

FACT SHEET

Project Recovery: Illness Management & Recovery (IMR) November 2012

BACKGROUND

In January 2012, Beaver County Rehabilitation Services (BCRC) began providing Illness Management and Recovery services (IMR), an evidence-based practice. IMR's primary objective is "...to empower consumers to manage their illnesses, find their own goals for recovery, and make informed decisions about their treatment by teaching them the necessary knowledge and skills."¹ For BCRC this means striving for a consumer centered program that enables the *consumer* to make positive decisions regarding their recovery. This fact sheet focuses on data from January 2012 through June 2012².

DEMOGRAPHICS

- 19 individuals enrolled and 3 consumers were discharged from the program
- 52.6% (10) were male and 47.4% (9) were female
- Participant ages ranged from 27 to 68 years old, with an average participant age of 43 years.
- Primary diagnoses of depression and schizophrenia represent roughly half (47.4%) of the total participant diagnoses

IMR SERVICE PROVISION

- Estimated length of program completion is 12 months
- BCRC offers 3 IMR group sessions per week, with an average session time of 45 minutes
- Consumers attended an average of 7.1 sessions

FIDELITY TO THE IMR MODEL: HAS IMR BEEN IMPLEMENTED AS PLANNED?

Consumer Perspectives

- **High satisfaction** with the program
- **Staff's** "encouragement, enthusiasm, humor, and little push" **help consumers** attain goals
- **Limited support** from family and friends

Practitioner Perspectives:

- Thoroughly teaching the material and ensuring **consumers' comprehension** was **emphasized**
- Supplemental **videos** & activities were **helpful**
- Greater **family/friend** involvement is **needed**

MAIN FINDING

BCRC's IMR services are being implemented **with fidelity** and there was a **high level of consistency** among responses from both consumers and program staff who were interviewed.

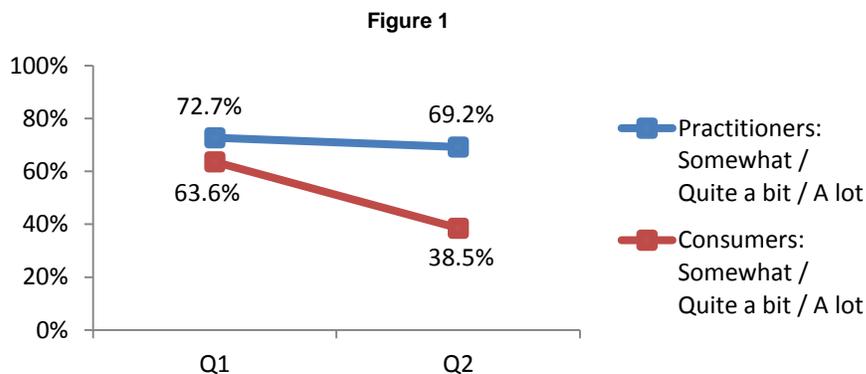
¹ <http://store.samhsa.gov/shin/content//SMA09-4463/BuildingYourProgram-IMR.pdf>, pp. 1

² Responses were compared by quarter.

HAS IMR RESULTED IN THE EXPECTED OUTCOMES?

KEY FINDINGS

- Consumers and practitioners both noted a **reduction** in clients experiencing **relapse** within the last year, representing a **positive trend in client mental health**
- Both groups indicated that most clients currently **lack written relapse prevention plans**
- Consumers indicated a decrease in **involvement of family/friends** in their treatment from Q1 to Q2, and practitioners cited low family/friend involvement across both quarters
- 91% of clients reported they **can manage their illness**
- When asked to what extent **symptoms impair functioning**, there was a 25% decrease (from Q1 to Q2) in consumers that stated “a lot”/“quite a bit”/“somewhat”; but BCRC staff responses only revealed a 3.5% decrease for the same period (See Figure 1)



- An **18.9% decrease** was reported in the **levels of distress** that consumers experienced as a result of their symptoms
- Consumers expressed increased interest and participation in **self-help activities** across quarters, with a 21.7% rise in those that participate regularly, and a 12.6% rise in occasional participation
- Both practitioners and consumers agree that **the majority of consumers have** at least “some” to “a great deal” of **knowledge** concerning their symptoms, treatment, and medication. (See Figure 2)

