

Group Recommendations

1. Review current IDDT caseload to assess number of consumers in each stage of treatment to assist with planning a group service menu.
2. Re-evaluate each consumer for group treatment. Strategize methods to approach consumers about attending group (i.e., trial basis, benefits of group in promoting recovery, many consumers find it helpful, use clinical relationship to your advantage).
3. Consider implementing one persuasion group, one active treatment/relapse prevention group and one non-staged group.
4. Establish a time frame to start each group and a responsible party to ensure it happens.
5. Evaluate consumers being served in the current group offered for stage of treatment. Then modify the content as needed to reflect the actual consumers represented. Ensure all future referrals to that group match the group stage.
6. Consider a stress management group as the non-stage group. Many consumers across a range of stages are open to stress management. This provides a mixing of consumers that can be helpful down the road as consumers move from persuasion to active treatment. Since they may have met others in the new group due to participation in the non-stage group.
7. Consider developing a symptom/skill worksheet that is completed by consumers during check in for each group. This will provide the facilitator and consumer with valuable information about the consumer's status and assist in providing content for the group.
8. Continue to attend trainings on group work. Enhance facilitator skills that promote group process.
9. Consider devoting a period of each team meeting or supervision session to reviewing groups (i.e., skill development, managing group process, etc). Highlight successes.
10. Ask consumer's for their feedback about group, what they would like to work on, what they like about group, what they would like to improve about group. Then incorporate their feedback into current groups, to the extent possible.

Tips:

1. Consider single facilitation while building a group census.
2. Don't give up too quickly. If no one shows for group have other billable activity planned.
3. If one consumer shows up for group, meet with client, bill as individual session (make sure ISP includes individual and group work).

4. Have someone or you complete calls to consumers the day before reminding them of group. This does increase follow through.
5. When consumers attend group validate them for coming to group let them know you are glad to see them.
6. Consider all available options to assist consumers with transportation needs.
7. Building a persuasion group is important as it will be the pool of consumers you draw from eventually for active treatment groups.
8. Reproducible educational handouts for consumer/family may also be found in the IMR Toolkit. It can be viewed and downloaded at:
<http://mentalhealth.samhsa.gov/cmhs/communitysupport/toolkits/illness/>

Top 10 Recommended Group Curricula

1. Daley, D. C. (1994). Dual Diagnosis Workbook, Revised Edition. Independence, MO: Herald House/Independence Press.
2. Daley, D. C. & Thase, M. E. (1994). Dual Disorders Recovery Counseling, Revised Edition. Independence, MO: Herald House/Independence Press.
3. Roberts, L. J., Shaner, A. & Eckman, T. A. (1999). Overcoming Addictions: Skills Training for People with Schizophrenia. New York: W. W. Norton & Company.
4. Daley, D. C. & Marlatt, G. A. (1997). Managing Your Drug or Alcohol Problem: Client Workbook. The Psychological Corporation.
5. Velasquez, M. M., Maurer, G. G., Crouch, C. & DiClemente, C. C. (2001). Group Treatment for Substance Abuse: A Stages of Change Therapy Manual. New York: The Guilford Press.
6. Mark, M., Olesen, J. & Fallon, J. (1993). Groups: A Manual for Chemical Dependency and Psychiatric Treatment. Sante Fe, NM: CL Productions.
7. Bellack, A.S., Mueser, K.T., Gingerich, S. & Agresta, J. (2004). Social Skills Training for Schizophrenia: A Step-by-Step Guide, 2nd Edition. New York: The Guilford Press.
8. Davis, M., Eshelman, E. R., & McKay, M. (2000). The Relaxation and Stress Reduction Workbook, 5th Edition. Oakland: New Harbinger.
9. Fleming, M. (1995). Group Activities: For Adults at Risk for Chemical Dependence. Minneapolis, MN: Johnson Institute.
10. Precin, P. (1999). Woburn, MA: Living Skills Recovery Workbook. Butterworth-Heinemann.