

## Anne 's story

*'When my CPN mentioned recovery I was scared if I am honest. I have had bi-polar disorder for 20 years and didn't think recovery was for me.*

*I don't know why I was scared . I worked with my CPN and have learned about my symptoms and how I can do things to keep me well. I have hobbies and interests which I like to do and I volunteer twice a week . I have not had a relapse for nearly 3 years. I would never have believed I could achieve so much and my family are really proud of me.*

*My recovery has been about ME !! '*

## Important information

**Named person/ care co-ordinator**

**Contact number**

**GP contact details**

**Out-of-hours crisis number ( Access team )**

0300 123 0907 option 1

**Mental Health Helpline**

0808 800 2234

**Samaritans**

116123



## The Journey to Recovery

**A guide for service users**

*The principles of Recovery are embedded in the vision and values of North Staffordshire Combined Healthcare. We believe that people who use our services should be enabled to reach their personal potential .*

**Towards Outstanding**

**We're on a journey...**

CCF Organisational Rating - GOOD



For more advice: [www.nhs.uk/ask](http://www.nhs.uk/ask)  
For job advice: [www.nhs.uk/jobs](http://www.nhs.uk/jobs)

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## What is Recovery ?

- Recovery is unique to every individual. There is no ***'one size fits all'***
- Recovery is about building a meaningful and satisfying life as defined by each person them self, whether or not there are ongoing symptoms or challenges to live with.
- People are encouraged to develop skills and strategies to achieve and maintain wellbeing; developing resilience to cope with stressful experiences is an important recovery principle.
- A recovery approach should focus on strengths and wellness and not on illness and symptoms.
- Maintaining hope is essential. Individuals may experience setbacks but can learn how to use their skills and strategies to minimise the impact.

## How does it apply to me ?

- When you are referred to the community mental health team you will have an initial assessment of your needs .
- If your needs are not complex your care will be called standard care; your care plan will be in the form of a letter which is shared with your GP and there may be only one person involved in you care. This person will be your care coordinator.
- If your care needs are more complex you will be registered for the Care Programme Approach ( CPA); there may be a number of people involved in your care and you will have a named care coordinator who will be responsible for keeping in touch with you and everyone else involved in your care.
- Your care plan will be developed with you to reflect your needs and you will agree goals together which will help support your recovery. You will have your own copy of the plan and copies will be shared with other people involved in your care. If you give permission this will include your family/ carer.

## Care reviews

- Whether you receive standard or complex care you will be involved in regular reviews to check that your recovery goals are being met and you are developing skills to manage your mental health needs .
- Your care plan will be amended to reflect any changes; this may include identifying new goals which you feel are important to you.
- If you have given permission your family will be included in your reviews
- As you move through the identified care pathway it is important to plan towards moving on from mental health services .
- We will work together to help you achieve this.
- The leaflet Moving on from Mental Health Services gives you some useful information .
- Once a discharge date has been agreed we will ensure that should you need further support you will know how to access it.