Session 36: The 90-Day Plan and Phase 4 Completion: Sent, Not Finished

Duration: 60 minutes

Materials: Appendix D for every participant; Phase 4 completion letters (prepared with the Program Director); the Session 36 handout (My 90-Day Continuing Care Plan)

Learning objectives — by the end of this session, participants will be able to:

- Present a completed 90-Day Continuing Care Plan (Appendix D) covering all four SAMHSA dimensions
- State their Phase 4 completion status against the criteria in Appendix F and any completion plan for gaps
- Participate in the closing recognition: commitments spoken and community named aloud

Opening (3 minutes)

Newcomer bridge (60 seconds): This is Phase 4 — Living Free. The one idea today is that the 90-Day Continuing Care Plan is assembled and audited, and Phase 4 completion is recognized — sent, not finished. You are welcome here without earlier sessions; everything you need for today is in this session. Today we do two things: we assemble everything into the 90-Day Continuing Care Plan — audited section by section, every field checked for a name, a date, a number, or a place — and we mark this room's work out loud, together: commitments spoken, communities named, participants completing Phase 4 recognized and sent, not finished.

Check-in prompt (7 minutes)

Name, craving 0–10, one word for your week — then: Final check-in prompt: "Name your craving score, and then finish this sentence: 'The person who walked into Session 1 would not believe that I now _____.'" Log every craving score on the roster.

Passing is honored — you may pass any question, prompt, or practice without explanation, step out and rejoin, and choose a partner-only option where one is offered.

Teaching (11 minutes)

The final session assembles everything into Appendix D, the 90-Day Continuing Care Plan, audited section by section in pairs before the session (pre-work), and spot-checked in this session. Health: appointments kept or scheduled (medical, dental, counseling), medication routines as prescribed and prescriber contacts, sleep and HALT anchors, craving and chain tools. Home: housing status and expectations, house or family agreements, the dangerous-hours plan. Purpose: work or service commitments (Sessions 25 and 32 land here with dates), money and payday plan (Session 26), one living amend and one trust ledger continuing (Sessions 24 and 27). Community: the two communities and contacts (Session 34), mentor and accountability agreement (Session 35), meeting rhythm, and the Return Card's names reconfirmed. Graduation criteria (Appendix F) are reviewed honestly: attendance and makeups, phase products complete (Safety Plan, Thought Records, amends preparation, Warning-Sign Chain, this plan), and the participant's own statement of their core skills. A gap produces a completion plan with dates, not a failed Phase 4 completion — the closing recognition

celebrates the work and the sending; the paperwork catches up on the schedule the Program Director sets.

- **A plan with names and dates is a bridge; without them it is a wish** Pairs audited Appendix D before the session (pre-work); the facilitator spot-checks every field for a name, a date, a number, or a place. Blank fields get filled or get a dated step toward filling them, in this room.
- **Ninety days is the design horizon, not the recovery horizon** The plan's final page schedules its own renewal: at day 90, the participant reviews it with mentor, coach, or alumni contact and builds the next ninety. Graduation installs the rhythm; it does not retire it.
- **Sent, not finished** The closing language matters — nobody here is declared cured or completed. We are sent: equipped, accompanied, expected back as alumni, givers, and eventually the people who set up the chairs.

Sources & Evidence — Facilitator background — do not teach

Purpose — meaningful daily activity, work, and service — is one of SAMHSA's four dimensions of recovery, and recovery capital research links work, relationships, and community resources to sustained recovery (SAMHSA, 2012; Granfield & Cloud, 1999). Key sources for this session: SAMHSA (2012); Granfield & Cloud (1999); Bandura (1977); Riessman (1965). Evidence strength: Moderate. Spiritual practice: Commissioning and blessing — correlates with purpose, commitment, and continuing-care planning; evidence: Moderate (SAMHSA, 2012; White, 2008). Full citations: Appendix H. The session's Scripture material is in its optional handout (Appendix I), as theological foundation, quoted from the King James Version.

'Evidence strength' grades the correlated mechanism, not the spiritual practice itself

Pause midway through teaching: ask, "What part of that sounds most like your life right now?" Take two or three answers, connect them to the teaching, and continue. Teach in your own words — the bullets are your map, not a script to read aloud.

Discussion questions (4 minutes)

1. Read your plan's weakest field aloud to your partner — where is it thinnest, and what did you just strengthen? Share only what you choose — headlines, no figures or health detail aloud.
2. What will you do at day 30 when motivation is ordinary and the plan feels like paperwork? Name the person and the practice now.

Skill practice (30 minutes)

Closing recognition: plans, audited in accountability pairs before the session (pre-work), are spot-checked against the Appendix D checklist, then each participant completing Phase 4 is recognized individually — they state their identity statement (Session 31) and name their two communities and their accountability person aloud. Phase 4 completion letters are presented;

certificates are presented at Session 60. Passing is honored; nobody is publicly graded, and no pending criterion is announced.

Personal application — homework (3 minutes)

Live the plan. First accountability call within seven days, first community visit on the date written, day-30 self-review marked in a calendar today — before you leave this room. Participants write it — and answers to discussion questions 3 and 4 — in their workbook before leaving. Facilitator: name the homework again at the door as people leave.

Facilitator notes and cautions

Protect the closing recognition's honesty and its joy in equal measure: no participant completing Phase 4 is publicly graded, no pending criterion is announced to the room, and no one is recognized into applause they have privately told you they cannot yet bear. Confirm before the session that every participant's status and Phase 4 completion letter is prepared with the Program Director — surprises in this session, in either direction, are a facilitation failure. If a participant is not completing Phase 4 with the cohort, their plan review still happens with the same care, framed as the next season's launch.

Closing (2 minutes)

Ninety days is the design horizon, not the recovery horizon — the plan schedules its own renewal at day 90. Live it: first call within seven days, first visit on the date written, day-30 review in the calendar before you leave this room. You are sent — equipped, accompanied, and expected back.

Fidelity check for this session: objectives named at the start ☐ craving scores logged ☐ skill practice completed in full ☐ homework written down by participants ☐ session note filed today ☐

PHASE 5 — GIVING BACK: SERVICE, LEADERSHIP & PURPOSE (SESSIONS 37–60)

Phase 5 begins where Session 36 ended: with a written 90-day plan and a room that was told to expect its graduates back — as alumni, as givers, and as the people who set up the chairs. The first block turns receiving into service: a post, a schedule, a review date. The second block trains peer leadership — listening, boundaries, hard conversations, and what to do when someone you help starts slipping. The third block takes up purpose and vocation: the work a free life is spent on, and how to sustain that freedom for years. Nothing in this phase is new doctrine; it is the first thirty-six sessions, put to work.

Block 1 — Service: Giving Back (Sessions 37–44)