

# The Decider©- for living a more skilful, less impulsive life Skills Group Programme at the Triogue Community Mental Health Centre, Portlaoise.

**STOPP**

## Introduction

There is a strong ethos of group work at the Triogue Community Mental Health Centre. On reviewing client evaluations from previous groups it became apparent that there was a demand for more group based programmes.



### Aim

- To help clients learn the skills they need to cope with emotional emergencies and to lead a more skilful, less impulsive life.
- To provide cost and time effective intervention .
- To reduce the impact of impulsive behaviour on resources.

## DESCRIPTION

The Decider© and Skills Manual were developed in 2010 by Michelle Ayres & Carol Vivyan.

The Decider© summarises thirty-two Cognitive Behavioural Therapy (CBT) and Dialectical Behaviour Therapy (DBT) informed skills under the four core skill sets of **Distress Tolerance, Mindfulness, Emotion Regulation and Interpersonal Effectiveness**

'The Lifejacket metaphor' is central to The Decider©. The concept that each skill inflates the lifejacket and the client learns when to use it if an 'emotional emergency' occurs. This enables the client to float rather than sink when it seems they are drowning in a sea of distressing emotion.

The group is highly innovative, original and presented in a fun, creative and interactive style using demonstrations, music and visuals to aid learning.

THE DECIDER							
ACCEPT				CHANGE			
DISTRESS TOLERANCE		MINDFULNESS		EMOTION REGULATION		INTERPERSONAL EFFECTIVENESS	
STOPP	IT WILL PASS	BREATHE	OBSERVE	SELF CARE	THINK	LISTEN	RESPECT
DISTRACT	DO ONE THING	THIS MOMENT	FOCUS	NAME THE EMOTION	SIEVE OR SPONGE?	REFLECT	CRYSTAL CLEAR
TURN THE MIND	RIGHT NOW	DRIFT	FACT OR OPINION	OPPOSITE ACTION	BUILD POSITIVE EXPERIENCES	ASK or SAY NO	MAINTAIN RELATIONSHIP
SOOTHE	VALUES	WISE MIND	KEEP CALM AND CARRY ON	BALANCE	PACE & PLAN	TALK THE TALK	END OR MEND
PRACTICE		E		PRACTICE		PRACTICE	

## DISCUSSION

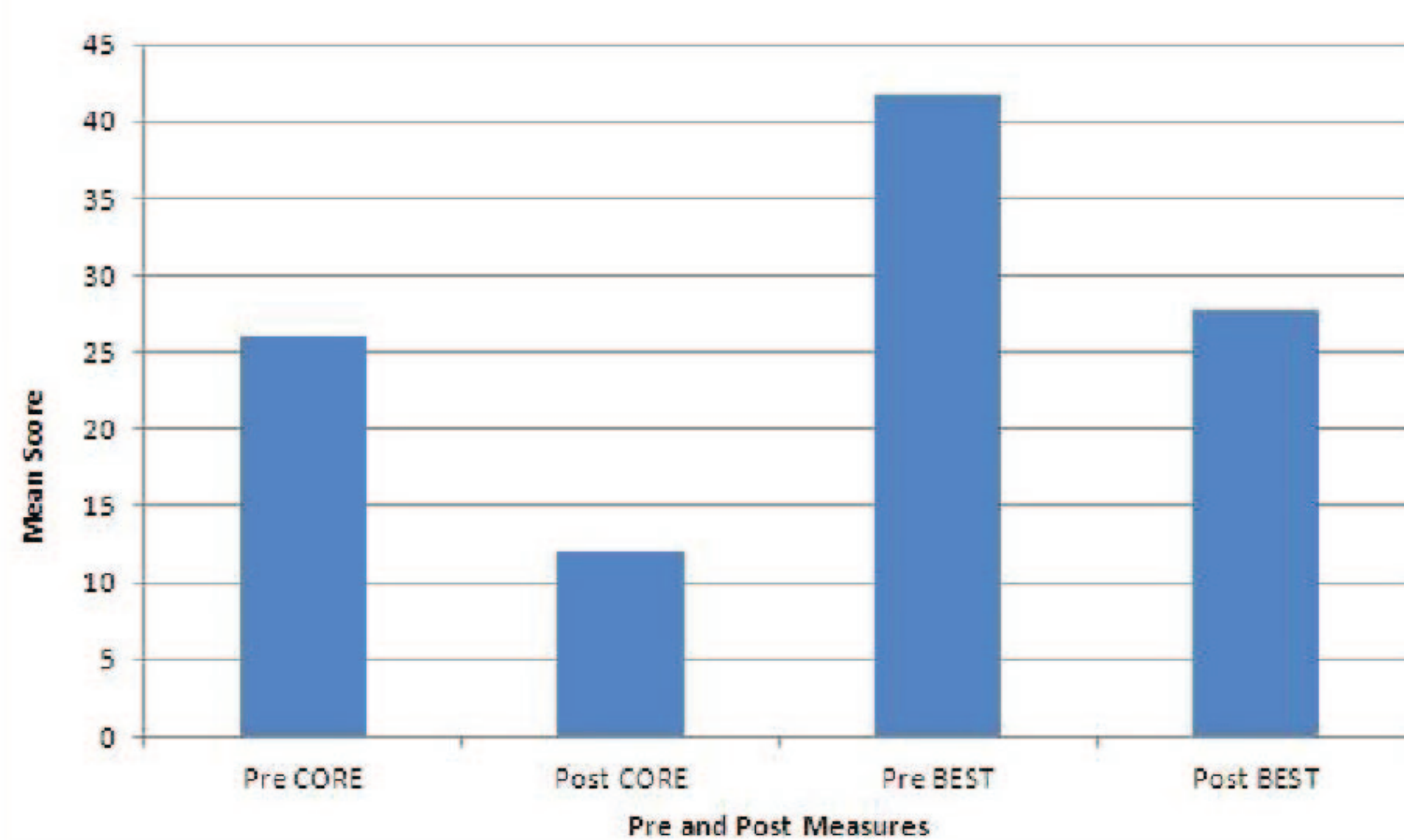
The first Decider© skills group began in April 2013. Each session is ninety minutes with three to four skills taught each week. Clients are given detailed information sheets on each skill and requested to complete a homework sheet after each session.

The programme was initially scheduled for twelve weeks however, on hearing such positive feedback in relation to the group, our Art Therapist offered to facilitate an extra session. The purpose of this session was to encourage the group create their own visual aid of their favourite skill or aspect of the group.

As the group is so new and innovative we developed a colourful information leaflet for service users to help them gain a better understanding of what the group is about and to promote the benefits of learning new skills. The skills are also being used with patients attending Activation as part of the Recovery Programme at the Department of Psychiatry at Midlands Regional Hospital, Portlaoise.

## RESULTS

On scoring the quantitative measures there was evidence of a reduction in symptoms of global distress, anxiety and depression.



## QUALITATIVE INFORMATION

### Examples of Client feedback

- "It has helped me to stop cutting"
- "I use the STOPP skill all the time now"
- "I understand now I don't have to act on my impulses, It Will Pass"

## METHOD OF EVALUATION

Pre and post intervention measures were taken using CORE 10 and BEST measurement scales.

Clients were also asked to complete an evaluation questionnaire in order to gather some qualitative information.

## RECOMMENDATIONS

- The Decider© skills group will run on a continuous basis
- Staff training to be provided on an annual basis.
- All Services should consider implementing The Decider© skills group as part of their recovery programme

## REFERENCES

Ayres, Michelle & Vivyan, Carol, (2011) The Decider- A Skills Manual

Pfohl, B. and Blum, N. (1997) Borderline Evaluation of Severity over Time (BEST), Iowa: University of Iowa, Department of Psychiatry.

Core System (Clinical Outcomes for Routine Evaluation) (2006) CORE 10, Core IMS website: CORE System Trust and CORE Information Management Systems Ltd.

Recommended Websites:  
[www.thedecider.org.uk](http://www.thedecider.org.uk)  
[www.getselfhelp.co.uk](http://www.getselfhelp.co.uk)







## INTRODUCTION

Group work is a very important element of the recovery programme at the Triogue Community Mental Health Centre. In 2010 staff undertook to enhance their knowledge in the area of Mental Health Recovery. They found that there was a significant evidence base to support the use of WRAP® in recovery programmes as it empowers service users to take control of their own wellness. As a result of this a group programme was developed using the concepts and elements of WRAP®. Service users reported that they found the group informative and supportive. Following the success of this programme, staff were facilitated to complete the WRAP® facilitator training programme delivered by WRAP® Ireland.

## AIM

- To support the service user to take control of their wellness by helping them to understand the concept of Recovery and to identify triggers and early warning signs.
- To empower the service user to develop a crisis plan so that they can maintain some level of control even at times of crisis.
- To encourage service users to develop their support network and to involve these supporters in their recovery journey.
- To enhance effective use of limited resources by delivering WRAP® as a group programme.

## DISCUSSION

The first WRAP® group was delivered in August 2010 Following the success of this group WRAP® groups are run on a continuous basis as part of the recovery programme at the Triogue Community Mental Health Centre. The WRAP® group really benefits service users whose mental health difficulties are newly diagnosed, who relapse regularly, lack insight or find it difficult to cope. WRAP® has been very valuable in promoting a recovery orientated approach throughout our service. All members of the multidisciplinary team are very familiar with WRAP® and find that it forms structured, more focused interventions with service users. Service users are empowered to take an active role in their own wellness and recovery.

## DESCRIPTION

WRAP® is an evidence based recovery model that was developed over twenty five years ago by Mary Ellen Copeland. She was motivated by her own personal recovery journey and WRAP® was developed from her studies of thousands of people who experience mental illness. WRAP® is a personalised practical framework that assists in developing an effective approach to overcoming distressing symptoms and unhelpful behaviour patterns.

The five Key Recovery Concepts of *Hope, Personal Responsibility, Education, Self Advocacy & Support* provide the foundation for WRAP®

The WRAP® plan consists of; *Developing a personal Wellness Toolbox, Daily Maintenance Plan, Triggers, Early Warning Signs, When Things Are Breaking Down, Crisis Plan, Post Crisis Plan*

WRAP® is broadly applicable and can be used in individual, group and family settings. It has also been found to work well for people experiencing medical conditions and other life issues.



## RECOMMENDATIONS

- To promote the effectiveness of WRAP® and encourage participation in the WRAP group programme we developed an information leaflet for service users and staff.
- We have introduced the use of personal workbooks which service users complete during the WRAP® group. The result is that the service user has a personal WRAP® plan at the end of the group programme. They are encouraged to review this plan daily and to share it with their supporters.
- We compiled a list of local community groups and activities and support groups to encourage service users to develop and expand their support network e.g. Men's Sheds
- In response to an identified need by service users for on going support in maintaining their recovery we established a monthly WRAP® re-focus group.
- We highlight the importance of finding a sense of achievement and meaningful occupation as part of the recovery journey. We encourage service users to consider volunteering in local support groups and organisations e.g. AWARE

## METHOD OF EVALUATION

Pre and post qualitative information was gathered from service users through client satisfaction and evaluation forms and clinical assessments.

## RESULTS

### Examples of service user feedback

- "WRAP® helps me play a more active role in my recovery"
- "I now feel in control of my wellness for the first time"
- "I know where to go for help"
- "Support from others was beneficial, I realised I am not alone"

## REFERENCES

- Copeland, M, E. (2009) Facilitator Training Manual. Mental Health Recovery Including Wellness Recovery Action Plan® Curriculum.
  - Copeland, M, E. & Mead, S.(2011) Wellness Recovery Action Plan® & Peer Support. Personal, Group & Programme Development.
- [www.mentalhealthrecovery.com](http://www.mentalhealthrecovery.com)  
[www.copelandcenter.com](http://www.copelandcenter.com)  
[www.wrapireland.ie](http://www.wrapireland.ie)

