**THINKING OR COGNITIVE LIFE SKILLS**

[**www.healthcity.org.uk**](http://www.healthcity.org.uk)

*Find out more from your Counsellor, Therapist and Wellbeing Coach or at www.healthcity.org.uk*

**STARTER PRACTICE LEVEL: THOUGHT RECORD TECHNIQUE FOR AUTOMATIC THOUGHTS, IMAGES AND ASSUMPTIONS**

A Thought Record tool helps you to identify and challenge unhelpful thinking patterns. It involves you recording an event that is causing you distress and breaking down the emotions and thoughts that you are experiencing and then looking for evidence for and against the most prominent or Hot Thought. It is helpful to rate at the start of the exercise and re-rate after completing the exercise to see if there is any reduction in the intensity or distress level of your feelings or how much you still believe in the Hot Thought. For rating and re-rating, use a scale of 1 - 10, where 1 is the lowest and 10 is the highest.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Situation/**  **event/trigger episode.** | **Feelings**  **Emotions –**  **(Rate 0 – 10)** | **Unhelpful Thoughts/**  **Images/**  **Assumptions**  **(Rate 0 – 10)** | **Evidence supporting unhelpful Hot Thought** | **Evidence against Hot Thought……………………………** | **Outcome**  ***Alternative approach.*** *The previous steps helped me understand my unhealthy thinking or behaviour. Now here are my better approaches:* |
| *What happened?*  *Where? When?*  *Who with? How?* | *What emotion did I feel at that time?*  *What else?*  *How intense was it?*    ***Body sensations....***  *What did I notice in my body?*  *Where did I feel it?*  **..........** | *What was the initial or first thought that crossed or went through my mind?*  *What disturbed me?*  *What am I responding to?*  *What ‘button’ is this pressing for me? What would be the worst thing about that, or that could happen?*  **HOT THOUGHT**  **(most prominent with highest score. Rate 0-10).........** | *What are the facts that prove my Hot Thought is totally true?* | *What are the facts that my Hot Thought is or could be wrong?*  *Look at the evidence. Look at past experiences. What strengths do I bring to this situation?*  *.* | *a) Choose and write down a statement that you can repeat to yourself that reflects your healthier and positive automatic thought, images, assumptions and affirmation*.  **b) Action plan.**  *What Action Points am I taking away to reflect on and put into practise (bring to live) in at least one new personal,**relational or workplace situation?*   * *What will be most helpful and more effective for me that I could do differently and act more wisely?* * *What will the consequences be?*   *c) What can I do if the situation that led to the unhelpful thinking arises again? The plan could include how to prepare for the situation, what to do in the situation, and what to do if I fall back into my old habits.*  ***d) Improvement****. Do I feel slightly better or more optimistic? This step reinforces the idea that if I change my thinking, I will change my mood.*  ***e) What lessons/learning am I taking away from this exercise?***  **f) Re-rate emotions.**  *What am I feeling now? (0-10)*  **g) *Re-rate the Hot Thought.*** *How much do I believe in my Hot Thought**now? (0-10)*  ***h) SMART DEADLINE.*** *To feedback to myself and to anyone else (e.g. therapist if any) by (date and time) on my completed Action Points, the feelings of doing, and the lessons of doing the Action Points.* |
|  |

**YOU CAN USE THE GUIDELINES AND ADDITIONAL TECHNIQUES FOR ADDRESSING UNHELPFUL THINKING, IMAGES AND BELIEFS. COPY AVAILABLE AT WWW.HEALTHCITY.ORG.UK**