

CURRENTS

OF THE NEW YORK CITY CHAPTER

National Association of Social Workers



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BREAKING: Deadly explosion in East Harlem to be focus of Disaster Trauma Committee Meeting on March 21; [Click here](#) to RSVP

A Dynamic Time in NYC; A Dynamic Time at NASW

NASW-NYC is active on no less than two major fronts: strengthening the profession and social and economic justice. It is this combination that will position the Chapter and the profession to work with the administration of Mayor Bill de Blasio and other recently elected government officials in NYC, as well as in the State Capital, and with Programs that employ social workers.

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Bringing Frontline Workers Into the Forefront: Progressive Organizational Management

Paul Feuerstein, MSW

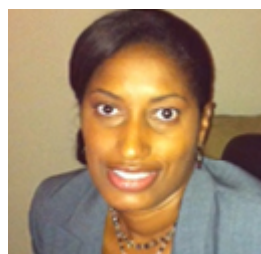
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The Centrality of Clinical Social Workers in Providing Geriatric Mental Health Care

Nancy Harvey, LMSW

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20 Safety Tips for Social Workers Conducting Home Visits

Pascale Victor, LMSW

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Inside Currents

A Dynamic Time in NYC; A Dynamic Time at NASW	2
Progressive Organizational Management at BFL	4
Spotlight on Clinical Social Workers in Geriatric Care	6
NY State Ed. Dept. Publishes Draft CE Regulations	8
20 Safety Tips for Home Visits	12
Social Work Students Lobby for Loan Forgiveness in Albany	14
NASW-NYC Plans for 46th Annual Addictions Institute	16
Marketplace	19

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A Dynamic Time in NYC; A Dynamic Time at NASW

Robert Schachter, DSW, LMSW

NASW-NYC is active on no less than two major fronts: strengthening the profession and social and economic justice. It is this combination that will position the Chapter and the profession to work with the administration of Mayor Bill de Blasio and the other recently elected government officials in NYC, as well as in the State Capital, and with Programs that employ social workers.

Mayor de Blasio's Inspired Appointments

At a recent reception I attended to meet most of the Mayor's appointees who will have responsibilities relating to health and human services, there was palpable anticipation and hope generated by the Mayor's choices. At the top of his selections is Lilliam Barios-Paoli, an urban anthropologist by training, who has a deep appreciation of social work and shares the values of the profession. Dr. Barios-Paoli is now the Deputy Mayor for Health and Human Services

While one social worker was appointed commissioner in his administration, Donna Corrado, PhD, LCSW, at the Department for the Aging, each of the Mayor's appointees inspires admiration, given their experience, progressive values, and history working with social workers. This includes Gladys Carrion at Children's Services, Steve Banks at the Human Resources Administration, and Gilbert Taylor at Homeless Services. In addition, Richard Buery, the former CEO of the Children's Aid Society, was appointed Deputy Mayor for Strategic Planning and will have responsibilities relating to implementing universal pre-K.

NASW leadership is looking forward to every opportunity to work with the new City government in addressing inequality, poverty, and injustice along with the needs of the profession so that we can be more effective at what we do.

Social Work Salaries and Debt

The campaign for equitable salaries that the Chapter launched in mid-January has generated a great deal of attention, with over 2,700 social workers and supporters signing onto the campaign as of today. Strength in numbers is crucial for the campaign to have sustainability. At the beginning of the month the New York Non-profit press, which goes out to 17,000 readers, many of whom are employers, carried a major feature on the salaries campaign, along with a focus on the impact of policy on practice.

On the Albany front in the State capitol, NASW and the Association of Deans of the Schools of Social Work brought 120 students from schools across the state to lobby for an increase in funding for the Social Work Loan Forgiveness Program, which was created in 2005. As of this writing, we are waiting to see if the Assembly puts our request into its budget bill. The Senate has already done so.

Inequality, Poverty, Social Justice and Racial Equity

As Mayor de Blasio moves forward to address inequality in the City, NASW-NYC is moving to complete a fairly comprehensive poverty toolkit with 17 briefs on poverty. What is unique about the tool kit is that it reflects the extraordinary breadth and scope of poverty in the City. As conceived of by Chapter President, Dr. Martha Sullivan, the tool kit will address poverty from both a national and city perspective, covering poverty in relation to:

- | | |
|--------------------------|------------------------------------|
| 1. anti-poverty programs | 9. aging |
| 2. racial disparities | 10. women |
| 3. hunger | 11. communities of African descent |
| 4. immigration | 12. the Latino community |
| 5. housing | 13. the Asian American community |
| 6. mental health | 14. the LGBTQ community |
| 7. children | 15. homelessness |
| 8. disabilities | 16. employment |

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What is unique about the tool kit, in addition to it being accessible and useful for its brevity in each area and for the data, is the fact that it is comprehensive in showing how poverty covers so much of the landscape of the City. It is difficult for the public and media to convey and acknowledge the magnitude of this in so many people's lives. It is the perspective of social work that captures this scope.

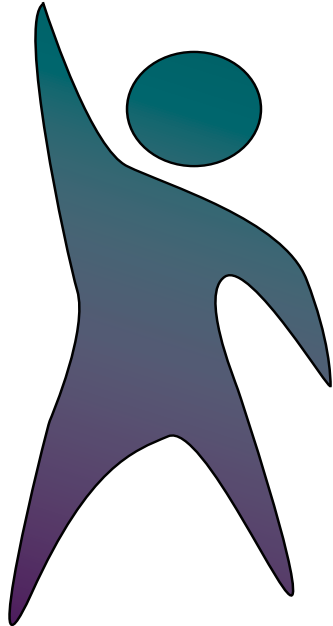
The Chapter will be rolling out the toolkit over the next few months. At the same time and in the months ahead, we can expect, under the leadership of President-elect Sandy Bernabei, to see a heightened focus on racial justice and racial disparities across almost every sector social workers are in.

As we look at how policies are influencing the delivery of services, including how social workers will work, we also need to be examining the needs of clients and their communities and how they will benefit, or not, from current, unfolding change. This examination ties into questions of racial equity.

**THE NASW-NYC CAMPAIGN
FOR
EQUITABLE
SOCIAL WORK
SALARIES**

Social workers advocate for others-
help us advocate for **YOU!**

SIGN ON





Bringing Frontline Workers Into the Forefront: A Progressive Method of Organizational Management

*Paul Feuerstein, MSW
Chief Executive Officer, Barrier Free Living*

*Editor's Note: The work environment for social work practice needs to be an expression of the value of social work. It assures open communication not just from the top down but from the bottom up, so that those in management and administration understand what is needed by the clinician or social worker to optimize the relationship with the client. **Currents** invited Paul Feuerstein to share his approach for organizing his agency, which attempts to achieve such a balance in the workplace.*

In 2004, Barrier Free Living began a process of strategic planning in anticipation of opening Freedom House, the first totally accessible domestic violence shelter in the country. When Freedom House opened, we doubled our annual budget and were able to develop a more robust administrative platform to achieve our goals. Faculty from Columbia's Institute for Not for Profit Management recommended Peter Brinkerhoff's Mission Based Management.

Brinkerhoff is a management consultant for not-for-profits. He looks at not-for-profits not as charities, but as mission driven businesses. Clarity of mission and values is critical for our work. Traditionally, mission statements are developed by boards and handed down to staff. Mission-based management turns that process on its head. The BFL management team went through a self-evaluation using Brinkerhoff's workbooks. That team acted as a catalyst for focus groups of staff and constituents to develop mission, vision and values statements to be taken to the board for approval. The Program Committee of the board worked with the management team on its presentation. As a result of every staff member having the opportunity to contribute to the future of the agency, researchers from NYU who work with us have commented that staff throughout the agency had an awareness of our mission and values that they only found in upper management in other agencies. The message to staff was that every staff member played a critical role in carrying out the mission of the agency.

Creating a system of total communication with staff is a critical part of our focus. We developed an innovation award. Any staff member who developed an improved way of promoting our mission and values in our work would be recognized with a monetary prize as well as a certificate in recognition of his/her contribution. Two years ago, we began to do 360 evaluations with staff. We use Survey Monkey to create an anonymous means whereby staff can give honest evaluations of their supervisor or peers. At first staff did not believe that the surveys were anonymous. After presenting a compilation of the results of the entire management team's surveys and challenging staff to create their own surveys to see how they work, we began to see greater participation in this year's surveys. We introduced the mission-based organization chart, with the board and the CEO on the bottom and direct services staff and our consumers on the top. We are still living into our aspirations.

Staff comes with preconceptions of what working in a social service agency is supposed to be. Managers do the same. We have begun working with the concepts of Daniel Goleman's Primal Leadership and the way in which our limbic systems control our responses to being a leader. Its purpose is to help managers become more emotionally intelligent. Goleman's work shows that it is possible to modify emotional responses to situations with practice and social support. The goal of the supervisory relationship is not to exercise restricting or controlling behavior, but to support workers in exploring how they can

best contribute to our mission. We have started by working with our managers to find a better way to work. We still have work to do with our direct service staff to convince them that they have more influence in our work than they believe they have.

Dr. Rita McGrath of Columbia Business School did a study of corporations world-wide that had the greatest track record for growth. The companies with the greatest consistent growth valued stability of staff, transparency of values and continual small changes to refresh an organization. Stability provides the platform for innovation. Transparent values permit risk taking within the organization. One of our values is "failure is a natural part of growth that can lead to success." Best practice for mission-based management is reviewing and revising the mission, vision and values of the organization every two years. That is an ambitious goal that we have had difficulty achieving. We have found that the process of inclusive review can take six months or longer to achieve.

One of the successes of mission-based work has been our marketing initiatives. It helped us clarify who all our customers are: the people we serve; our funding sources; our referral sources our collaborators in the social service world; the general public. Our marketing team is not made up of a group of social service professionals, but a cross section of staff. It has included kitchen staff, accounting staff, social workers and administrative staff. Anyone can see the results of their endeavor at www.bflnyc.org. Every page of the website has a link to the Mission, Vision and Values of the agency. Videos of staff, consumers and friends of Barrier Free Living populate the site. Our Organization Development Manager keeps up our website with a blog on our home page as well as a Twitter feed, "Three Things You can do to make a difference," and a Pressroom that not only highlights BFL's stories, but anything in news touching on People with Disabilities, Interpersonal Violence or Homelessness.

Mission-based management starts with buy-in from the board of directors and the leadership of an agency. It means sharing power and control. A mentor of mine once said "the more power I share, the more authority I have." That speaks to the heart of what makes this system work.

Resources:

<http://www.missionbased.com/>

Mission-Based Management: Leading Your Not-for-Profit In the 21st Century (Wiley Nonprofit Law, Finance and Management Series). Peter C. Brinckerhoff (Nov 23, 2009)

Mission-Based Marketing: An Organizational Development Workbook (Wiley Nonprofit Law, Finance and Management Series). Peter C. Brinckerhoff (Dec 9, 2002)

Primal Leadership, With a New Preface by the Authors: Unleashing the Power of Emotional Intelligence by Daniel Goleman, Richard Boyatzis and Annie McKee (Aug 6, 2013)



The Centrality of Clinical Social Workers in Providing Geriatric Mental Health Care: A Spotlight on Service Program for Older People

Nancy Harvey, LMSW, Executive Director, SPOP

*Editor's Note: Behavioral health services to older adults are greatly needed at a time when the population is aging. **Currents** invited SPOP (Service Program for Older People) to share its program. We note that SPOP primarily employs LCSWs, which is rare in aging services.*

Service Program for Older People (SPOP) is a valuable community resource in New York City. Since its founding in 1972, SPOP has improved the lives of thousands of older New Yorkers, offering comprehensive mental health services that enable them to age in place with dignity. The agency works in partnership with hospitals, medical providers, and social service agencies to provide mental health care and related services to 1,000 adults each year. The 20 social workers at SPOP are central to every program and make some 10,000 client visits each year.

SPOP was a pioneer in providing community-based geriatric mental health care. Originally established by a consortium of health and human service agencies, SPOP has evolved from a neighborhood organization primarily serving aging Holocaust survivors to a comprehensive mental health center that includes an Article 31 clinic, a Personalized Recovery Oriented Services (PROS) program for adults with serious and persistent mental illness, and free community-based programs in Bereavement Support and Training & Education (for the staff of other organizations in the region). The client population is generally low-income, and half of all clinic clients qualify for Medicaid. In addition to clinical social workers, the professional team includes psychiatrists, case openers, and a psychiatric nurse practitioner.

"We serve an urban population," says Robert Tobing, LCSW, Director of Program Operations, "and they have very specific needs. New York City is aging rapidly, and two of the fastest-growing segments of the population are our immigrant communities and the 'very old,' who are often very frail as well. In addition, SPOP clients are virtually all apartment-dwellers – an arrangement that enables them to live independently but that also leaves them susceptible to social isolation. Imagine an older woman with diabetes, living in a fifth-floor walk-up apartment, with few family or friends living nearby. Our social workers see a lot of clients diagnosed with depression or anxiety disorders, which is often associated with isolation."

One of SPOP's signature programs – and one that has served as a model for other agencies across the country – is Homebound Services, which provides comprehensive treatment in the home for clinic clients who are too frail to travel for appointments. Each client receives a comprehensive initial assessment, including physical and psychiatric screenings, and must meet certain criteria in order to qualify for home visits. Clients range from individuals recuperating from a hospital stay to those who are bedbound or homebound due to chronic medical conditions. The home visit from the SPOP social worker is often their only outside contact and can be a critical factor in averting unnecessary hospitalizations.

A recent grant from The Fan Fox and Leslie R. Samuels Foundation has helped SPOP to expand its clinic staff in order to meet increased demand and to serve the City's diverse population. "We serve a large Latino community," says Mary Emerton, LCSW, Clinic Director, "both on-site at our clinic and through our satellite sites at senior centers in underserved neighborhoods. Our social workers all receive

training in cultural sensitivity, and half of them are bilingual. We never want language or cultural issues to stand as a barrier to treatment!”

One of the greatest community services that SPOP provides is its Bereavement Support program, which offers peer-led support groups for adults who have lost a partner or loved one. Directed by Carola Chase, LCSW, and offered entirely free of charge, the program has earned the praise and gratitude of hundreds of participants who credit it with helping them to understand their grief and rebuild their lives. “Our groups are incredibly diverse – men and women of all ages and backgrounds – and our wonderful volunteers guide them through the process of grief and healing,” according to Carola. “People leave the program in a much better place – and with a new circle of friends who have shared an important process of growth.” Many bereavement clients go on to serve as group leaders, which entails a comprehensive training program and regular supervision.

Last fall SPOP opened New York’s only PROS – Personalized Recovery Oriented Services – program exclusively for older adults. The PROS model serves adults with serious and persistent mental illness (many of whom had been enrolled in SPOP’s Continuing Day Treatment Program) and emphasizes rehabilitation, skills acquisition, and integration into the community. “By focusing on goal-setting and life skills, we are able to offer an exciting schedule of groups and programs,” said Robert Franco, Director of the PROS program. “Our objective is to keep these adults healthy and independent, and we work with each one to develop achievable life goals, which can range from finding employment to losing weight to rebuilding relationships with family and grandchildren.” The PROS program regularly hosts social work student interns from Columbia University and the Silberman School of Social Work at Hunter College.

The social workers at SPOP represent the agency on a daily basis and provide individual and group therapy, home visits, counseling in multiple languages, outreach through senior centers, and, through PROS, life skills training and intensive rehabilitation.

As SPOP moves into its fifth decade, its highest priority is to remain flexible and responsive. The dedicated social workers and other professionals at SPOP serve a population that is older and more diverse than 40 years ago, at the same time that they face new regulations and procedures in the health care industry. What remains unchanged is SPOP’s commitment to serve some of the most vulnerable and fragile members of the community. As the region’s leading provider of long-term in-home geriatric mental health care and a vital partner with medical providers and senior centers, SPOP is poised to play an important role in caring for many more generations of New Yorkers.

Update on the Continuing Education Mandate in NY

State Education Department Has Published Draft Regulations

- Social workers and employers should be familiar with the requirements
- Public comment period is open until April 20; regulations expected to be finalized by May
- NASW-NYC will keep members posted on requirements before the law goes into effect in January 2015, when the need to accumulate CE credits will begin



March 11, 2014: **NASW-NYC Board of Directors discusses CE regulations with David Hamilton PhD, LMSW**, Executive Secretary to the New York State Education Department's Board for Social Work, and Carmen Collado, LCSW, the Board's Co-Chair. Dr. Hamilton fielded questions from those present and provided important information about anticipating the implementation of the mandate in January 2015.

Pictured, L to R: Nancy Andino, Peter Beitchmann, Helen Crohn, Ella Harris, Louis Burns, Carmen Collado, Candida Brooks-Harrison, Martha Adams Sullivan, David Hamilton, Sandra Bernabei, Emily Foote, Elizabeth Rogers, Alicia Fry, NASW-NYC Executive Director Robert Schachter

On February 19, 2014, the State Education Department published draft regulations relating to the new mandate for continuing education (CE) for licensed social workers. This follows Governor Cuomo signing into law Chapter 443 of the laws of 2013, which is the statute for the mandate. The law goes into effect on January 1, 2015.

The regulations delineate more specifically than the statute how the law will be implemented, and some of the details of this are presented below. The public will now have 45 days to comment on the draft regulations, or to raise questions or concerns. The specified deadline for commenting is April 20, 2014.

NASW will itself send comments, along with questions and concerns during this period. Any individual or organization that wants to review the draft regulations can do so through the link at the bottom of this article.

The Mandate for All License Holders to Renew Their License

Basically, 36 credit hours will be required over a three year period, and licensees will have to certify that they have obtained these credits upon renewing their license. Documentation requirements relating to the specific educational experiences are specified in the regulations, both for individual license holders and for providers of continuing education. While the documentation will not be submitted upon renewal of the license, it must be on file and the state has the legal right to check this.

The regulations specify what happens when a license holder does not fulfill the requirements, including suspending the license and curtailing one's ability to practice. The requirements to re-activate the license are addressed, involving making up continuing education credits. Licensees who have not been practicing and want to re-active their license will also need to be aware of what is required. NASW-NYC will be seeking clarification on exactly how many CE hours will be needed to deal with these situations.

New License Holders are Exempt for their First Registration Period

As NASW-NYC has pointed out in previous communications to NASW members, new license holders will not be required to obtain continuing education credits in order to renew their license. Only after new license holders renew their license will the requirements for CE go into effect for them, for the subsequent three years. At the following renewal, which will be six years after obtaining the license, CE credits will need to be documented.

Permissible Subjects

The draft regulations go on to address the type of subjects that will be acceptable, as well as what is involved in organizations becoming approved providers of CE. The primary goal of this learning, as cited in the regulations, is to enhance social work practice, skills, and knowledge and the health, safety, and/or welfare of the public.

The following subjects are listed in the regs as appropriate for CE credit. As of this time, no particular subject is required, so the licensee has a range of choices in what to take.

1. Theories and concepts of human behavior in the social environment
2. Social work practice, knowledge and skills
3. Social work research, programs or practice evaluation
4. Social work management, administration or social policy
5. Social work ethics
6. Clinical interventions, evidence based models, and principles of clinical social work practice, psychotherapy, and clinical social work diagnosis
7. Client communications and recordkeeping
8. Administrative supervision of LMSW and LCSW practice
9. Pedagogical methodologies or other topics that contribute to professional practice

10. Cross-disciplinary offerings, if related to enhancement of sw practice, skills, knowledge, and the health, safety and welfare of the public, in the following:

- Medicine
- Law
- Administration
- Education
- The behavioral sciences

Some credit for CE can also be obtained through:

- Preparing and teaching a course offered by a provider of CE
- Making a technical presentation at a professional conference
- Completing a self-study program, but not more than 12 hours in 3-year registration period
- Authoring a first time article published in peer reviewed journal or chapter in a book, or authoring a book.

The regulations identify conditions for this type of CE and the limit on the number of hours that can be accumulated.

Subjects not considered appropriate for social work CE

The regulations also identify the following subjects that will not count toward fulfilling the mandate:

- Personal development
- Marketing
- Business practices
- Maximizing profits

For CE courses, 50 minutes will qualify as one hour of credit.

Both face-to-face learning experiences and on-line trainings will be acceptable for CE credits, with on-line trainings being both live and self-study. There will be limits on how many hours could be accumulated through self-study. Some amount of CE credit can also be accumulated through teaching and writing.

Providers of CE Must be Approved by SED

The regulations specify that CE providers must be approved by submitting an application and a \$900 fee, and the approval period is for three years. The regs delineate the following types of organizations that can be providers.

1. Higher education institutions with programs leading to social work licensure in NYS. NASW-NYC will be seeking clarification about institutions outside of the state.
2. A national social work organization or other professional organization that fosters good practice in social work. NASW-NYC will inquire if organizations such as medical associations or other non-social work associations might be considered, and if acceptable, under what criteria.
3. A NYS social work organization acceptable to the department. NASW-NYC is assumed to fit under this category.

4. An entity operated under an operating certificate issued under article 16, 31 and 32 of mental hygiene law or a hospital, health facility, under article 28 of public health law. This related primarily to mental health service providers and health and hospitals. NASW-NYC will be seeking to determine whether organizations in child welfare, aging and other fields might also become providers, and such organizations have already reached out to NASW inquiring about this.
5. Psychotherapy institutes registered in New York.

The regulations cite that entities other than the ones listed above might be eligible but do not clarify what the criteria would be. NASW-NYC will be seeking clarification about this.

Issues of Concern to NASW-NYC Include the Following:

- Whether social workers will have enough access to CE learning opportunities, and at reasonable cost: NASW-NYC plans to expand its CE offerings beginning in 2015, including organizing a major conference (date to be announced), but the total demand for CE offerings is expected to be greater than any one organization's ability to provide them. There will be room for many providers of CE.
- Whether some organizations that would want to offer CE will meet adequate standards for providing training in social work: Other NASW chapters across the country have raised concerns about this in the past, and NASW and the schools of social work have been examining this.

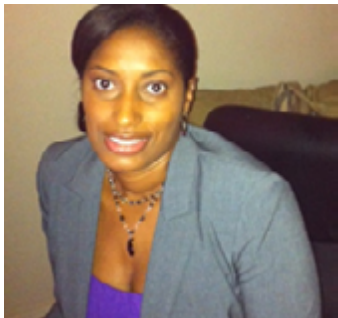
A common question that social workers have been asking is whether they can accumulate CE credits prior to the law going into effect. It is NASW-NYC's understanding that this will not be permitted, and the regs state that credits accumulated in one period (relating to the applicable period of the license registration) cannot be applied to another period.

Once the law goes into effect, if one's license renewal will come up in less than three years, the amount of CE credits needed will be prorated. For example, if the renewal comes up in one year, then only 12 credits will be needed.

Since the proposed regulation is more than 2,000 words, the State Register only provides a summary of the proposal; the full text of the proposed regulations can be found with the Board of Regents item from the January 2014 meeting:

<http://www.regents.nysed.gov/meetings/2014/January2014/114ppcd1.pdf>.

Comments should be submitted to OPDEPCOM@mail.nysed.gov by April 20, 2014.



Safety Tips for Home Visits From a Veteran NYC Social Worker

Pascale Victor, LMSW

*Pascale Victor, author of *Field Work with an Open Heart: Portraits that Unlock the Door to Your Clients' Secret Lives*, is a licensed social worker with a degree from the Columbia University School of Social Work in New York City. Her extensive experience encompasses both direct clinical work and social work administration. She also has experience providing short-term therapy to adolescents, adults, and families, serving as a bridge between her clients and community-based organizations for continued long-term mental health treatment. She was formerly employed as a hospital social worker where she worked closely with psychiatrists in order to provide social service intervention to the youth who were brought to the pediatric emergency room as a result of mental health or emotional/behavioral problems. From 2002 to the present Pascale Victor has been employed as a social worker for the New York City Housing Authority (NYCHA). There she provides social service intervention to the residents of NYCHA: youth, adults, elderly, as well as families. Responding to emergency situations and providing intervention in crises are part of her responsibilities.*

Ms Victor has compiled a list of safety tips for all social workers whose jobs, like hers, include field work. She believes some of them will also be helpful to other social work professionals who do not do field work.

Doing Home Visits? Err on the Side of Caution and follow these Safety Tips

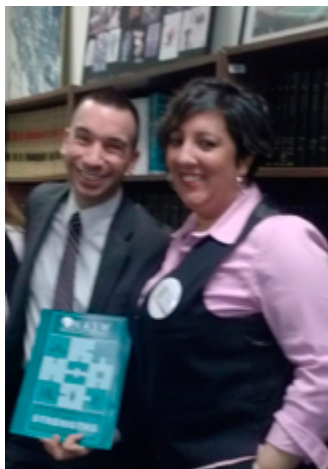
- 1) For an initial home visit, try to schedule the appointment by telephone or letter so that the client will know to expect you and be prepared. If you speak to the client ahead of time, you may be able to get vital background information or an update on their current situation, which may have changed.
- 2) Whenever possible, conduct home visits accompanied by colleagues or employees from other agencies who are also working on the same case. If you are a woman about to conduct a home visit that is potentially unsafe, you may request that a male colleague accompany you. For example, I have a male co-worker who is 6'4" and wears sunglasses and an earpiece, so he looks like a secret service agent. He can definitely be intimidating, which is why I request his "bodyguard services" for some cases.
- 3) Depending on the nature of the case, some clients can come to an office, rather than have you meet them in their homes.
- 4) Always carry a charged cellular telephone.
- 5) Request a joint home visit with a police officer if you think the situation could become extremely dangerous.
- 6) Be sure to inform your supervisor and another colleague of your whereabouts.
- 7) Know where the exits are in a home and in building hallways.
- 8) Do not enter an elevator with people who are suspicious-looking or make you feel uncomfortable in any way. If you are feeling nervous, pretend that you are using your cellular telephone and cannot get on the elevator. When riding an elevator with someone who frightens you, immediately press the button of the next floor so that you can get off.

- 9) If you feel unsafe during an interview and believe you are or might be in danger, you should immediately end the interview and leave—run if necessary!
- 10) Depending on the case and any confidentiality issues, you can possibly get a client’s trusted family member involved and conduct a joint home visit with that person.
- 11) Always be vigilant and assess the surroundings—both inside and outside a client’s home.
- 12) Never stand too close to an apartment door. Clients often open their doors and allow their dogs to run out and jump on you. Request that the client put the dog or other pet in another room. It is also possible that a client could try and harm you, so stay back. It is rare but it is always better to be safe than sorry.
- 13) Always remember to keep your cool. Never show a client that you are scared. Always remain professional and if the situation gets out of control or dangerous—leave. Remember that you are the professional and are there to help the client. If you show that you are scared, the client might try to take advantage of the situation by being manipulative.
- 14) Do not allow clients to play on your sympathy and good nature to get what they want. Stay firm and do your job to the best of your ability. Never allow a client to sway you in any way that is not for the good of the case. If you make a decision against your better judgment and only follow the client’s wishes, the client may become very upset and refuse to be cooperative if you make contrary decisions later. A client may even “turn against you” and become belligerent and hostile.
- 15) Do not get too comfortable and let your guard down with clients. Remember that you are providing a service for them—they are not your friends.
- 16) Depending on the case, it may be possible to meet in a public place such as a nearby park, community center, senior center, coffee shop, etc.
- 17) Educate your clients about how to get rid of bedbugs with a professional pest service. Bedbugs often hide in living room furniture and bedrooms. Field workers who deal with bedbugs are most definitely at risk.
- 18) Wash your hands regularly. If you are out all day and are constantly touching door knobs, shaking hands and utilizing public transportation, it is easy to catch germs and spread them. Keep a hand sanitizer or wipes in your coat or bag.
- 19) If you are highly allergic to certain domestic animals then you should take that into account before conducting home visits. Many clients live with cats, dogs and other pets. If being around a particular animal triggers an allergic reaction, necessary precautions need to be taken into account ahead of time. In some cases you may need to see an allergist for guidance.
- 20) Always wear comfortable clothes and shoes while working in the field since you will be regularly walking, standing and climbing stairs.

For more information, or to contact Ms. Victor, please visit www.pascalevictor.com

2014 Lobby Day Draws 120 SW Students to Albany; An Additional \$500,000 for SW Loan Forgiveness Expected in 2015 NYS Budget

On March 4th, NASW-NYC helped organize 120 students from 14 schools of social work who traveled to the State Capitol in Albany to call on the legislature to increase and expand the social work loan forgiveness program in New York State, which was established in 2005, after efforts by NASW-NYC and others. Julie Jimenez, who represents NASW-NYC as a student “member associate” at Touro College School of Social Work, wrote about her first experience in the capitol:



There are no words to describe the wealth of knowledge I gained about how policies are put into place and all the key stakeholders involved. The experience has opened up a new-found passion for government and policy work. My most memorable moment of the day was when I entered the assembly hall and a staff member greeted me by saying, “This is your house, do not be afraid to come in.” Those words truly resonated with me.

I hope that many more students will become involved in next year’s Lobby Day so that they too can experience and take part in policy making. As Americans, we are part of a great democracy which allows our voice to be heard, however, as future social workers if we do not step forward and advocate, we will not only do an injustice to ourselves, but also to the communities we will serve.

This week, it we learned that the \$500,000 in additional funds requested on Lobby Day are expected to be added to the Senate and Assembly budgets. You can read more about the day [here](#).

Snapshot from Social Work Month

Hospital for Special Surgery Celebrates Social Work Month



Share with us
what you are
doing for
Social Work
Month!
Send photos
and stories to
[contactus@
naswnyc.org](mailto:contactus@naswnyc.org)

The Hospital for Special Surgery welcomed Nancy Violette, PhD, LCSW, who gave a presentation to the Social Work Department on Motivational Interviewing with Patients and their Families to Enhance Health Outcomes. (Photo: My-Lan Tran)



Save the Date

May 15, 2014

2014 Annual Meeting

The Significance of Faith

*Integrating the faith and spirituality
of our clients into social work practice*

Social Work Image Awards Call for Nominations

To be presented at the NASW-NYC 2014 Annual Meeting

NASW-NYC seeks to identify and acknowledge the unique contributions of social workers helping to advance the profession each year, through its Social Work Image Award.

We are seeking nominations for the following areas of practice:

- Direct Practice • Administration • Community Organization or Advocacy

All nominations must be received by Friday, March 28th to be considered.
Late submissions will not be accepted.

Please go to NASWNYC.org for more information.

SAVE THE DATE

Wednesday, June 11, 2014

46th Annual NASW-NYC

Addictions Institute

“Building Resilience in Drug Treatment and Recovery”



The Adverse Childhood Experiences (ACE) Study has clearly demonstrated the major role that childhood abuse, neglect, domestic violence, and parental substance abuse have on physical health as well as emotional well-being throughout the life span, including a significantly higher rate of substance use disorders and mental health problems. Those who come for addictions treatment manifest the effects of these cumulative adverse childhood experiences. The need for trauma informed care exists equally in the addictions field, in children and family services, in the mental health and domestic violence fields, as well as in those experiencing medical problems. With this knowledge comes the need for interconnection between the fields of social work practice and public health to develop a cross-systems approach for recovery.

The NASW-NYC Addictions Institute, the premier conference in New York, brings together the most dynamic leaders in advanced clinical training, policy analysis and programming, and looks to expand this dialogue to include consideration of healthcare policies, programming, and interventions to move service delivery systems from reaction to prevention, and to shift our culture from retraumatizing survivors to healing.

Earn 5.5 CEUs in the incredibly diverse selection of educational workshops, the keynote presentation and panel while attending the **networking sessions** interwoven into the schedule throughout the day so that even the most reserved clinician can enjoy.

A day to update advanced clinical and programming skills, expand your social/professional network, and become an immediate part of the proactive community in the prevention, intervention, treatment and recovery management of addiction(s).

Who should Attend:

Social Workers, Counselors, Physicians, Nurses, Addiction Therapists, Gerontologists, Family and Children Services Specialists, Mental Health Therapists, Administrators, and Executives.

Register online starting April 1, 2014 <http://www.naswnyc.org/displaycommon.cfm?an=1&subarticlenbr=217>



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Open Houses Held Monthly

April 11: 1:30-2:30PM ■ May 13: 5:30-6:30PM ■ June 10: 1:30-2:30PM

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OPEN HOUSE

Psychodynamic Psychotherapy Program

Saturday, March 29, 11:45am - 1:45pm

IPE Offices - One Park Avenue at 33rd Street #801

Treating a Man with Anorexia Nervosa: a Psychodynamic Case Study followed by lunch and program overview

Men suffering from anorexia are often overlooked in the literature and case studies. A candidate in IPE's Psychodynamic Psychotherapy program will present the case of a resilient, defended young man to a supervisor.

Pre-registration is required. There is no charge for this event.
Contact the office or visit the website to learn about all of our training programs.

Offices and Classes

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Susan Roane, PhD, at 347-725-0080.

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Details: www.mitpp.org

For further information contact: Joyce A. Lerner, LCSW, Director, MITPP
160 West 86th Street, NY, NY 10024 Phone: (212) 496-2858
Email: mitppnyc@aol.com Website: www.MITPP.org



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**OPEN
HOUSE**

April 27

March 20th
Anne Alvarez

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www.iptar.org

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OPEN HOUSE:

Listening to the Unconscious: Analysts at Work

Saturday, May 3, 2014 at noon

For more information please contact Nicole Dintenfass, PhD, Director of Academic Affairs at 212-744-9681

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Sunday, April 27, 2014 at 1:00

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Come to our open house at NPAP and learn about our training program. NPAP offers training for people with all levels of clinical experience – or no experience at all.

- Our training fulfills requirements for the New York state license in psychoanalysis. Candidates with the LMSW and MA in Psychology can gain clinical experience for their licenses while training at NPAP.
- Our referral service provides clinical experience for all candidates and an opportunity for a stipend. Candidates begin to work toward their private practices while training.



NPAP

NATIONAL PSYCHOLOGICAL
ASSOCIATION for PSYCHOANALYSIS

NPAP Open House
Sunday, April 27, 2014
1-3 PM
Brunch will be served
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(between 5th & 6th Avenues)

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OPEN HOUSE

The Body in Mind: An introduction to
 The WTCI training program on
 Eating, Sex, Surgery,
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April 6, 2014 Noon to 1:30

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