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To cite this article: Nicole Gravina & John Austin (2018): An Evaluation of the Consultant Workshop Model in a Human Service Setting, Journal of Organizational Behavior Management, DOI: [10.1080/01608061.2017.1423149](https://doi.org/10.1080/01608061.2017.1423149)

To link to this article: <https://doi.org/10.1080/01608061.2017.1423149>



Published online: 16 Jan 2018.



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An Evaluation of the Consultant Workshop Model in a Human Service Setting

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ABSTRACT

The purpose of the present study was to document and evaluate an application of the consultant-workshop model commonly employed by Organizational Behavior Management consultants. The consultation took place in a nonprofit human service setting that delivers behavioral services to children diagnosed with autism and their families. Workshop attendees were 13 senior therapists each of whom oversaw six to eight instructor therapists who provided behavioral services to clients. The training took place three years prior to this evaluation across five months and four workshop sessions. Participants learned to pinpoint, measure, diagnose, and intervene and then they presented their project at the last workshop and these projects were documented. When possible, follow-up information was gathered to determine the extent to which this approach facilitated maintenance of the projects and generalization to other opportunities for performance improvement. Results indicated that projects were, in general, very effective. At follow-up, some components of the projects remained in place and limited evidence indicated that the performance improvements maintained or generalized. Based on the findings, recommendations for improving the workshop model are provided.

ARTICLE HISTORY

Received 17 February 2017
Revised 26 September 2017
Accepted 27 November 2017

KEYWORDS

consultant; workshop;
human services;
maintenance; generalization

Organizational Behavior Management (OBM) practitioners suggest that it is through the repeated demonstration of maintenance and generalization that credibility and recognition for OBM can be built (McSween & Matthews, 2004). One way to encourage maintenance and generalization is by institutionalizing the intervention. Sigurdsson and Austin (2006) described institutionalization as having four components: Internal staff involvement in (a) intervention development, (b) intervention implementation, (c) data collection, and, (d) consequence delivery. They coded research articles from the *Journal of Organizational Behavior Management* from 1991–2002 for inclusion of these components in OBM research. Although their sample size was small, a regression analysis found a positive relationship between the number of components included and effect size of the intervention compared to

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baseline, accounting for 25% of the variability. Of the 31 studies included in the review, seven did not include any of the four components of maintenance and only four included all of the components. This suggests that OBM researchers may need to continue to develop strategies for involving organizations and their employees in interventions.

One approach that allows OBM researchers and practitioners to involve managers in intervention design and implementation is the “Consultant Workshop Model.” This model teaches managers to conduct their own performance improvement projects, potentially equipping them with the knowledge to continue improving performance after the consultation period and the ability to address other performance targets (e.g., Snyder, 2006). OBM consultants and researchers have employed variations of this model (e.g., Ackley & Bailey, 1995; Maher, 1984; Nordstrom, Lorenzi, & Hall, 1990; “Performance Catalyst,” 2007; “Precision Leadership,” 2007).

A limited number of studies have examined the effects of teaching managers performance management skills. For example, researchers taught 35 employees in a mid-sized organization to use behavioral self-management strategies to address work-related issues through an eight-week training course for two hours per week (Godat & Brigham, 1999). Thirty-three participants implemented self-management projects and 31 reported successful outcomes. In another study, researchers trained 32 city government managers to conduct OBM projects in their workplace (Nordstrom et al., 1990). Managers completed 19 total projects, all of which yielded improvements. In yet another example, researchers taught school administrators to implement OBM projects (Maher, 1984). All seven administrators trained completed their projects. Three used A–B designs while the other four used more complex experimental designs with favorable outcomes. However, in all of these examples, researchers made no attempt to collect maintenance or generalization data and therefore, no conclusion can be drawn about the likelihood of this consulting method to produce lasting and widespread changes in the organization. In addition, none of these studies was conducted in a human service organization that provides services to individuals diagnosed with autism, where cost effective and time efficient interventions for improving performance are needed (Leblanc, Gravina, & Carr, 2009).

Many studies have demonstrated that OBM techniques can be used to improve performance in human service settings (e.g., Gravina, VanWagner, & Austin, 2008; Mayer & DiGennaro Reed, 2013; Williams & Gallinat, 2011). However, only a limited number of these studies targeted managers as agents of change for direct care staff behaviors (e.g., Methot, Williams, Cummings, & Bradshaw, 1996). Human service organizations present unique challenges compared to other organizations in that they often have limited resources, low pay, high turnover, clients that require a high degree of consistency, and treatment procedures that require high fidelity (Leblanc et al., 2009).

Therefore, leaders in these organizations need intervention strategies that can address multiple performance challenges at once in a cost-effective way. The consultant workshop model may be a viable solution if it can produce meaningful, long-lasting, and generalized effects.

The present case study evaluated the impact of training supervisors to develop and implement performance management projects. The evaluation extended previous research on training in performance management by (a) evaluating the workshop model in a human service organization that serves children diagnosed with autism, and (b) checking for evidence of maintenance as well as stimulus generalization and generalization across participants. The information gathered was then leveraged to make recommendations for improving the consultant workshop model.

Method

Participants and setting

The study took place in a governmentally-funded agency in Canada that provides behavioral services to individuals diagnosed with autism. At the time of this study, the organization delivered services to over 300 individuals and had over 500 on the waiting list. Workshop training sessions were completed in the organization's training facility with a projector, white board, tables, and chairs.

Thirteen senior therapists (STs), one male, each of whom supervised a team of six to eight instructor therapists (ITs) in the organization, participated in the training 2.5 years before the time of this evaluation. Nine of the STs who completed the training were still employed at the agency at the time of this evaluation and six agreed to participate in the study. Participation in the initial program was required by the center director. Participation in this evaluation was voluntary. For participants who had left the organization at the time of this evaluation, any existing information within the organization (e.g., PowerPoint slides from graphs) was included.

Consultant workshop program

The center director hired the consultant to implement the consultant workshop program because she was interested in improving the leadership skills of her team. Since the employees were already familiar with using behavior change concepts with the clients they serve, she reasoned that the consultant workshop model would allow her team to practice applying those same concepts to workplace issues. A consultant and professor of psychology and OBM with extensive experience improving employee performance in organizations, and who is also the second author on this paper, delivered the

training. The workshop was similar to workshops delivered by the consultant in other organizations and those used in previous research.

The program consisted of four full-day workshops provided at the agency across five months. During these sessions, the consultant trained STs to design and implement an OBM project with their staff (ITs). Training included approximately 50% lecture and 50% discussion/activity. Activities and discussions allowed participants to practice applying concepts and develop their own

Table 1. Workshop Content and Homework.

Workshop	Topics covered	Homework
1 (January)	<ul style="list-style-type: none"> • Six steps of performance management process (define the mission, pinpoint, measure, diagnose, develop and implement a solution, evaluate) (Daniels & Bailey, 2014) • Effective pinpointing • Develop potential pinpoints (activity) • Measurement systems • Develop measurement system for pinpoint (activity) • Experimental design basics 	<ul style="list-style-type: none"> • E-mail final pinpoint and measurement plan to instructor in one week • Bring three baseline data points graphed to present at next session
2 (March)	<ul style="list-style-type: none"> • Present pinpoints and baseline data and describe plan for experimental design (activity) • Purpose and procedures for experimental design • Performance Diagnostic Checklist (PDC; Austin, 2000) basics • Apply PDC to their pinpoint and determine cause of performance issue (activity) • ABC Analysis basics • Apply ABC Analysis to their pinpoint (activity) • Four categories of interventions (antecedent, goal-setting, feedback, and reinforcement) 	<ul style="list-style-type: none"> • E-mail updated graph and intervention plan to instructor in one week • E-mail a second update in three weeks and cc supervisor • Bring updated graph to present to the group at the next session
3 (May)	<ul style="list-style-type: none"> • Present data, describe intervention plan and answer questions (activity) • Revise and finalize intervention plan (activity) • Maintenance and generalization • Develop plan for maintenance (activity) 	<ul style="list-style-type: none"> • E-mail graph with at least three baseline data points and a two paragraph description of the project to instructor in 2.5 weeks • Bring presentation with pinpoint, measurement system, pictures, final graphs, and maintenance plan to next session to present to the group
4 (June)	<ul style="list-style-type: none"> • Review of the performance management process learned during previous workshops • Present projects to group and other organizational leaders 	

projects. Table 1 provides more detail about each workshop and the activities and assignments. Participants were not tested on proficiency but there were many opportunities for practice and feedback during the training sessions. More detail about the workshop is available from the authors.

Evaluation procedure

The workshop program was evaluated on several factors to determine its effectiveness and to assess maintenance and generalization. Information about each project was gathered through presentations of the projects, e-mails with the STs and the clinical director, an online survey, and phone interviews with the STs.

Measures

Projects

The projects conducted by STs served as a primary source of information for this evaluation. The data gathered for the projects varied across STs depending on the goal of the project they completed. STs selected the dependent variables for their projects based on their needs and preferences. None of the data provided contained any identifying client or staff information. Participants were encouraged to collect interobserver agreement and employ experimental designs, but it was not feasible to require it. Table 2 provides information about each project target and intervention.

Maintenance and generalization

The six STs who agreed to participate in the follow-up evaluation provided information about maintenance and generalization through self-report 2.5 years after the initial training.

Social validity

Employees who participated in the follow-up rated each pinpoint using an anonymous survey with a 1–5 Likert scale, 5 being most favorable. Respondents rated whether the pinpoints were likely to impact client care, improve parent-staff or staff-staff relationships, and save the organization money. In addition, the researchers interviewed participants using a 10-question structured interview to gather input about the training.

Results

Overall, STs conducted a total of 10 performance management projects. Summaries of the project targets, interventions, experimental designs, importance ratings, and any data gathered on maintenance and generalization are



Table 2. Summary of Projects Completed During the Workshop and Follow-Up Measures.

Project	Pinpoint	Intervention	Experimental design	Importance rating (1–5)	Intervention maintained?	Behavior maintained?	Generalization?
1 (3 STs)	Accuracy of instruction (2 ITs), reinforcement (2 ITs), and error correction (2 ITs) measured by videotaping weekly and scoring using a checklist	Verbal and written feedback, video scoring	6 AB case studies	4.6	Video scoring once per month, feedback from supervisor occasionally	Yes (anecdotal)	No
2 (2 STs)	Accuracy and completeness of treatment documents in treatment binder measured weekly with a checklist during staff meeting (7 ITs, 2 teams)	Expectations clarified, checklist, 15 minutes of free time	2 AB case studies, one for each team	4.8	No	Yes (anecdotal)	Yes (checklist only)
3 (2 STs)	Submitting weekly IBI reports on-time in the computer system measured by the system (10 STs, 2 teams)	Graphic feedback, \$20, restaurant gift certificate	Multiple baseline across two teams	4.4	For a few months	Yes (data-based)	No
4 (1 ST)	Data sheet completion and accuracy using a checklist for an entire day	Checklist, role-playing, graphic feedback	Multiple baseline across two clients	4.8	For a few months (checklist)	N/A	No
5a (1 ST)	1–4 days per week for two clients (6 ITs)	None needed	N/A	5.0	N/A	N/A	N/A
5b	Accuracy of antecedent and consequence delivery measured using checklist for 5–10 trials for 20 minutes 2–3 times per week (2 ITs)	N/A	N/A	4.4	N/A	N/A	N/A
6 (1 ST)	Increase frequency of incidental teaching opportunities during circle time measured through direct observation for two clients (multiple ITs)	Checklist, expectations clarified, graphic feedback, materials checked	AB, all data aggregated into one data path and graph	4.8	Unknown	Unknown	Unknown
7 (1 ST)	Percentage of programs run at least once for all clients, measured daily (All ITs on team included)	Checklist and self-monitoring during team meetings	ABAB for three clients and multiple baseline across the next three clients	4.6	Unknown	Unknown	Unknown

(Continued)

Table 2. (Continued).

Project	Pinpoint	Intervention	Experimental design	Importance rating (1–5)	Intervention maintained?	Behavior maintained?	Generalization?
8 (1 ST)	Number of instances of parent involvement per month for 11 clients	Calendar of events and needed materials, thank you notes, publicly posting parent participation in classroom	AB design, data paths for three clients and one aggregating clients 4–11	4.6	Unknown	Unknown	Unknown
9 (1 ST)	Percentage of programs run each day for three clients (all ITs on team involved)	Checklist in each client binder and self-monitoring	ABAB	4.8	Unknown	Unknown	Unknown

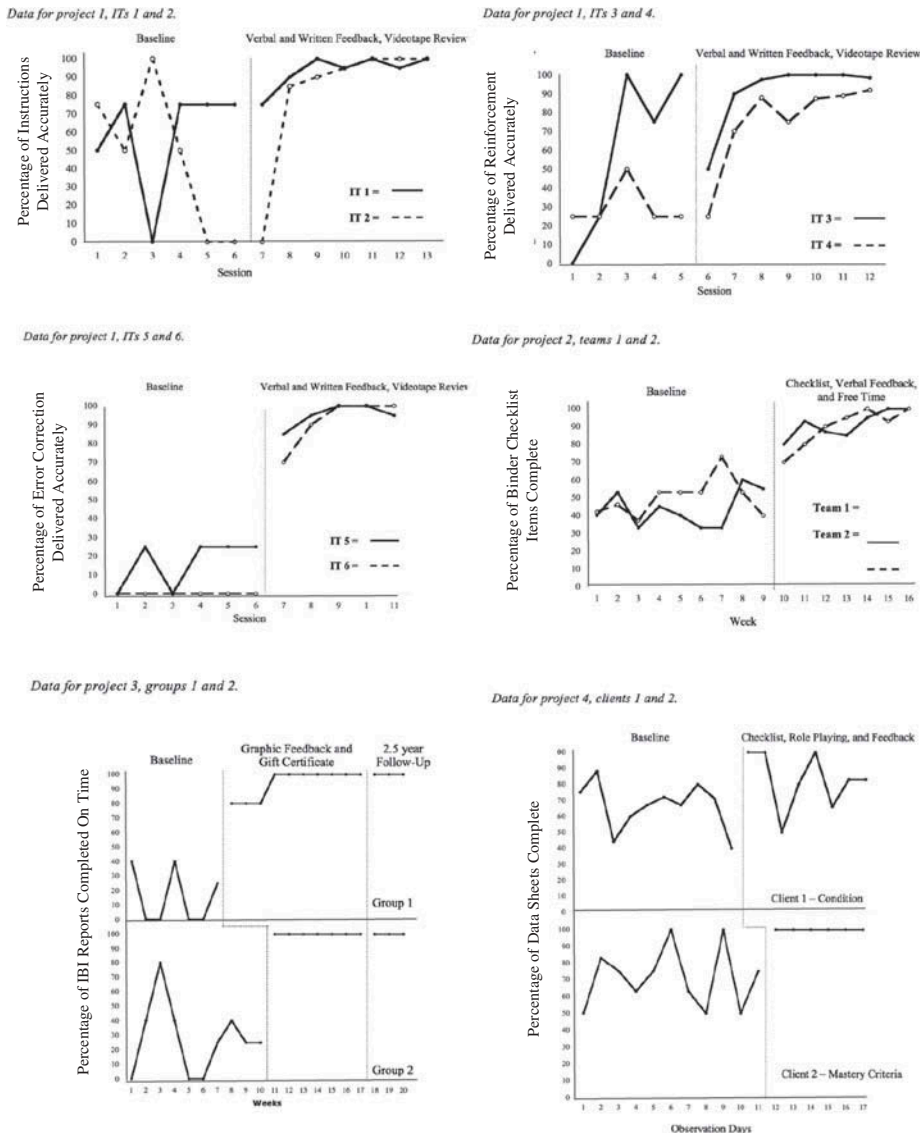


Figure 1. Graphs for projects 1–9 completed by the senior therapists (STs) are represented.

available in [Table 2](#). Three projects were conducted in groups of two or three STs (projects 1–3) and the rest were conducted individually (projects 4–9). One ST conducted two projects individually (projects 5a and 5b) but did not provide intervention data for either project.

Due to space limitations, each project cannot be described in detail but the graphs from projects are provided in [Figure 1](#). In general, the pinpoints focused on improving three areas: program quality, program compliance, and paperwork completion. Effect sizes, although not reported individually

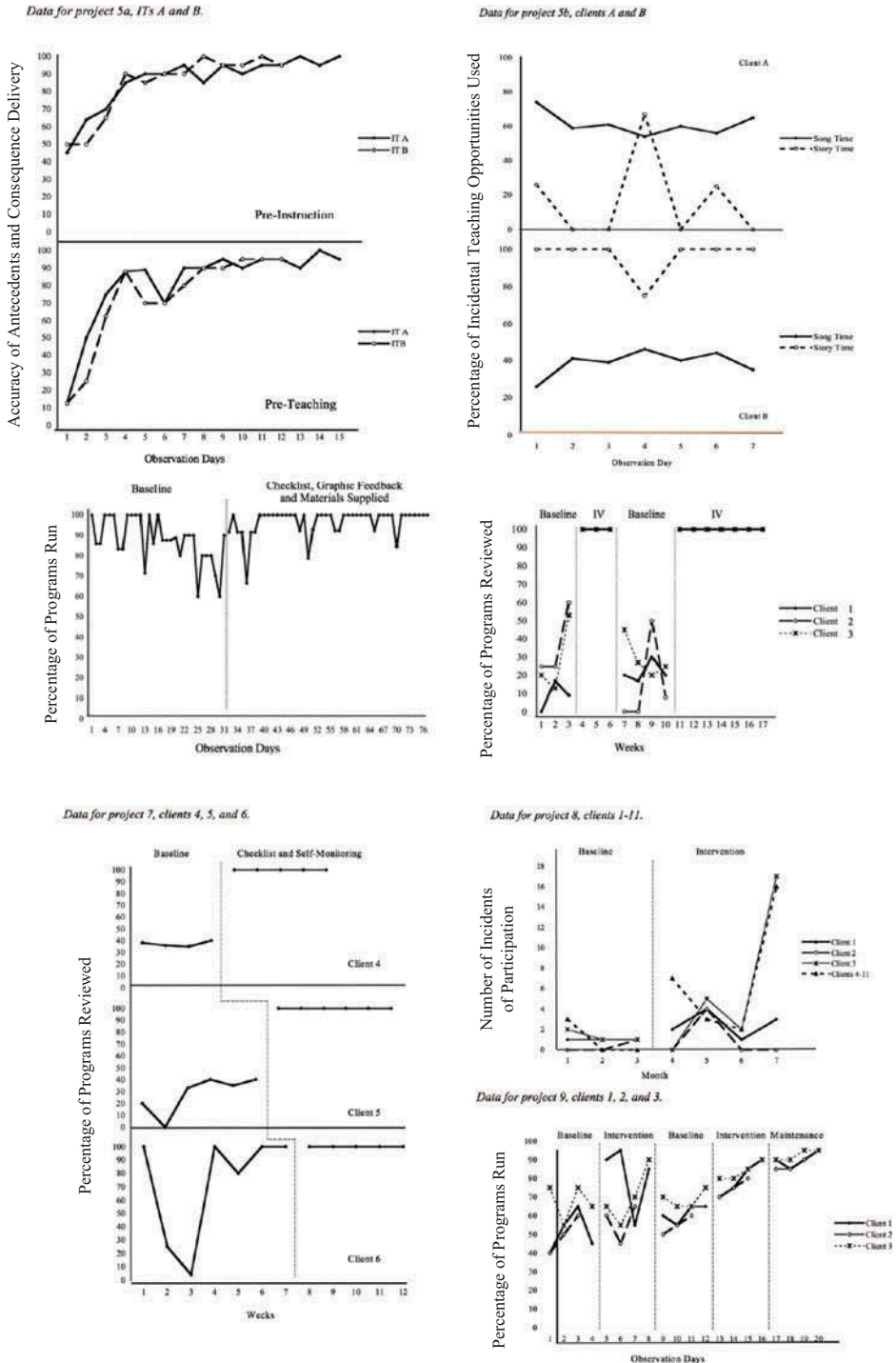


Figure 1. (Continued).

here, were greater than 1 for most of the projects. Visual inspection of the graphs indicates level changes for most of the interventions and five projects demonstrated experimental control. Project 3, aimed at increasing the on-time completion of reports, was the only project with data demonstrating maintenance at the 2.5 year follow-up.

Maintenance and generalization

Table 2 also summarizes information gathered about maintenance and generalization. Information was not available for all projects because some of the STs were no longer with the organization at the time this follow-up was conducted. Among projects for which follow-up data were available, three out of four projects maintained at least some of the intervention components after the workshops were complete. Follow-up data were collected for one project and indicated that the performance improvement maintained 2.5 years later. Two other projects anecdotally reported that the performance improvement maintained. This may indicate some participant generalization because STs reported turnover in ITs since conducting the projects. In addition, there was evidence of stimulus generalization in project 2. The ST reported that two other STs adopted her intervention checklist after the project was complete.

Social validity

The STs and center director who completed the pinpoint ratings rated all of the pinpoints favorably with average ratings ranging from 4.4 to 5.0. All six of the STs that agreed to participate in the follow-up study reported that they enjoyed the training. The STs reported finding the training interactive, engaging, personalized, and relevant. They also reported that they continued to use some procedures learned in the workshops when managing employees. However, most said that the process seemed too time consuming and that ongoing training and further practice was needed. In addition, STs reported that they desired more organizational support for continuing the performance management process.

Discussion and recommendations

Results of this evaluation indicate that the workshop effectively taught STs in a human services organization, who were already familiar with behavioral principles, to develop and implement their own performance improvement projects. The projects were successful overall, indicating that the consultant workshop model may be useful in teaching supervisors to complete performance improvement projects. In addition, the supervisors reported continuing to use some elements of the training. However, limited evidence of maintenance and

generalization suggest changes to the consultant workshop model are required. Based on the findings from this case study, a number of recommendations for improving the consultant workshop model and suggestions for future research follow.

First, the workshop should be updated to include the latest science and technology from the field. Most notably, the Performance Diagnostic Checklist (PDC; Austin, 2000) should be replaced with the Performance Diagnostic Checklist–Human Services (PDC-HS; Carr, Wilder, Majdalany, & Mathisen, 2013) for application in human services. Since the time of this workshop, the PDC-HS has been developed and it is tailored to human service settings, making it a better fit for helping managers and leaders in human service settings identify causes of performance issues and potential solutions. Because the PDC-HS suggests interventions, unlike the PDC, less workshop time may be required to teach attendees to identify interventions. In addition, an online version of this workshop should be compared to an in-person workshop to evaluate both effectiveness and cost. A human service organization may find it is more affordable and flexible to complete an online or self-paced workshop series. Further, an assessment could be used to determine which components of the workshop series are necessary, and which can be eliminated, to save time and money. For example, behavior analysts may not need to review consequences in detail but may require more time learning to develop interventions for work-related behaviors.

The STs who participated in the study reported that they did not maintain the projects because they were time consuming. One ST stated that she was spending multiple hours per week measuring and could not afford to continue. In the future, it may be beneficial to help workshop participants design measurement systems that require less time (e.g., sampling methods) and encourage top management to provide employees time to conduct projects. Also, approaches that use fewer steps (i.e., positive feedback for any target behavior, based on limited and informal observation) and no or less demanding experiment designs (e.g., reversal probe) should be considered.

In addition, it may be beneficial to encourage workshop participants to document time or money saved in order to encourage future projects and strengthen top-management support. Participants may need time allotted in their schedule to learn the process and conduct projects. This may be more feasible if projects ultimately save and money, reduce frustrations, or increase revenue.

The lack of evidence of maintenance may suggest that additional components, beyond those described by Sigurdsson and Austin (2006), are required in order to ensure institutionalization of performance management techniques in the organization. Perhaps management support, incorporation into the organization's existing systems, and including reinforcers for project continuation could further assure intervention maintenance. Within the context of the consultant workshop model, this may require more involvement from top management in

the training, additional training topics, additional activities and homework aimed at maintenance, and follow-up visits or phone calls with the consultant.

There was limited evidence of dissemination across participants in this evaluation. Some of the STs reported that they described components of their interventions to other STs who adopted these practices for an undetermined amount of time. However, there was no evidence of stimulus generalization. None of the STs reported using all of the steps learned in the training to address another performance issue, although all reported that they used some elements of the process. When ST's were asked about what prevented from using the entire PM process, they reported that the process seemed too lengthy. Many collected baseline data for three months because the workshops were spread out and the interventions were not discussed until that point. They stated that they wanted to address performance issues immediately rather than after extensive baseline data collection. Workshop sessions may need to be scheduled closer together to eliminate lengthy baselines and allow for moving into the intervention and maintenance phases quickly.

Some STs reported that they needed more training to be able to generalize the performance management process to other performance issues. The workshop included some exposure to targets other than their own project because participants practiced pinpointing during the workshop. However, most of the training focused on their selected project. At the conclusion of the workshop, participants were required to present their projects to stakeholders in and outside of the organization. Beyond this, there were no explicit consequences in place for completing, continuing, or generalizing the project. There may have been natural consequences associated with completing the projects, but the fact that very little generalization occurred suggests that these consequences alone may not have been strong enough.

Generalization of skills could be enhanced in a number of ways according to strategies outlined by Stokes and Baer (1977). For example, *multiple exemplars* could be provided for training purposes during in-class activities and through homework assignments. Participants could be encouraged to select project targets that produce *natural consequences*, such as reducing their time spent reviewing work. Stokes and Baer also suggest *programming common stimuli*. In this case, materials that prompt completion of each step could be provided to participants. In addition, the consultant could *train to generalize* by concluding the workshop series with the participants creating a plan for a second project and then following up with coaching. Next, the organization could *mediate generalization* by setting a monthly meeting following the workshop where participants report on their current performance improvement efforts and get feedback from the group to create an opportunity for increased accountability, continued learning, and idea sharing. Participating in the meetings and completing projects could be incorporated into the existing performance evaluation and incentive systems. Leaders could be trained to support project implementation and dissemination. Finally,

designated internal employees could be hired or trained in performance management to conduct, support, and disseminate projects throughout the organization, in much the same way that lean six-sigma is institutionalized.

It can be noted by looking at [Table 2](#) that the first three projects, conducted in groups rather than individually, reported that the behavior maintained and were more likely to report that the parts of the intervention maintained or generalized. It may be beneficial to directly test whether completing projects in groups has a more positive effect on outcomes, likely due to increased consequences and support created by the group, compared to individual projects.

Overall, the results of this case study suggest that the workshop model may not produce ongoing project completion without further modification. Because producing lasting change is a likely goal of organizations hiring OBM consultants, these results suggest that additional components should be incorporated into the workshop model. However, the information in this study was collected through self-report 2.5 years after the completion of the study. In the future, it would be beneficial to collect ongoing self-report, observation, and results data to provide more substantive information about the impact of the intervention as well as maintenance and generalization. For example, researchers could include a pre- and post-knowledge test, collect data on percentage of assignments completed accurately and on time, and develop objectives for specific behaviors to master during the training. In addition, the direct care staff could be evaluated periodically to directly assess behavior change resulting from the intervention.

Over the years, OBM has developed and refined many useful techniques but in recent times there has been discussion regarding finding ways to better deliver interventions for lasting impact (e.g., McSween & Matthews, 2004). Future research should continue to examine the consultant workshop model and other methods for delivering OBM interventions and develop techniques for evaluating the overall impact and effectiveness of these delivery methods. Research could attempt to identify the elements that are most important for workshop attendees to learn and practice in order to be able to conduct effective performance management projects and then continue using those skills as other performance management issues arise. Ultimately, the consultant workshop model could be designed to enable and empower managers and leaders in organizations to develop their own performance improvement interventions with very little ongoing support needed from a consultant. This could make OBM more attractive to businesses and is therefore worth further investigation.

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