Session 2: Daily Routine Worksheet

The purpose of this worksheet is to provide participants with the opportunity to relate the content of the course with their work. The following questions can be used as a personal review of the material, as a part of a consultation with other professionals, or a structure for peer or individual supervision. Consider an individual with whom you work, either currently or in the past....

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| 1. | How do they describe their mental health in general? How do they describe their sleep? What are their beliefs about their mental health, and what do they tell themselves? |
| | What time do they wake up in the morning and what do they do? What are their morning rituals? |
| 3. | What types of physical exercise do they get during the day? Do they get outside in the sunshine? What about mental exercise? |

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4. What do they eat and when?

| 5. | List all the substances they use, including legal, illicit and prescribed. |
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| 6. | Which parts of their living space do they use? Do they spend most of their time in one place? Do they use their bedroom for "active" activities while awake? |
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| 7. | What do they do in the 2 hours before bedtime? What are their "wind down" rituals? |
| 8. | What time do they go to sleep? What do they do when if they are unable to fall asleep? |
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| 9. | How do they sleep during the night? Do they describe waking up with a start? Nightmares? What do they do to cope with any sleep problems? |