Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

Appendix 1

Examples of Dual Diagnosis Care Plans

Example One

Needs

Mr/Mrs ….. has possible problems in engagement with services due to their current problematic current substance misuse and mental health problems.

Goals

To agree that Mr/Mrs ….. does not attend appointments when intoxicated and to have convenient appointment times that will assist Mr/Mrs ….. and be seen as sympathetic to his/her current substance misuse pattern to promote engagement within services.

Plan and Review

Mr/Mrs….. to have weekly/fortnightly appointments to start to build a trusting and therapeutic relationship. Appointment times will be jointly agreed to enable flexibility for Mr/Mrs ….. and the member of staff to promote the engagement process.

This Care Plan will be reviewed on the ……

Example Two

Needs

Mr/Mrs ….. sometimes underestimates the impact of his/her substance misuse and how it can impact upon his/her decision-making and especially around the area of impulsive decision-making.

Goals

To help Mr/Mrs ..…. identify patterns of previous impulsive decision-making and choices that had been influenced by his/her substance misuse. Mr/Mrs ..… to be able through psycho-education to identify the previous decision/choices and in the future apply this knowledge to future decisions/choices making process.

Plan and Review

To use appointments to assist Mr/Mrs ..… to self-identify and discuss his/her historical patterns in their decision-making/choices. Positively reinforce improve decisions/choices when new knowledge has been applied.

This Care Plan will be reviewed on the ……

Example Three

Needs

Mr/Mrs ….. have a number of professional/agencies involved in their care that are working with Mr/Mrs on their mental health and substance misuse problems and this will require collaborative and co-ordinated working to maximise their recovery.

Goals

The care co-ordinator will coordinate (having gained consent to share information from Mr/Mrs…..) the sharing of appropriate information between the professionals/ agencies involved in their care. This will avoid repetition of work and improved communication for all involved resulting in better delivery of care.

Plan and review

The care co-ordinator will organise Care Programme Approach (CPA) meetings as set out in the Trust policy and within national guideline's. These meetings will be held regularly and can be called at any time should the need arise. Mr/Mrs….., all professionals/agencies involved and carers will be invited to the CPA meeting (having gained consent to share information from Mr/Mrs…..). Current work/therapy undertaken will be reviewed and future work/therapy will be jointly agreed and who is responsible to carry out this work/therapy.

This Care Plan will be reviewed on the ……