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WHAT IS WRAP?

The Wellness Recovery Action Plan is a structured system for monitoring uncomfortable and distressing signs feelings and behaviors, and, through planned responses, reducing, modifying or eliminating those signs, feelings and behaviors. It also includes plans for responses from others when your symptoms have made it impossible for you to continue to make decisions, take care of yourself and keep yourself safe.

***This plan is based on empowerment and personal responsibility.
It encourages you to focus on your strengths and wellness
rather than on weakness and disability.***

***A Wellness Recovery Action Plan must be developed by the person
who will use the plan. If it is developed by someone else,
it is not a Wellness Recovery Action Plan.***

This system was developed by people who have been dealing with mental health difficulties, including addictive disorders, for many years, and who are working hard to feel better and get on with their lives. However, it can be used to address other illnesses like diabetes or heart disease, and life issues like weight loss and maintaining wellness.

Developing a Wellness Recovery Action Plan is not a process that can be completed and forgotten. It is a day by day guide to living and will need to be changed over time as you change. Developing this plan with the support of another person or with a group can enhance the experience and increase self awareness and understanding.

WHAT YOU NEED TO GET STARTED

There are two things you need before you begin actually developing your plan using this CD ROM:

1. This CD and easy access to a computer. If you do not have easy access to a computer, you can make copies of the forms you have filled out on binder paper and put them in a binder with labeled tabs or dividers for each section--Daily Maintenance List, Triggers, Early Warning Signs, Feeling Worse and Crisis Plan.
2. A list of tools – things you do or can do to help yourself feel better. This will be discussed in detail later. If you are using a binder, insert your list of Wellness Tools in the front of the binder.

OVERVIEW OF THE WELLNESS RECOVERY ACTION PLAN

Before you begin developing your Plan, it is helpful to read through the following overview to enhance your understanding of the process.

Section 1 is a Daily Maintenance Plan. Part A is a description of how you feel when you feel well. Part B is a list of everything you need to do every day to maintain your wellness and your sobriety. Part C is a list of things you might need to consider doing that day.

Section 2 deals with Triggers. Part A identifies those events or situations which, if they occur, might cause uncomfortable feelings to begin or make you feel like you want to give in to your addiction. Part B is a plan of “what to do” when these triggers happen so that disturbing signs or addictive behaviors will not occur .

Section 3 deals with Early Warning Signs. These are the subtle internal signs that let you know you may be headed for a difficult time. In Part A you identify your early warning signs. In Part B you develop an action plan of things you can do when you notice these early warning signs to try and keep the situation from worsening.

In Section 4 you will identify those signs that let you know When Things Are Much Worse, but has not yet reached a crisis or relapse--where you can still think for yourself and take action in your behalf. Part A helps you recognize those signs. Part B is a plan of “what to do” if any of these signs occur.

Section 5 is a multifaceted Crisis Plan. It identifies those signs and behaviors that indicate you can no longer continue to make decisions, take care of yourself and keep yourself safe. Your Crisis Plan provides key information that others will need in order to make decisions for you, take action on your behalf and do things for you that will help you to recover. It is for use by your supporters and health care professionals, on your behalf. This document is also known as an Advance Directive. Preparing Advance Directives takes time and careful consideration. They cannot be developed quickly.

Part A of the Crisis Plan is information that defines what you are like when you are well as a point of reference for others who may need to refer to this plan but do not know you.

Part B identifies those signs that indicate others need to take over responsibility for your care.

Part C is a list of people who you would like to take over for you in a crisis, along with those people you do not want involved.

Part D is a listing of all medications you are currently using, those that would be acceptable to you if necessary and those that should be avoided.

Part E is a listing of your choice of treatments and those you would like to avoid.

Part F describes a possible home, respite center or community care option.

In Part G you list treatment facilities that you prefer.

In Part H you describe what your supporters can do for you that would be helpful, and those things that would not be helpful.

In Part I you list the circumstances that would show your supporters they no longer need to follow this plan.

By filling out Part J, you make your plan as official as possible.

HOW TO USE THE WRAP PROGRAM

In order to use this program successfully, when you first begin using it, you have to be willing to spend up to 15 or 20 minutes daily reviewing the pages, and be willing to take action if indicated. Most people report that morning, either before or after breakfast, is the best time to review the book. As you become familiar with your symptoms and plans, you will find that the review process takes less time and that you will know how to respond to certain symptoms without even referring to the book.

Begin with the first page in Section 1, Daily Maintenance Plan. Review the list of how you are if you are all right. If you are all right, do the things on your list of things you need to do every day to keep yourself well. Also refer to the page of things you may need to do to see if anything “rings a bell” with you. If it does, make a note to yourself to include it in your day.

If you are not feeling all right, review the other sections to see where what you experiencing fits in. Then follow the action plan you have designed.

For instance, if you feel very anxious because you got a big bill in the mail or had an argument with your spouse, follow the plan in the triggers section. If you noticed some early warning signs (subtle signs that you are feeling worse) like forgetting things or avoiding answering the phone, follow the plan you designed for the early warning signs section. If you notice signs that indicate things are breaking down, like you are starting to spend excessive amounts of money or obsessing about substance abuse, follow the plan you developed for “when things are breaking down”.

If you are in a crisis situation, the plan will help you discover that, so you can let your supporters know you need them to take over. However, in certain crisis situations, you may not be aware or willing to admit that you are in crisis. This is why having a strong team of supporters is so important. They will observe the signs you have reported and take over responsibility for your care, whether or not you are willing to admit you are in a crisis at that time. Distributing your crisis plan to your supporters and discussing it with them is absolutely essential to your safety and well-being.

If you find your plan or any part of your plan is not working for you, revise it or redo it completely. If you revise your Crisis Plan/Advance Directive, be sure to give updated copies to your supporters and advise them of the changes.

DEVELOPING A WELLNESS TOOLBOX

The first step in developing your own Wellness Recovery Action Plan is to create a Wellness Toolbox. The forms to fill in are in the file named Adult_Forms.pdf. You may want to open this file and arrange the windows so it displays along side these instructions. This will allow you to read the instructions as you fill in the forms.

List the tools, strategies and skills you need to use on a daily basis to keep yourself well, along with those you use frequently or occasionally to help yourself feel better and to relieve troubling symptoms. Include things that you have done in the past, things that you have heard of and thought you might like to try, and things that have been recommended to you by health care providers and other supporters. You can get ideas on other tools from self-help books, such as those by Mary Ellen Copeland which are listed on the order form at the end of this CD. Once you have formed your list you will use these “tools” while developing your response plans.

The following list includes the tools many other people have found to be useful in staying well and relieving symptoms. You may want to include some of them on your list.

- Talk to a friend, sponsor or counselor
- Go to a support group meeting
- Talk to a health care provider
- Get advise from a health care provider
- Peer counseling or exchange listening exercise
- Focusing exercise
- Relaxation and stress reduction exercises
- Guided imagery
- Journaling - writing in a notebook
- Creative, affirming, and enjoyable activities like painting a picture, working with clay or building a piece of furniture
- Exercise, like taking a 1/2 hour walk
- Diet considerations, like eating 3 meals a day, or taking certain food supplements
- Getting light through your eyes
- Extra rest
- Taking time off from home or work responsibilities
- Taking medications, vitamins, minerals, herbal supplements
- Doing something “normal” like washing your hair, shaving or going to work
- Getting a medication check

- Getting a second opinion
- Calling a warm or hot line
- Surrounding yourself with people who are positive, affirming and loving
- Wearing something that makes you feel good
- Looking through old pictures, scrapbooks and photo albums
- Making a list of your accomplishments.
- Spending ten minutes writing down everything good you can think of about yourself
- Doing something that makes you laugh
- Doing something special for someone else
- Getting some little things done
- Repeating positive affirmations.
- Focusing on and appreciating what is happening right now
- Taking a warm bath
- Listening to music, playing music, or singing

Your list of tools could also include things you want to avoid, like:

- alcohol, sugar and caffeine
- going to bars
- certain places in your community
- getting overtired
- certain people

Refer to these lists as you develop your WRAP so you can use them whenever you feel you need to, to revise all or parts of your plan.

YOUR WELLNESS ACTION RECOVERY PLAN

SECTION 1: DAILY MAINTENANCE PLAN

You may have discovered that there are certain things you need to do every day to maintain your wellness and your recovery. Writing them down and reminding yourself daily to do these things is an important step toward wellness. A daily maintenance plan helps you recognize those things which you need to do to remain healthy, and then plan your days accordingly. Also, when things have been going well for a while and you notice you are starting to feel worse, it's important to be able to remind yourself of what you did to get better. When you are starting to feel "out of sorts," you can often trace it back to "not doing" something on your Daily Maintenance List.

Part A: What I'm Like When I'm Feeling Well

When you are having a hard time, it is often hard to remember what you feel like when you are well. In these times, it helps to have a list of what you are like when you are well, for reference. Simply describe yourself when you are feeling all right. Use single words or phrases if you want. Some descriptive words that others have used are:

cheerful	reasonable	content	a chatterbox	industrious	introverted
athletic	a fast learner	outgoing	competent	calm	energetic
bright	optimistic	capable	contemplative	boisterous	quiet
impulsive	talkative	responsible	peaceful	active	curious
spiritual	cared for	caring	connected	positive	satisfied

These are some ideas. Now go to [Adult_Forms.pdf](#) and fill in your own.

Part B: What I Need To Do Daily To Maintain My Wellness

Make a list of things you know you need to do for yourself every day to keep yourself feeling all right. You can also include things you want to avoid. For many people, this is the most important part of this plan. They have found that if they do the things on this list every day they feel well more often. Their hard times become less frequent, less intense, shorter and easier to manage. Be sure your list is actually achievable. Don't make it so long you could never get all of the things done. In fact, you can have only one or two things on the list if that feels right to you.

Following is a sample Daily Maintenance List:

- Eat three healthy meals and three healthy snacks
- Drink at least six 8-ounce glasses of water
- Avoid caffeine, sugar, junk foods and addictive substances

- Exercise for at least 1/2 hour
- Get exposure to outdoor light for at least 1/2 hour
- Take medications
- Have 20 minutes of relaxation or meditation time
- Write in journal for at least 15 minutes
- Read daily meditations
- Spend at least 1/2 hour enjoying a fun, affirming and/or creative activity
- Get support from someone who I can be “real” with (a friend, a sponsor)
- Check in with myself – how am I doing physically, emotionally, and spiritually
- Check in with my partner for at least 10 minutes
- Go to work
- Avoid bars, night clubs and liquor stores
- Avoid _____ (name people you should avoid)

Part C: Things to Consider Doing Each Day to Relieve Stress and Maintain My Wellness/Recovery

There may be things that you need to consider doing each day – things that don’t need to be done every day, but if you do need to do them and don’t, it may cause you stress that makes you feel worse. Make a reminder list for things you might need to do. Reading through this list daily, and ask yourself whether you need to do any of these things helps keep you on track. Some ideas for this list include:

- Spend some time with my counselor, case manager, sponsor, etc.
- Set up an appointment with one of my health care professionals
- Spend time with a good friend
- Spend extra time with my partner
- Be in touch with my family
- Spend time with children or pets
- Do peer counseling
- Get more sleep
- Do some housework or chores
- Buy groceries
- Do the laundry
- Have some personal time
- Plan something fun for the weekend

- Plan something fun for the evening
- Write some letters
- Remember someone's birthday or anniversary
- Take a hot bubble bath
- Go out for a long walk or do some other extended outdoor activity (gardening, fishing, etc.)
- Plan a vacation
- Go to a support group meeting
- Work on simplifying my life
- Ask someone for help

SECTION 2: TRIGGERS

Triggers are external events or circumstances that, if they happen, may produce signs or symptoms that make you feel uncomfortable. They may make you feel like you are getting ill or that things are “getting out of control”. These are normal reactions to stressful events in your life, but if you don’t respond to them and deal with them in some positive way, they may actually cause you to get “sick” or have a “relapse”. Being aware of your triggers, and developing plans to deal with triggering events when they happen, will increase your ability to cope, and to avoid further problems.

Part A: Identifying Triggers.

List those things that, if they happened, would be upsetting to you (you may not even know why) and that might cause you to feel worse--things that may have made you feel worse in the past or that you think would trigger difficult feelings if they occurred. Avoid listing catastrophic things that are unlikely to occur. You could just keep in the back of your mind that if a catastrophe occurred, you could do the things listed in this part of your plan much more often.

Following is a list of triggers that others have noted. Perhaps you have noticed that you have some of these same triggers.

- A friend’s relapse
- The anniversary dates of losses or trauma
- Traumatic news events
- Being very over-tired
- Work stress
- Family friction
- A relationship ending
- Spending too much time alone
- Not spending enough time alone
- Being judged or criticized
- Being teased or put down
- Financial problems
- Physical illness
- Sexual harassment
- Hateful outbursts by others
- Aggressive-sounding noises (sustained)
- Being scapegoated
- Being condemned/shunned by others

- Being around an abuser, or someone who reminds me of an abuser
- Things that remind me of abandonment or deprivation
- Uncertainty
- Excessive stress
- Someone trying to tell me how to run my life
- Self blame
- Extreme guilt
- Being let down or disappointed
- Being offered alcohol or illicit drugs

Make your own list on the Triggers page in Adult_Forms.pdf

Part B: Triggers Action Plan

Make a list of things you could do to keep yourself from feeling worse if a trigger occurs. When you realize you have been “triggered”, you can take one or more of the actions on this list. You can use ideas from your Wellness Toolbox. For instance your

Triggers Action Plan might include:

- Taking a few deep breaths
- Focusing your attention on something pleasant
- Saying affirmations again and again
- Going to a support group meeting
- Doing peer counseling
- Talking the situation over with a good friend
- Doing a stress reduction exercise
- Playing basketball with a group of supporters
- Taking a long bath
- Writing about your feelings in your journal

SECTION 3: EARLY WARNING SIGNS

Early Warning Signs are internal and may be unrelated to stressful situations. In spite of your best efforts, you may begin to experience Early Warning Signs--subtle signs of change that indicate you may need to take some further action. Identifying your early warning signs and reviewing them helps you to become more aware of them, allowing you to take action before they worsen.

Part A: Identifying Early Warning Signs.

Following are some Early Warning Signs that others have reported. You may want to include some of them on your list of Early Warning Signs.

- Anxiety
- Nervousness
- Forgetfulness
- Inability to experience pleasure
- Lack of motivation
- Feeling slowed down or speeded up
- Avoiding doing things on my Daily Maintenance List
- Being uncaring
- Avoiding others or isolating
- Making excuses
- Feeling that recovery is too hard and forgetting the positives
- Being obsessed with something that doesn't really matter
- Beginning irrational thought patterns
- Feeling unconnected to my body
- Increased irritability
- Increased negativity
- Minimizing warning signs
- Increase in smoking
- Not keeping appointments
- Spending money on unneeded items
- Impulsivity
- Poor motor coordination with no physical reason
- Dizziness
- Feelings of discouragement, hopelessness

- Passing your exit on the highway
- Failing to buckle your seat belt
- Not answering the phone
- Turning off the phone answering machine
- Overeating or under-eating
- Craving illicit drugs or alcohol
- Weepiness
- Compulsive behaviors
- Feeling worthless, inadequate
- Secretiveness
- Controlling and/or manipulative behaviors
- Being too quiet
- Easily frustrated
- Feelings of abandonment or rejection
- Feeling compelled to take too much pain medication

Create your own list in [Adult_Form.pdf](#)

Part B: Early Warning Signs Action Plan

Develop a plan you can use to relieve these early warning signs before they worsen. Use your Wellness Toolbox for ideas. They can be the same as, or different from, the things you would use if you were triggered. However, if you notice that you have early warning signs you may want to use most or all of the tools you have listed.

Following is a sample plan:

- Spend a half hour talking to a good friend
- Arrange a visit with my counselor
- Do two-twenty-minute (or longer) relaxation exercise each day
- Take a long walk
- Spend one hour or more doing an activity I really enjoy
- Spend at least an hour reading a good book
- Write in my journal for at least half an hour
- Eat three healthy meals each day
- Spend some quality time with my children and spouse

- Work on changing negative thoughts to positive
- Some form of spiritual work, such as prayer or meditation
- Avoid sugar and alcohol

SECTION 4: FEELING MUCH WORSE

In spite of your best efforts, may notice that you are feeling much worse. However, you are still able to take some action to help yourself feel better. This is a very important time. It is necessary to take immediate action at this time to prevent a crisis (a time when you cannot care for yourself).

Part A: Signs that You are Feeling Much Worse

Make a list of signs that tell you that things are feeling much worse. This varies from person to person. What means “things are getting much worse” to one person may mean an actual “crisis” to another. Others have noted that the following signs tell them “they are feeling much worse”: You may get some ideas from this list for your own list.

- Feeling very oversensitive, fragile and needy
- Irrational responses to events and the actions of others
- Sleeping all the time
- Avoiding eating or overeating
- Wanting to be totally alone
- Racing thoughts
- Risk-taking behaviors (e.g., driving too fast)
- Thoughts of self-harm
- Being obsessed with negative thoughts
- Being unable to slow down
- Taking out anger on others
- Chain smoking
- Spending excessive amounts of money (specify \$ amount)
- NOT feeling
- Suicidal thoughts
- Paranoia
- Obsessed with thoughts of addictive behaviors
- Intense cravings/urges to use alcohol or illicit drugs
- Using a “little bit” of an addictive substance
- Making efforts to obtain addictive substances
- Feeling tempted to be in touch with people I know I should avoid

Part B: Action Plan for Helping Yourself to Feel Better When You are Feeling Much Worse

Write a plan that you think will help you feel better when you are feeling much worse. This plan now needs to be very specific, with fewer choices and clear instructions. It is like a hospital day at home. Following is a sample plan::

- Call my doctor or other health care provider; ask for and follow their instructions
- If I have health care appointments, arrange for a supporter to drive me
- Call a supporter and talk for at least one half hour
- Arrange for someone to stay with me around the clock until I feel better
- Take action so I cannot hurt myself if I feel worse or have a crisis where I cannot care for myself. For example, give my medications, money, checkbook, credit cards and car keys to a supporter
- Make sure I am doing everything on my Daily Maintenance List
- Arrange and take at least three days off from any responsibilities
- Have at least two peer counseling sessions daily
- Do three deep breathing relaxation exercises
- Do two focusing exercises
- Write in my journal for at least an hour
- Do creative activities for at least an hour each day
- Get at least 1/2 hour of aerobic exercise

SECTION 5: CRISIS PLANNING or ADVANCED DIRECTIVES

In spite of your best planning and assertive action in your own behalf, you may find yourself in a crisis situation, a situation where you can no longer take care of yourself and others will need to take over responsibility for your care. This is a difficult situation, one that no one likes to face. You feel like you are totally out of control.

Writing a Crisis Plan when you are well, to instruct others about how to care for you when you are not well, keeps you in control even when it seems like things are out of control. When you are feeling much worse, family members and friends may waste time trying to figure out what to do. With a Crisis Plan they will know what to do, saving everyone time and frustration, and insuring that your needs will be met.

A Crisis Plan needs to be developed when you are feeling well. However, you cannot do it quickly or all at once. It may take weeks or even months to come up with a good plan. Decisions like this take time and often collaboration with health care providers, family members and other supporters. Also, you may only be able to work on it for short periods at a time.

Use the following instructions to guide you in developing your Crisis Plan, While you developed previous parts of WRAP for your own use, this part is for others to use. You will want to give a copy of your crisis plan to each of your supporters. The plan needs to be written clearly so they can understand it. You may want to discuss it with them when you give it to them so you can be sure they know exactly what you mean.

You can keep your own copy on your computer and make several others to keep in safe places where you can easily find it when you or others need to use it.

Part A: What I'm Like When I'm Feeling Well

The first step is to describe what you're like when you're feeling well. Of course your family and friends know what you are like. But an emergency room doctor may think your ceaseless chatter, something you have always done, is a sign of mania. Or perhaps you are usually quite introverted. An unsuspecting doctor may see this as depression. Poor decision making or mistreatment could occur.

You developed this list for section 1 of the WRAP. You can just copy that and include it here in this section as well. Or you can develop a list that you feel more accurately reflects your need.

Create your list in Adult_Forms.pdf.

Part B: Symptoms or Signs that Let Others Know I Need Help

List those signs and behaviors that, if others observe them, will let them know they need to take over responsibility for your care and make decisions on your behalf. You may find

that this is the most difficult part of developing your Crisis Plan. This is hard for everyone. No one likes to think that they will ever have another difficult time or that others will need to take over responsibility for them or their care. And yet, through careful, well developed descriptions, if these circumstances ever come up, you can stay in control even when things seem to be out of control.

Allow yourself plenty of time to complete this section. When you start to feel discouraged or daunted, set it aside for a while. Ask your friends, family members and health care providers for input. However, always remember that the final determination is up to you.

Be very clear in describing the signs and behaviors. Don't try to summarize. Use as many words as it takes to describe the behavior or feeling. Following are some symptoms of crisis that others have experienced. You may want to include some of them on your plan.

- Use of alcohol or drugs
- Dissociation (blacking out, spacing out, losing time)
- Bizarre behaviors (describe things you have done in the past)
- Seeing things that aren't there
- Unable to recognize family members or friends
- Incorrectly identifying family members or friends
- Unconscious or semi-conscious
- Uncontrollable pacing, unable to stay still
- Very rapid breathing or gasping for breath
- Severe agitation, where I am unable to stop repeating negative statements like "I want to die."
- Inability to stop compulsive behaviors, like constantly washing my face
- Catatonia, or not moving for long periods of time
- Neglecting personal hygiene for one or more days
- Extreme mood swings daily
- Destroying property
- Not understanding what people are saying
- Thinking I am someone I am not
- Thinking I have the ability to do something I cannot do, like fly
- Self-destructive behavior
- Abusive or violent behavior
- Criminal activity
- Threatening suicide or attempting suicidal
- Not getting out of bed at all

- Refusing to eat or drink

Fill out the section in Adult_Forms.pdf titled 'I need help when I'.

Part C: Supporters

List those people you want to take over for you when they see, or you tell them, that the symptoms you listed in this plan are happening. These supporters can be family members, friends or health care providers. When you first develop this plan it may be mostly health care providers. But as you work on developing your support system, try and change the list so you rely more heavily on family members and friends. Health care providers are not consistently available and they move on to other positions. Using natural supports is less expensive, less invasive and often more comfortable.

Have at least five people on your list of supporters. If you have only one or two, they may not be available when you really need them. They may be on vacation, sick, or working on a big project. If you don't have that many supporters now, you may need to work on developing new and closer relationships with people by going to activities like support groups, community events or church. You might consider volunteering. You may also want to reconnect with friends with whom you have lost touch. People who are responsible, calm, compassionate, understanding, honest, knowledgeable, sincere and trustworthy are usually good supporters. You may be able to think of other attributes you would like your supporters to have.

You may want to name some people for certain tasks, like taking care of the children or paying the bills, and others for tasks like staying with you and taking you to health care appointments. List your supporters in Adult_Forms.pdf.

There may be health care professionals or family members that have made decisions that were not according to your wishes in the past. They could inadvertently get involved in your care again if you don't include them in the section titled: 'I do not want the following people involved in any way in my care or treatment.'

Also, list those people you want your supporters to notify if you are in a crisis, such as your employer or family members--along with what to tell each of them. List them in the section titled 'People to Notify'.

You may want to include a section that describes how you want possible disputes between your supporters settled. For instance, you may want to say that a majority need to agree before action can be taken, or that a particular person or two people decide if there are disagreements. Enter this information in the section titled: 'How I want disputes between my supporters settled'.

Part D: Medical Information/Medications / Supplements / Health Care

Preparations

Make a complete listing of all the medications, supplements and health care preparations you are using for any reason. Also list those that are acceptable for use in special circumstances and those that should not be used. Enter the current information on your health care providers, your pharmacist, insurance information and allergies.

Part E: Treatments and Complementary Therapies

There may be particular treatments and complementary therapies that you would like in a crisis situation and some that you would want to avoid. For instance, people tend to have very strong feelings about electroshock therapy - both positive and negative. Let your supporters know whether or not you want this treatment. The reason may be as simple as "this treatment has or has not worked for me in the past," or you may have some stronger reservations about the safety of the treatment.

You may have also found some complementary therapies that have helped as well as some that have not, e.g., acupuncture, massage therapy, homeopathy. Include these in your list along with information on when they should be used.

Part F: Home/Community Care/Respite Center

Many people are setting up plans so that they can stay home and still get the care they need if they are in a crisis, by having around-the-clock care from supporters and regular visits with health care providers. Many community care and respite centers are being set up around the country as an alternative to hospitalization where you can be supported by peers until you feel better. Those who have a dual diagnosis and need help in detoxing may be able to access day detox programs. There may be day treatment available to you that would allow you to spend the evening and nights with your supporters. You may want to talk with people who have used these programs and make any needed prior arrangements for use. You may have to do some research and investigation to find out what is available as an option for you.

Part G: Treatment Facilities or Hospitals

Your supporters may not be able to provide you with the home, community, respite care, or day detox you need. You may need a safe facility or hospital, you may be taking medications that need to be monitored, or you might prefer to take part in a program at a treatment facility. Using your personal experience and information you have learned through your own research or through talking with others, list those treatment facilities where you would prefer to be hospitalized if that became necessary, and list those you wish to avoid.

Fill in the information in the section of the forms titled 'Hospital or other Treatment Facilities'. Continue on to enter the facilities to avoid.

Part H: Help From Others

What do you want and need your supporters to do for you that would help you feel better and control unwanted behaviors--what would really help? This section takes a lot of thought. You may want to ask your supporters and other health care providers for ideas. Take your time. Think about what was helpful in the past. Review your list of Wellness Tools and include those you think would be helpful. Different things work for different people, so your list may be very different from someone else's list. You can also note on your list who you would like to do these things. Some ideas include:

- Keep me away from places where I can get alcohol or illegal drugs
- Protect me from people that are upsetting
- Listen to me without giving me advice, judging me or criticizing me
- Hold me
- Let me pace
- Encourage me to move, help me move
- Lead me through a relaxation or stress reduction technique
- Peer counsel with me
- Take me for a walk
- Provide me with materials so I can draw, paint or write
- Give me the space to express my feelings
- Don't talk to me (or do talk to me)
- Encourage me
- Reassure me
- Feed me good food
- Make sure I get exposure to outdoor light for at least 1/2 hour daily
- Play me comic videos
- Play me good music (specify what kind)
- Just let me rest
- Keep me from hurting myself, even if that means you have to restrain me or get help from others
- Keep me from being abusive or hurting others

You can reduce the stress you are experiencing by including a list of specific things you need others to do for you, like feed the pets, take care of the children, handle the finances, get the mail. List the task along with the person you would like to have do it. You may want to check with them when you develop the plan to make sure they are willing to do this task if needed.

Supporters may decide that some things would help that would really be harmful. List those

you have discovered to be harmful through past experience or those you feel could worsen the situation.

Some examples include:

- Trying to entertain me
- Chattering
- Certain kinds of music
- Getting angry with me
- Impatience
- Invalidation
- Not listening to me
- Judging me
- Encouraging me in using addictive substances

Part I: When My Supporters No Longer Need To Use This Plan

When you feel better your supporters will no longer need to follow this plan to keep you safe. Make a list of indicators that your supporters no longer need to follow this plan. Some examples include:

- When I have slept through the night for three nights
- When I eat at least two good meals a day
- When I am taking care of my personal hygiene needs
- When I can carry on a good conversation
- When I keep my living space organized
- When I can be in a crowd without being anxious
- When I am no longer trying to abuse substances

Describe these signs and indications in the section of the forms titled 'When My Supporters No Longer Need To Use This Plan'.

Part J: Making it Official

If you have had crises in the past, you may live in fear of what will happen if you have another crisis. You may fear that you will lose the ability to make health care decisions. You can help assure that your Crisis Plan will be followed by preparing the plan as an Advance Directive Durable Power of Attorney (POA) for psychiatric health care. An Advance Directive Power of

Attorney is a legal document in which you name a person or several people to act on your behalf when you cannot care for yourself. Your Durable Power of Attorney is someone you trust, like a family member or close friend, to make health care decisions for you when an attending physician determines that you are not able to make good health care decisions for yourself. Developing a POA when healthy allows you the opportunity to openly discuss your signs and symptoms as well as your treatment preferences. When properly planned and implemented, it is a natural fit with empowerment and recovery.

DEVELOPING YOUR POST CRISIS PLAN

The Post Crisis Plan is different from other parts of your Wellness Recovery Action Plan™ in that it is constantly changing as you heal. It is anticipated that two weeks after the crisis you will be feeling much better than you did after one week and therefore your daily activities will be different.

As with the other parts of the Wellness Recovery Action Plan™, it is up to you to decide whether or not you want to develop a Post Crisis Plan. If you decide you want to develop a Post Crisis Plan, it is up to you to decide when you will do it. Like the rest of the plan, the best time to develop your Post Crisis Plan is probably when you are feeling quite well. Then you will have it if you ever do go into crisis. But again, it is up to you. It would probably be difficult to develop such a plan when you are in crisis or when you are trying to recover. It seems like it would be advantageous to have developed this plan in advance.

If you are hospitalized and you don't have a Post Crisis Plan, you may want to develop one with your care providers or on your own before you are discharged as a kind of comprehensive discharge plan. While you are in the hospital you may want to ask your care providers to explain any possible discharge conditions and how these conditions would affect your post crisis plan if they were imposed on you.

You may decide to develop your plan when you are working with a group or with your counselor. You can do it with a supportive family member or friend. Others may give you suggestions or advice if you wish, but the final word should be yours. You can also choose to do it by yourself. It is also up to you to decide whether or not you want to show your Post Crisis Plan to others. It may be a good idea to share your plan with people who you want to assist and support you as you heal.

You may want to sit down one afternoon and spend three or four hours working on your plan until it is finished. You may want to take your time and work on it a bit today and a little more another day.

In developing your Post Crisis Plan, you may find it helpful to refer to your Wellness Tools, your lists of what you are like when you are well, your Daily Maintenance Plan, and your list of things you might do to maintain your wellness. You also may want to refer back to your Crisis Plan as you make choices to resume activities and take back responsibilities.

The forms for developing a Post Crisis Plan are quite extensive. As with other sections of your Wellness Recovery Action Plan™ you can skip over sections that don't seem relevant to you or that you would rather address at another time.

You may choose to use the worksheet at the end of the forms to set up recovery timelines. In the first column write the task or responsibility you would like to resume. In the second column list the steps you would take to resume that task or responsibility. In the third column select a possible day or days for accomplishing that step.

You may want to revise your plan after you have used it especially if certain things weren't as helpful as you thought they would be or plans did not work as you expected.

Go to the Post Crisis Plan Forms in [Adult_Forms.pdf](#)

Go to the Post Crisis Plan Worksheet in [Adult_Forms.pdf](#)

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