

5:30-6:00	Dinner	Dinner	Dinner	Dinner	Dinner	Dinner	Dinner
6:00-7:00	Psych Ed 2-MHT	Psych Ed 2-MHT/ Visitation	Psych Ed 2-MHT	Psych Ed 2-MHT/ Visitation	Psych Ed 2-MHT	Psych Ed 3-MHT/ Visitation	Psych Ed 3-MHT/ Visitation
7:00-7:45	Personal Time/ Phone Calls	Personal Time/ Visitation/Phone	Personal Time/ Phone Calls	Personal Time/ Visitation/Phone	Personal Time/ Phone Calls/Phone	Personal Time/ Visitation/Phone	Personal Time/ Visitation/Phone
7:45-8:00	Break/Phone	Break/Phone/ Visitation	Break/Phone	Break/Phone/ Visitation	Break/Phone	Break/Phone/Visitation	Break/Phone/Visitation
8:00-9:00	Goals Review- MHT	Goals Review- MHT	Goals Review- MHT	Goals Review- MHT	Goals Review- MHT	Goals Review- MHT	Goals Review- MHT
9:00-10:00	Reading/ Journal/ ADL's	Reading/ Journal/ ADL's	Reading/ Journal/ ADL's	Reading/ Journal/ ADL's	Reading/ Journal/ ADL's	Reading/ Journal/ ADL's	Reading/ Journal/ ADL's
10:00	Lights out	Lights out	Lights out	Lights out	Lights out	Lights out	Lights out

Number of Groups- MHT-2-5

Therapist-1

Activity Therapist-2

Patient Run-0-3

1. Goals Group-these should be done and written in a common area so everyone can review and remind themselves of what they are working on that day. There should be no more than 2 goals, and each must be measurable (no "have a good day") and active (remove any "don'ts-challenge them to see what they will do). If they give you vague things, ask them "how will you make that happen?" A way to help them identify goals is to ask these 2 questions
 - a. What are you doing today?
 - b. What can you do to make it better?
2. Psych Ed/Nursing group-focus is on educating on psychiatric issues and developing positive coping skills to manage these issues.
3. Personal Assignments/Journaling -done in group room not their rooms (no writing utensils in rooms, remember?).
4. Discharge planning-focus on what will be different for them once they leave. Those who may be leaving soon should be leading, discussing what they learned and how that will make them different outside of the facility. Ask what has changed in the family, and how this will help create differences in their life. What will they do when faced with the same problem the next time? Those who are newer can discuss what they must do before they are discharged or what they want to learn before they leave. Challenge those close to discharge to discuss what was helpful and what they still need, to help those newer ones find things that can help them. Some group materials can be used too
5. Goals review-Ask if they achieved their goal and if their interventions worked. Ask the group to help review, to see where they were successful and if their change achieved the goal they wanted (everything we do has a purpose, such as if "I only spoke when spoken to" was designed to keep them out of trouble, did it work? What did it cost them and what did they gain? Let each of them review and ask peers to support and encourage as well as challenge discrepancies between what they said and what really happened.
6. Bedtime/lights out-give them time to wind down. Much like quiet time, it gives a chance to reflect, relax and get ready to rest. Quiet doesn't mean silent, but if they want to turn lights off before the time that's fine.