

Sex Addiction: What Therapists Need to Know.....	1
President’s Message	2
Legislation & Advocacy	
Federal	6
Maryland.....	7
Virginia.....	9
DC.....	10
Ethics Conference Considers Social Media	12
GWSCSW Continuing Education 2013-14	13
An Alphabet of Reminders and Information.....	18
Out & About	22
Welcome New Members!	22
VOTE – Board of Directors Ballot.....	23
Committee Reports	24
Like Us on Facebook.....	26
Classified Ads.....	27
Annual Meeting Info	28

Sex Addiction: What Therapists Need to Know

Paul Kelner

Susan informs her therapist that she has discovered sexually explicit text messages on her husband’s smartphone and has consulted a divorce attorney. Anne is being treated for substance abuse, but she doesn’t tell her counselor that she has brief sexual encounters with married men she meets through Internet chat rooms. She’s unable to stop this behavior, even though she feels overwhelming shame, guilt and despair afterwards. In a couples’ session, Mark tearfully discloses that since their marriage, he has spent thousands of dollars on “escorts,” massage parlors, and strip clubs.

What is going on here and how can we help these men and women in crisis?

Problematic sexual behavior has been around since the dawn of civilization. However, the rise of the Internet has ushered in a whole new era. The current availability of high-speed Internet connections with easy, anonymous access to free hard-core porn, chat rooms, etc. has created issues for many individuals who would not have had such problems in the past.

Most persons who interact with sexually oriented websites do not suffer ill effects. But in some cases, these sites foster underlying out-of-control sexual behaviors that individuals may not mention when they present for therapy to address other issues. Relationship challenges, work concerns, and other addictive behaviors can actually serve to mask underlying problematic sexual behaviors. We now have ways to identify and treat clients struggling with these challenging issues.

A Cautionary Tale

Before I received specialized training to help men and women with compulsive sexual behavior, I thought I could help those individuals who contacted me with these problems. However, I realized within a few sessions that I was unprepared. Meanwhile, these couples were devastated and needed competent assistance and support.

Fortunately, I learned how to obtain the training I needed and two years later completed an intensive sex addiction therapy training and certification program. My practice is now focused on assessing and treating sex addicts and their spouses/partners.

continued on page 4

VOTE
for the 2013-14
Board of Directors

Log into
www.gwscsw.org
and click on
“About GWSCSW”
then click on
“Vote”

More info on page 23

Greater Washington Society for Clinical Social Work, Inc.

PO Box 3235, Oakton VA 22124
202-537-0007

GWSCSW Board of Directors

President: Kate Rossier
VP (Education): Lisa Snipper
VP (Development): Marie Choppin
VP (Legislation & Advocacy): Margot Aronson
Secretary: Irene Walton
Treasurer: Flora Ingenhousz
Immediate Past President: Sydney Frymire, Ex Officio
Directors-at-Large: Nancy Harrington, Louise Weaver

Committee Chairs

Continuing Education: Marie Choppin & Terry Ullman
Graduate: Juleen Hoyer & Sara Girovasi
Hospitality: Sandy Murphy
Leadership: Sydney Frymire & Susan Post
Maryland Legislation: Judy Gallant & Betsy Amey
DC Legislation: Mary Lee Stein
Virginia Legislation: Dolores Paulson
Membership: Sue Stevens & Nancy Harrington
Newsletter: Lisa Wilson
Professional Development: Sydney Frymire & Karen Goldberg

Liaisons to the Board

Capital Area Crisis Response Team: Nancy Pines
CSWA: Mark O'Shea
Consortium for Psychoanalytic Research: Melissa Grady
DC Coalition on Confidentiality: Danille Drake
Disaster Preparedness: Tybe Diamond
Pro Bono Project: Joyce Harrison

Representatives to the Board

Retiree Liaison: Grace Lebow
Graduate Liaison: Juleen Hoyer & Sara Girovasi
Student Liaison: (Open)



GWSCSW NEWS & VIEWS

Editor: Lisa Wilson
gwscsw.news@gmail.com

Advertising: Kirsten Hall
gwscsw.ads@gmail.com

News & Views is published four times a year: March, June, September and December.

Articles expressing the personal views of members on issues affecting the social work profession are welcome and will be published at the discretion of the editorial board. Signed articles reflect the views of the authors; Society endorsement is not intended. Articles are subject to editing for space and clarity.

The next issue will be published September 2013 and the deadline is July 20

Email articles to gwscsw.news@gmail.com

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

Contents copyrighted © 2013 GWSCSW

President's Message

Kate Rossier



Reflections on the year...

As I write, I find myself engaged in a year-end review. What stands out is the privilege I've had this year of working with, and getting to know, some pretty incredible people. And, as you can probably imagine, I have also had many opportunities to learn and to grow! So, I'm looking back with a full and grateful heart.

I am happy to report that our Society is in very good shape. Financially we are strong, thanks to a large and growing membership that stands at 880 and the income generated by conferences, newsletter advertising, and educational workshops. This year we responded to legislative challenges in all three jurisdictions, sponsored two large conferences, held numerous educational workshops and Brown Bag lunch meetings in all three areas, hosted many Wine & Cheese networking events, and put out four newsletters. We also launched three new committees (Social Media, Leadership, and Graduate), did some behind the scenes infrastructure work to streamline and expand our systems and website, and started a Facebook page. Because a sense of community is very important to me, I'd like to celebrate some of the people who lead our organization in these undertakings.

Since the Maryland clinical society merged with us, it has been a pleasure to forge closer relationships with and sponsor more activities for our members in the Baltimore, Annapolis, and Frederick areas. In this endeavor, **Gil Bliss**, with support from Joel Kanter, has done a great job of starting up Brown Bag presentations and workshops in and around Baltimore. We are fortunate that Gil and **Louise Weaver**, who live in the Annapolis area, will continue on as board members in the coming year.

Lisa Wilson, our soft-spoken and very hardworking newsletter editor, helps keep us connected and up to date. She solicits articles, does the copyediting (aided by our energetic and knowledgeable administrator, **Jan Sklennik**), works with Jan on the layout, gathers the committee reports, and so on. Lisa's is a big job and I'm so grateful for her. I also hope to find a partner to take on the managing parts of the job, such as soliciting the articles.

Membership Committee Co-chairs **Nancy Harrington** and **Sue Stevens** reach out to welcome new members each year with a fall New Members' Tea and this spring's Bagel Brunch, and they facilitate the connection between the Society and the social work graduate schools in our area. Sue and Nancy are actually cousins who had lost touch through name changes and found each other when Nancy volunteered to co-chair the committee with Sue - providing an amazing example of the Society's unexpected social benefits. Each of them has enormous spirit, organizational skill, positive energy and a willingness to help beyond their own committee work. Together they are "double the fun."

Dolores Paulson, Audrey Thayer Walker and Golnar Simpson have, for a number of years, organized the Reamer Ethics Conference and the Alice Kassabian Memorial Conference. Golnar, a past president, and Dolores and Audrey, past chair and member of the Education Committee, wanted to honor Alice (another past president) with a program related to her passion for social justice. **Marie Choppin** and **Terry Ullman**, co-chairs of the Continuing Education Committee, have been incredibly organized in scheduling outstanding education events and streamlining a complex process.

As co-chairs of the Professional Development committee, **Karen Goldberg** and **Sydney Frymire** have worked quietly but tirelessly to expand the ways in which that committee supports the professional goals of our members. They have developed an annual workshop providing graduates with the accurate scoop about licensing requirements in our tri-state area. **Sheila Rowny** continues to oversee the Mentor Committee, a long-standing program of the clinical society.

We have several new committees. The Graduate Committee, chaired by **Juleen Hoyer** and **Sara Girovasi Ysaguirre**, makes sure we include programming that meets the particular needs of our graduate members. Juleen, with Sydney, also co-chairs the Social Media Committee, to raise awareness of new ways that our clients (current and future) may expect us to communicate and ways we can add to our web presence—both as clinicians and as a society. Juleen is the force behind our new Facebook page. Her warm, energetic, can-do energy has been a terrific addition to the board and I'm so grateful that she will be continuing with us.

The new Leadership Committee, led by our two most recent past presidents, **Sydney Frymire** and **Susan Post**, focussed on the growth of leaders and awareness of the many flavors and meanings of leadership

and the importance for all of us to cultivate this part of ourselves. They also function as the Nominating Committee to ensure continuity on the board. The goal of increasing volunteerism within the Society unifies both of these committees.

This year we have begun to have more formal Legislative and Advocacy committees in the three jurisdictions. **Judy Gallant** is the intrepid chair of our Maryland committee; **Margot Aronson** (our L&A VP) co-chairs the DC committee with **Mary Lee Stein** and **Gwen Melnick**; and **Dolores Paulson** and **Judy Ratliff** co-chair the Virginia committee. **Betsy Amey** and **Susan Gibbons** have also helped in Maryland. Dolores and Judy travel to Richmond and Judy and Margot to Annapolis to advocate for clinical social workers and the populations we serve. Unfolding health care legislation and insurance changes call for active involvement, and our membership has stepped up time and again to support advocacy by writing letters to their representatives.

Joel Kanter continues to bring dedication, good humor, and judgment to his role as listserv monitor. Joel's long history of leadership in the Society and his extensive professional knowledge have been a godsend for all of us.

We could not function without the hard work and good humor of our Executive Committee. **Marie Choppin**, VP of Development, has initiated several new sections on our society website to support the Executive Committee and board's effective functioning and continuity.

Lisa Snipper, as VP of Education, has overseen the efforts of the Continuing Education Committee and the Program Committee. She has led us to re-think our approach to continuing education offerings to address the changing needs of clinical social workers. She has brought a wonderful level of thoughtfulness, attention to systems, and dedication to this job. Lisa will be leaving her post in June and we will greatly miss her!

Flora Ingenhouz, our outgoing treasurer, is herself a treasure. She has been in this role for three years, during which time she has brought order and efficiency to this job, refining the budget process and helping to shrink the job of treasurer to a very reasonable level, with the addition of a wonderful bookkeeper, Lori LaPorte, as well as our CPA, Paul Leathery. I am very grateful to her for her past service and for continuing on the Finance Committee and mentoring our incoming treasurer.

continued on page 5

www.just-that-simple.net 202.726.8667

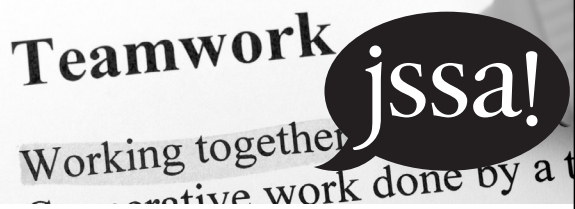
Just That Simple

HOME & OFFICE ORGANIZING IN THE DC METRO AREA

decluttering & organizing "all rooms, all stuff"
papers & filing systems, closets, kitchens, pantries, offices, attics, etc
downsizing & move preparation

personalized & soothing & nonjudgmental

Member, National Association of Professional Organizers
All services are confidential



Exciting Career Opportunities!

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

Northern Virginia

LCSW, Synagogue Liaison/Social Worker

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, MD

LSCW-C

The ideal candidate will have 5-7 years of proven experience with individual, family and group therapy with children between the ages 7-10 years old. Successful candidates will have demonstrated clinical knowledge in treatment of ADHD, depression, anxiety in children, community-base consultation and outreach.

LCSW-C/LCPC, Special Needs & Deaf Services

The ideal candidate will have proven experience with individual, family and group therapy with children, adolescents and adults, and a strong knowledge base, experience and passion for working with individuals who are deaf or hard of hearing. A minimum of 2 years of post-licensure clinical experience required.

Send resume with salary requirements to:

JSSA, 200 Wood Hill Road
Rockville, MD 20850
Attn: HR, fax 301-309-2596,
email: hr@jssa.org
www.jssa.org
An EOE.

Sex Addiction, from page 1

As most clinicians may not wish or need to become trained sex addiction therapists, I'd like to share some tools that may be helpful to those non-specialized clinicians who are confronted with these issues.

How to Identify a Sex or Pornography Addiction Problem

The current assessments available for sexual addiction or sexual compulsivity are basic screening tests of diagnostic criteria, such as preoccupation with thoughts and feelings about sex and recurrent failure to resist engaging in the sexual behaviors.

The PATHOS is a "first level" assessment that can be administered by clinicians with little or no experience in this area. It can serve as a discussion starter which enables the clinician to quickly engage in a conversation about the client's sexual behaviors, some of which the client may not otherwise self-disclose.

PATHOS is a mnemonic for these six screening questions:

- Do you often find yourself preoccupied with sexual thoughts? (Preoccupied)
- Do you hide some of your sexual behavior from others? (Ashamed)
- Have you ever sought help for sexual behavior you did not like? (Treatment)
- Has anyone been hurt emotionally because of your sexual behavior? (Hurt others)
- Do you feel controlled by your sexual desire? (Ot of control)
- When you have sex, do you feel depressed afterward? (Sad)

A second level assessment is the SAST-R (Sexual Addiction Screening Test-Revised), which is self-administered online. The SAST-R consists of 20 core diagnostic items and an additional 25 items that include the core addiction dimensions of 1) preoccupation about sex, 2) loss of control despite consequences, 3) relationship disturbances caused by sexual behavior, and 4) affect disturbances such as anxiety and depression related to sexual behaviors. A score of 6 or above is an indication that the individual may have a sexual and/or pornography addiction. The SAST-R is available at www.sexhelp.com.

Based on results from these assessments, a consultation with, or a referral to, a sex addiction specialist

may be warranted. Specialized treatment for sexual and pornography addiction needs to be comprehensive, and typically includes a combination of individual, group and couples therapy as well as participation in a 12-Step program for sex addicts. 12-Step programs to support spouses/partners of sex addicts are also available. The referring therapist continues to function as a part of the client's comprehensive treatment team, in addition to other established components such as psychiatrists and medication management.

Utilizing appropriate diagnostic tools and working collaboratively, the non-specialized clinician and the sex addiction therapist can deliver much-needed treatment for the sometimes overlooked individuals struggling with sex addiction. ❖

Paul Kelner, LCSW-C, CSAT is a Certified Sex Addiction Therapist in private practice in Rockville, MD.

President's Message, from page 3

Irene Walton, will continue as our Secretary and organizer of the calendar. She has been a joy to work with, not only taking on the various duties of secretary but also preventing traffic collisions with the calendar and continuing to provide consultation on the website.

There is no way to thank **Margot Aronson**, our VP of Legislation and Advocacy, enough. Her dedication to making sure we are represented well in all three jurisdictions is prodigious. Her good humor, intelligence, passion, and knowledge of the Society's history make her a pleasure to work with, and she is immensely valuable to us all.

And finally, I must thank **Sydney Frymire** and **Susan Post**, our two immediate past presidents, from the bottom of my heart. They have both been tremendous guides and mentors to me. Sydney's endless patience and good humor have provided me with much needed support. Susan has also been incredibly generous in sharing her knowledge of our Society's history, her writing and editing skills, and her unruffled good will. Both of these women have been so much fun and so thoughtful to work with that I cannot imagine the year without them

With our upcoming elections, some members will be departing from our Executive Committee and board and new ones will take their places. I look forward to the new groups and adventures ahead as we work together to strengthen our Society! ❖



WSP

WASHINGTON SCHOOL OF PSYCHIATRY

Our training programs, seminars and conferences provide a learning environment of open inquiry for mental health professionals from every discipline regardless of their stage of development from beginner to expert.

For program details, faculty, schedule, continuing education awards, tuition and fees, **see**

www.wspdc.org

Training Programs

Apply Now for classes starting in September

Fundamental Concepts & Techniques of Dynamic Psychotherapy — *To help recent graduates continue their professional growth*

Clinical Program on Psychotherapy Practice — *To provide greater competence in psychodynamic therapy*

Child & Adolescent Psychotherapy — *To deepen understanding and proficiency in the work with young clients*

Infant & Young Child Observation — *To promote a deep appreciation for the manifest and latent processes that underlie development*

Intensive Short-Term Dynamic Psychotherapy — *To create a robust alliance with the patient to relinquish defenses and embrace emotions*

Psychotherapy with Older Adults & the Study of Aging — *To gain expertise to treat the aging individual, couple, family and group*

Supervision — *To examine the overlaps and differences between supervision and psychotherapy for effective supervision*

Washington School of Psychiatry
5028 Wisconsin Ave NW #400
Washington DC 20016
202-237-2700 • www.wspdc.org

LEGISLATION & ADVOCACY

■ FEDERAL

Laura Groshong, LICSW

Adapting to Change: DSM and ICD Codes

As most practitioners probably know, the American Psychiatric Association is releasing the newest version of the Diagnostic and Statistical Manual, Fifth Edition (DSM-V) in May, 2013. There will be many changes to the diagnostic codes from the DSM-IV-TR, which has been the code set used for the last seven years. This article is a guide to what diagnostic codes should be used to make sure claims are reimbursed.

The diagnostic code is a necessary identifier for reimbursement, as is the procedural code. The former identifies the mental health condition for which the patient needs treatment, *e.g.* 309.81 for posttraumatic stress disorder. The latter identifies what procedure, *e.g.*, 90791 for a diagnostic hour, is being used to treat the condition.

The DSM codes have generally been seen as the gold standard for diagnostic codes because they are created by a mental health organization, the American Psychiatric Association, and specific to mental health disorders. The fact is that the mental health codes which are required for reimbursement are the codes from the International Classification of Diseases (ICD), created by the World Health Organization (WHO). WHO creates diagnostic codes for all medical conditions, including mental health.

Because the DSM-IV-TR codes and the ICD-9 codes are virtually identical, claims are reimbursed in almost all cases when DSM-IV-TR codes are used. However, the DSM-V codes are going to be significantly different from the ICD-9 codes (and the ICD-10 codes starting in October of 2014). Using ICD-9 codes is probably the best way to guarantee reimbursement until the ICD-10 codes go into effect.

For a crosswalk from DSM-IV-TR codes to ICD-9 codes, go to the following link from the American Psychiatric Association and the American Psychological Association: <http://www.apapracticecentral.org/reimbursement/billing/dsmiv-to-icd9cm-codes-chart.pdf>.

Please let Margot Aronson (malevin@erols.com) or Mark O'Shea (markoshea2@aol.com), members of the CSWA Government Relations Committee, know if you have any questions. ❖

Laura Groshong, LICSW, is the Clinical Social Work Association (CSWA) Director for Government Relations. In addition to her advocacy work, Laura writes The Aware Advocate, the informative reports on legislation and insurance/Medicare from CSWA that appear frequently on our GWSCSW listserve. She also maintains a private psychotherapy practice in Seattle, Washington. More information about CSWA can be found at www.clinicalsocialworkassociation.org.

Marie Caterini Choppin, LCSW-C & Associates



COUNSELING FOR
Contentment

*Strengthening resilience and
nurturing secure relationships*

- Child Play Therapy • Parent Consultation
- Individual Therapy (adolescents & adults)
- Family Therapy • Couple Therapy
- Social Skills Groups

**OFFICES IN SILVER SPRING
AND BETHESDA!**

301-625-9102
CounselingForContentment.com

Kathleen A. Nardella, JD, LCSW-C

Announces the opening of a family law services firm and a family law firm offering custody evaluation, parenting coordination, reunification therapy, collaborative law and Best Interest Attorney services.

Office	Mail
932 Hungerford Drive	350-C Fortune Terrace
Suite 39	PMB 141
Rockville, MD 20850	Potomac, MD 20854

Phone 301-775-5373 | Fax 301-881-3910
nardella@mdcustody.com | www.mdcustody.com

■ MARYLAND

Judy Gallant, LCSW-C

By the conclusion of its annual ninety-day session this April, the 2013 Maryland General Assembly had considered 2,610 bills and resolutions. Your Maryland Clinical Social Work Coalition (the Maryland arm of our GWSCSW Legislative Committee) monitored 86 of them, including: proposals on the Affordable Care Act; Parity, Insurance and Medicare issues; Autism; Confidentiality; "Telemedicine;" Mandated Reporting of Abuse; Medical Marijuana; Licensing for Psychology Associates; Mental Health and Gun Violence; and End of Life issues. The Coalition offered its views and recommendations on 14 of these.

The focus of our Coalition efforts is, always, to raise the consciousness of the legislative and executive branches of government so that consumers will have greater access to quality-driven and efficient mental health care. Through our active involvement, legislative leaders learn who we are and what it is that clinical social workers can add to discussions of mental health issues. This year, our advocacy resulted in the specific inclusion of clinical social work language in two important pieces of legislation, those concerning autism and confidentiality.

Of all bills passed this session, most relevant to our immediate professional needs was HB 806, which made significant revisions to the Maryland Social Work Practice Act. Since they directly affect our practices, this newsletter report will discuss these revisions. We'll talk about other bills in our next newsletter.

All licensees should know what is in the Social Work Practice Act, and the best way to understand the changes that have been made is to go directly to the revised wording, available at <http://mgaleg.maryland.gov/2013RS/bills/hb/hb0806E.pdf>.

Criminal Background Checks, New Disciplinary Standards

One change is the new requirement that applicants for a license from the Board of Social Work Examiners (BSWE) submit to a criminal history records check (CHRC) and, if required by the Board, a mental or physical competency exam.

Another change involves altering several of the grounds for disciplinary action.


The law had previously authorized the Board to deny a license to any applicant, fine any licensee, reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the applicant or licensee *knowingly* made or filed a false report, failed to file or record any report required by law, failed to report suspected child abuse, or failed to report suspected abuse of a vulnerable adult. HB806 deletes the word "knowingly" and the law now allows for disciplinary action whether or not the offense could have been due to ignorance.

Other changes include the addition of "and neglect" to the required reporting for suspected child abuse, and a newly-established ground for disciplinary action for failure to comply with required maintenance, disclosure, and destruction of medical records "as required under Title 4, Subtitles 3 and 4 of the Health General Article." Fines for the above offenses have been increased from up to \$5 000 to up to \$10,000.

A Roster on the Web; No More Paper Licenses

The revised Act requires the BSWE to maintain on its website a roster of all licensees who meet licen-

continued on page 8



Preferred Transcriptions

Specializing in Transcription Excellence

Serving medical, research and academic institutions since 1998.

Quality, Personal Customer Service

Quick Turnaround Time

Live Interaction

Flexible Access Options

Reasonable Rates

For more information about pricing
and services, contact **Beth Powers**

(610) 539-9208 x1

www.preferredtranscriptions.com

Legislation, from page 7

sure requirements rather than to continue to issue new or replacement paper licenses. Our Coalition advocated that initial paper licenses be maintained, but this request was rejected on the grounds that a paper license is too easy to forge and the only way the public can officially confirm that someone is licensed is through the website.

Each “electronic license” is to include: (1) the kind of license; (2) the full name of the licensee; (3) a license number; (4) the license status; (5) the expiration date; and (6) the original date of issuance to the licensee. The revised law specifies that, at least one month before a license expires, the Board must send a renewal notice to the licensee at the last known electronic or physical address of the licensee rather than by first-class mail. The revision also establishes a non-renewed license status for a maximum of five years if a licensee does not renew and submits to the board a written application for non-renewed status and pays the applicable fee. The Board must reactivate the license if the individual applies for reactivation, pays the reactivation fee, and meets other requirements.

Changes for LCSW-Cs and LCSW-C Applicants

The revised law changes requirements for LCSW-C applicants. To obtain an LCSW-C, an applicant must not only have received a Master’s degree in social work but have documentation of completion of 12 academic credits in clinical course work, 6 credits of which must be from an accredited Master’s degree program as well. The applicant must also have 3,000 hours of supervised experience, of which 1,500 hours were face-to-face client contact.



INFERTILITY COUNSELING TEN MONTH STUDY GROUP

September 2013 to June 2014
Second Tuesday of the Month
Rockville, MD • 4:00-7:00 PM

Taught by
Sharon Covington, LCSW-C & Nancy Hafkin, PhD

For more information
www.covingtonandhafkin.com/training.htm
30 Cat. I CEUs, including 3 credits of Ethics

Under the revised law, an LCSW-C may evaluate, diagnose, and treat biopsychosocial rather than psychosocial conditions. However, the difference between the new term, “biopsychosocial,” and the previous term, “psychosocial,” is not defined in the revised law. It is also clarified that an LCSW-C may petition for an emergency evaluation of an individual with a mental disorder.

LGSW and LCSW Scope of Practice Expansion

A Licensed Graduate Social Worker (LGSW) may now diagnose and treat a mental disorder, and may also engage in private practice, but only under the direct supervision of an LCSW-C.

Under the revised act, a Licensed Clinical Social Worker (LCSW), too, may treat mental or emotional disorders, provide psychotherapy, and diagnose a mental disorder, but only under the direct supervision of an LCSW-C. Our Coalition advocated that an additional requirement be imposed that the LCSW be in process to gaining an LCSW-C, to recognize the knowledge base and commitment that level of licensing required, but this request was rejected.

“SWA License” Changes to “Licensed BSW”

The revised act renames the Social Work Associate License to the Bachelor of Social Work License (LBSW) and prohibits an LBSW from engaging in private practice.

Finally, use of the title, abbreviation, sign, card, or other representation that one is a licensed social worker (including the use of the words “social worker” or “social work” and LSWA, LSWA, LBSW, LGSW, LCSW, or LCSW-C) if one is not actually so licensed, is a misdemeanor, and the penalty has been increased to a fine not exceeding \$5,000 (increased from \$500) or imprisonment not exceeding two years (changed from 90 days).

Several other bills that passed seem to have potential relevance to our clinical practices, and they will be reviewed in our next newsletter. ❖

Judy Gallant, LCSW-C, is chair of the Maryland Clinical Social Work Coalition, our GWSCSW legislative committee in Maryland. She maintains a private practice in Silver Spring. Judy’s update is based on the multi-page end-of-session report of Alice Neily Mutch, who represents us in Annapolis and guides our advocacy strategy. Alice has been a lobbyist for health and human service causes for close to twenty years. For more information about Maryland legislative issues, see her website, www.CapitalConsultantsofMd.com.

■ VIRGINIA

Dolores Paulson, LCSW

Because this is an odd-numbered year, the 2013 Virginia General Assembly held a so-called “short” session: legislators convened the second week in January and adjourned forty-five days later, on February 24. (In even-numbered years the sessions are 60 days.) Nevertheless, important issues were acted upon.

A number of 2013 legislative initiatives received prominent coverage in the media, but our professional concerns this session centered on Senate Bill 1011 (SB1011). Virginia Board of Social Work regulations established in 2011 required a minimum clinical course of study before a candidate would be eligible to sit for the clinical licensing exam, and many would-be applicants could not comply. SB 2011—a bill to respond to this issue—split the social work community.

The Issue

Although the Board had taken care to involve stakeholders in a lengthy open decision-making process during the development of these standards, various problems emerged once the regulations were enacted. A number of graduate students and recent graduates discovered their ineligibility to sit for the exam without additional clinical coursework. They, and the social work schools, protested vigorously.

The Board held its ground, noting that at the time the regulations were first put in place, they had the agreement of NASW, the universities, and the Association of Social Work Boards. Ultimately, after a series of confrontational and inconclusive meetings, the Board proposed creation of an Ad Hoc Committee of stakeholders to work through the issues with the schools. However, the proposal came too late, as a legislative “solution” had already been set in motion.

Why the Clinical Societies Opposed SB 1011

GWSCSW and the Virginia Society for Clinical Social Work strongly opposed the measure, and urged that the bill be withdrawn so that the Ad Hoc Committee could resolve the conflict within the social work community. Regulatory Boards are mandated to protect the public. We believe it is appropriate that they, not legislators, should determine minimum standards for an acceptable clinical course of study. Passage of the bill would set a precedent ceding social worker authority to regulate social work practice to others.

As for the measure itself (see the box Senate Bill 1011), we testified that

- SB1011 weakens standards for Virginia’s clinical licensure by eliminating the required clinical course of study in favor of a broad non-specific approval process, and
- Since Council on Social Work Education (CSWE) accreditation does not reflect the actual clinical sequence within schools of social work, use of graduation from a CSWE accredited program as the sole standard for clinical education could lead to enormous variation in clinical education and, in some cases, inadequate clinical education.

Unfortunately, we were not successful. SB 1011 passed in both the Senate and the House, and was approved by Governor McDonnell, effective July 1, 2013.

Moving Toward Resolution

The Board of Social Work has now invited the schools of social work in Virginia and the surrounding states (including North Carolina, West Virginia, and the District of Columbia) to meet to discuss curriculum issues. The CSWE has been invited as well, to present information on their accreditation process. After this fact-finding meeting, the Ad Hoc Committee will convene and seek a reasonable accommodation. As

continued on page 10

Senate Bill 1011: Summary as Passed

Senate Bill 1011 “requires the Board of Social Work to accept proof of the successful completion of the following as evidence of the satisfaction of the educational requirements for licensure as a clinical social worker: (i) a master’s degree in social work with a clinical course of study from a program accredited by the Council on Social Work Education, (ii) a master’s degree in social work with a non-clinical concentration from a program accredited by the Council on Social Work Education together with successful completion of the educational requirements for a clinical course of study through a graduate program accredited by the Council on Social Work Education, or (iii) a program of education and training in social work at an educational institution outside the United States recognized by the Council on Social Work Education.”

these meetings progress, the clinical societies will be there to share our ideas and voice our concerns as stakeholders in the licensing process. ❖

Dolores Paulson, LCSW, PhD, has been a mainstay of the GWSCSW Board: she chaired the Continuing Education committee for many years, and has organized several major conferences for the Society. She herself has served on the Virginia Board of Social Work. Dolores is in private practice in Virginia.

A special note of thanks to Rick Goodling, LCSW, Chair of the Legislative Committee of the Virginia Society for Clinical Social Work (VSCSW), for background information for this article. The two Societies work closely on Virginia legislative and regulatory issues, and we are appreciative of all that VSCSW does “on the ground” representing us at State Assembly and Board meetings in Richmond.

■ DISTRICT OF COLUMBIA

By Margot Aronson

This spring, our GWSCSW Legislative Committee for DC has actively participated in the planning process for the DC Health Benefits Exchange (HBX), as part of a coalition of community advocacy groups including Families USA, Legal Aid of DC, National Council La Raza, DC Primary Care Association, AARP DC Chapter, Whitman Walker Health, DC Fiscal Policy Institute, National Multiple Sclerosis Society, Center on Budget and Policy Priorities. There are 35 in all.

Our input in meetings of the coalition and in conferences with HBX workgroup leaders has been focused on ensuring that mental health coverage will be included in the “Essential Benefits Package” and that insurers will be required to maintain “network adequacy,” *i.e.*, a sufficient number of providers to meet member needs. Both these issues have been incorporated into the plans the Exchange Authority has proposed to the Council, as seen on the Exchange website at <http://hbx.dc.gov>. To date, the results are promising.

Why the District Has Embraced the Affordable Care Act

From the beginning, DC has embraced the Affordable Care Act (ACA) and the concept of a health benefits exchange, requiring insurers to display their prices and health plan information on a single website portal, easily accessible to small business and individual consumers. This is in contrast to the District health care status quo, with:

- A 100%-urban population and dramatic disparities in income and health status, particularly for minorities
- A non-competitive health insurance market with one insurer controlling more than 75% of the small group and individual markets and frequent double-digit insurance premium increases
- Small businesses paying an average of 18% more for coverage than large companies

The Planning Process

The HBX planning process has been impressively thoughtful, open, and inclusive. The HBX Authority, a board of respected health care and public health experts chosen by the Mayor and confirmed by the Council, has actively sought consultation with stakeholders. As a result, insurers, agents and brokers, small businesses, health care providers, consumer & patient advocates have all provided input into meetings, conference calls, and workgroups.

The bill introduced in the DC Council in late April by the HBX Authority reflects this diverse input, with a balanced plan to transition over several years to a new, transparent, competitive market. In response to consumer, provider, and community advocates, HBX would create standards for *all* health plans sold, both inside and outside the exchange. All plans would be required to include mental health parity and coverage for autism services. Ultimately, there will be one big marketplace, assuring an adequate number of carriers and plans in the Exchange to provide meaningful choice to small businesses and individuals.

To assuage insurers’ concerns that requirements are being phased in too fast, the Authority has built in a two-year transition period during which small businesses can choose to continue buying coverage in the traditional, less-regulated market. Subsequently, one big marketplace will be phased in between 2014–2016.

What to Expect

Since the ACA extends coverage to 42,000 uninsured DC residents, it is expected that hospitals, physicians, clinics, and other providers will see much less uncompensated care, allowing them to focus resources on improving quality of care and outcomes for patients.

As insurers display their prices and health plan information on a single website portal, they will compete for business based on price and quality; they won’t be able to segment the population and skim the healthi-

est residents into policies shaped to attract them. Premiums are expected to become more stable and predictable for families and businesses.

As for individuals and small businesses, the HBX easy-to-use online health plan finder will enable them to make side-by-side, apples-to-apples comparisons. And for consumers who are not internet-savvy, HBX has approved an in-person assistance program to guide them in choosing health coverage.

What's Next

The plan has been presented to the Council. Expressing concern with the speed and breadth of the reforms, some members of the business community are meeting with Council members to present their issues. Meanwhile, our coalition and other community organizations and individuals are letting Council members know of our support of the plan. By the time this newsletter is in your hands, the Council will likely have made its decisions. ❖

Margot Aronson, LICSW/LCSW-C, is GWSCSW Vice President for Legislation & Advocacy, as well as a past president and newsletter editor for the Society. She maintains a private practice in the District.

SHULMAN
ROGERS

GANDAL
PORDY
ECKER

Honored to partner with GWSCSW
and the Prepaid Legal Services Plan

Providing a full range of personal
and business legal services in
Metropolitan Washington since 1972

Kim Viti Fiorentino
301-230-6567

kfiorentino@shulmanrogers.com

Heather Mehigan
301-255-0552

hmehigan@shulmanrogers.com

www.ShulmanRogers.com

TREATMENT CENTER
OF THE
WASHINGTON SCHOOL OF PSYCHIATRY

WSP

New Mother/Baby Therapy Group
A morning group is now forming.



This group is for moms with new-born to one-year-old babies that will meet weekly. Participants will talk about the challenges that go along with becoming a mother to a particular new baby, as well as managing the demands of parenthood in general.

Mother/Baby Group Details

Meets: Weekly, morning

At: Washington School of Psychiatry

Fee: \$70.00 per session

For more information: call 202-537-6050

Participants will

- Create a supportive environment for sharing challenges and difficulties
- Reduce feelings of isolation or depression
- Increase awareness of parent/baby interactions
- Develop greater understanding of their baby's signals and their own responses to these signals
- Learn to respond creatively to challenges such as feeding issues and sleep problems

Consider Referring a Patient Who Faces

- Baby blues or post-partum depression
- Difficulties connecting to their new babies
- Difficulties with nursing or other feeding issues
- Conflicts about returning to work
- Sleep issues
- Integrating the new baby into the family
- Growing into their new identity as a mother

To make a referral, please contact us at 202-537-6050.

Additional Services Starting in the Fall

- Time limited 10-week groups for pregnant women
- Groups for gay and lesbian parents
- Groups for new single parents

Washington School of Psychiatry
5028 Wisconsin Ave NW #400
Washington DC 20016
202-537-6050 • www.wspdc.org

Ethics Conference Considers Social Media

Susan Post

Once again, the GWSCSW biannual ethics conference with Dr. Frederic Reamer was hugely successful, with over 100 Society members in attendance. Co-sponsored by NCSST and held on the campus of Catholic University on April 7, the conference this year specifically addressed the role of the new digital technologies for social workers and their clients. Dr. Reamer explored both the benefits and the risks of such social media as Skype and Facebook, as well as distance therapy and on-line teaching and learning. Salient among the ethical considerations explored were those related to boundaries and privacy as they may affect clinicians and clients.

For social workers, it is critical in these electronic times to be cognizant of challenges to privacy. We must be aware of how self-disclosure may be inadvertently impacted by social media and in fact the internet in general. Try looking yourself up on line and see how much information can be obtained that you didn't even know was available. As use of the internet has become the norm, we cannot afford to remain ignorant of its impact on those we serve and our relationships with them. We need to know the difference between professional and personal Facebook pages, and to be highly informed about privacy settings on all social media. As well, we need to be equally aware of how we communicate with other clinicians on line. The bottom line is that it is impossible to insure privacy on the internet.

Dr. Reamer recommends development of a professional social media policy to address the boundary challenges presented by the use of cell phones, email, and platforms such as Skype for business. Increasingly, it is becoming accepted practice to include a statement about how we utilize media among clinician's intake forms. This includes noting how you will (or won't) respond to messages left on your phone, the use of texting, and use of email. Email presents clear risks to privacy as well, and should only be used for scheduling of appointments.

Long-distance treatment, increasingly common, presents a host of conundrums for the clinician. First there is

a question of legality and liability. Many states require that a clinician be licensed in the state in which the client (not clinician) is located. Telephone therapy runs the risk of missing the cues of body language. We need to be always weighing risk versus benefit as we make decisions about our engagement with social media in our practice. Ethical use of social media is a fast developing field, and we will need to keep abreast of new and increasing challenges to our Code of Ethics and to issues of privacy and boundaries in our practice.

Joel Kanter participated in a segment of the conference related to on-line learning. Having taught briefly for a top-rate social work school, he was able to share his experience—both the positive and the negative—with the rest of us. Dr. Reamer has also been involved in teaching through the internet, which is doubtless a wave of the future.

Dr. Reamer is on the faculty at Rhode Island College. A prolific writer on ethics, social welfare policy and the criminal justice system, he is sought after as a speaker both nationally and internationally. Much to our good fortune, he has become a real friend of GWSCSW through his long relationships with the organizers of this conference and members of our board. We have also had the pleasure of getting to know his brother Andrew, who lives in DC and is a professor at the GWU Institute of Public Policy, at the informal receptions hosted by Audrey Walker the evening before the conference. We look forward always to the excitement of Dr. Reamer's workshops and the warmth of his visits.

The quality of this conference was reflected in the evaluations, which included comments such as:

"It was a wonderful presentation. I learned so much. I wish we had more time."

"Dr. Reamer is excellent! Compelling, provocative, cheerful, contagious, and appropriately cautious!"

"Dr Reamer is a gift to the social work profession. Thank you for bringing him to us." ❖

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



Greater Washington Society for Clinical Social Work

Education ♦ Advocacy ♦ Community

Seating
is limited.
Register
early!

GWSCSW CONTINUING EDUCATION COURSES 2013-14

Register early—many of the courses fill up quickly. **PRIORITY OF REGISTRATION** Registration is available on a first-come, first-served basis at our website: www.gwscsw.org. Registration is also available by mail; however mailed registrations are added to the class list on the date they are opened, not the date they are postmarked. **LATE REGISTRATION** Pre-registration ends one week prior to date of workshop. After that date, there is a \$10 late registration fee. **REFUNDS** In the event GWSCSW cancels a workshop, full refunds will be made. Cancellation by the registrant made prior to one week before the course will receive GWSCSW credit less a \$10 cancellation fee. Cancellation must be made by via email to the office (admin@gwscsw.org). No credit is given for cancellations made less than one week prior to the course.

■ **Gottman Couples Therapy: What Makes Relationships Work?**

This seminar is an introduction to John Gottman's research about relationships and how you can begin to apply these findings to assessment and intervention for couples. As a result of your attendance at this workshop, you will be able to: understand how to think about what makes relationships work well and what makes them fail using Gottman's Sound Relationship House Theory; begin to use the theory to accurately identify the specific problems and strengths in the dynamics of a couple's relationship; determine the most beneficial points in the couple's interaction where intervention will be most effective; and, begin to apply this new, research-based couple therapy to the broad spectrum of problems you encounter in your daily practice.

Date: **Saturday, September 7, 2013**

Time: 9:00 AM – 12:15 PM

Location: Sunrise At McLean:
8315 Turning Leaf Lane, McLean Va 22102

Instructor: Patricia Gibberman, LCSW

Info: pgibbermanmsw@gmail.com or 703-208-9988

Cost: Members \$60 / Non-Members \$90

CEUs: 3 hours

■ **Psychiatric Emergency: The Process of an Emergency Evaluation Petition**

As mental health professionals we provide our clients with healing and increased coping skills. But what do we do if a client spirals into a psychiatric crisis? What if our client voices suicidal or homicidal threats, or shows acute psychotic symptoms or sudden change of mental status that puts the client or someone else into immediate danger? For example, the parents of a 16 year old find his suicide note and he resists their attempts to get him help. Or, in a session with you, the couple starts fighting and the husband, who is diagnosed with bipolar disorder, makes homicidal threats to his wife and leaves the office. Or, the elderly parent of one of your clients lives alone in her apartment, leaves the stove on, wanders the streets of her neighborhood and refuses to allow your client to help her. What are our responsibilities? What legal aspects and ethical issues do we need to consider? How do we practice in an

ethical way and consider our clients' right to self-determination in a potentially life threatening situation? What ethical issues, as per NASW Code of Ethics, do we need to consider when filing an emergency evaluation petition?

Date: **Friday, September 20, 2013**

Time: 9:00 AM – 12:15 PM

Location: Heartlands Senior Village at Ellicott City:
3004 North Ridge Road, Ellicott City, MD 21043

Instructor: Janette Patterson, MSW, LCMFT

Info: janette.pat@gmail.com or 240-418-8022

Cost: Members \$60 / Non-Members \$90

CEUs: 3 hours (Ethics)

PRE-REGISTRATION REQUIRED – Register online at www.gwscsw.org

SUPERVISION CERTIFICATION (MARYLAND & VIRGINIA)

The two courses on this page may be taken separately or together. Completion of the two 6-hour courses will give the registrant the 12 hours of supervision study required by Maryland to supervise those pursuing clinical license. Virginia requires 14 hours of study and the additional 2 hours is available to those who wish certification in Virginia.

■ Ethics of the Supervisory Relationship: Power, Trust and Shared Meaning

Because of the fact that supervision is the primary vehicle through which one learns clinical practice and because of the phenomenon of parallel process, a good relationship between supervisor and supervisee is essential. This six-hour workshop introduces participants to a conceptual model that explains the fundamentals of the supervisory relationship and identifies inherent ethical considerations. Participants will have an opportunity to work with self-reflection questions about the basic elements of the relationship: power, trust, and shared meaning.

This workshop is first in a series of two that can be taken to fulfill a 12-hour certification in supervision. It also meets criteria as an ethics workshop.

Date: **Friday, October 4, 2013**

Time: 8:30 AM – 4:00 PM

Location: Ingleside At Rock Creek:
3050 Military Rd NW Washington, DC 20015

Instructor: Tamara Kaiser, PhD, LICSW

Info: tlkaiser@tamarakaiser.com or 612-825-8053

Cost: Members \$120 / Non-Members \$180

CEUs: 6 hours (Supervision and/or Ethics)

■ The Supervisory Relationship: Developmental Stages and Cross Cultural Issues

This six-hour workshop will address issues related to developmental stages of supervisor and supervisee and to cross-cultural supervision. Within the context of the supervisory relationship, developmental models can offer new insights into the dynamics of supervision. The first half of this workshop will offer information on several developmental models of supervision, focusing on the stages of the supervisory relationship, as well as stages of supervisor and practitioner development. Participants will have the opportunity identify their developmental stage as supervisors and the impact of this stage on how they approach their supervisory responsibilities. The second half of the workshop will include an application of the concepts of dynamics power, trust and shared meaning (presented in the first workshop) to a cross-cultural supervisory relationship. The presenter will also introduce a model based on the notion of dialectic thinking. Finally, participants will have the opportunity to review a self-assessment tool that they can use with their supervisees in order to develop a deeper understanding of each other's cultural context and the impact of that context on their work.

This workshop can be taken as part of a two session series to fulfill a 12-hour certification in supervision. It also meets criteria as training in diversity.

Date: **Friday, November 15, 2013**

Time: 8:30 AM – 4:00 PM

Location: Ingleside At Rock Creek:
3050 Military Rd NW Washington, DC 20015

Instructor: Tamara Kaiser, PhD, LICSW

Info: tlkaiser@tamarakaiser.com or 612-825-8053

Cost: Members \$120 / Non-Members \$180

CEUs: 6 hours (Supervision and/or Diversity)

Virginia (14 hr) Certification: Arrangements will be made for those who need an additional two hours for the Virginia certification. The additional two hours will be available only to those who have registered for both Supervision workshops (October 4 and November 15). Email the office (gwscsw@gmail.com) to register to register for the additional two hours. Cost will be \$40 for members and \$60 for non-members. Dates and times to be arranged with the instructor at the first workshop.

PRE-REGISTRATION REQUIRED – Register online at www.gwscsw.org

■ **Counseling and Attachment Theory**

Effective counseling for clients includes awareness of theories concerning human development and application of effective interventions. This workshop reviews attachment theory and the attachment theory framework for viewing the client's experience. Understanding attachment style will help practitioners understand the client's and professional's lenses for understanding self and interactions with others. The workshop will provide didactic and experiential opportunities for learning and applying attachment theory to professional practice.

Date: **Friday, October 11, 2013**
Time: 9:00 AM – 12:15 PM
Location: 215 Loudoun Street SE Leesburg, Virginia 20175
Instructor: Theresa A. Beeton, PhD, LCSW
Info: theresabeeton@gmail.com or 703-771-7555
Cost: Members \$60 / Non-Members \$90
CEUs: 3 hours

■ **Sibling Conflicts and Competition Over Aging Parents' Care**

We all know that often when parents become frail or sick, revived sibling conflicts can muddy already complex waters. This workshop is for the therapist who sees individuals/families experiencing differences around their aging parents' care. Two case presentations fictionalized from our specialty geriatric practice will be presented. We will discuss strategies to help reduce sibling conflict and optimize care of the older parent.

Date: **Friday, October 25, 2013**
Time: 9:00 AM – 12:15 PM
Location: 4400 East West Highway, Suite 907
Bethesda, MD 20814
Instructor: Barbara Kane, LCSW-C & Linda Hill, LCSW-C
Info: ans@agingnetworkservices.com or 301-657-4329
Cost: Members \$60 / Non-Members \$90
CEUs: 3 hours

■ **Emergency Coverage of Your Practice: Practical and Ethical Considerations**

If you suddenly were to become incapacitated due to injury, illness or death, who would contact your clients? Just as it is important for an individual to write a will to protect personal assets and provide for his or her dependents, it is also prudent for a clinician to prepare for an untimely or unanticipated inability to carry out their functions at work. The purpose of this course is to help clinicians anticipate the needs of their clients and their business or the organization where they work, should such an emergency arise. The goal of the course is to enable participants to identify individuals who could step in if needed, write instructions for their backup personnel, and distribute these instructions.

Date: **Friday, January 24 & February 14, 2014**
Time: 9:00 AM – 12:15 PM
Location: Heartlands Senior Village at Ellicott City:
3004 North Ridge Road, Ellicott City, MD 21043
Instructor: Melinda Salzman, LCSW-C
Info: salzmanmsw@starpower.net or 301-588-3225
Cost: Members \$120 / Non-Members \$180
CEUs: 6 hours (Ethics)

Note: This is a 2-session course; attendance both days is required for CEU certificate.

■ **Prostate Cancer & Sexuality: The Basics**

The basics of what every therapist should know when dealing with a person or couple diagnosed with prostate cancer will be presented: the diagnosis process, the treatment options and their possible complications, and most importantly, the sexual issues men with prostate cancer and their partners face. Ways to better the couple's sexual and sensual relationship will be discussed, as well as specific tips for incontinence and erectile dysfunction treatments.

Date: **Friday, January 31, 2014**
Time: 10:00 AM – 1:15 PM
Location: 6917 Arlington Road, Suite 202,
Bethesda, MD 20814
Instructor: Hani Miletski, PhD
Info: hani@drmiletski.com or 301-951-6592
Cost: Members \$60 / Non-Members \$90
CEUs: 3 hours

■ **Therapy in Action: From Movement to Transformation**

The therapeutic conversation can take many forms on the path to healing. Psychodrama and other expressive arts therapies have demonstrated the ability to move the client beyond the familiar dialogue of traditional talk therapy to an often deeper, less conscious/self-conscious realm of exploration. Interpersonal neurobiologist, Daniel Siegel, refers to these mind-body-spirit based approaches as “whole brain therapies” drawing on all the resources within to create cohesion and balance. This workshop will introduce participants to a number of action techniques that can be invaluable when clients are stuck in repetitive patterns, reporting rather than revealing, or paralyzed by irrational fears. We will explore the roles of spontaneity and creativity in creating wholeness and well-being. The importance of “warm-up” to all therapeutic interventions will be emphasized and participants will learn how to prepare clients to move into a different process in the consulting room. The group will participate in several dif-

ferent action structures that include: the empty chair, doubling, embodiment and movement, sculpting, and rehearsals for life. Wear casual clothes and come prepared to move and play, try new things out, be surprised, delighted and inspired. As we do when working with clients, we will practice integrating it all on a cognitive, affective and behavioral level throughout the day.

Date: **Saturday, February 1, 2014**

Time: 9:00 AM – 4:00 PM

Location: Dominion Hospital
2960 Sleepy Hollow Rd, Falls Church, VA 22044

Instructor: Gloria Mog, LCSW

Info: gloriainog@verizon.net or 703-550-4164

Cost: Members \$120 / Non-Members \$1800

CEUs: 6 hours

■ **ADHD in Children and in Adults: Strategies in Couples and Family Therapy**

ADHD is a complex syndrome of neurological processing, and emotional and behavioral patterns that affect not only the individual, but will impact a couple or family. When ADHD is not addressed, patterns of impulsive and unpredictable behavior and emotional dysregulation can contribute to the dysfunction in the couple or family. As practitioners we need to be able to recognize symptoms of ADHD and help the couple explore techniques and strategies to support our clients in the process of healing. This workshop addresses the concerns of unrecognized symptoms of ADHD in the treatment plan and highlights effective techniques in working with couples and families affected by ADHD. Participants will learn about how ADHD in an adult impacts a couple and how ADHD in a child can affect the functioning of a whole family.

Date: **Friday, February 21, 2014**

Time: 9:00 AM – 12:15 PM

Location: Sunrise at Fox Hill:
8300 Burdett Road, Bethesda, MD 20817

Instructor: Janette Patterson, MSW, LCMFT

Info: janette.pat@gmail.com or 240-418-8022

Cost: Members \$60 / Non-Members \$90

CEUs: 3 hours

■ **Aging: An Improvisational Art Form**

The purpose of this presentation is to offer participants a new way of thinking about aging, late adulthood, and retirement, congruent with an active aging population of today. Mary Catherine Bateson has proposed a new developmental stage in Erik Erikson's 8 stages of life: one between Generativity vs. Stagnation and Integrity vs. Despair. This stage is called Active Aging II: Engagement vs. Withdrawal. Others have also encouraged this idea of an active aging engagement. This presentation will offer participants a three hour experiential workshop consisting of activities they may use with their patient populations and themselves to explore new avenues to pursue in an aging period of their lives.

Date: **Friday, March 7, 2014**

Time: 9:00 AM – 12:15 PM

Location: Sunrise at Fox Hill:
8300 Burdett Road, Bethesda, MD 20817

Instructor: Deborah S. Levinson, LCSW-C

Info: dslevinson@gmail.com or 410-653-9610

Cost: Members \$60 / Non-Members \$90

CEUs: 3 hours

■ **Retribution and Forgiveness**

In this culture we commonly emphasize the need for “justice,” but often the concept of justice carries with it the companion wish for “payback” or revenge/punishment. But when does it stop? Probably many of us carry the germs of hurt and hatred with the wish to continue revenge or punishment, but what effect does this have on the body? Does retaining the anger/revenge mode block the person from moving on with the rest of life? With this course, we will explore various cultural, religious, philosophical and bio-psychological viewpoints dealing with guilt, retribution and forgiveness. We will view and discuss most of the film, “The Power of Forgiveness.”

Date: **Friday, April 4, 2014**

Time: 9:00 AM – 12:15 PM

Location: Sunrise at Fox Hill:
8300 Burdett Road, Bethesda, MD 20817

Instructor: Marilyn Austin, PhD, MSW

Info: maaustin@starpower.net or 301-570-9143

Cost: Members \$60 / Non-Members \$90

CEUs: 3 hours

■ Relational Ethics and Social Work Practice

Social work practice is based on values and beliefs that apply to the development of social work ethics. This course will review the NASW code of ethics and apply those ethics to real life everyday practice. Participants will have an opportunity to review their own belief systems and practice situations with clients.

Date: **Friday, April 4, 2014**
 Time: 9:00 AM – 12:15 PM
 Location: 215 Loudoun Street SE Leesburg, Virginia 20175
 Instructor: Theresa A. Beeton, PhD, LCSW
 Info: theresabeeton@gmail.com or 703-771-7555
 Cost: Members \$60 / Non-Members \$90
 CEUs: 3 hours (Ethics)

■ What Complementary Medicine and Energy Practitioners Can Teach Clinicians

This course focuses on the clinical implications of the paradigm shift that's taking place in how we understand consciousness and the nature of change. As quantum theory is integrated into clinical practice, and as growing numbers of Americans use complementary and alternative medicine and practice yoga and meditation, it is important for clinicians to understand, from a clinical practice perspective, the implications of this profound shift. As scientific research legitimizes the heightening of human potentials, we see the growing pains of a paradigm shift. Many gifted and talented individuals cannot speak openly for fear of being dismissed out of hand or labeled pathological. Misunderstanding their gifts raises an important social justice aspect of working with this population; these clients are often vulnerable to practitioners who are uninformed. When these individuals enter mental health delivery systems they are often misdiagnosed and mistreated, but, in reality, they have much to teach clinicians.

This course proposes a model of direct experience that reflects an integration of quantum theory with research on the efficacy of prayer, meditation practices, subtle energy, and intuition across theoretical, cultural, and practice settings. Case materials will demonstrate work in this new paradigm, including the nature of the clinical relationship, the structure of the clinical process, and treatment goals and outcomes.

Date: **Friday, April 11, 2014**
 Time: 9:00 AM – 12:15 PM
 Location: 5319 Lee Highway, Arlington, VA 22207
 Instructor: Marilyn Stickle, LCSW
 Info: ms@marilynstickle.com or 703-790-0232
 Cost: Members \$60 / Non-Members \$90
 CEUs: 3 hours

PRE-REGISTRATION REQUIRED – Register online at www.gwscsw.org

Register early—many of the courses fill up quickly. **PRIORITY OF REGISTRATION** Registration is available on a first-come, first-served basis at our website: www.gwscsw.org. Registration is also available by mail; however mailed registrations are added to the class list on the date they are opened, not the date they are postmarked. **LATE REGISTRATION** Pre-registration ends one week prior to date of workshop. After that date, there is a \$10 late registration fee. **REFUNDS** In the event GWSCSW cancels a workshop, full refunds will be made. Cancellation by the registrant made prior to one week before the course will receive GWSCSW credit less a \$10 cancellation fee. Cancellation must be made by via email to the office (admin@gwscsw.org). No credit is given for cancellations made less than one week prior to the course.

GWSCSW COURSES REGISTRATION FORM

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____ Office Phone (_____) _____

E-Mail _____

Course Title:	Date:	Course Fee	Late Fee
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
TOTAL (make check payable to GWSCSW)		\$ _____	\$ _____

Mail to: GWSCSW, PO Box 3235, Oakton VA 22124

An Alphabet of Reminders and Information

Richard S. Leslie

A. Always remember to renew your license and your malpractice insurance policy. Practicing without a license or malpractice insurance, even if the result of a clerical error, can have significant adverse consequences when an unexpected event occurs during that period of time when there has been a lapse. Don't rely upon the state or the malpractice carrier to remind you—calendar the key dates and avoid stress and possible problems, including personal liability.

B. Barter may not be specifically prohibited by law, but some ethical codes and standards seem to frown on barter or provide conditions around barter that limit its practicality or appropriateness. This is so because some barter arrangements may create conflicts and lead to exploitation or distortion of the professional relationship. If you venture into barter, be sure to review the ethical standards applicable to your practice and with any law that may be applicable. See item "Y" below.

C. Confidentiality is the cornerstone of psychotherapy, but it is not without exceptions—some of which are mandatory (e.g., child abuse and elder abuse reporting) and some of which are permissible (e.g., when a patient is a danger to self or to others or when communicating with other licensed health care providers or facilities, depending upon state law). Remember, the fact of the relationship may be considered to be confidential—so be careful about acknowledging that someone is your client. Also remember to get a valid written authorization (in most circumstances and when required) signed by the patient before releasing confidential patient information to third parties.

D. Domestic violence occurring in a home where a child resides may constitute child abuse when the child observes the abuse. In some states, and depending upon the circumstances, domestic violence may constitute child abuse if it occurs in a home where the child resides—whether or not it is witnessed by the child. For example, if a parent is high on meth and attacks the other parent with a knife—this may constitute child abuse—even if the child is sleeping and unharmed. Check this out in your state.

E. Emotional abuse of a child may be reportable as child abuse, depending upon state law and the circum-

stances involved. There may be a difference between non-severe emotional abuse and severe emotional abuse in regard to whether a report is permissible or required. This can be a tricky area of the law, but reporting emotional abuse, if allowed, may be an important option for the mandated reporter who encounters situations where the child is at risk, but there is no physical abuse or neglect warranting a report.

F. Financial abuse of an elder constitutes a mandatory report in most states. Be sure you know the definition of an "elder" before reporting. There are some nuances in this area of the law (as there are in many areas of the law!). For example, in California an elder is someone who is 65 or older residing in California. Thus, if a patient in California were to tell his therapist that he physically assaulted his 70 year old uncle in (and who resides in) Texas, this would not be reportable in California. The practitioner in California is of course not bound by Texas' mandatory reporting laws. Thus, the communication is confidential.

G. Guilty pleas in a criminal case may jeopardize your license, as may a plea of "no contest" (*nolo contendere*). While no therapist or counselor contemplates being convicted of a crime, the reality is that many are—whether it is for driving under the influence of alcohol or drugs, possession of a controlled substance, insurance fraud, petty or grand theft, or a crime categorized as domestic violence. Before pleading guilty or no contest, consider fighting the case where appropriate (such as when you believe you are innocent or where your lawyer believes that the evidence of guilt is weak). Obtain good representation early.

H. HIPAA, through its implementing regulations regarding parental access to the treatment records of minor patients, defers to state law concerning the rights of parents to inspect or obtain copies of the mental health records of minor patients. In California, the law is written broadly – allowing therapists and counselors wide latitude in denying access to parents and providing protection if the angry parent sues or complains, or threatens such action. What is the law in your state? Can you protect the records from discovery by the unreasonably "snoopy" parent?

I. Immunity from liability does not mean that a therapist or counselor cannot be sued by a patient. It means

that if sued, the immunity statute can be raised as a defense, usually in a motion for summary judgment, and the case can be dismissed at an early stage of the proceedings—assuming that the judge finds that the facts and circumstances fall squarely within the dictates of the immunity statute. Immunity is usually granted to mandated reporters of child abuse or elder abuse. In some states that immunity is absolute and unconditional. In other states, the immunity is available only if the therapist or counselor acts in good faith.

J. Joint legal custody is a concept that is usually important in determining such things as which parent can authorize treatment of a minor, which parent can sign an authorization form to release information pertaining to the minor patient, and perhaps, which parent can have access (inspect or copy) to a child's mental health records. Joint legal custody generally means that both parents share the right and responsibility to make the decisions relating to the health, education, and welfare of the child.

K. Keep good records—not only with respect to treatment, but also with respect to your discussions and consultations with others that are intended to help you make the right clinical or legal decisions. Do not neglect to keep good records relating to your responsibilities

to keep your practice compliant. In other words, calendar the expiration of your license and your professional liability insurance policy. Keep good records regarding the continuing education courses or workshops that you attend. Remember, you are allowed to exceed the minimum mandatory CE requirements!

L. Leaving an agency can create problems for the therapist or counselor who decides to “take patients” with him or her. Not doing things correctly and ethically can cause conflicts between the departing therapist and the owner of the business. Sometimes, these conflicts can put the patient in the middle of the dispute—something that should be assiduously avoided. In some cases, there are contractual provisions that attempt to govern the situation when someone leaves an agency – some of which may be unenforceable. Remember, no one “owns” the patient and the patient should be free to see the practitioner of his or her choice.

M. Minors are entitled to certain rights with respect to obtaining their own treatment—without parental consent. They may also have rights with respect to inspecting their records, obtaining copies of the records, preventing parents from having access to the records, and signing authorization forms. Each state

continued on page 20

Enjoy the Rewards of Your Job Without the Risks



It's Easy With Our Professional Liability Plan

You have a challenging job counseling a variety of clients with diverse needs and expectations. It can be very rewarding. But also risky - unless you have the right protection.

Our Professional Liability Insurance Plan takes the worry out of being a Clinical Social Worker:

- “Occurrence” protection with lifetime reporting for incidents that occur during the policy period.
- Added coverage for personal and bodily injury and property damage.
- A+ rated carrier.

The plan, sponsored by the Clinical Social Work Association, has exceptional benefits to ensure comprehensive coverage.

Enjoy the rewards of your job without the worry. Call today.



Call: 800-875-1911 ■ Visit: www.cphins.com

Offered in partnership with CPH & Associates, Inc. Underwritten by Philadelphia Indemnity Insurance Company, rated A+ for financial strength by A.M. Best.

©2008 USI Affinity

Alphabet of Reminders, from page 19

likely handles these matters somewhat differently. In California, minors are given broad rights—they can generally sign authorization forms if twelve or over, they can generally authorize treatment if twelve or over, and they generally have the right to inspect or copy their own records if twelve or over.

N. Notice of Privacy Practices—Under HIPAA, mental health practitioners are required to provide their patients with this form—which must contain information specified in federal regulations (The Privacy Rule). This is required of those who are “covered providers.” One of the disclosures that must be made, and one that was patterned in significant part after California law, is that confidential patient information may be shared, without the patient’s written authorization, with other health care providers for purposes of diagnosis or treatment of the patient. Is that the law in your state for those who are not HIPAA covered providers?

O. Online therapy may provide opportunities for practitioners, and may also present certain difficulties. One considerable risk of online therapy involves being accused of practicing without a license when the practitioner is in one state and the patient or client

is in another state. Generally, licensing boards will take the position that the practitioner needs to be licensed in the state where the patient resides. Advertising or referring to psychotherapy or mental health counseling as “coaching” is not a good idea. Be careful!

P. Privilege (whether called “psychotherapist–patient privilege” or a similar name) refers to the right of the patient to prevent his or her therapist or counselor from testifying in a legal proceeding and to prevent the treatment records from being introduced into evidence in a legal proceeding. The holder of the privilege is generally the patient, but a psychotherapist would be the one who initially asserts the privilege when the patient is not around and the therapist is served with a subpoena for records. Understanding privilege is essential to lawfully and appropriately resisting (unless the patient and his or her attorney waive the privilege) disclosure in the face of a subpoena.

Q. Questionable billing practices can get the practitioner into big trouble. It is not okay to bill insurers for sessions not actually held, even if the practitioner has a policy where patients are informed that they are responsible for the fee if there is an unexcused “no-show.” Of course, if the bill clearly indicates that the patient did not show and that no services were rendered, a bill could be submitted to the insurer but would likely not be reimbursed. Some practitioners have found themselves in trouble for billing (in their own names) for services rendered by intern employees—full disclosure was not made on the bill. Insurance fraud is a serious offense with many adverse consequences.

R. Reparative therapy, which is sometimes referred to as conversion therapy or reorientation therapy, is the subject of landmark legislation in California. Sponsors of the legislation are seeking to ban reparative therapy for minors, whether or not there is parental consent. The bill provides that any “sexual orientation change efforts” (that term is defined in the bill) attempted on a patient under eighteen years of age shall be considered unprofessional conduct and shall subject the practitioner to discipline by the licensing board. The bill (SB 1172 - Lieu) has passed the Senate and is soon to be heard on the Assembly floor. It appears likely that the bill will reach the Governor’s desk.

S. Service of a subpoena upon a therapist or counselor should not trigger fear—especially if the practitioner understands the laws related to the psychotherapist–patient privilege. While the law of each state may differ with respect to how a subpoena is to be com-

WSP

**Psychotherapy With
Older Adults and the
Study of Aging**

the Washington School of Psychiatry’s
postgraduate, one-year training program
is now accepting applications

Classes meet weekly on Tuesday evenings,
from September 2013 through May 2014

For further inquiries, please contact
Tybe Diamond, MSW
Chair of the program, at
202-966-1381

For details, contact the
Washington School of Psychiatry
202-237-2700
www.wspdc.org

plied with, contested, or resisted by a psychotherapist, it is important to understand that the practitioner will usually want to ascertain whether the patient and the patient's attorney will be claiming or asserting the privilege, or whether the privilege is being waived. It is also important to make sure that the patient and the patient's attorney are in agreement with each other.

T. Termination of therapy should generally be thought of as a process. A sudden termination by the practitioner could amount to an abandonment, which would jeopardize the license of a practitioner who acts too quickly. For example, terminating a long-term client by leaving a telephone message could be considered tantamount to an abandonment, or gross negligence. Of course, each case is different and sometimes there are extenuating circumstances.

U. Unethical dual relationships must be avoided, but what about other dual relationships? Depending upon state law and applicable ethical standards, not all dual relationships are necessarily unethical. While engaging in a dual relationship may not be wise in many circumstances, some ethical standards state that not all dual relationships are unethical, and that some cannot be avoided. The key in such circumstances is to make sure that there is no exploitation of the patient and that the practitioner's judgment is not impaired.

V. Violating confidentiality, whether intentionally or negligently, can result in a civil lawsuit for damages, disciplinary action by the licensing authority, and in rare cases (in some states), criminal prosecution. It is critical that practitioners understand the exceptions to confidentiality—those that are mandatory and those that are permissive.

W. Waiver of the psychotherapist-patient privilege can occur by operation of law or by a signed or express waiver of the privilege by the patient. An example of an express waiver would be when a patient and the patient's attorney inform the practitioner that the patient is waiving the privilege. An example of a waiver of the privilege by operation of law is when the patient has communicated the otherwise confidential information to a friend or other third party. Another example of a waiver by operation of law is when the patient has put his or her mental or emotional condition into issue in the legal proceeding.

X, Y, and Z – forgive my reaching, but ...

X. X-ray therapy is outside the scope of practice/license of psychotherapists and counselors. While this is obvious, there are some less obvious services that

raise scope of license questions. I have talked with some therapists who have made suggestions or recommendations to patients about taking (or not taking) certain medications or dietary supplements. I have also talked with mental health practitioners who have used massage, even in a limited way, during the course of treatment. I remember one case where the therapist rubbed or massaged the patient's shoulders in order to relieve pain. Remember—there are limits to what your license allows—know them well.

Y. Yard-work and gardening, to be performed by a patient at the practitioner's home in exchange for professional services being billed at \$100 per hour, and "paid for" at the rate of \$20 per hour, is arguably an example of exploitation and an unethical dual relationship. The stark contrast is apparent, and exploitation by the practitioner is easily argued by the later-disgruntled patient. The patient could even be considered to be in a separate contractual/business relationship with the practitioner to perform personal services. And wait until the practitioner wants to complain about the quality of the patient's work or decides to terminate therapy!

Z. Zzzzz—do not ever fall asleep while performing professional services! ❖

Richard S. Leslie is an attorney who has practiced at the intersection of law and psychotherapy for the past 25 years. Most recently, he was a consultant to the American Association for Marriage and Family Therapy (AAMFT), where he worked with their various state divisions to develop and implement their legislative agendas. He also provided telephone consultation services to AAMFT members regarding legal and ethical issues confronting practitioners of diverse licensure nationwide. Additionally, he wrote articles regarding legal and ethical issues for their *Family Therapy Magazine* and presented at workshops on a variety of legal issues.

Reprinted with permission of CPH & Associates (*Avoiding Liability Bulletin*, July 2012).

www.ANGERMANAGEMENT.org

MONTHLY CLASSES & INDIVIDUAL TREATMENT

Jennifer Alfonso, MBA, MSW, LCSW-C
Clinical Director

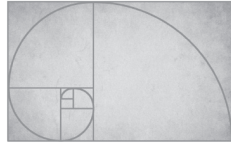
Contact us for Solutions!

301-963-2473

www.angermanagement.org



Longest running anger management
program in the DC Metro Area—Since 1997!



SEQUENCE
Counseling and Consulting Services

CAREER STARTERS

Enrollment is open for the summer series of the popular workshop for recent graduates.

Instruction is offered in a small group setting, led by professional counselors to develop effective job search skills such as:

- Career interest exploration
- Resume & cover letter writing
- Networking skills, including networking for introverts
- Interviewing skills
- Professional appearance tips
- And more!

This is the perfect gift for the recent graduate who is unsure of how to jump into job hunting.

Individual career counseling sessions are also offered.

For information about dates and registration, please contact:

SEQUENCE
Counseling and Consulting Services

3204 Tower Oaks Blvd., Suite 320
N. Bethesda, MD 20852

240-200-5401 Ext. 2
info@sequenceservices.com

www.sequenceservices.com

OUT & ABOUT

Beth Altman participated in the Joseph Miller Abstract Photography Exhibit in May and in the Garrett Park Invitational Exhibit from April 28 to June 2.

Kerry Malawista's new book, co-edited by Anne Adelman and entitled *The Therapist in Mourning: From the Faraway Nearby* is coming out this month. She will have a book launch on June 2 at the Bethesda Hyatt, and a book talk and signing on June 9 at Politics and Prose in Washington, DC.

Since January 2013, **Deborah Meisel** has provided training at 20 East Coast cancer centers on the emotional ramifications for providers working with cancer patients.

Marilyn Stickle will present a paper on "New Paradigm Clinical Practice" at the annual Society for Spirituality and Social Work Conference at the University of Puerto Rico, June 20-23. ❖

Welcome New Members!

Full

Robert Bamberger	Nikita Pion-Klockner
Bonnie Barnard-Lopez	Jennifer J. Reynolds
Elia Charles	Susan Saint-Rossy
Sharon Covington	Francine Schwartz
Athena Gavaris	Meg Simmons
Janine N Harrigan	Rhoda Spindel
Rachel Hayden	Nancy Wachtenheim
Judith Heffner	Chantay White
Alisa Lewis	Andrea Yudell
Denise Perme	M.Saida Agostini

Graduate

M.Saida Agostini	Shikha Manandhar
Steve Asher	Kathleen Pearce
Allison Beck	McGowan
Kimberly Feldman	Joana Tasi

Student

Eryn Clawson	Tara Lubin
Megan Fitch	Carla Marin
Jacqueline Fonseca	Christina Moynihan
Grace Gray	Robin Pollock
Kate Grisard	Jessica Rider Amin
Dena Hart	Sonia Roschelli
Madeline Hotz	Gail Savoie
Sharon Kenthack	Carrie Shepard
Emily Leiner	Bridget Sherry
Jennifer Loken	Teresa Zegarelli

VOTE for the Board of Directors 2013–2014

The Nominating Committee of GWSCSW is proud to present the nominees for the slate of officers for 2013-2014. It is important that the membership votes to indicate their approval for the proposed slate. Results will be announced shortly thereafter and the new Board will formally be installed on June 21 at the Annual Meeting & Dinner.

Vote by June 20

To Vote Aye on the Slate

Cast an “aye” vote for the slate on our website (www.gwscsw.org) by logging in—only members can vote!—and clicking on “About GWSCSW” then click on “Vote.”

Or mail this ballot to Susan Post, 3502 Turner Lane, Chevy Chase MD 20815.

To Vote Nay on the Slate or to Write In a Vote

To vote “Nay” to all or part of the ballot or to write in a candidate, mail your vote to Susan Post, 3502 Turner Lane, Chevy Chase MD 20815.

Please address any questions to Susan Post or Sydney Frymire, co-chairs of the Nominating committee, at leadership@gwscsw.org. ❖

☐ **Kate Rossier, President**

Kate received her MSW from VCU, where she later served as a Faculty Field Liaison. She is currently in private practice and has advanced training in Emotionally Focused Couples Therapy as well as a trauma certificate from the Institute for Advanced Psychotherapy Training and Education. Kate is finishing her first year as president.

☐ **Marie Choppin, Vice President**

Marie obtained her MSW from UMD. She worked as a middle and high school counselor and for CPC Health and Kensington/Wheaton Youth Services. Marie is a Certified EFT and the owner/director of Counseling For Contentment, a couple and family therapy practice in Silver Spring and Bethesda.

☐ **Irene Walton, Secretary**

Irene has an MSW and an MA in Art Therapy. She worked for many years as an art therapist and also helped develop women’s and post-trauma programs. She currently has a private practice in Silver Spring and Bethesda and sees individuals and couples for psychotherapy, post-trauma treatment, and sex therapy.

☐ **Hani Miletski, Treasurer**

A graduate of CUA who also holds a PhD in sexuality, Hani is an AASECT certified sex therapist and supervisor in private practice in Bethesda. The author of two books and various articles and book chapters, Hani has lectured and trained other professionals in the field of sexuality around the world.

☐ **Margot Aronson, Director for Legislation/Advocacy**

Margot began social work practice as a child protection investigator, was a therapist for adolescent girls in residential treatment, and is now in private practice in DC. She has served the society as president, newsletter editor and VP for Legislation/Advocacy.

☐ **Juleen Hoyer, Director for Development**

Juleen obtained her MSW from CUA and has worked in inpatient, outpatient, and residential programs. She is currently at an agency working with survivors of trauma. In her leadership role at GWSCSW, Juleen is focused on opportunities for early career social workers as well as social media.

☐ **Lisa Snipper, Director for Communications**

Lisa received her MSW from CUA. She has worked in a psychiatric hospital, a residential treatment center, and Fairfax Public Schools. She owns a group practice in Reston and specializes in depression, anxiety and parenting issues. Lisa has advanced training in Imago therapy and trauma treatment.

☐ **Louise Dugan Weaver, Director at Large**

Louise was in private practice in Bethesda for 25 years and also worked in the Montgomery County Public Schools. Currently she practices in Annapolis and serves as adjunct professor of psychology at Anne Arundel Community College. Louise served on the board of the MSCSW in continuing education and as secretary.

☐ **Gilbert Bliss, Director at Large**

Gil is a psychotherapist in private practice in Lutherville, Maryland. He has experience in casework in the Maryland Division of Corrections and as a medical social worker and bereavement coordinator for a hospice agency. Gil has been working to develop opportunities for networking and workshops in the Baltimore area.

COMMITTEE REPORTS

Continuing Education

Terry Ullman, DC/MD
cechairperson@gwscsw.org
301-854-1121

Lisa Snipper, Virginia
vpeducation@gwscsw.org
571-230-2349

Marie Caterini Choppin, DC/MD
vpdevelopment@gwscsw.org
301-625-9102

The Continuing Education committee has been very busy reviewing and scheduling programs for 2013-2014. We are excited about these offerings, with a total of 14 programs to be held at four locations in Virginia, Maryland, and Washington, DC.

The CE committee in Maryland continues to grow. Barbara Kane, Adele Natter and Louise Weaver have all joined the committee. Despite our growth, we have not been able to identify anyone who will chair or co-chair the committee. Please consider this exciting and interesting position. If you need more information about this role, you are welcome to call Terry Ullman (301) 854-1121 or Marie Choppin, (301) 652-9102. We are also in need of volunteers to manage programs in Virginia.

The CE committee is currently reviewing our criteria for the selection of CE programs in the future to maximize participation and insure that we are meeting the needs of our membership. We have been relying heavily on the information we obtained from the survey many of you completed in the fall. We are also developing a written list of CE committee responsibilities with timelines, to help guide the committee in the future.

Leadership/Nominating

Sydney Frymire, Co-Chair
leadership@gwscsw.org
301-233-7612

Susan Post, Co-Chair
leadership@gwscsw.org
301-652-5699

Our event with Sharon Hadary was a big success. Her presentation included practical how-to advice to enable members to enhance our inherent leadership strengths. One of the points she made is our need to encourage each other to step out of our comfort zones.

During the workshop, one of the participants talked about being really nervous about meeting with politicians. Sharon replied, "We need to get used to feeling uncomfortable." Sharon urged us to reach out and encourage each other to get experience in leadership positions.

Becoming more involved with our clinical society is a great way to learn new skills and practice. One of our most experienced members told me, "I found my voice in our clinical society." She spoke for many of us. It has been heartening to all of us on the board to experience the support and encouragement from each other to succeed in our positions. Many of us experience more success in our practices and in other endeavors. It is an honor to serve our clinical society members and promote our profession.

We are happy to report that more members are becoming involved in various ways. More are getting involved on committees, pitching in to help for events and hosting wine and cheese events. As a result

of the board reaching out, we have a new treasurer, Hani Miletski. Erica Sewell, one of our graduate committee members, offered to coordinate the University of Maryland Scholarship Committee and be on the Finance Committee. Deborah Horan will become a co-chair of the Continuing Education Committee.

Our next event is a wine and cheese event, scheduled for September 29, from 3:00 - 5:30 p.m. We are planning to continue our conversations about leadership development at that time. If you know of anyone who would like to speak to our group informally, please let us know. Hope to see you there!

Legislation & Advocacy

Margot Aronson, Chair
VPLegislation@gwscsw.org
202-966-7749

This is the time of year when our legislative committee breathes a collective sigh of relief. Intense legislative sessions in two of our jurisdictions are over for the year, and we have time to reflect.

In Virginia, we're talking with our partners in the Virginia Clinical Social Work Society about a summer get-together in Culpeper to strategize for next January's session. Dolores Paulson and Judy Ratliff have been more than just the backbone of our Virginia committee; they've been the committee, representing us with vigor and skill. Hopefully, others of you Virginians will want to join them. The Virginia legislature will require our increased attention next year and, besides, Culpepper is beautiful in the summer!

Our Maryland committee is looking forward to a report on Health Disparities in Maryland by Kendra Brown, legislative MSW intern from Howard University, at the Annapolis Yacht Club. There will be a celebratory luncheon following her presentation. Judy Gallant chairs the group; Gwen Pla, Linda Friskey, MaryAn Blotzer, Janice Berry Edwards, Eileen Dombo and Susan Gibbons all made significant contributions as we worked with our lobbyist Alice Neily Mutch, the Maryland Mental Health Coalition, and various legislators in support of (or opposition to) the many bills relevant to mental health and clinical social work.

Health care reform efforts continue in the District of Columbia, where the Council meets throughout the year. Mary Lee Stein, Gwen Melnick, Christine Jackson, and Susan Lesser have been representing us in the community health association coalition and in the official "Network Adequacy" Workgroup for the Health Benefits Exchange; and Gina Sangster keeps up with Child & Family Services initiatives. That work continues, and it has been gratifying to be sought-after for our input as the District shapes its Affordable Care Act program.

Good groups, all! Isn't it time for you to get involved?

Membership

Sue Stevens, Co-Chair
membership@gwscsw.org
301-984-1325

Nancy Harrington, Co-Chair
membership@gwscsw.org
703-608-0180

We are swinging into full action this spring with two of our signature events: the university visits,

and the Bagel Brunch to welcome new members.

As part of the work of the Membership Committee, we have sent volunteers to each of the local universities to help us stay connected to the students and faculty. On April 8, GWSCSW members Martin Schnuit and Sara Feldman (graduates from the University of Maryland School of Social Work) set up a table at the University of Maryland at Baltimore School of Social Work to introduce current students to GWSCSW. Sara reports, "Around 20 students stopped by the table, and about 25% of them were non-clinical students. A few esteemed professors also stopped by the table including Dr. Geoffrey Greif, Dr. Kathleen Deal, and Dr. Jesse Harris. We would like to give a special thank you to Dean Lucia Rusty for hosting us at the school. The students seemed especially interested in the free membership for students, the listserv, and the mentoring program/networking opportunities."

Beverly Magida will attend the George Mason University School of Social Work Advisory Committee as our representative. Bev has been building relationships with the GMU community for several years and has done a wonderful job of introducing the Society to the graduate MSW students.

Debra Turket and Kathleen Pearce attended the Catholic University/Howard University Career Fair on April 5. Debra reported that she was impressed by the students, especially some of the younger ones who introduced themselves. She said "it seems our listserv has an excellent reputation, and students knew about it before they even knew about GWSCSW."

We are also giving a complimentary copy of News and Views to two faculty members from each university. Thanks so much to our generous volunteers for helping foster our relationships with the local universities.

Our motto for the Society has become "Come and bring a friend!" We look forward to getting to know you all better.

Newsletter

Lisa Wilson, Editor
gwscsw.news@gmail.com

The Newsletter Committee is seeking new members! If you've ever thought of a topic you'd like to see explored in the newsletter; would like to use your writing or editing skills in a professional capacity; or would just like to get out and learn what expertise our members have to share; please send a quick email indicating your interest to the editor's inbox: gwscsw.news@gmail.com

Professional Development

Sydney Frymire, Co-Chair
301-233-7612
Karen S. Goldberg, Co-Chair
301-680-9060
professionaldevelopment@gwscsw.org

The Professional Development Committee offered two workshops during the winter months. "Social Work Licensing: DC, MD, VA" was held on February 22. A chart provided in this workshop, comparing state licensing requirements, will soon be posted on the GWSCSW website. Thanks to Ellen Thursby and NCSSS for co-sponsoring the event; to Melissa Grady for acting as moderator; and to Anne Walker

continued on page 26

Committee Reports, from page 25

(MD), Susan Horne-Quatannens (VA), Cathy Gray and Mavis Azariah (DC) for representing the three licensing boards.

The "Social Media Basics" workshop on March 19 offered an informative and stimulating discussion. Appreciation goes to Lori Wark, a professional website developer, for her comprehensive overview.

The Graduate Committee hosted a networking/community event, "Beer & Pretzels" at Flanagan's Harp & Fiddle, on April 12. The event was well attended, by both GWSCSW members and not-yet members! The Grad Committee has also been working on developing an area resource guide. Please contact Juleen Hoyer or Sara Yzaguirre if you are interested in early-career issues and you'd like to get more involved!

Susan Marks leads a support group for members starting a private practice. For information, contact Susan at surobbin@verizon.net or 703-533-9337.

Experienced Society members are still needed to serve as mentors. Newer social workers can arrange one to one guidance to address career concerns. Additional infor-

mation is found on the Professional Resources tab of the GWSCSW website or by contacting Sheila Rowny at srowny@aol.com.

As always, our committee welcomes feedback and suggestions. Anyone interested in joining can contact Sydney or Karen.

Social Media Committee

Juleen Hoyer, Chair
socialmedia@gwscsw.org
610-223-1298

The Social Media Committee has been working hard on the continuing development of GWSCSW's Facebook page. We encourage you to "like" the page, if you haven't already! Please consider commenting or posting any interest-

ing articles/links on the page. Many of you have expressed interest in another Social Media Basics workshop. Please contact us if you have any interest in helping to plan this event, or if you would like to help in any other aspect of social media. ❖

Volunteers!

Are you interested in being part of the Society but 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, give us a call.

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



To "Like" the GWSCSW Facebook Page

1. Log into your own personal or professional Facebook page (you must have a Facebook account in order to view our page)
2. Type "Greater Washington Society for Clinical Social Work" in the Facebook search window
3. Click on "Greater Washington Society for Clinical Social Work" in the drop down box
4. Click on the "Like" button (top right, underneath the GWSCSW logo)

News & Views Submission Guidelines

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

Articles – Focus on your area of expertise and 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 – Share 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

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 Minimum price \$15 (20 words)	Display Ads: Full page 7 x 9¼\$300 Quarter page 3½ x 4½\$100 Eighth page 3½ x 2¼\$ 50	Half page \$175 Horizontal: 7 wide x 4½ high 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

ELLICOTT CITY – Offices available in a very congenial, multi-disciplinary professional environment. Furnished, soundproofed offices available on a daily/monthly basis. Includes workroom (copier, fax), kitchen, handicap access, parking and private staff bath. Convenient to Routes 40, 70, 29, and 695. Contact Dr. Mike Boyle: 410-465-2500.

FALLS CHURCH, VA./TYSONS CORNER – Full or part-time offices available, shared waiting room, mail room, filing cabinet space, pleasant and collegial atmosphere with other mental health professionals, (MD, PhD, LCSW). Near I-66 and Beltway. Contact Allan Melmed, MD at 703-356-5888x1 or amelmed01@yahoo.com.

FARRAGUT SQUARE – Office space available 2–3 days a week very reasonable rent \$400 to \$600 Call Adrian 202-441-0551.

FOGGY BOTTOM – Spacious office within interdisciplinary psychotherapy practices suite, shared waiting room, amenities. Available immediately. Three Washington Circle, NW. Call 202-833-1682.

SILVER SPRING – Psychology practice, inside office sublet, approximately 9'x 12'. Five minute walk from Metro, two blocks from restaurants, shops. Public garage across the street. Full-time unfurnished \$500/month, furnished \$600/month. Includes waiting area, Wi-Fi, fax access, kitchenette, secure evening access. Contact Constance Cannon, 301-343-8654 or cannoniric@aol.com.

SILVER SPRING/WHEATON – Attractive part-time office for rent with large window. Near Beltway. Telephone, fax, copier, internet. Free parking. Accessible anytime. Rent based on use, starts at \$230. See pictures at www.sharedoffice4rent.com. 301-588-5800.

TYSONS – Perfect location, inside beltway on Rt 7, between 495 and 66. Floor to ceiling windowed office available full time. Additional furnished space available by the day or hour. Plenty of free parking. 703-790-0786.

WOODLEY PARK/ZOO – Extremely spacious, bright office, 320 SF (great for groups, lots closet storage). Available part time (e.g., \$8–20/hr, \$420/mo for 8 hrs, \$780/mo for 20 hrs), hourly, daily or more. Renovated, well-appointed psychotherapy suite. Furnished (but open to your furnishings). Waiting room, bathroom, utilities, WiFi included. Pictures and rate sheets available. Contact Lynn Hamerling, 202-722-1507, lynnhamerling@gmail.com.

WOODLEY PARK/ZOO – Sunny, attractive, comfortable, smaller office, 130 SF (good for individual/couples therapy and writing). Available part time. \$5–11/hr, depending on number of hours: \$275/month for 8 hours, \$315/month for 10 hours, \$415/month for 15 hours. Renovated, well-appointed psychotherapy suite. Pictures and rate sheets available. Contact Lynn Hamerling, 202-722-1507, lynnhamerling@gmail.com.

POSITIONS

PRIVATE PRACTICE – Established group of seven seasoned therapists including an in house psychiatrist, seeks a new member for half to full time private practice in Old Town Alexandria. Collaborative group of independent practitioners. Call Deborah Asher Hertzberg at (703) 683-1399 or send resume to dahertz1@gmail.com.

SERVICES

ADOLESCENT THERAPY – Effective high quality evidence-based and relationship-based treatments for adolescents. Rathbone & Associates. www.rathbone.info. Rockville and Bethesda. 301-229-9490.

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.

TRAINING

NEW PARADIGM CLINICAL PRACTICE – A model for integrating the mind & heart that incorporates quantum physics, human consciousness research, and wisdom traditions, as they relate to facilitating deep learning and change. Beginning in the fall for four, two-hour sessions. Dates and times to be determined by group members. Cost: \$250. For more information please contact Marilyn Stickle, 703-533-1038, ms@marilynstickle.com.

GROUPS

BULIMIA, BINGE EATING AND BODY IMAGE – Group in progress, Thursdays, 6:00–7:15 pm, Friendship Heights, \$65 per session. Judith.asner@verizon.net, 301-654-3211.

The new directories have been mailed and you should have received yours.

Please check your information and you have moved or changed your phone number, **log into your account at www.gwscsw.org** and **update your Contact Info, Offices and Profile** so your contact information will be correct!

Even if you do not participate in the free Therapist Finder accessible by the public, be sure to **update your Profile** so that your practice information will be available to fellow GWSCSW members (members-only access) on the **GWS Directory tab**.



PO Box 3235
Oakton VA 22124

CHANGE SERVICE REQUESTED

PRSR-TSTD
U.S. POSTAGE
PAID
Permit No. 6559
Fairfax VA

**Greater Washington Society**
for **Clinical Social Work**
Education • Advocacy • Community

This year we'll trust the potluck gods for a balance of dishes – so surprise us and bring what you like to make (entrées are always appreciated) or bring a bottle or two of wine if you don't want to cook. But please RSVP as soon as possible because we need to know how many chairs to rent!

RSVP by June 15 at our website
www.gwscsw.org > Community

NEW MEMBERS! THIS IS A GREAT OPPORTUNITY TO MEET AND NETWORK WITH GWSCSW MEMBERS. WE HOPE TO SEE YOU THERE!

Annual Meeting... Party & Dinner Friday, June 21

It's a Potluck Dinner!
Please bring one of the following to share:

- Appetizer
- Entrée
- Side / Salad
- Dessert
- Wine

Door Prizes!

6:30 Cocktails • 7:30 Dinner • 8:30 Meeting

At the home of Janet Dante:
5207 Hampden Lane | Bethesda, Maryland