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GWSCSW Needs You!

By Judy Gallant, Nominating Committee Chair

I received a phone call from our Society president, Sydney Freymire, late last year. She asked if I would be willing to be the chairperson of the nominating committee and come up with candidates who would agree to be on the ballot to become officers for the coming year. I had met Sydney at several events, but we really barely knew each other. So, why me? "Your name came up and people said good things about you. But don't worry. Susan Post and I and the executive committee have lots of ideas about people who might be willing to serve in different capacities." But they needed people to organize it, make the calls, etc., etc. Would I take the helm?

Me, be the organized one? My practice is full; I'd been feeling stretched by that and some volunteer commitments at my synagogue, and we still hadn't finished dealing with work that needed to be done to our house after a branch had come through our bedroom roof. I would have to spend time trying to convince people, whom I didn't know, that it was worth it for them to devote time to the Society. I wasn't sure this was a good idea. But Sydney (and some unknown others) complimented me, feeding my poorly developed narcissism. And I always feel at least vaguely guilty that I'm not doing more for the Society when there's so much interesting stuff going on and so much that I know needs to be done in order for those things to happen. Plus, Sydney said that she and others would give me lots of help.

It was that last piece that really made me decide to say yes. This wouldn't be a one-woman project, nor could it be. I would have others behind me, with their suggestions and encouragement. I would neither succeed nor fail in my mission solely as a result of my efforts. The committee's efforts would either fail or succeed as a result of many others' willingness to put forth ideas and come forward with their time and energy to help the Society remain strong.

So now I'm getting to the part about the Society needing *you*: your talents, your interests, your time, your enthusiasm, your effort. Yes, in addition to everything you already have going on.

Or, another way to think about it, is that you need the Society. You need the vibrancy of the listserv discussions, the interesting programs that make getting CEUs relatively painless, the camaraderie of the happy hours, teas, and of your colleagues sharing your passion for our profession, the advocacy that will keep our professional ethics clear and the legislators and

continued on page 3

Greater Washington Society for Clinical Social Work, Inc.

PO Box 3235, Oakton VA 22124
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GWSCSW NEWS & VIEWS

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For advertising rates see page 27
Email ads to gwscsw.ads@gmail.com

The next issue will be published
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Email articles to gwscsw.news@gmail.com

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President's Message

Sydney Frymire



It has been nearly two years since I agreed to be president, so my term is coming to an end. In addition to the president's position, several others on the executive committee will be open. I'd like to encourage you to think about taking a leadership position.

As social workers, we tend to be interested in self-development and in helping others improve their lives. With all the changes in mental health policies that impact our work, it is more important than ever that we do things we are afraid to do to promote our-

selves and our profession. We are trained not to have our own agenda, but to serve our clients. Fortunately, many of us are overcoming our reluctance to promote ourselves and our businesses. We have web pages, and take marketing classes and other training to compete in today's market. Involvement in our clinical society is another avenue of opportunities for both personal and professional development.

More members are active in our Society than ever before. For those of us in leadership positions, this means that we have a lot of great members working with us, our roles are clear, and we have more time and energy to enjoy what we are doing.

Today it is more important than ever to find resources to help us become leaders in small or big ways. There are many more experienced members who will answer questions and guide you, if you are interested in developing your skills and growing your confidence by taking a more active role.

There are many different reasons members take leadership positions. Some of them are:

- To network and get more clients
- To develop skills working in an organization and with others
- To grow personally
- To learn how a volunteer organization works
- To support the development of the social work profession
- To support the growth and development of social workers
- To be part of a community and work with like-minded people

It has been a privilege for me to be president. Being a bit of an outsider, coming from a career in the public sector, it was a big step because I didn't know many people and hadn't served on a committee or the board. When I started, several of us were new to the executive committee. Each of us were encouraged, supported, and guided to be successful in our roles. It has been a great experience for me on many levels.

This theme was presented beautifully by Robin Gerber, author and inspirational speaker (www.robingerber.com), who spoke with members and answered questions about leadership development at Kate Rossier's wine and cheese on February 5. She explained that each of us has experience



GWSCSW members visit with author Robin Gerber at the leadership workshop which was part of the Virginia wine and cheese networking event.

being a leader and have people who have encouraged us. You are a leader if you are a parent, have a practice, or a job. You may not realize it. Each of you has leadership ability and potential.

When I first started out as a new social worker, working for Montgomery County, Gino Renne, president of Local 1994, asked me to be a shop steward for the Montgomery County Government Employees Union. My first answer was, "No." With his support and encouragement, I agreed to try. I had no idea what I was getting into. I just knew that I wanted to help my colleagues with difficult workplace issues. Working with the union empowered me. My leadership ability was recognized, encouraged and developed. My confidence and skills grew. Then, when Susan Post asked me to be president, I was willing to take the risk. Being president has been good for my business and my skills as a leader. I have the satisfaction of working on behalf of our profession and for social change.

If you are interested in becoming more involved, have an idea or an interest, or would like to talk with someone to learn more about becoming a leader, please let me or someone else on the board know. We'd like to support your participation in an area that interests you. As an organization, we are flexible. Our volunteers receive lots of autonomy and appreciation. ❖

Nominating Committee, from page 1

insurance companies respecting and valuing our contributions to society. And, whether you know it or not, you may also need the opportunity to grow as a professional in a different way than you've thought about previously. Perhaps you wish you had more power to exact change, but wondered if you could tolerate your own mistakes or making others angry. Maybe your conviction about the work we do can help empower our entire profession—and make a name for yourself, bring yourself fame and wealth. Or maybe not, but wouldn't that be fabulous?

So here's the nitty-gritty. In addition to people who work on and head committees, we need *officers*: president, vice president of development, vice president of education, vice president of legislative affairs, secretary, treasurer and directors-at-large. The officers are asked to attend monthly executive committee meetings, and attend quarterly board meetings with the committee chairs. The current officers have assured me that they would welcome phone calls from people who would consider running for their position if you have further questions.

PLEASE contact me (jg708@columbia.edu, 301-587-2552) or Angela Fowler-Hurtado (angela0614@gmail.com, 202-544-2032) to discuss your interests and where your energies and aspirations might best be applied. If you would like your name on the ballot, we will need your request in writing, along with three members who write to us directly to support your nomination. Time is of the essence. We need to have everything in place to be able to mail out ballots to the membership by the beginning of May.

Please help the Society remain the vital organization it is. We're in this together. And you can be an even greater part of it! ❖



Volunteers! Volunteers!

Interested in being part of the Society but you don't have a whole lot of time?

Consider volunteering for a time-limited, one-time event.

If any of the committees sound like fun, but you would just like to try it out, give us a call.

Nancy Harrington LCSW, CGP
NAHLCSW@aol.com or 703-608-0180

LEGISLATION & ADVOCACY

■ DISTRICT OF COLUMBIA

By Margot Aronson

The District of Columbia Health Insurance Exchange (HIX), approved by the District Council in late December 2011, creates the “online marketplace for one-stop-shopping” mandated by federal health care reform, where health insurance plans can be compared based on price and quality.

HIX is charged with assisting individuals and small businesses to purchase affordable and easy-to-understand health insurance, facilitating enrollment of individuals and employees in qualified health plans, and helping individuals access public health insurance programs, premium subsidies and cost-sharing reductions.

HIX Advisory Board: An Opportunity to Serve

HIX will operate as an independent authority governed by an Executive Board of eleven members: seven Mayoral appointees, plus the Director of the Department of Health Care Finance; the Commissioner of Department of Insurance, Securities and Banking; the Director of the Department of Health; and the Director of Human Services. An appointed six-member Advisory Board will make recommendations about standards and benefits.

The opportunity to serve on the Advisory Board is open to a health professional: we would be happy to have our profession represented. Think about being a candidate!

As for the many months of discussion leading to the HIX legislation, we thank Mary Lee Stein for representing the Society in the highly-involved community coalition led by Families USA, and we congratulate Councilman David Catania, Chair of the Council's Committee on Health, for maintaining a very open, collaborative process.

Modification of the DC Involuntary Commitment Law?

A reconsideration of the wording of the DC involuntary commitment law has been spurred by the tragic death this August of a long time White House employee who had refused the help of several DC agencies even as

his mental health visibly—and dangerously—deteriorated. Councilman Jim Graham, chair of the Council's Committee on Human Services, will be spearheading a review of how and when city agencies can step in to involuntarily commit someone.

Modification of the present law is a possible outcome. Should the Society be taking a stand? Please contact the legislative committee with your thoughts.

At the Board of Social Work

Despite the frustration of longstanding vacancies, the DC Board of Social Work has done some very impressive work in the past few months. (Thanks to our colleagues Dr. Eileen Dombo and Willa Day Morris, who have volunteered their time as Board members for the past several years.)

The Board has worked on a number of regulatory clarifications and changes—on supervision, on CEUs, and on documentation. You are urged to check the District of Columbia Municipal Regulations for Social Work on the Board website. One important addition is a requirement for all District health professionals to complete three hours of training in Human Immunodeficiency Virus (HIV) plus a mandatory online DC Social Work Laws and Regulations Review course.

In response to feedback elicited from the social work community, the Board is working on changes to the proposed Human Services Worker legislation. Review by the office of the Mayor is the next step for this proposed legislation, which, if passed, will require Human Services Workers and others with similar job descriptions to be registered with the Board.

The Medicaid Network

A final issue: in DC, as in certain states, Medicaid reimbursement is not available to private practice social workers, and instead is reserved for those who are affiliated with a hospital or core service agency. We plan to advocate for a change in that policy with the legislative staff of the DC Council Committee on Health. Stay tuned. Or better still, get involved! ❖

Margot Aronson, LICSW, GWSCSW vice president for Legislation & Advocacy, is a past president of the Society and a former News & Views editor. She maintains a private practice in the District.

■ VIRGINIA

Dolores Paulson, PhD

The 2012 Virginia General Assembly will be over in a few days. The so-called “short session” that convened on January 10 ends on the sixtieth day, March 10.

The State budget has seen severe cuts in children’s health, Medicaid, and the Community Service Boards. The Boards provide services for individuals with substance-abuse disorders and intellectual and developmental disabilities: psychiatric services, case management, and intensive in-home services are at particular risk. Even in the current fiscal climate, calls, emails, and visits to your legislators keep them aware of the importance of these programs to the professional community and to their constituents.

We have long collaborated with the Virginia Society for Clinical Social Work (VSCSW) in our Virginia advocacy efforts. A lobbying team from Sue Rowland Group is helping guide our strategy.

WASHINGTON SCHOOL OF PSYCHIATRY

The Developmental Psychotherapy Seminar
2012–2013 Series

Therapeutic Presence: Reflections on Countertransference

Nine monthly seminars beginning September 21, 2012
Fridays, 12:15–3:15 PM

This seminar series is for licensed professional who are interested in the treatment of children with complex psychopathology originating early in life.

Each seminar includes a case presentation which the faculty discusses from four perspectives: 1) heritable and constitutional factors; 2) attachment theory; 3) intrapsychic and psychodynamic factors; 4) family structure and systems. The seminar provides an opportunity to integrate multiple points of view from which to plan and provide comprehensive treatment.

Cases in this series include: dissociative disorders; life-threatening eating disorders; trauma following natural disaster; forensic issues/attachment; cross-cultural issues in loss and trauma; planned and unplanned termination; regulatory disorder across generations.

Presenters: Mauricio Cortina, MD; Griffin Doyle, PhD; Gwen Martisen, PhD; Marc Nemiroff, PhD; Ruth Zitner, PhD; Georgia DeGangi, PhD; Kristin Lee, PsyD; Elizabeth Maury, PhD; James Venza, PhD.

Tuition: \$810
27 CE/CME credits for full attendance

For more information, contact
Elizabeth Maury, PhD, 301-920-1102

To register, call
202-237-2700

In a document that we would otherwise support, occupational therapists proposed legislation that added “mental health” to the language describing their scope of practice. Our coalition has urged a change in wording to avoid confusion.

VSCSW has taken the lead on a specific legislative project this year. Concerned that a significant number of the adjudicated complaints to the Virginia boards of licensed mental health practitioners involve sexual violations against clients, VSCSW proposed legislation that would, in addition to whatever sanctions are imposed, make the treatment and monitoring services of Virginia’s Health Practitioner Monitoring Program (HPMP) available to the offending clinician. (At present, HPMP’s confidential services are available only for those health practitioners impaired by physical or mental disability or suffering from chemical dependency.)

VSCSW found sponsors to introduce the legislation—House Bill 1289 and Senate Bill 634—and testified before the House sub-committee as well. Collaborative efforts with NASW and with other mental health professional societies resolved a number of the concerns about the bill, and, since HB1289 has been “referred for study,” there will be time between now and late November to gather more support. Virginia licensees are urged to learn about and support the measure.

Changes at the Board of Social Work

With gratitude, we bid a fond farewell to Board of Social Work Executive Director, Evelyn Brown, who gave 25 years of exemplary service to the Commonwealth of Virginia and to the profession of Social Work. We wish her well in her retirement years with more time to enjoy her family, her farming, and her animals. Volunteer work is high on her retirement agenda.

Welcome to Catherine Chappell, our interim executive director. Catherine is young, energetic, and knowledgeable. She has great respect for social work and highly values our profession. We look forward to many years of working with Catherine. ❖

Dolores Paulson, PhD, LCSW, has been a mainstay of the GWSCSW board. Dolores has chaired the Continuing Education committee as well as several conferences for the Society. In addition, she has served on the State Board of Social Work. Dolores is in private practice in Virginia.

■ MARYLAND

Alice Neily Mutch

The 430th Session of the Maryland General Assembly began January 11, 2012 and adjourns April 9, 2012.

Typically during the 90-day legislative period each year, we can expect to consider more than 2300 bills and the State's annual budget. This year is no different. We are in the midst of that process, and bills are flying fast and furious.

As your lobbyist, my responsibility is to protect your clinical social work interests and keep you aware of critical issues as a wide variety of initiatives emerge.

The General Assembly has 47 Senators and 141 Delegates elected from 47 districts. If you do not know your legislators, you can access that information in a matter of a few minutes. Follow the simple directions on my website under "Legislators" at capitalconsultantsofmd.com or go to <http://mdelect.net/>. The address where you practice is just as important as your home address.

A bit about the process:

I send profiles of proposed legislation which may affect you and your clients to your Society's Maryland legislative committee and to other Society members who have expressed interest. Some profiles may seem unrelated to your profession. I monitor these based upon my political judgment and the potential for amendments which may affect you.

It is the practice of the health and budget committees to send every bill to a subcommittee. These committees have endless meetings where further testimony can be crucial. I am there. Your MSW intern, Jaida Collins from Howard University, is often there as well.

Your evaluation and guidance is crucial on priority legislation to ensure that you are not negatively impacted. I ask your Society's committee to review priority bills and give me their assessment. Action on these bills will come in the form of close monitoring, written testimony, or active participation in the hearing and subcommittee and/or workgroup process.

Those of you who are on my clinical social work email list can access each bill directly through the profile I send. (I'm happy to add your name, if you are interested.) Additional information, updated continuously during the session, is available on the General Assembly Website (<http://mlis.state.md.us/>), the Department

of Legislative Services, the Maryland Manual and Maryland State Government.

Our efforts to ensure the visibility of clinical social work have been effective: you have gained a reputation of credibility in large measure because legislators realize that you, their constituents, are invested in the process and believe that they want to do the right thing.

Reimbursement and Essential Health Benefits (EHB) in Maryland

Now, let's update you on the future of reimbursement and the Patient Protection and Affordable Care Act (ACA) as it is to be implemented in Maryland.

On December 20, 2011, the Department of Health and Human Services (DHHS) issued a bulletin offering states considerable flexibility and freedom in the development of the Essential Health Benefits (EHB) packages that will be required of all plans in each state's Health Insurance Exchange. Rather than setting forth specific requirements, the DHHS proposal permits states four options for creating their own EHB programs, based in each case on an insurance plan already in use in that state.

The use of existing plans as models for essential mental health benefits raises concerns. Outpatient psychotherapy benefits differ widely from one insurance plan to another, and some plans impose limits on number of sessions allowed, the diagnoses covered, and the range of treatment options that are contra-indicated. It is also of concern that, although there is a clear DHHS requirement that mental health treatment be considered an essential benefit and be offered at parity with medical benefits, DHHS has provided no clear definition of how "parity" is to be interpreted, leaving more questions than answers about implementation.

Maryland has been a leader among states in addressing the complexities of federal health care reform and the creation of Health Insurance Exchanges. The Society will need to form coalitions with other professional groups to advocate for robust mental health coverage for the Maryland Health Insurance Exchange EHB. ❖

Alice Neily Mutch of Capital Consultants of Maryland is legislative representative for the Maryland Clinical Social Work Coalition, the Maryland legislative arm of GWSCSW. She has a background of many years of direct health care experience and federal program evaluation and consultation. She has been a lobbyist for health and human service causes for close to twenty years.



► Intervention in 2012 CURRENT ADVANCEMENTS ►



Laurence Westreich, MD



Joani Gammill, RN, BRI 1



Judge Mark Farrell

TUERK CONFERENCE *on* ADDICTION TREATMENT

Largest Addiction Conference on the East Coast

- Intervening with the Reluctant Patient, *Laurence Westreich, MD*
How to Conduct a Successful Intervention, *Joani Gammill, RN, BRI 1*
Sports Psychiatry: Lessons for Life Balance & Peak Performance in Early Recovery, *David R. McDuff, MD*
Soul Silence: A Unique Approach to Mastering the 11th Step, *Peter Amato, MA, E-RYT 500*
A Practical Guide to Intervention: The Who, What, When, Where, Why, and How of Interventions, *Gale Saler, LCPC, CRC-MAC, CAI*
Gambling as an Addiction: Diagnostic and Treatment Implications, *Joanna Franklin, MS, NCGC II*
Smoking Cessation for Mental Health and Addiction Clients: Opportunity and Challenge, *Carlo C. DiClemente, PhD*
Health Care Reform: The Latest Information Regarding its Impact on Addiction Treatment in Maryland, *Matt Celentano*
Gambling Treatment Court: A "Struggle" for Progress, *Judge Mark Farrell*
Family Consultations and Interventions for Young Adults, *Richard H. Mikesell, PhD*
PHIL McKENNA INSTITUTE: Interventions in the Workplace, *James R. O'Hair, LCSW-C, MSP, CEAP*
Recovery Coach: Sustaining Recovery after an Intervention, *Kirklin Frazier*

Tuesday, April 17, 2012, 8 am to 5 pm

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University of Maryland Department of Psychiatry Division of Alcohol and Drug Abuse

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for Individuals with Substance Use
& Co-Occurring Mental Health
Disorders”**

**Presented by Gerald D. Shulman,
MA, MAC, FACATA**

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Baltimore, MD

WEDNESDAY, MAY 2nd, 2012

Washington, DC

**This workshop deals with Counselor
Skill Groups: Ongoing Treatment
Planning and Counseling Services,
Social Workers, Case Managers,
Discharge Planners, Employee
Assistance Professionals, anyone who
works in the substance abuse/co-
occurring disorders field would benefit
from this workshop.**

- This workshop is approved by the National Association of Social Workers (Provider #886585750-9636) for 6 Substance Use Disorder Social Work Continuing Education Contact Hours.
- This workshop is co-sponsored by NAADAC and C4 Recovery Solutions for 6 Contact Hours. Approved Education Provider #000507.
- This workshop is approved by EACC for 6 Professional Development Hours in Domain III.

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lindseyh@tsnemail.com 954-892-9964

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**Includes Continental Breakfast
and Lunch**

ABOUT THE PRESENTER

Gerald D. Shulman is the President of Shulman & Associates, Training & Consulting in Behavioral Health in Jacksonville, Florida. He has worked in the behavioral health field for over 45 years as a clinician, clinical supervisor and administrator in all levels of substance abuse care.

Gerry has worked as a trainer of treatment programs, developed new treatment programs and licensing standards for state substance abuse, as well as assessment systems. Gerald D. Shulman has been an author/developer of over 100 professional articles, books, book chapters, and clinical assessment instruments.

DC Confidentiality Update

Danile Drake

Presently, there are two critical types of legislation in DC that are of interest to us as clinical social workers in all three jurisdictions, because they are considered to be model legislation.

DC Mental Health Information Act

The first bill we have been most concerned about has been a proposed amendment that would weaken the DC Mental Health Information Act of 1978 which protects confidentiality. That bill has been sent back by the DC Council to the Department of Mental Health for reconsideration. We have met with the primary sponsors of that bill to learn more about their objectives and to see if there is some way that they can address their clinical issues without the wholesale undermining of the legal protections for confidentiality. These sponsors include the DC Primary Care Association and the DC Behavioral Health Association. There was agreement on the need for us to brainstorm together to find solutions for continuity of care for Medicaid clients without compromising privacy for both Medicaid clients and private pay clients. Given thousands of documented security breaches to electronic medical record exchanges, it becomes more and more pressing to seek creative solutions to the need for emergency room and primary care physicians to have access to needed medical information, especially where medication interactions could be deadly.

We have alerted the DC Department of Mental Health of our concerns, and have been invited to contribute to an email exchange in preparation for a working meeting, tentatively scheduled for sometime in May. That meeting's agenda will be a reworking of the proposed amendment, hopefully toward a solution. We also discussed concerns about the far-reaching sweep of individuals sanctioned to have access to private mental health treatment information, including agency and clinic administrative staff.

Definition of Independent Review

We will be testifying at a hearing on February 16 to support the language of this second amendment which defines "independent review" when insurance claims have been denied for mental health treatment. In anticipation of that hearing, we met on February 13 with representatives from Kaiser, United Behavioral Health, the Association of Health Plans, and Care First Blue Cross and Blue Shield. They will also be testifying at the hearing before the DC Council.

Thank you to all the members of the GWSCSW who signed on to the letter which will be entered into testimony supporting the Appeals and Grievance Policy Amendment. We will follow up on the listserv with a summary of the DC Council's decision.

Danille Drake, PhD, LCSW is a psychoanalyst in private practice in Bethesda and McLean. She is on the faculties of GWU, Georgetown School of Medicine, and the Baltimore Washington Institute for Psychoanalysis. She serves as Liaison to the Board of GWSCSW, on legislative matters related to privacy protection of mental health treatments.

Welcome New GWSCSW Members!

Full

Christine M. Alam
Robin Ann Austrager
Frederick Brewster
Caroline Conley
Sarah Edmunds
Carrie Field
Niki L. Irish
Kara Ker
Cindy M. Kim
Joseph W. LaFleur
Laurie Levine
Joanne Lynch-Bachbauer
Lynn McIntyre
Andrew Pollock
Amy Robertson
Carrie Tiller
Jacqueline Wallen

Graduate

Melanie L. Eisner
Marianne Josem
Erin Mascarella
Amy Peterson
Cristy Ricaurte
Michele L. Roberts
Jessica R. Rowan

Students

Lynn M. Carlsen
Michelle Donovan
Karol Espejo
Keltie Hawkins
Rachel Hewitt
Chitra Jayachandran
Alexandra Jost
Debra L. Kanter Klaus
Laura Burns Macone
Molly Milgrom
Ellen Ottenstein
Kerry Petersen

Opting-Out of Being a Medicare Provider

By Laura Groshong

Medicare is a complex system which has caused confusion for many LCSWs. Most LCSWs know that we must accept referrals if we sign up as a Medicare provider. What has been less clear is that LCSWs must “opt-out” of the Medicare system, or they will be considered available to receive Medicare patients and be violating Federal law by not accepting Medicare patients. LCSWs are “eligible” to become Medicare providers but are in limbo until they “opt-in” by completing Medicare enrollment forms. Information on how to opt-in or opt-out follows below.

Once an LCSW becomes a Medicare provider, he or she may opt-out of Medicare and privately contract with beneficiaries to provide services that would be covered by Medicare. The opt-out period is generally for two years. Opt-outs may be renewed for subsequent two-year periods. The provider must opt-out of Medicare for ALL beneficiaries and services with the exception of emergency or urgent care situations. The private contract between the LCSW and the Medicare enrollee must state that neither party will seek reimbursement from the Medicare program. The clinician is then free to charge the Medicare enrollee his/her customary fee.

Additionally, any Medicare-enrolled LCSW who has not submitted a Medicare claim for 12 consecutive calendar months will be disenrolled from the Medicare program. LCSWs can reapply after being dropped from the Medicare provider list to become a provider again, if they so choose (*Medicare Reimbursement for LCSWs: Past, Present, and Future*, access, 10/06).

LCSWs are used to thinking about how to get onto insurance panels, not about how to stay off them. Here are some of the reasons that LCSWs may want to opt-out of being a Medicare provider:

- An LCSW does not want to complete the Medicare application process, which is lengthy and complicated.
- An LCSW does not feel qualified and/or have an interest in working with older patients.
- An LCSW does not want to submit claims electronically, as Medicare claims must be in the near future.
- An LCSW does not want to comply with accepting all Medicare patients who want to work with the LCSW.

- An LCSW does not want to learn the specific complex Medicare requirements for reimbursement submission, including co-insurance.
- An LCSW is unwilling to accept Medicare reimbursement rates.
- An LCSW is concerned about the 40% co-pay currently in place for Medicare enrollees to access mental health services and the hardship this represents for those on limited incomes [which will gradually reach the 20% co-pay for medical benefits by 2014].

While it is true that the application process is lengthy and complicated, and the opt-out process also takes some work, the Social Security Law as of 1990 states that all LCSWs must “opt-out” of Medicare if they choose not to “opt-in”, i.e., become an official Medicare provider. This law is not one with which most LCSWs are familiar. Title XVIII, Section 1848(g)(4) of the Social Security Act requires physicians, suppliers, and other persons to submit claims for services rendered to Medicare beneficiaries on and after September 1, 1990. See www.ssa.gov/OP_Home/ssact/title18/1848.htm.

Ignoring the Medicare system as an LCSW, psychologist, or psychiatrist is not an option under the law, though many clinicians have done so. The concept of having to “opt-out” of an insurance panel is alien to the mindset of trying to get on them; many LCSWs have been shut out of private insurance panels for which they would like to be providers. Nonetheless, it is important to make an informed decision about opting in or opting out of Medicare or ignoring the system.

Though Medicare rates for LCSWs vary by region, they generally fall between \$60 and \$80 for 90806 provided by an LCSW. To find out more, go to Medicare Fees: <http://www.cms.gov/apps/physician-fee-schedule/overview.aspx>—scroll down and click on “Start Search”. Then click on “Pricing Information” or “Geographical Practice Cost Index” (these can only be done separately) and the CPT codes (90801–90806). Then click on “Specific Locality” and “Global”. Your area rates should come up. Remember that the payment schedule for LCSWs are 75% of what physicians are paid and correct accordingly. You can find more information at www.cms.gov/apps/physician-fee-schedule/help/Medicare-Physician-Fee-Schedule-Search-Help.pdf.

We urge all LCSWs to follow the laws regarding Medicare and opt-in to the Medicare system or opt-out. The URL for opting in to the Medicare system is www.cms.hhs.gov/MedicareProviderSupEnroll/04_InternetbasedPECOS.asp, which will take you to the PECOS Medicare enrollment page for LCSWs, Form 855i. There are several fact sheets which are worth reviewing. As LCSWs, we are “non-physicians” in the Medicare system, and those are the documents that should be used.

Information about opting out of Medicare can be found at www.cms.hhs.gov/manuals/Downloads/bp102c15.pdf. There is no form supplied by CMS, just instructions on what must be included in a letter that will allow you to opt-out.

This article, with all cited links “hot” (clickable) is available at www.clinicalsocialworkassociation.org/clinical-practice/medicare. ❖

Laura Groshong, LICSW, is director of government relations for the Clinical Social Work Association (CSWA) and the author of Clinical Social Work Practice and Regulation: An Overview. In addition to her legislative work at the national level, Laura maintains a private practice in Seattle, Washington.

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*Robin L. Stocksdale, MSW, LCSW-C, CT
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Gilchrist Hospice Care*

Wednesday, May 16, 2012

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What to Say to Your Legislators

It’s called an “elevator pitch” and the idea is to be ready with a concise statement of what you want your legislator to know, just in case an elevator door opens and he or she is standing there. You have less than a minute to make your case before one or both of you reach your destination; what will you say to capture that legislator’s attention?

Whether you are taking advantage of a chance meeting in an elevator, need a quick, clear message for an email, or want an opening framework for a longer discussion, here are some possible elevator pitches:

- Clinical social workers urge you to protect **parity** for mental health care in the Essential Health Benefits package. Do not permit insurance interests to manipulate benefits by placing rigid limits on the number of sessions allowed, by restricting coverage to acute episodes or to only a few specific diagnoses, or by limiting the range of evidence-based treatment modalities authorized.
- Clinical social workers advocate for **flexibility** in frequency and length of treatment in order to assist patients effectively both with recovery from acute episodes and with long-term mental health stabilization. We believe that the experience of the treating provider should be respected with regard to treatment decisions.
- Clinical social workers urge you to **maintain or increase reimbursement rates** for mental health providers, with particular attention to the level at which clinical social workers, who provide most of the care, are paid. Paying the same rate to all for the same services would go far in rectifying inequity and preventing crisis.

(In Maryland it’s the law! Paying the same rate to all is mandated in COMAR Article 48A, §470U(a), Article 48A, §§354Z and 490A-1)



GWSCSW Brown Bag Workshop

Issues in Hospice Care: Assessment, Bereavement and What the Future Holds

Presenter: *Gilbert Bliss, LCSW*

Friday, April 20, 2012

Noon – 1:30 PM

Davis Library

6300 Democracy Blvd, Bethesda, Maryland

1.5 CEs

With my presentation, I will share my experience as both a Medical Social Worker and Bereavement Coordinator with Community Hospices of Maryland.

Gil Bliss has a private practice in Lutherville, Maryland and experiences in a variety of settings to include the Maryland prison system, the VA Hospital in Perryville, Maryland and his hospice work.

Free for GWSCSW Members!

Register online at

www.gwscsw.org > Education > Brown Bag Seminars

GWSCSW presents. . .

Using Skype in Your Psychotherapy Practice: Clinical and Ethical Perspectives

Saturday, March 17

10:30 AM – 12:30 PM

Rockville Memorial Library

21 Monroe Street, Rockville Maryland

2.0 CEs

Skype and similar technologies have created a 'virtual consulting room' for psychotherapy practice. Will this supplant the ordinary physical office or be a useful alternative for clients with specific concerns? Join our panelists for a spirited discussion about the opportunities and challenges we face as we consider integrating technology into our clinical practice.

\$25 Members / \$40 Non-Members

Register online at

www.gwscsw.org > Education > Workshops

Networking with Wine & Cheese!

The three pillars of our organization are community, education and advocacy and these informal wine and cheese get-togethers are a great opportunity for community.

They provide the opportunity to get to know colleagues in an informal, relaxed setting. Those who have attended one have said they love the intimacy of the small group—typically 5 to 10 people—and the opportunity to find out more about our Society and meet other members.

Put one on your calendar and plan to join us!

Friday, **March 9**, 4:00 – 6:00 PM

Home of Gloria Mog

5104 N. Third Street, Arlington, VA 22203

Sunday, **March 18**, 4:00 – 6:00 PM

Home of Adrian Humphreys

6625 Windsor Court, Columbia, MD 21044

Sunday, **March 25**, 4:00 – 6:00 PM

Home of Alice Merrill

6840 Capri Place, Bethesda, MD 20817

Sunday, **April 15**, 4:00 – 6:00 PM

Office of Sara Mindel

1633 Q Street NW #210, Washington DC 20009

Friday, **May 4**, 4:00 – 6:00 PM

Home of Judy Ratliff

2155 Golf Course Drive, Reston VA 20191

Sunday, **May 20**, 4:00 – 6:00 PM

Home of Gilbert Bliss

20026 Valley Mill Road, Freeland MD 21053

Be sure to check out our website

www.gwscsw.org

for updates and new events

GWSCSW Courses – Spring 2012

■ Adoption As Trauma: Clinical Implications for Effective Treatment of Adoptees in Practice —

Adoption is often society's "nice neat solution" to a tragic situation. The myriad of situations that lead to a baby or a child being disconnected from their biology, identity and families is so traumatic for the adoption triad (birth parents, adoptive parents and adoptee) that it is rarely spoken of as such. In the past 30 years there has been an increasing body of literature and research documenting the common responses in adoptees to this "primal wound" which parallel the symptoms of post traumatic stress disorder. This workshop will outline literature and resources on the complicated reactions to adoption trauma in adoptees. Clinical examples will be shared to illustrate how to accurately identify and interpret the symptoms an adoptee experiences. Clinicians will be empowered with information and statistics about adoption trauma in order to normalize, validate and ultimately empower their adoptee clients to integrate their adoption experience. Effective trauma intervention and treatment strategies will be outlined and community resources shared.

Date: **Friday, April 13, 2012**
Time: 9:30 AM – 1:00 PM
Location: 1555 Connecticut Avenue NW, Suite 301
Washington, DC 20036
Instructor: Julie Lopez, PhD, LICSW
Info: Julie@vivapartnership.com or 202-265-1000x1
Cost: Members \$45 / Non-Members \$75
CEUs: 3 hours
Register: www.gwscsw.org

■ Straight Clinician/LGBT Client: Bridging the Gap

The course is a lively and practical guide to the many issues confronting straight therapists working with members of the LGBT community. The presenters encourage awareness of the sensitivity of racial, cultural, religious, class and gender issues among this population, and stress the importance of learning from each client and not making assumptions based on preconceptions or stereotypes of LGBT concerns. The last 20 years have seen dramatic shifts in the general acceptance of gay, lesbian and bisexual individuals, as well as the explosion of trans awareness and activity powered through the internet and other media into the everyday world. Now, as a result of homophobia and other traumatic experiences, these individuals are increasingly likely to seek competent and empathetic therapy.

Date: **Saturday, April 28, 2012**
Time: 11:00 AM – 2:30 PM
Location: Tenely Public Library
4450 Wisconsin Avenue, Washington DC 20016
Instructor: Grace Riddell MSW, LICSW, LCSW-C, MED
Larry Cohen MSW, LICSW, ACT, DCBT, CGP
R. Jane Gould MSW, LICSW, LCSW-C, LCSW
Info: griddell@lgbtc.com or 301-942-3237
Cost: Members \$45 / Non-Members \$75
CEUs: 3 hours
Register: www.gwscsw.org

■ Working With Dreams

In this workshop, you will become aware of one of the most intimate conversations we can have with ourselves—dream work—and explore how it can be a powerful technique to use in your work. Since dreams are the gateway into the unconscious, the symbolic representations in a dream state are the players giving voice and meaning to the client's own dissociated or integrated parts. The focus will be on processing different types and pieces of dreams: premonitions, recurring dreams, nightmares, lucid dreaming, changing the outcome of a dream, or finishing an unfinished dream. Participants will experience the use of guided imagery, meditation, artistic expressions, movement and role-playing as techniques to enhance the client's ability to interpret their inner world. Archetypes, symbols and active imagination taken from a Jungian theoretical basis will be utilized to help interpret the dream state. Individuals are encouraged to bring in their dreams or client's dreams to share and interpret as a way of deepening the levels of understanding.

Date: **Friday, May 11, 2012**
Time: 8:45 AM – 4:00 PM
Location: 10726 Brewer House Road
North Bethesda, MD 20852
Instructor: Vivien B. Deitz, MSW, LCSW-C, BCD
Info: vivdeitz@mac.com or 301-770-1111
Cost: Members \$90 / Non-Members \$150
CEUs: 6 hours
Register: www.gwscsw.org

INFORMATION & REGISTRATION: www.gwscsw.org

QUESTIONS: gwscsw@gmail.com or (202) 537-0007

Serving the Underserved: Pro Bono Counseling Project Fills the Gap

By Joyce M L Harrison, LCSW-C

As social workers, we have always been on the front lines of clinical practice, advocating for and providing mental health services to those who struggle financially. Pro bono work is a core value included in our training, and aligns with the service and social justice ethics recommended by the National Association of Social Workers. The members of our clinical society help individuals in need in a variety of ways. Some participate in low-fee clinics, provide in-home services, work in community agencies, or offer sliding scales in private practice. Beyond individual efforts, the Pro Bono Counseling Project (PBCP) galvanizes the collective talents of social workers and other mental health clinicians who volunteer to help fill the gap in services for underserved and underinsured clients. Perhaps you know of PBCP or have referred someone to the project for help. Whether you are already familiar with PBCP or are learning about it for the first time, I hope you will use this valuable resource, consider volunteering, and become more involved with the broader spectrum of pro bono work.

The PBCP has been achieving its mission since 1991 with the support of other organizations and individual providers. The Greater Washington Society for Clinical Social Work (GWSCSW), in recognizing that people from the complete range of socio-economic status need access to mental health services, has been a long term supporter of the project. A small portion of GWSCSW membership dues is directed to PBCP. In addition, our new members from the Maryland Society for Clinical Social Work have advised PBCP and participate as board members. Clinicians in both societies provide valuable treatment to PBCP clients.

Barbara Anderson is the Executive Director of PBCP. She explains that their mission is to assure that Maryland residents requesting mental health care are linked with volunteer licensed mental health professionals and other necessary services. "Our vision is the availability of quality mental health care for all those in need" says Anderson. While PBCP primarily operates throughout the state of Maryland, they will fill requests from DC

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residents who work in Maryland. Clinicians have volunteered 6,173 hours of clinical service to 928 clients from April 2010 through May 2011.

Funding from a variety of public and private sources, like the Governor's Office of Crime Control & Prevention and the Jacob & Hilda Blaustein Foundation, has helped PBCP create programs which target specific issues or populations. They include, but are not limited to: victims of violence; the elderly; individuals with cancer; caregivers and military service members. One recipient of services describes her experience with PBCP as follows, "It's the best help I've ever gotten... My therapist is absolutely wonderful." The Pro Bono Counseling Project, "definitely helped save my life. I didn't know what dark alley I was going to go down."

This is only one example of many clients who have been helped by PBCP over the years. While clients have never been put on a waiting list to receive services, maintaining a timely response to client requests is becoming more challenging.

"Requests for care have doubled in the past five years," says Anderson. PBCP is recruiting new clinicians to insure that no one in need has to wait for mental health services. Volunteers, seeing one or two clients a year, have made this possible. If you are interested in becoming a volunteer clinician, or learning other ways to participate in PBCP, visit their website www.probonocounseling.org. You may also contact them by phone at 877-323-5800.

If you are already a PBCP provider, or have other volunteer experiences you would like to share, contact me at jml.harrison@att.net.

Joyce Harrison, LCSW-C, is the GWSCSW liaison to the Pro Bono Counseling Project.

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16th Annual Mary Douglas Wells Speakers Forum
at the Sheppard Pratt Conference Center

Friday, April 27, 2012
8:30 AM – 4:00 PM

**Distortions of the Self:
Body Image Disorders and
Self-Injurious Behavior**

Elizabeth R. Didie, PhD, Rhode Island Hospital, Dept. of Psychiatry, Body Dysmorphic Disorder/Body Image Program, private practice, NIMH award winner, "Interpersonal Psychotherapy for Body Dysmorphic Disorder." Published articles in the fields of obesity and cosmetic surgery.

Lisa Ferentz, LCSW-C, DAPA, president and founder of The Institute for Advanced Psychotherapy Training and Education, Inc. Courses include a certificate program in advanced trauma treatment. Treating Self-Destructive Behaviors in Traumatized Clients: A Clinician's Guide.

Jennifer L. Greenberg, PsyD, Massachusetts General Hospital, Dept. of Psychiatry, the OCD & Related Disorders Program, "Modular Cognitive-Behavioral Therapy for Body Dysmorphic Disorder." Articles, research and outpatient clinic fields of OCD spectrum disorders in pediatric populations.

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Upcoming Advanced Clinical Training Offerings in Greater Washington

Looking to sign up for an advanced training course this spring or fall? Below you will find a comprehensive list of area organizations and the opportunities that they offer. We hope that the condensed versions will help readers note what is available in our area. Entries are limited to programs that are ongoing and offer some type of expertise certification and/or certificate at the end of the program.

Baltimore Washington Institute for Psychoanalysis

14900 Sweitzer Lane, Suite 102, Laurel, MD 20707
Phone: 301-470-3635
Email: admin@bwanalysis.com
Web: www.bwanalysis.org

The programs focus on training the clinician to work psychodynamically with various populations. The student's own analysis, studying child development, learning psychoanalytic technique, and treating cases under supervision may be part of the requirements. Please see the website for more details.

Programs: Adult Psychoanalytic Training Program, Child and Adolescent Psychoanalytic Training Program, Two-year Adult Psychotherapy Training Program, Two-year Child Psychotherapy Training Program, Adult Fellowship Program, and Child Fellowship Program.

Registration deadline: Varies; contact institute for specific dates. Course starting and ending dates: September through May.

Bowen Center for the Study of the Family/ Georgetown Family Center

4400 MacArthur Blvd. NW #103, Washington, DC 20007
Phone: 202-965-4400
Email: vaharrison@sbcgobal.net
Web: www.thebowencenter.org
www.thebowencenter.org/pages/postgradprog.html

Postgraduate Program in Bowen Family Systems Theory and its applications. The Postgraduate Program is designed for individuals who want to establish a foundation in Bowen theory and learn to apply it in their personal lives and in their professions. The curriculum is designed to cover basic concepts in Bowen theory, knowledge from the sciences, and advances in research with examples from applications in families, organizations, and society. Each year is different. Learn-

ing occurs through application and practice as well as through knowledge of theory. The study of one's own family is a training ground for learning and using Bowen family systems theory in one's field of work.

Application deadline: August 1. Program starting and ending dates: The program meets four times a year for three day sessions. It begins in September and ends in June of each year.

Center for Healing and Imagery (formerly The Imagery Training Institute)

1724 S St. NW, Washington, DC 20009
Phone: 202-234-2295, 202-686-9005
Email: info@centerforhealingandimagery.com
Web: www.centerforhealingandimagery.com

The Center for Healing and Imagery (CHI) provides experiential trainings in integrative modalities including Somatic Imagery, Mindfulness, Trauma Treatment, Practical Neuroscience and Ego-State Psychotherapy. When talk therapy is not enough, these dynamic approaches, grounded in affect and body sensations, help uncover and transform unconscious sources of even the most chronic psychological and physical problems.

Registration Deadline: Ongoing deadlines throughout the year. Program Starting and Ending dates: Trainings offered from September through June.

Institute of Contemporary Psychotherapy and Psychoanalysis (ICP&P)

4601 Connecticut Ave NW, #8, Washington, DC 20008
Phone: 202-686-9300
Email: icpeastadmin@worldnet.att.net
Web: www.icpeast.org

ICP&P's three training programs, Couples, Psychoanalytic and Psychotherapy Training Programs, are for

clinicians interested in advanced training that emphasizes self-psychological and contemporary trends. While historical theory and developments are studied, the emphasis is on cutting edge developments in such areas as attachment research, intersubjectivity, and relational approaches.

Registration Deadlines: Couple and Psychotherapy Programs: June 15; Psychoanalytic Program: June 1. Applications submitted after these dates will be considered on an individual basis.

Program Starting and Ending dates: All training programs start after Labor Day and end in mid May.

International Psychotherapy Institute and IPI Metro (The Metro Washington Center of IPI)

IPI: 6612 Kennedy Drive, Chevy Chase, MD 20815

Phone: 301-215-7377

info@theipi.org

Website: www.theipi.org

IPI Metro: 6917 Arlington Rd., #224, Bethesda, MD 20814
301-951-3776

Website: www.theipi.org/affiliates/ipi-metro-dc

IPI: Certificate programs and weekend conferences in Object Relations Theory and Practice, Child Couple and Family Therapy and Psychodynamic Psychotherapy. Master Speaker Videoconference Series; Foundations of Psychoanalytic Couple Therapy Course; Infant Observation Seminar; International Institute for Psychoanalytic Training.

IPI Metro: Courses include Introduction to Psychodynamic Psychotherapy, Contemporary Dynamic Psychotherapy Program, Clinical Ethics Program for Psychotherapists

National and local in-depth certificate training programs (beginner and intermediate offered locally, and advanced nationally) and shorter conferences/seminars with international speakers in object relations individual, couple and family therapy, sexuality, infant observation, and psychoanalytic training, all tailored to commuting students, in person and by video-link.

Registration Deadline: Varies, contact IPI. Course starting and ending dates: IPI courses vary (see individual courses).

continued on next page

The Washington Center for Psychoanalysis

Presents the
2012 David L. Raphling Memorial Lecture

“Psychosomatics Today: A Psychoanalytic Perspective”

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Marilia Aisenstein

Of the Paris Psychoanalytic Society

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www.wcpweb.org

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AND
THE ATTACHMENT AND HUMAN DEVELOPMENT CENTER
AND
THE INSTITUTE OF CONTEMPORARY PSYCHOTHERAPY AND
PSYCHOANALYSIS (ICP&P)

Nancy Adams Memorial Lecture March 16 & 17, 2012

Nancy Murphy Adams' great love was the study of groups as vital components of human life. In 1965 the Washington School of Psychiatry sponsored the first American conference using the Tavistock method for the study of groups in which Nancy participated. She said that from that time forward group relations became "the work closest to my heart, our best hope of clarifying a confused and confusing world." She directed conferences and mentored numerous students in the method. They have carried her expertise and her wisdom worldwide. This lecture is funded by a generous gift to the Washington School of Psychiatry by her husband, John P. Adams, in her memory.

Lecture:

The Legacy of Early Development as Seen from the Minnesota Longitudinal Study of Risk and Adaptation

Alan Sroufe, PhD
Friday, March 16, 2012
7:00PM – 9:00 PM
Suburban Hospital Auditorium
8600 Old Georgetown Road, Bethesda, MD 20814
1.5 CEs
No charge, through the generosity of John Adams

The lecture will be given by Alan Sroufe, PhD, who is internationally recognized as one of the foremost contributors to our understanding of how attachment relationships and developmental processes influence normal and pathological development through the life span. The lecture's focus is on the effects of early attachment relations on development and is rooted in the rich data collected by the Minnesota Longitudinal Study. This lecture introduces an increased focus on attachment theory at the Washington School of Psychiatry. Look for the Adult Attachment Interview (AAI) training following this conference and a new training program next fall.

Conference:

How the Body of Attachment and Developmental Research Can Be Used to Help Psychotherapy Patients

Saturday, March 17, 2012
9:00 AM – 5:15 PM
Washington School of Psychiatry
5028 Wisconsin Avenue NW #400, Washington, DC 20016
6 CEs
\$180 Public / \$120 Members of ICP&P and WSP

The Saturday conference will focus on how attachment and developmental research can influence the therapist's clinical responsiveness and facilitate growth.

Presenters Include: Alan Sroufe, PhD; June Sroufe, PhD; Elizabeth Carr, APRN, MSN, BC; Mauricio Cortina, MD; Marie Hellinger, MSW; Georgia DeGangi, PhD, OTR, FAOTA.

For more information,
Call 202-237-2700
Email lhead@wspdc.org
Visit www.wspdc.org

To register, call
202-237-2700

National Institute of Relationship Enhancement®

4400 East-West Highway, Suite 28, Bethesda, MD 20814
Phone: 301-986-1479
Email: niremd@nire.org
Web: www.nire.org

Certification Programs in Relationship Enhancement Therapy for Couples and Families, Child-Centered Play Therapy, and Filial Family Therapy. Each program combines a 2-day or 3-day professional training workshop with 26-hours of supervision built around the therapist's videotaped (or live) therapy sessions in order to enhance therapist skills in conducting the chosen therapeutic modality. An extensive body of empirical research validating its therapeutic effectiveness supports each modality.

Registration Deadline: Open-ended, but participation commences with attending an initial 2-day or 3-day professional training workshop.

Workshop dates are listed on our website above.

Program Starting and Ending dates: Follow-up supervision is individually tailored.

The New York Freudian Society, Washington DC Program The NYFS Psychoanalytic Institute

Phone: 301-332-2372
Email: laurahickok@verizon.net
Web: www.nyfreudian.org

The New York Freudian Society, Washington DC Institute: The Adult Psychoanalysis Program combines four years of coursework in psychological development, classical and contemporary psychoanalytic theory, and psychoanalytic listening with supervised practice in psychoanalysis, and candidates' personal analysis. The Fellowship Program is an 8-10 session psychodynamic seminar.

Registration Deadline: Open-ended, Please contact the Institute Director or the website for further information.
Program Starting and Ending dates: September-May.

University of Maryland School of Social Work

525 W. Redwood Street, Baltimore, MD 21201
Phone: 410-706-5004
Web: www.ssw.umaryland.edu/cpe

Programs change each semester, and are listed in a flyer, which is available upon request.

Registration Deadline: March 2012. Course Starting and Ending dates: Spring 2012 through Winter 2013

Washington Center for Psychoanalysis

4545 42nd St., NW, #309, Washington, DC 20016
Phone: 202-237-1854
Email: center@washpsa.org
Web: www.washpsa.org

WCP offers a psychoanalytic training program, and two three-year programs: Modern Perspectives on Psychotherapy focuses on the theoretical and clinical application of the Modern Relational, Modern Freudian and Modern Kleinian perspectives, and New Directions in Psychoanalytic Thinking consists of three weekend writing conferences and an optional summer retreat per year.

Registration Deadline: Variable. Course Starting and Ending Dates: September through June.

Washington School of Psychiatry

5028 Wisconsin Ave., NW, Suite 400
Washington DC 20016
Phone: 202-237-2700
Email: Info@wspdc.org
Web: www.wspdc.org

The WSP offers courses from one to three years in length in a variety of psychotherapy disciplines. These include Advanced Psychotherapy Training, Central Concepts in Psychodynamic Therapy, Child and Adolescent Psychotherapy, Clinical Program on Psychotherapy Practice, Intensive Short Term Dynamic Psychotherapy, and Observational Studies with Parents and Babies/Young Children.

Registration deadline: Summer. Course starting and ending dates: September through May.

The National Catholic School of Social Service (NCSSS)

is pleased to offer a full list of trainings this spring

**Perinatal Loss:
Working with Bereaved Families**
March 5

**Bypassing Spirituality and Spiritual
Bypassing: Ethical Issues in
Spiritually-Sensitive Practice**
March 17

**The Impact and Services for Families Who Are
Experiencing Divorce or Separation**
March 30

**Sexual Abuse from the Past:
It's Impact on the Couple
Relationship Today**
April 14

**The Aftermath of Suicide:
Supporting Families Through
the Grieving Process**
April 14

**Imago Relationship Therapy
with the Masters**
April 24

**Integrative Restoration (iRest):
Contemporary Applications of an Ancient
Contemplative Practice for Experiencing
Inner and Outer Harmony**
April 28

**Updating our Status:
Social Media and Social Work Ethics**
April 30

**Observing Babies and Young Children:
The Tavistock Method**
May 11

**Post Partum Depression: Screening,
Intervention and Psychopharmacology**
May 19

For information about upcoming events, go to
<http://ncsss.cua.edu/ce/default.cfm>

For further information,
contact Dr. Ellen Thursby,
thursby@cua.edu or **202-319-4388**

NCSSS is an approved provider of CEUs for social workers

LISTSERV TIPS

Enjoy the Listserv Without the Inbox Clutter

Jan Sklennik

Most of our members are now participants in the very popular GWSCSW listserv — a great place to mine the collective wisdom of area professionals, to discuss ideas, to exchange information about office space for rent or new groups opening up.

But with this popularity comes a downside: the sheer number of emails in your Inbox. Some people have tried to solve this by converting to a Daily Digest, but found some serious drawbacks. This article will take you step-by-step to a solution that is a win-win. All posts to the GWSCSW listserv will now bypass your Inbox and go directly to a folder devoted to our listserv. You can visit it when you have the time and run down the subject lines and delete the ones you're not interested in.

Which brings us to a tip for posters: Make sure your Subject Line is descriptive of your message and includes the information other members need to decide quickly whether to read your post or delete it.

Gmail

1. In the upper right corner of your browser, locate the symbol that looks like a gear or flower and choose SETTINGS or MAIL SETTINGS.
2. There are a number of options listed across the top just below the word Settings; click on LABELS. Now click on CREATE A NEW LABEL. Name it "GSW Listserv" and click on CREATE to leave this box.
3. Now click on FILTERS.
4. At the bottom of this list (if there is one) click on the link: CREATE A NEW FILTER and a box comes up with fields you can fill in to create your filter. In the field marked Subject, enter: [GWSCSWEB] then click CONTINUE.
5. In the next box, check the box marked SKIP THE INBOX (ARCHIVE IT) and check the box APPLY THE LABEL. Next to that checkbox use the drop down list to choose your new label (GWS Listserv). Then click UPDATE FILTER.

Apple Mail

1. With Mail open, in the menu bar click on MAILBOX, then choose NEW MAILBOX from the drop down menu. Enter the name "GWS Listserv" and click OK.
2. Now, in the menu bar click on MAIL, then choose PREFERENCES from the drop down menu.
3. At the top of the box that opens, all the way to the right, click on RULES.
4. Click on ADD RULE.
5. In the DESCRIPTION field enter Listserv then use the menus to choose:
 - a. If ANY of the following conditions are met:
 - b. SUBJECT
 - c. CONTAINS
 - d. type [GWSCSWEB] into the blank field
 - e. Perform the following actions: MOVE MESSAGE to GWS LISTSERV (choose from the drop down)
6. Click OK

Outlook

1. Set up a folder to receive the listserv emails: Go to your Inbox. Select FILE > FOLDER > CREATE NEW FOLDER. Name the folder GWS Listserv.
2. From the email menu, select CREATE RULE
3. In the Create Rule box that opens up, you will select the conditions and the actions to sort the listserv emails.
4. Under "When I get email with all of the selected conditions," check SUBJECT CONTAINS and enter [GWSCSWEB]
5. In the next section "Do the following," check MOVE THE ITEM TO FOLDER: then click on SELECT FOLDER to select your new folder from the list.
6. Click OK to confirm the new rule.

OUT & ABOUT

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This column shares news about members' professional accomplishments—our publications, speaking engagements, seminars, workshops, graduations—as well as our volunteer projects and special interests or hobbies.

Send your Out & About info to gwscsw.news@gmail.com.

In December, an NPR/WAMU interview with one of her clients featured **Jean Ratner's** successful work dealing with panic disorders and claustrophobia. The interview highlighted the profound effect this work has on the client's ability to engage in daily activities. Jean was pleased to be referred to as a "clinical social worker."

Gabe Chernoff was quoted in an article entitled "Learning to Care" in the December issue of *Bethesda Magazine*. The article focused on empathy as a skill that children can, and must, learn; highlighting that empathic people do better socially, academically, and professionally.

Robert Scuka was invited by Fondacion Forja in El Salvador to do a *Mastering the Mysteries of Love Relationship Enhancement* workshop for 17 couples in October 2011. Thirteen Salvadoran therapists also attended the couples' workshop and received an extra one-day training in Relationship Enhancement therapy. Rob also did Relationship Enhancement therapy and child-centered play therapy workshops for Rutgers University's Institute for Families in November. ❖



Are You Listed On Our Therapist Finder?

Log on, update your profile on the PROFILE tab, then go to the THERAPIST FINDER tab to check "Show Profile on Therapist Finder Pages."

Check out our website at www.gwscsw.org

Exciting Career Opportunities!

jssa!

JSSA, a fast growing non-profit/nonsectarian organization serving Greater Washington, D.C has immediate openings with great benefits!

Northern Virginia

Synagogue Liaison/Social Worker LCSW: Part-time/full-time position for a Clinical Social Worker/Synagogue Liaison. Candidate will be an experienced, organized professional with strong clinical skills to represent JSSA to area synagogues in Northern Virginia. Consult with rabbis, staff, and congregants about interpersonal and organizational issues. Provide outreach, assessments, short term counseling, workshops, referrals to JSSA and community resources. LCSW required.

Rockville, Maryland

LGSW: full-time licensed graduate social worker/Masters in Social Work in our Senior Services department. Candidate must have some experience with case management as well as individual and family counseling with seniors and their family members in their homes or in office. Experience in providing information and referral to elder care resources, conducting outreach in senior living communities, and co-facilitating support groups required. Some evening hours may be necessary. Maryland licensure LGSW required with emphasis on aging and senior services a plus.

LCSW-C Hourly: Needed to provide individual, family and group therapy and case management with children, adolescents, and adults who are deaf or hard of hearing. Maryland LCSW-C with strong ASL (American Sign Language) skills required.

LCSW-C Full-Time Child and Family: Candidate must have experience with individual, family and group therapy to children, adolescents, and adults. ADHD, social skills training, and cognitive behavior therapy experience a plus. This position also involves consultation with community organizations and schools. Ability to work independently and have experience with program management/coordination. Maryland licensure LCSW-C required.

Please send resume to:

JSSA, Attn: HR
200 Wood Hill Road
Rockville, MD 20850
Fax 301-309-2596 Email hr@jssa.org
Visit our website: www.jssa.org
An EOE

OUR ONLINE SOCIETY

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Collected by Ann Wroth

Using Skype In Your Practice

What do you think about using technologies like Skype with your patients? Read on to find out what your colleagues are saying. Posts were in part a response to an article from the New York Times in October of last year.

► I have been Skyping on an as-needed basis for over a year now and have found it to be an important therapeutic tool with my trauma clients. For example, I have cancer patients who become either too ill to come in or who are away getting treatment-but who still want therapy. Through Skyping, I have been able to provide support through a difficult and traumatic time, as well as to maintain our therapeutic alliance. I now have an end of life client who is going home out-of-state. She wants Skype therapy. I'm doing it and glad to be there for her. Skype allows me to see facial expressions, interpret nuance, mood and or course, pain, more accurately than via phone.

► Redefining the Skype relationship as non-psychotherapeutic would seem to have some merit to reduce professional risk. I have a psychologist colleague who has an active practice doing "coaching" by phone. She has a long written set of guidelines that prospective clients sign that explicitly say that this coaching work is not psychotherapy. I'd guess that sending statements without one's license id (i.e. LCSW-C, LICSW) would have a similar impact if one was doing "coaching" or "consultation." I also think that Skype therapy might be viewed differently by a licensing board if it was viewed as an ethical imperative to continue treatment with a client temporarily out of town or who has moved to any area without qualified therapists. This is quite different than someone who markets him or herself as a Skype therapist in order to increase revenue.

► I queried the Virginia Board of Social Work about the possibility of doing therapy by Skype across state lines. Here is the most helpful advice I received from them: If you provide services in your office in VA as an LCSW, regardless of where the client lives, then you are working within the requirements of your VA license. When you provide distance therapy to someone, say in another state where you aren't licensed, then you would need to check with that jurisdiction to see if you need a license to provide those services.

► I have also checked for a second time, first with respect to North Carolina, then with Ohio. Virginia is fine with distance therapy if it is approved by the state in which the client is located. Each of the aforementioned states informed me that I could not work with a continuing client who had either moved or summered in their state unless I was licensed in their state. North Carolina further stated that as I was licensed in Virginia during the years that Virginia had a unique exam, I would have to retest to be admitted.

► To imagine that conducting therapy via these forms of remote technology is equivalent to what takes place in regular face-to-face encounters is, in my opinion, to betray a disturbing lack of understanding of the complexity of communication taking place between the participants engaging in therapy in each other's physical presence. Just because we call it "talk therapy" does not mean that words are the only—or even necessarily the most important—aspect of this communion. In face-to-face work, both participants are "sending," "receiving," and being affected by myriad influences in the room (not least of which is the physical and emotional atmosphere of the room itself!).

► I am really mixed on this. In part, this developed out of the necessity for therapy where therapists were not available: In remote areas like Alaska and in war zones for soldiers; in emergency situations where therapist or patient was out of town. Better than phone. Then it was a godsend. But can it also be used as a defense against emotional closeness—not just the patient's, but the therapist's too? Just because we CAN do something doesn't mean we SHOULD. It brings to mind watching teens sitting next to each other, texting.

► I absolutely could not agree more! Thank you for putting it all here. We are creating generations of people who are afraid of emotional closeness, and thereby negating what therapy and creating a better life is all about. ❖

GWSCSW BOOK CORNER

Our book corner celebrates the works of GWSCSW authors.

Please send information about your publications to gwscsw.news@gmail.com.

Reviewed by Erin Gilbert

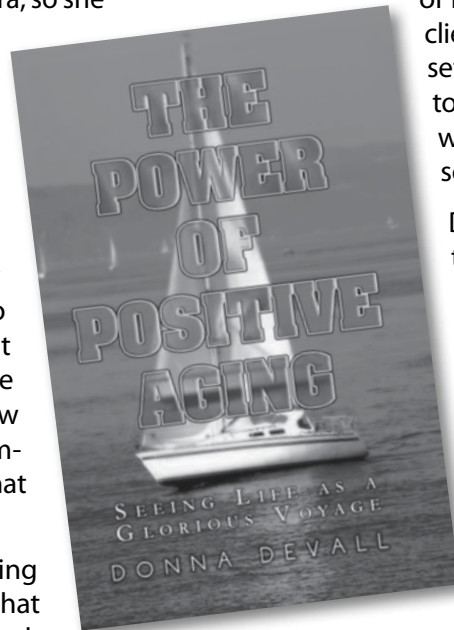
The Power of Positive Aging: Seeing Life as a Glorious Voyage

by Donna Devall

GWSCSW member Donna Devall graduated with her MSW in 1980, and has worked with elderly clients since then. As she approached her 60th birthday, she became increasingly aware that she was entering that same age group. Devall welcomed it, and planned a dream birthday party for herself. She always had wanted to play piano with an orchestra, so she hired one and played a Schumann concerto for an audience of friends and family. Her new book, *The Power of Positive Aging: Seeing life as a glorious voyage*, draws from her extensive work experience with the elderly, and sends the message exemplified by her own birthday party: Rather than attempting to stay young, embrace what is great about aging. Devall stated that she has found so many people who view aging negatively, that she felt compelled to write a book to confront that trend.

Devall noted other reasons for writing her book. First, she had observed that many books offer advice to the elderly concerning topics like finances and physical health, but not mental health. The focus of

The Power of Positive Aging is psychological preparedness, and the idea that people are better equipped to tackle this while in their 50s or 60s instead of their 80s. Devall encourages heading into old age armed with as many resources as possible, and getting help as needed while one's mind is keen. This idea grew out of her experiences working with elderly clients who did not maintain open mindsets. A secondary purpose of the book is to honor all of the amazing older people who have touched her life, both personally and professionally.



Devall stated that because each chapter stands on its own, chapters may be read at one's leisure. The book is comprised mostly of stories, and each chapter encourages self-analysis and reflection. The first chapter describes Devall's concerto experience and her personal transformation into being an older person. Following chapters deal with control, keeping an open mind, and retirement as realignment. Other topics such as grief and loss, coping with change, and

dependency are addressed. She explores subjects with which she saw her clients struggle, such as how to maintain a relationship that will age well, and how to view illness as an opportunity rather than a loss. One chapter deals with dying and death, and discusses the idea of a good death.

Devall identified clinicians and laypeople as appropriate audiences for *The Power of Positive Aging*. Clinicians may find the book helps them personally, in addition to benefitting clients and family members of clients. Elderly and adult children of the elderly also will find it relevant. ❖

DID YOU KNOW . . .

A purchase from Amazon.com made through the GWSCSW website results in a contribution to your Society!

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and click the Amazon button!

COMMITTEE REPORTS

Continuing Education

Marie Caterini Choppin, Chair
mchoppin.lcsw@verizon.net
301-625-9102

Lisa Snipper, Virginia
lisa.snipper@me.com
571-230-2349

The CE committee is working hard at putting together a slate of courses for the 2012–2013 calendar year. We have a number of courses already lined up and are hoping to complete the program in the next few months. Lisa Snipper will be spearheading plans to offer courses in Virginia.

We also welcome a new addition to the committee: Kathleen Landers, LCSW-C. She is energetic, enthusiastic, and organized, and we are so happy to have her join us. We continue to look for more members since we are a very small group.

Unfortunately, we are losing Jonah Green, LCSW-C who has given so many years to our committee (since 2006!). We will miss his energy, ideas and ability to get wonderful speakers. We hope to replace him with someone just as committed to GWSCSW and continuing education. As well, I will be stepping down as CE chairperson after this academic year but will continue to be a part of the committee during the transition time.

Since our committee only has three people on board now, we really need some extra help. If you are interested, please contact me at mchoppin@counselingforcontentment.com.

Finance

Flora Ingenhouz, Treasurer
flora.msw@verizon.net
301-649-5525

The finance committee welcomed two new members: Sara Girovasi and John David Collins. We have started working on the budget for the next fiscal year, which starts in July. We are looking for at least one additional member to the finance committee. It's an excellent way to learn more about the inner workings of our society. Call Flora at 301 649-5525 with questions and concerns.

Hospitality

Sandy Murphy
sandyilmurphy@aol.com
301-318-1569

The Hospitality committee is a new committee that met for the first time in November 2011. We are coordinating and attending the wine and cheese socials, the volunteer appreciation event on April 22, and the annual meeting on June 15. We hope to foster a sense of connectedness and community among GWSCSW members.

From January to May 2012, there are 10 wine and cheese socials scheduled. We assist the host/hostess as needed and welcome current as well as prospective members at the event. A sincere thank you to Lisa Snipper, Hani Miletski, Irene Walton, Gloria Mog, Adrian Humphreys, Alice Merril, Sara Mindel, Judith Ratliff, and Gil Bliss for graciously hosting a wine and cheese social. Please consider attending one soon. It is a great

opportunity to network and form new friendships.

We are exploring restaurant and menu options for the volunteer appreciation event on April 22. Also, we are planning and coordinating the annual meeting in June. Last year, approximately 70 members attended. We will need many volunteers to help in such areas as rentals, music, raffle items, flowers, set up and clean up, etc. If you can spend a few hours helping that evening or wish to become involved in planning the event, please contact me at Sandyilmurphy@aol.com. All levels of involvement would be greatly appreciated. It's another way to meet other members in this wonderful organization.

We look forward to seeing you at an event sometime soon!

Legislation & Advocacy

Margot Aronson
malevin@erols.com, 202-966-7749

The issues we have been addressing during this intense Assembly season in each of our three jurisdictions—and our approach to them—are described on the legislative pages of this newsletter.

With the fine help of Alice Neily Mutch, our lobbyist, and Jaida Collins, our MSW intern, hard-working committee members Betsy Amey, Mary Lee Stein, Dolores Paulson, Judy Ratliff, Kirsten Hall, and Mark O'Shea have been deeply involved in developing and advocating clinical social work positions.

Several of us are planning to reduce our involvement after this session; we hope that others of you will

be taking the lead. Tasks include a) monitoring bills and other initiatives, b) planning strategies, c) writing letters, d) attending and reporting on coalition and legislative meetings, and e) calling and/or visiting State delegates, senators, and staff. We welcome your assistance in any or all of these endeavors, whether you want to focus on a particular issue, gain some influence with your district's legislators, or just learn more about the process.

Membership

Sue Stevens, Co-Chair
snevetss1@gmail.com, 301-984-1325

Nancy Harrington, Co-Chair
nahlcsw@aol.com, 703-608-0180

Have you seen our new business card yet? It is bright blue and has the information for our new website as well as space on the back for you to write your own message. We are passing them out at CEU events, wine and cheese gatherings, and in person when meeting with prospective members or clients who want referrals. Please help yourself when you see them, and help us get the word out!

The New Member Gathering was held in November, at the home of Judy Gallant. It was an opportunity to welcome new members and introduce them to ways the Society can help them as well as ways they can volunteer to help the Society. It was a great chance to network and explore new ideas.

One of the goals of the Membership Committee is to reach out to recent MSW graduates to let them know the benefits of GWSCSW and encourage them to join. Upon

graduation we give each student a gift certificate that can be used for dues or any Society events. Our current student board representative is Sara Girovasi and she is doing a great job letting other students know about GWSCSW and how it can help them. In addition we send volunteer representatives to the annual job fair for Howard University and Catholic University of America MSW students. We are working on ways to include UMD and VCU students in this outreach.

Many thanks to Bev Magida, who is our new liaison to George Mason University's School of Social Work. GMU's Dean of Social Work appointed Bev to the school's Social Work Advisory Board, so she could respond to the school's needs by informing the GWSCSW membership how they may assist in mutually beneficial ways. For example, the School of Social Work staff is interested in collaborating with GWSCSW by seeking part-time adjunct professors, working together on research grants for their future PhD program, participating at their Career Fair in June, promoting attendance at their TBI workshop, seeking field work placements, and looking for clinicians to be speakers at workshops sponsored by the school's Student Advisory Board. Watch for more specifics on the listserv, or contact Bev directly at bev.magida@verizon.net, if you are interested in these requests.

As you can see, there are many ways to help the Membership Committee: ongoing, one time, or anything in between. We welcome your willingness and creativity!

Newsletter

Lisa Wilson, Editor
gwscsw.news@gmail.com

Please consider making a contribution to the newsletter and sharing insight gained from your clinical area of expertise and practice; efforts to grapple effectively with ethical dilemmas; responses to events in the media or popular culture; or other topics relevant to clinical social work. Included in this issue of *News & Views* are some guidelines for articles and *Out & About* submissions. Submissions should be sent to the editor's inbox: gwscsw.news@gmail.com

Professional Development

Sheila K. Rowny, Co-Chair
sheila@rowny.com, 301-365-5823

Karen G. Goldberg, Co-Chair
goldbergks@aol.com, 301-680-9060

The Professional Development committee is kicking off 2012 by offering a Peer Group Roundtable on Sunday, February 26 which will be facilitated by Marilyn Lammert. The discussion will focus on establishing peer supervision groups and identifying the factors that contribute to their effectiveness.

In addition, the Committee has also begun to plan for a panel discussion that will address issues and challenges faced by clinical social workers in agency settings. Anyone interested in participating with the planning of this workshop can contact Karen Goldberg by email or phone as listed above.

In addition to these offerings, the Committee meeting last October generated several other possibilities, including concerns related

continued on page 26

Committee Reports, from page 25

to first jobs, social workers who have relocated, and ways to get experience and continue building skills while seeking employment. Thanks to Marilyn Lammert, Rebecca Greene, and Adam Randolph for contributing their ideas and thoughts at the meeting.

Seasoned Society members are still being sought to participate as mentors in connection with the Mentor Program sponsored by the Professional Development Committee. Mentors who can volunteer their expertise to GWSCSW members who formerly participated in the Maryland Society are particularly needed at this time. Mentors provide one to one guidance to newer social workers at mutually convenient times, in order to deal with concerns related to licensure, establishing a private practice, employment, securing supervision, consolidating professional identity, and other questions related to professional development. Mentors and mentees are matched according to location, interests and types of experience. Additional information about the Mentor Program, as well as applications to become a mentor or mentee can be found by pressing the Professional Resources tab on the left hand side of the home page for the GWSCSW website and clicking on the Mentor Program listing. Questions can also be directed to Sheila Rowny as listed above.

Susan Marks leads a support group for members seeking to start and/or build a private practice. Susan's well-attended groups provide information, as well as discussion and encouragement. The group

meets monthly at a location convenient to those interested. For further information, contact Susan at 703-533-9337 or at surobbin@verizon.net.

The committee welcomes new members, as well as your ideas for programs that can address the professional development needs of our society membership. Please contact Sheila or Karen if you have input to contribute.

Programs

Joel Kanter, Chair
joel.kanter@gmail.com

Over the past several months, the Program committee has presented Brown Bag lunch seminars featuring volunteer presenters. In December, Paul Kelner presented on sexual addictions in Bethesda and in January, Susan Folwell presented on domestic violence issues in McLean. Also, in January, Kerry Malawista shared stories and insights from her wonderful new book *Wearing My Tutu to Analysis: Learning Psychodynamic Concepts from Life* at a Friday evening dinner meeting.

Future Brown Bag lunch seminars in Bethesda include Adam Randolph presenting on partners of ADHD (February 24) and Gil Bliss on hospice issues (April 20). If you are interested in presenting at a future Brown Bag event, contact either Tish Reilly or Adele Redisch, the coordinators of the Bethesda meetings; or contact Lisa Snipper, coordinator of the Northern Virginia meetings.

Also, on March 17, Dori Aronson and Rebecca Mayahag will be coordinating a panel discussion on *Using*

Skype in Your Psychotherapy Practice. This workshop emerged from our listserve discussion on the pros and cons of Internet-based psychotherapy and we look forward to a lively dialogue as members share their experiences and concerns. As issues like this emerge, the Program committee seeks ideas and volunteers to explore a range of practice concerns. Please contact me with any ideas at joel.kanter@gmail.com

Therapist Finder

Melinda Salzman, Chair
salzmanmsw@starpower.net

Have you used the Therapist Finder yet? Our new site is up and running. Here, you can find out more about Society members who participate by reading their profile. These profiles will tell you about their treatment philosophy and their expertise. You can use the TF to search for therapists to recommend when you are making a referral.

Participation, which is limited to members who are licensed at the independent level, is now free. Your profile can include your photo as well as a description of your practice. You can make changes to your profile any time.

Our committee is now focusing on gaining visibility for the TF on the web, bringing it to the attention of the public. We are developing an ad words campaign. Our on-going responsibilities are to maintain and continue to improve the site. If you would be interested in publicizing the site and improving it, we would welcome you to join our committee. ❖

ADVERTISEMENTS

Advertisements, accompanied by full payment, must be received by the GWSCSW by the first of the month preceding publication.

Material should be sent to gwscsw.ads@gmail.com. For questions about advertising, call 202-537-0007.

Classified Ads: 75¢ per word	Display Ads: Full page 7 x 9¼	\$300	Half page	\$175
Minimum price \$15 (20 words)	Quarter page 3¾ x 4½	\$100	Horizontal: 7 wide x 4½ high	
	Eighth page 3¾ x 2¼	\$ 50	Vertical: 3¾ wide x 9¼ high	

Size of display ads indicated above is width by height. These are the only sizes that will be accepted. Electronic submission (PDF) preferred.

Publication does not in any way constitute endorsement or approval by GWSCSW which reserves the right to reject advertisements for any reason at any time.

OFFICE SPACE AVAILABLE

FAIRFAX – Full-time windowed office space facing Arlington Blvd. available May 1. Three-office suite with congenial psychotherapist suitemates; 3rd floor of charming building with waiting room and plentiful parking; Handicap accessible. Located conveniently ½ mile from the Beltway (495) Exit 50A. For more information email jhriskind@gmail.com or call 703-280-8060.

PIKESVILLE – Join us in creating a group practice. Two warm, dedicated clinicians seek one or two women to rent space together. Could share consultation, website, advertising. Special focus: trauma, expressive therapies. Contact Laura 410-591-7724, Gail 410-456-4306, or lrgreer@gmail.com.

GROUPS

ADOLESCENT GROUPS – Ongoing adolescent psychotherapy groups for grades 6-college. Complete list at www.rathbone.info. Rathbone & Associates. 301-229-9490. Bethesda and Rockville.

CAREGIVERS SUPPORT GROUPS – Facilitated by Flora Ingenhousz, MSW. Flora specializes in the treatment of individuals, couples and families facing chronic or life-threatening illness. This includes helping people navigate end-of-life issues and grief. For more info call 301 649-5525, or visit www.flora-lcsw.com

SERVICES

SOCIAL WORK LICENSING – Prep courses and home study materials. For sample questions, schedule, and information call Jewell Elizabeth Golden, LCSW-C, LICSW, BCD, 301-762-9090.

EVENTS

MARCH 31, 2012 – *Identification with the Aggressor and Projective Identification: What's the Difference?* Presenter: Joseph Fernando, MDCM. 5:00–6:30 PM, at the Baltimore Washington Center for Psychoanalysis, ten minutes from the Capital Beltway at 14900 Sweitzer Lane, Suite 102, Laurel, MD 20707. 1½ CEUs. For more information visit www.bwanalysis.org or call 301-470-3635 or 410-792-8060.

POSITIONS

LCSW-C – Well-established, multidisciplinary private practice in Frederick is seeking an experienced LCSW-C. FT/PT, flexible hours. Clinical responsibilities will include providing psychotherapy to individuals, couples and families. We provide referrals, office support and a collegial atmosphere encouraging professional growth. Applicants need to demonstrate substantial experience and outstanding skills. Fax CV to 301-682-6040 or email to info@frederickpsychotherapy.com.

SIGN UP FOR THE GWSCSW LISTSERV Email your request to: gwscsw@gmail.com

News & Views Submission Guidelines

We welcome GWSCSW members to write articles, contribute in one of the columns, and to share your news in Out & About. Below are a few guidelines to keep in mind.

Articles – Focus on your area and expertise of practice, ethical dilemmas, responses to events in the media or other topic relevant to clinical social work. Articles should be 500–700 words.

Out & About – News about you: an article you've written, if you've been in the news, taught a class, earned a new certification or are a singer, artist or writer. Submissions should be 50 words or less.

Submission Deadlines

March News & Views – deadline January 20
June News & Views – deadline April 20
September News & Views – deadline July 20
December News & Views – deadline October 20

All submissions will be reviewed by the editors and are subject to editing for space and clarity.

Send all submissions to gwscsw.news@gmail.com



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SAVE THE DATE:
June 15, 2012

**Annual Meeting
& Potluck Dinner**

