The new Board of Psychology (BOP) continuing professional development (CPD) requirements include the option of accruing up to 18 hours of **peer consultation** every renewal period (2 years). LACPA can offer peer consultation groups as separate activities or as part of a special interest group (SIG), adding further value to LACPA membership

CONSIDERATIONS for structuring a peer consultation group include:

* **Membership** - Practitioners should feel comfortable with the members of the group, including the members' range of experience and theoretical orientation. Members of a SIG would be familiar with the people and theoretical orientations of the group.
* **Structure** – Formal and informal structures are possible. Some meetings might be about a specific topic, or involve formal de-identified case studies. Other meetings could me more spontaneous, with group members sharing information and anecdotes. Group leadership structure, if any, should also be considered.
* **Content** - Some groups invite members to discuss a range of issues, including personal (stressors. countertransference etc.) or practice management issues, while others restrict discussions to purely clinical matters.
* **Size** - The size of a peer consultation group can influence the dynamics. In small groups, there are more opportunities to contribute to discussions, while larger groups can offer more perspectives and feedback.
* **Schedule** - Groups can meet regularly on an established schedule, while others convene "as needed”, or when a member requests a meeting. The length of the meetings also varies, often in parallel to how often they meet (shorter for more frequent/regular meetings, and longer for less frequent/ad hoc meetings)

CONFIDENTIALITY A primary consideration in any consultation group is confidentiality. We must adhere to APA code of ethics standard 4.06 which states that we should **“disclose information only to the extent necessary to achieve the purposes of the consultation**”. Confidentiality also extends to other information revealed/discussed by members of the consultation group that is of a personal nature.

THERAPIST RESPONSIBILITY It is the responsibility of therapists to make informed decisions about what interventions to use, and to skillfully implement them. Whether to use advice and suggestions from a peer consultation group should be carefully considered, including whether one has sufficient training and experience to employ a therapeutic strategy or technique. Even with sufficient expertise, applying a suggestion from a peer consultation group might result in a negative outcome. This is not the responsibility of the consultation group.

BENEFITS

Participating in professional consultation groups reduces the isolation and burnout potential of our profession, and can provide other benefits, such as:

* getting business tips and advice from therapists in your area
* keeping up-to-date with local mental health resources
* impetus to refine your clinical skills
* developing new therapeutic perspectives
* receiving and providing suggestions on handling difficult therapeutic issues
* receiving feedback on ethical issues
* receiving emotional support from colleagues
* enhancing your referral network and relationships with other professionals

Resources and References

\_\_ American Psychological Association (2002). Ethical principles of psychologists and code of conduct. *American Psychologist, 57*, 1060-1073

\_\_ <https://www.apaservices.org/practice/ce/self-care/peer-consult>

\_\_ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8734135/>

\_\_ <http://tamarasuttle.com/consultation-groups-who-needs-them/>