



SYNERGY

THE NATIONAL VA SOCIAL WORK NEWSLETTER

MARCH IS SOCIAL WORK MONTH *"Life's Journey: Help Starts Here"*



Life's Journey: Help Starts Here". That's the slogan for National Professional Social Work Month 2006, and it could not fit VHA Social Work better if we had designed it ourselves. When you think about the multitude of psychosocial issues and problems facing our typical veteran patients, addressing those issues and problems can certainly be a journey and one that typically starts with the help of a social worker.

Consider active duty service members and veterans who served in Operation Iraqi Freedom or Operation Enduring Freedom (OIF/OEF). When they come back home, many of them have significant injuries. Even if they escaped the combat theater with no physical injuries or illnesses, all of them will be dealing with readjustment issues and the trauma of war. Those in the National Guard and Reserves were not always as prepared for deployment as members of the regular active duty forces. They and their families faced particularly difficult financial and personal hardships. Across VHA, social workers serving as seamless transition points of contact and case managers were often the first VA staff they met. The help that social workers offer can mean the difference between a successful readjustment and one fraught with ongoing struggles.

OIF/OEF veterans who suffer polytraumatic injuries are especially vulnerable and require intensive case management services. Recognizing the skills that social workers bring to psychosocial case management, Dr. Perlin required each of the four VHA Polytrauma Centers to assign social worker case managers at a ratio of one for each six polytrauma patients. These social worker case managers are lifelines for polytrauma patients and families, helping them not only with their rehabilitation, but also with accessing VA benefits, coordinating with the military hospital that transferred them, and assuring that their family members receive all of the support services they need.

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The impact on polytrauma patients and their families can be life-altering. You may have seen the February broadcast of CBS's "60 Minutes" news magazine devoted to OIF/OEF veterans with polytraumatic injuries. One of those veterans told the reporter that she had decided to go back to school to become a VA social worker.

"Help Starts Here" also could have referred to the extraordinary efforts of countless VHA social workers who volunteered for deployments to the Gulf Coast to help Hurricane Katrina survivors. Their stories, told in a special issue of Synergy published in January, are remarkable. Evacuees living in shelters with very uncertain futures, far from home, and who had probably lost most of their worldly possessions did not know where to turn. That is, until they were approached by a VHA social worker. Reuniting families, helping find temporary and permanent housing, arranging for health care services and helping with financial problems were just some of the ways that VHA social workers helped evacuees through their ordeals.

Every VHA medical center, independent clinic and CBOC is filled with social worker heroes who go above and beyond every single day for the veterans they serve. We do not always hear your stories or read about your Herculean efforts. But Kristin and I know that you make significant differences in the lives of our veterans and are very proud of you.

So, celebrate Social Work Month during March and allow yourself to feel pride in your work and pride that you are a VHA social worker!

Social Work Leadership

VA Social Worker Success Story Project

The National Social Work Leadership Council and the National Social Work Public Relations Committee are embarking on a new and exciting project. They are developing a new section of the Social Work Intranet web page where you will be able to read success stories about VA social workers who have moved into senior VA leadership positions, such as hospital and VISN directors.

We plan to highlight these leaders on an ongoing basis in future issues of Synergy. The first article is about Mr. William Feeley, the newly appointed Deputy Under Secretary for Health for Operations and Management.



William F. Feeley, MSW, FACHE Deputy Under Secretary for Health for Operations and Management

Interviewed and Submitted by: Pamela Wright, LCSW,
Canandaigua VAMC, NY
Member of the Public Relations Committee

Social workers are known for their versatility, advocacy and genuine caring. It is no surprise, then, that William Feeley, a leader with a strong clinical social work background, was promoted to Deputy Under Secretary for Health for Operations and Management. His story is a blend of unique experiences, hard work and perseverance, with an underlying goal to serve others.

During our interview, Feeley told a story dating back to his high school days that illustrates the need to persevere no matter what anyone says. "Before graduating from high school," Feeley said, "I met with my guidance counselor, Brother Vincent, and he told me that I would make a great brick layer's assistant." Feeley said Brother Vincent may have been hard on him, but "I took it as a challenge to strive for more." Feeley has never forgotten that challenge.

Feeley graduated from Providence College in 1969 with a BA in Sociology and completed graduate school with a Master of Social Work degree from Boston University in 1971. He began his social work career at Catholic Family Services, and then moved on to a position as Director of Adolescent Services for a settlement house. At that time he had the opportunity to work with natural street gangs which provided him with constant challenges. Feeley commented that the experience was great management training.

Feeley's career at the VA spans 31 years. He began his VA social work career at Coatesville VAMC in 1975. His work at the Coatesville VAMC and then at the Northampton VAMC focused in psychiatry. In 1982 he became the Director for the DTC Program at Northampton and in 1985 he was accepted into the Social Work Leadership Program. In 1986 he accepted a position as Chief of Social Work at Providence VAMC. He was selected to participate in the Associate Director Training Program in 1990, and after completing this training program became Associate Medical Center Director for the Grand Junction VAMC in Colorado, and later Associate Medical Center Director for the Northampton VAMC in Massachusetts. When asked what influenced his decision to pursue a career path outside of clinical social work, Feeley said, "I wanted to make large systems more responsive to human beings." He never viewed himself as having left social work and now feels that the organization has become his client. Through experiencing life in a variety of geographic locations, he has learned to interact with a variety of people with different perspectives, faced a variety of issues, and learned to adjust his leadership style based on what people need.

According to Feeley, his social work skills have been invaluable in building coalitions and bringing together common interests. A key theme in Feeley's story was aligning oneself with talented people who can help along the leadership journey. He has been offered numerous opportunities with increasing levels of responsibility in his career, allowing him to meet his own personal challenges and make a difference in the lives of others. This certainly has been the case in VISN 2, where Feeley has left a legacy of high quality care, patient satisfaction and increased veteran access.

Feeley has sage advice for social workers advancing on to top level management. According to Feeley, "The joy is in taking on challenges and trying new things, even if it makes you a bit anxious. The sky really is the limit, but you have to reach for it."

In 1998 Feeley became the Director of Western NY VA Healthcare System and in 2003 was promoted to Network Director of the VA Healthcare Network Upstate New York. Early this year he was promoted to Deputy Under Secretary for Health for Operations & Management, truly demonstrating that the sky really is the limit. When asked how he feels about his new position Feeley responded, "I am very pleased. I will continue with an agenda that is patient and employee centered, promoting the best services, and treating people like family members." Feeley's final words at our interview were: "Imagination and your heart can accomplish more than you believe."

Secretary Appoints LVA Class to Serve as Ambassadors

Submitted by: Judy Arnold MSSW, Health System Specialist,
Leavenworth VAMC

"It was an astounding honor to participate in Leadership VA, Class of 2005," according to Judy Arnold, Social Work Associate Chief for the VA Eastern Kansas Health Care System. However, she states that the end of the year is not the completion of her connection to the class or her dedication to our mission. In fact, in some ways, even after 28 years of Civil Service, her commitment has been renewed to such an extent that she feels her work has just begun!

DVA Secretary Nicholson challenged the members of her class be "VA ambassadors," especially this year, the 75th Anniversary of VA's existence. The group is to carry forth the word to younger generations of what it means to be a veteran and what services are offered through VA. In light of that, classmates developed a CD that is to be used when speaking to school classes, kindergarten through 6th grade. The CD has colorful photos, simple language, and attractive graphics, which should be appealing to the audience. The text describes who veterans are, outlines the major military branches, gives historical "fun facts," and explains the major services offered by our three branches: Benefits, Health, and Cemetery. Sessions are designed to be informative and interactive, while relatively brief.

Other Social Work LVA 2005 Graduates and Ambassadors are: Bobbie Rosenthal, Chief, SWS, San Francisco VAMC; Dan Robbin, VISN 8 Network Homeless Coordinator; and Mike Tyllas, Director, Electronic Commerce Business Solutions Office, Hines (pictured below in Washington D.C. with Kristin Day, Deputy Director, SWS, VACO).



Mike Tyllas, Kristin Day, Judy Arnold, Bobbie Rosenthal, Dan Robbin (l-r)

National Social Work Committees Working for You

Second of a two part series – November 2005 *Synergy* featured reviews from the Social Work Leadership Council Research and Evidence Based Practice (formerly the Research Advisory Board), Professional Standards and the Data Management Committees (formerly Information Management).

VHA Social Work has 6 National Committees and the SW Leadership Council. The committees serve as extensions of the Office of Social Work Service in VA Central Office. The Social Work National Committees and the Social Work Leadership Council provides guidance on Social Work practice issues to the Director, Social Work Service and help shape policy and provide direction for Social Work.

In our last edition of *Synergy* (November 2005) the Leadership Council, Research and Evidence Practice, Professional

Standards and Data Management Committees shared their goals/projects that they had accomplished over the past year. In this edition you will hear from the Public Relations, Education and Staffing & Clinical Practice (formerly known as Resource Planning and Utilization) Committees.

Public Relations Committee

Submitted by: Sheldon Schelling, MA, MSW, CSW-PIP
Chair, VHA Social Work Public Relations Committee
Chief, Social Work Service Big Spring VAMC

The mission of the VHA Social Work Public Relations (PR) Committee is to promote and market social work practice, activities and leadership as a core and essential component of integrated and holistic health care delivery. We provide support to the Director of Social Work Office in VACO and other social work committees. Perhaps our most important role is to polish, publish and promote high quality, useable products for the 4400 social workers in VHA.

The VHA Social Work PR Committee met in August 2005 at the National SW Leadership Conference, along with the other social work committees, to review the past year's accomplishments and establish our goals for 2006. We also have monthly conference calls to conduct our regular business. We have established the following goals for 2006:

- Work closely with the Synergy staff to produce and publicize quarterly Synergy publications and Special Editions on the role of VA Social Workers in the Hurricane Relief effort and Seamless Transition;
- Work closely with the other national social work committees to publish articles in Synergy;
- Collaborate with other national social work committees to promote a national SW Preceptor and Mentor Program;
- Collaborate with other national social work committees to incorporate, market, and publish the social work focus group results;
- Complete the development of a Power Point presentation on Privileging and Scope of Practice for Clinical Social Workers and Supervision and Licensure of Social Workers within VHA;
- Promote addition of Synergy Roving Reporters;
- Promote a social work CEU training brochure with the national Social Work Education Committee;
- Promote how we are viewed as a social work profession; Review and update the Clinical Social Work VHA 21st Century Employer of Choice Power Point and brochure ;
- Develop "talking points" for the film "VA Social Workers: Reaching Out, Changing Lives," promoting social work;
- Develop a series of articles for Synergy and the social work websites on social workers in non-traditional social work leadership roles in VA;
- Solicit nominations for VA Social Worker of the Year and publicize the recipient;
- Collaborate with other national social work committees to produce a Social Work Reward and Recognition Toolkit;
- Update the Social Work Month Toolkit;

- Collaborate with other national social work committees to promote the Social Work COLLAGE web page;
- Promote and publish the Social Work Data Management Training programs;
- Publish an article in Synergy on the content of the VHA Social Work web page;
- Assist in planning and publicizing the 2006 USSW and Seamless Transition Conference.

Many of the above goals listed have already been completed; others are well on their way towards completion. A member of the Social Work Public Relations Committee serves as a liaison to each of the other social work national committees to ensure that we are meeting all their needs.

The members of the VHA Social Work Public Relations Committee are:

Sheldon Schelling, Chair, Big Spring, Texas
 Heather Mahoney-Gleason, Chair-Elect, Lake City, Florida
 Annette Harrington, Tampa, Florida
 Erin Butler, San Francisco, California
 Terry Clark, Lexington, Kentucky
 Cody Frasure, Mountain Home, Tennessee
 Victoria Hill, Birmingham, Alabama
 Lisa McGuire, Tomah, Wisconsin
 Jonathon Pollack, Albany, New York
 Pamela Wright, Canandaigua, New York

Ad hoc members

Jennifer Summers, Editor of Synergy, Northampton, MA
 Erica Taylor, Assistant Editor of Synergy, Seattle WA

Education Committee FY 2005 Highlights

Submitted by: Jerry L. Satterwhite, LCSW, ACSW
 Chair of the Education Committee
 Birmingham VAMC

The Education Committee had many accomplishments during the last fiscal year, but none more gratifying than receiving two Telly Awards for the video "The Price of Freedom: The Military Experience." Members of the Education Committee were also responsible for the "Orientation to Social Work" video.

Although COLLAGE was not "rolled out" until this fiscal year, most of the groundwork and coordination was done in FY05. The Tip of the Month was started during the year and included such jewels as "Straight Talk on Maintaining Your OPF," Distance Based Learning Opportunities, How to Get CEUs Online, The High Performance Development Model and Individual Development Plans to name just a few.

A subcommittee was formed to develop once per quarter educational conference calls that awarded CEUs for those who registered. Our goal to include business language and practices in any leadership training led to Kristin Day and Deborah Volkmer's presentation on Performance Based Interviewing.

To learn more
about COLLAGE
check out Page 6
of the newsletter

In addition to these highlights for 2005, the Education Committee is actively involved in ongoing projects such as planning the USSW conference, the annual distribution of student projects, identifying the special needs of National Guard and Reservists, and promoting my HEALTHeVet.

Staffing and Clinical Practice Committee

Submitted by: Emily Baldwin, LCSW, Durham VAMC
 Member of the Staffing and Clinical Practice Committee

You might have recently seen a document entitled, "Military Facts for Non-Military Social Workers" in your Outlook Inbox and wondered who created such a useful

Military Facts for Non-Military
Social Workers
Find it on COLLAGE
http://vaww.collage.research.med.va.gov/collage/E_social_work/

product. This is just one of the products produced by the Social Work Staffing and Clinical Practice Committee (formally known as Resource Planning and Utilization Committee). The mission of our committee is to "enhance quality practice by developing and disseminating staffing guidelines and clinical tools in support of performance improvement." The following VHA social workers are members of the Staffing and Clinical Practice Committee:

Betsy Randall, Chair, Boston
 Doug Cadiz, Chair-Elect, Northampton
 Emily Baldwin, Durham
 Paul Burton, Greater Los Angeles
 Nancy Campbell, Cincinnati
 Cathy Dahle, VA Puget Sound
 Joanna Kadis, San Diego
 Jane Price, San Francisco
 Deborah Walls, Indianapolis

In addition, you may have also seen our "Caregiver Resource Guide." This document was created to increase awareness of resources throughout the United States in an attempt to lessen caregiver stress as well as our "A Practical Guide to Managing Clinical and Social Work Administrative Duties" toolkit posted on DocuShare under "Social Work Practice." Since our committee wide meeting in August 2005, we have created multiple goals including developing SW staffing models and strategies based on "best practices" and utilization of workload and productivity data, which includes staffing in specialty programs such as Home Based Primary Care, Spinal Cord Injury Clinic, MICHM, Community Residential Care, Adult Day Health Care, Respite, Homemaker/Home Health Aide, Contract Nursing Home, and the Homeless Program.

Additional 2006 goals include:

- Developing a business plan to help SW chiefs/executives assess staffing needs, redeploy staff based on workload, and develop staffing plans and proposals, publishing it as "How to Develop and Utilize a Staffing Business Plan for Social Workers."
- Work with the Office of Care Coordination and Geriatrics to identify ways to provide support to families and caregivers. Disseminate the Caregiver Guide.

- Develop Power Point presentations on SW licensing and supervision, scope of practice and clinical privileging, and other practice issues.
- Implement the new SW Coaching and Mentoring program and assist social workers with VA Coaching, Mentoring and Preceptor/Partner Certification.
- Develop orientation materials for new social workers and students using video, CD-ROM and VHA SW web page.
- Disseminate information on the special needs of National Guard and Reserve members serving in OIF/OEF. Publish "Military Facts for Non-Military Social Workers" and work with EES to use with all clinical occupations.

Now, you might be thinking, "This looks like a lot to accomplish. They sure are ambitious!" These goals are developed with the input of the Social Work Leadership Council and Central Office. We often collaborate with other National Committees to accomplish goals that might overlap from one committee to another. But most importantly, the Social Work Staffing and Clinical Practice Committee is committed to developing useful and practical tools for every day social work practice within the VA.

National Social Work Committee Membership: Joining a committee



Frequently Asked Questions

Provided by the Professional Standards Committee and Research Advisory Board (February 2005)

HOW DO I KNOW IF A COMMITTEE IS RIGHT FOR ME?

- *The National Social Work Committee offers the opportunity to utilize your skills as a social worker to affect the practice of social work across the VA system. If you have a desire to promote the practice of Social Work in VA, I encourage you to apply for membership.*

WHAT ARE COMMITTEE MEMBER OPPORTUNITIES & RESPONSIBILITIES?

- *Each member of a committee is assigned leadership of one major project and may serve on additional workgroups, task forces or subcommittees in order to meet established goals. By applying for membership in any committee, you will be committing yourself to at least one hour (monthly conference call and other calls, as needed). Members commit to a three-year term. Membership may be renewed for one additional term if the member is interested and the committee needs their experience.*

DO I HAVE TO JOIN A COMMITTEE TO BE INVOLVED?

- *Many individuals do not wish to commit to full membership, but may have an interest in a specific project related to a particular committee or one of the identified goals. Any VHA social worker may contact the committee and volunteer to work on a workgroup, task force or sub-committee. They should first discuss this with their immediate supervisor and/or Chief/Executive. All are welcome and encouraged to contribute. Just contact the Chair or any member of the committee to express your interest.*

HOW DO I FIND OUT MORE ABOUT COMPLETING AN APPLICATION?

- *Every year the Social Work Council sends out a call for applications. This is generally done in the early spring months. If you don't receive a copy of that e-mail from your Chief or SW Executive, you may call the Social Work Service in VA Central Office at 202-273-8549 and one will be sent to you electronically.*

WHAT ELSE SHOULD I KNOW ABOUT COMPLETING AND SUBMITTING THE APPLICATION?

- *Involve your direct supervisor and your Social Work Chief/Executive about your interests. Don't forget, they have to sign off on the application.*
- *Look at the committee's goals; determine what interests you and what you can offer the committee based on your experiences (VA and non-VA).*
- *Complete the form as directed.*
- *Don't leave anything out.*
- *Send the application through Microsoft Outlook to the Chair of the Social Work Leadership Council.*

Social Work Public Relations Committee

Mission Statement: The mission of the Public Relations Committee is to promote and market social work practice, activities, and leadership as a core and essential component of integrated and holistic healthcare delivery.

COMMITTEE MEMBERS:

Sheldon Schelling, Chair Big Spring
Heather Mahoney-Gleason, Chair-Elect Lake City
Erin Butler, San Francisco
Terry Clark, Lexington
Cody Frasure, Mountain Home
Mary Annette, Harrington Tampa
Victoria Hill, Birmingham
Lisa McGuire, Tomah
Jonathan Pollack, Albany
Pamela Wright, Canandaigua

AD Hoc Members:

Jennifer Summers, Synergy Editor - Northampton
Erica Taylor, Synergy Asst. Editor - Puget Sound

3 Positions Available

Social Work Staffing & Clinical Practice Committee

Mission Statement: To enhance quality practice by developing and disseminating staffing models, staffing strategies and clinical tools in support of performance improvement.

COMMITTEE MEMBERS:

Randall Elizabeth, Chair Boston
Doug Cadiz, Chair-Elect Northampton
Emily Baldwin Durham
Paul Burton Greater Los Angeles, Sepulveda
Nancy Campbell VISN 10
Cathy Dahle Seattle
Joanna Kadis San Diego
John Petek Central Texas
Jane Price San Francisco
Deborah Walls Indianapolis

5 Positions Available

Social Work Professional Standards Committee

Mission Statement: To guide, provide direction, maintain, and enhance the professional integrity of social work and the VA health care system. This is accomplished by developing, promoting, and educating the field on standards of practice and maintaining liaison with professional organizations, accredited bodies, and national leadership in support of the delivery of quality care to veteran patients and their families.

COMMITTEE MEMBERS

John O'Brien, Chair Maryland
Jean Bromley, Chair-Elect Milwaukee
James Hammond, Togus
Jennifer Jaqua, Madison
Florence Long, Greater Los Angeles
Veronica Lucious, Pittsburgh
Amy Morrow, Eastern Kansas
Miguel Ortega, Houston
Jeanne Obrochta, Hines
Bruce Tucker, Bath

2 Position Available

Social Work Education Committee

Mission Statement: the mission of the Education Committee is to provide leadership and expertise to social work leaders and committees when programs, projects, or initiatives contain an educational component.

COMMITTEE MEMBERS:

Jerry Satterwhite, Chair Birmingham
Sheila Womack, Chair-Elect Salisbury
Rocco Bagala, Puget Sound
Darlene Contadino, Cincinnati
Katherine Smits, West Virginia
Terry Harbert, Eastern Kansas
Bill Lanning, Black Hills
Dian Leibel, Danville
Karen McNealy, Central Alabama
Judith Talbert, Columbus

1 Position Available

Social Work Data Management Committee

Mission Statement: The VHA Social Work Data Management Committee's mission is to provide the field with information and resources to support the strategic plan of VHA and VHA Social Work. Specifically, workload systems, accurate recording of patient services including CPT and ICD-9-CM Coding, and financial reporting systems to ensure accurate quality services to our veteran patient population and provide baseline data consistent with evidence based practice. Additionally, data based productivity standards promote access of care for our veteran patient population and the availability of data that supports staffing guidelines.

COMMITTEE MEMBERS:

Carroll McShane, Chair Albuquerque
Joan Chipps, Chair-Elect NY Harbor
Melissa Creel, Daytona OPC
Sandra Dunn, Bay Pines
Pat Gray, Little Rock
Julie Irwin, NY Harbor
Larry Murray, Tennessee Valley
Steven Pharris, Tennessee Valley
Deborah Sull-Lewis, Huntington
Denise Hamilton, Indianapolis (Consultant)

2 Position Available

Social Work Research & Evidence Based Practice Committee

Mission Statement: To facilitate research, program evaluation, and practice accountability that will enhance the quality of social work services provided to veterans. This will be accomplished by: (1) promoting social work as an integral participant within the Department of Veterans Affairs (VA) research community; (2) assisting VA social work sites in realizing their potential along the continuum of research and practice evaluation; (3) advising and consulting with the Social Work Director in Headquarters on issues pertaining to social work research; and (4) collaborating with other VACO Social Work Communities relevant to research program evaluation and practice.

COMMITTEE MEMBERS:

Mel Tapper, Chair Boston
Milton Ayala, San Antonio
Jeff Doyle, Albuquerque
Carolyn Franzese, Salisbury
Marylou Guihan, Hines
William McKinney, Augusta
Karen Neuman, Ann Arbor
John Shalanski, Wilkes-Barre
Deborah Volkmer, Salisbury
Larry Whorley, Lexington

**Deadline for all applications is
May 1, 2006**

All National Social Work Committees are also recruiting social work staff who would be interested in assisting with individual time limited projects. If you are interested, please contact the committee chair directly to obtain more information.

Beyond help or help above and beyond

by Richard Romaniuk, Ph.D., LISW, National Association of Social Workers, Region III Chief of Social Work, Cleveland VAMC



How many times does a counselor or social worker see that a certain person is beyond help? Usually, we are talking about a person who seems to be self-destructive, with poor impulse control, unable to reach for or receive help. Most often, that person is chemically dependent, unemployed and homeless. He or she might have

multiple medical, legal and mental health problems. His or her main coping skills are anger and isolation. He or she cannot trust anybody. Nobody can understand how that person feels. Nobody, because that person doesn't understand either.

We, social workers and mental health practitioners, are doing all that we can to improve substance abuse treatment. We learn about the neurobiological basis of disease; we study cultural barriers for treatment; we develop integrated dual-diagnosis therapy programs, but eventually we say: "patients need to be ready for a change". We may help them, but they need to do the recovery work themselves.

We must confront the history of our profession - the time when the addict and the alcoholic were evaluated from a moral rather than a medical perspective. We had limited resources because it was claimed that substance abuse treatment is unsuccessful. Only recently have we been able to cite statistics showing that the rate of compliance of chemically dependent patients is the same as compliance with treatment for any other chronic disease. Only recently have we been able to present brain images showing that addiction changes the brain in a fundamental and permanent way.

However, with all the science and social and behavioral research, we are still unable to help people who seem to be beyond help, people who refuse to trust others and who feel extremely uncomfortable in group settings, whether it be group therapy or a twelve-step fellowship. These patients have limited insight concerning their situations and seem to be very defensive when asked about the source of their problems.

At the same time, these patients are heroes who have survived the worst nightmares, flashbacks and/or emotional outbursts of fears and anxiety, very often occurring without any obvious relation to the moment and place where they meet their demons. They often think that they are insane. And this only reinforces the fear and shame that come from their belief that there is something terribly wrong with them.

What happened to them? What happened was

something that words cannot describe, the mind cannot comprehend, and eyes cannot register. Something that is against our understanding of life and nature, the cause and the purpose, something that destroys our feelings of security once and forever and makes us feel hopeless and helpless to the forces of unknown.

Enter our brain with its wiring and complexity. We learned from neuroscience that each half of our brain is very specialized and responsible for different functions. Our right brain processes and memorizes our emotions, registers danger, and learns how to recognize danger. It fears the danger. Our left brain uses words and language to think and process the logic of an event. It explains what happened.

In extreme danger, in situations beyond our comprehension, there is a poor integration of the work of our left and right brain. The left brain cannot use words to describe what happened. The left brain will not remember the trauma. But the right brain has a vivid, very strong memory of the extreme danger. From that moment on, anything recalling the trauma will trigger emotional memories of fear and high anxiety. These feelings will always be so strong that, to survive, people will learn how to avoid any trigger of this extreme anxiety. Trauma survivors will learn how to avoid or self-medicate the symptoms - often with drugs and alcohol.

We have already learned that people with a history of violence, chronic stress, and substance abuse are more prone to exhibit these symptoms after surviving trauma. Also, people who self-medicate just after the traumatic event have a greater chance of developing the whole range of symptoms of anxiety and avoidance behaviors.

As already mentioned, people with these symptoms often think themselves insane. They do not consider looking for professional help. Shame and guilt related to their status are feelings that stop them from trying to help themselves. The stigma of being mentally ill is the reason why the medical community was unsure if these symptoms needed to be recognized as a mental health disorder. First of all, these symptoms can be developed by any healthy person who has survived trauma. Secondly, attributing these symptoms to a mental health disorder might stigmatize people who already suffer from low self-esteem. The overriding argument in this discussion is the fact that formal diagnosis allows funding sources like insurance companies or government agencies to pay for the treatment necessary for trauma survivors.

One of the most distinct diagnoses for people who suffer symptoms characteristic for trauma survivors is the diagnosis of Post-Traumatic Stress Disorder (PTSD). A full description of PTSD symptoms according to DSM IV can be found at the following Web site:

<http://omi.unm.edu/PTSD-DSM-IV.html>. Every social worker and mental health therapist has to be very familiar with the symptoms of PTSD and trauma survivors. It is in the nature of the problem that the

patient is unable to communicate well concerning his or her problem. Patients usually develop the whole range of dysfunctional coping skills that help them to survive the symptoms but make their lives unbearable. Substance use and abuse is most often one of them. Science again has shown a clear relationship between stress and addiction, with stress being a trigger and reinforcing factor of addiction.

Only special integrated treatment programs addressing safety, symptoms management, and healthy coping skills may help people who suffer from PTSD and chemical dependency. We have to develop special outreach services and long-term therapy programs with supportive housing and educational services. We may look for patients in every environment where trauma survivors might hide from their demons. We have to help beyond our daily practice. People who suffer from symptoms of PTSD and addiction do not know how much their behavior is dictated by a distressed brain. We are responsible for learning more about that and for finding them help above and beyond the resources we already offer - help that they need to function in daily life.

Reprinted with permission from the Ohio Department of Mental Health publication *Quality Matters*. To view their newsletter please refer to the link below.
<http://dmhext01.mh.state.oh.us/dmh/newsletter/qualitymatters.nsf>



COLLAGE

Submitted by: Kristin Day, Deputy Director of Social Work, VACO

The Social Work COLLAGE site is Available NOW!

Ever wish you could go to one site to find all the latest information and resources related to VHA social work practice? Need to find a directive or policy? Looking for up-to-date information from a recent Synergy newsletter? Need to know about military service for non-military social workers, data driven management or staffing guideline information recently produced by one of the national social work committees? Want to participate in a dialogue with other social workers in Palliative Care and Hospice? If the answer is yes to any of these questions you've come to the right place. After an easy one time registration you can access all this and much more.

Just go to:

http://vaww.collage.research.med.va.gov/collage/E_socialwork/

Here you will find a plethora of information related to clinical practice and to the administration and management of VHA social work. Choose from over 100 social work documents relating to training, career development, clinical practice and policy issues. New information is frequently added to the web page. Can't find it on SW COLLAGE? Then go to the links and access many other valuable VA, VHA and community websites. Just one trip around the site and you will quickly mark it on your list of favorites for frequent return trips.

COLLAGE is currently an HSR&D grant funded project. The more it is used the more likely it is that COLLAGE will continue to be available in the future. So, join the 700 VHA social workers who have already registered and be in the know by making the Social Work COLLAGE site a regular part of your clinical and administrative practice.

HURRICANE KATRINA

Dedicated to the victims of Hurricane Katrina
 Submitted by: Sherilda Tate Lyons, CMSW
 West Palm Beach VAMC

Katrina affected this nation in many ways. It also had a dramatic affect on me and my biological family who live in the impacted areas of both New Orleans and Bogalusa, Louisiana. Some of these family members became displaced victims due to Hurricane Katrina's wrath. It was then that I realized the magnitude of this disaster as it became personal due to the many frustrating and exhausting attempts to contact my family. After many failed attempts to reach them by phone and Internet, I was so desperate, that I began reading and watching the public media for answers to the safety of my loved ones. I had only one question: "Is my family in New Orleans and Bogalusa, Louisiana alive!" I posted numerous personal information notices about the "Short Family" and myself on the Red Cross website, hoping for a response of any kind. When I didn't get a response, I knew that I had to do something. I couldn't sit back and wait aimlessly, as I had become emotionally and physically ill watching the pain and despair of the people in Louisiana and Mississippi. I knew in my heart that I had to put a plan in place. I felt obligated to go and help because Louisiana is my birth home.

I had a long conversation with my husband, my 8 year old daughter, friends and supervisors (Ms. Linda Graham and Dr. Bryon Ballot) regarding my plan to volunteer to help with our nation's crisis. They expressed concern for my safety and I understood that they had a valid fear. However, most importantly, I received their warm prayers, love and support for me to complete my mission.

On 9/10/05, the West Palm Beach Veterans Affairs Medical Center, acting through the Disaster



Emergency Medical Personnel System (DEMPS) afforded me the opportunity to deploy to the Michael E. DeBakey VAMC in Houston, Texas for a period of two weeks. As a social worker in the Mental Health and Behavioral Science Service at the West Palm Beach VAMC, I had the knowledge and experience to help veterans and their families cope with trauma and crisis. However, I was not prepared for the magnitude of the cries for help brought on by the Hurricane. These New Orleans survivors needed to vent their frustration share their cries of pain, and to openly express their fears of loss and uncertainty. I was there to provide counseling, support, and a much needed ear to hear the pleas and desperation of those with fears of being helpless and hopeless.

This experience was rewarding and challenging for me. It changed my life in so many ways! I truly learned to respect "Mother Nature" and the devastation that can occur from her wrath. This experience strengthened my love and appreciation for my family and friends, and it gave meaning to the value of "we can not do this alone". During my deployment, my WPB VAMC family called my daughter and husband daily. As I missed my daughter's 9th birthday, which occurred over the time I was in Houston, my WPB VAMC family gave her a birthday party, which was highly meaningful and special for my family and me.

This experience further gave me the opportunity to meet a lot of good hearted people at the Michael E. DeBakey VAMC, at the US VETS - Houston, TX, and the New Orleans survivors. Through this crisis experience, I learned the true meaning of Social Work. I thank the Barry University of Miami, Florida, and the West Palm Beach VAMC for providing me with the skills and confidence needed to respond to the many challenging and overwhelming cries for help.

Finally, I would like to thank Mr. Gordon Broom, the West Palm Beach Veterans Affairs Medical Center Homeless Program Social Work Associate for creating and providing the buttons, "Pray for New Orleans Hurricane Katrina 8-29-2005." These buttons were invaluable to the displaced citizens of Hurricane Katrina and to me, as they gave hope when it was most needed.

As a final thought, I learned many days into my deployment that my family in Louisiana made it through the Hurricane and that they were alive and well. They

remain part of my heart and my purpose for the work I do. As for my daughter, her father, her godfather and her many friends, we had a belated 9th birthday party, which she postponed until I returned home safely. This was truly a day of celebration for all of us affected by the year of the Hurricane.

PROMOTIONS

- **Debbie Amdur**, formerly the Chief of Social Work at the Washington, DC VA Medical Center, has been selected as the Special Assistant to the Director at the DC VAMC.
- **Bonnie Ballantine** and **Harvey Potts** have been selected as the new Co-Chairs of the Oklahoma City VA Medical Center's Social Work Practice Council. They will serve as co-SW executives.
- **Sandra Beahm**, SW Executive at the Butler VA Medical Center, has been selected to develop a new substance abuse aftercare peer to peer program at the Pittsburgh VA Medical Center.
- **Karyn Berlin** just began her rotation as the Social Work Executive at Iowa City VA Health Care System.
- **Sevena Boughton** will serve as Acting Chief during recruitment for a new Chief at the DC VAMC
- **Denise Coutsouridis** is serving as Acting Social Work Executive at VA New Jersey.
- **Jane Flanagan**, social worker in the Geriatrics & Extended Care Service Line at the Beckley VA Medical Center, has been chosen as the facility's Social Work Executive.
- **Glenn Gilbert** has been selected as the new Behavioral Health Care Line Leader at the Stratton VA Medical Center in Albany. Glenn has a long, distinguished career with VA, including running the Behavioral Health Clinic and the CWT Program. He's been a supervisory social worker, field instructor, role model and mentor for many social workers at Albany.
- **Linda Graham** has been selected as the new Chief, Social Work Section, Mental Health & Behavioral Sciences Service at the West Palm Beach VA Medical Center. Linda had been serving as Acting Chief.
- **Robin Handwerker** is serving as Interim Social Work Executive at the Coatesville VA Medical Center.
- **Luz Hein**, formerly the business manager for the Geriatrics Care Line at the Prescott VA Medical Center, is the new Chief of Social Work at Long Beach. Luz served as Chief of Social Work at Fort Howard and assisted with the merger of the Social Work departments at the consolidated VA Maryland Health Care System.
- **Dean Huber**, Social Work Executive at the Marion VA Medical Center, has been promoted to the new

position of Program Management Officer of the Extended Care Line, which includes oversight of Social Work, Community Health and the Nursing Home Care Unit.

- **Kay McBrady**, who has been serving as Social Work Executive at the St. Louis VA Medical Center, has been named Chief of Social Work following a reorganization that resulted in reconstituting Social Work Department.
- **Delores Reynolds** will serve as Acting Chief of Social Work at the Detroit VA Medical Center.
- **Susan Shelton** has been selected as the new Supervisory Social Worker at the Marion VA Medical Center. Susan had been a staff social worker at Marion. She will be working for Dean Huber in his role as Care Line Director.
- **Sue Stevens**, Chief of Social Work at the Fayetteville VAMC, has been selected as the Chief of Social Work at the Memphis VAMC, effective April 3rd.
- **David Ulkoski** has been selected as the new, full-time Social Work Executive at Wilkes-Barre VA Medical Center
- **Sheila Womack** has been selected as the Chief of Social Work at the Salisbury VA Medical Center.

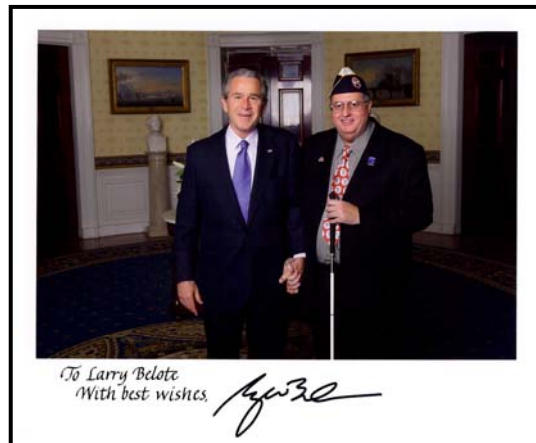
RECOGNITIONS

- **Judy Arnold**, Associate Chief of Social Work at VA Eastern Kansas, has been invited to serve as Co-Leader for the 2006 class of Leadership VA.
- **Milton Ayala**, Chief of Social Work at the South Texas VA Health Care System in San Antonio, was elected to serve on the Committee on Nominations for the Society for Social Work Leadership in Health Care (SSWLHC). This is an affiliate group of the American Hospital Association. Each state has a chapter. The Society has a number of committees. This group solicits nominations for other committees and for other elected positions.
- **Connie Jo Campbell**, social worker, Salt Lake City VAMC, did a tremendous job hosting the 20th Annual Society for Transplant Social Workers Conference. The conference is a 2 ½ day program offering some interesting topics and workshops such as: *Relying on the Kindness of Strangers*, *From Donor Potential to Transplant Reality*, *When the Doctor is the Dad* and *Midlife Makeover*.
- Thanks to **Melanie Goldman**, Homeless Veterans Program Coordinator at the Muskogee VA Medical Center, a local non-profit organization was awarded a \$400,000 grant



for a 31-bed transitional housing program in Tulsa for homeless veterans in recovery. Melanie assisted "12 for 12" in developing their plans and helped them with their grant proposal.

- **Wendy Hepker**, former Social Work Chief and current Health Systems Specialist in VISN 7, passed the ACHE exam, making her a Certified Health Care Executive.
- **Douglas Mitchell, JR.** LCSW, Chair, Social Work Department, VAMC Phoenix has been appointed by the Governor of Arizona to the AZ Board of Behavioral Examiners, Social Work Credentialing Committee for a two-year term.
- **David Rabb**, Executive Assistant to the VHA Diversity Advisory Board and social worker, has been selected for the 2006 class of Leadership VA.
- **Jerry Satterwhite**, Chief of Social Work at Birmingham, received his 40-year pin this month. In his long and illustrious career, Jerry has served as a SWALT preceptor, a mentor and faculty in the Allied Clinical Services Mentorship Program, an informal mentor to countless new chiefs and executives, a three-term chair of the SW Leadership Council and chair of several other SW committees.
- **Larry Belote**, social worker, South Texas VAMC, accepting award on the behalf of the Blinded Veterans Association from President Bush.



Larry is the national president of the association. On November 11, 2005, the Presidents of the National Service Organizations are invited to the White House for Breakfast. There was also a photo session with the President. After the breakfast they went to Arlington National Cemetery for the Veteran's Day events including laying a wreath on the tomb of the Unknown Soldier in which Larry participated. He has served on the national board of directors for 7 years. Larry will always remember several things from that memorial. He was surprised to see in the bathroom that the paper hand towels had the American seal. It was uncomfortable to simply use the very high quality towel and then throw it away. Larry is legally blind and sees the world in a blurry fog. As he entered the room to have his picture taken, he was unable

to tell which person in the room was the President. He turned to his military escort and attempted to inform him that he needed direction to the right spot. He was using his white cane. The President overheard Larry and told the Officer he would assist him. He took Larry by the arm and led him to the appropriate spot and angled him for the photo. Larry and the President chatted, and he asked Larry where he was from. When Larry said San Antonio the President was delighted, telling Larry it was always good to have friends at the White House from Texas. How did Larry put all this in perspective? The first question someone had was "How was it in D.C.?" He replied, "This year on Veterans Day I got to go to the Whitehouse and to Arlington National Cemetery. The ceremony at Arlington including laying a wreath at the Tomb of the Unknown Soldier was very inspiring. Such an event rededicates one to the mission of serving veterans. I will soon have a picture of me shaking hands with the President. This is pretty overpowering stuff for a social worker. People wondered if this was the biggest thing I had ever done in my life. It is easy to get swept up in this type of world, but it is not what my job as a social worker and VIST Coordinator is really about. So what did I think while I was having breakfast at the Whitehouse and standing behind the Vice President at Arlington? Is this the highlight of my career? I am pretty happy and very comfortable being back at my desk in San Antonio. Yes, the phone rings constantly, I am behind in my paperwork, and people are always coming by my office, but that is the way I like it. Maybe it has to do with being a social worker, maybe it is just me, but I will take a phone call from a blind or visually impaired veteran telling me in an emotional voice that he/she just read the newspaper again, over a picture on the wall any day."

AWARDS

- **Milton Ayala**, Chief of Social Work at the South Texas VA Health Care System in San Antonio, was recently awarded the Legion of Merit Medal and was inducted into the Fort Benning OCS Hall of Fame.
- The Central Texas VA Health Care System's HCHV Outreach Team was recognized with honors as nominees for the Olin Teague Award.



Congratulations to **Jim Brown, Priscilla Torres** and **Vivian Washington!**

- Two Social Work leaders have been accepted into the Executive Career Field training program. Congratulations to **Kristin Day**, Deputy Director of Social Work in VACO, and **John Sperandeo**, Chief of Social Work at Northport VA Medical Center!
- **Lena Richardson's**, Social Work Exec, Augusta VAMC poster, "Building Trust with OIF/OEF Combat Veterans and Linking Them to the Appropriate VA/Community Care Partner", presented at the November 2005 Association of Military Surgeons of the U.S. (AMSUS) conference, received the "Best in Innovation" award. The poster and the award are both "firsts" for VHA social workers.



I am thankful for this honor to represent the Social Work Profession, Association of VA Social Workers and the Augusta VAMC, Augusta, Ga. This is a celebration for which all social workers should be proud. It is this distinguished recognition which acknowledges our contributions to the profession. Further, it is an opportunity for us to pursue continuation of our innovative skills in programming and patient

care. More importantly, the poster was an opportunity to compete with non-social workers. As a winner, this is a testament to our creative skills in program building. At the Conference, I witnessed the uniqueness of the Military soldiers and felt a bit intimidated initially. However, as I communicated with them, I was mindful of the intent. My intent was to strongly advocate for this new group of soldiers a service model which is "Just in time" and at the right environment. My thoughts were clear; I was a winner by my presence at the Conference.

I believe in Winning and Programming. This poster presentation illustrated several things: Social Workers are unique and the catalyst and ambassador for holistic care, to include the family and community. Learning of the win was a WOW Expression for me. I knew it was a winner when the presentation was precise, and enthusiastically presented. Winning was important, but the real win for me was the full support of my VISN Director, Mrs. Linda Watson for funding and staff. This kind of support is another win and wow.

To those of you with great ideas, my advice is to challenge yourself to embrace new ideas and programs. Our veterans and families are deserving of this creativity. I enjoy Winning and look forward to becoming the "Best Transition Center in VA"

- **Linda Saucedo**, LCSW and **Andrew Miller**, LCSW social workers at the Austin Clinic received Certificates of Appreciation from Central Texas HCS Director Bruce Gordon (left). The social workers were honored for their nomination for the 25th Annual Olin E. Teague Awards for significant contributions in the medical, educational, and psychosocial rehabilitation and improvement in the quality of life of our nation's homeless veterans.



IN THE NEWS

- **September/October 2005 issue of Vanguard:** Check out social work coverage: **Debbie Amdur**, Chief of Social Work at the D.C. VAMC, page 22 talking with a veteran evacuated from Gulfport to the D.C. Armed Forces Retirement Home. **Iliana Elizando**, South Texas VA Health Care System page 23 assisting a veteran in the San Antonio hurricane shelter. **Mary Ann Romeo**, the Chief of Social Work at Hines page 35, was honored by GSA for an innovative partnership with Catholic Charities to provide transitional housing for homeless veterans.
- **Brenda Fass**, VHA social worker liaison at Walter Reed Army Medical Center, was quoted in this month's issue of "Social Work Today" in the article titled, "Back from the Brink: Helping America's War-Wounded".
- **Sherilda Lyons**, social worker at the DeBakey VA Medical Center in Houston, submitted an article that has been published on the NASW Help Starts Here web page on working with Hurricane Katrina survivors. Her article will educate other social workers about VA social work efforts in disaster response, and since it appears on the Internet web page designed for consumers, can help shape the opinion that the public has about VA social workers. You can read Sherilda's article in this edition of Synergy on page 6.
- **Richard Romaniuk**, supervisory social worker in the Cleveland VA Medical Center's Comprehensive Homeless, Substance Abuse and Grant & Per Diem Program at the Brecksville campus, published an article titled, "Beyond Help or Help Above and Beyond" in the February 2006 issue of Quality Matters, the newsletter of the Ohio Department of Mental Health. You can Richard's article in this edition of Synergy on page 5.
- **Brian Thompson**, social worker Tomah VAMC, recently appeared in the "Corporate Report Wisconsin – September 2005" in an ad for The University of Wisconsin Madison.

Congratulations to everyone

SYNERGY WELCOMES THE FANTASTIC ROVING REPORTERS

- Darrell Spates, MSW Houston VAMC
- William Hayes, MSW Salisbury VAMC
- Melanie Bowman, LMSW Northport VA Medical Center
- Tanya L. Faulk, LCSW, C-SWHC VA Tennessee Valley Healthcare System
- Barbara Fiaschetti, MSW, LCSW W.G. (Bill) Hefner VA Medical Center
- Katherine E. Smits, LICSW Martinsburg VAMC
- Georgeann McCrary, MSW, LISW Columbus VAMC
- Donna Bacon, LCSW Alaska VA Healthcare System
- Catherine Jenkins-Naze, MSW, LCSW Portland VAMC
- Darlene Dunaway, LCSW Lead Social Worker CBOC Cincinnati VAMC
- Ellen Quigley, MSW Boston VAHCS

We're on the Web!

Visit us at:

Intranet: vaww.va.gov/socialwork

Internet: www.va.gov/socialwork

National Social Work Committee Updates & Reports

The Public Relations Committee Social Work Month Toolkit

Since 1984, March has officially been designated as a month to recognize and acknowledge the contributions to the quality of life made by America's half-million social workers. Often working behind the scenes, social workers are trained to address problems that some can't or others hope will simply go away.

VA social workers have always risen to the challenge of presenting relevant and compelling programs during Social Work Month. To make this task easier, the VA National Social Work Public Relations Committee solicited ideas to promote Social Work Month from social workers at VAs around the nation.



The response has been gratifying. **VA social workers have great ideas!** The PR Committee has compiled these ideas, along with ideas from past issues of *Synergy*, into an easy-to-use toolkit designed to save you time and improve your Social Work Month activities. The toolkit has been sent out on a recent newflash and can also be accessed by going to the COLLAGE website.

Research and Evidence Based Practice Committee OEF/OIF Research Project Process Description

Submitted by: Debra A. Volkmer, LCSW OEF/OIF Program
Coordinator W. G. (Bill) Hefner VA Medical Center

Social workers throughout the country often have projects that remain undeveloped due to the fear of going through the research development and approval process. The following is a description of the experience and lessons learned through completion of a student research project conducted in conjunction with the VA Research and Evidence Based Practice National Committee. A great deal was learned from this process

and believe that it will be much easier the next time around. This article is written to encourage others to push through the real and perceived barriers and forge ahead with promotion of social work research.

During the fall and spring semesters of social work intern training a research project entitled: *Assessing Needs of Returning Operation Enduring and Iraqi Freedom (OEF/OIF) Veterans* was conducted. This was a learning experience for two interns and three seasoned social workers completed in conjunction with the FY '05 goals of the Research and Evidence Based Practice Committee (REBPC), formerly known as the Research Advisory Board (RAB).

The process was extensive and at times the students considered dropping out, but managed to regroup and continue the project to completion. Ultimately the project had full approval of the VAMC's Internal Review Board (IRB) and Research and Development Committee (R&D). The project has been submitted to the *National Association of Social Work Research Journal* for review with anticipated publication.

Lesson Learned: Stay positive and set clear goals and timelines

The first goal was brainstorming and getting a clear idea of what direction to go in and how to get the tools necessary to complete the initial evaluation. Once this step was complete, there was a feeling of jubilation among the team thinking "Great idea, the rest will be 'a piece of cake!'" Wrong! In hindsight, the team did not realize what would be required to get IRB and R&D, approval – a process that would ultimately take three months from start to finish.

While this is not an article about how to get IRB approval, one important thing learned was to get someone with more experience to give an overview of each step of the process, what level of detail will be required and to get a realistic estimate of how long it will take. Suffice it to say that the greatly enhanced VA requirements for patient safety and confidentiality mean that a large amount of time will be devoted to these steps – even before the actual research can be started.

Along the way, the team sometimes had moments of second thoughts and even considered "ditching" the project. One of the students said: "It is so difficult to

even submit a project, it's almost not worthwhile." However, the team felt that this particular research project had special merit because of its originality as well as its ability to address the current needs of returning combat veterans. After several attempts, the team was able to compile a completed document for submission to the IRB and the initial review process began. The project was approved, with minor changes, by both committees during the first round of reviews.

Lesson Learned: Begin work with members of the IRB and R&D Committees from the beginning. This can make the difference between approval and rejection during the first round of reviews.

Now for the actual research. By this time, students were three months into placement and with the upcoming holiday break, there were further delays in waiting for the students to return for their second semester to begin conducting the client interviews. The students were planning to introduce the project and conduct interviews in conjunction with a group and managed to get five interviews during their first attempt. However, all five interviews were initially determined to be invalid because the wrong informed consent forms were used (e.g., ours lacked the proper IRB stamp). In order to use the data, it was necessary to re-consent three of the five respondents.

Lesson Learned: Review all procedures and forms carefully prior to beginning any protocol. Have someone with research experience (like the IRB coordinator) review them as well.

The team began to re-collect data and managed to reach the goal of 15 interviews. Next began the arduous process of trying to make sense of the data collected. By this time, the students were close to graduation and knew there would be a rush to get the project completed during their internship. Both students reported that one of the challenges to completing a research project during internship was trying to get everything done in the short time available.

Lesson Learned: Know your restrictions and have a plan for problems within the project. Allow time for set-backs.

The data analysis was finalized prior to the end of the student placement. This led to the question, whether or not to write a journal article for publication. Both students and staff team members decided that it would be of benefit to the veterans and practice community to share the data collected, so the staff team and one of the students continued with the project to completion and submission for publication. The journal article had to be re-submitted to the R&D committee for review and approval prior to submission to the selected Journal.

Lesson Learned: Be sure you know which publication you will be submitting to and write the journal article accordingly. There are strict guidelines regarding article submission and they differ according to the journal. Some VAMC's require that publications be reviewed before

submission, so check with you R&D committee ahead of time.

In conclusion, social work research is becoming an integral part of the profession. The first step to involving social workers in research is to reduce apprehension, help make the process more transparent and become user-friendly to the clinicians wanting to become involved. This can be demonstrated through projects, such as this, that have gone through the process to fruition. There were times that this project seemed doomed, but through a team effort and assistance from the REBPC and other resources, the team was able to complete the project. The team learned that if you remain positive and keep your eye on the goal helping the veteran and bettering your profession, high quality research, and a publication to inform others is achievable.

Lesson Learned: During any project of this magnitude, "Don't forget to Breathe."

Good Luck in your research endeavors.

For additional information on the project contact debra.volkmer@med.va.gov

A message from the Social Work Education Committee and Research Advisory Board

Attention:

Social Work Interns, Intern Coordinators and Intern Supervisors. Tell us about your projects, your research, your innovative groups while in placement at the VA. The VHA SW Education Committee and The Research Advisory Board are again collaborating in surveying the exciting and innovative activities of VA interns. Last year 40 social work interns, representing 21 schools of social work submitted 36 projects. We think that there are a lot more projects that our interns are conducting than we collected. We want to recognize our interns' good work and showcase the VA's receptive and creative educational environment. School projects that relate to the VA field placement are welcome. If you are thinking about doing a project for Social Work month, please submit it. We want to demonstrate the cutting edge nature of some of the projects and their positive impact on veterans we treat.

Please submit your intentions to engage in a project to Mel.Tapper@med.va.gov

A one page summary of the project is due in the beginning April 2006. An outline of the submission summary will follow.

The Professional Standards Committee

Submitted by: John O'Brien MSW, Social Work Executive, Baltimore VAMC

(SWPSC) has made significant advances regarding several of our projects since the last report in the November 2005 issue of Synergy.

- **Social Work Competencies:** The Social Work Leadership Council has reviewed and approved the general social work and student competencies. In addition, work has been completed on the supervisory/program coordinator competencies and we are awaiting comments by Kristen Day. Next up: Executive/Chief competencies.
- **Competency Assessments:** The core competencies for staff have been completed and forwarded to the SWLC for review.
- **Case Management Guidelines:** The final review is complete and will be forwarded to the SWLC for review/approval.
- **JCAHO Site Visit Preparation Toolkit:** This is a preparation toolkit that consists of reviews from other chief/executives who have had surveys that others can review to help in their preparations. The template for the survey form will be sent out to facilities after they have undergone a JCAHO visit. The blank template will be placed in DocuShare.

Other projects remain in their infancy stages and include:

- **Standards for Clinical Social Work Practice in CBOC's:** Work on a questionnaire is presently in progress with a goal of a position paper on minimal standards.
- **Practice white paper on the minimum standards for brief clinical assessments and treatment:** we are nearing the end of our literature review.

Please remember that the SWPSC is available for guidance regarding social work practice issues. You may contact the SWPSC chair, John O'Brien at: 410-605-7012 or by email at john.obrien@med.va.gov

"The question is: If it doesn't go well, how quickly can you pick yourself up for the next challenge? "

William F. Feeley, MSW, FACHE
Deputy Under Secretary for Health for Operations and Management

Staffing and Clinical Practice Committee

MILITARY FACTS FOR NON-MILITARY SOCIAL WORKERS

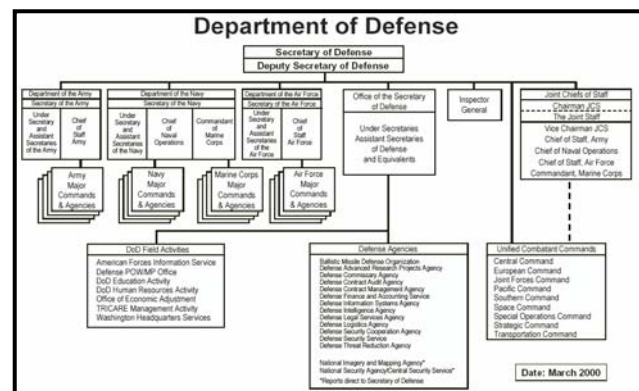
Submitted By: Lisa McGuire, LICSW, Tomah VA and Jennifer Summers, LICSW, Northampton VA Public Relations Committee Members

In order to enhance VA social workers' knowledge of this system, the **Social Work Staffing and Clinical Practice Committee** has developed a handbook to assist social workers in understanding the intricacies and hierarchy of the armed forces. The hope is that this information will be helpful in addressing the Seamless Transition goals for VHA, and to meet the educational needs of a large group of social workers that frequently have not had personal experience with the military.

The combined United States armed forces consists of 1.4 million active duty personnel along with several hundred thousand in the United States Army Reserve and United States National Guard. The United States military is a complex organization with a multi layered system of military ranks to denote levels of authority within the organization.

Within the handbook you'll find information on:

- **Department of Defense organizational chart**



- **Overview of Military Rank**
- **Chapters for each branch of the military**
 - Army
 - Air Force
 - Marine Corps
 - Coast Guard

➤ **Listing and pictures of medals**

- Bronze Star



- Purple Heart



- Silver Star

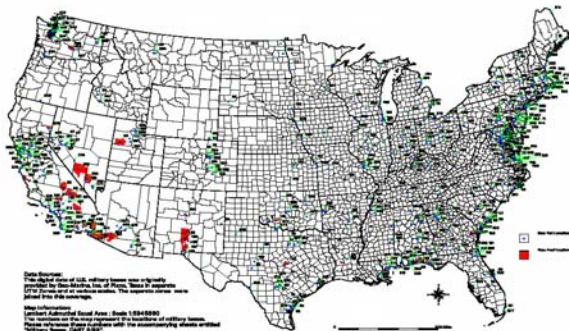


- POW



➤ **Maps of US military bases**

Military Bases in the Continental United States



- **Dates for period of wartime**
- **Determination of Combat Veteran Eligibility**
- **Helpful websites**

The handbook has received rave reviews from social workers who have seen copies as well as directors within the VA. The handbook is well-organized and easy to read.

Rave Reviews

Military Facts For Non-Military Social Workers:

"I plan to give the document to the Presidential Management Fellows as part of their orientation/welcome to VA as well as use it with others who don't have a military background."

- Director of HR Development in VACO

"I've shared this with my entire staff and they feel it will be very useful."

- RO Director

To access Military Facts for Non-Military Social Workers please visit:

http://vaww.collage.research.med.va.gov/collage/E_socialwork/

<http://vaww.va.gov/socialwork/>
choose the "Docushare-Link"

Book Review

FINDING MY WAY: A TEEN'S GUIDE TO LIVING WITH A PARENT WHO HAS EXPERIENCED TRAUMA

By Michelle D. Sherman, Ph.D., Oklahoma City
VAMC and DeAnne M. Sherman

Submitted by: Margaret Carroll, MSW, Oklahoma City VAMC
and Michelle Sherman Ph.D., Oklahoma City VAMC

Every day VA social workers serve many traumatized veterans and their families, yet few resources are available for teenagers. Dr. Michelle Sherman, a clinical psychologist at the Oklahoma City VA Medical Center, has written a unique, supportive, first-of-its-kind book that honestly and gently addresses key issues in dealing with a parent who has experienced trauma. An

important resource for VA social workers, this interactive book includes clear information and opportunities for self-expression.

As social workers know well, everyday life in families dealing with parental trauma can be confusing and frightening for the kids. Nothing feels the same as it was before the trauma. Many youth live every day with uncertainty, embarrassment, anger, shame, sadness, guilt, and fear. There are very few resources available for young people.

The VHA's Mental Health Strategic Plan urges clinicians to provide FAMILY-CENTERED mental health services to all of our veterans. Further, many soldiers returning from Iraq and Afghanistan have experienced significant trauma, and their children need our attention and care.

FINDING MY WAY provides readers with:

- Comfort in knowing that they are not alone
- Facts presented in clear, concise language
- Opportunities for reflection and journaling
- Tips on healthy coping skills
- Help in identifying supportive people and in dealing with friends
- Resources for further learning
- Support, encouragement, and hope

Part One of *Finding My Way* clearly explains PTSD and other common responses to trauma, reviews co-occurring problems (including addictive behavior), and describes numerous treatment options. Part Two gently encourages readers to address their own strong emotions including anger, fear, confusion, sadness, and shame. Readers are then guided through the process of learning valuable coping tools, identifying their social support network, and figuring out how to deal with their friends. Part Three includes frequently asked questions, a glossary, and an extensive resource list.

MICHELLE D. SHERMAN, Ph.D., is a licensed clinical psychologist and a nationally recognized expert on the effects of trauma and mental illness on the family. She is the Director of the Family Mental Health Program at the Oklahoma City Veterans Affairs Medical Center and the co-chair of the Family Studies Team of the South Central Mental Illness Research, Education and Clinical Center (MIRECC). She is also a clinical associate professor in the Department of Psychiatry and Behavioral Sciences at the University of Oklahoma Health Sciences Center

DEANNE M. SHERMAN, Michelle's mother, is a teacher with over 40 years experience educating and empowering teenagers. In addition to being an experienced public speaker,



DeAnne also volunteers her time teaching and mentoring junior high and high school students in the performing arts.

FOR MORE INFORMATION:

Please visit www.seedsofhopebooks.com or email authors@seedsofhopebooks.com for more 'Finding My Way.'

Synergy Articles

SYNERGY welcomes best practice/articles and innovative ideas on any topic that relates to social work within the Department of Veterans Affairs. While social workers are our primary target group, contributors can be from any discipline that works with social work. *SYNERGY* is an excellent tool for communicating information and ideas with hundreds of your peers.

Need an idea for an article:

- Geriatrics & Extended Care
- Nursing Home Care
- TeleHealth
- Palliative Care
- Mental Health
- Primary Care Social Work
- Hospice
- Women Veterans
- ACA - Advanced Clinic Access
- PTSD

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VA's Internet web address for the Health Eligibility Center has changed.

From: <http://www.va.gov/elig/>

To: <http://www.va.gov/healtheligibility>



Announcements & Web Links



OUR SPECIAL EDITION of SYNERGY on OIF/OEF - updates/new programs/helpful websites. This publication has been delayed and is expected to come out in July 2006. Articles are still be accepted through May 1, 2006. Articles should be submitted directly to Erica.Taylor@med.va.gov

IN OUR NEXT EDITION: Our spring edition will focus on Social Work Month Activities, so send along your celebrations and photos. Not only will these be published in Synergy, they will also be added to the Social Work Month Toolkit that is maintained by the National Public Relations Committee. We will also be continuing with our introduction of social work leadership under the *VA Social Worker Success Story Project*.

DEADLINES article submission for future SYNERGY's:

April 7, 2006
July 7, 2006
October 7, 2006

VHA SW Monthly Conference Call

The VHA SW conference call is a chance for every social worker to listen, learn and ask questions on issues related to social work. The purpose of the calls will be to share new information, highlight best practices, discuss clinical and administrative challenges and provide support. Topics of discussion are based in part, on social workers suggestions. CEU's will be offered for quarterly conference calls.

Please e-mail Kristin.Day@med.va.gov to identify what you would like to include in the calls. Feel free to include best practices too. Let everyone benefit from you initiatives!

FY06 schedule

4/14	1:00 EST
5/12	1:00 EST
6/9	1:00 EST

As you can see this is the 2nd Friday of the month. The call in number is 1-800-767-1750 and our access code will be **16389 (access code is 11573 for 11/18 call.)** This will be the access code for all future calls. Please make calls as a group as there are only a limited amount of lines.

WEB SITES

If you have some great web sites and you'd like to share them with our readers, please send the e-mail address and a short narrative about the website to:

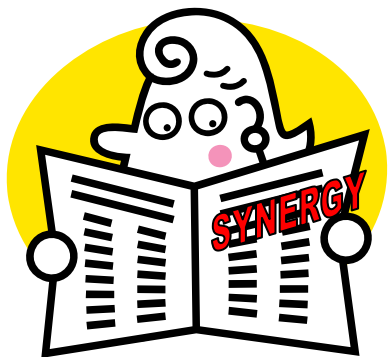
Jennifer.Summers@med.va.gov or Erica.Taylor@med.va.gov

- **Social Work Community of Practice.**
<http://vaww.webboard.med.va.gov:8040/wb/default.asp?boardid=24>
- **COLLAGE**
http://vaww.collage.research.med.va.gov/collage/E_SocialWork/
- **VHA Polytrauma Telehealth Network (PTN) is now available from the OCC intranet site.**
<http://vaww.va.gov/occ/Telerehabilitation/Polytrauma.asp>
- **GovBenefits** is a resource for government-to-citizen assistance programs available. The website lists benefits by state, category, and features a detailed resource page.
<http://www.govbenefits.gov/govbenefits/index.jhtml>
- "Using Medicaid to Support Working Age Adults with Serious Mental Illnesses in the Community: A Handbook."
<http://aspe.hhs.gov/daltcp/reports/handbook.pdf>
This site has loads of info for Hospice Providers
<http://www.cms.hhs.gov/providers/hospiceps/>
Here's the comparable home health page
<http://www.cms.hhs.gov/providers/hha/>
- To sign up to receive the Alliance Online News, please go to <http://naeh.forumone.com/subscribe/>

Data Bytes Identity Crisis Solved!!



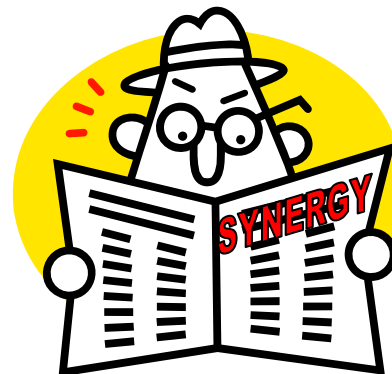
The VHA Social Work Data Management Committee hosts a monthly Question & Answer session for the field. Dial in number is 1-800-767-1750 Access Code # 17386 on the 3rd Wednesday of every month. It would be helpful to send questions to VHA SW Data Management prior to the call in so that we can be as helpful as possible. Send questions to Carroll.McShane@med.va.gov. We look forward to hearing from you.



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