



**Service Priorities and Programmes**  
**Electronic Presentations**

**Convention ID:** 506

**Submitting author:** Mr S K LEUNG

**Post title:** Registered Nurse, Kwai Chung Hospital, KWC

**Innovative Practice for Persons-in-recovery and Case Managers --- Mental Health Recovery Booklet (實踐復元路之心聲篇)**

*Leung SK (1) , Lee WK (1), Li MS, (1), Yuen SK (2), Cheng LK(1)*

*(1) Personalised Care Programme (Kwai Tsing District), Kwai Chung Hospital, (2) Personalised Care Programme (Sham Shui Po District), Kwai Chung Hospital*

**Keywords:**

mental health recovery

toolkit

person-in-recovery

recovery assessment

case management

**Introduction**

Personally-defined recovery is the backbone of recovery-orientated practice (Roberts & Boardman, 2014). It emphasizes that recovery should be discovered by the persons-in-recovery (PIRs) themselves. Recovery Booklets, which can facilitate case managers (CMs) to co-author the recovery journey with the PIRs and co-search their 'absent but implicit' lived stories step by step, are a series of new innovative toolkits for recovery of people with mental health problems. The first color-printed booklet namely 'Our Voices' (實踐復元路之心聲篇), has been published in Jan, 2014 in Personalised Care Programme (Kwai Tsing & Sham Shui Po Districts). Based on ten elements of recovery, CMs express their views of mental health recovery at the beginning. To motivate PIRs to voice out their unique voices and unspoken messages, three guided questions are designed for PIRs and CMs to co-discover their unrecognized strengths and hidden possibilities.

**Objectives**

1.To enhance knowledge of mental health recovery. 2.To provide a platform for case managers to recognize and validate the inner voices of PIRs. 3.To increase confidence of PIRs throughout the recovery journey.

**Methodology**

Target Group: 60 (male or female) PIRs with Severe Mental Illness Age Group: 18-64 In February 2014, during outreach visits, ten recovery coaching sessions will be rendered within twelve months by CMs. The Recovery Assessment Scale (RAS) will be conducted as pre-test. Each element of recovery will be discussed monthly. In the eleventh months, RAS will be conducted again as post-test. The feedback on case managers and PIRs will be also collected for programme evaluation.

**Result**

Intended Outcomes 1) Case managers (CMs) a) CMs give positive feedback to this recovery toolkit. b) CMs increase confidence to provide recovery coaching systemically with this toolkit. 2) Persons-in-Recovery (PIRs) a) PIRs are able to identify their whereabouts in the process of recovery. b) PIRs are able to understand the elements of recovery. c) PIRs are able to give positive feedback to this programme. d) The positive changes as identified by the pre-and-post RAS.