Case 10 - Evaluating the Consultation and Education Department

At the Greenby Community Mental Health Center, the

Consultation and Education Department was about to

go under. Although consultation and education are

required for all community mental health centers, not

all centers have fully staffed and active departments.

Instead, they implement consultation and education as

a percentage of each professional’s work. That was

what Henry McDonald, the executive director, was

suggesting for Greenby.

“You have to understand my position,” he

exclaimed to a distraught consultation and education

director. “Our funding has been cut back. We’re more

dependent than ever on fees for service and third-party

payments. Consultation and education are luxuries we

really can’t afford. They don’t bring in the funds we

need, and we’ve got to put our resources into programs

that carry their weight.”

“But you know that C and E programs are a high

priority. Every center has to have one to keep up its

funding,” Andy Cutler replied.

“Andy, let’s not play games here. You know we

don’t have to have a C and E department with a full-time

director. We only have to provide the service. The

real issue is whether your program stays in operation

the way it is now, and I’m saying it can’t. Now, stop

worrying. Your job isn’t in jeopardy. You’ll be able to

move over to the clinical program.”

“Henry, believe it or not, it’s not my own job

that I’m concerned about. No matter what kind of

measurement you use, you have to see that the C and

E department does pull its weight. We’ve developed

liaisons with every major employer in the area, we’ve

got preventive programs going in the schools, and our

divorce and family workshops are attracting more

people every time we put them on. Word is getting

around in the community.”

“Sure, the workshops attract people. At five dollars

a head, why shouldn’t they? The program is self-supporting,

I’ll grant you that, but it’s not pulling in

enough capital to pull its weight with the center as a

whole. There’s no way it can.”

“But what you’re not recognizing, Henry, is that

this program is supporting the other programs. You’ve

had an increase in the number of people referring

themselves for alcohol and drug abuse programs. I’m

telling you that this is because of the preventive programs

we’ve been doing at the factory. You’ve had an

increase in self-referrals for family therapy. I think

they’re coming from our workshops. The programs we

offer help people recognize their problems, and when

they recognize them, they start to come in for more

help.”

“That’s very possible, Andy. But I’ve got a board of

directors to deal with, and I don’t know whether

they’re going to buy that line of reasoning. They’re

not professionals, you know, and they don’t necessarily

see those relationships that way. What they can

see is the difference between what a person pays to

participate in a workshop and what the same person

would pay for one of the other programs. It’s a

good thought to say that you’re feeding into the

other services, but we don’t really know that. We

don’t really know anything about the impact you’re

having. Give me something I can tell the board.

Give me something I can tell the state. Just give me

something.”

**Case 10**