The State of the Society 2016

By Shannon Boyle, LCSW, President

The past year has been very busy for all the Society members that volunteer to keep this organization moving forward. I would like to take this opportunity to recognize the hardworking individuals who have served on the State Board as elected Board Members, Chapter Presidents and State Committee Chairs. Their contributions of time and expertise make it possible for this society to function successfully.

We currently have a total membership of 1,600. This includes seasoned Licensed Clinical Social Workers, Licensed Master Social Workers engaged in the necessary steps to become LCSWs, Master Level Social Workers and students of social work programs anxious to enter the field. All are crucial to the success of our Society as well as the overall success of the field of clinical social work.

As discussed during our Annual Membership Meeting on October 15, a good deal has been accomplished this year. I assumed the role of

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FOUR NEW DIPLOMATES HONORED

At the 2016 Annual Meeting, four new Diplomates were honored for outstanding contributions to the profession and the Society. They are, l to r, Martin Lowery, LCSW-R; Dore Sheppard, Ph.D., LCSW; Susan A. Klett, Psy.D., LCSW-R, BCD; and Karen Kaufman, Ph.D., LCSW.

BIOS ON PAGE 16

Photo: Ivy Miller
## 2017 NYSSCSW BOARD OF DIRECTORS

### STATE EXECUTIVE COMMITTEE

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### CHAPTER PRESIDENTS (P) & VOTING REPS (VR)

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### The Advanced Clinical Education Foundation of the NYSSCSW

#### 2017 ACE FOUNDATION BOARD AND OFFICERS

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**NYSSCSW Headquarters**

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President on the first of the year, beginning the newly adjusted three-year term. The transition from outgoing President Marsha Wineburgh was smooth, ensuring the successful continuation of the work of the Society.

In the early months of 2016, remaining elections for chapter presidents were held, so that we are in full compliance with New York State regulations. In March, we held the 47th Annual Education Conference, a great success with almost 180 attendees and a wonderful keynote speaker secured by our ACE Foundation Director of Professional Development Susan Klett.

We continue to enhance our member benefits. The opportunity to participate in more than one chapter listserv has been positively received, particularly by the many members who live and practice in more than one geographic area. However, we have learned over the past two years that with this expansion comes challenges of negotiating the distinctive personalities and functioning of the various listservs. Thus, we have reconstituted our State Listserv Committee to focus specifically on policy and procedural issues that have arisen. We have encouraged representation on the committee from all chapters to ensure successful navigation of these needs. This committee is also considering new ways to support our members including promotional options of professional endeavors, such as book publications and speaking engagements, on our website.

Our other state committees have continued to work hard to meet the needs of members. In this edition of the newsletter, you can read detailed updates from committee chairpersons to learn more about their efforts on behalf of you, our members.

We have also been working toward trademarking both our Society name and logo. After almost 50 years, we have decided to make things official!

The ACE Foundation, the 501(C)3 nonprofit organization established to provide high quality education programs for all social workers in New York State, has been a tremendous success. Since January 1, ACE has sponsored programs offering more than 100 Continuing Education contact hours, with another 24 contact hours offered before the end of the year. These programs are 100 Continuing Education contact hours, with another 24 continuing education courses throughout the United States. ACE is also applying to become a provider of courses to the other disciplines of mental health professionals.

To date, we have had 75 courses approved on a wide range of subjects and for different levels of practice. Chapter presidents and committee chairs are encouraged to invite the presenters of approved programs to their chapters; approval from the state is good for three years. This will extend the programs to larger audiences, who will be able to enjoy high-quality presentations and receive necessary credit toward license renewal.

In the interest of continued growth, we are exploring the process of streaming courses online, along with other ways to market ACE programs to expand the reach of our continuing education opportunities to clinicians nationwide.

Check the link to the ACE Foundation on the NYSSCSW website to find courses of interest to the members of your chapter. You can contact any of our Board members for more information and Susan Klett, Director of Professional Development, with ideas for future proposals.

Shannon Boyle, LCSW

Shannon Boyle, LCSW
The sudden increase in deductibles for both in-network and out-of-network patients has created a troubling intrusion into the treatment relationship and threatens to interrupt the flow of regular psychotherapy sessions.

The increased deductibles are coincidental with changes brought by the Affordable Care Act, but are not a direct outcome of them. They stem from a business decision made by insurance companies to shift costs to consumers as a means of managing their own bottom lines.

According to an analysis by the Kaiser Family Foundation released in September, employer-sponsored plans have deductibles that are about 50 percent higher than they were five years ago. Four out of five covered employees pay a deductible that averages about $1,500 each. Employees who get insurance through smaller companies have deductibles that now average $2,100. Individual plans offered by the healthcare exchanges have even higher deductibles.

An article in the New York Times by Margot Sanger-Katz on February 5, 2016 states that deductibles have been creeping up in the U.S. since the late 1990s. “People tend to hate these features, but they were not devised to be cruel. Rather they were fashioned with economic theory in mind,” she wrote. She went on to explain that deductibles and copayments are designed to make patients hesitate before spending, and appear to have had a role in the recent slowdown in the growth of health spending in the U.S.

But a substantial portion of Americans who are struggling with medical bills are left with tough choices about how to cut thousands of dollars from their household budgets to pay for healthcare.

**Interruptions in Treatment**
NYSSCSW members who responded to our Questionnaire on Managed Care in January 2016 mentioned finding deductibles as high as $10,000, but said that typically they fall between $1,000 and $5,000. Respondents described several ways that deductibles can interrupt treatment. For example, faced with a larger bill at the start of the new year, patients may decide to suspend treatment, or ask to come less frequently. One therapist anticipated that half of her clients would pull away from receiving services in the new year.

Some patients want to meet their deductibles through other medical visits first, and they will delay returning to therapy in the new year. In some cases, the year ran out before the deductible amount was reached.

There have been abrupt terminations when a debt was incurred and, feeling unable to pay the debt, the patient did not return to therapy. The deductible amount made treatment costs prohibitive.

“\[The months of November and December are typically the period of re-enrollment, and a good time to think about the patient’s coverage and how it may affect the continuity of the therapy.\]

Clinicians also should note that a change of job by the patient or the patient’s spouse can cause the sudden imposition of a second deductible in the same year. Patients have experienced this as “harassment” or felt “blindsided.” As a solution, in some cases the therapist has negotiated a sliding scale fee and skipped filing at all with the insurance company.

**Explaining Deductibles**
As January approaches, therapists need to be alert to this issue and explore their patients’ understanding of how the deductible works: the patient will need to pay the full fee, and the therapist will issue a bill or a claim each month for the early sessions of the year. The insurance company will deny these claims until the deductible is met. Note that therapists cannot collect more than the “allowable” in-network rate and should not bill more than they expect to collect for out-of-network patients.

The months of November and December are typically the period of re-enrollment, and a good time to think about the patient’s coverage and how it may affect the continuity of the therapy.

One Society member, Deborah Rubin, LCSW, Ph.D., has suggested a way to educate prospective new patients on how insurance works. It is particularly pertinent for the out-of-network provider. Rubin asks the patient to call the insurance company and find out answers to the following questions:
The Committee continues to follow these issues:

**PQRS:** Medicare is phasing out the Physicians Quality Review System as of December 31, 2016, to be replaced in 2017 by a similar system called MIPS (Merit-Based Incentive Payment System). The requirements for MIPS are delayed and may not be available until July 2017.

**Audits by Insurers:** Members need to be aware that, as an outcome of the Affordable Care Act, certain insurers (for example, Aetna) are obligated to audit a small number of clinicians. A federal program has required each health insurance company to review 200 cases a year to assess and balance “risk.”

The concern is that the pool of all beneficiaries in a specific plan will be skewed toward the sicker members, making the plan financially unworkable. These reviews are not designed to evaluate quality of treatment, but to determine the various diagnoses being treated.

Please note that although our members dread audits, the incidence of audits seems to be rare for private practitioners.

**Video Counseling and Phone Sessions:** Payment by insurers for phone sessions was required by New York State law in 2014, but as a practical matter, the change mainly affects clients in rural areas where access to mental health treatment is poor.

The Committee continues to discuss video counseling, which is not covered by insurance and which presents many thorny issues (HIPAA compliance, privacy concerns, practicing out of state). The Committee will continue to track all the ways clinical social work practice is affected by the Internet.

**Record-keeping:** On September 24, the Committee and the ACE Foundation sponsored a two-hour presentation by Bruce V. Hillowe, J.D., Ph.D., entitled “Standards for Record-Keeping, Professional Wills and Termination of Treatment Generally.” Dr. Hillowe spoke to a crowded room of clinicians wanting to know what to put in a proper record, how to anticipate interruption or end of practice, and how to deal with complicated termination scenarios.

**ICD-10-CM Update:** As a follow-up to a restructuring of diagnostic codes under ICD-10-CM one year ago, some changes in codes went into use on October 1, 2016. For example, there are updates for Obsessive Compulsive Disorder, Binge-Eating Disorder and Gender Dysphoria in Adolescents and Adults. Many changes involve adding one more digit to an existing code. The American Psychiatric Association has provided a list of these updates for mental health practitioners.

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The Vendorship and Managed Care Committee consists of 13 members from the different NYSSCSW Chapters who meet primarily by teleconference about seven times a year, and also communicate by email. They track developments in the health insurance industry which affect clinicians. If you have unanswered questions, you are invited to contact us by going to our website at [www.nysscsw.org/vendorship-and-managed-care-committee](http://www.nysscsw.org/vendorship-and-managed-care-committee).

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**High Deductibles, continued from page 4**

- Does my insurance pay for out-of-network mental/behavioral health benefits?
- If yes, what is the yearly deductible?
- What is the “usual and customary” amount allowed for CPT code 90834 in my therapist’s zip code?
- What percentage of the “usual and customary” amount will the insurance cover, after the deductible is met?

Rubin noted, “This sometimes involves putting off setting a permanent fee until the information comes in, and being willing to work with the patient based on what is learned.” This may mean only accepting patients under these uncertain conditions for less “valuable” times, such as non-evening hours.

“If this kind of uncertainty is not comfortable for both therapist and patient,” she said, “I think it better to proceed in a different way, either referring the patient out, or setting a clear fee with a clear understanding that the patient is responsible for whatever part of the fee the insurance does not cover.”

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Licensing Exemptions Continue: Earlier this year, the Governor’s budget for 2016 extended the licensing exemptions for state agencies hiring social workers (both LMSWs and LCSWs) for an additional six years. After negotiating with the Clinical Society and NASW lobbyists, the extension was reduced to two years (until 2018), making a total exemption period of 16 years since the passage of our original licensing laws in 2002.

There was a caveat accompanying the reduction to two years: state agencies and stakeholders must come to an agreement before December 2016 to finally resolve the exemption issue.

On June 1, the state agencies, except for the Department of Health, produced a 14-page draft justification for new legislation which essentially gutted the LMSW scope of practice. The document recommended two solutions: the first and most troublesome, that non-licensed people be hired to deliver services in agencies dealing with child welfare, homeless services, refugee and domestic violence services, corrections, and the like.

There was no mention of licensed supervision, or who would develop and oversee any service plan, usually LMSW and/or LCSW functions. Instead, they advocated a treatment team approach, that had one or two licensed members. Unfortunately, we know from experience that these teams spend about five minutes per client per year, unless the client is problematic in some way. The quality of individualized assistance is usually compromised, because there is not enough oversight of services delivered by staff with limited training and experience.

The second solution in the document was agreeable to the stakeholders: that “anyone providing a diagnosis must be licensed to do so.” If you read the scope of practice for the LMSW and then the description of what functions are exempt from the license, you will see that the authors of this section of the legislation have created part of the problem.

From an agency’s perspective, it is more economical to hire non-licensed people, give them a few weeks of training, and turn them loose to assist as best they can. This kind of staffing creates high turnover and burn out, since the client population requires a hierarchy of services, and levels of motivation for self-help vary widely. Licensed supervision is needed, as well as a thoughtful prioritized service plan reflecting the reality of available services. This is something that can be done by an LMSW or LCSW, but it would require that higher salaries be paid.

Because of the suggested dilution of the LMSW scope of practice, the NYSSCSW, the Deans Association and both NASWs agreed to the 2-year extension, and spent the summer writing a comprehensive report to address the limitations of the agency draft. After extensive consultation with social workers employed by most of the agencies involved, the outcome was to recommend review of service plans by licensed staff and licensed supervision of service delivery. Whether the state agencies will integrate our suggestions is not known. Discussions are to be held this fall.

Heroin and Opioid Addiction Task Force: Governor Cuomo announced recommendations from this task force: “To expand the universe of professionals who can legally administer naloxone during emergencies, the task force recommends that the state permit all professionals licensed under title 8 of the Education Law who receive appropriate training through the Opioid Overdose Prevention Program to administer life-saving naloxone without risk of losing their license.” Currently, the licenses for LMSW and LCSW prohibit us from administering drug therapy.

Health Parity Act S.7988: This bill will hold insurers and the behavioral health companies accountable for the services they are overseeing. It will require them to report on the number of claims denied, caps on sessions, and the like as per Timothy’s Law. A work group was promised, but not yet been created, to advise the bill writers on needed changes.

NYSSCSW is opposed to AB9938/SB7611, which recommends that guidance counsellors be certified as school mental health counsellors, school MFTs, school psychoanalyst, school creative arts therapists.

Office of Civil Rights (federal) is doing audits of psychologists in California. We are following this as a privacy issue.

Health Republic: There still is no clarity on liquidation except to file your claims, which were sent to all providers of record.
The “R” Privilege is the highest standard for insurance reimbursement for LCSWs in New York. It is a unique and valuable credential. In fact, New York is the only state that provides legal recognition to clinicians with six years or more of supervised psychotherapy experience.

All insurers and behavioral health companies set their own standards for approving reimbursable clinicians, and they are free to choose LCSW or LCSW-R. However, the higher standard for experience, the LCSW-R, suggests better clinical outcomes.

In addition, LCSW-Rs comprise a smaller group. In choosing them, insurers limit the number of providers they must oversee, making the administration of services more manageable.

**REQUIREMENTS FOR THE “R” PRIVILEGE:**

YOU MUST BE AN LCSW AND COMPLETE 36 MONTHS AND 2,400 HOURS OF POST-LCSW SUPERVISED DIRECT CLIENT EXPERIENCE IN DIAGNOSIS, PSYCHOTHERAPY AND ASSESSMENT-BASED TREATMENT PLANNING IN AN AUTHORIZED SETTING.

**EXPERIENCE:**

- NO LESS THAN 36 MONTHS AND 2,400 HOURS IF FULL-TIME.
- NO LESS THAN 400 FACE-TO-FACE SESSIONS IN ANY 12-MONTH PERIOD.
- CLIENT CONTACT MUST BE DOCUMENTED.
- A DIRECT CONTACT HOUR EQUALS 45 MINUTES OF PSYCHOTHERAPY WITH INDIVIDUALS, FAMILIES AND GROUPS. SESSIONS MAY BE COMBINED.

**SUPERVISION:**

- SUPERVISOR MUST BE AN LCSW-R, PSYCHOLOGIST OR PSYCHIATRIST LICENSED IN NYS.
- SUPERVISION MUST BE INDIVIDUAL OR GROUP (NO PEER SUPERVISION) FOR A MINIMUM OF 2 HOURS/MONTH. PRIVATE SUPERVISION IS ACCEPTABLE, BUT YOU ARE RESPONSIBLE FOR NOTIFYING THE PATIENT THAT YOU WILL SHARE CONFIDENTIAL INFORMATION WITH A THIRD-PARTY. (SEE INFORMED CONSENT ON OP WEB SITE.)

**SETTING:**

- LEGALLY AUTHORIZED TO PROVIDE PSYCHOTHERAPY SERVICES (INCLUDING PRIVATE PRACTICE).

**FOR DETAILS AND FORMS:** [WWW.OP.NYSED.GOV/PROF/SW/LCSWPRIVILEGE.HTM](http://WWW.OP.NYSED.GOV/PROF/SW/LCSWPRIVILEGE.HTM)

**NYSED, OFFICE OF THE PROFESSIONS, P.O. BOX 22063, ALBANY, NY 12201, 518-474-3817 EXT. 592**

**IMPORTANT: YOU MUST FILE AN APPLICATION AND SUBMIT FORMS BEFORE YOU BEGIN**

**BEFORE YOU BEGIN YOUR HOURS OF SUPERVISED EXPERIENCE:**

- FILE AN APPLICATION AND FEE: SEND NOTARIZED FORM 1SWPR AND A CHECK FOR $100 FEE TO THE OFFICE OF THE PROFESSIONS.
- WITH YOUR SUPERVISOR, SUBMIT PLAN FOR SUPERVISED EXPERIENCE: SEND YOUR SUPERVISOR FORM 6SWPR WITH APPENDIX A. YOUR SUPERVISOR MUST COMPLETE AND SEND IT TO THE OFFICE OF THE PROFESSIONS.

**AFTER COMPLETION OF YOUR SUPERVISED EXPERIENCE:**

- YOUR SUPERVISOR MUST SUBMIT FORM 4SWPR WITH REQUESTED INFORMATION; THE SUPERVISOR RETAINS THE PSYCHOTHERAPY LOG IN THE EVENT THERE ARE QUESTIONS.

**APPROVAL:** NYSED WILL REVIEW YOUR EDUCATION, EXPERIENCE AND APPLICATION AND NOTIFY YOU.
Attachment theory reminds us that relationships are essential for optimal development and a healthy balanced life. Unfortunately, our popular culture does not help us much with the challenge of meaningful relationships. Movies, novels, soap operas, “reality” TV shows, and technology often serve as distractions from the importance of deep intimacy, reinforcing the fantasy that connectedness is easily achieved; just a “click” away.

Two fundamental disorders of our time are the fear of loneliness and the fear of growing up. The flight from loneliness propels us to the promise of “the great palliative cure-all” — SEARCH, FIND, AND SECURE THE ONE WHO WILL MAKE OUR LIFE WORK — be it spouse, partner, parent, child or therapist. Or what Jungian James Hollis refers to as “THE MAGICAL OTHER” — the “one who will truly understand us, take care of us, meet our needs, repair our wounds,” and heal our history.

If these desires represent the hidden agenda behind many of our relationships, how then can we achieve true mature love based on reciprocity and a deep knowing, one with the other? In this conference, we will explore the dynamics of intimate relationship in varying configurations: between parent and child, within the analytic dyad, and among couples that, paradoxically, brings us face to face with ourselves. Or to paraphrase a depth psychology construct, when we are able to bring the mystery that we are and engage with the mystery of another, we embark on a journey that enlarges and is transformative for both Self and Other.

PRESENTATIONS

Psychotherapy and Relationship: The Art of Intimate Connection

NANCY MCWILLIAMS, Ph.D., ABPP teaches at Rutgers University’s Graduate School of Applied & Professional Psychology. She is author of Psychoanalytic Diagnosis (1994; rev. ed. 2011), Psychoanalytic Case Formulation (1999), and Psychoanalytic Psychotherapy (2004). She is Associate Editor of the Psychodynamic Diagnostic Manual (2006; rev. ed. due 2016); and former president of the Division of Psychoanalysis (39) of the APA.

From Self Protection to Relational Protectiveness: The Modification of Defensive Structures

RICHARD A. GEIST, Ed. D. was on the faculty of Harvard Medical School for 35 years. He is a Founding Member of both MAPP and Massachusetts Institute for Psychoanalysis. He is a faculty member, supervising analyst, and former Board member of MIP. Dr. Geist is on the Executive Board of the International Association of Psychoanalytic Self Psychology and is an associate editor for the International Journal of Psychoanalytic Self Psychology.

True Love Ways: Psychoanalysis and Mindfulness in Dialogue Therapy for Couples

POLLY YOUNG-EISENDRATH, Ph.D. is a Jungian analyst, psychologist, and clinical supervisor at Norwich University in Vermont and a Clinical Associate Professor of Psychiatry at the University of Vermont. She is also in private practice in central Vermont. She is the chairperson of the non-profit, Enlightening Conversations: Buddhism and Psychoanalysis Meeting in Person, that hosts conferences in cities around the country. She has published 15 books, many articles and contributed chapters to several books. Her most recent book is The Present Heart: A Memoir of Love, Loss and Discovery (Rodale, 2014)

Conference Chair: Susan A. Klett, Psy.D., LCSW-R, BCD
Committee: Louise DeCosta, Ph.D., LCSW; Marie McHugh, LCSW; Marsha L. Wineburgh, DSW, LCSW
ADDRESSING THE NEEDS OF NEW CLINICIANS:
New Professionals Task Force
By Lauren Shah, LCSW, Chair

The New Professionals Task Force, a subcommittee of the State Membership Committee, was developed to give new professionals in the Society a voice to ensure that key programs essential to their needs are offered by the NYSSCSW.

The group, which has been meeting since 2015, was formed under the leadership of Richard Joelson, DSW, LCSW, who chairs the State and Met Chapter membership committees. The goal of the Task Force is to increase the participation of newer clinicians in the Society by building on the current dynamic membership and by understanding the thoughts and professional needs of the next generation of social workers.

In the past year we have addressed issues such as:
- Increasing networking opportunities for students and recent graduates
- Providing workshops on issues such as licensure
- Increasing knowledge of postgraduate training opportunities
- Providing workshops led by seasoned clinicians on clinical concerns and specialties.

In our meetings, the Task Force has formulated constructive solutions to questions that were presented to the State Committee and approved for implementation, specifically within the Metropolitan Chapter, through events such as Happy Hour Networking and an LMSW Licensing Event for graduate students.

The Task Force looks to increase the value of the Society for all state members. Our membership group is constantly evolving and growing. New Professionals include current students, newly licensed LMSWs and LCSWs, regardless of age or chapter affiliation. All chapter members are welcomed.

The Task Force meets three to four times a year in New York City, but we have periodic conference calls so that all members can participate regardless of their location. Our next meeting is scheduled for Thursday, November 3, at 6:30 p.m. in Manhattan.

If you are interested in being a member of this group, or would like more information, please contact Lauren Shah, LCSW, Chair, at laurenashah@gmail.com.

Lauren Shah, LCSW is a clinical social worker at New York University, supporting the student population within the Student Health Center. She graduated from Columbia School of Social Work in 2009 and did post graduate training at the Center for the Study of Anorexia and Bulimia from 2013 to 2015.

Headquarters Update

THE SIGNS OF FALL are everywhere. The weather is cooler, the leaves more spectacular, and the calendar is quickly filling up with Society events. So many new and interesting programs, courses, and special events are scheduled. It’s going to be an exciting season.

On October 15, the NYSSCSW 47th General Membership Meeting was welcomed to order by President Shannon Boyle, who delivered the State of the Society address. In addition, four outstanding clinicians achieved Diplomate status (see article in this issue), and the Editor of The Clinician, Ivy Miller, was recognized for over 20 years of professional service.

A presentation by Brian Quinn, LCSW, Ph.D. titled, “Depressed, Borderline or Bipolar,” followed the membership meeting. Co-sponsored with the ACE Foundation, the course provided 2 CE contact hours.

Many new courses are being offered by the ACE Foundation, so be sure to check the website: www.ace-foundation.net. You can also find course listings in Friday E-News each week.

Membership renewal season is upon us. You should have received your renewal materials by now, or you can renew online. We look forward to your continued membership and participation in the Society in 2017.

A note about the TMS staff: Jennifer Wilkes joined our team as Administrative Assistant in early September, taking the place of Rae Anne Sensale, who left for another position. Jennifer is a welcome addition.

It’s not too early to wish you a happy, healthy holiday season and best wishes from all of us at Total Management Solutions.

Kristin Kuenzel, Account Executive
Jennifer Wilkes, Administrative Assistant
800-288-4279
info.nysscsw@gmail.com
A new patient comes to therapy and asks, “What is psychotherapy, anyway?” You could answer by explaining the development of psychic conflicts, repetition compulsions, enactments, projective identification, neurotic transference, and neuroplasticity.

Or you could just hand the patient Richard Joelson’s book, *Help Me!* This book says it all in a clear, concise, wise and witty way!

With his signature style of warmth, compassion and humor, Dr. Joelson—a clinical social worker with 46 years of experience—deconstructs the human condition in a series of 70 short essays divided into four sections: Being, Living, Loving, and Thriving. Using rich examples from his own practice, he shows how people can overcome the personal stumbling blocks that have kept them stuck. This is a holistic guide that addresses improving both interpersonal and intrapersonal relationships through insight + action. Joelson is a strong proponent of the idea that insight alone does not provide change, but must be coupled with concrete, specific strategies for behavioral change and ‘attitude adjustment.’”

In one essay, “Premature Quitting,” Joelson explores how we can distinguish between self-care and giving up, and provides a four-step questionnaire to help readers resolve this issue. In another chapter, the author discusses why we are often our own worst enemies and how some people are committed to “snatching defeat from the jaws of victory.” He describes Jim, who was accepted into a prestigious bank management program, but then avoided studying and began developing headaches. He shows how Alice, a Ph.D. psychology student, neglected her presentations while devoting most of her time to helping other students with their work.

We clinicians often deal with patients who are self-saboteurs, as I recently experienced with one of my patients. * Laura, a disgruntled high school teacher, felt worn out by working with unruly students; she yearned to follow her true passion in the field of environmental conservation.

When she was invited to give a presentation at an ecology center, her work was praised by the director, who offered Laura a job. “Oh, no, I couldn’t!” she responded, “I’m much too loyal to my principal at school.” As Joelson points out, people like Jim, Alice, and Laura work hard to defeat themselves rather than confront their fears of failure were they to challenge themselves in a new venture.

Joelson would encourage them to reflect first on their behavior before reacting destructively and – in the case of Laura – to realize that she had created a praiseworthy excuse (professing loyalty to her principal) to side step her fear and anxiety about a longed-for position. To strategize an alternative to their self-imposed handicaps, he recommends they ask themselves, “If I could do this over again, what would I do differently in order not to sabotage myself?”

Through both a behavioral and a psychodynamic lens, the author explores intriguing topics such as complaining, blaming, forgiving, forgetting, criticizing, fighting, and apologizing. Joelson even discusses the dynamics behind refuting compliments, which particularly struck
home for me when I recently sat in session with Julie, who showed me her photos from her summer trip to Costa Rica. “These are gorgeous! You took such great pictures!” I responded enthusiastically. Julie countered, “No, it’s just that my camera is very good.”

Throughout the book, Joelson reveals how strongly he believes in each person’s capacity to recover, grow, and change at any stage of life. He encourages people to challenge their “personal propaganda” — the lies we tell ourselves about our predicaments that ultimately limit our choices and our lives. And he encourages therapists to help their patients move from an intellectual position of “insight rich and change poor” to a more vibrant, enlivened life.

This book has received praise from the prestigious Kirkus Reviews, which called it, “A debut self-help guide that resists long explanations and jumps directly to solutions for handling relationship problems, anxiety, decision-making, and self-doubt.”

Joelson is a wonderful companion on this journey of hope, healing, and wholeness. He believes that our emotional life is not written in cement during childhood. We get to write each chapter as we go along. Help Me! will help readers write each new chapter and enhance their ability to live, love, and laugh!


“Names and identifying data have been changed for confidentiality.

After a hiatus of almost two years, as promised, we are returning to Eric Kandel’s, The Age of Insight: The Quest to Understand the Unconscious in Art, Mind, and Brain. His thoughts on the beholder’s share will be deepened and enriched during the course of two workshops planned for the spring of 2017.

New to these workshops are the ideas of theorists who address the fledgling field of neuro-aesthetics; the convergence of art, psychology and brain science. Of particular interest to our members is how the arts evoke emotion, and the role of emotion and empathy in treatment. Toward this end, our workshops will reference Kandel’s The Age of Insight, Chapters 4 & 5; handouts will be provided.

Two very well received and attended committee presentations were included in two conferences: the XIX International Forum of Psychoanalysis (May 12–15, 2016) and the International Psychohistory Association (IPA) (June 1–3, 2016), on “The Joy of Being Vulnerable at the Time of Terror: Vulnerability’s Fringe Benefits for Clinical Practice and Creative Process;” “Dreaming the Memories of Our Parents: Understanding Neurobiology of Transgenerational Trauma and the Capacities for Its Healing;” “Scars of War: Perspectives on Trauma, Healing, and Post-traumatic Growth;” and “They Bore Witness: One’s Life through the Looking Glass of Neuropsychiatric Disorder.”

Also, the Committee’s activity brought us to a very enjoyable and informative docent-led visit to the New Whitney Museum of Art in Chelsea for the Stuart Davis September 11 exhibit. Looking ahead, our next museum visit includes Securing the Shadow: Posthumous Portraiture in America at the American Folk Art Museum. This exhibit addresses a theme central to psychoanalytic dialogue, seeing through the lens of memory and loss. We continue to look forward to trips to the numerous city cultural institutions city and to bringing even more energy to the dialogue between creativity and psychoanalysis. Your participation in any or all of our activities is most welcome.

Sandra Indig, LCSW-R/ LP, NCpsyA, ATR-CB Committee Chair Psych4arts@hotmail.com

Inna Rozentsvit, MD, Ph.D. Neuropsychoeducation, Workshop Leader Inna.Rozentsvit@gmail.com

COMMITTEE FOR Creativity and Neuro-Psycho-Education In Clinical Practice

CONTINUED FROM PAGE 10
The Chapter has been increasingly active with promising new members, leadership opportunities, expansive educational programs and an abundance of social and professional networking programs.

Greg MacColl, LCSW has joined our Board and will chair the newly formed Group Practice Committee. Lois Akner, LCSW, our newest Member-at-Large, will oversee the planning of our annual holiday party on December 4. Save the date!

The Chapter’s committees continue to thrive and produce quality programs, many offering continuing education hours, giving them wide appeal. We have begun providing periodic committee reports on the listserv to keep you apprised of new programs and developments.

Ongoing activities from the Membership Committee include bi-annual receptions. At the last reception in October, we saw unprecedented attendance by non-members, increasing the potential for membership growth. Additionally, the committee has instituted bi-annual meet and greet/happy hours to recruit new members and provide socializing and networking opportunities for all members.

The New Professionals Task Force is actively planning events to address the needs of those entering and recently practicing in the field. An informational session on navigating and obtaining licensing is being planned. We have had an overwhelming response from current MSW students at area schools of social work. They will be serving as liaisons between the Society and their academic programs. This allows us access to a large pool of potential members, and keeps our finger on the pulse of emerging needs.

The Sixth Annual Diana List Cullen Memorial Student Writing Contest was held on November 2 (see article).

The LGBTQ Task Force is offering a program in December which has been approved for 9-CE contact hours.

The Conference Committee hosts two programs annually in collaboration with the ACE Foundation. The September 25 event on dream interpretation was offered for 3-CE contact hours and was very well attended.

On January 22, 2017, a program on energy psychology will offer 3-CE contact hours; and in March we will host a 3-contact hour program on eating disorders.

A list of other committee events, workshops, meetings, and brunches can be found on the Met Chapter page of the NYSSCSW website and on the listserv. We encourage you to join us and get involved in the leadership of your chapter. We all share the common goal of continuing to build our thriving clinical community.

The Met Chapter held the Sixth Annual Diana List Cullen Memorial First Year MSW Student Writing Scholarship Awards ceremony on November 2.

Six student scholars from each of the metropolitan area graduate schools of social work were honored. They were: Qingyang Xu from Columbia University School of Social Work; Jessica Perkiss from the Fordham University School of Social Service; Emma Shakarshy from the Silberman School of Social Work at Hunter College; Andrea Poveda from the Lehman College School of Social Work; Amy Ng Thow Hing from Silver School of Social Work at New York University, and Judy I. Lewis from the Wurzweiler School of Social Work at Yeshiva University. Each award winner received a $500 Scholarship.

The students presented synopses of their papers to an audience comprised of Met board members, the Education Committee, which vetted the papers, the Membership Committee, and the deans and faculty of the social work schools, as well as invited supervisors, families and friends.

The Committee on Psychoanalysis sponsored two stimulating programs in 2016. The first, “Love before First Sight: Understanding Parent-Child Attachment through the Lens of Neurobiology,” was presented by Inna Rozentsvit, M.D., Ph.D. A fascinating Power Point presentation, it detailed the neuro-psychological foundations of the parent-child relationship. In brief, Dr. Rozentsvit stated that the parent-child relationship sets the template for how we see the world. This template is based on neuronal connections that can change regardless of age. An emotionally damaged child can have a smaller brain and many deficits.

Dr. Rozentsvit will be giving Part Two of this workshop on November 13. She will focus on how these changes can repair within the Therapeutic Relationship; 3-CE contact hours will be awarded.

Movie night this year featured “Frida,” a vibrantly colored and absorbing film about Frida Kahlo. Dr. William Fried, a consultant, labeled his talk, “Frida, A Portrait of a Self.” He said, the very act of painting self-portraits was Kahlo’s attempt to “render herself whole” after she had been literally and severely broken in a bus accident. She suffered terrible pain and disappointment throughout her life and chronicled this in her paintings. Her marriage to Diego Rivera, and her fierce individuality, are shown throughout. She died on her own terms at the age of 44.

We hope to see you at our coming events. To find out more or join the committee, please contact one of the co-chairs: Barbara Lidsky, LCSW, BCD, barbaralid@aol.com or Janice Michaelson, LCSW, janicem4@gmail.com.
MID-HUDSON CHAPTER

PRESIDENT ROSEMARY COHEN, LCSW

On September 17, the Mid-Hudson Chapter began its fall series of four workshops. Each workshop is approved for 3-CE contact hours. “Identity Change in Adulthood: Struggles for Hope,” was presented by Susan McConnaughy, Ph.D., LCSW and Wendy Chabon, LCSW at Mental Health America of Dutchess County in Poughkeepsie.

Scheduled for November 5 is “An Introduction to the Principles and Techniques of Albert Pesso, and Their Usefulness for Relationship Oriented Therapists,” with Matt Fried, Ph.D. (The Pesso Boyden System Psychomotor (PBSP) is an interactional, body based group therapy that enables one to recreate past experiences in order to compensate for emotional deficits earlier in life.) The program will be held at Health Alliance Hospital in Kingston.

On January 21, 2017, Elizabeth Lacy, LCSW will present her workshop, “Schema Therapy: Helping Clients Break the Links of Life Patterns,” at MHADC in Poughkeepsie. Our spring workshop on March 25, 2017, “EMDR, a Primer: Treatment for Trauma, Anxiety and Depression,” will be presented by Debbie Hutchinson, LCSW-R, CASAC, Certified EMDR Therapist, at Health Alliance Hospital.

The Mid-Hudson Chapter welcomes all mental health and health workers and students to its workshops. Our long-standing Peer Consultation Group for clinicians licensed to practice independently, led by Chapter Vice President Linda Hill, LCSW, meets monthly at St. John’s Evangelical Lutheran Church in Poughkeepsie. The group is open to members and non-members alike.

NASSAU CHAPTER

PRESIDENT JOSEPH REIHER, MSW, LCSW, BCD

The Nassau Chapter is doing well; our membership is increasing, and we are continuing to work with other chapters and organizations.

The Chapter is well represented on the State Board. I am a member of the ACE Foundation Board and Legislative Committee; Patricia Traynor, LCSW-R, who has done yeoman’s work this year, has continued as a Member-at-Large. Lorraine Fitzgerald, LCSW-R, in addition to her Chapter Vice-Presidential duties, is now a member of the state Listserv Moderating Committee.

An important part of our activities is Nassau NewsNotes. Headed by our Clinical Editor Prue Emery, LCSW-R, it has expanded with the addition of Susan Kahn, LCSW-R, BCD who has stepped up as Editor, in addition to participating on the Vendorship Committee.

The Board has expanded with the addition of Judith Schaer, LCSW, CGP, PAGPA who has assumed the role of Mentorship/Networking Chair, and Deborah Singer, LCSW, CASAC, EMDR who has assumed the role of Recording Secretary. Francine Futterman, LCSW is now Member-at-Large. My thanks to all the Board Members for their dedication and service to the Chapter.

We started the year with a 6-CE credit program led by Dr. Brian Quinn, LCSW, Ph.D., “Depressed, Borderline, or Bipolar.” Seventy-seven members attended, and everyone enjoyed the program and felt that it was worthwhile and appropriate to their practices. [In addition, the Board learned some new skills about making food and arrangements for large groups.]

In October, for the first time, the Nassau and Queens chapters are co-sponsoring a 3-credit program featuring Dr. Karen Kaufman, LCSW, Ph.D., on “Countertransference and Treatment Failures.”

Another exciting development is the establishment of a Subcommittee on Aging, led by Maria Warrack, LCSW, and Norman Perkins, LCSW. Look for announcements about upcoming meetings on the listserv.

The Board is currently planning a spring program which will be announced when it is finalized. Board Meetings are open to all members, and you are always welcome to attend; we need and value your input. The meeting schedule will be announced on the listserv.

I’m looking forward to an active year. It is always a pleasure to see you and work together to develop more opportunities for clinicians.

QUEENS CHAPTER

PRESIDENT LYNNE O’DONNELL, MSW, LCSW-R

We are happy to report that the Queens Chapter is experiencing new energy that is reflected in our growing membership and members’ interest in participating in our programs. We also believe that our new home at Queens General Hospital has been a tremendous boost to our sense of pride.

The facilities are modern, our board room is beautiful and full of light, the staff is very accommodating, and the location is accessible by car and public transport. We finally have a warm, professional environment for our meetings and conferences.

We offered four programs last year that were very well received: Spirituality in the Work, CBT and Body Dysmorphic Disorder, Emotionally Focused Therapy for Couples, and Treatment of Performance Anxiety. The conferences were attended by many new and current members, including several from other chapters. At our end-of-the-year Brunch, it was
The Staten Island Chapter is holding strong, with a core of seasoned clinicians and many new and young faces joining us for the many educational offerings. We hope to interest them in becoming members and even taking on leadership roles.

We are planning to schedule educational events and chapter meetings on alternating Friday evenings and Sunday mornings, from October to June.

Last March, we hosted a CE-credited Conference on “Attachment” for 80 people at a new venue, Wagner College. Also in the spring, Janice Gross, LCSW, ACSW presented her new program on “Couples Therapy” to a lively audience of over 50 clinicians. Our last meeting was hosted by Vice President and Vendorship Committee Chair Dennis Guttman, LCSW-R, ACSW, BCD. It was held in his lovely garden, complete with a home style brunch. The topic, “Treating the Orthodox Community,” was very interesting and opened a discussion of culture and beliefs.

Our fall season featured “Dialectical Behavior Therapy – The Basics,” presented at the Educational Center at Staten Island University Hospital.

Upcoming courses include: “Treating Eating Disorders,” in March 2017, and “Dream Analysis,” in May, presented by our own superb clinician Michael DeSimone, LCSW, Ph.D. Please contact Janice Gross, LCSW, ACSW or Catherine O’Brien, LCSW-R for more information.

The Committee continues to respond to members’ ethical questions and to meet monthly to review the Society’s Code of Ethics. The Committee recently proposed to the State Board the following policy, which was accepted:

NO LICENSED SOCIAL WORKER SHOULD MAKE A DIAGNOSIS OF A PUBLIC FIGURE WITHOUT HAVING PERSONALLY EVALUATED THAT PERSON IN A CLINICAL SETTING, NOR DISCUSS THE DIAGNOSIS PUBLICALLY WITHOUT THE PERSON’S PERMISSION.

— Martin Lowery, MSW, LCSW-R, Chair
This regular column will address issues that arise in private practice, with an emphasis on money matters and marketing. Readers are invited to send questions to RBJoelson@aol.com.

Here are some tips and guidelines for handling money matters in the current economic climate:

1. If, upon a client’s request based on changed economic circumstances, you agree to reduce the fee, do so for a time limited basis, e.g., three months or 10 sessions, so that you build in a defined time for when the issue will be revisited and reconsidered by both of you. Many therapists reduce fees for good reason and then find it difficult to restore the original fee (let alone ever raise it) when the client’s financial circumstance changes. Currently, I have three clients for whom I reduced the fee with a scheduled discussion of the matter within a mutually agreed time frame. All were quite appreciative and understanding of the idea that we have to be fair to both of us and not just one of us.

2. If a client requests a fee reduction, this is something that should be explored, rather than immediately granted. There is probably much “grist for the mill” here that should be considered prior to a decision (e.g., is the therapy fee the only item that is being reduced in their budget or is it the only one that occurred or the easiest one to try and get reduced?). Remember that fee matters are treatment issues, not just money issues.

3. In the current, or any, economy it is important to convey and clarify your fee policies (and if you don’t have fee policies, I urge you to develop them...now!) so that clients understand what is expected of them and how the two of you will be handling financial matters throughout the treatment. I do not believe it to be reasonable or fair to create and/or invoke a policy on the spot for such occasions as late cancellations, missed appointments, etc., if client was not informed of your policy earlier. If, in the beginning, I neglect to inform a client about my fee policies and procedures and they miss a session, for example, I do not charge for that event, but will in the future once they have been informed. Some therapists use a written policy statement which is handed to clients in the first or second session in order to insure clarity.

4. Many premature or abrupt treatment terminations can be traced to unacknowledged and, therefore, therapist-and-client-avoided fee-related conversations in the course of the treatment. Watch for signs of fee-related issues that occur, however subtly. Examples include chronic late payment, promises to send the forgotten fee that are never received, repeated checkbook forgetting, forgetting the balance due and whether or not they paid for that month, etc. Work at getting comfortable discussing money matters if you are not already. Too many of us have been in the position of chasing after unpaid balances (often quite large) after a problematic or even conventional termination.

Richard B. Joelson, DSW, is Chair of both the State Membership and Met Chapter Membership committees. In addition, he serves on the Board of the ACE Foundation. For 12 years, he taught a course at the Silberman School of Social Work on developing and succeeding in private practice, and he has conducted workshops for the Met Chapter on the topic. His new book, Help Me! A Psychotherapist’s Tried and True Techniques for a Happier Relationship with Yourself and the People You Love, was published in June 2016. E-mail him at RBJoelson@aol.com or visit his website, www.richardbjoelsondsww.com.
Karen Kaufman, LCSW, Ph.D. has been a member of the Society for close to three decades. She has held board positions in the Westchester Chapter, and currently is in her third term as President of the Met Chapter. She is also President of the ACE Foundation, and has taught courses under its auspices. She was an adjunct professor at Fordham University School of Social Work for 16 years.

Susan A. Klett, Psy.D., LCSW-R, BCD has been the Director of Professional Development for the ACE Foundation since its inception two years ago. She has helped add over 75 course offerings in that short time, providing a wide range of learning opportunities to clinicians, as well as continuing education credits necessary to maintain their licenses. In addition, for many years Susan has chaired the Society’s Annual Education Conference. Her impressive resume includes faculty positions at training institutes. She is the former Co-Director of the Washington Square Institute, where she has also served on the faculty as a training and supervising analyst. She has also published on a variety of topics.

Martin Lowery, LCSW-R began his career as a Roman Catholic priest, serving for 22 years in South Korea. He earned an MSW at Fordham University School of Social Work at the age of 53. His particular interest is in the interplay between psychoanalysis and religion. A member of the Westchester Chapter for many years, Martin has served as its Membership Committee Chair, Conference Coordinator, Vice President and President. On the State level, he has held the positions of First and Second Vice President, and Member-at-Large, and he currently serves on the State Ethics and Professional Standards Committee.

Dore Sheppard, Ph.D., LCSW has been very active in the Society for the past 16 years. He has served as President and Vice President of the Rockland Chapter. On the State level, he has been Second Vice President and State Membership Committee Chair, and will soon serve as a Member-at-Large. He is nearing completion of his psychoanalytic training at New York University Postdoctoral Program for Psychotherapy and Psychoanalysis. Dore is also a Chess Master, having earned the United States Chess Federation title about 15 years ago.

NEW MEMBERS OF NYSSCSW*

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CHAPTER KEY: MET—Metropolitan, MID—Mid-Hudson, NAS—Nassau County, QUE—Queens County, ROC—Rockland County, SI—Staten Island, WES—Westchester County.

*These new members joined between April 1 and October 1, 2016.
Dr. Fred Mazor, DSW

NYSSCSW mourns the passing of Diplomate Dr. Fred Mazor, DSW, who died on March 6, 2016. Fred practiced psychotherapy since the 1960s. He served in many leadership capacities in the Society. He was a Met Chapter President and, for several years, the business manager and photographer for the Met Chapter Forum. He also chaired the State Membership Committee from the late 1960s through the mid-1970s and served as Chair of both the State and Met Chapter Preparedness Committees. This work started even before the 9/11 terrorist attacks and continued until his death. Fred’s warmth, friendliness and sense of humor are missed by all his colleagues.

Emma Agard American, LCSW

NYSSCSW was saddened by the passing of Emma Agard American, LCSW on June 7, 2016. Emma practiced privately for over 40 years in New York City, and was an active member of both the Brooklyn and Met Chapters for many years. She trained in psychoanalysis at the Training Institute for Mental Health, and in child therapy at the Postgraduate Center for Mental Health. Emma had an abiding interested in education, and attended all the NYSSCSW conferences she could. Beyond that, she supported education for young people through college scholarship funds. A close friend to many in the Society, she is sorely missed.
I am pleased to introduce my new book to my Society friends and colleagues. Help Me! is a compilation of essays about the social and psychological phenomena that have come up in the course of my efforts to help the people in my care. These individuals and couples have provided me with opportunities to explore and share observations and ideas that have aroused my curiosity throughout my years as a helping professional. I hope that some of you might find it to be a useful addition to your library. —Richard B. Joelson, DSW, LCSW

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Help Me! is available in hardback, paperback and eBook at: Amazon.com | BarnesandNoble.com | iTunes | Kobo


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