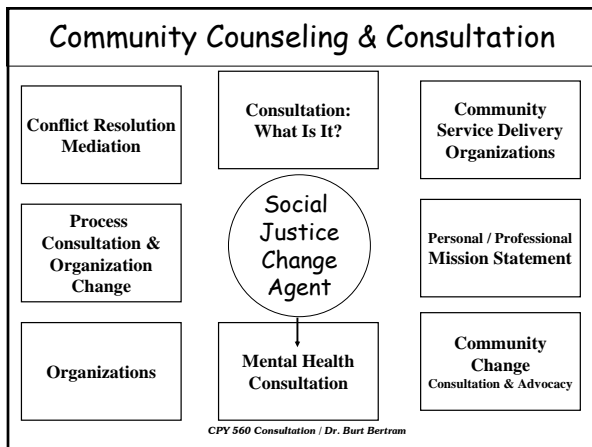


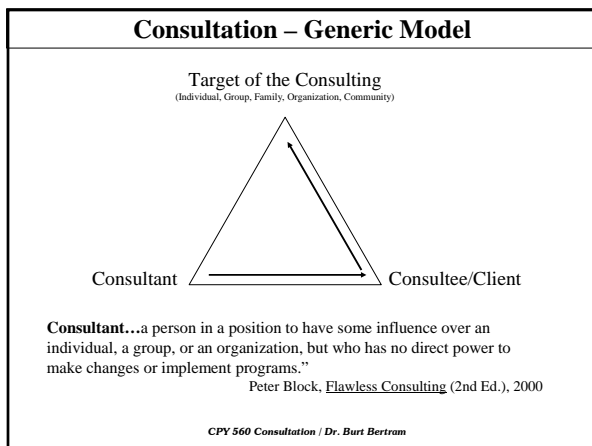
**MENTAL HEALTH
CONSULTATION**

Caplan Model
Clinical Supervision
Behavioral Consultation
Coaching

Class #4

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Consultation Assumptions

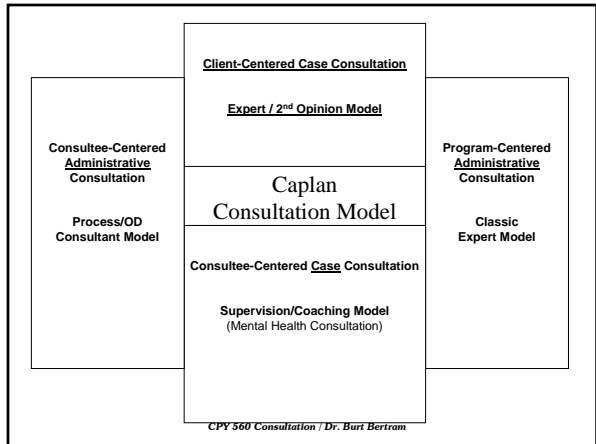
1. Consultation is a Problem Solving & Educational process
2. Consultation is Triadic (Consultant, Consultee, Client)
3. Consultation is Voluntary – the Consultee asks for help
4. Consultation is Collaborative – Consultant/Consultee = Peers
5. Consultation is Temporary
6. Consultation is focused on Work-Related Problems (broadly defined)
7. Consultation seeks to help both Consultee and Client
8. The Consultant has no power over the Consultee’s actions
9. The Consultant may or may not have direct contact with the Client
10. The Consultant works with the entire person of the Consultee – primarily in terms of increasing effectiveness with the target Client.

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Generic Model of Consultation

<p>Stage One</p> <ul style="list-style-type: none"> • Entry • Initial Meeting • Define Desired Outcome • Contracting • Physical/Psychological Entry into the System <p>Stage Two</p> <ul style="list-style-type: none"> • Diagnosis • Gathering Information • Defining the Problem • Setting Goals • Generating Possible Interventions 	<p>Stage Three: Intervention</p> <ul style="list-style-type: none"> • Choosing the Right Intervention • Formulate a Plan • Implement the Plan • Evaluate the Plan <p>Stage Four</p> <ul style="list-style-type: none"> • Disengagement • Evaluating the Consultation Process • Planning for Post-Consultation • Reducing Involvement/Following-Up • Termination
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Caplan Model - CONSULTATION

2nd Opinion Model

Client-Centered Case Consultation
(Expert / Specialist Consultation)

Consultant functions as a specialist who assesses the client, arrives at a diagnosis, and makes recommendations concerning how the consultee might modify his or her dealing with the client.

- **Consultee:** Mental Health Professional, Teacher, Medical, Clergy, Parent, Adult Child
- **Target:** Efforts are directed to the "Case" (client, student, child, parent, employee, etc.)

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Caplan Model - CONSULTATION

Supervision or Coaching Model

Consultee-Centered Case Consultation
(Supervision/Coaching – Mental Health Consultation)

Consultation is concerned with difficulties a consultee encounters with a particular client for whom he or she has responsibility – the difficulties spring from shortcomings in the consultee's professional functioning.

- **Consultee:** Mental Health Professional, Teacher, Medical, Clergy, Parent, Adult Child
- **Target:** Efforts are directed to the consultee to address
 - Lack of Knowledge
 - Lack of Skill
 - Lack of Confidence
 - Lack of Objectivity
 - Theme Interference

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Caplan Model - CONSULTATION

Classic Expert Model

Program-Centered Administrative Consultation
(Expert/Specialists)

Consultant is called in to study a problem and provide a set of recommendations for dealing with the problem.

- **Consultee:** CEO, Administrator, Manager, Supervisor, Team Leader, Etc.
- **Target:** Efforts are directed to the administrative functioning of the organization or to a larger systemic context (community consultation)

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Caplan Model - CONSULTATION

Process/OD Consultant Model

Consultee-Centered Administrative Consultation
(Process/OD Consultant)

Goal is to improve the professional functioning of one or more members of an administrative, executive, or managerial staff/team. Consultant moves freely throughout the organization – takes active role in identifying organizational problems and recommending and/or initiating activities to address the problems.

- **Consultee:** Senior Leadership and/or Organization
- **Target:** Efforts are directed at improved organizational functioning through leadership competence improvements

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Consultee-Centered Administrative Consultation
(Process/OD Consultant)

Goal is to improve the professional functioning of one or more members of an administrative or leadership staff/team. Consultant moves freely throughout the organization – takes active role in identifying organizational problems and recommending and/or initiating activities to address the problems.

- **Consultee:** Senior Leadership / Organization
- **Target:** Efforts are directed at improved organizational functioning through leadership competence improvements

Client-Centered Case Consultation
(Expert 2nd Opinion)

Consultant functions as a specialist who assesses the client, arrives at a diagnosis, and makes recommendations concerning how the consultee might modify his or her dealing with the client.

- **Consultee:** Mental Health Professional, Teacher, Medical, Clergy, Parent, Adult Child
- **Target:** Efforts are directed to the "Case" (client, student, child, parent, employee, etc.)

Program-Centered Administrative Consultation
(Experts/Specialists)

Consultant is called in to study a problem and provide a set of recommendations for dealing with the problem.

- **Consultee:** CEO, Administrator, Manager, Supervisor, Team Leader, Etc.
- **Target:** Efforts are directed to the Admin functioning or to a larger system context (community consultation)

Caplan Consultation Model

Consultee-Centered Case Consultation
(Mental Health / Human Service Consultation)

Consultation is concerned with difficulties a consultee encounters with a particular client for whom he or she has responsibility – the difficulties spring from shortcomings in the consultee's professional functioning.

- **Consultee:** Mental Health Professional, Teacher, Medical, Clergy, Parent, Adult Child
- **Target:** Efforts are directed to the consultee to address
 - Lack of Knowledge
 - Lack of Skill
 - Lack of Confidence
 - Lack of Objectivity
 - Theme Interference

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Mental Health / Psychological Consultation

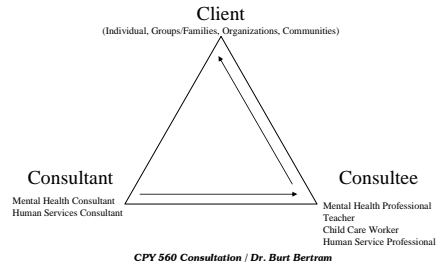
Caplan
Consultee-Centered Case Consultation
(Supervision & Coaching Model)

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What is Mental Health Consultation?

Mental Health Consultation - A process of interaction between two professional persons – the consultant, who is a specialist, and the consultee, who invokes the consultant's help in regard to a current work problem with which he (or she) is having difficulty and which he (or she) has decided is within the other's area of specialized competence."

Gerald Caplan (1970). *The Theory and Practice of Mental Health Consultation*, p.19.



Mental Health / Psychological Consultation

- "Psychological consultation involves a broad helping approach in which qualified psychological consultants help consultees (1) resolve work-related issues pertaining to individuals, clients, or programs that they are responsible for, (2) become active agents in achieving solutions to problems, or (3) strengthen consultees' work-related competencies to address similar issues in the future."

Wallace, W.A., & Hall, D.L. (1996). *Psychological consultation: Perspectives and applications*. Pacific Grove, CA: Brooks/Cole.

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Mental Health Consultation

Brown, Pryzwansky and Schulte (2001, p.4)

Updated Caplan's definition of mental health consultation. Their definition is a reasonable attempt to be inclusive of the diversity of opinions within the field. Definition includes:

- Consultation is initiated by either the consultee or the consultant.
- Relationship characterized by authentic communication.
- Consultees may be professionals or non-professionals.
- Provides direct services to consultees; it assists them to develop coping skills that ultimately make them independent of the consultant.
- Is triadic in that it provides indirect services to third parties (clients).
- Types of problems considered are work related when the concept of work is broadly conceived.
- Consultant's role varies with consultee's needs.
- Locus of consultant may be internal or external.
- All communication between consultant and consultee is confidential.

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Clinical Supervision

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Clinical Supervision

Bernard, J. M., & Goodyear, (1998). Fundamentals of clinical supervision. Boston: Allyn & Bacon.

An intervention provided by a more senior member of a profession to a more junior member or members of that same profession. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional function of the more junior person(s), monitoring the quality of professional services offered to the clients) she, he, or they see(s), and serving as a gatekeeper of those who are to enter the particular profession. (p. 6)

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Clinical Supervision

Loganbill, C., Hardy, E., & Delworth, U. (1982). Supervision: A conceptual model. The Counseling Psychologist, 10, 3-42.

An intensive, interpersonally focused, one-to-one relationship in which one person is designated to facilitate the development of therapeutic competence in the other person. Also referred to as the "master-apprentice" approach and one in which the relationship is central. (p. 4)

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Clinical Supervision

Florida Statute Chapter 491
Rules 64B4-2.002 Definition of Supervision

“Supervision is the relationship between the qualified supervisor and intern that promotes the development of responsibility, skills, knowledge, attitudes and adherence to ethical, legal and regulatory standards in the practice of clinical social work, marriage and family therapy and mental healthy counseling. Supervision is face-to-face contact between an intern and a supervisor during which the intern apprises the supervisor of the diagnosis and treatment of each client, client cases are discussed, the supervisor provides the intern with oversight and guidance in diagnosing, treating and dealing with clients, and the supervisor evaluates the intern’s performance.”

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Clinical Supervision – Initial Session Checklist

Adapted from Haworth Press Article
Prest, L., Schindeler Zimmerman, T., & Sporakowski, M. (1992).
The initial supervision checklist (ISSC): A guide for MFT supervision process.
The Clinical Supervisor, 10, 117-133.

(To be used by both Supervisor and Supervisee during initial supervision session)

1. Education, Training and Clinical Experience

Inquire about the following characteristics of the supervisee/supervisor

- Educational background
- Training experiences
- Setting(s) number of years
- Theoretical orientation(s)
- Clinical competence with various issues (e.g., ethnicity, gender, substance abuse, alternative lifestyles, abortion, populations, problems, and family forms)
- Sense of mission/purpose in the field of counseling
- Educational plans and professional goals of the supervisee

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Clinical Supervision – Initial Session Checklist

- **Philosophy of Supervision**
Explore supervisee’s / supervisor’s philosophy of the supervision process, including
 - Philosophy of therapy & change
 - Purpose of supervision
- **Previous Supervision Experiences**
In order to assess the range of the supervisee’s competence, discuss the following points:
 - Previous supervision experiences (e.g. format, setting)
 - Strengths and weaknesses as therapist/supervisee (as indicators of developmental level)
 - Supervisee’s competence with stages of therapy process: initial call, intake, joining, middle phase, termination, referral)
 - Level of development in terms of case planning, notes, collateral support and networking
 - Supervisory competence with various issues (e.g. ethnicity, gender, substance abuse, alternative lifestyles, abortion, populations, problems, and family forms)
 - Methods for managing supervisor-supervisee differences

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8. Practical Issues

The supervision process is a contractual one in which the supervisor provides a service to the supervisee/consumer. The following practical consideration should be addressed:

- Fee and arrangements for payment
- Location, schedule, and duration of meetings
- Duration of supervision (e.g., semester, months, years, etc.)
- How will time and fees be split among supervisees
- Format (video, audio, or case presentation: Individual vs. Group Supervision)
- Modality (e.g., experimental techniques, live observation, etc.)
- The role of other supervisee (e.g., spectator, co-supervisor, co-supervisee)
- Supervision session guidelines (e.g., smoking, punctuality, cueing of tapes ahead)
- Process for handling conflicts between members of the supervision group
- Process and responsibility for documenting supervision (e.g., forms, verification)
- Exchange of regular and emergency phone numbers

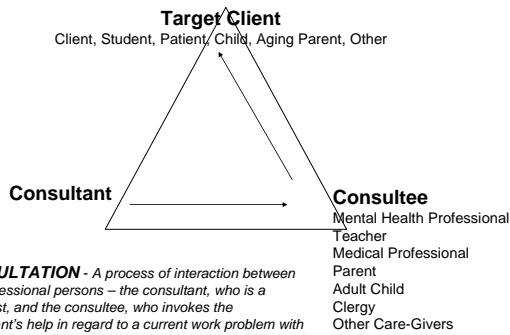
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BEHAVIORAL CONSULTATION

Client-Centered Case Consultation Consultee-Centered Case Consultation

- Mental Health Professionals
- Teachers
- Parents
- Medical Professionals
- Clergy
- Adult Children
- Other Care Givers

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CONSULTATION - A process of interaction between two professional persons – the consultant, who is a specialist, and the consultee, who invokes the consultant's help in regard to a current work problem with which he [or she] is having difficulty and which he [or she] has decided is within the other's area of specialized competence." Caplan, G. (1970) p.19

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Client-Centered Case Consultation	Consultee-Centered Case Consultation
2nd Opinion Model	Supervision or Coaching Model
<p>Consultant functions as a specialist who assesses the "client," arrives at a diagnosis, and makes recommendations concerning how the consultee might modify his or her dealing with the client.</p> <p>Consultee: Mental Health Professional, Teacher, Parent, Medical, Clergy, Adult Child, Other Care-Giver</p> <p>Target: Efforts are directed to the "Target Client" (Client, Student, Child, Patient, Parent, Other)</p>	<p>Consultation is concerned with difficulties a consultee encounters with a particular "client" for whom he or she has responsibility – the difficulties spring from shortcomings in the consultee's professional functioning.</p> <p>Consultee: Mental Health Professional, Teacher, Medical, Clergy, Parent, Adult Child</p> <p>Target: Efforts are directed to the consultee to address</p> <ul style="list-style-type: none"> • Lack of Knowledge • Lack of Skill • Lack of Confidence • Lack of Objectivity (Theme Interference)
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Client-Centered Case Consultation	
2nd Opinion Model	2nd Opinion Expert
<p>Consultant functions as a specialist who assesses the "client," arrives at a diagnosis, and makes recommendations concerning how the consultee might modify his or her dealing with the client.</p> <p>Consultee: Mental Health Professional, Teacher, Parent, Medical, Clergy, Adult Child, Other Care-Giver</p> <p>Target: Efforts are directed to the "Target Client" (Client, Student, Child, Patient, Parent, Other)</p>	<ul style="list-style-type: none"> •Assessment of Target Client •Review of clinical data •Clinical Observation •Opinion given to primary care professional <u>and/or</u> •Care given to Target Client
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Supervision, Consultation or Coaching	Consultee-Centered Case Consultation
<ul style="list-style-type: none"> •Focus on the efforts of the primary care giver •Sometimes access to clinical information (data, records, or observation) •Opinion given to primary care professional rarely is care provided to the Target Client by the consultant •Behavioral Consultation is approach often utilized 	Supervision or Coaching Model
	<p>Consultation is concerned with difficulties a consultee encounters with a particular "client" for whom he or she has responsibility – the difficulties spring from shortcomings in the consultee's professional functioning.</p> <p>Consultee: Mental Health Professional, Teacher, Medical, Clergy, Parent, Adult Child</p> <p>Target: Efforts are directed to the consultee to address</p> <ul style="list-style-type: none"> • Lack of Knowledge • Lack of Skill • Lack of Confidence • Lack of Objectivity (Theme Interference)
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Behavioral Consultation

- 1. Accept the Consultee**
Determine consultee's state of mind – deal with emotion
- 2. Define Collaborative Relationship**
Describe collaborative approach that is basis of consultation
- 3. Invite Consultee to Describe the Issue / Problem**
Solicit – description of target client (physically, temperamentally, socially, intellectually, etc.)
Solicit – specific description of troubling behavior
- 4. Invite Consultee to Describe Background / History of the Problem**
When did the problem begin?
How were things before the problem?
What was occurring in the system (family, classroom, workgroup, community) when the problem began?
- 5. Past Attempts to Solve Problem**
Exactly, what did the Consultee do/say?
Specifically, how did the Client react/respond?
Exactly, what did the Consultee do/say in response?
- 6. Desired Solution/Outcome**
What will things look like if this problem is fixed?
(This will help identify Target Outcome Behaviors)

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- 7. Feedback Loop – Check Communication**
All along the way, summarize/feedback to ensure accuracy
- 8. Collaborative Definition of Problem & Target Behaviors**
Together with the Consultee, agree on the definition of the problem and the target behaviors
- 9. Identify Possible Intervention**
Identify additional data needed
Brainstorm possible strategies
Evaluate strategies
Decide on Intervention
- 10. Set Responsibilities, Time Tables, Resources, Check Points**
- 11. Support / Coach Consultee During Implementation of Intervention**
Identify external resources: books, tapes, videos, etc.
- 12. Evaluate Effectiveness of Intervention**
Adjust as necessary
- 13. Terminate or Identify Additional Interventions**

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Client Centered Case - Behavioral Consultation
Mental Health Professionals, Teachers, Medical Professionals,
Parents, Adult Children, Clergy, Other Care Givers

<p>Identify the Problem</p> <p><u>Collaboratively</u>: Specify objectives to be achieved <u>Describe</u>: Problems in observable terms <u>Identify</u>: Environmental factors that may influence student behavior <u>Establish</u>: Procedure for data-collection</p> <p>Problem Analysis</p> <p><u>Obtain</u>: Baseline data <u>Collaboratively</u>: Define behavior change goals <u>Identify</u>: Sequential reinforcing pattern of behaviors <u>Design</u>: Treatment strategies to change sequential behaviors</p>	<p>Treatment Plan</p> <p><u>Implement</u>: Treatment plan/strategies <u>Continue</u>: Data collection / observation <u>Monitor</u>: Treatment integrity</p> <p>Treatment Evaluation</p> <p><u>Determine</u>: Were treatment goals were met <u>Evaluate</u>: Treatment plan effectiveness <u>Assess</u>: Consultant effectiveness and consultee satisfaction <u>Discuss</u>: Continuation, modification or termination <u>Schedule</u>: Additional meetings or terminate</p>
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COACHING

Life Coach
Business Coach
Leadership Coach
Management Coach
Parent Coach
XXXXX Coach

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Coaching is a process over time...in which the Coach, utilizing a set of helping values, knowledge and skills assists the Coachee to identify and achieve desired goals.

Coaching is based on the belief that given the right circumstances, every person can learn, grow, change and expand his/her personal and/or performance capabilities.

Broadly considered, Coaching focuses on:

- Knowledge / Skill Transfer
- Performance Improvement or Performance Correction
- Career Advancement
- Personal and/or Professional Growth and Development
- Personal and/or Professional Transformation

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INTERNATIONAL COACH FEDERATION

Professional Coaching is an ongoing professional relationship that helps people produce extraordinary results in their lives, careers, businesses or organizations. Through the process of coaching, clients deepen their learning, improve their performance, and enhance their quality of life. In each meeting, the client chooses the focus of conversation, while the coach listens and contributes observations and questions. This interaction creates clarity and moves the client into action. Coaching accelerates the client's progress by providing greater focus and awareness of choice. Coaching concentrates on where clients are now and what they are willing to do to get where they want to be in the future. ICF member coaches recognize that results are a matter of the client's intentions, choices and actions, supported by the coach's efforts and application of the coaching process.

<http://www.coachfederation.org/>

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INTERNATIONAL COACH FEDERATION

The International Coach Federation is the professional association of personal and business coaches that seeks to preserve the integrity of coaching around the globe.

ICF helps people find the coach most suitable for their needs. It supports and fosters development of the coaching profession; has programs to maintain and upgrade the standards of the profession; conducts a certification program that is the gold standard for coaches worldwide; and conducts the world's premier conference and other educational events for coaches.

ICF is the largest non-profit professional association worldwide of personal and business coaches with more than 6000 members and over 145 chapters in 30 countries. We exist to...

Build, Support, and Preserve the Integrity of the Coaching Profession.

We help to **Build** by educating and promoting the coaching profession. Our Coach Referral Service and the PR plan are integral parts of this process.

We **Support** by fostering the community aspect among members. Our annual conference plus regular communications as well as the local chapters are our primary tools in this regard.

To **Preserve the integrity of the coaching profession**, we are actively involved in researching and developing programs in the legal, regulatory, and credentialing areas that will serve coaches and their clients.

It is the immediate goal of the ICF to take our organization to the next level and become a strong (and unified) voice for the coaching profession and provide ever increasing value for its members.

<http://www.coachfederation.org/>

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Coaching Process & Competencies

SET A THE FOUNDATION

- Meeting Ethical Guidelines and Professional Standards
- Establishing the Coaching Agreement

CO-CREATE THE RELATIONSHIP

- Establishing Trust and Intimacy with the Client
- Coaching Presence

COMMUNICATE EFFECTIVELY

- Active Listening
- Ask Powerful Questions
- Direct Communication

FACILITATE LEARNING & BEHAVIORAL RESULTS

- Creating Awareness
- Designing Actions
- Planning and Goal Setting
- Managing Progress and Accountability

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The Power of Coaching

Coaching vs. Training vs. Education

All forms of transmitting learning are important – Coaching brings it all together.

- ✓ EDUCATION focuses on acquiring information and concepts – it is the most theoretical.
- ✓ TRAINING builds on Education by providing simulated application of the information and concepts.
- ✓ COACHING puts it all together...information, concepts, and simulation are applied and supported in the real world, one-on-one with the learner.

Results of Research: Thirty-one managers from a public sector municipal agency underwent a conventional managerial training program. The training was then followed by 8 weeks of one-on-one executive coaching.

• Training Alone	Productivity	↑	22.4%
• Training + Follow-up Coaching	Productivity	↑	88.0%

Public Personnel Management, Winter, 1997

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COACHING	PSYCHOTHERAPY
FOCUS	
Attain specific goals	Relieve pain or symptoms
Create higher functioning	Restore functioning and/or adjustment
Vision: "How can I..."	History: "Why did I..."
Clients wants to move toward goals	Patient wants to move away from pain
CONTEXT	
Learning Model	Medical Model
ORIENTATION	
Outcome & Action	Process and Feelings
Inner and Outer worlds	Inner World
RESPONSIBILITY	
Coach responsible for Process	Therapist responsible for Process
Client responsible for Outcome	Therapist responsible for Outcome
RELATIONSHIP	
Coach & Client Co-creators/Partners	Therapist is Expert / Client is Patient
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