

CASE CONSULTATION PRESENTATIONS

The following are suggestions as to how you might organize your presentations.

1. **PLEASE BEGIN WITH WHAT IT IS THAT YOU WOULD MOST LIKE THE GROUP TO HELP YOU WITH?**
2. **INTRODUCE FAMILY:** Names, ages of parents and target child, sibs, referral source and reason for referral, relevant cultural information (e.g., immigration status, country of origin, class status in country of origin and here, language), medical issues, living situation, support system. Relevant perinatal information (e.g., planned or unplanned pregnancy, perinatal complications, medical problems, developmental problems, special caretaking needs of child, etc.). Any important intergenerational relationships? If home visit, describe home and community, if relevant. Other support services currently involved? Describe parents and describe target child (what are they like?). Any notable stressors (e.g., health, financial, occupational, DV, substance or ETOH abuse, isolation, etc.)? How do they cope? Any other caregivers besides parents?
3. **FAMILY HISTORY:** Any information about parents' families of origin, quality of relationship with their parents, role in family of origin if relevant. Stressors (as above), traumatic stress/events, any community stressors? What are the family's cultural practices and beliefs?
4. **PARENTS' RELATIONSHIP:** Relationship status, quality of relationship, involvement with children, etc. Who is primary caregiver? Level of involvement of partner? Describe their decision-making process, who is family spokesperson. Your countertransference to each parent.
5. **DESCRIBE CHILD:** Temperament, developmental level for age using Touchpoints, ability to engage, ability to be soothed, any regulatory issues, your countertransference (e.g., do you like the child?), diagnostic information using DC 0-3, etc.
6. **PARENTS' RELATIONSHIP WITH CHILD:** Describe what you observe between caregivers and child. How are cues read? How does the parent soothe or redirect the child? How does the parent deal with the emotional states/needs of child? How does the parent meet the child's physical and safety needs? How do they discipline the child? Your concerns? Parents' perception of child? What does this child represent? Meaning of child to family?
7. **WHAT FEELINGS DO YOU HAVE ABOUT WORKING WITH THIS CASE?** Any part of the work been difficult, confusing, uncomfortable, frustrating, irritating, etc.?
8. **PLEASE SHARE SOME VERBATIM (OR AS CLOSE AS YOU CAN GET) NARRATIVE NOTES ABOUT EXCHANGES WITH THE FAMILY OR VIDEO CLIP. THIS CAN BE AN EXTREMELY HELPFUL PART OF YOUR PRESENTATION.** Specifically, give the group a sense of how you have intervened and how the parent and child respond to your interventions. I hope that this can be an opportunity where we can all talk openly about our work, and be able to benefit from the input of clinicians who come from a variety of disciplines, experiences, knowledge, and training.

(Adapted from the Harris Early Mental Health training Program, Oakland, CA)