 1 inch above your navel, and place one hand on your chest.</td>
</tr>
<tr>
<td>Next, begin to notice your breathing— which hand is doing more of the moving? The goal is to move the stomach and not the upper chest area.</td>
</tr>
<tr>
<td>Then, breathe in slow and deep so your stomach goes in and out when you breathe while your other hand on your chest stays as still as possible.</td>
</tr>
<tr>
<td>Finally, continue to take slow, even, deep breaths.</td>
</tr>
</tbody>
</table>
Which relaxation exercise would you like to practice first? Deep breathing and relaxed posture, or imagery?

Note to Clinician: Alternatively, if you felt it was clinically advantageous, you could recommend starting with imagery OR deep breathing relaxation, based on your knowledge of the patient and his/her concerns. It is not mandatory that you cover all relaxation techniques — choose what best applies for the patient.

IV. Learn how to relax, using deep breathing and relaxed posture.

Deep Breathing
- Introduce the idea.
  - One way to make your entire body more "relaxed" is deep breathing. Often when you’re anxious, your breathing gets rapid and shallow. Rapid and shallow breaths can lead you to hyperventilate or feel dizzy and lightheaded. Experiencing these physical signs is stressful and causes you to feel anxious, which, in turn, can increase the physical signs.
  - By attending to your breathing and changing the rate and way you breathe, you can actually make your entire body feel more "relaxed" and function more effectively.
    - This is beneficial for both your body and your mind. It can also strengthen the muscles in your chest and stomach, which can make it easier to breathe on a daily basis.
- STEPS to Deep Breathing
  - First, put one hand on your abdomen, with your little finger about 1 inch above your navel, and place one hand on your chest.
  - Next, begin to notice your breathing (pause for several seconds) — which hand is doing more of the moving? The goal is to move the stomach and not the upper chest area.
  - Then, breathe slowly and deeply, so that your stomach goes in and out when you breathe while your other hand on your chest stays as still as possible.
    - Your hand on your diaphragm should move out as you inhale and in as you exhale. (Acknowledge if the patient has COPD – lung capacity might be reduced, but reassure him/her of the benefits of practicing deep breathing).
  - And, finally, continue to take slow, even, deep breaths.
    - Breathe in to the count of three, four, or five, depending on what is comfortable for you, and then breathe out to the same number. It is okay to start breathing to the count of two or three. You may be able to work up to a larger number
or, if the smaller interval works, remain there with benefits. 
Do not pause at the top of each breath.

- **LET'S PRACTICE!**
  - I want you to begin to breathe a bit more slowly, evenly, and deeply, and then breathe out slowly. **Inhale through your nose, and exhale through your mouth. As you exhale, purse your lips** by imagining that you are blowing on hot soup. **This controlled breathing helps you exhale the most used air and inhale clean air.** As soon as you finish inhaling, begin to exhale – **do not pause at the “top” of your breathing cycle, since this will create tension in your chest and stomach.** The duration of inhaling also should take approximately the same amount of time as your exhaling. Blow at a rate that would make a candle flame flicker.

  - **Now I’d like you to close your eyes, and breathe with me while I count** – counting up to five to inhale and again up to five to exhale. “Inhale—two—three. Exhale—two—three,” Good. Let’s try again. You can attempt to gradually build up to counting to four or even five if you feel capable of this.

- Repeat the same procedure about three times.

- **Note that this is a very simple, “portable” skill to be used whenever the patient notices any physical symptoms of anxiety.**

- **After practicing (see Clinician Notes).**
  - Ask the patient to indicate whether he/she notices feeling any more relaxed after using this procedure.
  - Ask for any general feedback about how this skill seemed to work.
  - Ask him/her to think of an anxiety-producing situation when this skill might be useful.

- **To practice this skill...**
  1. Identify the last time you felt stressed.
     - **Maybe there was sometime this morning, yesterday, the day before, or last week.**
  2. Close your eyes and try to picture yourself back in that situation.
     - **Imagine where you were and what you were doing, and think about what was causing you to feel tense or stressed. (Pause.) Do you have a situation in your mind?**
  3. **Now, pay attention to your breathing – Inhale—two—three, Exhale—two—three (repeat).**
• After the practice (see Clinician Notes.)
  • Ask the patient about effectiveness of this exercise.
  • Review the patient's ability to use this skill, and perceptions of the potential effects of the skill on decreasing anxiety/stress and helping his/her physical symptoms.
  • In fact, practicing deep breathing exercises can help relieve and even prevent worsening of your breathing difficulties.

• Relaxed Posture
  • Another strategy for relaxation is to adopt a relaxed posture by lowering one's shoulders and letting them slouch forward slightly rather than remaining rigidly straight.
  • Practice:
    1. Lean back into your chair, and let your shoulders slouch slightly.
    2. Round your shoulders, and relax your chest and abdomen muscles.
    3. Do you notice an increase in relaxation?
    4. Stand and practice a more relaxed posture by rounding your shoulders slightly and relaxing your chest and abdomen muscles.
    5. Contrast this with standing "at attention," with your shoulders up and back, your chest extended, and your stomach muscles pulled in tightly.
    6. Be seated.
    7. Do you have any feedback regarding the usefulness of this procedure?
      • Practice breathing and posturing at least twice a day.

• Refer to the patient workbook, page 69, entitled "Instructions for Practice Exercise."
• Practice these skills this week and record.
  o Use your new skills during the week as they might be useful.
  o When you are doing your practice, just record whether or not you used the skill outside this practice time.
o If you did, please check that skill on the form; and also check the skill as to whether it was helpful.

• INSTRUCTIONS FOR PRACTICE EXERCISES
  o Changing your experience of anxiety is like learning a new skill (e.g., bike-riding, card games) – it gets easier with practice!

  o Practice times:
    Choose a regular practice time for 10-15 minutes once a day for practice.

  o Continue awareness training:
    Continue to identify situations that cause you to feel anxious; and write down feelings, physical signs, thoughts and behaviors associated with those situations.

  o Relaxation training:
    Practice deep breathing to help you relax at scheduled times. Then try to use deep breathing in anxiety-producing situations throughout the week. Make sure to record on your form whether your new skill helped. Practice relaxation posture.

• Refer to the "Guided Imagery Handout" on pp. 70-74 in the workbook. Review with patient.

V. Learn how to relax using images (imagery).

• Why is imagery used?
  o Imagery is a relaxation technique that you can use to ease stress and promote an overall sense of well-being.
    We all have daydreamed about pleasant things that have distracted us and made us feel better. Of course, thinking of negative images can have the opposite effect and actually make us feel worse. Imagery, therefore, can be a powerful tool when used correctly.

  o You can also use imagery to improve confidence / self-esteem.
    E.g., think about a time when you successfully managed a difficult situation or a time when you felt very much in control of your life.

• How does it work?
  Imagery uses your imagination and pleasant experiences to promote wellness and health and to help with stress tension and anxiety. Research has shown that the mind can actually affect how the body functions. It seems the body may not know the difference between an actual event and a thought.

• Develop a positive image or scene using all your senses.
  The first step in developing a positive image is to create a scene that you find appealing and peaceful. This place can be somewhere you have actually been before or even one you have only imagined visiting. Make sure to include all of your senses when constructing this special place. When imagining a glass of lemonade,
for example, imagine holding a glass that feels icy and cold, visualize the color of the lemonade, think of the fresh citrus smell, and, finally, think of how the lemonade tastes. You probably are salivating thinking of this juice, aren’t you? This is an example of an image that uses all your senses and your body reacting to that image or thought. Try creating a similar scene in which you can actually place yourself. Practice relaxing as you use all your senses, and imagine being in this special place.

• What should you expect?
You will find that, after practice, imagery will become a powerful tool to help you feel better.

• Practice makes perfect.
Make sure you find several times a day to apply this technique. Some people find using imagery before going to bed and first thing in the morning to be helpful. When ready to practice, choose a comfortable position, close your eyes, and give yourself permission to relax. Remember to use your own scene that incorporates all your senses when using imagery, and make it as elaborate and realistic as you can.

• LET’s PRACTICE!
  o Find a specific scene – either one the patient selects (script 1) or one of the specific examples provided below (beach, mountains, meadow, etc.).
  o Find a comfortable position, either sitting comfortably in a chair or lying down. Close your eyes; and take several long, deep breaths.

Script # 1
USE this generic example if the patient is able to provide his/her own scene:

Once your whole body feels relaxed, travel to your favorite place... it can be any time period or any place. This place is calm and safe... there are no worries here... Look around this place. What do you see? Do you hear the sounds around you? What are some of the sounds you hear in this place you are imagining? How does this special place smell? Walk around a little, and take in all the wonderful sights. Feel the air around you and relax.. The air is fresh and it’s easy to breathe here. Pay attention to how your body feels... say to yourself, “I am totally relaxed, without worries, all the tension has drained away from my body.” Take a moment to fully experience your favorite place. Notice the sounds, sights, and smells, and notice how it feels to be in this very special place. Remember that you can visit this place as often as you want, and that it is wonderful. Say to yourself, “I am relaxed here; this place is special and makes me feel at peace.”

When you are finished with your visit to this special place, open your eyes and stay in your comfortable position. Continue to breathe smoothly, in a relaxed and rhythmic fashion. Take as long as you want to enjoy and relax. You feel at ease, knowing your special place is always available to you; and you find that you feel relaxed even after you leave.
Script #2 – The Beach

Imagine yourself walking down a sandy beach. The sand is white and warm between your toes. You are looking out over the calm, blue water. The waves are gently lapping at the shore. You feel the pleasant warmth of the sun on your skin; it's a perfectly comfortable temperature outside. Breathe in deeply. There is a gentle breeze, and the sun is shining. Big, cotton-like clouds drift by as you hear sea gulls in the distance. You taste traces of salt on your lips. You are completely relaxed; there are no worries on this beach. There is nothing to distract you from feeling tranquil. Worries drift away. Notice the sounds, sights, and smells; and notice how it feels to be in this very special place.

Feel the sand under your feet. . . you decide to stretch out on the warm, fine, white sand. . . breathe deeply. . . feel the warm air. Your body is completely relaxed, and you have an overall feeling of warmth and comfort. You look up at the clouds passing by slowly across the beautiful blue sky. You are feeling rejuvenated and completely at peace. Remember that you can visit this place as often as you want and that it is wonderful. Say to yourself, “I am relaxed here... this place is special and makes me feel peaceful and content.”

When you are finished with your visit, open your eyes, and stay in your comfortable position. Continue to breathe smoothly, in a relaxed and rhythmic fashion; take as long as you want to enjoy and relax. You feel at ease, knowing your special place is always available to you, and you find that you feel relaxed even after you leave.

Script #3 – The Meadows

Imagine yourself walking through a lovely meadow. The breeze feels pleasant against your skin. You are looking out over the calm, beautiful green grass. The blades of grass are gently swaying in the breeze. You feel the pleasant warmth of the sun on your skin; it's a perfectly comfortable temperature outside. Breathe in deeply. There is a gentle breeze, and the sun is shining. Big, cotton-like clouds drift by as you hear birds in the distance. You hear the wind blow gently through the trees. You taste the sweet summer air on your lips. You are completely relaxed. . . there are no worries in this meadow. There is nothing to distract you from feeling tranquil. Worries drift away. Notice the sounds, sights and smells; and notice how it feels to be in this very special place.

Feel the cool grass under your feet. . . you decide to stretch out on the soft, cushiony grass. . . breathe deeply... feel the air enter your lungs slowly and deeply. Your body is completely relaxed and you have an overall feeling of warmth and comfort. You look up at the clouds passing by slowly across the beautiful blue sky. You are feeling rejuvenated and completely at peace. Remember that you can visit this place as often as you want and that it is wonderful. Say to yourself, “I am relaxed here... this place is special and makes me feel peaceful and content.”
When you are done with your visit, open your eyes and stay in your comfortable position. Continue to breathe smoothly, in a relaxed and rhythmic fashion; take as long as you want to enjoy and relax. You feel at ease knowing your special place is always available to you, and you find that you feel relaxed even after you leave.

- Other Imagery scene suggestions:
  - A garden where you watch big, beautiful clouds in a blue sky, while you inhale the scent of flowers and feel a gentle breeze on your skin as the sunshine warms you
  - A mountain scene where you feel calm and relaxed as you look out over the valley. You see the trees and grass. You dip your feet into a cool mountain stream and let your foot rest on a big, slippery stone as the sunshine warms you. You notice the wind blowing through the trees
  - Advanced scenarios developed with assistance of patient (family, past experiences, etc.).

- Sum up how to use relaxation techniques to control emotional and physical sensations of tension (see Clinician Notes).
  - Request feedback regarding the perceived utility of these techniques.
  - Does the patient have any concerns?
  - Which skills does he/she feel most comfortable with?
  - Review / discuss with the patient the potential uses of relaxation:
    - To decrease stress
    - To feel better (regardless of stress)
    - To reduce feelings of pain
    - To slow thinking when things are feeling out of control

VII. Set action plan(s).
Formulate goals to practice relaxation. Refer patient to “Action Plan” handout on page 75 in the workbook. (See Clinician Notes.)

VIII. Home practice: Implement and monitor action plan.
Your home practice is to carry out and monitor this action plan. We have included a home practice log on page 76 of your workbook. This is another way to monitor whether your action plan is working that allows you to make comments about
how things went for you over the past week. Let's plan to talk about your action plan first thing next session to see how you are doing. (Refer to page 76 of the workbook.)

Wrap-up and schedule the next session.

- Schedule the next session. This should be written in the patient's workbook (Clinician Notes).

For our next session, would you like to meet in-person or by telephone? Let's plan to meet for our next session on __/__/_. Before we end, go ahead and write down the date and time of our next session in your workbook on page 3 (behind table of contents). (Refer to page 1 of workbook)
Session 6
Review

Session Overview (Goals & Skills):

Goals & Skills:

☐ I. Review previous session's home practice assignment.
☐ II. Review progress in treatment:
   o Preferred Skills
   o Use of Skills
   o Impact of Skills on Quality of Life / Functioning / Well-being
☐ III. Discuss how to maintain changes / incorporate skills into everyday life.
   o Addressing Barriers
   o Accessing Motivators for Change
☐ IV. Clarify when it would be good to seek additional help.
☐ V. Wrap-up / Close.
Session 6
Session Overview
Refer to workbook, page 77, "Session 6: Review."

- **Session Content**
  1) Review previous session's home practice assignment.
  2) Review progress in treatment:
     a) Preferred Skills
     b) Use of Skills
     c) Impact of Skills on Quality of Life / Functioning / Well-being
  3) Discuss how to maintain changes / incorporate skills into everyday life.
     a) Addressing Barriers
     b) ACCESSing Motivators for Change
  4) Clarify when it would be good to seek additional help.
  5) Wrap-up / Close.

**I. Review previous home practice:**
Were you able to carry out the action plan?
If so, was the plan successful? Did you meet your goals?
If not, what got in the way? How can the plan be modified?

**II. Review progress in treatment.**
Refer to page 78 of patient workbook.

- Briefly review goals and modules/skills covered.
- Briefly review all modules covered with the patient.
  Let's briefly review the skills you learned from each module.
  In Module _____, we discussed how _______
Explore with the patient any changes noticed since the start of treatment (Clinician Notes).

- Refer back to goals, and ask about what has been accomplished and what is yet to be accomplished.
- Looking back at your goals, how do you think you are doing?
- What progress have you seen? (Expand progress statement by way of what you – the therapist – have seen in the patient since you started working with him/her. Add other progress where possible.)

- Areas to explore:
  - Overall quality of life
  - Physical health / coping with chronic illness
  - Emotional health / mood
  - Feelings of confidence

If the patient struggles to make progress, it is highly encouraged that you identify any notable signs of progress from your perspective. For example,

I have noticed that, although you have not reached your dietary goal to lose 5 lbs., you are eating better – more healthily. You have decreased your salt intake and reduced the amount of fat in your diet. Although you have not reached your exact goal of losing 5 lbs., I want to encourage you to continue your positive work. Over time, you will get healthier; and your weight will likely go down.

Explore with the patient factors that are contributing to changes (Clinician Notes).

- Focus on what the patient is doing differently
  - Skill application
  - Changes in behavior
  - Changes in thoughts
  - Other changes

Identify preferred skills (Clinician Notes)

- Which modules/skills does the patient prefer?

Why do you think you have made progress toward your goals?

What skills from the ACCESS intervention are you currently using? Which skills continue to help you?
III. Discuss maintaining changes.
Refer to page 79 of the patient workbook.

Planning for difficulties / addressing barriers

- To maximally benefit from the tools learned through our meetings, let's try to
determine when the tools are most helpful for you to use.

  o Are there particular situations in which you think the tools will be most helpful (e.g.,
    when I am alone, when my wife and I argue)?
  o Are there particular physical symptoms that indicate you should use the tools (e.g.,
    increased shortness of breath, increased fatigue)?
  o Do certain behaviors of yours indicate the tools would be helpful (e.g., I am not
    staying as active as I would like – I stopped doing my hobbies or exercise)?
  o Do certain feelings suggest you should use your tools (e.g., increased anxiety,
    stress, tension, or depression)?
  o Do particular things others may say to you indicate you should use the tools (e.g.,
    my wife commented that I am irritable)?

ACCESSing motivators that increase change
Refer to page 80 of the patient workbook.

- Often, it is important to include people, images, or thoughts that can increase
  your motivation for maintaining the positive changes you are working to keep.

  o Telling a spouse or friend about your commitment and updating him/her about your
    progress often serve as a way for you to be accountable to more than just yourself.
  o Thinking about the positive outcomes you hope to obtain is also motivating. For
    example, thinking about a healthy heart or healthy lungs can increase your desire to
    avoid smoking or eat healthy.
  o Positive thinking can also increase your drive to retain positive change. Examples of
    positive thoughts include statements such as, "I can do this," and "Although at first it
    is difficult to change, I know that in the long-run I will be much better off."
  o One final strategy might be to address small challenges through short-term goals
    that are reachable. For example, I want to exercise three times next week – this will
    motivate you to accomplish the specific goal and can also provide you with a good
    feeling or reinforcement when you reach your goal.
IV. Seek additional help if you need to do so.

Refer to workbook, page 81.

- Sometimes, despite our attempts to use the skills learned through this session, more outside help is needed to help you feel better.
  - What are some signs you should seek outside help to feel better?
  - Who could you contact? Create a hierarchy with the patient of people to contact if each one cannot help. Provide contact numbers for resources available within the VA.

V. Close the review session.

- Review with the patient what you hope he/she takes away from the intervention. Thank him/her for participating, and wish him/her well in the future. Inform him/her that you look forward to hearing from him/her at the next telephone session.
- Schedule booster session (4 weeks following this appointment).

It sounds like you have a good understanding of the progress you have made. I am inspired by the changes you have made and the courage you have shown in managing your illness and related issues.

Although the active phase of the ACCESS program is now completed, I look forward to the next 2 months, during which I will contact you by telephone at 1 and 2 months from now to briefly follow-up with you as to how things are going. After these two telephone conversations, we will officially end our work together.

Do you have any questions for me?

Ensure booster sessions are scheduled 1 and 2 months after the wrap-up session, and make sure the patient is aware of scheduled sessions.
Booster Sessions – Telephone Calls - 1 and 2 months post active treatment

Booster Session #1

I. Check on the patient and how he/she is doing.

II. Ask about use of coping strategies and self-management skills.

III. Address barriers to coping (where possible).

IV. Encourage the patient to continue to use coping / self-management skills.

V. Wrap-up and schedule the next call – in 4 weeks.

Booster Session #2

I. Check on the patient and how he/she is doing.

II. Ask about the use of coping strategies and self-management skills.

III. Address barriers to coping (where possible).

IV. Encourage the patient to continue to use coping / self-management skills.

V. If the patient requires additional treatment, provide him/her with a referral list and/or specific referral back to the primary care provider or a specialty mental health program within the VA.

VI. Wrap-up and thank the patient for completing his/her treatment.