

SCHOOL CONSULTATION PRACTICES IN THE EARLY CAREER: DOES TRAINING MATTER?

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Consultation is considered a pivotal skill for professional psychologists, including those practicing in educational settings (i.e., school psychologists). It is generally assumed that the development of consulting competence occurs through effective consultation training. However, limited research supports this claim. Via a national survey of 262 early career school psychologists, this study investigated the link between school psychologists' consultation training at the preservice level, and the enactment of the consultant role in schools during the early career. Participants' reported experiences in consultation training were consistent with recent research in this area including omissions in the training and supervision they received, such as a lack of emphasis on process skills and multicultural competence. Regression analyses indicated participants' consultation training, including supervision, and their direct service practices (i.e., assessment and counseling), may impact how they enact the consultant role, how confident they are in their consultation practice, and their perceived ability to achieve client, consultee, or systems-level change.

Keywords: consultation training, early career, school consultation, supervision

Consultation is considered a functional competence for all psychologists (Fouad et al., 2009). The American Psychological Association (APA) requires coursework in consultation for programs seeking accreditation (APA, 2009), and a taskforce from APA Division 13, the Society of Consulting Psychology, has developed guidelines to support doctoral and postdoctoral consultation training (APA, 2007). Consulting psychology has been a major component of educational practice for over five decades, with schools considered a key organizational context where consultation occurs (Rosenfield & Humphrey, 2012; Rosenfield, 2013). In school psychology, specifically,

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consultation is considered a practice that permeates all aspects of school psychologists' service delivery (National Association of School Psychologists [NASP], 2010), and a foundational competency for school psychology graduate students and practitioners (Ysseldyke et al., 2006).

In schools, consultation provides one means by which psychologists can directly support adults (e.g., teachers and parents) and indirectly support clients (i.e., students), to promote students' academic success and social-emotional wellbeing (Erchul & Sheridan, 2014), and systems-level change (Illback, 2014). Consultation goals include (a) enhancing services delivered to clients and (b) empowering consultees to have increased knowledge, skills, objectivity, and self-confidence in future problem-solving efforts (Caplan, 1970).

Despite the apparent importance of consultation training and its potential link to consultation practice, some evidence suggests the current state of consultation training in most school psychology programs may not be sufficient to prepare competent consultants. Challenges include (a) an insufficient number of consultation courses, (b) limited breadth and depth of content covered, (c) few applied experiences, and (d) limited, if any, supervision (Anton-LaHart & Rosenfield, 2004; Hazel, Laviolette, & Lineman, 2010), even though supervision is believed to be a critical part of a developmental learning process in school consultation (Newman, 2012; Rosenfield, Levinsohn-Klyap, & Cramer, 2010; Stoltenberg, 1993).

Although it seems logical that more intensive preservice-level consultation training (e.g., more coursework, opportunities for applied practice, and supervision) would link to increased competence to consult in professional practice, research on school consultation training outcomes remains thin (Newell & Newman, 2014). A knowledge gap persists despite a number of calls for additional research on consultation training over the last several decades (e.g., Alpert & Meyers, 1983; Newell & Newman, 2014). The purpose of the current study was to investigate the link between consultation training and supervision at the preservice level, and the enactment of the consultant role for early career school psychologists.

The Current State of Consultation Training

Empirical literature about school-based consultation training provides (a) a description of training practices over the past several decades, and (b) limited information regarding outcomes of different training approaches.

Descriptive Research on Consultation Training

A number of studies have painted a picture of the school-based consultation training landscape via national surveys or other methods such as syllabi analysis. Historically, research has suggested preservice-level consultation training practices are deficient. For example, Meyers, Wurtz, and Flanagan (1981) found that of 121 of 203 school psychology training programs responding to their request for information on consultation training, 60% did not require a course focused on consultation. More than a decade later, Costenbader, Swartz, and Petrix (1992) surveyed 1,020 NASP members regarding their consultation training and practices. Of the 333 respondents, nearly two thirds indicated that they had received no training, or less than one semester of training, in consultation. More than half of respondents rated the quality of their consultation training as inadequate or less than adequate. Hellkamp, Zins, Ferguson, and Hodge (1998) surveyed 197 faculty members (89 responded) regarding consultation training practices across clinical, counseling, industrial/organizational, and school psychology training programs. Nearly one third of individuals teaching graduate courses in consultation indicated having no formal consultation training.

The most recent survey of consultation training, conducted by Anton-LaHart and Rosenfield (2004), included 104 training program respondents of 217 contacted for participation. The majority of nondoctoral (87%), and all doctoral training programs, offered at least one course in consultation, a significant change from the findings of Meyers et al. (1981) more than two decades prior. In addition, 80% of training programs required a consultation case or cases as part of a first course in consultation; however, only 23% of programs required consultation casework as part of a second

course. Programs did not consistently require regular university supervision of consultation during coursework (43% did not) or practicum experiences (32% did not), and infrequently applied specific supervision techniques (e.g., audio- or video-taping of consultation sessions). The most common consultation models taught in coursework included behavioral (now frequently referred to as behavioral/problem solving; 91%), mental health (59%), instructional (53%), and organizational (52%). In terms of number of models taught, 19% of programs instructed in one model, 18% in two models, and 63% reported teaching more than two models. These results differed from Meyers et al. (1981), who found most programs emphasized a single model in training.

Analyzing consultation course syllabi from 25 APA-accredited school psychology training programs (40% of programs solicited for participation), Hazel et al. (2010) found similar results to Anton-LaHart and Rosenfield (2004). Syllabi indicated that 88% of responding programs provided students with one full consultation course or more, and 68% listed one or more consultation cases as a requirement in at least one of those courses. According to the syllabi, 41% indicated university supervision as required, but the supervision frequency, formats, and techniques were not clearly articulated. Hazel et al. (2010) noted four themes conveyed by the syllabi: (a) students were exposed to multiple consultation models; (b) consultation training focused predominately on treatment as opposed to primary prevention, risk reduction, or early intervention; (c) some course syllabi (8%) addressed consultation solely with regard to *direct* service delivery even though consultation is defined as an *indirect* service delivery approach; and (d) consideration given to issues of diversity and social justice varied greatly across syllabi, but was limited overall.

Consultation Training Outcome Research

In a review of consultation training research, Newell and Newman (2014) summarized 26 peer-reviewed studies from 1970 to 2012 that empirically evaluated the effects of school-based training. The authors found that training in behavioral/problem solving consultation training boasted more empirical research than other approaches (e.g., broad-based/eclectic, process-focused, or multicultural-focused). However each of these areas suffered from having few total studies, small sample sizes and convenience samples, lack of rigorous research designs, and general datedness. Furthermore, questions regarding structures of consultation training (e.g., timing in graduate coursework, number of courses), and the role of supervision remain insufficiently researched. As a result, individuals teaching or supervising consultation do not have guidelines to support an evidence-based training process to support consultation competency development.

Can Consultation Skills Generalize From Other Domains?

Other courses in a typical school psychology graduate program, such as those focused on counseling, may provide content that is relevant to the acquisition and application of consultation skills. For example, skills such as question asking, paraphrasing, reflecting feelings, and active listening are foundational for both the counseling and consultation domains (Plotts & Lasser, 2013). However, similar to school consultation, school psychologists report feeling insufficiently prepared to offer mental health services such as individual or group counseling (Suldo, Friedrich, & Michalowski, 2010). Additionally, consultation and counseling are distinct areas of practice. For example, consultation is provided indirectly to clients, whereas counseling is a form of direct service delivery, and consultation focuses on a consultee's professional concerns in the work setting, while counseling focuses on personal concerns. Therefore, although it is possible that a school psychologist who does not receive extensive consultation training may learn relevant skills in related areas, such training is unlikely to translate into consultation practice in the schools.

In sum, descriptive research over time suggests an increase in the amount of consultation training provided to school-based consultants at the preservice level. Nevertheless, gaps in the research base remain regarding consultation training processes, including supervision. The last national survey of school consultation training practices is over a decade old. Research on consultation training outcomes is also dated, and studies are methodologically limited. Therefore, although training school consultants has been demonstrated in a few instances to be beneficial to

consultants-in-training (CITs), consultees, and clients, it is premature to conclude which training practices make an impact with whom and in what circumstances (Newell & Newman, 2014).

Consultation Practice in Contemporary Schools

Some research describes school-based consultation practices, but how these practices reflect training is not yet clear. In a national survey of school psychologist NASP members, Castillo, Curtis, and Gelley (2012) found that although consultation is defined as a practice that should permeate all aspects of school psychologists' service delivery (NASP, 2010), only 16% of participants' time was spent engaged in consultation activities. Of this time, 10% was devoted to individual student-focused consultation and 6% to systems-level consultation. Meanwhile, more than 60% of school psychologists' time is devoted to activities related to special education, such as psychological assessment of individual students (Castillo et al., 2012). Presumably, if individuals spend the majority of their practice time devoted to an assessment role, this would limit the time available to engage in consultation. These data contrast with (a) consistent reporting by school psychologists that consultation is a preferred role (e.g., Costenbader, Swartz, & Petrix, 1992; Guiney, Harris, Zusho, & Cancelli, 2014; Hosp & Reschly, 2002) and (b) numerous calls for school psychologists to engage in an increasingly ecological- and prevention-oriented role, including consultation (Gutkin & Curtis, 2009; Sheridan & Gutkin, 2000; Ysseldyke et al., 2006). Insufficient preparation to engage in the consultant role provides one explanation for the gap between how school psychologists prefer to practice and how they actually practice in school settings (Rosenfield, 2013).

From Training to Practice?

In one of the only studies to investigate the link between training and practice, Costenbader et al. (1992) found that school psychologist practitioners with more formal consultation training (e.g., number of semesters, models presented during training, judged quality of training) rated their consultation skills as stronger than those with less formal training. However, the time participants spent consulting was not related to training variables or perceptions of their skills as consultants. Instead, the authors suggested that state and federal regulations requiring assessment practices likely influenced school psychologists' consultation practice time. More recently, Daly (2007) found that school psychology *coursework*, generally, did not relate to the professional roles that school psychologists enacted in schools following graduation. On the other hand, *field experiences* (i.e., practicum and internships) in assessment and systems consultation significantly predicted time spent engaged in those practice roles.

Consulting in the Early Career

If psychologists' consultation training is hypothesized to translate into practice, the early career may be the most pertinent period for investigation given its proximity to training. If trainees are well prepared for a broad-based role (e.g., consultation) at the graduate level, they may be able to clearly articulate and advocate for such roles, and implement them in practice (Kaniuka, 2009). Of course the translation of training into practice presumes the school psychologist (a) developed consultation competency at the preservice level, and (b) values indirect service delivery as a framework for practice. Such conclusions may be presumptuous given that direct service work, including assessment, is how school psychologists spend the majority of their time. Early career practitioners may also be vulnerable to institutional inertia, practicing in ways that are common to the school, district, or others who have previously occupied the school psychologist role (e.g., assessing students for special education) rather than in a broader role (e.g., individual, group, and systems-level consultation).

Research Questions

In this study, we examined the link between consultation training and supervision at the preservice level, and consultation practice in school psychologists' early careers. The central question of interest in this study was: How does preservice-level consultation training impact current consultation practices, if at all? To that end, we investigated: (a) how early career school psychologists were *trained* and *supervised* in consultation at the preservice level, (b) how early career school psychologists' consultation training, including supervision, related to *frequency of consultation* and *confidence to consult*, and (c) how early career school psychologists' consultation training related to perceived capacity to *achieve client, consultee, and systems-level change*. In short, we hypothesized that training matters for how one subsequently enacts the consultant role in professional, school-based practice during the early career. Specific hypotheses included:

1. Completion of a greater number of preservice level consultation courses would predict increased (a) consultation frequency, and (b) confidence to consult at the inservice level;
2. Incorporation of a greater number of training strategies within preservice level consultation courses would predict increased (a) consultation frequency, and (b) confidence to consult at the inservice level;
3. Coverage of more consultation competencies (APA, 2007) within preservice level consultation training would predict increased (a) consultation frequency, and (b) confidence to consult at the inservice level; and finally,
4. Incorporation of a greater number of supervision strategies within preservice level consultation training would predict increased (a) consultation frequency, and (b) confidence to consult at the inservice level.

Method

Sample and Participants

A sample of early career school psychologists (defined here as five or fewer years removed from training) was recruited through state school psychology organizations. The sample was purposeful because we estimated that early career school psychologists were likely more accurate in their recall of consultation training practices given their proximity to training. It was a sample of convenience because we only accessed participants from state school psychology organizations that allowed for survey dissemination and had more than 20 early career members belonging to NASP ($N = 37$). Since general demographics of early career school psychologists were not available to us, we compared our sample to data from the most recent NASP member survey (Curtis, Castillo, & Gelley, 2012), even though the latter includes school psychologists from all career stages. Characteristics of respondents to our survey and NASP members surveyed in 2010 are included in Table 1.

School psychologists. The participants for this study were 262 school psychologists who had practiced within the past year, had practiced in the United States between 1 and 5 years as of Fall 2014, and who were members of their state school psychology organizations at the time of the survey. A total of 541 individuals responded to the survey, but individuals who did not provide informed consent ($n = 2$), who practiced for more than 5 years ($n = 132$), who worked part time ($n = 13$), were practicum students or interns ($n = 114$), or who did not answer how long they had practiced ($n = 18$) were excluded from the survey. On average, respondents had practiced 3.76 years ($SD = 1.37$), were between 26 and 30 years old (58%), were predominately White (89%), female (87%), had nondoctoral degrees (83%), and worked full time in the public school setting (81%; see Table 1). Comparing the data with Curtis et al.'s (2012) NASP member survey, chi-square tests indicated that females were overrepresented in this early career sample as compared with the general NASP membership in 2010 ($\chi^2 = 13.77, p < .001$), which is consistent with the increasing feminization of the field (Merrell, Ervin, & Peacock, 2012). There were no significant differences

Table 1
Characteristics of Respondents and Employment Location

Variable	<i>N</i>	% ^a	NASP % ^b
Race (missing = 14)			
White	221	89.1%	90.7%
Black/African American	11	4.4%	3%
American Indian/Alaska Native	2	.8%	.6%
Asian	6	2.4%	1.3%
Other	8	3.2%	1%
Ethnicity (Missing = 25)			
Hispanic/Latino	16	6.8%	3.4%
Non-Hispanic/Latino	186	78.5%	—
Other	35	14.8%	—
Work setting (Missing = 10)			
Urban	62	24.6%	26.5%
Suburban	123	48.8%	43.4%
Rural	67	26.6%	24.0%
Combination	—	—	6.1%
School type			
Public school	213	81.3%	83.7%
Private or parochial	17	6.5%	6.2%
Preschool/ECE	66	25.2%	—
Elementary	171	65.3%	—
Middle	117	44.7%	—
High	93	35.5%	—
Other ^c	28	10.7%	—
Percent of FRMS (missing = 39) ^d			
0–10%	16	7.2%	—
11–20%	20	7.6%	—
21–30%	26	11.7%	—
31–40%	21	9.4%	—
41–50%	27	12.1%	—
51–60%	18	8.1%	—
61–70%	30	13.5%	—
71–80%	28	12.6%	—
81–90%	18	8.1%	—
91–100%	19	8.5%	—
Percent students of color (missing = 37)			
0–10%	62	27.6%	—
11–20%	25	11.1%	—
21–30%	31	13.8%	—
31–40%	23	10.2%	—
41–50%	13	5.8%	—
51–60%	11	4.9%	—
61–70%	26	11.6%	—
71–80%	13	5.8%	—
81–90%	11	4.9%	—
Percent English language learners ^e			
0–10%	99	44.8%	—
11–20%	47	21.3%	—
21–30%	23	10.4%	—

(table continues)

Table 1 (continued)

Variable	<i>N</i>	% ^a	NASP % ^b
31–40%	15	6.8%	—
41–50%	14	6.3%	—
Percent students in sp. ed. (missing = 36)			
0–10%	29	12.8%	—
11–20%	122	52.0%	—
21–30%	42	18.6%	—
31–40%	19	8.4%	—
Percent students in G & T (missing = 69) ^f			
0–10%	136	70.5%	—
11–20%	41	21.2%	—
21–30%	15	5.7%	—
Ratio of sch. psych. (missing = 36) ^g			
1 to 250–500	20	8.8	—
1 to 500–750	24	10.6%	—
1 to 750–1000	54	23.9%	—
1 to 1000–1500	54	23.9%	—
1 to 1500–2000	37	14.1%	—
1 to 2000–2500	18	8.0%	—
1 to 2500–3000	13	5.0%	—

^a Percentages are valid percents. ^b Data from Curtis et al. (2012), reporting on the general population of NASP members from a 2010 survey. ^c Other locations include, but are not limited to, charter schools, vocational schools, juvenile justice systems, and alternative schools. ^d FRMS = Free and Reduced Meals. ^e Percent ranges with 10 or fewer respondents were excluded from the table for brevity. ^f G & T = Gifted and Talented. ^g Ratio of Students to School Psychologists.

in ethnicity or work setting (i.e., public vs. private school) between the current sample and the NASP members survey in 2010 (Curtis et al., 2012).

Geographical regions. Although not every state was represented in the sample, every region of the country was represented (West = 77, 30.0%; Midwest = 44; 17.1%; South = 106, 41.2%; Northeast = 30, 11.7%). However, there were significant differences between the proportions of participants from each region in the current sample and the proportions of NASP members surveyed in 2010 (Curtis, Castillo, & Gelley, 2012; $\chi^2 = 95.13$, $p < .001$), such that there was an underrepresentation of the Midwest and Northeast, and an overrepresentation of participants from the South, in our sample.

School districts. Approximately half of the participants reported working in school districts in suburban areas (49%). The modal response for the percentage of students qualifying for free or reduced price school meals was 61% to 70% (13.5% of the sample), for the percentage of students of color was 0% to 10% (27.6% of the sample), for the percentage of English Language Learners was 0% to 10% (44.8% of the sample), for the percentage of students receiving special education services was 11% to 20% (52% of the sample), and for the percentage of students in gifted and talented was 0% to 10% (70.5%). Finally, respondents estimated the ratio of school psychologists to students in the district was most commonly 1 to 750–1000 (23.9%) or 1 to 1000–1500 (23.9%). Please see Table 1 for additional details on school districts.

Procedure

After obtaining IRB approval, a link to an electronic survey was sent to prospective participants through state school psychology organization representatives. The survey contained embedded informed consent, which described the purpose of the study and provided a definition of consultation used to develop the survey.

State professional organizations differed in their protocols. Most disseminated the survey directly to members ($n = 34$; 92%), one allowed us to e-mail the link to members directly, one provided mailing labels to mail the link to members via postcards, and one posted the link on the organization's website. Given this variability, response rate was incalculable, a common concern in e-mail/Internet survey research (Van Horn, Green, & Martinussen, 2009). A follow-up message was sent approximately two weeks afterward to all state members who had not completed the survey. The introduction to the survey indicated that people who had already completed the survey should not complete the survey again.

To increase response rate and sample size, participants were informed that \$1 would be donated to the NASP Minority Scholarship Fund for each completed survey. Additionally, participants could enter an anonymous drawing to win one of two copies of all four volumes of NASP's *Best Practices in School Psychology* book series.

Measures

Survey development. To develop a rigorous survey, first, items and scales were drafted based on prior research from the field of consultation training (e.g., Anton-LaHart & Rosenfield, 2004; Hazel et al., 2010). Second, four experts in school consultation research provided extensive survey feedback, changes to the survey were made, and a revised survey was drafted. Third, the researchers conducted cognitive interviews (CIs) to get feedback regarding how participants understood and responded to survey items, and made changes accordingly (see Desimone & Le Floch, 2004). All survey items were optional except (a) consent to participate, (b) whether they were a practicing school psychologist, and (c) years of professional practice. In sections of the survey where respondents indicated current consultation practices, consultation was explicitly defined as "An indirect problem-solving and decision-making model that involves the cooperative efforts of a consultant (e.g., a school psychologist) and consultees (e.g., teachers, administrators, caregivers) to clarify primary needs and issues and to develop, implement, and evaluate appropriate strategies for intervention to support clients (e.g., students)" (Adapted from Sheridan, Richards, & Smoot, 2000). Interested readers may contact the first author of this study for a copy of the full survey (some items were not analyzed in the current paper); see also Hazel, Barrett, and Newman (2015) for more information on the development of the survey.

Predictor variables. Preservice level consultation training was assessed by inquiring about the number of consultation courses the respondent had taken, the number of competency areas covered within graduate coursework, training methods, applied work (i.e., practicum and internship cases), and supervision of applied work including formats and strategies. Tables 2 and 3 list the descriptive statistics for the predictor variables, and also provide a comprehensive list of items participants could endorse.

Number of graduate courses taken. Participants responded on a 8-point Likert scale, where 0 = 0 courses, 1 = part of one course, 2 = 1 course, 3 = 1 course and part of another course, 4 = 2 courses; 5 = 2 courses and part of a third course; 6 = 3 courses; and 7 = more than 3 courses ($M = 2.99$, $SD = 1.44$). The greatest number of participants completed one full course on consultation (47%).

Number of competency areas included in graduate coursework. Respondents were asked to endorse any of the 12 possible consultation competency areas (see Table 2 for full list) that had been included in their graduate training to indicate both breadth and depth of preservice training. Composite scores were calculated by summing the number of competency areas checked ($M = 7.60$, $SD = 2.43$, Range = 1 to 11; see Table 2).

Training methods. Respondents were asked to endorse as many as 18 training methods or strategies included in their preservice-level consultation training (including "other"; see Table 2 for full list). Composite scores were calculated by summing the number of training areas checked ($M = 9.86$, $SD = 3.76$, Range = 1 to 18; see Table 2).

Consultation cases. Participants were asked the number of consultation cases they engaged in (a) preinternship and (b) during internship. Responses were on a Likert scale from 0 = 0 cases to

Table 2
Description of Preservice Consultation Training

Variable	<i>N</i>	%
Number of courses taken		
0	3	1.4
Part of one course	9	4.1
1	103	47.2
1 and part of another	24	11.0
2	56	25.7
2 and part of another	2	.9
3	17	7.8
> 3	4	1.8
Missing	44	—
Competency areas		
Individual	205	78.2
Group	173	66.0
Organization/systems	161	61.5
Self-awareness	134	51.1
Relationship development	160	61.1
Assessment	147	56.1
Intervention	154	58.8
Process skills	98	37.4
Knowledge of theory	134	51.1
Multicultural/international, gender, and life span perspectives	125	47.7
Research	66	25.2
Ethics	179	68.3
Methods		
School setting	192	73.3
Non-school setting	32	12.2
Discussion of cases	167	63.7
Lecture	168	64.1
Reading textbooks	188	71.8
Reading casebooks	68	26.0
Reading articles	137	52.3
Discussion of readings	162	61.8
Videos of consultation	83	31.7
Instructor modeling of consultation skills	110	42.0
“Microskills” training	107	40.8
Simulated consultation session	114	43.5
Research	76	29.0
Self-directed learning	124	47.3
Supervising others’ consultation work	47	17.9
Quiz/exam	139	53.1
Papers	143	54.6
Cases before internship		
0	28	13.5
1	23	11.1
2	47	22.7
3	36	17.4
4	13	6.3
5	13	6.3

(table continues)

Table 2 (continued)

Variable	<i>N</i>	%
> 5	47	22.7
Cases during internship		
0	1	.5
1	8	3.9
2	13	6.3
3	12	5.8
4	12	5.8
5	16	7.7
> 5	145	70.0

6 = > 5 cases for each item ($M = 3.01$, $SD = 2.06$ for preinternship cases; $M = 5.16$, $SD = 1.51$ for internship cases; Table 2).

Supervision strategies. Supervision strategies measured the supervision techniques used in participants' consultation training, and who provided the supervision (see Table 3 for full list). Strategies used by field or university supervisors were weighted twice that of strategies used by advanced graduate student supervisors or peer supervisors under the assumption that professional supervisors were likely to have more content expertise than advanced-level trainees. We created a weighted scoring system based on the assumption that field and university supervisors had greater knowledge of school psychology globally, and possibly supervision specifically. NASP (2010) suggests field supervisors of school psychologists should possess a minimum of three years of professional experience. We presume that this experience is likely to inform contextually driven supervision practices (Harvey & Struzziero, 2008). University supervisors have predominately been trained at the doctoral level, should be experts in their area of specialization, and are more likely than graduate student supervisors to meet the APA *Guidelines for Clinical Supervision in Health Service Psychology* competencies (APA, 2014). Specific supervision strategies were first weighted and then summed to create composite scores, with higher scores indicating more supervision experiences for that participant ($M = 15.18$, $SD = 6.78$, $Range = 2$ to 36).

Dependent variables. The survey measured five consultation practice outcomes: (a) frequency of consultations over one academic-year; (b) confidence in current consultation practice; and (c) perceived ability to achieve change in clients, consultees, and systems.

Frequency of consultation practice. The frequency of consultation practice was assessed by asking the participant how frequently he or she consulted with teachers, administrators, parents, and other professionals (6 items). Participants responded on a Likert scale (0 = *never*, 1 = *monthly*, 2 =

Table 3
Preservice Supervision Strategies

Variable	Field supervisor	University supervisor	Advanced grad student	Peer supervisor	Not included in training
Case conceptualization	141 (53.8%)	171 (65.3%)	26 (9.9%)	73 (27.9%)	14 (5.3%)
Modeling	50 (19.1%)	132 (50.4%)	18 (6.9%)	65 (24.8%)	33 (12.6%)
Audiotaping/ videotaping	9 (3.4%)	91 (34.7%)	17 (6.5%)	33 (12.6%)	84 (32.1%)
Transcription	4 (1.5%)	72 (27.5%)	5 (1.9%)	13 (5.0%)	98 (37.4%)
Written reflection	21 (8.0%)	140 (53.4%)	13 (5.0%)	17 (6.5%)	46 (17.6%)
Live Observation	75 (28.6%)	43 (16.4%)	8 (3.1%)	18 (6.9%)	74 (28.2%)
Co-consulting	109 (41.6%)	57 (21.8%)	7 (2.7%)	22 (8.4%)	57 (21.8%)
Brief supervision	100 (38.2%)	76 (29.0%)	13 (5.0%)	30 (11.5%)	60 (22.9%)

2 to 3 times per month, 3 = weekly, 4 = multiple times per week, and 5 = daily). Composite scores were calculated as the sum of the 6 items ($M = 24.63$, $SD = 5.91$, $Range = 6$ to 36 , $\alpha = .84$).

Confidence in consultation practice. Participants' confidence in consultation practice was measured through 12 items, such as "In your current consultation work, to what extent do you feel confident to do the following: (a) consult with teachers, (b) consult with administrators, (c), consult with parents, and (d) consult within a team." Responses were on a 4-point Likert scale, where 0 = not at all, 1 = to a little extent, 2 = to a moderate extent, and 3 = to a large extent. Composite scores were calculated as the sum of the items ($M = 20.49$, $SD = 2.89$, $Range = 10$ to 24 , $\alpha = .88$).

Perceived ability to achieve change in clients, consultees, and systems. Perceived ability to achieve change through consultation was assessed for client outcomes (3 items), consultee outcomes (4 items), and systems-level outcomes (2 items). For each dependent variable, responses were measured on a 4-point Likert scale, where 0 = not at all, 1 = to a little extent, 2 = to a moderate extent, and 3 = to a large extent. Composite scores were calculated as the sum of the items for client outcomes ($M = 8.71$, $SD = 1.77$, $Range = 3$ to 12 , $\alpha = .86$), consultee outcomes ($M = 11.19$, $SD = 2.37$, $Range = 4$ to 16 , $\alpha = .90$), and systems-level outcomes ($M = 5.03$, $SD = 1.53$, $Range = 1$ to 8 , $\alpha = .90$).

Data Analysis

Descriptive statistics were analyzed to examine trends in preservice level consultation training and practice. Next, five separate multiple regression models, one for each dependent variable, were estimated to answer the research questions about relationships between training and practice.

Results

Descriptive Analysis: Preservice Training and Consultation Practice

An overview of participants' preservice-level consultation training is provided in Table 2 including number of consultation courses, APA (2007) consultation competency areas included in training, training methods, and number of consultation cases before and during the school psychology internship.

Course quantity, content, and pedagogical approaches. Most participants indicated having taken one course in consultation (47%), with more than a third of participants having taken two or more courses. In terms of competency domain coverage in courses, 50% or more of participants indicated most domains were covered during preservice-level coursework. Only three areas emerged as present in less than 50% of participants' coursework: research (25%), process skills (37%), and multicultural/international, gender, and life span perspectives (48%). A variety of instructional methods were applied in consultation training, with the most common (i.e., > 60%) being applied consultation practice in a school setting, reading textbooks, lectures, discussing cases, and discussing readings. In terms of actual casework, data suggested participants received more applied consultation case experience during the school psychology internship than prior to the internship. In fact, 70% of participants indicated engaging in more than five consultation cases during the internship compared to only 23% prior to the internship. In addition, before the internship, 14% of participants indicated not consulting on a case, and 11% reported consulting on only a single case.

Models. Finally, we inquired about training in consultation models at the preservice level, where participants indicated a range from no exposure (1) to in-depth exposure (4). The number and percentage of participants reporting on training exposure to different models is provided in Table 4. Trainees were provided exposure to a number of models, without in-depth training on any one model, except for behavioral/problem solving consultation, which was covered in-depth for less than half of the participants (41%).

Supervision techniques. Data on supervision practices suggested (a) the quantity and the breadth of supervision strategies in participants' preservice-level consultation training were limited (see Table 3), and (b) field supervisors and university supervisors applied different, complementary strategies in their supervision (see Figure 1). Case conceptualization, or talking about cases, was the

Table 4
Exposure to Consultation Models During Training

Model of consultation level of exposure	<i>N</i>	%
Behavioral/problem solving		
No exposure	2	1.0%
Minimal exposure	30	14.3%
Moderate exposure	87	41.4%
In-depth exposure	86	41.0%
Don't know	5	2.4%
Conjoint behavioral		
No exposure	33	16.1%
Minimal exposure	57	27.8%
Moderate exposure	57	27.8%
In-depth exposure	23	11.2%
Don't know	35	17.1%
Cross-cultural/multicultural		
No exposure	10	4.9%
Minimal exposure	72	35.1%
Moderate exposure	89	43.4%
In-depth exposure	24	11.7%
Don't know	10	4.9%
Instructional consultation		
No exposure	19	9.1%
Minimal exposure	65	31.3%
Moderate exposure	79	38.0%
In-depth exposure	34	16.3%
Don't know	11	5.3%
Mental health/consultee-centered		
No exposure	15	7.2%
Minimal exposure	65	31.3%
Moderate exposure	3	39.9%
In-depth exposure	37	17.8%
Don't know	8	3.8%
Organizational/systems		
No exposure	14	6.8%
Minimal exposure	67	32.4%
Moderate exposure	87	42.0%
In-depth exposure	28	13.5%
Don't know	11	5.3%
Other		
No exposure	26	44.8%
Minimal exposure	5	8.6%
Moderate exposure	3	5.2%
In-depth exposure	1	1.7%
Don't know	23	39.7%

most popular strategy applied by both field and university supervisors (54% and 65% respectively). The two other approaches most commonly applied by university supervisors were skill modeling (50%) and written reflection (53%). Field-based supervisors were more likely to apply supervision strategies that involved direct observation of consultation work.

Consultation practice. Consultation models applied in practice, and frequency of consultation, are listed on Table 5. Behavioral/problem solving (50%) was the most frequently applied

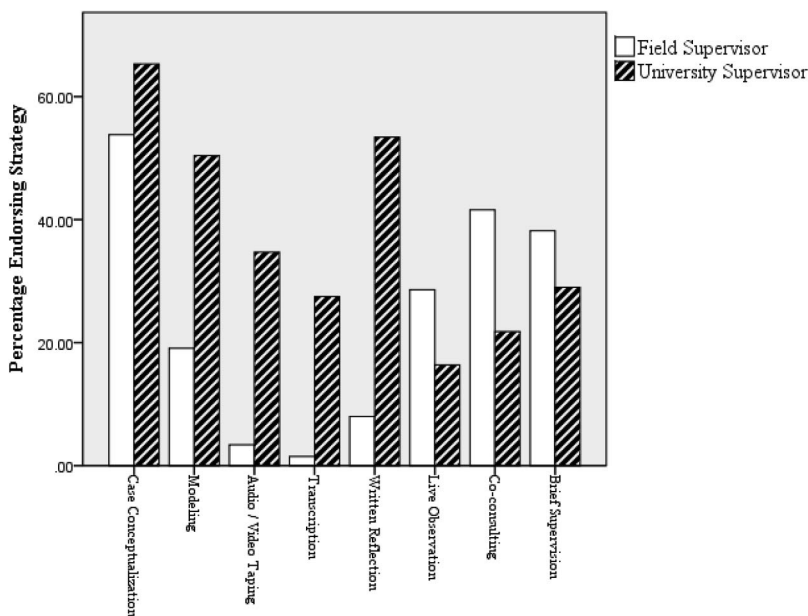


Figure 1. A comparison of field and university supervisors' supervision strategies.

model, followed by selecting a model or models based on one's current case (34%). Approximately 12% of participants indicated not applying a model in practice, and all other models were applied by less than 15% of participants. According to an aggregated average, participants indicated consulting with teachers, administrators, other staff, and teams at least weekly. Parent consultation and team facilitation each occurred 2 to 3 times per month. The average extent that participants

Table 5

Application of Consultation Models and Frequency of Consultation Practice

Variable	<i>M</i> or <i>N</i>	<i>SD</i> or %	Min.	Max.
Models				
I do not apply a model	30	11.5%	—	—
Behavioral/problem solving	131	50.0%	—	—
Conjoint behavioral	21	8.0%	—	—
Cross-cultural/MC	16	6.1%	—	—
Instructional	36	13.7%	—	—
Mental health/consultee centered	32	12.2%	—	—
Organizational/systems	31	11.8%	—	—
I select a model or models based on the case I'm working on	89	34.0%	—	—
Other	2	.8%	—	—
Frequency of consultation with				
Teachers	4.63	1.30	1.00	6.00
Administrators	4.20	1.34	1.00	6.00
Parents	3.67	1.27	1.00	6.00
Other staff	4.49	1.34	1.00	6.00
Consult within a team	4.35	1.15	1.00	6.00
Facilitate a team	3.34	1.44	1.00	6.00

retrospectively reported that they were confident consulting increased from a little to moderate ($M = 2.74$) immediately after graduation to moderate to large ($M = 3.41$) during early career practice.

Regression Models

Consultation frequency and confidence as predicted by training and supervision. Results of the multiple regression analyses predicting the frequency of consultation and confidence engaging in consultation are presented in Table 6. In addition to coursework, competencies, teaching methods, supervision strategies, and cases pre- and during the internship, assessment and counseling were included as predictors. An *assessment* variable was created based on the sum of initial special education evaluations, reevaluations, and 504 plans reported by respondents. Special education evaluations, reevaluations and 504 planning all involve assessments of some combination of students' academic, behavioral, and social-emotional functioning, making this a meaningful composite variable. A *counseling* variable was created based on the sum of participants' individual and group counseling cases.

The predictors explained approximately 23% of the variance ($R^2 = .227$) for the outcome of frequency and approximately 16% of the variance for the outcome of confidence ($R^2 = .155$). Consultation frequency was significantly negatively associated with the frequency of assessments and significantly positively related to the frequency of counseling. Among the preservice-level training predictors, the number of consultation cases during the internship significantly predicted participants' current frequency of consultation ($B = .81, p < .01$). None of the other preservice-level training variables significantly predicted current consultation frequency (all $p > .05$). The outcome of consultation confidence was most strongly predicted by the number of courses in training, and was modestly negatively associated with participants' current frequency of assessments. All other predictors were nonsignificant (all $p > .05$).

Change in clients, consultees, and systems. The results of the multiple regression analyses predicting the self-reported ability to achieve change in clients, consultees, and at the systems level are presented in Table 7. The predictors explained approximately 15%, 14%, and 12% of the variance in client, consultee, and systems-level change, respectively. In each of the regression models, the number of supervision strategies included during preservice training was significantly positively related to the perceived ability to achieve change. The number of consultation cases during internship was significantly positively related to perceived ability to achieve client change, but did not predict the perceived ability to achieve consultee or systems level change. No additional predictors were significantly associated with client, consultee, or systems level change.

Table 6
Regression Models Predicting Consultation Frequency and Confidence

Model	Frequency			Confidence		
	<i>B</i>	<i>SE</i>	β	<i>B</i>	<i>SE</i>	β
Intercept	16.98***	2.11	—	16.82***	1.05	—
Assessment	-.20**	.06	-.25	-.06*	.03	-.16
Counseling	.23***	.06	.28	.05	.03	.12
Coursework	.52	.30	.12	.44**	.15	.22
Competencies	-.02	.23	-.01	.12	.11	.09
Methods	-.09	.15	-.05	-.02	.07	-.03
Sup. strategies	.14	.07	.15	.06	.04	.15
Preinternship cases	.33	.24	.11	-.03	.2	-.02
Internship cases	.81**	.30	.19	.23	.15	.12
<i>F</i>		6.46***			4.07***	
<i>R</i> ²		.227			.155	

* $p < .05$. ** $p < .01$. *** $p < .001$.

Table 7
Regression Models Predicting Change

Model	Client change			Consultee change			Systems change		
	<i>B</i>	<i>SE</i>	β	<i>B</i>	<i>SE</i>	β	<i>B</i>	<i>SE</i>	β
Intercept	6.38***	.64	—	9.02***	.88	—	4.13***	.58	—
Assessment	-.02	.02	-.10	-.04	.03	.12	-.03	.02	-.14
Counseling	.02	.02	.07	.02	.03	.07	.03	.02	.12
Coursework	.02	.09	.02	.03	.13	.02	.06	.08	.06
Competencies	-.01	.07	-.01	-.02	.09	-.02	-.04	.06	-.07
Methods	.02	.04	.04	.00	.06	.01	-.01	.04	-.01
Sup. strategies	.05*	.02	.18	.09*	.03	.23	.05*	.02	.22
Preinternship cases	.05	.07	.06	.16	.10	.13	.11	.07	.15
Internship cases	.27**	.09	.22	.13	.13	.08	.02	.08	.02
<i>F</i>		3.93***			3.42***			2.89**	
<i>R</i> ²		.152			.136			.118	

* $p < .05$. ** $p < .01$. *** $p < .001$.

Discussion

Data from this national survey of early career school psychologists provide a descriptive overview of the current state of consultation training and supervision, and allow for an examination of potential linkages between consultation training and practice. It is the first study to empirically investigate the connection between school consultation training and practice since Costenbader et al. (1992) did so more than two decades prior. On the whole, the early career school psychologist participants reported taking at least one consultation course during their preservice training; learning multiple consultation models as opposed to a single model; receiving limited exposure to process variables and multicultural perspectives; receiving a limited amount of supervision of consultation; and having more applied consultation opportunities during their internships than during practicum experiences. Regression analyses indicated participants' consultation training, including supervision, and their direct service current practices (i.e., assessment and counseling) may have implications for how they enact the consultant role; how confident they are to do so; and their perceived ability to achieve client, consultee, or systems-level change.

The Current State of Consultation Training and Supervision of Consultation

The training and supervision experiences of participants in this study are consistent with prior research in this area. Although earlier studies suggested school psychology trainees had limited exposure to consultation training (e.g., Costenbader et al., 1992; Meyers et al., 1981), more recent research suggests that trainees are likely have at least one course in this area (Anton-LaHart & Rosenfield, 2004). Results from the current study indicated nearly all participants (approximately 95%) took at least one consultation course, and more than one third of participants completed two or more consultation courses. Another trend consistent with prior research is that multiple consultation models are frequently included in consultation training, rather than a single model emphasized in depth. Learning a number of models versus a single model in depth may have implications for how practitioners go on to enact the consultant role in schools (Newell & Newman, 2014), and is explored further later in the discussion section.

The investigation of consultation competencies included in training revealed trends that fit with prior research. The APA (2007) competencies of (a) consultation process, (b) multicultural/international, gender, and life span perspectives, and (c) research were neglected from training to a greater extent than other domains. The finding that research was neglected as a coursework competency likely reflects the participant sample included nondoctoral level practitioners, and the

emphasis of training programs is on preparing these school psychologist practitioners for applied practice in schools rather than to work in academic or research roles. In terms of the other two competencies, Anton-LaHart and Rosenfield (2004) concluded that insufficient time in courses was devoted to process-maintenance skills (i.e., interpersonal skills), communication skills, and multicultural skills. Findings from Hazel et al.'s (2010) course syllabi analysis also suggested insufficient attention to issues of diversity and culture in training. A series of recent consultation analogue studies (Newell, 2012; Newell, Newell, & Looser, 2013a; Newell, Newell, & Looser, 2013b) provide evidence that graduate-level CITs struggle to apply process skills and cultural responsiveness in their consultations, which was hypothesized to link back to gaps in training in these areas.

Of note, more than 75% of participants in the current study responded that relationship building was included as a competency in their coursework. However, the implementation of relationship development and maintenance may look different from one consultation model to the next (e.g., level of prescriptiveness or which relationships are emphasized; Lopez & Nastasi, 2014). More investigation is needed to parse out precisely what relationship building training consists of in graduate-level consultation training. In sum, the current study provides further evidence of a troubling trend of insufficient coverage of process skills and multicultural considerations in consultation training, which has implications for how school-based consultants enact these skills in practice.

Supervision. Supervision is a component of consultation training that has historically been neglected (Anton-LaHart & Rosenfield, 2004; Hazel et al., 2010) despite its potential to enhance CIT consultation competency development (Harvey & Struzziero, 2008; Newman, 2012; Stoltenberg, 1993). This investigation provides evidence that recent graduates from training programs received limited supervision quantity, with only a few supervision techniques applied. More than one third of participants indicated that transcription was not a part of field or university supervision, and nearly one third reported that supervisors did not use audio/video recording or live observation. The most predominant form of supervision was case conceptualization. Although case conceptualization paired with self-report is a common supervision strategy in clinical supervision, it is susceptible to numerous limitations such as supervisee omission or distortion of information due to perceived pressures (e.g., high stakes evaluation) or issues of metacompetence (i.e., not knowing what they do not know) (Bernard & Goodyear, 2014). It is preferable for supervisors to systematically apply a variety of supervision techniques including those that allow for direct observation, formative assessment, and developmental differentiation based on supervisee needs (Newman, 2012).

Of note, consistent with Ward's (2001) study of internship supervision, the strategies that different supervisors applied tended to be complementary, with field supervisors using strategies which are more likely to require frequent contact with the CIT in the field (e.g., live observation, co-consulting) and university supervisors applying strategies that may be more appropriately incorporated into a course (e.g., modeling, audio/video recording, transcription, written reflection). It may be helpful for university and field supervisors to explicitly discuss and plan for applying supervision of consultation using multiple methods; together the supervisors can apply more techniques than either party could individually (Ward, 2001).

Consultation cases preinternship and during internship. Nearly three quarters of participants indicated the inclusion of applied consultation experiences in a school-based setting to be part of their consultation training, consistent with findings by Hazel et al. (2010) and Anton-LaHart and Rosenfield (2004). Approximately one third of participants indicated engaging in four or more consultation cases prior to the internship. However, approximately 14% of participants did not take a consultation case before their internships and 11% engaged in only one case, suggesting preinternship opportunities for engaging in consultation may be rare for some CITs. Indeed, prior research has demonstrated that practicum students tend to observe a limited practice role from field-based supervisors, including limited consultation (Tarquin & Truscott, 2006). Meanwhile, nearly all participants had at least one consultation case during the internship, with the majority indicating five or more consultation cases. Therefore, the internship appears to provide trainees with multiple opportunities to engage in consultation.

From Consultation Training to Consultation Practice

Models. Data on practice from this early career sample suggested participants frequently engaged in consultation, and with high levels of confidence. Behavioral/problem solving consultation was endorsed as the most frequently applied model in practice, which likely relates to it also being the most likely to be instructed in-depth at the preservice level. A surprising finding was that greater than one third of participants indicated they select a consultation model or models based on case demands. One interpretation of this finding is that consultants and consultees are moving toward a broad-based, integrated framework in which relevant strengths from multiple models are drawn upon by consultants and consultees (Lopez & Nastasi, 2014). However, given that such a “meta-model” is not yet sufficiently described in the consultation literature, nor has it been empirically validated, it is not clear exactly how one would choose a model, or model features, based on a particular case. Further, given the limited depth of exposure to models other than behavioral/problem solving consultation at the preservice level, it is not clear that many individuals would have the knowledge or skills to flexibly apply multiple models in action. Therefore, an alternative and more skeptical interpretation of these findings is that selecting a model based on cases is akin to not applying a model at all, or engaging in atheoretical “on the fly” consultation. The notion of applying a model based on case demands requires further investigation.

Assessment, counseling and consultation. Data suggested that as participants took on more assessment work in their schools, they consulted with less frequency and less confidence. These findings are consistent with what we know from recent surveys of school psychology practice that suggest school psychologists continue to spend the majority of their time in a special education decision making role (Castillo et al., 2012). However, the data are contrary to the purported expansion of school psychology roles and functions, including consultation, a shift advocated for by a number of scholars (e.g., Ysseldyke & Reschly, 2014; Rosenfield, 2013; Sheridan & Gutkin, 2000; Ysseldyke et al., 2006).

A surprising finding was that the more frequently participants engaged in counseling, the more frequently they engaged in consultation. One reason this may be is that consultation and counseling share some underlying skills (e.g., communication skills and relationship building), so when those are well developed in one area an individual may be able to generalize to both. However, consultation and counseling are unique areas as previously described, and we did not gather data on counseling training, so this hypothesis cannot be confirmed. Another possibility is that school psychologists who are consulting with more frequency are engaged in a broader role with an expanded mental health prevention focus, and therefore also counsel with more frequency than those who are predominately focused on special education decision making; again, this is not verifiable from the dataset.

Predictors of consultation frequency, confidence, and change. The total number of supervision strategies included in preservice training was significantly linked to early career school psychologist participants’ perceived ability to achieve change through consultation for clients, consultees, and systems. This finding adds to existing evidence about the potential importance of supervision of consultation at the preservice level, which has suggested that supervision developmentally supports trainees’ application of consultation skills (Newman, 2012); the findings from this study suggest that the impact of supervision during training on consultation practice extends into early career practice, which has not previously been documented.

The number of consultation cases during the internship was a predictor of participants’ frequency of consultation. This finding fits with a study by Daly (2007), who found that field experiences in assessment and systems consultation linked to more time spent by graduates in these areas postgraduation. Providing practicum students or interns with increased opportunities for consultation would likely necessitate explicit planning and implementation from training programs and field based sites. For example, in Daly’s (2007) study, program director ratings of coursework-fieldwork integration did not predict professional roles of students or graduates. In sum, although coursework and fieldwork are often thought of as integrated, they are not always well linked, and what happens in fieldwork is likely an important contributor to future practice. We also found in the

current study that the amount of participants' preservice level consultation coursework predicted their subsequent confidence to consult during the early career. Taken in conjunction, these data suggest that both applied experiences and coursework are likely important contributors to consultation practice.

The number of consultation cases during the internship also predicted participants' perceived ability to achieve client change, although not their perceived ability to achieve consultee or systems-level change. A number of explanations may account for these findings. First, the perceived ability to achieve client change, over consultee or systems-level change, may be linked to the report of most often utilizing the behavioral/problem solving consultation model, which also emphasizes client outcomes and change. Second, consistent with findings from the current study and from prior research regarding school psychologists' time spent in consultation versus other roles such as assessment, perhaps consultations most frequently occur for individual students with disabilities, or suspected of having a disability, again with a client-centered emphasis. Third, although consultation is traditionally defined as an indirect service delivery model (Erchul & Young, 2014), the precise boundary between indirect service delivery and direct service delivery is perhaps blurred for internal consultants who are responsible for client outcomes.

Limitations

Although a number of interesting findings emerged from this study, caution must be applied in interpretation given several limitations. The researchers took multiple steps to enhance the validity of the methodology (e.g., getting feedback on survey instrumentation via expert feedback and cognitive interviews; Hazel et al., 2015). However, some limitations common to survey research remain. For example, the dependent variable of ability to achieve change in client, consultee, and systems outcomes is based on consultant perceptions of these outcomes rather than direct observations, which would be more objective regarding actual change. However, the consultant's perception of change is also valuable, as it may be predictive of willingness to engage in consultation in the future.

The survey methodology applied may have produced bias, specifically recall bias or respondent bias. Recall bias may have occurred if respondents who chose to participate recalled their consultation training differently or more favorably than those who chose not to participate. However, even if respondents' perceptions of training do not converge with actual training and practice, respondents' perceptions of training or recall of training experience may impact current consultation practices. In other words, what a respondent remembers from training or takes away from training may be just as important, if not more so, than what actually occurred. Respondent bias may have occurred if participants' consultation training or practice differed from those who did not respond. As we were unable to interview nonresponders, we are unable to assess whether respondent bias occurred. Many of our findings match with prior research in this area, and the practitioner demographics largely match those of the field, suggesting that respondents were fairly representative of early practitioners; however, the potential for respondent bias must be considered.

The magnitude of the regression coefficients was small in some cases as well. Additionally, participant characteristics from the sample may have differed from the entire early career school psychologist population (e.g., proportion of early career school psychologists in each region or early career school psychologists including those that are not members of NASP), limiting generalizability. Given our access to participants through state school psychology associations and electronic surveys, we were not able to estimate a response rate. However, at a minimum, the findings are relevant to early career school psychologists who are members of their state associations.

Future Research

Several avenues for future research on consultation training and practice logically follow from this study. This study and prior research suggests that training programs have shifted over time toward training graduate students on a breadth of consultation models versus a single model in depth. Can a CIT learn multiple models and subsequently apply them flexibly in action via some type of

trans-theoretical or “meta-model” (Lopez & Nastasi, 2014) of consultation? What would such a model consist of? Would a “meta-model” be as effective as applying a single, established consultation model? Which approach to teaching consultation models (i.e., broad-based or in-depth) maximizes CIT competency development?

Related to these questions, more research is needed regarding consultation process training, including multicultural competence. Arguably these skills, which are focused on interpersonal dynamics, are relevant across consultation models, yet they appear to be neglected in consultation training. What are the implications for consultation practice when interpersonal dynamics are or are not part of consultation training? And, if training in consultation process and multicultural practices is valuable, how are these skills most effectively taught and supervised?

Supervision from the university *and* from the field appears to be critical in consultation training. Researchers may wish to explore the relationship between university and field supervisors during consultation training, including how complementary supervision roles/strategies can be negotiated and enacted. Differences between consultation training during practicum, internship, and later career stages may be explored. Researchers may also wish to explore how perceptions of confidence to consult change from the preservice to inservice level, and how this relates to supervision; a retrospective pretesting design (see Burkhouse, 2012) may illustrate how individuals’ self-perceptions (e.g., confidence) change as they enter the field.

Further, the impact of particular supervision strategies in supporting consultation skill development is an important research endeavor. For starters, researchers might explore if supervision of consultation is unique from other types of supervision. Although some researchers suggest this to be the case (Rosenfield et al., 2010; Stoltenberg, 1993), only limited evidence exists to support this claim. Additionally, empirically studying which supervision strategies to apply, with whom, and under what circumstances to maximize CIT competency development will benefit those teaching and supervising consultation.

Penultimately, as argued by Erchul (2011), traditional definitions of consultation may lack total applicability in contemporary school settings. For example, increased accountability for the academic progress of all students may mean consultation can no longer, by definition, be voluntary or confidential. Research is needed to understand how our historical understandings of consultation, which are frequently incorporated into consultation training, actually match with consultant, consultee, and client needs. This leads to questions such as how well are we preparing future school-based consultants to provide services in contemporary school contexts, and how might consultation be redefined to match best with training and practice needs? Consideration of these and other future research questions will help us account for some of the unexplained variance remaining from the regression models completed in this study, to further our understanding of the links between consultation training and consultation practice.

And finally, this study supported prior claims that consultation is still predominantly utilized to support a consultee in changing the behavior of an individual client (Rosenfield, 2013). Systems change is arguably one of the hardest and most critical roles that a consultant can play (Hess, Short, & Hazel, 2012; Newell & Coffee, 2015). Understanding how preservice and inservice training can support school-based consultants in expanding their practice of and confidence in providing consultation services that focus on consultee- and systems-change, in addition to client-change, is another critical research need.

Summary

For decades, scholars have argued consultation training is critically important for promoting the use of consultation by psychologists, including those practicing in school settings. However, only limited empirical support exists to backup these assertions. This study suggests consultation training does indeed matter for school consultation practice in the early career. It will be important to collect further evidence to support our understanding of the link between consultation training and practice, both at the preservice and inservice levels. Additionally, it is contingent on us to better understand the precise content and processes in training that optimize consultants’ competency development. In

so doing, we can enhance consultation training at all levels, and maximize the value of consultation as a critical component of school-based practice.

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