

Butcher Treatment Planning Inventory (BTPI)

The Butcher Treatment Planning Inventory (BTPI), published by MultiHealth Systems, is a behaviorally-oriented, 210-item, true-or-false measure of factors relevant to psychological treatment planning. It is intended to be non-theoretical and applicable for most psychological treatment approaches. It requires a 6th-grade reading level and, under standard conditions, can be completed in 30 minutes. The inventory can be scored by hand using templates or by using a computer program. Computer-based interpretations of the results are available.

The norms for the BTPI are based on a large representative sample but extensive data have also been provided specifically for college students well as for a large sample psychotherapy patients.

Scale Descriptions: The BTPI items provide individual scores on 14 scales that fall into three clusters.

- The Validity Indicators assess contradictory response patterns (Inconsistent Responding, or INC), unrealistically positive self-presentation (Overly Virtuous Self-Views, VIR), symptom exaggeration (Exaggerated Problem Presentation, EXA), and resistance to new behaviors and ideas (Closed-Mindedness, CLM).
- The Treatment Issues scales assess difficulties in relating with others (Problems in Relationship Formation, REL), tendency to somaticize distress (Somatization of Conflict, SOM), negative attitudes about psychotherapy (Low Expectation of Therapeutic Benefit, EXP), self-centeredness (Self-Oriented/Narcissism, NAR),

and experience of a negative psychosocial environment (Perceived Lack of Environmental Support, ENV).

- The Current Symptoms scales assess low mood (Depression, DEP), tension and nervousness (Anxiety, ANX), hostile attitudes (Anger-Out, A-O), self-blame (Anger-In, A-I), and potentially delusional beliefs (Unusual Thinking, PSY). A General Pathology Composite combines scores on DEP, ANX, A-O, and A-I. A Treatment Difficulty Composite combines scores on PSY, REL, SOM, EXP, NAR, and ENV.

Uses of the BTPI: The BTPI scales provide extensive information regarding numerous patient characteristics that could affect the psychotherapy process, particularly those that could prevent or delay therapy-related change. The BTPI can be administered at several different points over a course of psychotherapy. In the early stages of psychotherapy, it can highlight initial treatment foci, whether psychological symptoms, process factors, or interpersonal variables. For example, an elevated score on Problems in Relationship Formation might suggest a need to make special efforts to engage a patient in a therapeutic alliance, over and above whatever steps might typically be taken early on in psychotherapy. Initial scores can also serve as baseline data for subsequent evaluation of psychotherapy-related change, providing an empirical basis for decisions about such issues as extending or terminating psychotherapy. Either the full measure or one of three briefer forms (the 80-item Symptom Monitoring Form, the 171-item Treatment Process/Symptom Form, or the 174-item Treatment Issues Form) can be re-administered in order to evaluate progress in psychotherapy or outcome.

Research on the BTPI highlights its potential usefulness in guiding the treatment planning process. It enables clinicians to make data-based decisions about how to proceed with treatment.

References

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