

**The Priory Hospital
Glasgow**

**Day therapy groups for individuals with
an acute mental health condition**

About our therapy programmes

We understand that coming into hospital can be a daunting process, and that you will want the very best treatment available in order to overcome your illness as soon as possible. For this reason, we have provided below some detailed information about the content of our Group Therapy modules within a typical week at the Priory Hospital Glasgow. We hope that you will be able to use this information to familiarise yourself with the type of activities you will be undertaking as an inpatient staying with us, or as a day or outpatient coming into the hospital.

These sessions are designed to provide individuals with an acute mental illness the coping strategies to recognise and, in time, overcome their condition. Acute mental health is often referred to as general psychiatry, and covers a range of conditions, including:

- anxiety
- depression
- obsessive compulsive disorder
- personality disorders (such as bi-polar disorder)
- phobias
- post-traumatic stress disorder
- schizophrenia
- stress

What is Group Therapy?

Group Therapy is recognised as an opportunity for an individual to:

- i) Understand that they are not alone
- ii) Hear shared experiences of others, especially those who are in part recovery
- iii) Experience a welcoming environment, which is safe and non judgemental
- iv) Experience a structured routine
- v) Develop confidence in their interaction with others
- vi) Receive support from others within your peer group

Does therapy work?

Understandably, you will want to be sure that the treatment that you receive is not only effective, but also excellent value. The best way for us to ensure that our patients are pleased by the treatment and support they receive from the Priory Hospital Glasgow is to regularly review our patient satisfaction surveys and monitor clinical outcomes.

We are pleased to report that our most recent Group results showed that:

- **99%** of our patients rated the quality of their care as good or excellent
- **98%** of our patients would recommend their treatment
- **93%** of patients with an acute mental illness had improved overall wellbeing following treatment as an inpatient
- **84%** of patients with an acute mental illness had improved overall wellbeing following their therapy treatment

A typical week at the Priory Hospital Glasgow

<i># Times may vary slightly</i>	9.30 - 10.30	11.00 - 12.00	1.15 - 2.15	2.45 - 3.45	4.00 - 4.45	7.30 - 9.30
MONDAY	A Solution Focus	A Solution Focus	B CBT for Depression	B CBT for Depression	K T'ai Chi	Free time
TUESDAY	C CBT for Self Esteem	C CBT for Self Esteem	D CBT for Anxiety	D CBT for Anxiety	E Relaxation Therapeutic Writing	Free time
WEDNESDAY	F Self Awareness Art Therapy	F Self Awareness Art Therapy	J Agenda for Mixed Diagnosis	J Agenda for Mixed Diagnosis	Relaxation	Free time
THURSDAY	G Behavioural Activation	G Behavioural Activation	H Assertiveness	H Assertiveness	K T'ai Chi	Free time
FRIDAY	B CBT for Depression	B CBT for Depression	A Solution Focus	I Relapse Prevention	Relaxation	Free time
SATURDAY	Free time	Free Time (Outings)	Free Time (Outings)	Free Time (Outings)	Free time	Free Time
SUNDAY	Free time	Free Time (Outings)	Free Time (Outings)	Free Time (Outings)	Free time	Free Time

Module key:

A – Solution Focus - Guides the individual to become aware of internal experiences, identify emotions and cope with or tolerate the emotion.

B – CBT for Depression - A structured, CBT focussed Group which explores why individuals can experience negative emotions more frequently/ intensely than most. These sessions support learning new and more effective ways of handling moods and emotions by learning to disengage from trying to 'fix' things and repeated self-critical thoughts.

C – CBT for Self Esteem - A structured, CBT focussed Group that examines the individual's relationship with their own self awareness and self thoughts; addresses cognitive distortions, identity and encourages acceptance that everybody is individual and that each individual is important to themselves and others.

D – CBT for Anxiety – A structured, CBT focussed Group that enables individuals to understand why they feel anxious and provides coping mechanisms and strategies when faced with their own difficult situations. Sharing within the Group environment is important so that they understand their own feelings are not isolated.

E – Relaxation Therapeutic Writing – Individuals have the opportunity to articulate their feelings and understand more about why these feelings occur.

F – Self Awareness Art Therapy – Individuals learn to express themselves freely using an alternative medium to speech – an opportunity to further explore the creative, thinking side of the brain. Each assignment is reviewed within the Group environment and helps individuals express themselves in a safe environment.

G – Behavioural Activation – A group that enables individuals to put into practice their learning into meaningful actions when interacting with others.

H – Assertiveness - A Group session that helps individuals build coping mechanisms to realise their self worth and how to interact with others to influence their own thoughts and feelings in a controlled manner.

I - Relapse Prevention – This group addresses the cycle of change, creates awareness of triggers and protective factors and encourages commitment to recovery and putting plans in place in order to help minimise the risk of re-lapse.

J – Agenda for Mixed Diagnosis – Talking therapy Group focussed on goal setting and recovery for each individual.

K- T'ai Chi - Any kind of addiction can be helped by the discipline and health of regular exercise. Tai Chi teaches techniques that can be used throughout the day to reinforce healthy habits. It is based upon an internal Chinese martial art practiced for its health benefits and longevity. Especially known for being practiced at what most people categorise as slow movement.

Our Therapist Specialities:

Although our General Therapists are focussed on general acute based therapy, a complete plethora of specialities are available within the team and can be accessed by patients, especially if a patient is experiencing any form of dual diagnosis.

Addiction therapy programme (ATP)

Eating disorders (occupational therapy)

Cognitive behaviour therapy (CBT)

Anxiety management

Person centred therapy

Eye movement desensitisation and reprocessing (EMDR)

Obsessive compulsive disorder (OCD)

Child and adolescent mental health services (CAMHS)

Attention deficit hyperactivity disorder (ADHD)

Exposure work

Life skills

Mindfulness

Positive psychology

Family interventions

Couple work

Harm reduction

Sexual abuse

Yoga

Personality disorders

Complex trauma

Autistic spectrum and Asperger's syndrome

Gambling addiction

Sex addiction

Creative writing

Art therapy

Self awareness

Glossary of clinical terms:

Addiction Therapy Programme – based upon detoxification followed by an abstinence (and sustainment) model.

Eating disorder (occupational therapy) – various therapies relating to pragmatic ways to improve life experience in coping with an Eating Disorder.

Cognitive behavioural therapy - is a psychotherapeutic approach that can address dysfunctional and complex emotions, maladaptive behaviors and cognitive processes and contents through a number of goal-oriented, explicit systematic procedures. This principle is known to be effective across a wide range of psychological problems.

Person Centered Therapy – the goal of PCT is to encourage focus on personal issues a safe, comfortable, non-judgmental environment by demonstrating congruence (genuineness), empathy, and unconditional positive regard toward their patients while using a non-directive approach. The underlying philosophy is; that as humans we strive to be the best that we can be and in the safety of a therapeutic environment, the patient can explore thoughts and feelings and through awareness, pursue acceptance and change.

Eye movement desensitization and reprocessing - is a psychotherapy for post trauma stress disorder that has been judged efficacious by numerous professional bodies. In EMDR treatment the patient first recalls traumatic material and then free associates on their own ("just let whatever happens happen") to sequences of linked material, both traumatic and non-traumatic, all while simultaneously attending to inner thoughts and sensory stimulation from a rhythmic, bilateral source. The goal of EMDR therapy is to process these distressing memories, reducing their lingering influence and allowing clients to develop more adaptive coping mechanisms.

Obsessive compulsive disorder – is an anxiety disorder characterized by intrusive thoughts that produce uneasiness, apprehension, fear, or worry; by repetitive behaviors aimed at reducing the associated anxiety; or by a combination of such obsessions and compulsions. Symptoms of the disorder include excessive washing or cleaning; repeated checking; extreme hoarding; preoccupation with sexual, violent or religious thoughts; relationship-related obsessions; aversion to particular numbers; and nervous rituals, such as opening and closing a door a certain number of times before entering or leaving a room. These symptoms can be alienating and time-consuming, and often cause severe emotional and financial distress. However, OCD sufferers generally recognize their obsessions and compulsions as irrational, and may become further distressed by this realisation.

Child and adolescent mental health services – for the diagnosis and treatment of children and adolescents, generally until school-leaving age.

Attention deficit-hyperactivity disorder – is a neurobehavioral disorder characterised by either significant difficulties of inattention or hyperactivity and impulsiveness or a combination of the two. It is now generally accepted that symptoms emerge before seven years of age. There are three subtypes of the disorder which consist of it being predominantly inattentive (ADHD-PI or ADHD-I), predominantly hyperactive-impulsive (ADHD-HI or ADHD-H), or the two combined (ADHD-C). Often people refer to ADHD-PI as "attention deficit disorder" (ADD). ADHD generally impacts school-aged children and results in restlessness, acting impulsively, and lack of focus which impairs their ability to learn properly, although it is now generally accepted that with adults symptoms can prevail and adults can demonstrate the same.

Exposure work - is a technique in behavioural therapy intended to treat anxiety disorders and involves the exposure to the feared object or context without any danger in order to overcome their anxiety.

Mindfulness - Promotes a "way of being" that helps us approach an individual's present predicament with kindness and compassion. Learning new and more effective ways of handling moods and emotions by learning to disengage from trying to 'fix' things and repeated self-critical thoughts.

Positive psychology – Developing more effective understanding and interventions to determine how things go right; through positive experiences, enduring psychological traits, positive relationships positive influences. This branch complements, with no intention to replace or ignore, the traditional areas of psychology.

Personality disorder – Eating Disorder (Occupational Therapy) – refers to a class of personality types and enduring behaviors associated with significant distress or disability, which appear to deviate from social expectations particularly in relating to other humans.

Complex trauma therapy – to help alleviate severe anxiety disorder that can develop after exposure to any event which results in psychological trauma. This event may involve the threat of death to oneself or to someone else, or to one's own or someone else's physical, sexual, or psychological integrity, overwhelming the individual's ability to cope. As an effect of psychological trauma, PTSD is less frequent and more enduring than the more commonly seen post traumatic stress (also known as acute stress response). Diagnostic symptoms for PTSD include re-experiencing the original trauma(s) through flashbacks or nightmares, avoidance of stimuli associated with the trauma, and increased arousal—such as difficulty falling or staying asleep, anger, and hyper vigilance.