

**Case Consultation Project  
Start a Group Among Your Colleagues!**

**A project such as this can be started at any time on your own**

**Contact me for a free Zoom consultation with any participants towards  
their beginning such a project**

**1) What is the purpose of the project?**

- a. The groups are designed to bring case consultation to clinicians working at a distance from one another with any level of education (BA, MA, MSW, PHD, MD), who are actively doing psychotherapy or counseling
- b. They may generate continuing education hours if organized following qualified CE organizations (APA, NASW, etc.) models
- c. They are intended to bring increased value to the client being presented, increased skills to the clinicians, and clinical supervision skills for use in other settings

**2) Who may participate?**

- a. Behavioral health clinicians that are licensed in any state or are seeking licensure in Arizona are eligible for participation
- b. Only those clinicians actively working with clients will be sought

**3) How is participation initiated?**

- a. My simplistic model was to begin by contacting professional allies 'who are smarter and funnier than I am.' This began because I and one peer agreed to begin regular fixed meetings every other week
- b. There appear to be three essential needs: increasing clinical competence, decreasing isolation among clinicians, and protecting the meeting time from all other demands

**4) What are the fees and cancellation policies?**

- a. There are no fees among participants
- b. They may wish to occasionally hire outside consultants for some training or event that they wish to learn more about

**5) How do the groups function?**

- a. Groups meet twice a month; if face to face, travel and informal lunches take time at the beginning

- b. Informal notes are taken at each meeting: date, names, length of time discussing clinical issues; continuing education settings may demand additional data
- c. If meeting online, a group member initiates the meeting by using an online system that meets the current demands of HIPAA and the technology of group members
- d. Clinicians will 'sign in' by announcing their name and holding their signature up to the camera that is transmitting their image to the group meeting
- e. Groups consist of no more than five clinicians
- f. Identifying information about clients will be changed, obfuscated, omitted to insure client confidentiality is maintained
- g. Clinicians will present their most difficult cases in a common format (<http://psychod.com/CSCasePresentationModel2.pdf>) and will discuss same with the supervisor, one on one
- h. Other group members will be asked after the discussion of their observations or questions
- i. 'Group process' discussions may be occasionally helpful regarding the uncomfortable experiences that arise among participants

**6) Learning Objectives:**

- a. How to present a case for consultation, and how to use skills that transfer into clinical supervision in other settings
- b. How to practice case conceptualization
- c. How to use "process analysis" in case consultation
- d. How to use "skill competency" in case consultation
- e. How to listen: resistance vs. successful intervention
- f. How to identify transference and counter-transference

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