



Clinical Committee Meeting

June 14, 2021, 5:00pm - 7:00pm

Members in Attendance	
Jessica Heidebrecht	Catrina Brown
Jim Morton	Andrea Shaheen
Kelly Breau	James Dubé
Alex Hill	Errin Williams
Robyn Hazard	Barbara Roberts
Patrick Daigle	Brandy Gryshik
Jacquelyn Allan	
College Staff in Attendance	
Alec Stratford (Executive Director/ Registrar)	Neha Singh (Admin)

1. Welcome and Call to Order

- Meeting was called to order at 5:00pm

1.1. Approval of Agenda

Motion: Moved that the Meeting Agenda is accepted as presented

Mover: James Dubé

Seconder: Patrick Daigle

Motion Carried

2. Appointment of Chairs:

Motion: Moved that the Minutes from May 10th Meeting are accepted as Presented

Moved: James Dubé

Seconded: Alex Hill

Motion Carried

3. Commitment Document: Verbal Presentation

a) Discussion opened on "Exploring the key attributes that inform the professional identity of a clinical social work practice"

- ED/R presented the Commitment document which represents objectives of what we need to explore and what should be the idea behind this focused group
- Project plan is mapped out for the next 16 months but may take more time depending on what we need to accomplish. ED/R invited the group to go through these commitments together and set out a road map for further exploration
- ED/R thinks that the toughest one to understand is the 'Professional Identity of Clinical Social Work practice', there are some components that can be used as a model to have that exploration through, for this first step, we should try and engage the membership, other professions, or members of public if possible, looking from their perspectives and what makes us unique, to see where other



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professionals see our uniqueness, this might give us some sense to where we need to strengthen our professional identity

- There is no one way Social Workers think, there is Critical and Traditional Social Work, that's a bridge that we have to sort through, these are really difficult questions to sort out as they are seen at a global context, it would be interesting to find some common grounds on those lines. ED/R feels the same way and finds it challenging, foresees this tension through out this project but we have some space to find the right dialect, perhaps to bridge the gap as we have to move forward and work through that tension
 - We should get some feedback and hear from colleagues from other professions specifically from Atlantic Canada and see how they perceive us. ED/ R thinks we as college can conduct a survey on that and get some data for further analyses, that can be one of the identified exercises to conduct as part of this process. How other professions see us and how we want to be seen could be different, probably we might want to do some advocacy work in that area once we come to an agreement on what identity we want to put forward, group thinks it will be interested to get a 360° view of how everyone (including ourselves) see our profession and how we connect with other professions in practicality, that's part of the dilemma, we Social Workers face to define what is unique about our work
 - We should open up to talk about the term 'Therapy' as a whole. The issue is, there are different kinds of therapy that bring different lenses, and here more specifically we are talking about mental health and additions, public tends to think the 'Therapy' as a generic term. ED/R thinks there is some language available out there that may fall within our scope and legal framework that we can pick up, define the scope, legislate/regulate it
 - According to the literature, identity of a social worker is that we function in a state of moral distress and crisis, there are never enough resources and always there are issues like lack of diversity, so the issue of identity we know it from the studies at international level as well as from the studies conducted here in Nova Scotia and at the federal level too, We should try to carve out a way of seeing Social work that we can define, and not just be reacting, what they think we do vs. what we are able to do. Take control and ownership to protect our Identity while there are some definitions out there, not sure we can rely on them.
 - Clinical function has many elements of Social Work practice, and we should not see Clinical Social Work is limited to Mental Health and Additions
- b) Discussion moved to the second section: *"Examine all risks to the public associated with the delivery of clinical social work services"* once we find our scope, ED/R brought forward some discussion points from the commitment document
- One of the things we can do in terms of broaden discussion on Ethics, is to have a few people come in (those having knowledge base) and talk in variety of these



areas. Merlinda Weinbeg's work is about 'what is Ethics in Social Work'. In the area of Competencies, Caroline Campbell can talk. These two can be very important people to talk about some of these issues.

- In the professional boundaries, group would like to see some recognition around 'youth and care' as that is a specialized group and would like to speak about risks to clinicians, how to protect people we work with, where we don't have a union. ED/R thinks we have technical issues around working with youth and children (areas like consent from parents) which other jurisdictions have better clarity around, so that's a good conversation to have. Also, around cultural lens when working with Family, when it comes to consent what can be shared, dynamics going around in the family in terms of culture and background. We should be doing the assessments with every topic, that how cultural content is relevant in that area. To mitigate some of the risk, these assessments are important.
 - Social work has to find itself as a profession that's interested in person, in relation to their environment. Clinical practice should grow out of that general understanding
 - We should analyze the risks involved If we do not utilise DSM only, as its hard for the clients to get the DSM narrative, as it is from the lens of psychology, psychiatry and medicine, client needs a narrative that is approachable and understandable. Social worker should be able to bridge between the diagnosis and the person.
- c) ED/R presented the last section: *'Examine regulatory tools best position to mitigate risks' from the document,*
- Overregulating could be an issue, we need to focus on the basics first (defining the scope of Clinical Social Work) and how all these other pieces we are talking about here could be interrelated, ED/R thinks, as administrator, the goal is to have minimal standard in place (and minimal regulatory tools) in order to mitigate as many risks as possible. As part if this exercise, we will see what all the other associations have, in terms of regulatory tools that they use.

4. Project Plan

- ED/R thinks next session/s we can start to outline what professional identity is and start to get some surveys out; perhaps by end of September, we will see where we land and start to utilize that analysis where we want to go. We will work through some of those questions around Professional Identity section. Part of that would be for ED/R to bring forward some background around practices at International level. We will continue to do those assessment and get to a defined scope by Nov/ Dec and then moving forward to our conversations around Ethics and Professional Boundaries, that will take us to the spring, where we will talk about Regulatory Tools, maybe we can look to adjust these timelines as we go. The committee will be working through this until 2023.



- We need some sub-committees to take up specific tasks, and then the smaller group can come back to the bigger group for inputs/ feedbacks and to get the job done, for example- for developing a survey a smaller focussed group can work through that when others focus on something else. This is a high-level project such structure as we move through this, can be implemented.
- ED/R plans to present some content on Professional Identity in our next meeting, start to have some preliminary conversations around questions we may need to ask, then that would be a great point for the subcommittee to come in play and start drafting those surveys, and come back for further conversation, we next can invite guest speakers, then we are on our way.
- As we are moving to an operational level, group thinks it would be helpful to us to have more considerations amongst ourselves and have some inter-committee communication around what we think our identity is, as the work would begin to develop surveys, it would be helpful to have our input as a backdrop, to the kind of questions we might want to explore, ED/R mentioned that the intend is to go through that process first from this group around what informs that professional identity and then move forward with those themes in the survey to see what resonates. We should have a lot of room to hear ideas in those surveys (keeping the open-ended questions) to hear more about what others think rather than what we tell them, We have students coming on board in fall, we can task them with this work as well
- Plan for the next meeting: ED/R will be prepared to present and have some questions to help facilitate some conversations around Professional Identity and then we will start to gear up to do the Survey and following that will start to line up some guest speaker to keep us moving.

5. Adjournment:

Meeting was adjourned at 6:20 pm by the Chair.

NEXT MEETING: Announcement made: the next committee meeting will be held on July 12th, 5:00 pm-7:00 pm.