



**The Cadence Programme:  
Enhancing psychological  
care in **cardiac**  
**rehabilitation services****

# Record of delivery of Cadence Programme

**Patient Name:** \_\_\_\_\_

**Cadence Study ID:** \_\_\_\_\_



Version 6:  
4 June 2015

# Session 1

Session Checklist	Tick if done (✓)	Space for comments and reflections	
<b>ASSESS THE PATIENT'S MOOD AND RISK</b>			
<b>Ask the patient to fill in a PHQ-9 and GAD-7</b> <i>Feedback scores to patient and discuss what these mean</i>	<input type="checkbox"/>	<b>PHQ-9 score:</b>	<b>GAD-7 score:</b>
<b>Discuss thoughts of: life not being worth living and harming/neglecting self or others</b>	<input type="checkbox"/>	<b>Risk assessment:</b> Risk to self? (Y/N)                      Risk to others? (Y/N)	
<b>Check response on Item 9 of the PHQ</b>			
<b>If appropriate:</b>		<i>If 'Yes':</i>	
<ul style="list-style-type: none"><li>• Ask the standard risk assessment questions</li><li>• Take action according to level of risk</li></ul>	<input type="checkbox"/>	<b>Level of risk identified (A, B1, B2, C):</b> <b>Action taken:</b>	
<b>DISCUSS LOW MOOD AND TREATMENT OPTIONS</b>			
<b>Discuss low mood and depression</b>	<input type="checkbox"/>		
<b>Explain treatment options for low mood</b> <ul style="list-style-type: none"><li>• Supported self-help (Cadence BA book)</li><li>• Consulting their own GP</li><li>• Referral to local IAPT services</li><li>• Referral to specialist psychology services</li><li>• Referral to other services</li></ul>	<input type="checkbox"/>	<b>Patient preference(s):</b>	
<b>INTRODUCE THE SUPPORTED SELF-HELP (CADENCE BA) WORKBOOK – if the patient wishes to try this</b>			
<b>Hand the patient the Cadence Patient Pack</b>	<input type="checkbox"/>	<b>Comments/reflections:</b>	
<b>Introduce the Behavioural Activation model, talk through main sections of the patient workbook and the accompanying tools</b>	<input type="checkbox"/>		
<b>Explain what happens next</b> <ul style="list-style-type: none"><li>• Encourage the patient to read workbook sections and complete tools at home</li><li>• Refer the patient to the 'Things to do' checklist</li><li>• Discuss the self-help book at next appointment (or telephone call)</li></ul>	<input type="checkbox"/>		
<b>CARE COORDINATION ACTIVITY – if the patient does not wish to try the self-help workbook</b>			
<b>Discuss alternative treatment(s) for low mood and take relevant action – such as:</b> <ul style="list-style-type: none"><li>• Continue to monitor the patient's mood</li><li>• Write to or telephone the patient's GP</li><li>• Provide information for the patient to self-refer to local IAPT service, or make a referral yourself</li><li>• Arrange a specialist psychological therapy referral</li></ul>	<input type="checkbox"/>	<b>Agreed plan and actions taken:</b>	

**Clinical supervision notes**

Supervisor name:

## Session 2

### Session checklist

Tick if done

(✓)

### Space for comments and reflections

#### RE-ASSESS THE PATIENT'S MOOD AND RISK

Ask the patient how their mood has been since their last appointment. Ask them to fill in a PHQ-9 and GAD-7 if they have not already done this.

PHQ-9 score:

GAD-7 score:

*Feedback scores to patient and discuss what these mean, particularly any changes in scores*

Discuss thoughts of: life not being worth living and harming/neglecting self or others

Risk assessment:

Risk to self? (Y/N)

Risk to others? (Y/N)

Check response on Item 9 of the PHQ

If appropriate:

- Ask the standard risk assessment questions
- Take action according to level of risk

If 'Yes':

Level of risk identified (A, B1, B2, C):

Action taken:

#### CHECK THE PATIENT'S PROGRESS WITH THE CADENCE SELF-HELP WORKBOOK – if they are trying this

How are they getting on with the BA workbook?

Comments/reflections:

- Which sections have they read?
- Do they have any questions about it?
- How are they feeling about the workbook?

How are they getting on with the exercises?

- Mood diary completion
- Identifying links between mood and activities
- Activity scheduling
- Do they have any questions about the exercises?
- Do you need to explain anything again?

Agree actions for next session:

- Encourage the patient to read the workbook
- Encourage the patient to complete their Weekly Activity Record and their PHQ-9 and GAD-7
- Refer the patient to the 'Things to do' checklist
- Review their progress at next appointment

#### CARE COORDINATION ROLE

Discuss other treatment options, if appropriate.

Agreed plan and actions taken:

Review progress with any self-referrals or referrals you have already made.

## **Clinical supervision notes**

Supervisor name:

## Session 3

### Session Checklist

Tick if done  
(✓)

Space for comments and reflections

#### RE-ASSESS THE PATIENT'S MOOD AND RISK

Ask the patient how their mood has been since their last appointment. Ask them to fill in a PHQ-9 and GAD-7 if they have not already done this.

PHQ-9 score:

GAD-7 score:

*Feedback scores to patient and discuss what these mean, particularly any changes in scores*

Discuss thoughts of: life not being worth living and harming/neglecting self or others

Risk assessment:

Risk to self? (Y/N)

Risk to others? (Y/N)

Check response on Item 9 of the PHQ

If appropriate:

- Ask the standard risk assessment questions
- Take action according to level of risk

If 'Yes':

Level of risk identified (A, B1, B2, C):

Action taken:

#### CHECK THE PATIENT'S PROGRESS WITH THE CADENCE SELF-HELP WORKBOOK – if they are trying this

How are they getting on with the BA workbook?

Comments/reflections:

- Which sections have they read?
- Do they have any questions about it?
- How are they feeling about the workbook?

How are they getting on with the exercises?

- Mood diary completion
- Identifying links between mood and activities
- Activity scheduling
- Do they have any questions about the exercises?
- Do you need to explain anything again?

Agree actions for next session:

- Encourage the patient to read the workbook
- Encourage the patient to complete their Weekly Activity Record and their PHQ-9 and GAD-7
- Refer the patient to the 'Things to do' checklist
- Review their progress at next appointment

#### CARE COORDINATION ROLE

Discuss other treatment options, if appropriate.

Agreed plan and actions taken:

Review progress with any self-referrals or referrals you have already made.

## **Clinical supervision notes**

Supervisor name:

## Session 4 – Formal Review of Progress

Session Checklist	Tick if done (✓)	Space for comments and reflections
<b>RE-ASSESS THE PATIENT'S MOOD AND RISK</b>		
<p><b>Ask the patient how their mood has been since their last appointment. Ask them to fill in a PHQ-9 and GAD-7 if they have not already done this.</b></p> <p><i>Feedback scores to patient and discuss what these mean, particularly any changes in scores</i></p>	<input type="checkbox"/>	<p><b>PHQ-9 score:</b> _____      <b>GAD-7 score:</b> _____</p>
<p><b>Discuss thoughts of: life not being worth living and harming/neglecting self or others</b></p> <p><b>Check response on Item 9 of the PHQ</b></p> <p><b>If appropriate:</b></p> <ul style="list-style-type: none"> <li>• Ask the standard risk assessment questions</li> <li>• Take action according to level of risk</li> </ul>	<input type="checkbox"/>	<p><b>Risk assessment:</b></p> <p>Risk to self? (Y/N) _____      Risk to others? (Y/N) _____</p> <p><i>If 'Yes':</i></p> <p><b>Level of risk identified (A, B1, B2, C):</b> _____</p> <p><b>Action taken:</b> _____</p>
<b>REVIEW THE PATIENT'S PROGRESS WITH THE CADENCE SELF-HELP WORKBOOK – if they have been trying this</b>		
<p><b>How is the patient getting on with the BA workbook and self-help exercises?</b></p> <ul style="list-style-type: none"> <li>• Discuss their PHQ-9 and GAD-7 scores and pattern of symptoms over the last 4 weeks</li> <li>• How much of the self-help work has the patient engaged in? <ul style="list-style-type: none"> <li>▪ <i>How much of the workbook have they read?</i></li> <li>▪ <i>Have they been completing their mood diary?</i></li> <li>▪ <i>Have they noticed any mood-activity links?</i></li> <li>▪ <i>Have they identified their valued activities?</i></li> <li>▪ <i>Have they tried scheduling new activities?</i></li> </ul> </li> </ul>	<input type="checkbox"/>	<p><b>Comments/reflections:</b></p>
<p><b>Does the patient wish to continue with the self-help materials?</b></p> <p><b>Would they prefer to try a different strategy?</b> <i>If so, see 'Care Coordination Role' section below</i></p>	<input type="checkbox"/>	<p><b>Decision following review and discussion:</b></p>
<p><b>If they wish to continue with self-help, agree actions for next session:</b></p> <ul style="list-style-type: none"> <li>• Encourage the patient to read the workbook</li> <li>• Encourage the patient to complete their Weekly Activity Record and their PHQ-9 and GAD-7</li> <li>• Refer the patient to the 'Things to do' checklist</li> <li>• Review their progress at next appointment</li> </ul>	<input type="checkbox"/>	
<b>CARE COORDINATION ROLE</b>		
<p><b>Discuss other treatment options, if appropriate.</b></p> <p><b>Review progress with any self-referrals or referrals you have already made.</b></p>	<input type="checkbox"/>	<p><b>Agreed plan or changes to plan, and actions taken:</b></p>



## **Clinical supervision notes**

Supervisor name:

# Session 5

## Session Checklist

Tick if done  
(✓)

## Space for comments and reflections

### RE-ASSESS THE PATIENT'S MOOD AND RISK

Ask the patient how their mood has been since their last appointment. Ask them to fill in a PHQ-9 and GAD-7 if they have not already done this.

PHQ-9 score:

GAD-7 score:

*Feedback scores to patient and discuss what these mean, particularly any changes in scores*

Discuss thoughts of: life not being worth living and harming/neglecting self or others

Risk assessment:

Risk to self? (Y/N)

Risk to others? (Y/N)

Check response on Item 9 of the PHQ

If appropriate:

- Ask the standard risk assessment questions
- Take action according to level of risk

If 'Yes':

Level of risk identified (A, B1, B2, C):

Action taken:

### CHECK THE PATIENT'S PROGRESS WITH THE CADENCE SELF-HELP WORKBOOK – if they are trying this

How are they getting on with the BA workbook?

Comments/reflections:

- Which sections have they read?
- Do they have any questions about it?
- How are they feeling about the workbook?

How are they getting on with the exercises?

- Mood diary completion
- Identifying links between mood and activities
- Activity scheduling
- Do they have any questions about the exercises?
- Do you need to explain anything again?

Agree actions for next session:

- Encourage the patient to read the workbook
- Encourage the patient to complete their Weekly Activity Record and their PHQ-9 and GAD-7
- Refer the patient to the 'Things to do' checklist
- Review their progress at next appointment

### CARE COORDINATION ROLE

Discuss other treatment options, if appropriate.

Agreed plan and actions taken:

Review progress with any self-referrals or referrals you have already made.

- Discussion with GP
- Referral to local IAPT service (self-referral or nurse referral)
- Specialist psychological therapy referral

## **Clinical supervision notes**

Supervisor name:

# Session 6

## Session Checklist

Tick if done  
(✓)

Space for comments and reflections

### RE-ASSESS THE PATIENT'S MOOD AND RISK

Ask the patient how their mood has been since their last appointment. Ask them to fill in a PHQ-9 and GAD-7 if they have not already done this.

PHQ-9 score:

GAD-7 score:

*Feedback scores to patient and discuss what these mean, particularly any changes in scores*

Discuss thoughts of: life not being worth living and harming/neglecting self or others

Risk assessment:

Risk to self? (Y/N)

Risk to others? (Y/N)

Check response on Item 9 of the PHQ

If appropriate:

- Ask the standard risk assessment questions
- Take action according to level of risk

If 'Yes':

Level of risk identified (A, B1, B2, C):

Action taken:

### CHECK THE PATIENT'S PROGRESS WITH THE CADENCE SELF-HELP WORKBOOK – if they are trying this

How are they getting on with the BA workbook?

Comments/reflections:

- Which sections have they read?
- Do they have any questions about it?
- How are they feeling about the workbook?

How are they getting on with the exercises?

- Mood diary completion
- Identifying links between mood and activities
- Activity scheduling
- Do they have any questions about the exercises?
- Do you need to explain anything again?

Agree actions for next session:

- Encourage the patient to read the workbook
- Encourage the patient to complete their Weekly Activity Record and their PHQ-9 and GAD-7
- Refer the patient to the 'Things to do' checklist
- Review their progress at next appointment

### CARE COORDINATION ROLE

Discuss other treatment options, if appropriate.

Agreed plan and actions taken:

Review progress with any self-referrals or referrals you have already made.

- Discussion with GP
- Referral to local IAPT service (self-referral or nurse referral)
- Specialist psychological therapy referral

## **Clinical supervision notes**

Supervisor name:

# Session 7

## Session Checklist

Tick if done  
(✓)

## Space for comments and reflections

### RE-ASSESS THE PATIENT'S MOOD AND RISK

Ask the patient how their mood has been since their last appointment. Ask them to fill in a PHQ-9 and GAD-7 if they have not already done this.

PHQ-9 score:

GAD-7 score:

*Feedback scores to patient and discuss what these mean, particularly any changes in scores*

Discuss thoughts of: life not being worth living and harming/neglecting self or others

Risk assessment:

Risk to self? (Y/N)

Risk to others? (Y/N)

Check response on Item 9 of the PHQ

If appropriate:

- Ask the standard risk assessment questions
- Take action according to level of risk

If 'Yes':

Level of risk identified (A, B1, B2, C):

Action taken:

### CHECK THE PATIENT'S PROGRESS WITH THE CADENCE SELF-HELP WORKBOOK – if they are trying this

How are they getting on with the BA workbook?

Comments/reflections:

- Which sections have they read?
- Do they have any questions about it?
- How are they feeling about the workbook?

How are they getting on with the exercises?

- Mood diary completion
- Identifying links between mood and activities
- Activity scheduling
- Do they have any questions about the exercises?
- Do you need to explain anything again?

Agree actions for next session:

- Encourage the patient to read the workbook
- Encourage the patient to complete their Weekly Activity Record and their PHQ-9 and GAD-7
- Refer the patient to the 'Things to do' checklist
- Review their progress at next appointment

### CARE COORDINATION ROLE

Discuss other treatment options, if appropriate.

Agreed plan and actions taken:

Review progress with any self-referrals or referrals you have already made.

- Discussion with GP
- Referral to local IAPT service (self-referral or nurse referral)
- Specialist psychological therapy referral

## Clinical supervision notes

Supervisor name:

## Session 8 – Final Review

Tick if done

(✓)

Space for comments and reflections

### Session Checklist

#### RE-ASSESS THE PATIENT'S MOOD AND RISK

Ask the patient how their mood has been since their last appointment.

PHQ-9 score:

GAD-7 score:

Ask them to fill in a PHQ-9 and GAD-7 if they have not already done this.

Discuss thoughts of: life not being worth living and harming/neglecting self or others

Risk assessment:

Risk to self? (Y/N)

Risk to others? (Y/N)

Check response on Item 9 of the PHQ

If appropriate:

- Ask the standard risk assessment questions
- Take action according to level of risk

If 'Yes':

Level of risk identified (A, B1, B2, C):

Action taken:

#### REVIEW THE PATIENT'S PROGRESS

Review the patient's PHQ-9 and GAD-7 scores today and discuss how these have changed over the last 8 weeks – these may have improved, stayed the same, or deteriorated.

Comments/reflections:

**If the patient scores below 10 on the PHQ-9 and below 8 on the GAD-7:**

- Advise the patient to continue their self-help Behavioural Activation work if this has worked for them

**If the patient scores 10 or more on the PHQ-9 and/or 8 or more on the GAD-7, but they have improved by 50% or more on both measures since Session 1:**

- Advise the patient to continue their self-help Behavioural Activation work if this has worked for them
- Discuss whether they would like to receive any additional specialist help (see 'Care Coordination Role' section)

**If the patient scores have improved only slightly (i.e. by less than 50% and/or less than 3 points on the PHQ-9 or GAD-7) since Session 1:**

- Discuss the possibility of additional specialist help (see 'Care Coordination Role' below)
- If the patient wishes to discuss medicines with their GP, encourage them to do this.

**If the patient's scores on the PHQ-9 or GAD-7 have not changed (i.e. their scores remain within 3 points of those they filled in at Session 1):**

- Encourage the patient to discuss medicines with their GP
- Discuss the possibility of additional specialist help (see 'Care Coordination Role' section)



***If the patient's scores on the PHQ-9 or GAD-7 have deteriorated by 3 or more points since Session 1, and particularly if they move into the severe depression range (PHQ-9 score of 20 or more):***

- Consider referral to specialist psychological therapy
- Discuss this with your designated Cadence Clinical Supervisor as soon as possible
- Inform the patient's GP

### CARE COORDINATION ROLE

Discuss other treatment options, if appropriate.

Agreed plan and actions taken:

Review progress with any self-referrals or referrals you have already made.

- Discussion with GP
- Referral to local IAPT service (self- or nurse referral)
- Specialist psychological therapy referral

### DISCHARGE LETTER – UPDATE THE PATIENT'S GP

Write to the patient's GP at the end of their Cadence Programme, explaining:

- What has happened
- How their patient has progressed
- Any plans for further input from specialists.

## Clinical supervision notes

Supervisor name: