

DBT To The Bone!:
An Online DBT Consultation Group

Manual Version 2

Michael A. Hartman, LMHC, C-DBT
Paul Kaplan, LCSW

Welcome to DBT To The Bone! , a free online DBT consultation group.

I - Orientation to Consultation: Group Identity and Goals.

DBT or Dialectical Behavior Therapy is a third wave (new) Cognitive Behavior Therapy designed by Marsha M. Linehan to treat Borderline Personality Disorder as well as other related emotional issues and diagnosable disorders identified in the DSM-V (though the treatment was not designed with the DSM-V in mind, since this is the current iteration of the diagnostic tool, we will make reference to it in current times.)

DBT has been shown to have moderate to high treatment efficacy with Mood Disorders, Anxiety Disorders, Trauma Related Disorders, Eating Disorders, and limited success with Obsessive-Compulsive and Related Disorders.

In DBT To The Bone!, we - i.e. the cohort will work together to help individual consultation members apply the DBT model to both traditional clients and settings where DBT is normally recommended as well as theorize and expand through discourse and reference to DBT theory literature and knowledge to help modify DBT to alternative populations. Please reach out to group leader Michael or Paul to discuss any questions if you are uncertain if the DBT model can be applied in your treatment setting (contact information below.)

II - A Message and Introduction From/of the Founders:

DBT To The Bone! was formed by Michael A. Hartman, LMHC, CDBT and Paul Kaplan, LCSW in 2022.

Michael has extensive training in DBT including training by Dr. Lane Peterson, PsyD., LP, DBTC and is providing traditional DBT in both public mental health primarily funded by Medicaid and in the private practice sphere. Michael is starting a private DBT clinic in the New York Metropolitan Area come early 2023. He will also be training clinicians in the public mental health center on how to facilitate a DBT skills group.

Paul was intensively trained in DBT by Charles Swenson, M.D., a renowned DBT practitioner and program director. Paul has provided traditional DBT in public mental health clinics, both individually and in groups with pre-teens, teens, adults, and families, and has gained much experience in running a DBT practice. He is currently expanding his services into private practice where he hopes to apply DBT in an eclectic fashion.

A Message From the Founders:

We are extremely pleased to welcome you into DBT To The Bone! We hope that this consultation group will serve two functions:

Firstly, we will work to facilitate interesting, provoking, and illuminating discussions regarding our clients and the DBT model. We hope this experience will enrich your practice in enhancing your ability and passion to provide DBT and treatment at large.

Secondly, we will strive to make DBT To The Bone! an inclusive and comfortable space for clinicians to meet and process their experiences in session. A saying that defines DBT Consultation is that it is “Therapy for the Therapist.” This is the appropriate way to conceptualize and experience DBT Consultation. Thus it is our job as founders and leaders of this consultation team network to ensure that DBT To The Bone! is a safe place to experience group processes of particularly heavy therapeutic matters. We hope and strive to provide this experience and need your commitment to ethical consultation practice. Please do not be harmful, disrespectful, or put down anyone within the consultation team. Such behavior will not be tolerated for the sake of our members.

We look forward to meeting each of you!

- Paul and Michael

III - Consultation Format and Procedure:

Consultation will last from 30 minutes to one hour depending on the turnout of each session. The maximum number of people to join in a consultation meeting is eight and the minimum is two. Should no one be available for supervision that week or the meeting was planned to be canceled for that week, Consultation will not be held. Should our numbers grow beyond eight, a second cohort will be formed. This cohort addition strategy will be used as the network grows.

We will meet over zoom and highly recommend utilization of video; this recommendation is based on the notion that video conferencing promotes group cohesion. It is understood by both founders that everyone has bad hair days or work from home in PJ days. Please do your best to show up and utilize video zoom functionality. Please also suspend any other tasks you may be doing, especially if working from home. Cooking and other tasks can be distracting to other group members and detracts from our commitment to each other. If anything requires your immediate attention during a consultation meeting, you can always step away from the computer for a moment to take care of these tasks. Eating and drinking is allowed in session with the exception of during the mindfulness activity. We believe these policies to be fair.

Procedure:

DBT To The Bone! Consultation is based on two principles:

- **Adherence to the DBT model and review of model guidelines and practices.**
- **Group process of therapist reactions, responses, and felt experiences of their sessions.**

Consultation will:

- 1 - Start with a 5 minute meetup and starting up period.
 - 2 - Move into a mindfulness activity led by Paul or Michael and eventually other group members.
 - 3 - After the mindfulness activity, a brief reflection on the mindfulness activity's effect will be discussed by the members.
 - 4 - Group members will then go around and give their current "burnout rating" from a scale of 0-5 (0 being no burnout and 5 being fully burned out).
 - 5 - Burnout consultation will then ensue in which group members can choose to discuss the reasons for their burnout rating and other members can provide them with support, problem-solving, validation, etc.
 - 6 - The group leader will then move the group into case consultation. The group leader will ask all group members to present a slice of their caseload from the week, especially clients who are in high need or in crisis. If therapy that week was a lighter one for any group member, they will still present on the even minimal details of some of their clients and perhaps share good news.
 - 7 - Case Discussions with feedback from the group members as to how the case can be viewed from the DBT lens. Simultaneously, processing may occur here and group members can share their feelings about their cases.
 - 8 - After the Case Discussions are done and granted there is more time, group members can present questions and concerns they are having with any aspect of the DBT model that they would like to discuss with the group. This can include modifications needed to be made to the model for an individual's settings. Clarity on a facet of DBT can also be provided that may help the practitioner understand how to apply DBT to their client in a clearer fashion.
- A note:** We would like to provide training in the future on different facets of the DBT model, however for now minor training points within consultation are all that is provided.
- 7- Wrap up period for the clinicians to say goodbye. We reserve the right to hold a second mindfulness session at the end of the group based on the group content.

IV - Who can join DBT To The Bone!?

DBT To The Bone! is primarily for those trained in DBT who would like to integrate DBT into their practice more fully or review their already established DBT clients and treatment regimen. People who are interested in DBT may join but this group alone will not provide you with the comprehensive education or training needed to become a DBT therapist. It can "wet the palate" so to speak.

V - Who do I contact to join DBT To The Bone! Consultation?

You can contact Michael at 718-483-3560 or Michael@HartmanMHC.com or Paul at 914-500-5672 or paulkaplan01@gmail.com to set up an initial discussion to see if our team is right for you.

VI - How and when will I communicate with my fellow consultation team members?

We will be establishing a WhatsApp group chat to discuss case issues in between zoom supervision sessions. This group will be moderated; any confidential information relating to

clients such as names or personal details that might be identifying (Identity Markers) will be deleted. Putting such information on the group chat will put your membership to DBT To The Bone! at risk so please be mindful of what you share. WhatsApp is not HIPPA compliant but adequate for general chatting and review of DBT procedure. Consultation members can freely communicate between themselves as the group is a powerful networking tool.

The invite to said group will be handled by Michael, who's contact information is above.

VII - Contingencies in regards to abuses of the group:

Any harassment of any kind including offensive language, racial slurs, and sexual abuses will be reviewed by Michael and Paul. They have full authority to terminate anyone's access to the group at any time. Any member of the group who has been targeted for any of such conduct, threat of violence, or any other questionable behavior is strongly recommended to come forward to Michael or Paul to discuss the matter. There will be no tolerance for any offense within the group.

As a protection to group cohesion as well, political conversations should be kept to a minimum as we live in a very politically tumultuous time. Policies that effect your treatment, population, or area can be discussed in consultation. This is a policy we will strive to keep as we do not want to create unnecessary alienation or tension within the group. A group member who doesn't respect this rule will be asked to leave DBT To The Bone!

VIII - Finally, when do we meet?

As of the writing of this document, DBT To The Bone! is still in it's startup phase. We are planning to meet at the beginning or the middle of January 2023. Please touch base with Michael or Paul about your availability so we can find consensus among the group members. Please try to be flexible as we are balancing multiple schedules so all interested clinicians can join the group and meetings.