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About the Collaborative Psychiatry Method

The *Collaborative Psychiatry Method* represents a unique approach to psychiatric diagnosis and treatment. It is designed to optimize the accuracy and accountability of the clinical process. To do this it incorporates methods for monitoring progress, multi-disciplinary input to make sure every aspect of the problem is covered, and an ongoing dialogue with the patient, his or her family, and other involved professionals. When using this method, the clinician takes charge of every aspect of the case, coordinating and integrating all the involved people and treatment components.

Guiding instruments generally include the findings of self-report and psychologist administered tests. Every patient's treatment is different and treatment strategies are progressively revised as requirements change. Progress is formally monitored throughout treatment, making sure that treatment goals are being met.

As the practitioner of the *Collaborative Method*, I take on several roles.

First, I take full responsibility for discovering as accurately as possible what is wrong, beginning with the patient's presenting problems and moving, as relevant, to more encompassing issues. This diagnostic process ideally requires the use of psychological or neurological testing, comprised of self-report instruments and as needed more complex tests administered by a psychologist.

Second, in collaboration with the patient, I create a series of treatment strategies for achieving the desired results. Each strategy is then evaluated for efficacy.

Third, I coordinate all involved activities and people, including family members, teachers, medical doctors, and consulting professionals. When I do not personally perform a needed service, I engage appropriate consultants and integrate their findings into the work.

Fourth, in collaboration with the patient, I track results and create regular treatment reports detailing progress and identifying work still to be done. These reports have the additional value of enhancing communication between the patient and myself. Finally, I directly carry out any segments of the treatment that take advantage of my particular skills. Depending on the patient's needs, this segment of the work might include interpersonal treatment, administering medication, behavioral training, or any of several other modalities, including, and often emphasizing, those that involve an integration of medicine and psychiatry.

My role in conducting the *Collaborative Psychiatry Method* does not simply replicate functions typical of a psychotherapist or psychiatrist. In addition to the aspects of the treatment I do myself, it emphasizes the planning and carrying through of what are often complex treatment strategies. These invariably involve collaborating with and coordinating other professionals with special skills.

It is important to note that the *Collaborative Psychiatry Method*, with the practitioner working hand-in-hand with the patient, is often therapeutic in itself due to its organizing, clarifying, and instructional value. Patients benefit as they join in the process of planning and strategizing the treatment process.

Benefits of the Collaborative Psychiatry Method

For Patients and Their Families:

- 1. Improved diagnostic accuracy:** Comprehensive diagnosis and a collaborative approach determine as accurately as possible what underlying issues are combining to cause the patient's symptoms. This effort enables appropriate treatment strategies to be chosen based on objective evidence, rather than a single clinician's opinion.
- 2. Monitoring of progress:** Ongoing monitoring is based on checklists the patient and I keep and compare, self-report instruments the patient completes, psychologist administered tests as required, and repeated second opinions by consultants. This monitoring provides early and ongoing indications of how well treatment is working. The information thus made available is considerably more accurate than that which is typically available in psychiatric and other mental health treatment.
- 3. Accountability and coordination:** As coordinator, I take responsibility for every part of the planning and treatment process. I work with each consulting professional, taking account of and integrating his or her findings. At all points in the work I collaborate with the patient and his or her family.
- 4. Treatment designed for patient's precise requirements:** Treatment is tailored precisely to the patient's requirements as opposed to the one-size-fits-all model of regular talk therapy sessions with a psychotherapist or intermittent medication consultations with a psychiatrist. The type or types of treatment, such as behavioral instruction or insight-oriented psychotherapy, are chosen, modified, and fitted precisely to the patient. Medication and other biological-based interventions are used as needed.
- 5. Expense:** While often more expensive *at first* because of testing and the optional use of consultants, over time *Collaborative Method*-based treatment is almost always less expensive than conventional psychotherapy. These differences reflect the focus on accurate diagnosis, monitoring progress, and modifying treatment when progress declines or stops. In other words, the likelihood that treatment will produce the desired results and do so efficiently is distinctly increased with this procedure. Also, when progress is not occurring the patient and I will know sooner and take action accordingly.

Benefits of the Collaborative Psychiatry Method

For Professionals Who Refer Patients:

- 1. Resource for difficult cases:** While I treat a broad spectrum of patients, I specialize in working with complex or otherwise challenging cases. These may involve patients or families you don't wish to work with yourself, or with whom you have reached an impasse.
- 2. Stay involved in the case:** When you refer a patient to me, I can work with you to keep you involved in the case instead of taking over the patient's entire treatment. If you are currently providing psychotherapy, marriage counseling, or medication to the patient, for example, you may prefer to remain on the patient's team, continuing to provide care in your own specialty.
- 3. Specialties outside your field:** As coordinator of the treatment effort, I can take responsibility for areas in which you don't specialize, for example, providing a medical or medication evaluation if you are a psychologist, taking responsibility to arrange for and make use of a psychological evaluation if you are a medical professional, or for a neuropsychological evaluation and remediation if you are not a neuropsychologist.
- 4. Case management:** If you desire, I am prepared to take over the complete management of a case, coordinating care and integrating the work of all professionals involved, leaving you free to do what you do best as a psychotherapist, social worker, school counselor, family therapist, psychopharmacologist, or general practitioner.

To find out more about how I might be able to assist you, your family, or a patient, please visit my website www.stevenfrankelmd.com, or contact me at (415) 456-6611 or stevenfrankelmd@earthlink.net.