Monday 21/10/20







Project Title	Daily Routine - Kellyville Private Hospital	
Purpose	To maintain a routine and discipline for long enough for me to be able to transfer the structure to life on the outside	
Main Goals	Plan day and keep to the schedule	
Project Manager	Robert Graham	
Team Members	Nav, Facilitator, Receptionia	
Teams Involved		
Project Risks	NA/	
Materials & Reference Information		

Notes

0700 WAKE

0700 - 0900

- Shower
- Dressed
- Coffee
- Breakfast
- Walk (30 Mins)
- Add a page per day to Kellyville Private Hospital Notebookk

0900 - 0915

Morning Meeting

Gratitutude: "I am grateful for the walking track where and the cool spring weather to be able to do 30 mins walking a day. I think this is why I am putting on weight."

0915 - 0930

Prepare for Group

0930 - 1030

Group - Session 1

- Record facilitator name
- Record Participants name
- Focus on chapter presented

1030 - 1100

- Light snack
- Smoko

1100 - 1230

• Play on phone and listen to others and the facilitator

1230

• Lunch

1300 - 1330

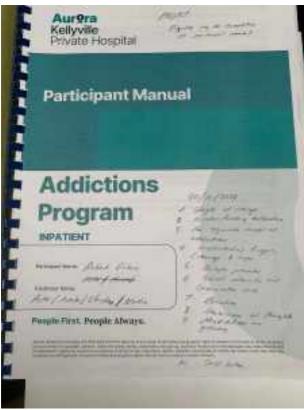
- Evernote Tasks prepare
- Other tasks (Pack and send Samsung)
- Social Media chat: Contacts

1330 - 1530

• Bachelor of Information Technology ⁴/₇ Bachelor of Business enterprise

_ _ _ _ _ _ _ _ _

GROUP NOTES



PROJECT: Digitize my own completion of participant manual 20/10/2024

- 1. Stages of change
- 2. Understanding addiction
- 3. The cognitive model of addiction
- 4. Understand triggers, cravings & urges
- 5. Relapse prevention
- 6. Social networks and communication skills
- 7. Boundaries
- 8. Awareness of thoughts
- 9. Mindfulness and grounding
- 10. Self esteem

Participant Name: Robert Graham

Facilitator Name: Peter / Anvela / Christian / Nadia

Aurora Kellyville Private Hospital

Participant Manual

Addictions Program

INPATIENT

People First. People Always.

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IL-SOCIAL NETWORKS & COMMUNICATION SIELS	10
7. BOUNDARIES	
8. XWARENESS OF THOUGHTS	(80)
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11: Coping With Emotions Introduction This session will focus on how to identify emplore, explane the function of emplores and develop strategies for emplores equilation. Objectives: Understand emotions and the model of emotions Understand the function of emotions. Develop ametional regulation strategies Caping with Employ Cadesfinder contra an the read of Emerne ardespens the Auchen 1 Develop ametimal regilities stategies 21/10/29. NADIA Sell Rel Metros - log Arger. Bat Flar These is nothing Par 1holes Sed Dess Disguit. Summe KYL- ADDICTURES REVETENT OFFICIANS HEBRING 74 REVELOCITY PAGE TOS OF 188

Coping with Emotions

- Understanding emotions and the model of emotions
- Understand the function
- Develop emotional regulation strategies

21/10/24 NADIA

- Self Reflection
 - Joy
 - Anger
 - Fear -> "There is nothing to fear but fear itself."
 - Sadness

- Disgust
- Surprise

11: Coping With Emotions

Introduction

This session will focus on how to identify emotions, explore the function of emotions and develop strategies for emotional regulation.

Objectives:

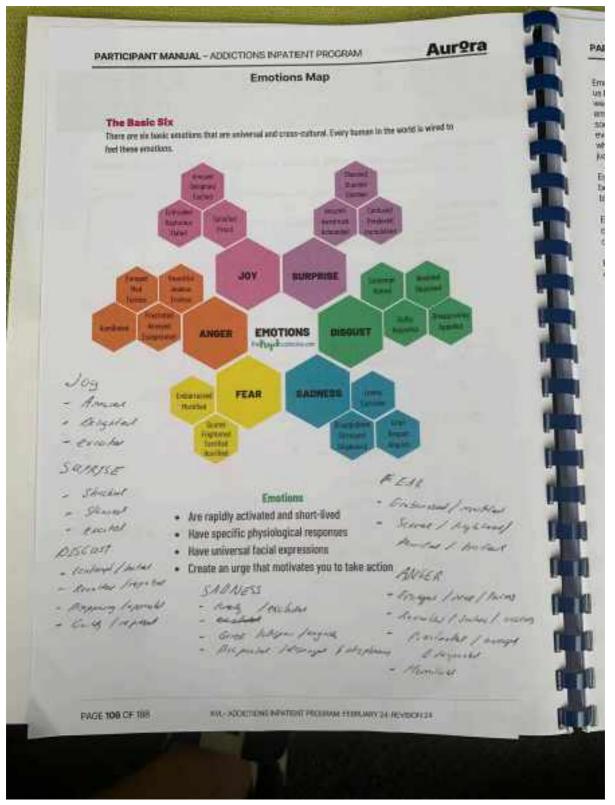
Understand emotions and the model of emotions.

Understand the function of emotions.

Develop emotional regulation strategies.

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KVL - ADDICTIONS INPATIENT PROGRAM: FEBRUARY 24: REVISION 24



Joy

- Amused
- Delighted
- Excited

Elated

SURPRISE

- Shocked
- Stunned
- Excited

DISGUST

- Contempt / Hatred
- Revolted / Repulsed
- Disapproving / Appalled
- Guilty / Regretful

FEAR

- Embarrassed / Mortified
- Scared / Frightened
- Terrified / Horrified

ANGER

- Enraged / Mad / Furious
- Resentful / Jealous / Envious
- Frustrated / Annoyed
- Exasperated
- Humiliated

SADNESS

- Lonely
- Excluded
- Grief / Despair / Anguish
- Disappointed / Displeased / Disheartened

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thepsychcollective.com

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KVL - ADDICTIONS INPATIENT PROGRAM: FEBRUARY 24: REVISION 24

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Thoughts -> Emotions -> Behaviour

My behavioural thoughts are disordered

Change

This is why I need to stay at Kellyville parks on a checked in/checked out basis My behaviour is improving everyday slowly

I have 'disorganized thoughts & behavior' & Schizophrenia

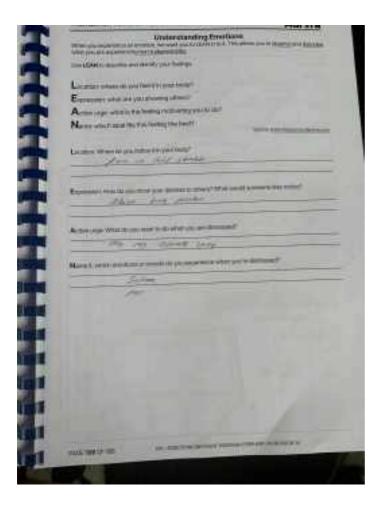
PARTICIPANT MANUAL - ADDICTIONS INPATIENT PROGRAM

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claw fipm	hrough many different mode wa develop our ewin view of our behaviour repartoins to	yths about Emotions urm, by what we see, by what we see the work that helps with quickly that work out how we should respond.	
There are a	that we learn about emotion fluation or experience so has lot of myths in life that clear wation or can directly conten-	ns may not be right or the best fit for u rd set rules don't always fit and can a lop overtime, may have been usaful a stict another myth.	s. And there is problem, tually become a problem, t some paint but now don't
Let's explore	e some of them.		
	re is a right way to feel in a		
	ing others know that I am h ative feelings are bad and o		
	g amotional means being o tions can just happen for n		
+ Som	e emotions are really stuple	d and the second	
 All pr if oth 	inful emotions are a result ers don't approve of my fr	of a bad attracts relings, I obviously shouldn't feel the	way Ido.
 Other 	r people are the bast judge	e of how I am feeling.	
		important and should be ignored.	
	The Feeler	i bul	
	Not me	Times and no	
Distance in t	Neds met	Amp me as	4
1	Parka	Magarine	

The feelings I had Needs met Needs not met Positive Negative PARTICIPANT MANUAL – ADDICTIONS INPATIENT PROGRAM Aurora

KVL- ADDICTIONS INPATIENT PROGRAM: FEBRUARY 24: REVISION 24



Aurora. PARTICIPANT MANUAL - ADDICTIONS EXPATIENT PROGRAM The Function of Emotions Dispite years of being told that emotions make us woak or mean that we see in some way tawest, the truth is the emotions have a function, identifying the purpose of anotions helps to give meaning to our experiment. experience Communication Motivation Emotion Trigger Joy shown on faces Continue with striving. encourages others to join Experience that goal Joy play, socialise with attainment is prepressing wet Peropyed mistreatment in. others Keeps people away so they clarit interfers with Coxect the injustice, Anger overclame obstacles purgue of goal Surphise shown on our Drient towards It Finally stimul to-market an Something unexpected Surprise faces of ports others to look at what we are happens and also of good bad looking at. Facial expression slerts Disgust Exposure to harmful Turn away to avoid others to avoid also substance or toxin 00006120 Peer shown on out faces Fear Run away or fiee Imminent danger endourages others to thee Elicit congection Loss of something Repair a loss or falure Sadness important The Frank no at Errations E-MOTION -> FRIELER -> MATINATION -> COGANOSCONTRA E Marson J 24444 1-Aflest Common regime / Execute Metterton TABLER -Class I make at Employ Emplay Post tere : A 164 6. 1517 2. 5+1155 WATTER OF AVELIAN 3. RIXGOST 500425 2 1230100 Arvira -NV. ADDICTIONS PRATICAL PROVINCES 24 REVISION 24 PAGE 110 OF 188

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Clean Pain vs. Dirty Pain

The way we think about and respond to distress can have a significant impact on our experience of distress in the moment. While distress is a normal part of life and in some instances unavoidable (clean pairy, there are moments when our thoughts and actions in response to this distress can elicit additional layers of pain which exacerbate our experience of distress in the moment (dirty pain).

Clean pain can be considered the pain which naturally arises in response to a particular situation (e.g. the sadness of a relationship ending or the grief following the loss of a loved onel - this pain is to be expected and is unavoidable. Dirty pain is the pain that armes as a consequence of regrettable actions as a means of avoiding unpleasant internal experiences (e.g. substance use, impute spending, emotional eating, risk taking behaviour, promisculty, etc.) or as a result of the internal struggle that arises from a lack of acceptance of the cleen pain.

Consider the ways that your thoughts and behaviours may contribute to your experience of distress and note them in the appropriate layers being

RESPOND & EMOTION **Managing Emotions**

Learn how to RESPOND your emotions by participating in skills effectively.

Regulate: be willingly skilful

Express: "I feel _____

Snap judgement: identify the thought that triggered the emotion (from Distress Cycle)

Participate skilfully: Use skills to reduce the intensity

Opposite action: Do the opposite of your action urge (if the urge is regrettable)

Nurture and validate: self-scothe and acknowledging how it affected you

Discharge the emotion: Let it out by talking, exercising, or writing

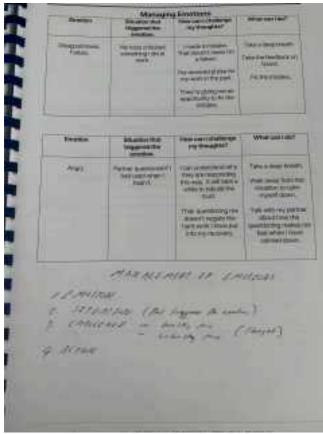
Source: www.theorychoollective.com

CLEAR PATA IS PIRTY PACA HEACTAY PARA is GRIMZACTAY MATT It a too is repared to an enders

RESPOND & EMOTION CLEAN PAIN vs DIRTY PAIN HEALTHY PAIN vs UNHEALTHY PAIN

• It is how we respond & our endless PARTICIPANT MANUAL – ADDICTIONS INPATIENT PROGRAM Aurora Clean Pain vs. Dirty Pain

Source: w	ww.thepsychcollective.com
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MANAGEMENT OF EMOTIONS

- 1. EMOTION
- 2. SITUATION (that triggers the emotion)
- 3. CHALLENGE healthy plan
 - unhealthy plan (thoughts)
- 4. ACTION

AUCON

- 1. An emotion will last for as long as you think about it
- 2. There is healthy pain and unhealthy pain

The psychologist who ran group teaching at provide the experts in addiction and understanding the mind

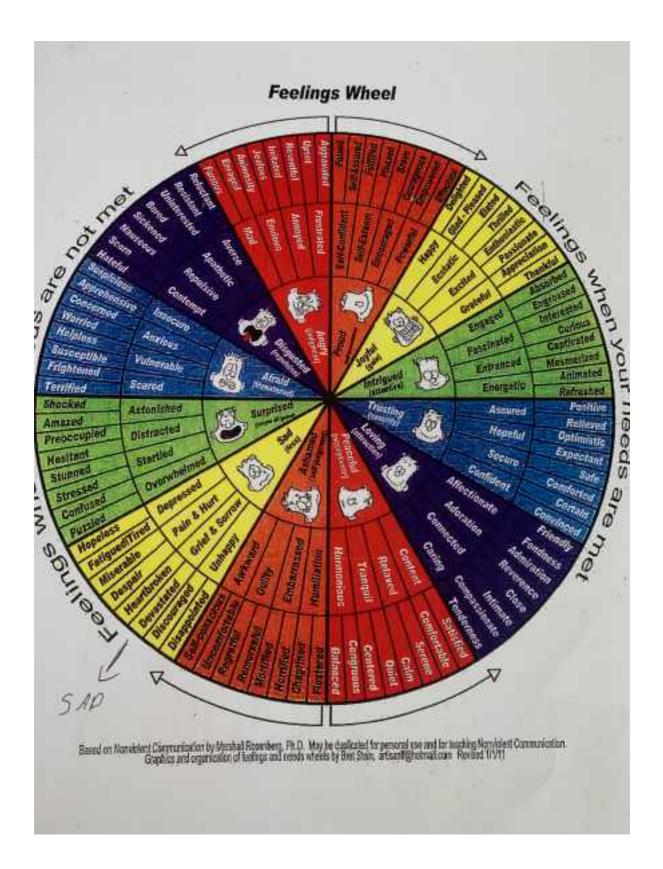
While processing I exposed clean pain as I have not exercised in a long term

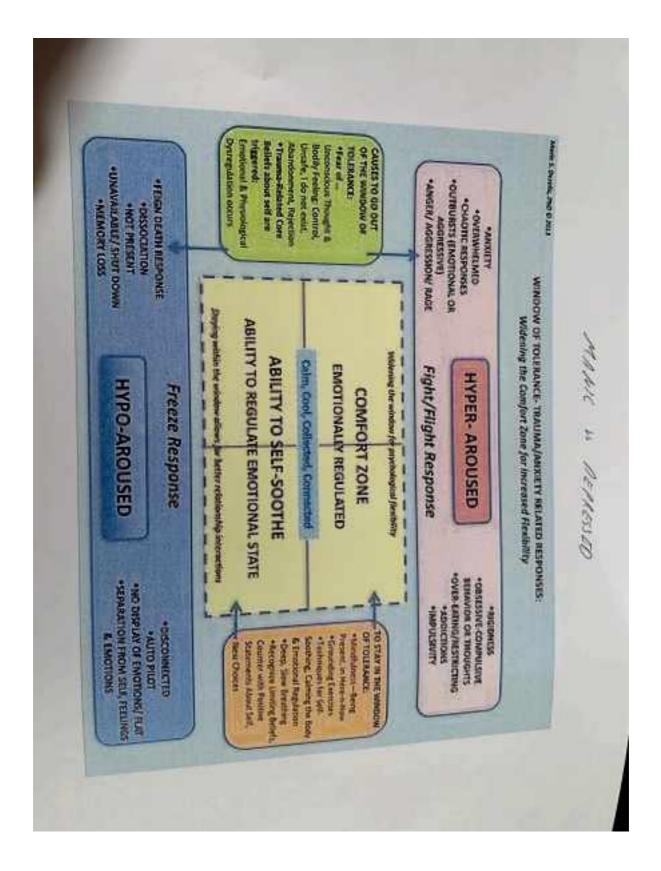
I am fearful of having not being able to stay at fullsville week to maintain the skills I learn sessions through the

Cognitive

Behavioural

Therapy PARTICIPANT MANUAL - ADDICTIONS INPATIENT PROGRAM





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HYPER - AROUSED Anger Anxiety Overwhelmed Chaotic responses

Outbursts - emotional or aggressive Anger, aggression / rage Rigidity Obsessive - compulsive behavior or thoughts Over acting Repeating Addictions Impulsivity Fear of FREEZE RESPONSE Numbness Dissociation Low energy Shutdown Separation from self STAY IN THE TOLERANCE WINDOW Mindfulness Grounding Self-regulation Seeking safety Body awareness Breath New choices Comfort zone Go out Comfort zone Trauma related core beliefs are triggered