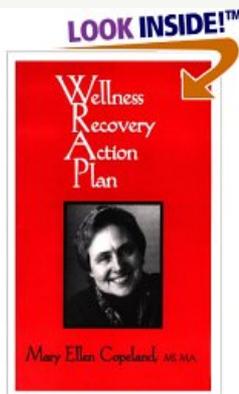


Devon Partnerships for Mental Health Recovery

WELLNESS RECOVERY ACTION PLAN (WRAP) —DEVON UPDATE

24TH NOVEMBER 2006



WRAP is alive, well and still growing all over Devon.

The meeting on 24th November at St Leonard's Church in Exeter was an inspiration and showed how much progress has been made since the conference in October 2003 when Mary Ellen Copeland shared a vision of self management and peer support

From the initial structured training programme, WRAP has taken off under its own steam and WRAP

courses and support groups have mushroomed.

This update outlines what is happening, where it is happening and who to contact if you are interested in being involved.

Frank Bristol, good friend of

Devon from New Zealand, sent information about an Advanced WRAP Facilitators course which was run by Steve Pocklington of the Copeland Centre. The course in New Zealand was a 'master class' in WRAP facilitation and could be something for us to consider in future.

Reni Brown from North Devon facilitates the user led WRAP support group there which have included guest speakers and explained how to make a home made light box

for Seasonal Affective Disorder (SAD).

The group is working with relevant people to make sure that crisis plans are taken seriously and they take one aspect of WRAP each month and explore it in detail. The peer support element is very important in sustaining progress and each person has been asked to identify 'One Person Who I Will Trust' for when things get tough.

James Wooldridge from Mid Devon has been running groups on Recovery and WRAP in London and the course has been put forward for an award in partnership working. He also works with Mental Health Media on anti stigma.

The website will soon include a section on 'ways which have worked and not worked in developing WRAP.'

Those who attended the meeting:-

- Sue McMullan
- Laurie Davidson
- Glenn Roberts
- James Wooldridge
- John Good
- Reni Brown
- Melanie Attwater
- Liz Hanson
- Maggie Clark
- Richard Brabrook
- Milena West
- Mike Ferguson
- Wilson Igrubde
- Elaine Hewis
- Dave Portch

For more information about WRAP and Recovery, visit the website

www.recoverydevon.co.uk

Other Headlines

EVALUATION

Glenn Roberts and Wilson Igrubde have offered to carry out and evaluation project of the use of WRAP by STR Workers. The aim is to survey 100 STR Workers on how much they use

WRAP, whether it works or makes a difference and what the difficulties are with using it. They hope to explore how training STR workers in WRAP as a self management technique converts to people who use ser-

vices having their own WRAP plan.

SUSTN. James told the group about an exciting new national network of trainers called the Service User and Survivor Trainers' Network (SUSTN) This network



will support good practice and be a forum for sharing experiences. It costs £30 a year for membership. Link to <http://www.spn.org.uk/index.php?id=939>

“ WE SEE THE
 WORLD NOT AS *IT*
 IS, BUT AS *WE ARE*.

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 THE WORLD
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 WE *DO*, AND WHAT

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 DETERMINES WHAT
 WE *GET*, WHICH IN
 TURN REINFORCES
 OUR WAY OF
 SEEING THE
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 WAY WE SEE THE
 WORLD.”

STEPHEN
R. COVEY

(THE WELL)

**North and Mid Devon
WRAP Support Groups(2) individual support**

Contact Reni Brown 07980 123391
 Other WRAP courses or groups in River-
 side, Bideford CMHTs or LINK Centres.
 Also one planned in South Molton
Learning Disabilities are using WRAP in
 Forest Hill House (Irene Baxter 01237
 424330

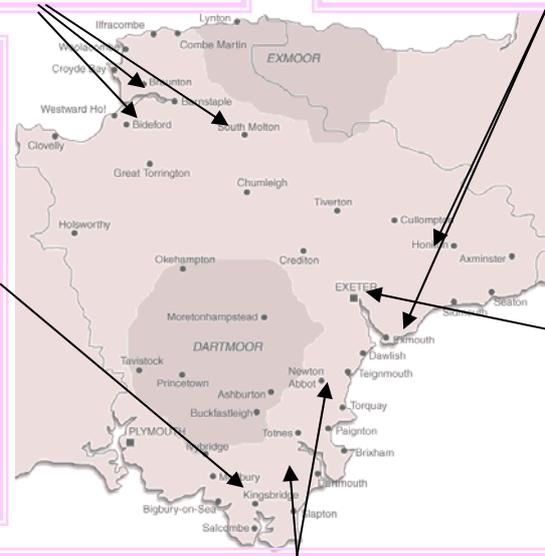
EastDevon

WRAP Support Groups at the MIND Haven
 Centre in Honiton (Richard Brabrook).

Rethink in Exmouth Melanie, Elaine, Ally,
 Sue or Richard on 01395 224166

**West Devon and
South Hams**

WRAP Group in
 Ivybridge - Val
 Dempsey 01752
 891019 and Lynn
 Gardiner (Totnes
 Rethink)



Exeter

**WRAP Support
Groups** through the
 Joan of Arc Room

Carers—Liz Hanson
 planning course

Lifeworks - Individual
 WRAP

Also used individually
 at Russell Clinic and
 Dennis Taylor House

South Devon

Community Care Trust - WRAP as basic approach as one to one. Commitment to set up
 WRAP support Groups in each area. The CCT Primary Care Team use WRAP individually.

Miranda Parsons & Cathie McLaughlin OTs with Assertive Outreach in Newton Abbot devel-
 oping WRAP and recovery approaches

COOL House, group run by Monika Sorensen STR and COOL House . Rethi nk 01803
 868899 or Cool Recovery 01803 299511

Janet Hooper and Pennie Evans - 01803 861974

Organisational WRAP. The
 Community Care Trust (South
 Devon) used WRAP for their
 whole organization at a devel-
 opment day in October.

Team WRAP. The Russell
 Clinic are developing a team
 WRAP over two days.

Primary Care. Laurie, Chris-
 tine Jackson and Lyn Hunter
 are working together to de-
 velop a generic WRAP course
 linking to the Expert Patient

Programme in Torbay. This
 will apply to all conditions,
 not just mental health.

Resources. There are a
 variety of WRAP work-
 books. Richard has devel-
 oped a very helpful work-
 book plus additional infor-
 mation. There have been
 variations on the theme by
 Richard Frost in relation to
 occupation, Helen Fee at
 the University of Exeter and
 Laurie (Primary Care). The

(primary care) STR Team
 at the Community Care
 Trust have developed an
 A5 version of this which can
 be used in primary care.

**These can be found on
the website**

Recovery Awareness.
 Glenn, John and Richard
 are running Recovery
 Awareness Training
 courses.



What have we learned so far?

The following hints and suggestions were made during the meeting from WRAP facilitators:-

- Publicity is key - attracting people in the first place. (Richard and Laurie have flyer templates if they are needed.)
- Good peer support systems are the key to sustainability, where others are named in the WRAP if things start to break down.
- Having links to the service can help with publicity and communication. It is more difficult as an independent group to contact those who might benefit. Alliances and equal partnerships between service users, supporters and mental health workers has the best chance of success.
- Co-facilitation can spread the burden and can be useful if one facilitator is not feeling so good.
- Running a whole day on

WRAP is good for consolidating the framework, but can be too tiring for some people. Two hours is long enough for some. Richard recommends 11.30-1.30 with lunch as the optimum for concentration.

- The venue is very important. If people feel comfortable and valued, they will feel safe to share.
- James found the model of Care Coordinator and service user as a pair attending training was very beneficial for both. One exercise was for the service user to write a plan for the Care Coordinator! Follow up days help to consolidate progress.
- People learn better from small group exercises than from presentations.
- A completed WRAP plan may be difficult to read, so perhaps CMHT secretarial time could be used to type up a plan?
- Some people might prefer to say their plan onto tape

or to make a CD copy

- A computerized form could be developed to complete on screen.
- Other templates could be developed which are sensitive to Black and Ethnic Minority issues.
- Learning disabilities use widgets rather than text. Could this be expanded?
- Situations which have been handled by facilitators locally are:- people actively hearing voices, monopolising of the group, people with their own agenda or not listening or respecting others.
- Where the WRAP support group can identify early warning signs, they can provide early support.
- One big value of WRAP is to elongate the time between a stimulus and the reaction. We can choose our responses more carefully and have more choices available to us

“THE FIRST THING I SEE WHEN I LOOK AT DAILY MAINTENANCE THROUGH THE LENS OF WELLNESS IS THAT I USE MY PLAN NOT TO MAINTAIN ME IN SOME STATIC STUCK PLACE ; I USE MY PLAN TO KEEP ME MOVING TOWARD WHAT I WANT IN LIFE, TO KEEP MY MOMENTUM UP AND TO KEEP ME OPEN AND WILLING TO GROW AND LEARN. I AM AN ACTIVE, RESPONSE-ABLE CHOICE-MAKER.”
(THE WELL)

The Great Recovery Showcase / WRAP Facilitators Workshop

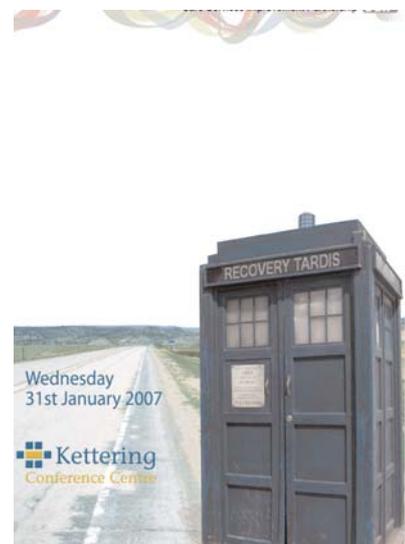
There are two linked events in Kettering, Northants on 30th and 31st January 2007. The first day is a workshop for WRAP facilitators, which is about coordinating information, learning and skills.

Piers Allott, National Fellow for Recovery CSIP/ NIMHE will be retiring and having his leaving do after this event. Piers is respon-

sible for bringing recovery and self management ideas to the UK and setting up a strategic sequence of events and guests from the US to encourage these approaches. Without his work in bringing over Mary Ellen Copeland in 2003, it is unlikely that WRAP would have had the huge impact it has done over the last 3 years. Thanks Piers !

The next day is the Great Recovery Showcase, which is what it says on the tin—a sharing of successes and a celebration of progress.

Devon hopes to be a major contributor to the showcase, as we believe that huge progress has been made in Devon, which we can share with others.



Wellness Recovery Action Plan: Opening the Door to Relapse Prevention and Recovery

Mary Ellen Copeland (summary of web article)

I have been working with people for over 12 years, teaching them skills and strategies that others have found to be useful in relieving and preventing psychiatric or mental health-related symptoms. I began this work out of my own frustration with not finding simple, safe, effective ways to relieve the extreme swings of mood that were destroying my life. In my ongoing research on this topic, I have interviewed thousands of people. I have used my findings to develop numerous mental health-related resources, in leading workshops all over the country, and for my own healing. Several state departments of mental health and various regional mental health organizations have used the wellness model I have developed throughout their mental health systems.

The most exciting discovery I have made during this journey has been the Wellness Recovery Action Plan or WRAP. This monitoring system was devised in 1997 by a group of people I was working with who experience psychiatric symptoms. They felt the need for a more structured way of addressing and relieving their symptoms.

The enthusiasm for this program has been overwhelming! People who experience psychiatric symptoms are desperate to find effective, safe things that they can do for themselves that will improve their level of wellness and quality of life. I later developed two books that describe the system and facilitate its use. These are listed at the end of this column.

You must develop your own WRAP. **No one can write your WRAP for you.** This article is a summary of the process. You can also check out my Web site at www.mentalhealthrecovery.com for further assistance.

WRAP is a self-designed plan that teaches you how to keep yourself well, to identify and monitor your symptoms and to use simple, safe, personal skills, supports, and strategies to reduce or eliminate symptoms. .

- In Section 1, list your **daily maintenance activities** those activities you know you must do every day to maintain your wellness. Things like getting a half-hour of exercise, drinking eight glasses of water, doing relaxation exercises and spending time doing things you like to do.
- In Section 2, list your personal **triggers** those events that might cause an increase in symptoms like getting a big bill, having an ar-

gument with a family member or having car trouble. Then, using the previously learned strategies in your Wellness Toolbox, develop and write a plan to get through this difficult time. Strategies may include calling a supporter, taking extra time to do something fun and doing a deep breathing exercise.

- In Section 3, list **early warning signs** those subtle signs that warn of a possible worsening of symptoms like nervousness, sleeplessness or fatigue. Then develop a plan, more intensive than the last one, which will help you to avoid further difficulties. This plan might include getting extra exercise, seeing your counselor, avoiding caffeine and doing some peer counseling with a friend.
- In Section 4, list those symptoms that indicate that the situation is worsening, also known as **when things are breaking down**. These may include crying all the time, sleeping all day, being very irritable and shouting at family members and co-workers. Then write a very intensive plan that would help relieve these symptoms, like taking three days off from work, asking a family member to take over your household responsibilities and spending two to three hours doing something you enjoy, like woodworking.
- Section 5 is an intensive **crisis plan**. This part of the plan may be hard for you to write and may take much more time than the other parts of the plan. You may want to set it aside and leave it for another time when you feel more ready to do this work. In this plan, write: 1) those symptoms that indicate that you would want others to take over responsibility for care, like being deeply depressed, very agitated or out of touch with reality; 2) who you want to take responsibility for your care and make decisions for you; and 3) acceptable and unacceptable actions to take on your behalf. Give copies of this part of the plan to the people you want to take over for you so they will know what to do if you are having a crisis.

After you have written your WRAP, review it daily. Do the things on your daily maintenance plan *every day*. If you are triggered, have early warning signs, or know that things are getting much worse, do the things you have listed in your response. Revise the plan as needed. After a while, using the plan will become second nature to you and you will not have to refer to it as often.

The WRAP approach empowers you to take control of your own health and wellness, while reducing symptoms and improving your quality of life. Since its development, the system has been shared with thousands of people through the books mentioned above, the Winning Against Relapse Audio Cassette, through numerous support groups, workshops and seminars, and through the www.mentalhealthrecovery.com Web site.

GLENN HAS BEEN BUSY

Enabling Recovery: The Principles and Practice of Rehabilitation Psychiatry

Edited by Glenn Roberts, Sarah Davenport, Frank Holloway and Theresa Tattan

"We are delighted to have succeeded in gathering together a vigorous and contemporary re-statement of the principles and practice of rehabilitation psychiatry from leading practitioners working in the field. It offers support, hope and direction for colleagues and services in transition through a series of brief but authoritative reviews of the key themes in enabling recovery from long-term psychiatric conditions."

Glenn Roberts, Leading editor of *Enabling Recovery*

