

INNOVATE WITH INTENSIVES

EXPLORE THE PROCESS OF ADDING INTENSIVE
THERAPY TO YOUR COUNSELING PRACTICE

MIKE VAUGHN, M.A.



Innovate With Intensives:

Explore The Process Of Adding Intensive Therapy To
Your Counseling Practice

by Mike Vaughn, MA, LCMHCS, CSAT

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MIKE'S STORY

WHY I INCLUDE INTENSIVE THERAPY IN MY PRACTICE



Some years ago I realized that some of my clients needed a different level of therapy than what I could offer. At the same time, after fifteen years of private practice, I longed to add new elements to my counseling practice. This combination lead me to train and work with some of the best intensive counseling providers in the country.

As I have done intensive work in my private practice over the last several years, I have seen the powerful impact of meeting clients concerns, with the corresponding level of treatment. Just as important for me though, is that intensive work has given me the gift of moments of deep fulfillment. Those moments have continued to help reinforce for me that this is exactly what I am supposed to be doing. From this experience, I have developed training to help therapists learn how to do intensive work in their private practice. I am passionate about this work because of how it has impacted me, and I genuinely want that for you as well. It's much more accessible than you think. I'd love to show you how!

EDUCATION AND CREDENTIALS

I am a counselor and the co-owner of a private practice group with multiple locations. I also coach/consult other therapists on how to add intensive work to their practice, as well as helping them find their own new paths. I have an expertise in experiential methods and intensive therapy for individual clients, couples and groups.

I received my Master of Arts in Counseling from Gordon Conwell Theological Seminary. My subsequent training and experience includes Psychodrama and Experiential Therapy training at Onsite Workshops and experience as an intensive therapy provider with the nationally recognized programs at Onsite Workshops and Bethesda Workshops. Additionally, I offer intensive therapy as a regular part of my private practice. My additional certifications include: Certified Sex Addiction Therapist; Levels I, II, III of Gottman Method Couples Counseling; and Level I, II of EMDR.

My work includes contributing as a national and regional conference speaker and co-founding the NC Association of Christian Counselors. My media appearances include podcasts, magazine articles and over 100 television segments aired with the local NBC affiliate on mental health and relationships.

INTRODUCTION

One of the first intensives I led took place during four days in the fall of 2013. I had been working with a male individual client, and he had done great work. As our time was ending I asked what he wanted to do with the index cards that contained the fears he had been working on. "Can I burn them?", he asked.

"Of course", I said . On that fall day, this client reverently burned cards that held burdens he had carried for much of his life. The cards represented the pain and struggle, but the fire represented the work he had done over the three days of our intensive to release those burdens.

Later that day he gave me a hug and with peacefulness and gratitude said, "Thank you so much Mike for this week!"



"The best moments usually occur when a person's body or mind is stretched to its limits in a voluntary effort to accomplish something difficult and worthwhile."

— Mihaly
Csikszentmihalyi,
Flow: The Psychology of
Optimal Experience

I share this example to illustrate the power of this work. Since that time, I have had many similar moments with intensive clients. If he and I had not journeyed the previous three long days together, I don't believe either of us would have appreciated that moment in the same way. I was new to the Intensive game then and so suffice it to say both he and I had been stretched. I had also experienced something else as well, and that is the profound fulfillment of intensive work. I knew, even then, that my career trajectory had been altered. I knew I had to add intensives to my practice.

Intensive therapy in an outpatient setting is going to vary by therapist, but typically **is an extended period of time (4 hours to multiple days) with a single client (individual, couple, group)**. Usually this time is consecutive. For example, a therapist might work with the same client all day for two days in a row.

As incredible as these moments are, intensive work can be as equally daunting to embark on, as it is tremendously powerful to practice. There is research around the effectiveness of providing intensive outpatient therapy for clients in private practice, (Wise, 2005) but little has been written on how to conduct intensive work.

I have heard common fears from therapists regarding intensive work through the years. They are things like “what would I do with someone for six hours a day?” and “what if we run out of things to do halfway through?” I very much understand those concerns because I had them as well before I started this journey. Let me address those fears right away with what I call the *Intensive Paradox*.

THE INTENSIVE PARADOX

It has been fascinating to me in my journey of offering intensives to discover that the fears I initially had were not only unfounded, but the truth was quite the opposite. While the intensive provides more time on a given day with a client, that time becomes more productive than that same time with multiple clients in a traditional setting. Additionally, the overall satisfaction and reward for both client and therapist often far outweighs the momentary intensity. I have never experienced a lack of things to talk about with an intensive client and neither will you. The nature of this work is such that topics flow out easily and energy is constant. Therefore, it turns out many of our fears about intensives are more myth than reality.

Let me say a few words here about my journey of being trained to do intensive work. Before leading my first intensive, I did roughly 100 hours of training and

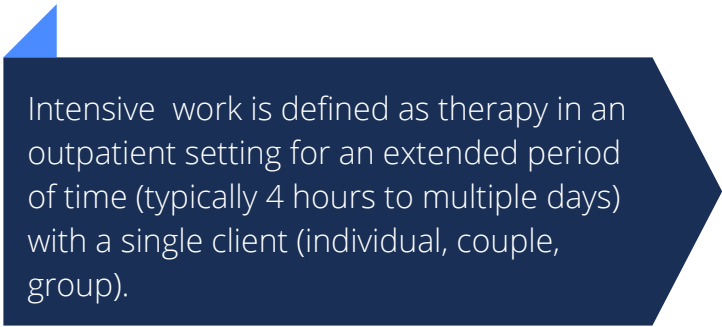
internships on intensive therapy. Since then I have spent at least a 1000 hours leading intensives, if not more. I am grateful for my time at excellent intensive providers like Onsite Workshops and Bethesda Workshops. What I learned at those places has helped me refine my intensive process and allowed me to see how many, different types of therapists do intensive work. As I write from my experience in this resource, I am drawing from my own and others' knowledge with the fervent hope that it helps simplify the intensive process and makes intensive therapy much more accessible to therapists everywhere.



In this resource, I will answer six basic questions about Intensives to help you examine how to best implement them within your own practice.

1. How does Intensive Therapy compare with traditional therapy?
2. What are some of the particular advantages of Intensive therapy?
3. How are Intensives structured?
4. What business considerations do Intensives require?
5. What clinical considerations do Intensives require for me and my clients?
6. What are the stages of Intensive work?

Obviously, any resource has limitations and this one is no different. It is not intended to be the beginning and end on how to do intensive work, but is designed to help you think through what it will take to do intensive therapy. I hope that it gives helpful information, sparks your creativity and ignites the initial steps of adding intensive therapy to your practice.

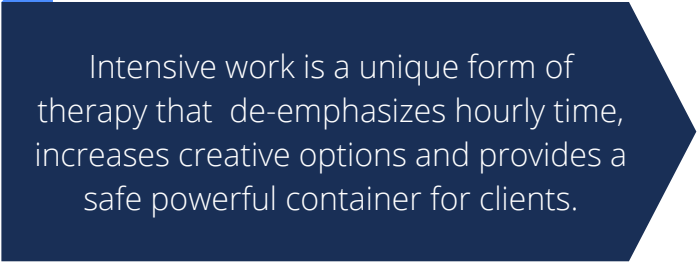


Intensive work is defined as therapy in an outpatient setting for an extended period of time (typically 4 hours to multiple days) with a single client (individual, couple, group).



SECTION 1: THINK DIFFERENTLY

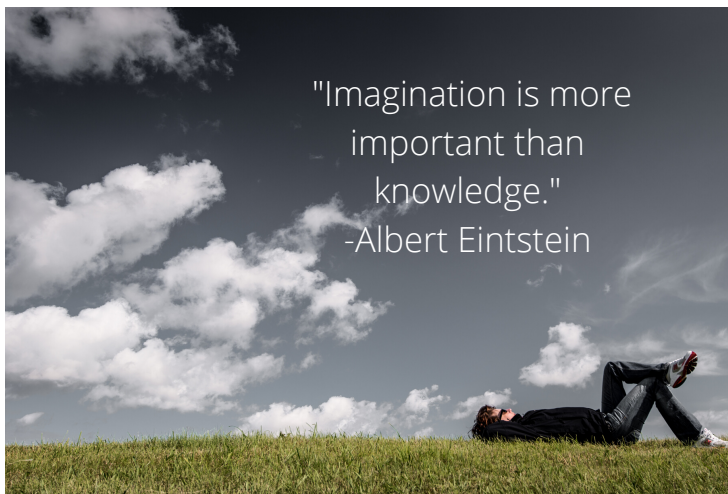
I think one of the biggest hindrances therapists encounter with intensive work is that they think through the lens of the typical 50 minute session. In reality, though traditional sessions inform elements of intensive work, intensives are not just six -50 minute sessions stacked on top of each other. Instead, Intensives release the focus on time and allow the therapist to be present without the burden of clock management. This also allows the client to get “lost” in the work; which I believe is safer and more effective for certain clients and issues. Therefore: intensive work is a unique form of therapy that de-emphasizes hourly time, increases creative options, and provides a safe powerful container for clients. The components of this container often unlock areas for clients that they have found it difficult to address in traditional therapy. It is common for me to get to deeper places with clients in the first couple of hours of intensive work than I can in an equivalent time with 50 minute sessions.



Intensive work is a unique form of therapy that de-emphasizes hourly time, increases creative options and provides a safe powerful container for clients.

TREATMENT MODALITY

I have found it helpful to approach intensive work as a *treatment modality* rather than simply a format. As such it is necessary to incorporate elements into my intensive approach that fit this unique form of therapy. That is to say that we should analyze any treatment approach first for how it fits the intensive model and not the other way around. For example, if I use cognitive behavioral therapy (CBT) in my private practice, I have to consider whether that is a modality that will fit into intensive work. I believe most intensive models are composed of various modalities but what links them is that they have to be flexible, varied, and adaptive. Additionally, they have to be woven together to form one cohesive approach that works with the uniqueness of the intensive concept. I have developed an approach that works for me through trial and experience. Extended time with a client requires us to think outside the traditional session box, employing different components than traditional therapy. It requires us to have multiple tools in our tool chest.



For me one of the most important of those has been using experiential therapy. I also use modalities like EMDR, Gottman method for couples, IFS and others. It is not uncommon for me to use a number of these in one intensive, switching back and forth between them as the work calls for. This is all to say that I believe *intensive work is, by its nature, a varied approach to therapy*. With that, it calls for diversity in our treatment plan. I suspect that many therapists use a varied approach to treatment in their traditional practices, but intensive work typically *requires* multiple approaches all during the same intensive period. Having the time to move in and out of various types of therapy as I flow with the client and their work has opened the door for some of the most imaginative and creative seasons of my therapeutic work.

QUESTIONS FOR FURTHER EXPLORATION

1. What are the top three types of therapy I most often use in my traditional practice?
2. Would those methods work well in an extended intensive with a single client, couple or group?
3. How might my preferred therapy approaches work together in an intensive model?



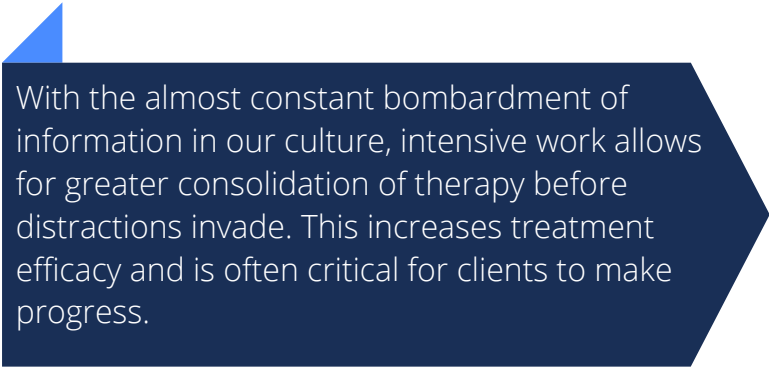
SECTION 2: WHY WE DO IT

CLIENT BENEFITS OF INTENSIVE WORK

Over my time as a therapist, especially at the beginning, I found there were issues clients presented in therapy that traditional therapy was less equipped to handle. One of the great benefits of intensive therapy is that it allows us to match the level of care for the level of concern our clients bring to us. I have found this to be particularly true with couples and addiction work. My guess is that many of you would have loved to have had more time with certain clients to really help them dig into their work and get further before it was time to stop the session. I know I have felt that desire many times. The ability to have a range of time we can spend with clients is not only great care for them but improves our experience as well.

Along with higher level care, intensive work allows for a “therapeutic bubble” around clients. With the almost constant bombardment of information in our culture, intensive work allows for greater consolidation of therapy before distractions invade. This increases treatment efficacy and is often critical for clients to make progress.

Increasingly I have discovered that many clients find intensive work easier to attend than weekly sessions over multiple months. Many prefer to take a day or two off of work for an intensive rather than find one to two hours a week to attend typical sessions. Based on working time alone, we know that a 3-4 day intensive is the equivalent of 6 months (at least) of traditional therapy. Finding childcare, taking weekly time off of work and other hindrances make intensive work more appealing to many clients. I will talk later about “selling” intensive work to clients but both level of care and convenience are two big reasons intensive work allows clients to receive high value for their money.



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Society is primed for intensive work. We live in an age and nation that has grown more accepting of therapy. Millennials, especially, are helping to normalize therapy due to their focus on mental health and self improvement. (Drexler, 2019). As more people are motivated to pursue therapy, they are likewise becoming receptive to new forms and structures of therapy. I have also found that clients “experience” intensive work in deep ways, which aligns with what many in our culture are looking for in all they do. That is, they are looking to connect deeply with an experience (and others), whether that be taking a picture of their dinner or hiking a national park. I believe intensive work follows where our culture is going and presents treatment that connects with it.



THERAPISTS BENEFITS OF INTENSIVE WORK

Throughout this work, I will be presenting the benefits of intensive therapy for therapists. I (and many I know) have experienced all of these benefits at different points. I list them here as a way to emphasize them. I realize that not all of these will be true for every therapist but believe that most will. For me, intensive work has infused my practice with energy and healthy challenge. It is very rewarding to be able to offer a client a level of therapy that they desperately need.

Benefits For The Therapist

- Increased therapeutic effectiveness
- Increased client referrals due to unique specialization
- Increased income potential
- Increased satisfaction/fulfillment with work

QUESTIONS FOR FURTHER EXPLORATION

1. With what percentage of my caseload do I often find myself desiring more therapy time?
2. With which presenting issues do I often wish I had more time to work?
3. What common schedule hindrances prevent clients getting to therapy?



SECTION 3: STRUCTURE

One of the most intimidating elements of providing intensive therapy is how to plan for and fill six hours of therapy (a day) with one client (or couple, group) and then repeat that for multiple days. If you have found that you get stuck there, stay with me as we explore how to organize your day to provide the right space to do amazing work.

LENGTH OF EACH DAY

The first thing to consider is how many hours constitute a typical intensive day. The good news is that there is not a right or wrong answer here but more a determination of each counselors' comfort level. Remember the Intensive Paradox from earlier? Imagine working for 6 hours but having the energy output equivalent to 3-4 hours of traditional therapy? This is the fascinating paradox of intensives. Work longer with one client, accomplish a significant amount, and often finish with

“There’s only freedom in structure, my man.
There’s no freedom in freedom.”
-Branford Marsalis



energy to spare. I don't mean to convey here that intensive work is not intense. It is! What I do hope to convey is that while clients and counselors leave a day tired, they are usually more fulfilled and deeply energized. With this in mind, let's look more closely at a typical day.

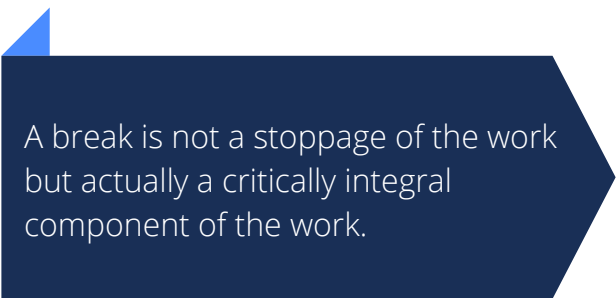
When deciding how long to make your standard intensive day, consider a few things. First, how many clients do you usually see in a day? Is four sessions a full day? Is eight a full day? The answer to this will inform how to set your standard intensive day. Remember that intensive work can “feel” very different from traditional therapy in that time is much less a factor and the fatigue of managing the clock is largely removed from intensive work. As it is removed, it clears the space to work longer than one might during a traditional day. With that said,

if you typically see 3 clients a day, I wouldn't start intensive work by offering a 7 hour day. In my survey of intensive providers, the average intensive day typically runs between 6-8 hours. My standard intensive day is 6 therapy hours with an additional hour for lunch so it is a 7 hour scheduled day.

Even though I have a standard intensive day length, I sometimes amend that based on the type of work I will be doing. For example, not long ago I did an EMDR trauma based intensive with a client but only did 4 hours a day because that client needed more time to recover from the work. In this example, doing a 6 hour day would have been too emotionally taxing for that client. Most of the time the issue being worked on does not affect the overall length of the work day. From time to time, though I adjust the overall length of a day or the number of days we spend together.

BREAKS

Once you determine the length of your standard intensive day, there is another important structural element to consider. Breaks are a very important part of an intensive. A break allows the counselor and client a chance to renew, refresh, and work more effectively. A break is not a stoppage of the work but actually a critically integral component of the work. It is important to understand this because if you don't, you may be tempted to work in a diminishing way to you and your client.



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but actually a critically integral
component of the work.

There is solid research that indicates the brain goes through different cycles every 90 minutes and as such, needs a 20 minute break in between (Buzzard, 2017). A break resets the brain, allowing for mental and emotional renewal. One way to look at this is that breaks do not pause the work but actually make the work go faster, and more effectively. It's yet another paradigm shift, but a critical one. I try to take a break every 90 minutes for at least 15 mins, and then I take a break for lunch for an hour. I instruct my clients to try not to process over lunch but instead to take a true mental break from therapy. (I know it's not always that easy but a good reminder.) I also typically order my day to do more work before lunch and less after. My standard day consists of 4 hours in the morning, a break for lunch and then 2-3 hours after lunch with small breaks throughout. It can be very important to educate clients about the need to have proper breaks and the way it facilitates (not detracts) from the therapy.

SAMPLE DAILY SCHEDULE / OUTLINE

Start with meditation each day (10 minutes)

8:00am	<i>Therapeutic Work</i> <ul style="list-style-type: none">-Goals/Expectations-Core fears exercise/Conflict cycle
9:30am-9:45am	Morning Break
9:45am-12:00pm	<i>Therapeutic Work</i> <ul style="list-style-type: none">-Check on safelist topics and conversations with those topics-Carpet connection test-Landmine exercise
12:00pm-1:00pm	Break for Lunch
1:00pm-2:00pm	<i>Therapeutic Work</i> <ul style="list-style-type: none">-Observations from morning work/Check In-Trauma psychoeducation
2:00-2:15	Break
2:15-4:00	<i>Therapeutic Work</i> <ul style="list-style-type: none">-Trauma eggs
4:00pm	End of Day

All times are approximate depending on clinical considerations. Additionally, there are at least 2 other short breaks (5-10 mins) throughout the day.

INTENSIVE SETTING

Once you've figured out how long you want to make your intensive, and how to structure breaks, you'll need to decide where to do the work? While it's easy and most expedient to hold an intensive in your office, that may not be the best choice. Remember, an intensive is fundamentally different than traditional counseling (in some ways). As such, you should consider what your experience of being with the same client for multiple hours at a time will be like for you and let that inform your choice of office space. Without the hourly exchange of different clients, a small office can feel smothering due to the intensity of the work; however, consider your own personal preference and to some degree your clients as well.

If you conclude that you would like to work in a bigger space there are options to explore. Often, hotels will rent auxiliary conference rooms that are unused. There are sometimes rooms at churches, or civic centers as well. Other counselors with large offices may rent their space if they aren't using it. Before having a larger office, I used the shared conference room in my office building. The caveat to this could be the type of work you're doing. I have found that for the vast majority of my intensive work, I have needed a good amount of space because I utilize experiential therapy; however, for some of my



intensives, like those using EMDR, a smaller office is fine. If you do decide to use a different location for your intensive work, be sure any confidentiality/privacy concerns are addressed in advance.

In addition to the size of the office, you also want to consider how you set up your work space. Since this will be a “home away from home” for your clients for several days, it’s good to think through facets that will make them most comfortable. You may choose to offer drinks throughout the day or even have light refreshments available. Many office buildings have poor temperature control, so I advise clients to dress comfortably and wear layers. I realize that these may seem like granular details, but it is the sum of all the parts (however small) that create the potential of the work.

TOTAL INTENSIVE LENGTH

Finally, you'll want to determine the appropriate length of time for an intensive. Surveying the landscape of intensive work from individual practitioners to workshops across the country, I have learned that the typical length ranges from 2 days to 14 days, averaging out at 3-4 days. The average length of my intensive work is 3 days, ranging from four days at most to as short as four hours. In my practice, I consider anything over 4 hours at one time to be intensive work, requiring the Intensive model that I have outlined. This will be somewhat different for everyone. An important component to consider when planning for the overall intensive length is, of course, both the client and the issue being worked on. For example, due to the complexity of most couple's work, a typical couple's intensive will be 3-4 days. On the other hand, if I am working with an individual to explore family of origin impacts, I might only spend one day with them. When deciding with a client about the best length, consider their goals and how long it will take to accomplish them.

QUESTIONS FOR FURTHER EXPLORATION

1. How many clients do I average a day, over a typical week?
2. Is this too much, too little, or the right amount?
3. What do I believe would be a good length, per day, for intensive work?
4. Does my office seem like the right space to spend extended time with a client?
5. What is the total time for an intensive that, on average, would allow me to adequately address the issues my clients present?



SECTION 4: BUSINESS CONSIDERATIONS

Let's discuss an important part of intensive programs that can be challenging for therapists. Components we will look at here include; payments, insurance, cancellation policies, marketing and forms.

SETTING INTENSIVE RATES

Let's look at how to price your intensive work. One way to calculate your rate for an intensive is to take your traditional session rate multiplied by the number of hours in the intensive. I would encourage you to consider pricing your intensive work differently though. It's certainly relevant to consider the costs you incur associated with doing intensive work. Those costs might include tangible things such as renting different space, materials for exercises, and also intangibles like the time you have invested to be able to do intensive work.

This could also include money that you have probably spent becoming knowledgeable in this modality through training. (I offer various levels of training.) Remember that time we spend training has not only the direct cost of the training but usually the lost revenue from not seeing clients while training (for those in private practice). Doing intensive work is a skill set that is not widely held in our profession. The relative uniqueness of this skill should be considered during the pricing phase as well. For me those were all important considerations as I arrived at what to charge my intensive clients.

Also in order to compare apples to apples here, think about the standard session length in traditional therapy. In my practice that is an average 52 minutes whereas my intensives are a full 60 minutes, of course. For example, if I do six- 52 minute sessions a day that is my hourly rate/52 mins, but to compare fairly I need to take my intensive hourly rate/60 mins and see what the per minute rate of each is. That means that unless you see traditional clients for only 60 minutes a day, you might be making less to do intensive work based on the actual amount of working minutes! To keep pricing consistent, first calculate your rate per minute rather than per session. Currently I use a set, daily intensive rate that is roughly 20% more than my hourly rate because I believe the time, costs, and specialization of intensive work warrants it. Pertinent to this discussion is the idea of value and I will address that later.

DEPOSITS AND CANCELLATION POLICIES

In traditional therapy there is no need to take a deposit for our work as we are paid at the time of service, but that's not true of intensive work. For many therapists in private practice, a multi-day intensive will typically include some part of their normal work week. That requires sacrificing from other clients in the traditional practice. Because of this, I believe it is important to take a deposit and I have a policy for deposits. Without this, if a client ends up cancelling an intensive, you could incur quite a bit of lost income. I have a set deposit policy that I adhere to strictly. I take a deposit of half the intensive that is payable no later than 3 weeks before the intensive. This is non-refundable except for extreme circumstances.

To set your cancellation policy, consider the way you work. For example how long does it take you to fill two to three days on your schedule with individual clients? If it takes three weeks typically to fill those spots you may want to consider making your cancellation policy at least 3 weeks. This will allow you time to fill those spots should an intensive client cancel. The good news here is that cancellations with intensive work are less frequent than traditional therapy for many reasons. It does happen though, and so there should be a defined plan for how it works if it does.

MARKETING

For marketing, keep in mind that intensive work is far less widely known to counselors and the public than traditional therapy. Marketing intensive work well requires more proactiveness than typical therapeutic services, and a good marketing approach has to bear this in mind. I like to conceptualize my marketing strategy as concentric circles moving outward from myself. I start all of my intensive therapy marketing with my current traditional individual clients. In my first session with them at the end I always make it a point to let them know I have a range of therapeutic offerings. Many have been surprised to learn they could see me more frequently than just one session a week. Additionally, as clients do intensive work with you they will act as marketers for your intensive work as well. The next circle out for me is letting other therapists know that I offer intensive work and the types of issues that I work with in an intensive

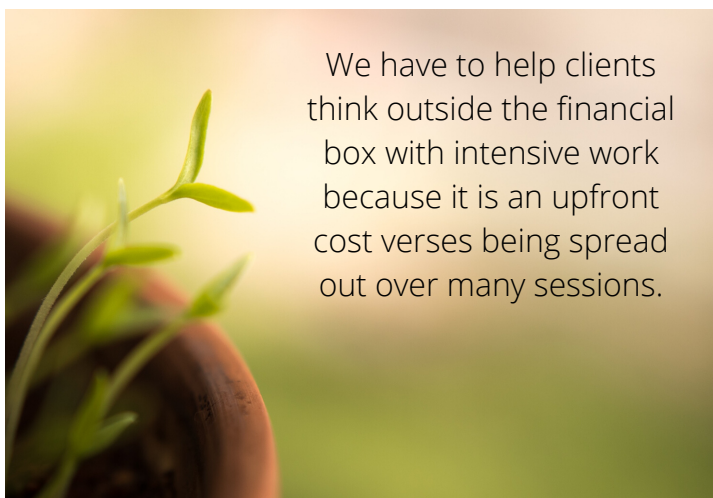


format. (It is important to have a policy regarding future work with a client that is referred to you by another therapist. My policy is that I will not do ongoing counseling with a client that is referred to me from another therapist after the intensive is over. Without such a policy, other therapists will be reticent to refer to you.) In addition to other therapists, I also make my intensive work known to all of my referral sources. These include physicians, pastors, etc. The next circle out from there is the internet. This of course primarily includes my website with SEO keywords built in specifically around intensive work.

INSURANCE/COST

Let's now talk briefly about insurance and forms. Typically most insurance carriers will NOT pay for more than 1 hour of individual therapy per day. It is highly unlikely that any of your clients will be able to get their insurance company to pay for intensive work with you. That means of course that most of your intensive clients, if not all, will have to self-pay to see you. That will certainly be a sacrifice for some clients. For others it may simply be prohibitive. If you practice in an area where clients truly cannot afford to self-pay for therapy you may want to consider seeing a client for an hour a day for 4 or 5 days in a week as a compromise. Most insurance companies will cover this, and it will still accelerate your work with your client. In some parts of the country, organizations like churches and nonprofits

may help subsidize counseling, and those avenues should be explored by the client as well. I am very aware that there are clients in all of our communities that truly cannot afford to self-pay for services. I am also aware that there are many clients that SAY they cannot self-pay for our services but actually can. I have had honest conversations with clients about the genuine value of intensive therapy and then helped them explore whether they might be able to make some sacrifices to allocate the funds to pay for their intensive work. That may mean they schedule an intensive with you a few months in advance to allow time to save or re-allocate the money. The point here is that we have to help clients think outside the financial box with intensive work because it is an upfront cost versus spread out over many sessions. Because I have seen the enormous value of this work, I am confident as I talk to clients about the financial investment and the return they will gain.



We have to help clients think outside the financial box with intensive work because it is an upfront cost verses being spread out over many sessions.

FORMS

As for client forms, it's certainly possible to use the standard form you have for traditional clients but considering that some of your intensive clients may not be current clients of yours, you may want to have a form that is more exhaustive. The workshops and therapeutic centers across the country that primarily do intensive work typically have a thorough intake form including background information, family of origin information, current presenting problems, and many other biopsychosocial components. An additional form I use is a continuing care form. A continuing care form is especially critical if the client is not going to work with you on an ongoing basis after your time with them. Another client form I use is a goals covered form that you can send to a referring therapist to give them an idea of what their client worked on with you. This is very helpful for other therapists who send clients to do intensives with you and helps promote future referrals.

Essential Forms:

Thorough Intake Form

Aftercare Form

Referring Therapist

QUESTIONS FOR FURTHER EXPLORATION

1. What rate should I set for a standard intensive day?
2. Based on my reading, what is an appropriate cancellation policy and deposit policy?
3. Of my potential referral sources, who would be the best to begin marketing my intensive work to?



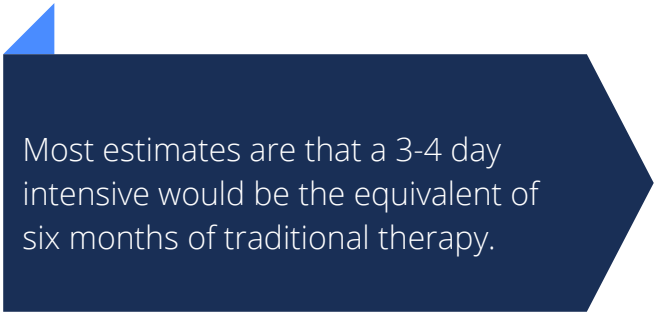
SECTION 5: CLINICAL CONSIDERATIONS

While intensive work is powerful and applicable for many, it isn't right for all clients or situations. For anyone in private practice, our ethics mandate that we tailor our goals and treatment to serve the client in the best manner. Intensive work is not indicated for some clients. Firstly, consider if the client can tolerate sustained, intense work over multiple hours. This is why it's important to have either thorough intake paperwork or professional experience with the client. When I work with a client that is not part of my traditional therapeutic practice, I always do at least a 1 hour consultation / screening session with them to help determine their suitability for intensive work. This is in addition to my comprehensive intake form. I recommend the screening process should also include talking to a referring

therapist if that is applicable. (A more detailed examination of contraindications to intensive work is beyond the scope of this resource but can be explored in individual coaching or supervision.)

EDUCATING THE CLIENT

The next step is to consider how to talk to clients about intensive therapy. I like to educate clients about the value of intensive work, meaning the amount of work done compared to the length of time that same work would take in a more typical therapy approach. Most estimates are that a 3-4 day intensive would be the equivalent of six months of traditional therapy. Again, here is where an hour of intensive work is not the same as an hour of individual work. Intensives are often more efficient. The session's momentum doesn't slow and less time is spent opening and closing multiple sessions. This concentration of focused time is powerful and can lead



Most estimates are that a 3-4 day intensive would be the equivalent of six months of traditional therapy.

to significant progress. Also in terms of direct time comparisons I've calculated that over a typical 6 hour intensive day there are sixty more minutes of working time than six traditional 50-minute sessions. If you multiply that over multiple days it is easy to see how the equivalent to multiple months of traditional therapy works out.

Earlier we looked at the fact that most clients will have to self-pay for intensive therapy with you. Part of educating clients about intensive work is helping them work through the upfront cost of intensive work versus spreading that cost out over 6 months or a year of therapy. It can be very helpful to help them understand the actual amount of therapy they will be receiving.



PREPARING THE CLIENT FOR THERAPY

Let's now look at the client's process of preparing for intensive work. I try to stay mindful here that for many clients, even the process of filling out thorough intake paperwork is the beginning of a very intensive process as it often brings up feelings for them and is an indirect way of processing. Beyond that, depending on the type of intensive work I will be doing, I often give clients pre-work to do before the intensive starts. Examples of pre-work can be as simple as thinking more completely about goals for the Intensive or more complex exercises like a relationship timeline, trauma egg, or drawing a family of origin atom, for example. Typically, any pre-work I give is based on my screening and will be used during the first day of the intensive. As the intensive progresses,



I sometimes give additional homework as well. Examples of pre-work (or homework during the intensive) you might give your clients will probably be drawn from the type of supplemental work you typically give clients. To come up with some of the exercises that would fit your intensive practice, simply draw upon what you already do.

I almost always educate my intensive clients about the way the intensive process works. This includes issues like the stages of intensive work (which I will go over later) and what to expect emotionally and physically throughout our time together. We talk about staying emotionally safe. Part of safety of course is what the client does in the evenings after the Intensive day is done. When doing intensive work in a private practice setting I almost always recommend my intensive clients stay at a hotel for the duration of their intensive. I find this to be very important for a few reasons. The first is that it is clinically very helpful to create a small bubble around themselves and away from their typical distractions in order to be fully immersed in the Intensive experience. I have also observed with my clients that taking a defined break from their usual lives helps them feel more safe during the Intensive and increases the experiential effect of intensive work. My overarching goal is for my clients to have emotional safety wherever

they stay. Out of town clients will obviously not be at their homes and so it is an important clinical matter that you discuss with them where they will stay. I have a set list of hotels/restaurants, etc. but I still make it a point to discuss their plans in advance of them making them. When clients travel from another state to do an intensive with you, be sure to follow all the appropriate licensing requirements for your state and check with the licensing board of the state the client resides in.

As I do with my traditional therapy clients, I make sure that intensive clients have appropriate access to me during the evenings should a problem arise. Since the emotional nature of intensive work can be more heightened, I talk with clients about the scenarios in which they might need to call me. This again, is particularly relevant for those clients that are seeing you from out of town.

As helpful preparation for intensive work is for clients, it is equally as important that there is a good plan for what happens after an intensive. Every client that does an intensive with me receives a continuing care plan. Examples of areas covered by the plan are: the arrangement for the continuation of therapy (typically in a more traditional sense), recommendations for community support (i.e. 12-step groups, divorce care, grief share, etc) and self care suggestions.

QUESTIONS FOR FURTHER EXPLORATION

1. What would a comprehensive screening process for intensive clients look like for me?
2. What are my personal feelings about clients self-paying for intensive work?
3. What examples of pre-work might be helpful for my clients?
4. What elements will I cover with clients about emotional safety during the evenings?



SECTION 6: STAGES OF INTENSIVE WORK

Much like the rest of life, intensive work progresses through stages. In Silicon Valley there is a popular phrase called the “Trough of Sorrow”. If you were starting a business in the valley you probably would’ve heard others talk about this. It is essentially the idea that as you are starting a business there is the initial emotional boost that comes from embarking on a new adventure, but it’s quickly followed by a trough that is created through the inevitable hardships of starting a business. It’s anecdotally known that if you follow this “trough” down and get to the bottom, but don’t stop, and keep persevering, you’ll most likely experience an upward trend from there as the business begins to become mature. I think this idea is also true of intensive work (and traditional therapy as well). I will often draw a version of this idea on my whiteboard for clients as it applies to therapy and particularly what it might look like in our three to four days together.

ORDER, DISORDER, REORDER

I like to layer on top of this the understanding that most intensives follow the “Order → Disorder → Reorder” stages (Rohr, 2017). Most clients will begin intensive therapy with life ordered in a certain way. It is usually a way they have been coping with life for a long time, and this coping strategy is typically part of the problem they are presenting. While this way doesn't completely work for them (or they wouldn't be there) it is familiar and comfortable. As they begin their intensive therapy journey, they quickly pass through the “high” of beginning the work and enter into the transformative work that occurs during the DISORDER phase.

This phase of the work can be very dysregulating and unsettling. The old ways of coping, thinking, and feeling are being stripped away and new structures are being built. In practical terms, the disorder process is typically the first day or two days of a 4 day intensive. During the disorder phase, I often talk to clients about the phases of the work and encourage them to persevere until the next phase: the rebuilding or REORDER phase. The reorder phase is where clients consolidate the processing work they've done and the healing they've undergone, beginning to translate that into how life will be

different going forward. This is usually the last day and a half of a four day intensive and is often accompanied by the noticeable reduction of dysregulation.

In many ways, these stages are a lifelong process, but I have seen my clients go through these stages in almost all intensive work. Most of the time I talk to them at the beginning of the Intensive about the stages of the work so that they know what to expect. This is especially true for the transition from order to disorder, which is usually the most distressing part of intensive work. Clients often need the hope that comes with knowing this is hard, but to be expected.

THE STAGES OF INTENSIVE WORK

Order, Disorder, Reorder

Order →	Disorder →	Reorder →
Original thoughts, beliefs, and coping mechanisms established in formative years and reinforced in early adulthood.	Examination, challenge, and discarding of original order.	Adoption of healthier patterns of thinking, and behavior; clarification of authentic self.

Understandably, clients often OVERESTIMATE the amount of work they will be able to address during their intensive time. It's critical for us to help them understand the time it takes to get to the bottom of issues and then work back up. I often draw on my understanding of the stages of the work to help them arrive at proper expectations.

On the surface, it appears that managing our clients' expectations of their intensive work is about minimizing frustration. In reality, it's far more important than that. It is actually about clearing mental obstacles so they can work at their best. Understanding the intensive stages paradigm, and then explaining it to your clients will help you work effectively and maximize your client's time with you.

WARM UP AND TRANSITIONS

On a practical note I start all of my intensive days with a warm-up exercise, which might include a meditation, a song, or a small experiential piece that helps the transition from outside the office to the therapy work. A warm up can be anything that prepares the client for the therapeutic work and typically involves activation of both sides of the brain and body. I use a similar exercise to transition back after breaks and then at the end of the day to close the work. Transitions are an important part of all of our lives, so given the intense nature of this work, it's important to facilitate a warming up and closing down to the day.



SECTION 7: CONCLUSION

This book is designed to initiate the process of thinking through the different elements of offering intensive therapy. I sincerely hope that it has helped take some of the mystery out of intensive work and opened up the possibility to begin offering your version of intensive therapy in your practice. While intensive work is not for every therapist, we need more therapists like you doing this work and making powerful impacts in our communities. It is challenging to start something new that requires vulnerability and willingness to overcome fears. I sincerely hope this resource has informed you, challenged you, and decreased your concerns, and you can be released to serve your clients and energize your practice.

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ABOUT THE AUTHOR



Mike Vaughn, MA, LCMHCS, CSAT helps therapists use their passions and gifts to develop a plan to optimize their practice. His coaching and resources help therapists learn how to include experiential therapy and intensive therapy in their own practice. He also provides Experiential Coaching for counselors looking to add new elements to their practice.

While counseling is Mike's passion professionally, he also takes great joy in his family. Mike has been married over 20 years and has three kids. He and his family currently live in the Charlotte, NC area. He is an avid outdoorsmen and loves to travel to new places.

For more information about coaching, training and speaking, or if you would like to interview Mike as a guest on your TV show, radio or podcast please visit:
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