

3-day Mentalization-Based Treatment for Anti-Social Personality Disorder Basic Training

Timetable & Checklist

This on-line training follows a 2+1 format. There are two initial introductory days followed by 'homework and practice' in the workplace. This is followed by a further training day. All participants are expected to attend all days and to have completed their work practice.

Participants are expected to be treating a patient or patients in their practice, individually or in group, who shows antisocial and/or narcissistic functioning.

Training days will run between 10.00 – 16.00 on each day. There will be a number of additional brief breaks during the day if necessary for enhancing on-line concentration.

Please follow the checklist prior to each live training day to complete the pre-course tasks.

Pre-course (Self-guided training)

Pre-course Task	*tick the comment box when completed
Read: MBT-ASPD Manual	
Video: What is mentalizing – Peter Fonagy (11 mins)	
Video Lecture: Mentalizing, Violence, and Psychotherapy for Anti- Social Personality Disorder – Anthony Bateman (60 mins)	
MBT- ASPD Introductory Leaflets for patients – familiarise yourself with the examples.	
John – Clinical Material – Essential to read prior to Day 1 and have access to on Day 1	
Suggested reading (provided on Blackboard) – make your own selection and return to the reading when you have time.	
Please WRITE DOWN your questions and points for discussion from the video and reading. POST them in the DISCUSSION GROUP Section on Blackboard.	

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Day 1 (LIVE)

10:00	Intro and outline of training
10:10	Introductions
10:20	Small Group Exercise

- a) Deciding on practicalities and thinking about working on-line as a small group
- b) Make a rota for feedback from group
- c) Establishing group values for the training -What values can you agree for your group work

10:35	Large group discussion
10:45	Clinical Theory – Outline and general discussion using questions and comments from the Discussion Group posts.
11:10	Break

Module 1

11:30	Clinical Theory - What is Mentalizing? Mentalizing and Antisocial Personality Disorder; Shame; Attachment.
12.00	Translating theory into practice – Therapeutic Challenges
12.10	Not knowing stance and Mentalizing Process
12:20	Illustration: Role play/Video of Not knowing stance
	Role Play in small groups of Not Knowing stance and Mentalizing Process

Role Play (based on real life experience of member of small group). One member of the group tells a story about something that happened recently e.g. an everyday activity like going shopping, deciding to take the MBT training

OR

Role play of clinical experience of participant e.g. patient states that they have been involved in a fight.

<u>Observers:</u> identify questions that promote mentalizing and questions that elicit narrative. Distinguish factual/descriptive/mental state questions.

12:45	Discussion
13:00	LUNCH

Module 2

14.00 Structure of MBT and MBT-Introductory Grou	ц
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14.15 Small group

Role play – 5 minutes for each

- a) Talk/illustrate/enact to a patient about what mentalizing is
- b) Talk/illustrate/enact to a patient about what non-mentalizing is. Discuss your attempts.

14.30	Feedback	from	all	small	groups.

- 14.40 Formulation and Risk Management/Safety Planning
- 14.45 Small Group

Formulation

Consider the clinical information you have already read about John. Write/Summarise a formulation. Use headings:

Mentalizing Profile

Low Mentalizing Modes

Relational Profile/Attachment Styles

Problems of Treatment

Think about how you would talk to him about it.

15.05	Return to plenary and then Break
15.20	Feedback on formulation from small groups
15.40	Summary of low mentalizing modes and general discussion
15.55	Homework agreement
16.00	End

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Homework for Day 2	*tick the comment box when completed
Read and Rate the Group Transcript (Available on Blackboard).	

Day 2 (LIVE)

10.00 Summary of Day 1 and Orientation to Day 2 and Questions from Day 1

10.10 Discussion of Group Transcript and non-mentalizing modes

Non-Mentalizing Modes – Psychic Equivalence/Teleological Mode. Clinical Intervention

10.30 Large Group - Video and Discussion - Clinician late for session

10.45 Small group

Role play: Your patient has got into an argument with his probation officer and may be recalled to prison

11.05	Report on small group and discussion
11.15	Break
11.35	Non-Mentalizing Modes – Pretend Mode
11.40	Video of pretend mode and discussion
11.55	Affect Recognition and Affect Exploration. Application to working with
	episodes of Violence and other risk behaviours

12.10 Small Group

Role play: Client informs you about a violent episode or destructive action when drinking OR

Client talks about taking drugs again

- 12.25 Feedback from small groups
- 12.40 Affect Focus; Relational and Counter-relational Mentalizing

13.00 LUNCH

14.00 Plenary Group Role Play by Trainer and Volunteer

Role Play: Client expresses himself aggressively and assertively bodily and in his talk. He sees you as 'authority' and he hates authority. Clinician feels intimidated.

OR

Client complains that he is treated differently from others in the hostel/Unit. He is disadvantaged and expresses that it is unfair and you should do something about it.

14.10 Discussion

14.15 MBT-ASPD Groups

Setting up the group - Values. Formulation and Relational Passport. Code of Conduct

14.30 Specific Interventions – Affect recognition and Turn-taking in exploration.

14.45 Common Clinical Problems - outline

Refer to the Group Transcript rating -what clinical problems are present?

14.55 Break

15.10 Discussion of Common Clinical Problems

15.35 Work tasks for DAY 3 – Small Groups will decide who does what in terms

of tasks - See Homework for DAY 3

Small group meeting - decide on Clinical Scenario for Presentation on DAY 3

Choose from Clinical Problems of Engagement Process; Ineffective Mentalizing Modes; Relational/Counter-relational Mentalizing.

16.00 END

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	Comment*
Homework for Day 3	*tick the comment box when completed
All Doutisinants	
ALL Participants	
1. Continue Reading	
2. Introduce a patient to one or more MBT-I topics	
3. Write your own MBT-I leaflet – choose one topic	
4. Write a mentalizing formulation and discuss this with the patient	
Using the Adherence and Competence check list template provided:	
5. Assess your use of the Not-Knowing stance for exploration	
6. Practice managing non-mentalizing modes – write down a clinical example of a non-mentalizing mode in a session and assess how you managed it	
7. Assess your exploration of affective narratives	
8. Consider your use of relational and counter-relational mentalizing.	
Appointee from Small Group	
Sends in Clinical Dilemma form for DAY 3.	

Day 3 (LIVE)

10.00	Introduction and Orientation to Day
10.10	Review of Clinical Dilemma forms
10.15	Small group

Discuss your MBT practice and identify one significant discussion point from your clinical work. Appoint a feedback presenter.

10.35	Feedback from small groups
10.45	Identification of additional clinical dilemmas
10.55	Clinical Intervention 1 – Presentation/Outline of Clinical Scenario
11.10	BREAK

11.30 Presenter summary of tasks. Large group discussion of the clinical problem.

11.35 Small Group

Role play the clinical scenario and discuss the clinical interventions you would use.

11.50 Fe	edback from	small di	rouns and	d Role	nlav in	large group

12.10 Clinical Intervention 2 – Presentation/Outline of Clinical Scenario

12.20 Small Group

Role play the clinical scenario and discuss the clinical interventions you would use.

13.00 LUNCH

14.00 Clinical Intervention 3 – Presentation/Outline of Clinical Scenario

14.10 Small Group

Role play the clinical scenario and discuss the clinical interventions you would use.

14.25	Feedback from	small groups	and Role	plav in	large group

14.40 Clinical Intervention 4 – Presentation/Outline of Clinical Scenario/Summary

14.10 Small Group

Role play the clinical scenario and discuss the clinical interventions you would use.

14.25	Feedback from	small groups ar	nd Role play	in large group
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14.40 Clinical Intervention 5 - Presentation/Outline of Clinical Scenario/Summary

14.50 Small Group

Role play the clinical scenario and discuss the clinical interventions you would use.

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15.20 Feedback from small groups and Role play in large group

15.40 Recapitulation and General Discussion

16.00 END