



## Patient Training Guideline

**Overview:** The Primary Therapist or Dietitian will introduce Recovery Record to patients to ensure expectations are managed and the app is used in the context of treatment as intended.

*The Recovery Record Training has three purposes:*

1. **The Basics (“Why”):** Introduce patients to self-monitoring and coping skills as important foundational components of the recovery process.
2. **Ground Rules (“How”):** Let patients know how Recovery Record will and will not be used in program. Set expectations.
3. **Hands on Training (“What”):** Help patients set up their Recovery Record app. Orient patients to the app including how to use its features.

## Talking Points: The Basics (Why)

1. **Recovery oriented app vs. dieting app:** Invite patients to share their experiences with Recovery Record or other mobile applications - what did they like or find helpful? What didn't they like? Make distinction between calorie counting apps and behavior change-oriented apps:
  - a. Self-monitoring to increase self-awareness of emotions, thoughts, behaviors and the relationship between them. This helps patient and treatment team experts in understanding the nature and context of the problem.
  - b. Specific coping skills can be practiced to help change behaviors and effectively manage urges and tough emotions.
  - c. Highlight irregular eating as a maintaining factor and app to help develop a habit of regular eating and adjust to the initial associated discomfort.
  - d. App as a ‘helper’ on their journey – a secure place they can track progress and set backs, keep up with programming, and access in the moment skills and support. A tool they can practice using in program and take outside of the treatment facility and into the storm of day-to-day life.
2. **Get out in front of common objections:**
  - a. **Fear of heightened preoccupation with food:** It is natural that you have heightened awareness of the thoughts, feelings and urges associated with meals. The app will help you notice and become an expert in the nature of your eating problem. This is uncomfortable at first. It is well studied that the preoccupation goes away after a few weeks, but the benefits of becoming an expert in your eating problem remain!

## Procedure, Continued:

- b. **Fear of breaches to sensitive data:** Recovery Record is almost as secure as a bank! Recovery Record is HIPPA-compliant. This means patient data is kept private and confidential, even when shared with your treatment team via the app. Only the treatment people you are linked with access your detailed information, and your outcome questionnaire scores are used by the organization to help evaluate and improve quality of care.
- c. **Fear of judgment or punishment if logging honestly:** It can be daunting sharing things you might be ashamed of – remember, the antidote to breaking the hold of shame is sharing and receiving empathy. I can help you only as much as you let me and share with me. Push yourself to be as honest as you can. Just by being honest in RR, you move fears into the realm of the workable, and empower yourself and your team to understand the problem and find the most effective path to recovery.
- d. **Uncertainty about when/how data is used:** You might be wondering when your team will be reviewing logs. Remember, they will be predominantly reviewing data with you in individual sessions. In addition they will provide one “interaction” (e.g. feedback) per week. You can also expect them to update your coping skills and clinical goals every week or two. You can also access your own charts, skills and goals – feel free to take ownership of the tool and let your clinician know if you have found something interesting.

## Talking Points: Ground Rules (How)

### 1. What Recovery Record is and is not:

- a. **For patients participating in group programming, they will be expected to use cell phones appropriately** as defined below:
  - i. Patients must comply with privacy and confidentiality rules as set out by HIPAA. Therefore, patients may not take pictures of peers, staff or the treatment center with electronics or cell phones. Patients may not post pictures of treatment center, other patients or staff on social websites, or in anyway reveal the identity of peers in treatment to anyone outside the treatment setting.
  - ii. Patients may not share their mobile phones
- b. **Recovery Record is not for emergency use** or the place to report emergencies. If you do have an emergency, please follow clinic protocol.
- c. **Just like emails, your clinician is not expected to be aware of or respond to what you write into Recovery Record**, except in session.
- d. Encourage patients to not only self-monitor via the app, but to also continue to share experiences in person with peers and staff.
- e. When discharged from clinic, patients **may continue to use Recovery Record on their own.**

## Procedure, Continued:

### 2. Expectation Setting:

- a. **Patient logging expectations:** Discuss with patients expectations regarding frequency of use; that they will all meals and snacks (even if they are missed!) and log feelings, behaviors and thoughts separately to meals as they come up.
- b. **Team interactions:** Individual therapists and dietitians will each review data in or before individual sessions. One in-app feedback and a new skill or meal plan will be added to the app approximately one time per week. Goals for the week from the Treatment Plan will also be added to RR.

### Talking Points: Hands on Training (What)

*Patients are invited to install the Recovery Record application on their phones. Facilitator installs a patient app from the app store prior to this training, and demonstrates how to log a meal in parallel with the patient.*

#### 1. Setup and instructional demonstration:

- a. **Patient sets up their account details:** Patients click on *Profile* and select an avatar and complete their personal information (name, email, password).
- b. **Linking with the patient:** Guide patients to the “Clinician Connect” section. Provide link codes for relevant team members, ask patient to enter these. Accept the link invitation in your own account.
- c. **Individualize setup:** Walk through the Onboarding steps. Ask for patient’s input regarding behaviors that should be monitored. Set coping skills and goals to help them get started.
- d. **Practice meal logging:** Patients log the last meal that they ate. As they do so, explain that the app will only help them and their team as much as they are transparent and open in it. On the “Reflect” screen (with animal picture) point out that patient can “Like” pictures and quotes to collect them. *Meal logging is the main feature, but patients are also encouraged to log behaviors, feelings and thoughts separately to meal logs.*
- e. **Self-guided resources:** In addition to accessing the skills and goals set by their primary therapist and dietitian, patients are shown they can explore other coping skills in the app, can review their own charts to see if they can see any patterns. *Pair-Up is a great feature to get buy-in that you might like to demo.*

Please contact [support@recoveryrecord.com](mailto:support@recoveryrecord.com) if you have any questions or concerns.