Example Initial Conversations – Consultant and Consultee

The purpose of the questions below is to support an intentional and transparent initial conversation(s) between the consultant and the consultee. This conversation allows the consultant and consultee to determine whether the consultation relationship is an appropriate fit. To facilitate the EMDR consultation process, it is important to identify specific learning objectives, needs and mutual expectations. These questions promote a collaborative dialogue before the consultation process formally begins and may be used in whole or in part to support clarity, alignment and a developmentally informed consultation relationship.

Discuss the Purpose of Consultation

EMDR consultation is essential for ensuring the effectiveness and integrity of EMDR therapy. Through consultation, EMDR therapists receive guidance, support and feedback from experienced consultants in order to enhance knowledge, skills and attitudes. Also, consultants promote the discipline of staying current with the latest research and best practices. Additionally, consultation offers a platform for addressing complex cases, ethical dilemmas and personal challenges that may arise when working with clients, with an emphasis on delivering effective and safe EMDR. Successful EMDR consultation is a collaborative environment where practitioners can share insights, ask questions and engage in ongoing professional development.

Assessing Needs and Setting

- What is your primary reason for seeking consultation at this time? (e.g., completing consultation for basic training, pursuing the EMDRIA Certified Therapist™ credential or working toward the EMDRIA Approved Consultant™ credential)
- If you have successfully completed basic training, please provide documentation (e.g. certificate of completion) for my records. (It is helpful for the consultant to confirm that the consultee has been trained by an EMDRIA Approved Trainer™)

- What is your current work setting, and how many clients are you currently seeing per week?
- How supportive is your current work setting, policy and culture of your use of EMDR therapy, including reprocessing phases? Are other colleagues also practicing EMDR? Some settings (like non-profit organizations) might not allow therapists to use reprocessing phases, or they have very short sessions that will not facilitate the application of EMDR.
- Prior to learning EMDR, which psychotherapy models were you typically utilizing, and how have you integrated those with the AIP model? (if you haven't, we can work on that).
- With which specific aspects of the standard EMDR protocol do you feel most comfortable and proficient?
- What aspects of the eight phases or the three-pronged approach currently feel most difficult or overwhelming for you?
- Would you like to participate in individual and/or group consultation? (if applicable)

Defining Specific Learning Goals and Objectives

- What are your top three specific goals for our consultation sessions?
- What specific clinical populations or complex presentations (e.g., complex PTSD, dissociation or addiction) do you want us to focus during our consultations?

Integrating IDEA and Cultural Humility

- How do you currently integrate cultural humility and an awareness of personal biases into your EMDR practice?
- Are there aspects of your intersection of identities that you want me to be aware of to better facilitate our EMDR consultation process?

Setting Process and Feedback Expectations

- We will establish a written agreement to ensure transparency regarding how progress will be measured and evaluated.
- What are your expectations for receiving constructive feedback, and how do you prefer to navigate "difficult conversations" regarding clinical competence?
- How frequently would you like to meet, and what logistical format (in-person, virtual, individual or group) best supports your learning style?
- What are some learning tools that work best for you? (case examples, metaphors, visual tools, journal/scholarly readings, etc.)