# Emergency Planning Conversation - Shared Pattern Map

25 minutes | 3-12 people | Adults with trained group facilitation

Identify questions for a clinician about an individualized emergency plan and verified local contacts.

## Open with choice - 3 minutes

Explain the purpose, privacy limits, and the option to observe, use fiction, adapt, or pass. Check access needs and group readiness; do not promise absolute confidentiality.

## Meet the fictional case - 4 minutes

A member does not have a clear plan for urgent concerns. Ask what is known, what is assumed, and what the person in the case wants.

## Practice: Mapping - 11 minutes

Identify questions for a clinician about an individualized emergency plan and verified local contacts. Each person privately maps the fictional case. Offer optional contributions to a shared map, then compare where context, access, and support change the picture. Do not interpret another person's map.

## Reflect and compare - 4 minutes

What guidance must come from the care team? Ask what fits, what does not, and what external conditions or supports affect the options. No personal disclosure is required.

## Close and integrate - 3 minutes

Invite an optional observation, support request, or small next step. Passing is welcome. Agree how to revisit questions and seek appropriate help outside the exercise.

## Practice output

A map with at least two possible support or choice points.

## Scope and care

Use ordinary or fictional examples, not graphic substance-use stories or cue exposure. No competitive abstinence scoring, forced disclosure, or required pathway. These plans do not manage intoxication, overdose, withdrawal, or medication changes; follow individualized care and appropriate medical assessment.

Original AI-assisted educational draft; independent clinical review pending. Version 1.0. Background references: GP01, GP02, GP03, RF-SUR. Full source links: library.morethantherapy.org/group-activities/GRP471