

Wellness Recovery Action Plan

WRAP

Personal Workbook

Wellness Recovery Action Plan (WRAP)

The Wellness Recovery Action Plan is a framework with which you can develop an effective approach to overcoming distressing symptoms, and unhelpful behaviour patterns. It is a tool with which you can get more control over your problems. WRAP was originally developed by Mary Ellen Copleand and a group of mental health service users who wanted to work on their own recovery - this is what they found worked for them. Developing your own WRAP will take time, it can be done alone, but many find it very valuable to have a supporter - someone they trust, and work on it together.

As you develop your WRAP it can become a practical support for your recovery, which you refer to daily, as a reminder and guide, and also turn to at times of difficulty. It is designed as an aid for learning about yourself, what helps and what doesn't, and how to get progressively more in control of your life and your experience. It also includes instructions on developing a crisis plan, as a means of guiding others on how best to make decisions for you and to take care of you, for those times when your problems and symptoms have made it very difficult for you to do this for yourself.

Once you are committed to your own recovery, however things work out, they can be an opportunity for learning more about yourself, and improving your WRAP.

A WRAP includes: developing a Wellness Toolbox, and then

1. Evolving a daily maintenance plan
2. Understanding triggers and what I can do about them
3. Identifying early warning signs and an action plan
4. Signs that things are breaking down and an action plan
5. Crisis planning
6. Post crisis planning

The WRAP belongs to you and you decide how to use it. You decide who to show it to and you decide whether you want someone to work with you on it or not. You decide how much time to spend on it and

when to do it. It becomes your guide to support your own wellness and recovery.

Developing a Wellness Toolbox – reminders and resources to call on

Wellness tools include things like:

Developing a strong support system; - peer counselling; - focusing; - relaxation and stress reduction exercises; - writing a diary; - creative, fun and affirming activity; - exercise; - diet; - light; - getting a good nights sleep.

- a. In my experience these are my things that support wellness - this works for me:

- b. This is what carries a sense of meaning or significance for me; this is what inspires me and reminds me of my values

- c. These are some things that I would like to try to see if they would support my wellness:

1. Setting up my Daily Maintenance Plan

- a. My baseline: What am I like when I am well? When I feel well, I am

- b. Daily maintenance Plan: - This is what I need to do for myself every day to keep myself feeling as well as possible

- c. This is what I need to do, less often than every day, to keep my overall wellness and sense of wellbeing

d. These are the things that I know I need to do to sustain my wellness, but for some reason do not do them

2. Triggers

Examples might be: - getting a big bill; - having an argument with a family member; etc.

a. Recognition

Triggers are **things that happen to us** that are likely to set off a chain reaction of uncomfortable or unhelpful behaviours, thoughts or feelings. - **What triggers me?**

b. Action Plan

What can I do about these triggers?

Avoiding your triggers: What can I do to avoid or limit my exposure to things that trigger me?

Coping with triggers when they occur: What can I do when I am triggered to prevent things from getting worse?

3. Early warning signs are the subtle signs of changes in our thoughts or feelings or behaviour, which indicate that you may need to take action to avoid a worsening of your condition or situation.

Examples might be: feeling nervous; - being unable to sleep.

a. Recognition

What changes for me; what are my early warning signs?

b. Action Plan

What can I do about this?

What action can I take when I recognise the early warning signs?

4. When things start breaking down or getting worse

Indicators might be: crying all the time; - sleeping all-day; etc.

a. Recognition

This is how I think and feel, and how I behave when the situation has become uncomfortable, serious or even dangerous:

b. Action Plan:

When things have progressed this far caring for myself is my top priority. What can I do to reduce these difficult and unpleasant experiences, and prevent things getting worse?

Wellness Recovery Action Plan

PERSONAL CRISIS PLAN

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ADVANCED DIRECTIVE

This plan was made on..... date

And it takes over from any other plans with earlier dates.

This 10-point plan can be just for your own use and reference or can be shared with others involved in the plan. It will take time to set up, and can be changed whenever you have new ideas or information. When you change it, consider sending updated versions to those it involves

Part 1. Remembering What I am like when I'm feeling well

When I am well I am.....

Part 2. When it gets too bad

Describe how others would know that they need to take over some or full responsibility for your care and make decisions on your behalf, what are you like?

When it gets too bad I.....

Part 3. Supporters

List those people you want to take over for you when the symptoms you listed above are obvious. They can be family members, friends or health care professionals. 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.

These are my supporters:

Name
Connection/role
Phone number

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 if you do not include the following:

I do not want the following people involved in any way in my care or treatment:

Name

Why you do not want them involved (optional)

Name

Why you do not want them involved (optional)

Settling disputes between supporters

It would only be human nature if sometimes your supporters had different opinions on what should happen. It could be helpful to your supporters if you describe how you want possible disputes between them settled. For instance, you may want to say that a majority need to agree, or that a particular person, or two people you name can make the decision.

When my supporters disagree amongst themselves, this is how I would like the dispute settled:

Part 4. Medical treatment and medication

My General Practitioner is

name

Contact

Phone no.

My Psychiatrist is

name

Contact

Phone no.

My Care co-ordinator is

name

Contact

Phone no.

List the **medications you are currently taking** and why you are taking them. Include the name of who prescribes them.

List those medications you would **prefer** to take if **medication or additional medications became necessary**, and why you would chose those

List those medications that **must be avoided** and give reasons

Part 5. Treatments

List other **treatments that help reduce your symptoms** and when they should be used:

List **treatments you would want to avoid**, and why:

Part 6. Alternatives to being in hospital: staying at home or using other safe places

Set up a plan so that you can stay at home or in the community and still get the care you need

Part 7. Treatment facilities

If it becomes necessary to have treatment somewhere or to attend hospital **where would you prefer** to be?

List **treatment facilities you want to avoid** and why

Part 8. Help from others

List those **things that others can do for you** that would help reduce your symptoms or make you more comfortable when you are in crisis - **This is what helps me:**

List those **things you need others to do for you** and who you want to do what:

What I need done

Who I'd like to do it

List those **things** that others might do, or have done in the past, **that would not help** or might even worsen your state

Part 9. If I am in danger.

If my behaviour endangers me or others I want my supporters to:

Part 10. Inactivating the plan

How will your supporters know when it is safe to stop this Crisis Plan?

Describe what positive changes indicate to your supporters that you are in control of things again, and they no longer need to use this plan.

You will know it is safe to cease using this plan when: -

Crisis Plan statement (optional)

You can help ensure that your crisis plan will be followed, by signing it in the presence of two witnesses. It will further increase its potential for use if you identify your supporters and name people who are prepared to back up your needs and preferences.

I _____ developed this plan on
(date)

With the help of:

Signed _____ Date _____

Witness _____ Date _____

Witness _____ Date _____

This plan takes over from any with an earlier date

Part 6. Post Crisis Planning

If despite your best efforts at caring for yourself and working with others, you still go through a crisis - this is not the end of the world, nor does it mean you cannot recover.

Recovery is a process that you can get back to at any time and after any experience, no matter how bad. But in order to do so it will be very helpful to reflect on what has happened to you and learn from it. Some can do this alone, most of us are greatly helped by having someone we trust to turn to, and talk it over together.

After a crisis you may be exhausted and badly shaken, so pick your time when you are ready and willing to make sense of it, and you have the energy to do so.

Then talk and think through what has happened, and compare this with the WRAP you have written so far.

What have you learned about yourself and others through this crisis?

Are there parts of your WRAP that didn't work out as you had hoped?

What changes can you make now to your WRAP to make a further crisis less likely?

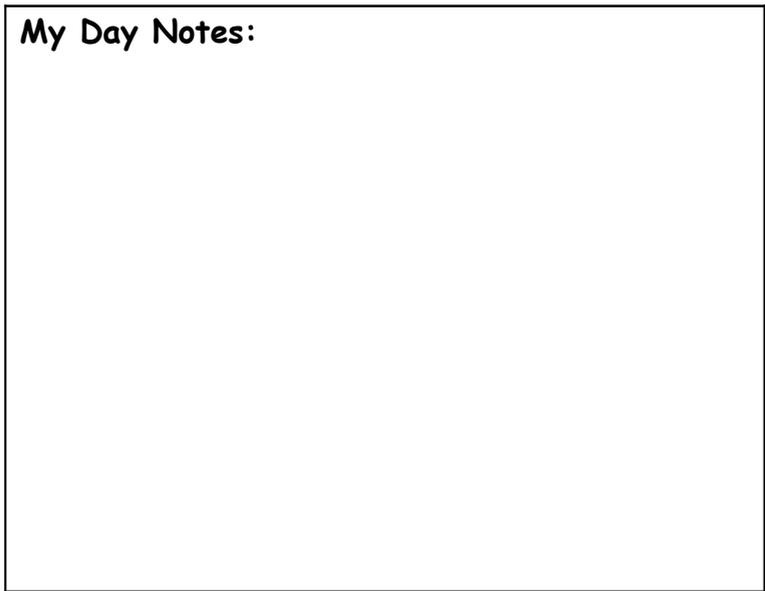
UPDATE FOR _____ (date)

How did I feel today? (circle)
(not well) 1 2 3 4 5 (very well)

Why was this? - Did I experience any **triggers** or **early warning signs**?

What was the **best** thing that happened today?

My Day Notes:



**DEVELOPING
A
WELLNESS
TOOLBOX**

MY DAILY MAINTENANCE PLAN

TRIGGERS

EARLY WARNING SIGNS

PERSONAL CRISIS PLAN

POST CRISIS PLANNING

DAY TO DAY LIVING

**WHEN THINGS
START
BREAKING
DOWN**