

*is a systematic or emerged way of performing strategic planning in the organization through initial assessment, thorough analysis, strategy formulation, its implementation and evaluation. What is that strategic planning process?*

Creating a Vision and Mission statements. The starting point of the process is initial assessment of the firm. What does an organization want to become? Vision is the ultimate goal for the firm and the direction for its employees. Thorough mission statement acts as guidance for managers in making appropriate decisions. Internal environment analysis, External environment analysis and Competitor analysis Tools used: During an external environment analysis managers look into the key external forces: Micro environment affects the company in its industry. Competition is another uncontrollable external force that influences the company. A good example of this was when Apple released its iPod and shook the mp3 players industry, including its leading performer Sony. Firms assess their competitors using competitors profile matrix and benchmarking to evaluate their strengths, weaknesses and level of performance. An organization holds both tangible resources: Successful situation analysis is followed by creation of long-term objectives. They act as directions for specific strategy selection. In an organization, strategies are chosen at 3 different levels: This type of strategy is used when strategic business units (SBU), divisions or small and medium enterprises select strategies for only one product that is sold in only one market. The example of business level strategy is well illustrated by Royal Enfield firms. They sell their Bullet motorcycle one product in United Kingdom and India different markets but focus on different market segments and sell at very different prices different strategies. At this level, executives at top parent companies choose which products to sell, which market to enter and whether to acquire a competitor or merge with it. They select between integration, intensive, diversification and defensive strategies. The main questions to answer: Which new markets to develop and how to enter them? How far to diversify? Thompson and Martin, p. Policies, Motivation, Resistance management, Leadership, Stakeholder Impact Analysis, Changing organizational structure, Performance management Even the best strategic plans must be implemented and only well executed strategies create competitive advantage for a company. At this stage managerial skills are more important than using analysis. Communication in strategy implementation is essential as new strategies must get support all over organization for effective implementation. It consists of the following 6 steps: Setting annual objectives; Revising policies to meet the objectives; Allocating resources to strategically important areas; Changing organizational structure to meet new strategy; Managing resistance to change; Introducing new reward system for performance results if needed. These smaller objectives are specifically designed to achieve financial, marketing, operations, human resources and other functional goals. To meet these goals managers revise existing policies and introduce new ones which act as the directions for successful objectives implementation. The other very important part of strategy implementation is changing an organizational chart. For example, a product diversification strategy may require new SBU to be incorporated into the existing organizational chart. Or market development strategy may require an additional division to be added to the company. Every new strategy changes the organizational structure and requires reallocation of resources. It also redistributes responsibilities and powers between managers. Managers may be moved from one functional area to another or asked to manage a new team. This creates resistance to change, which has to be managed in an appropriate way or it could ruin excellent strategy implementation. Due to constantly changing external and internal conditions managers must continuously review both environments as new strengths, weaknesses, opportunities and threats may arise. If new circumstances affect the company, managers must take corrective actions as soon as possible. Usually, tactics rather than strategies are changed to meet the new conditions, unless firms are faced with such severe external changes as the credit crunch. Measuring performance is another important activity in strategy monitoring. Performance has to be measurable and comparable. Managers have to compare their actual results with estimated results and see if they are successful in achieving their objectives. If objectives are not met managers should: Change the reward system. Introduce new or revise existing policies. Different models of the process There is no universal model of the strategic management process. The one, which was described in this article, is just one more version of

so many models that are established by other authors. In this section we will illustrate and comment on 3 more well-known frameworks presented by recognized scholars in the strategic management field.

## 2: How to Write a Mental Health Assessment: 13 Steps (with Pictures)

*Case Formulation* – Case formulation is a core clinical skill that links assessment information and treatment planning  
– It is a hypothesis about the mechanisms.

Such comments are not only anxiety provoking for the candidate but also reflect an unnecessarily rigid point of view. Instead, it is more appropriate to provide flexible guidelines on formulation for examiners and candidates, in order to facilitate a discussion about the patient and his problems, which after all, is the purpose of a clinical examination. Its length, layout and emphasis will vary considerably from one patient to another. It should always include the following: Twenty four examiners of the Royal Australian and New Zealand College of Psychiatrists were asked to rate twelve diagnostic formulations. Correlation between the ratings of the examiners was high. If a statement on aetiology is made, especially if a psychodynamic understanding is attempted, this should be stated in ordinary language, avoiding jargon. Unlike summary, it is a discussion about alternative ideas about diagnosis, aetiology, treatment and prognosis and of the arguments for and against each alternative. A good formulation is based on the facts of the case and not on speculation. It may contain verifiable hypotheses about matters that are uncertain at the time of writing. General principles

Formulation is about an individual patient. General psychiatric knowledge should be introduced only when relevant to the particular case. It should not sound like a textbook description of a psychiatric disorder. There is a fairly well-accepted structure for the formulation - but one should be flexible in its use and adapt it to suit the individual patient. For example, if the patient is unable to give a good account of the presenting problem, more attention should be paid to the MSE, and during the discussion on management, emphasis should be on how to obtain further information. The duration of the presentation of the diagnostic formulation should last about 5 minutes, but one should be prepared to increase or reduce it, depending on demand from examiners. Generally, the recommended length for a written version is one side of an A4-sized paper. Present the salient socio-demographic features of the patient e. This section should be brief; state the main problems excluding irrelevant details e. Mention events closely related to the onset or exacerbation e. Avoid long lists of minor or transient symptoms and negative findings except those that will help in the differential diagnosis. Past history of psychiatric disorder, its treatment and outcome: Positive medical history of significance: Mention important findings only. Details of these findings should have already been described during the detailed presentation prior to the formulation and if helpful, could be mentioned again during the discussion of the differential diagnoses. If there is little doubt about the diagnosis, say so and say why. Do not present an irrelevant differential diagnosis for the sake of giving one. If diagnosis is not clear, embark on a careful discussion of the possibilities in the order of likelihood, and discuss points in favor of and against each of them. This is done using descriptive psychopathology e. Details of symptoms collected earlier could be used to support a diagnosis e. Information on the course of illness is also useful e. Do not give a long list of differential diagnoses that cover the whole of ICD; think twice before giving more than three or four. Depressive disorder in a person with alcohol dependence syndrome. End the discussion with a conclusion on the most likely diagnosis. If that is not possible at all, mention the major possibilities. These could be considered from different perspectives for example based on nature or based on chronology. Nature Biological Factors - e. Genetic, physical illness, drugs Psychological Factors - e. Obsessive personality traits Sociocultural Factors - e. Poor social support, unemployment Chronological Predisposing Factors - e. Family history of mood disorders Precipitating Factors - e. Child birth Perpetuating Factors - e. If as an inpatient, why? Long-term management plans Psychological: This should not be a general pronouncement, based merely on the type of disorder such as schizophrenia. Discuss instead the good e. Prognosis can also be described under the headings of short term e. However, there are subtle but important differences and being aware of them is helpful in making a good diagnostic formulation. Summary is a concise description of all the important aspects of the case, whereas formulation is an assessment of the case rather than a restatement of facts. The best example of a summary is the Discharge Summary, given on discharge after an inpatient treatment. This should be written in such a way that it provides all the necessary information that will assist in the follow-up care of the patient

## INITIAL ASSESSMENT AND FORMULATION pdf

by the same, or other medical team. The summary should include: Demographic data like name, age, gender  
Reasons for referral to psychiatry History of present illness.

## 3: Assessment and Formulation - Clinical Psychology Service

*This problem formulation and initial assessment examined likely 1,4-Dioxane exposure and hazard scenarios to workers and consumers based on current production, use, and fate information. The goal of this problem formulation and initial assessment was to identify scenarios where further risk analysis may be necessary.*

Physical and Chemical Properties of 1,4-Dioxane 15 Table Environmental Fate End points for 1,4-Dioxane 20 Table History of Regulatory and Assessment Actions in the U. Chemical structure of 1,4-dioxane 14 Figure The Work Plan Chemical Problem Formulation for 1,4-dioxane was prepared based on currently available data. Mention of trade names does not constitute endorsement by EPA. Docket Please visit the public docket [www.chemical.mil](http://www.chemical.mil). Chemical risk assessments will be conducted if, as a result of scoping and problem formulation, there are exposures of concern, identified hazards and sufficient data for quantitative analysis. If an assessment identifies unreasonable risks to humans or the environment, EPA will pursue risk management. This document presents the problem formulation and initial assessment for 1,4-dioxane as part of the TSCA Work Plan program. The conclusions from this problem formulation and initial assessment are that: Lack of hazard data for sediment and soil organisms precludes determination of risk to these environmental compartments. Therefore, further analysis of environmental risk is not planned. Other uses of 1,4-dioxane are in commercial and consumer products such as lacquers, varnishes, paint strippers, dyes, greases, cleaners and detergents, adhesives, cosmetics and deodorants. Use of 1,4-dioxane has decreased since 1,1,1-trichloroethane was phased out by the Montreal Protocol in for all uses except a few select applications. Recent data show that 1. The scenarios considered were: The routes of potential human exposure to 1,4-dioxane are inhalation, ingestion and dermal contact. Dermal exposures are not addressed due to high volatilization, low absorption and lack of dermal toxicity studies. Potential human health effects from inhalation and ingestion include cancer and noncancer outcomes liver, kidney and nasal effects in workers, consumers and the general population. There are no sediment or soil toxicity data to assess the hazard to organisms in these environmental compartments. A conceptual model was not developed for environmental health and further analysis of environmental risk is not planned. The results of problem formulation as illustrated in the conceptual model for human health and described under the assessment questions indicate that: Risk assessments in Canada and Europe concluded that levels of contamination do not pose concerns for human health. While personal care products are regulated by the Page 8 of 54 FDA, uses in paints, adhesives, varnishes, cleaners and detergents fall under TSCA authority. Risk assessments in Canada and Europe concluded that there are no risks of concern from exposure to 1,4-dioxane in ambient air. Potential source contributions to drinking water are uncertain. EPA will develop margins of exposure and cancer risk estimates to evaluate the potential risks from worker and consumer exposure to 1,4-dioxane. EPA does not have risk concerns for the general population through inhalation exposure to ambient air emissions. The criteria focused on chemicals that meet one or more of the following factors: In the prioritization process, 1,4-dioxane was identified for assessment based on classification as a probable human carcinogen, wide use in consumer products, high reported releases to the environment, and presence in groundwater, ambient air and indoor environments. If an assessment identifies unacceptable risks to humans or the environment, EPA will pursue risk management. The target audience for the final risk assessment is primarily EPA risk managers; however, it may also be of interest to the broader risk assessment community as well as US stakeholders interested in 1,4-dioxane. The information presented in the risk assessment may be of assistance to other federal, state and local agencies as well as to members of the general public who are interested in understanding whether there are risks from exposure to 1,4-dioxane. The problem formulation data review could result in refinement of pathways of interest previously identified in the initial prioritization. This document includes the results of scoping, problem formulation, and initial assessment for 1,4-dioxane. Workers, consumers and the general population may be exposed to 1,4-dioxane by inhalation, ingestion and dermal routes. Because 1,4-dioxane is not intentionally added to consumer products, only workers are exposed to products which intentionally contain 1,4-dioxane. Inhalation is expected to be the predominant route of exposure due to the high vapor

pressure and volatility of 1,4-dioxane. Workers and consumers may be exposed to products that contain 1,4-dioxane as an unwanted byproduct or an intermediate that is not fully reacted and the concentrations of 1,4-dioxane in these cases are lower, usually measured in parts per million or less. The general population may be exposed environmentally from air or water containing 1,4-dioxane. Absorption of 1,4-dioxane occurs readily through the lungs and gastrointestinal system and poorly through the skin. After absorption, 1,4-dioxane is rapidly eliminated from the body and does not accumulate. EPA classifies 1,4-dioxane as "likely to be carcinogenic to humans" by all routes of exposure based on liver tumors in rats and mice following chronic drinking water exposure US EPA, b. Nasal tumors were observed in rats following chronic inhalation or drinking water exposure. Short-term exposure may result in irritation of the eyes and throat ATSDR, and chronic exposure may result in dermatitis, eczema, drying and cracking of skin, and liver and kidney damage ATSDR. In the environment, 1,4-dioxane partitions to water and is highly mobile in soil. Toxicity to aquatic organisms is not expected based on low hazard values. Available data were used including chemical structure, physical chemistry, production volume, Page 11 of 54 reported uses and toxicological information from existing assessments to develop a conceptual model and an analysis plan. Regulatory and Assessment History. The data were used to derive minimal risk levels MRLs, exposure levels posing minimal risk to humans, for inhalation and oral exposures. IRIS developed cancer and non-cancer reference values for inhalation and drinking water exposure. The Food and Drug Administration FDA does not require 1,4-dioxane to be listed on labels of personal care products and considers it a contaminant. FDA has indicated that the levels of 1,4-dioxane found in their monitoring of cosmetics do not present a hazard to consumers and recommended a level of 3. No federal drinking water standards have been established for 1,4-dioxane and it is being monitored in public water systems as part of the Unregulated Contaminant Monitoring Rule 3 UCMR3 list. OW is conducting a three-year monitoring program of public water systems to collect data for contaminants suspected to be present in finished drinking Page 12 of 54 water including 1,4-dioxane USEPA, Examples include sites in New Hampshire [http:](http://) The action level under California Proposition 65 for 1,4-dioxane in personal care products is above 10 ppm. A Canadian screening assessment Environment Canada and Health Canada, evaluated the risk of 1,4-dioxane to human health. Ecological risks were not assessed since 1,4-dioxane did not meet the criteria for bioaccumulation and inherent toxicity to aquatic organisms. Exposures to the general population from intake from air, water, soil, diet, use of personal care products and household products were estimated. The report concluded that 1,4-dioxane is not entering the environment in a quantity or concentration or under conditions that constitute or may constitute a danger in Canada to human life or health. The European Union Risk Assessment Report EU RAR, concluded that there is no concern for human safety with regard to repeated-dose toxicity, carcinogenicity and reproductive toxicity. A potential risk concern for workers was found for occupational exposures via the dermal and inhalation routes during product formulation and the use of cleaning agents containing 1,4-dioxane. The outcome of this evaluation is summarized in a conceptual model Figure that illustrates the exposure pathways, receptors and effects that were considered for potential risk assessment. An analysis plan is developed if the results of problem formulation indicate the need for further analysis. The cyclic structure Figure has oxygen molecules attached at the first and fourth bonds, each with free electrons US EPA, b. A summary of the physical and chemical properties of 1,4-dioxane are listed in Figure O O Figure Chemical structure of 1,4-dioxane. Page 14 of 54 Table Physical and Chemical Properties of 1,4-Dioxane. Additional information on uses and specific end products that may contain 1,4-dioxane can be found in Appendix B: Summary of Uses and End Products. Production In, the U. As a result of chemical ethoxylation of surfactants, 1,4-dioxane can be formed as a byproduct and may be present as a contaminant in commercial and consumer products. Historically, the main use of Page 15 of 54 1,4-dioxane 90 percent was as a stabilizer in chlorinated solvents such as 1,1,1-trichloroethane TCA. As an industrial solvent, 1,4-dioxane is used as: Table provides the industrial use data as reported in the CDR database<sup>4</sup>. Commercial and Consumer Uses. As an industrial processing solvent or chemical intermediate, 1,4-dioxane has previously been reported to be used in the production of products that may have commercial or consumer applications such as paints, adhesives, detergents, and pesticides ATSDR, ; US EPA, a, c. EPA was unable to identify any US sources that

definitively stated the chemical is used in the production of consumer products. A European risk assessment stated that the chemical is used as a solvent in the production of several products that may be used by consumers European Chemicals Bureau, Contaminant in Consumer Products. The correction was received and is not yet indicated in the CDR public database. Page 16 of 54 during the manufacture of ethoxylated surfactants. Manufacturers can remove most of the 1,4- dioxane in consumer products through a vacuum stripping process ATSDR, , although the extent that this occurs is unknown. Page 17 of 54 Table Use in non-incorporative activities would include uses such as chemical processing aids or chemical manufacturing aids, where the chemical is not intended to remain in or become part of the final product, or ancillary activities where a chemical is used at a facility for purposes other than aiding chemical processing or manufacturing e. Page 18 of 54 2. Based on available environmental fate data, 1,4-dioxane is expected to volatilize readily from dry surfaces, reside in water and soil compartments if released to the environment, and have high persistence and low bioaccumulation potential in the environment. Once it enters the environment, 1,4-dioxane is expected to have high mobility in soil based on its negligible Koc value of 0. In a soil microcosm study which analyzed the potential for bacteria to degrade 1,4-dioxane, 1,4-dioxane was not biodegraded during a day period by indigenous bacteria. The reason for the delayed biodegradation was not clear Kelley et al. These values indicate that bioaccumulation 1,4-dioxane is low. Environmental Fate Endpoints for 1,4-Dioxane. Use and exposure scenarios were selected for inclusion in the conceptual model by the identification of high volume uses that are known or likely to be associated with significant exposures. Releases to the environment were assessed to determine potential pathways of exposure for both human and ecological receptors. Exposures to workers, consumers and the general population were evaluated to determine the potential exposure to 1,4-dioxane during manufacturing, formulation and use of products.

## 4: Diagnostic formulation

*Martin Herbert, in Comprehensive Clinical Psychology, Introduction. The process of piecing together a clinical formulation lies at the very center of the practitioner's craft, bridging, as it does, the issues of assessment, etiology, and intervention which inform clinical work.*

The Behavior Analyst Today. In Hayes, Steven C. A practical guide to acceptance and commitment therapy. The CBT distinctive features series. Hove, East Sussex; New York: Cognitive therapy in practice: In Norcross, John C. Handbook of psychotherapy integration. Oxford series in clinical psychology 2nd ed. Advances in Psychiatric Treatment. Journal of Psychotherapy Integration. Pragmatic Case Studies in Psychotherapy. In Dawson, David L. Psychotherapy as a developmental process. Kelly, George []. The psychology of personal constructs: Routledge in association with the Centre for Personal Construct Psychology. White, Lauren March Handbook of psychotherapy case formulation 2nd ed. Theories of psychotherapy series. The transdiagnostic road map to case formulation and treatment planning: Case formulation in emotion-focused therapy: Practical resources for the mental health professional. Behavioral assessment and case formulation. Ingram, Barbara Lichner []. Johnstone, Lucy; Dallos, Rudi, eds. Formulation in psychology and psychotherapy: Kleiger, Mary Jo Peebles []. The case formulation approach to cognitive-behavior therapy. Guides to individualized evidence-based treatment. In Cook, Ellen Piel. Understanding people in context: Treatment planning in psychotherapy: Zayfert, Claudia; Becker, Carolyn Black Cognitive-behavioral therapy for PTSD:

### 5: TSCA Work Plan Chemical Problem Formulation and Initial Assessment 1,4-Dioxane CASRN:

*the problem formulation and initial assessment for 1,4-dioxane as part of the TSCA Work Plan program. The conclusions from this problem formulation and initial assessment are that.*

All written statements shall be submitted to the DFO for the Board, and this individual will ensure that the written statements are provided to the membership for their consideration. The DFO, at that time, may provide additional guidance on the submission of written statements that are in response to the stated agenda for the planned meeting in question. Notice of Partially Closed Meeting. Naval Academy Board of Visitors will meet to make such inquiry, as the Board shall deem necessary, into the state of morale and discipline, the curriculum, instruction, physical equipment, fiscal affairs, and academic methods of the Naval Academy. The executive session of this meeting from For this reason, the executive session of this meeting will be closed to the public. The open session of the meeting will be held on September 28, , from 8: The executive session held from The meeting will be handicap accessible. VerDate Sep Naval Academy, Annapolis, MD â€”, â€” The executive session of the meeting from The discussion of such information cannot be adequately segregated from other topics, which precludes opening the executive session of this meeting to the public. Navy, Federal Register Liaison Officer. The Secretary of Energy has determined that renewal of the Panel is essential to conduct business of the Department of Energy and the National Science PO Frm Fmt Sfmt Foundation and is in the public interest in connection with the performance of duties imposed by law upon the Department of Energy. John Kogut at â€” Issued in Washington DC on August 12, EPA is announcing the availability and opening of a day public comment period for TSCA Work Plan Chemical problem formulation and initial assessment documents for three flame retardant clusters. Based on experience in conducting TSCA Work Plan Chemical assessments and public input, starting in EPA will publish a problem formulation and initial assessment, or a data needs assessment, for each TSCA Work Plan assessment as a stand-alone document to facilitate public input prior to conducting further risk analysis. There are three clusters of flame retardant on the TSCA Work Plan for which there are problem formulation and initial assessment documents: In addition, there is a data needs assessment document for the Brominated Phthalates flame retardant cluster. Submit your comments, identified by docket identification ID number for the corresponding TSCA Work Plan chemicals as identified in this document, by one of the following methods: Follow the online instructions for submitting comments. Do not submit electronically any information you consider to be Confidential Business Information CBI or other information whose disclosure is restricted by statute. To make special arrangements for hand delivery or delivery of boxed information, please follow the instructions at <http://www.epa.gov/tscaworkplan>: Additional instructions on commenting or visiting the docket, along with more information about dockets generally, is available at <http://www.epa.gov/dockets>: For technical information contact: For general information contact: Does this action apply to me? This action is directed to the public in general, and may be of interest to a wide range of stakeholders including those interested in environmental and human health; the chemical industry; chemical users; consumer product companies and members of the public interested in the assessment of chemical risks. Since others also may be interested, the Agency has not attempted to describe all the specific entities that may be affected by this action. Do not submit this information to EPA through regulations. Clearly mark the part or all of the information that you claim to be CBI. In addition to one complete version of the comment that includes information claimed as CBI, a copy of the comment that does not contain the information claimed as CBI must be submitted for inclusion in the public docket. Information so marked will not be disclosed except in accordance with procedures set forth in 40 CFR part 2. Tips for preparing your comments. When preparing and submitting your comments, see the commenting tips at <http://www.epa.gov/tscaworkplan>: What action is the Agency taking? EPA is announcing the availability of and opening of a public comment period for three problem formulation and initial assessment documents, and a data needs assessment document, for the following TSCA Work Plan Chemicals: This Federal Register Notice identifies the individual Work Plan Chemical problem formulation and initial assessment documents and the data needs assessment document by title, docket ID number, and chemical or chemicals covered. Chlorinated Phosphate Esters Cluster. Ethanol, 2-chloro-, phosphate 3: Chlorinated

phosphate esters are high production volume chemicals that have been used as flame retardants in furniture foams, textiles, paints and coatings. EPA initiated scoping and problem formulation to determine the feasibility of conducting a quantitative risk assessment. During problem formulation, EPA reviewed previous assessments by EPA and other organizations and additional published studies on the exposure and hazard for members of the CPE cluster. EPA examined likely exposure and hazard scenarios based on current production, use, and fate information to identify scenarios amenable to a risk analysis. Cyclic Aliphatic Bromides Cluster. Cyclic Aliphatic Bromides have been used as a flame retardant in: During problem formulation, EPA reviewed previous assessments by EPA and other organizations and additional published studies on the exposure and hazard for members of this flame retardant cluster. EPA welcomes comment on addressing these data gaps. Tetrabromobisphenol A and Related Chemicals Cluster. Specifically, the review identified numerous gaps in toxicity data and exposure data, testing conducted on limited commercial mixtures but not all constituents of the mixtures, and uncertain attribution of toxicity for commercial mixtures. This Data Needs Assessment is intended to guide the collection of additional data and information to fill the critical data gaps and reduce uncertainties identified during problem formulation. Notice of information collection to be submitted to OMB for review and approval under the Paperwork Reduction Act of 1995. In accordance with the requirements of the Paperwork Reduction Act of 1995, 44 U.S.C. 3501 et seq., the following information collection is being managed or controlled by a U.S. Branch or Agency of a Foreign Non-U.S. The comment period for this notice expired on July 6, 2010. Comments must be submitted on or before September 17, 2009. Interested parties are invited to submit written comments to the agency listed below. All comments will be shared among the agencies. Follow the instructions for submitting comments on <http://www.epa.gov/epahome/submitcomment.htm>. Follow the instructions for submitting comments. Include the OMB control numbers in the subject line of the message. Accordingly, your comments will not be edited to remove any identifying or contact information. Additionally, commenters may send a copy of their comments to the OMB E-mail at [omb@epa.gov](mailto:omb@epa.gov). Use the specific docket ID number provided in this Federal Register Notice to locate a copy of the chemical-specific document, as well as to submit comments via <http://www.epa.gov/epahome/submitcomment.htm>. During problem formulation, EPA reviewed previous assessments by EPA and other organizations and additional published studies on the exposure and hazard for members of the Brominated Phthalates Cluster.

## 6: Clinical formulation - Wikipedia

Moore, R. G. and Garland, A. () *Initial Assessment and Formulation, in Cognitive Therapy for Chronic and Persistent Depression, John Wiley & Sons, Ltd, West.*

Guidelines Trainees will be assessed on the following dimensions: Presenting problems, diagnosis and co-morbidity. Issues relating to engagement and the therapeutic alliance. Use of the relevant model to guide assessment, formulation and intervention if it is not used, reasons for this should be given. Scores on IAPT service outcome and assessment measures. Relevant disorder specific assessment questionnaires if not a reason should be given. There should be a description of the case conceptualisation and clarified, where possible, by a diagrammatic representation of the conceptualisation. Ensure that the arrows on any diagrammatic formulations should make sense, flow accurately and reflect both the theory and actual experience of the client. The formulation should link and explain the presence of maintenance factors of the presenting problems and where relevant the development of the problem. Ensure a focus on collaboration with explicit client contribution. Directly relate to and flow from the case conceptualisation. Identify anticipated difficulties, guided by the assessment and formulation process. Throughout the presentation you need to: Use theory to guide your assessment, formulation and intervention plan and guide your thinking about this case. Refer to and make use of the relevant literature pertaining to this case. You may find it helpful to provide an outline of any tools or mechanisms that you used in order to aid this process. e. Awareness of professional issues including confidentiality Your work should demonstrate good professional awareness, e. Issues of risk Power dynamics Issues of diversity and difference and its impact on the therapeutic relationship. Client confidentiality - anonymised biographical data must be used throughout the presentation, i. Structure and style of presentation Marks will be awarded for a well-structured and well-presented case presentation. The slides will be required to be submitted to the markers following the presentation. Be mindful of your use of language, both regarding the use of colloquialisms and jargon. Where appropriate you may make use of diagrams, tables and bullet points in the presentation to clarify information. A possible structure could be based on the marking criteria e. Theory to practice links, self-reflectivity and professional issues could be covered throughout the presentation. Your case presentation should be clearly presented and you may wish to consider practising your presentation beforehand where possible. Consider any preparation time needed for the set-up of your presentation as this should be kept to a minimum. Put any aids e. PowerPoint document onto a memory stick and position any other aids needed e. References References should be given throughout the presentation and provided on a slide at the end. If you have problems in this area please use the study skills department. A further 5 minutes can be spent on questions by the panel for clarification purposes only. No follow-on questions will be permitted; therefore all relevant clinical information will be required within the case presentation. The presentation will be halted at 20 minutes and information not presented will not receive credit. Failure may result from the complete omission of an area, or because the standard of what has been included is not satisfactory.

## 7: Strategic Management Process? - Strategic Management Insight

*Problem formulation and initial assessment is the analytical phase of the assessment in which the purpose for the assessment is articulated, the problem defined and a plan for analyzing and characterizing risk is determined.*

*Fringe dweller on the night shift Two views of Manzanar The road to reality penrose The Ideal in Art. Women Heroes and Dalit Assertion in North India Design of beams and slabs as per is 456 The registers of the parish church of Calverley, in the West Riding of the County of York What if I did what I could? Illusion, delusion, and folly Brothers from childhood to oasis the real story Management ebooks format Rortys humanistic pragmatism 5-G Challenge Spring Quarter Directors Notebook Wind band sheet music Soybean oil processing plant project report To flash flip book A systemoptimization perspective for supply chain network integration Project report on cable stayed bridge Personalities and paradigms Defining the future state. Urdu name meaning book The Hug Therapy Book of Birthdays and Anniversaries/Date Book Wheres Rusty Bath Book (Farmyard Tales Bath Books) Hearings on S. 1618, To Exempt the Navy Department from Statutory Prohibitions Against the Employment of Pretest 9 physcal science Acronyms, initialisms abbreviations dictionary. 5th ed. (1976)- The Sport Americana Baseball Address List, No 7 (Sport Americana Baseball Address List) Employers Policies The remarkable Gamgees Fine-Grained Sediments Uncovering your strengths The mystery of change Finite Elements Volume VI A Photographers Life with Disneyland Under Construction Selling, principles and practices Health surveillance by routine procedures. Eastern Canada, comprising the Maritime Provinces and the provinces of Ontario and Quebec These autobiographical times of ours Digital imaging for libraries and archives Portfolios and publishing*