35 minutes – Three Role Plays:
**Engaging Peer Center Members – How Best to Draw Them In**

For this part of the MAP Training, Susan and Carol will do three different role plays. The role plays are about introducing the Making A Plan Toolkit to peer members. After each role play we will have class discussion. The time we have for each role play and group discussion is 10 minutes total for each.

Michael will role play the Member. Susan will role play the Making a Plan Facilitator. (MAPF)

Susan will facilitate class discussion following each role play. Emphasis will be on stimulating discussion about things helpful for the student to know and understand. (Watch the time!!)

**Role Play 1. Drawing a person in, stirring interest, emphasizing importance of self-advocacy**

**Scenario:** The person has been referred to you as the MAP Facilitator by Center staff to get help using the MAP Toolkit. You want to learn what they know about ACP and MAP Program. And you let them know how you can assist, emphasizing importance of self-advocacy when doing MAP work.

**Member:** In last week’s Peer Member Discussion Group, there was talk about a new program that could help me to make my care wishes known ahead of a crisis. And they said I could do that in a way that was legally binding on health care professionals and family members helping when I can’t guide my own care. I would like to learn how to do that so I can do that for myself. I think doing this could really give me peace of mind about things that bother me. Can you help me with this?

**MAPF:** Yes, I’d be happy to help you. It’s great that that you are thinking about this now when you are clear headed and able to do this. I know from my own
experience that I am not always able to think clearly during those difficult times. You probably have thought some about what you would like to have happen. This will help you make your wishes known ahead of time, while you are well. That is what the Making A Plan Toolkit is all about. So . . . let’s get started.

Do you know about Advance Care Planning, or have you ever done an advance care plan of any kind?

**Member:** I remember that my mom did something like that when she had a stroke a few years ago. She wanted my brother to know what kind of care she wants if her condition got bad. But I really don’t know how that would work for me. Mom said that it helped her relax about what would happen to her when the time came that she could not speak for herself. My brother was also less anxious knowing what Mom’s wishes are. I am not sure how this is relevant to me since I am not dying?

**MAPF:** Advance Care Planning is **about living** through serious illness and the ending of life. Any one of us can have an accident, a serious illness or something else that makes it impossible for us to speak for ourselves. A mental health crisis is recognized as a serious illness under the law. That is what is so great about the Making A Plan Toolkit. We can state our mental health needs ahead of a crisis.

Have you ever written a Wellness Recovery Action Plan (WRAP) plan? MAP is very similar only it is more official. MAP includes instruction about mental health too and is legally binding because we make it part of our advance health care directive.

**Member:** That sounds all well and good but complicated. Can you do that for me?

**MAPF:** This will be your plan expressing your wishes, so it needs to be thought through and written by you. I am here to be your guide and a sounding board to help you think through your choices. The MAP workbook is easy to use and was developed by people just like us having lived experience with mental health challenges and other serious illnesses.

**Member:** OK I would like to learn more.

**MAPF:** Great! Let’s take one step at a time. For today, we’ll begin with what you already know. What your mom did is called Advance Care Planning. It sounds like
she created an Advance Health Care Directive which allows her to name your brother to guide her care if she is not able to do so herself. The Advance Directive would give your brother and her health care providers instruction about what to do if she couldn’t speak for herself. In that case, your brother would make decisions on her behalf about the care she should receive, honoring her wishes. It’s very common for people to do that concerning their physical health care wishes. Does this sound familiar?

**Member:** Yes, now that you explain it that way, I do think that’s what mom did. She told me John would look after her when she can’t speak for herself. She assured me that he knows what to do because she told him what she wants when that time comes and not to worry.

**MAPF:** So, what we are talking about with the Making A Plan Toolkit, or MAP as we call it, is basically the same thing. But MAP is doing advance care planning with mental health in mind. The MAP materials are user friendly with easy-to-read documents created by peers for peers with the help of behavioral health professionals. MAP was created especially for people living with mental health challenges to empower them to receive care desired in times of crisis.

Have you had a chance to look at the MAP Toolkit?

**Member:** No I haven’t. In class last week they just talked a little about what it is but didn’t really show us anything. They said we should come see you if we were interested to learn more and get a copy.

**MAPF:** Wonderful. Is this a good time to begin working on this?

**Member:** Yes it is.

**MAPF:** To begin, I will give you a copy of the MAP Toolkit and this Ziploc bag for you to keep it all together. For confidentiality reasons, we cannot keep your personal MAP materials here in the Peer Center. You must keep them with you and bring each time you come to meet with me and do MAP work. Is this ok with you?

**Member:** Yes, that will work fine, thank you.

*End Role Play 1*

*Class Discussion*
Role Play 2. Introducing the MAP Toolkit and how it works

Scenario: The peer member is beginning their first MAP work session with you using the MAP Toolkit. To open the work session, you will give them a copy of the MAP Toolkit, let them know how you can assist them using that, and determine if they would like to proceed working with you to do advance care planning with mental health in mind using the MAP Toolkit. For today, you can follow along using your own MAPF Toolkit if you want to do that.

MAPF: Hello ________________. I’m so glad you decided to do advance care plan using the Making and Plan (MAP) toolkit. Using the copy I gave you, let’s review this together.

Member: Yes that would help me get an idea of what is involved

MAPF: If you open your MAP tool kit the first thing you will find is the coversheet. Let’s see what all the component parts of the MAP toolkit are by looking at the cover sheet.

Member: Is this the form you are talking about?

MAPF: Yes, that’s the one. It’s your guide to all the parts of the toolkit. Let’s review that briefly. . . . (do)

Now to get started, pull out the booklet that says: “Part 1: Workbook”

   Wait for member to look through their packet

Member: Is this it?

MAPF: Yes that is it. If you look on page 4 there is a table of contents outlining the steps in the workbook. Do you have any questions so far?

Member: Yes I see in the contents of part one a reference to “Part II: Forms” what is that?

MAPF: Let us take a look in the toolkit package and see if we can find the section labeled Part II Forms?

Member: Oh! I see, here it is. (Shows Part II )
**MAPF:** Yes, that’s it! Let’s look inside. Part II contains two forms you will need to need to fill in as part of your advanced care plan. One is the “Advanced Care Directive” form, and the other is the “Personal Request” form.

**Member:** When will we fill these in?

**MAPF:** After our review today, you can take your Toolkit with you and begin completing it yourself. You may want to work with a family member or friend you think of as a Trusted Helper. The workbook gives you guidance about doing that too. Fill out all you can. Then come back in to meet with me again if you’d like my help along the way. Here at the Center I can do 2 more work sessions helping you with MAP work if you like. You just need to let me know when you would like to schedule another work session and we’ll find a time that works. It’s just like how we do peer counseling sessions here at the Center. MAP sessions can be up to 30 minutes long if need be each time we meet including today.

**Member:** If I start on my own and I have questions who do I ask?

**MAPF:** If you are working with a Trusted Helper, see if they could help answer your questions. It’s best to go through the entire Toolkit reading things carefully and reflecting on issues before you actually begin completing the forms. I suggest you do that and make some notes along the way. Then schedule another MAP work session to come in and meet with me to talk over your questions and work on completing your documents. It is important to read the Cover Sheet and Workbook carefully as that will answer many questions you may have and provide you with good guidance.

**Member:** That sounds good, I’ll do that. . . . Now, what I’m wondering is: How will I know that I completed my documents correctly?

**MAPF:** We can schedule a session to review those together.

**Member:** If I would like to do MAP with your assistance, when can we start?

**MAPF:** We can start today and then schedule 1 or 2 more sessions for me to help you complete the documents.

**Member:** That would be great. Let’s get started!
MAPF: We need to be aware that some of the topics in this workbook are very personal. So it would be better if we find a place that is quiet and private to maintain confidentiality. Is there some place here that you would feel more comfortable or is this OK where we are?

Member: We could use the small conference room at the peer center. I will check with the center manager if that would be OK.

MAPF: There is one thing that is important for you to think about before we start. Doing this work might bring up some topics that could cause an emotional response and a need for deeper discussion or peer support. This would be something not directly related to completion of your advance care plan but none the less important to talk about.

We need to be thinking about what we would do if that happens. You are in the driver’s seat on this. You could make note of the issue and then schedule a time to meet for peer support about that later. Or, if you prefer, we can stop work on MAP and switch to peer support right away if we have time needed. So, I want you to be thinking about how you want to handle if that occurs. For now I just want you to be aware that this could happen. If it does we’ll decide how to handle it in the moment if that works for you.

Member: Yes, I’m good with that. Thanks for letting me know that. If something feels urgent to address I will let you know. I would like to get the MAP process done in as short a time as possible so I probably would postpone additional peer support for later.

MAPF: Great let’s get started!

End of roleplay 2

Class Discussion
Role Play 3: Beginning the ACP/MH conversation using the MAP Workbook & trigger issues

Scenario: This role play illustrates how we can orient the person in terms of things that MAP may trigger and how to handle if an issue arises that requires peer support.

MAPF: As you know, the MAP Toolkit addresses what kind of care we want if we can’t guide our own care. That could happen if we had an accident, had to have surgery, were seriously ill or had a health or mental health crisis making it impossible to direct our own care.

Thinking about all of this may trigger things for you that would best be addressed in a peer support session. It is important that you always feel in control of this process. You are in the driver’s seat and I am here to be your navigator. This will be your plan, and you get decide all the steps along the way.

To begin now, what kinds of support do you need to feel in control?

Member: I need for us to be in a quiet private place.

MAPF: Is there a place here that you would prefer for us to work?

Member: We could use the picnic bench outside the peer center. It is in the shade, has a bench and a table. It is away from the main entrance and parking lot so it would be quiet and relatively private.

MAPF: Sounds good. We can spend up to three sessions together working to complete the MAP workbook and forms. What day and time works best for you? Let me look at my calendar too.

Member: Mondays at 2pm will work best for me.

MAPF: Mondays at 2pm will work for me too.

Member: Ok that is a date! I am looking forward to getting started.

MAPF: Before we meet again, please read carefully through the work book and think about how you want to answer questions that come up as you do that.

Member: O.K. I will read through the workbook before I see you next time and start thinking about what I would like to include in my plan.
MAPF: Remember, as you go through the workbook it might raise topics that trigger emotional response. Be thinking about what kind of support do you think could work best for you, If that happens.

Member: Usually, if I have a few minutes, I am usually able to calm myself. A grounding exercise sometimes helps, like taking moment to take a few deep breaths or look around at my surroundings to remind me that I am in a safe place. I like to put my feet firmly on the ground and hold on to my seat. Naming some of the things I can see, hear, touch, smell and (taste) is also helpful. If I cannot calm myself in the moment I would need to stop my MAP work session and schedule to continue later.

MAPF: Thank you. It’s very helpful to know what will work for you. This is a great example of advanced care planning in action! If doing that doesn’t work for you, you will be welcome to take up whatever issues may arise in a peer support session. Depending on the urgency and how much time we have left in the MAP work session, we could do some peer support right then and there. We’ll see how it goes and you will be in the driver’s seat no matter what.

End of Role Play 3

Class Discussion