# Worksheet

Professional Version | US English

# Therapy Blueprint For Obsessive Compulsive Disorder (OCD)





# Description

A therapy blueprint is a CBT tool which summarizes the work a therapist and patient have completed together. Patients can be encouraged to think of it as 'the first session of the rest of your life'. Therapy blueprints are one way to help clients reflect on what they have learned during therapy. They act as a way of promoting resilience by reinforcing what has been learned. Therapy blueprints also act as a form of relapse prevention – by making new knowledge more accessible, clients are more able to cope effectively with future setbacks.

The structure of a good therapy blueprint mirrors the process of therapy itself. Suggested areas for exploration include:

- Assessment. What were the problems? How did they develop?
- Formulation. What kept the problems going? Why did they not get better naturally? Were there any strategies with unintended consequences?
- **Treatment.** What new knowledge and skills did you develop? What techniques were practiced?
- **Reflection on progress.** What can you do now? Looking back (past goals), looking forward (current goals).
- Relapse prevention. What obstacles and setbacks can you forsee? How will you cope? What helpful strategies might you implement?

Another helpful way of conceptualizing the therapy blueprint is to think of how it represents the past (the problems, what maintained them), the present (the therapy itself, new knowledge learned and skills developed), and the future (goals, plans, and strategies to manage setbacks). Therapists will find it helpful to introduce the therapy blueprint prior to the final session, and as early as the client is willing. The *Therapy Blueprint For OCD* is a relapse prevention worksheet tailored for clients who are completing a course of therapy for obsessive compulsive disorder (OCD). It encourages a particular focus on client's responses to intrusive thoughts, images, urges, and doubts.

# Instructions

#### **Suggested Introduction**

A therapy blueprint is a helpful way to look back over therapy, reflect on what you have learned, and think about what has been important to you. We want to catch it now while it's fresh in your mind. People often find that a therapy blueprint is a helpful reminder, once therapy is over, of things that they know are helpful for them. It's also a helpful way for us to reflect on what skills it might be important for you to keep practicing, to plan for triggers and things that might be difficult for you, and for us to set some goals for the future.

# References

Wells, A. (1997). *Cognitive therapy of anxiety disorders: A practice manual and conceptual guide*. Hoboken, NJ, US: John Wiley & Sons Inc.

A therapy blueprint is a space for you to reflect on how your difficulties developed, what kept them going, and what you learned during therapy. It can help you to plan how you are going to maintain the gains that you have made, review what warning signs you might need to remain aware of, and remember what you might find helpful should it feel like your difficulties are ever beginning to return.

## The problems

What brought you to therapy? What intrusive thoughts / images / doubts / urges were bothering you?

## What kept them going?

What kept the problems going? What were you doing to cope with your fears? What did you think it said about you that you had these thoughts / images / urges / doubts? Consider: beliefs, compulsions, safety behaviors, avoidance, selective attention.

#### **Knowledge and skills**

What do you know now about intrusive thoughts? What did you learn about OCD that was helpful? What strategies or techniques did you learn? Describe any behavioral experiments that you completed (in session or outside).

#### How I think differently now

Consider some typical situations which used to trigger strong feelings. Compare your thinking patterns before therapy and now: How did you interpret these situations then? What do these events mean to you now?

<b>Intrusion</b> What thoughts / images / urges doubts used to bother you?	How I thought <i>then</i> Before therapy, what did you think it meant when you experienced these thoughts / images / urges / doubts?	How I think <i>now</i> How do you interpret these thoughts / images / urges / doubts now?

### How I do things differently now

Consider some typical situations which used to trigger you and compare your reactions / responses before therapy and now.

	<b>Situation</b> What situations used to trigger a strong response in you?	How I responded <i>then</i> Before therapy, how did you react when situations like this occurred?	How I respond <i>now</i> What do you do if this kind of event happens now?
zpNqi2edn			
r ID cus_Oq8ED:			
:51:44. Custome			
2023-11-10 at 19			
Downloaded by Paul Green on 2023-11-10 at 19:51:44. Customer ID cus_Oq8EDzpNqi2edn			
Downloaded by	LPSYCHOLOGY <b>TO&amp;LS</b>	e	Copyright © 2020 Psychology Tools Limited. All rights reserved.

## How far I have come & my goals for the future

What have you achieved so far? How are you going to build on your achievements?

## Setbacks and obstacles

What could cause a setback and how would you deal with it? What obstacles do you anticipate might be challenging? What would you do if your difficulties came back in a way that meant you were struggling?

#### Message to my future self

If you could send a message to your future self (something you would not want to forget) what would it be?

A therapy blueprint is a space for you to reflect on how your difficulties developed, what kept them going, and what you learned during therapy. It can help you to plan how you are going to maintain the gains that you have made, review what warning signs you might need to remain aware of, and remember what you might find helpful should it feel like your difficulties are ever beginning to return.

# The problems

What brought you to therapy? What intrusive thoughts / images / doubts / urges were bothering you?

After my baby was born I started to worry that I might cause harm to her — this was making me very anxious.

I kept having images of me throwing my baby from the balcony or suffocating her by accident.

I kept doubting myself - I couldn't be 100% sure that I wouldn't hurt my baby.

## What kept them going?

What kept the problems going? What were you doing to cope with your fears? What did you think it said about you that you had these thoughts / images / urges / doubts? Consider: beliefs, compulsions, safety behaviors, avoidance, selective attention

I thought that it meant that I was a terrible mother and couldn't be trusted to be alone with her.

I tried to keep us safe by never being alone with her, and by avoiding heights / cushions / stairs.

If I couldn't avoid then I would pray in my mind or ask my husband for reassurance.

#### Knowledge and skills

What do you know now about intrusive thoughts? What did you learn about OCD that was helpful? What strategies or techniques did you learn? Describe any behavioral experiments that you completed (in session or outside).

I know that intrusive thoughts are just thoughts — everybody has them, and it doesn't mean that I'm going to act on them. I was only having them because I care about being a good Mum so much.

What I was doing was actually keeping the fear going. What I needed to do was pay less attention to the thoughts and to stop avoiding and let go of my safety behaviors.

One experiment I remember was when my therapist made me listen to a 'loop tape' of my worst fears while I held the baby alone.

PSYCHOLOGY**TO&LS**®

# How I think differently now

Consider some typical situations which used to trigger strong feelings. Compare your thinking patterns before therapy and now: How did you interpret these situations then? What do these events mean to you now?

<b>Intrusion</b> What thoughts / images / urges doubts used to bother you?	How I thought <i>then</i> Before therapy, what did you think it meant when you experienced these thoughts / images / urges / doubts?	How I think now How do you interpret these thoughts / images / urges / doubts now?
Image of me suffocating my baby while breastfeeding.	I will lose control and do it. I can't be trusted to be alone with her.	It was just an unpleasant thought — one of my worst fears. I love her and would never harm her.
Image of throwing baby from a balcony.	Having this thought means that I will do it (thought-action fusion). I've got to stop that from happening.	I can have thoughts like this without acting on them. I have these thoughts because I love her so much.

How I do things differently now Consider some typical situations which used to trigger you and compare your reactions / responses before therapy and now.				
<b>Situation</b> What situations used to trigger a strong response in you?	How I responded <i>then</i> Before therapy, how did you react when situations like this occurred?	How I respond <i>now</i> What do you do if this kind of event happens now?		
Bath time.	I would make my husband do the baby's bathtime. I couldn't trust myself.	I do the baby's bathtime on my own now. Sometimes thoughts come up but they don't bother me now and I know not to give them any credence.		
Having to be close to my baby.	I would pray in my mind asking God to make the terrible thing not happen.	It doesn't really cross my mind any more. I enjoy being close with her now.		

How far I have come & my goals for the future

What have you achieved so far? How are you going to build on your achievements?

I can be close with my baby!

I don't seek reassurance or pray out of fear.

I practice mindfulness and remind myself that thoughts are just thoughts.

# Setbacks and obstacles

What could cause a setback and how would you deal with it? What obstacles do you anticipate might be challenging? What would you do if your difficulties came back in a way that meant you were struggling?

Having another baby could cause a setback - I do worry sometimes that it could get that bad again.

If my baby did really come to harm and I started doubting that it was my fault.

I would go and see my therapist again for some booster sessions.

#### Message to my future self

If you could send a message to your future self (something you would not want to forget) what would it be?

You're a good mother. The OCD only developed because you care so much.

OCD is like an over-cautious friend, it's looking out for you but tries too hard.

Remember, you've got the skill to work with it effectively if it ever comes back.

Don't forget to treat yourself with the same care that you give to everyone around you.

# About us

Psychology Tools develops and publishes evidence-based psychotherapy resources. We support mental health professionals to deliver effective therapy, whatever their theoretical orientation or level of experience.

Our digital library encompasses information handouts, worksheets, workbooks, exercises, guides, and audio skillsdevelopment resources.

Our tools are flexible enough to be used both in-session and between-session, and during all stages of assessment, formulation, and intervention. Written by highly qualified clinicians and academics, materials are available in digital and printable formats across a wide range of languages.



#### **Resource details**

Title: Therapy Blueprint For Obsessive Compulsive Disorder (OCD) Type: Worksheet Language: English (US) Translated title: Therapy Blueprint For Obsessive Compulsive Disorder (OCD) URL: https://www.psychologytools.com/resource/therapy-blueprint-for-ocd/ Resource format: Professional Version: 20230721 Last updated by: EB

#### **Terms & conditions**

This resource may be used by licensed members of Psychology Tools and their clients. Resources must be used in accordance with our terms and conditions which can be found at: https://www.psychologytools.com/terms-and-conditions/

#### Disclaimer

Your use of this resource is not intended to be, and should not be relied on, as a substitute for professional medical advice, diagnosis, or treatment. If you are suffering from any mental health issues we recommend that you seek formal medical advice before using these resources. We make no warranties that this information is correct, complete, reliable or suitable for any purpose. As a professional user, you should work within the bounds of your own competencies, using your own skill and knowledge, and therefore the resources should be used to support good practice, not to replace it.

#### Copyright

Unless otherwise stated, this resource is Copyright © 2023 Psychology Tools Limited. All rights reserved.