

Psychiatric Social Work

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Introductory Guide to Psychiatric Social Work

By Kaitlin Louie

Psychiatric social work is a specialized type of medical social work that involves supporting, providing therapy to, and coordinating the care of individuals who are severely mentally ill and who require hospitalization or other types of intensive psychiatric help. Psychiatric social workers complete a variety of tasks when working with clients, including but not limited to psychosocial and risk assessments, individualized and group psychotherapy, crisis intervention and support, care coordination, and discharge planning services. Psychiatric social workers are employed in a wide range of settings, ranging from intensive inpatient wards to outpatient psychiatric clinics.

Psychiatric social work is a challenging and very demanding profession. Social workers in this field must work closely with individuals suffering from complex and hard to manage conditions, who are in deep emotional distress and/or who may be a danger to themselves or others. Psychiatric social workers may also encounter difficulties in getting clients the resources and support they need to fully address their problems. However, some

individuals gravitate to this work for its constant intellectual and professional challenges, and for the opportunity to help deeply vulnerable populations.

Due to their intensive work with clients' severe mental health and behavioral issues, psychiatric social workers often need graduate-level training in clinical social work methods, including psychotherapy, crisis interventions, group therapy, and developing sound treatment plans in collaboration with mental health and medical staff. Therefore, individuals interested in this field of work should strongly consider earning a Master's in Social Work with a concentration in clinical or psychiatric social work from a CSWE-accredited institution.

Types of Psychiatric Social Workers

Psychiatric social workers' responsibilities and client populations will vary significantly depending on their work setting, and the teams to which they are assigned at their place of employment. For example, some social workers within the psychiatric departments of hospitals will specifically support severely mentally ill individuals who are involved in the criminal justice system, or work exclusively with children who are victims of trauma.

In general, types of psychiatric social workers include inpatient psychiatric social workers, emergency and crisis services

psychiatric social workers, and outpatient psychiatric social workers. Depending on their work setting and specific role, some psychiatric social workers may fulfill tasks in all three areas— inpatient, outpatient, and emergency services.

Inpatient Psychiatric Social Workers

Inpatient psychiatric social workers work in the psychiatry departments of hospitals and medical centers with patients who have been hospitalized for debilitating or dangerous psychological and/or behavioral issues, such as severe substance abuse, psychosis, bipolar disorder, schizophrenia, and other conditions. Psychiatric social workers in inpatient hospital settings complete many different tasks to support patients, including conducting psychosocial assessments to determine patients' mental health status and needs; providing psychotherapy and other clinical services to help clients address their emotional, behavioral, and mental health challenges; communicating and coordinating with the larger treatment team to optimize clients' physical and mental health care; connecting clients with relevant resources and services; and facilitating clients' transition to other care facilities or back to daily life through discharge planning and follow-ups.

Psychiatric departments in hospitals tend to have several units that treat different mental health or behavioral problems. Anne Friedman, ASW, who works as an Associate Clinical Social Worker Fellow in Kaiser Permanente's Psychiatry Department,

explained to OnlineMSWPrograms.com how she works on multiple teams to serve the diverse patient population at Kaiser. “Within the Psychiatry department I’m on two teams, Chemical Dependency (CD) and Adult Mental Health. CD is an entirely group-based program, and I help facilitate an early recovery group two days a week and a drop in support group for dually-diagnosed (substance use and mental illness) patients once a week. Within the adult team, I do intakes for new patients, see a caseload of individuals, and run groups,” she explained.

In hospital settings, inpatient psychiatric social workers play a very important role in identifying and advocating for patients’ needs as part of a larger medical team. “In hospital settings psychiatric social workers are an integral part of the multi-disciplinary team, making recommendations for treatment, rehabilitation, and social service connections,” Lynsey Clark, MSW, who works as a psychiatric social worker at San Francisco General Hospital, in their Inpatient Psychiatric Unit, told OnlineMSWPrograms.com. “Within the hospital setting psychiatric social workers can make an enormous difference in the patients’ material reality through therapeutic interventions and by connecting them with valuable social services, which has the potential to improve their circumstances. We are also advocates for the patient, pushing for more time when needed and better placements.”

In addition to daily communications with the treatment team for a given client or group of clients, inpatient psychiatric social workers meet regularly with medical staff to develop and alter a client's treatment plan as needed. "I work with psychiatrists (MD's), nurses (RN's, LVN's and Psyche Techs) Occupational Therapists (OT's), and other social workers (LCSW and MSW's)," Ms. Clark explained, "Treatment for all patients is team based and all the disciplines meet four times a week in order to discuss the most appropriate treatment and care for the patient."

Psychiatric Emergency Services and Crisis Response Social Workers

For patients who are undergoing acute crises or are in danger of hurting themselves or others, psychiatric social workers conduct psychiatric assessments, short term crisis support, and care coordination as part of a crisis or emergency services team. Environments that employ crisis service psychiatric social workers include emergency care teams that work as part of a larger medical center and crisis services at public health departments.

Crisis and emergency services psychiatric social workers work with clients for a brief period of time to assess their needs, help them obtain the intensive care they require, and possibly recommend them for involuntary hospitalization. Crisis service environments tend to be more short-term than inpatient hospital psychiatric settings, as patients are generally directed to hospitals

and/or intensive care facilities where they can receive longer-term and more comprehensive care.

Hillary Paffenroth, LCSW, who works as a psychiatric social worker for Comprehensive Crisis Services of the City and County of San Francisco, explained how one of her main responsibilities is determining if patients need to be placed on a psychiatric hold, and how the types of clients she serves tend to be severely ill and in need of immediate assistance and supervision.

“The reasons that an individual would be placed on a hold are that they are currently: a danger to self, a danger to others, or gravely disabled,” Ms. Paffenroth explained, “The first two categories are fairly straightforward, if someone is suicidal or homicidal, or if their actions are placing themselves or others at significant risk of danger, they would meet criteria. The third category, gravely disabled, means that an individual cannot take care of their most basic needs such as eating, bathing, having a place to live, attending to a serious medical condition, etc.”

In her interview with OnlineMSWPrograms.com, Ms. Clark described her work in an emergency psychiatric setting, specifically Psychiatric Emergency Services (PES) at Contra Costa County Regional Medical Center. “At PES in Contra Costa County my patients were often experiencing psychotic episodes, mania, depression, suicidal ideation, homicidal ideation and self-harming behaviors,” she said, “The work is extremely fast paced and

demanding, [as we are] working with patients who have a very high acuity. Professional expectations included assessing the patient for risk, brief therapy, family reunification and assisting in the transfer or discharge of the patient.”

Outpatient Psychiatric Social Workers

Outpatient psychiatric social workers provide therapy and care coordination services to individuals who do not require immediate hospitalization, but who still struggle with severe mental illness and debilitating emotional and/or behavioral issues; oftentimes patients in outpatient psychiatric settings are at risk of needing hospitalization, or have been recently discharged from an inpatient setting.

In her work at Kaiser Permanente, Anne Friedman, ASW also has experience working with clients in outpatient settings. “I also spend two mornings in the Intensive Outpatient Program, for patients who are at risk of psychiatric hospitalization or who have just been discharged from a higher level of care. My patients are ages 18-70+ and come in with a pretty wide range of presenting problems—from heroin addiction to bipolar disorder to postpartum depression,” she said.

Outpatient psychiatric social workers tend to work for a longer period of time with patients, and can even follow them through multiple systems to help support them as they transition from intensive care back home or to another facility.

Charles Berman, MSW is an Intensive Outpatient Psychiatric Social Worker at the University of California, San Francisco's (UCSF) Citywide Case Management – Forensic Team, where he supports and provides therapy to severely mentally ill adults who are also involved in the criminal justice system. “[My colleagues and I provide] intensive wraparound services to clients as they cycle in and out of the jail, the state hospitals, local hospitals, and the community,” he told OnlineMSWPrograms.com.

In addition to her work in inpatient psychiatric settings, Ms. Clark worked for a period of time in an outpatient psychiatric setting, and described her daily responsibilities to OnlineMSWPrograms.com. “As an outpatient psychiatric social worker I provided individual therapy for patients with a variety of mental health needs including depression, anxiety, and PTSD,” she said, “At an outpatient psychiatric setting social workers are employed as therapists and they perform the same duties as MFTs, PsyDs and PhDs. They conduct various groups including Dialectical Behavioral Therapy, Cognitive Behavioral Therapy, and Seeking Safety, among others.”

What Psychiatric Social Workers Do

As mentioned previously, psychiatric social workers' main goal is to stabilize and support people experiencing intense psychological

distress or behavioral issues that are threatening their safety and well-being, or the safety and well-being of others. Psychiatric social workers accomplish this goal through a combination of diagnostic assessments (ex. psychosocial assessments and risk assessments), individual and group therapy, and care coordination/case management services.

Diagnostic Assessments

One of the most important tasks that psychiatric social workers have is conducting different diagnostic assessments of patients' mental health in order to determine their specific psychological issues and needs. The main assessment that psychiatric social workers conduct is the psychosocial assessment, which requires that the psychiatric social worker gather the following information:

- Primary and secondary psychological conditions (ex. depression, severe anxiety, PTSD, schizophrenia, bipolar disorder, etc.)
- Behavioral issues (substance abuse, violence, problems with emotional regulation, etc.)
- Familial, social, cultural, and occupational background
- Physical health status and medical treatment history
- Mental health status (as measured by tests that measure mood, cognition, motor skills, perception, etc.)
- Mental health treatment history
- Current medications and treatment support systems

Psychiatric social workers may use information gained from the psychosocial assessment to also complete risk assessments, which are targeted evaluations of whether an individual may experience an adverse outcome in their current state and situation. Psychiatric social workers use risk assessments to determine the level of care that a patient needs (ex. hospitalization, an inpatient psychiatric hold, or intensive outpatient psychotherapy).

Care Coordination (Case Management)

Once they have determined the mental health status and treatment history of their patients, psychiatric social workers are responsible for ensuring that their patients receive the mental health support they need. They accomplish this goal by:

- Developing a patient treatment plan in collaboration with medical and mental health staff, using information from the psychosocial assessment
- Monitoring a patient's progress throughout his or her treatment
- Communicating with the treatment team as needed regarding developments in a patient's mental health status
- Explaining different treatment options and plans to patients
- Connecting patients to relevant resources within and outside the treatment facility

- Coordinating safe and effective discharges when the time comes for patients to transition to a different treatment facility or back home

Psychiatric social workers are also often responsible for keeping medical and mental health treatment records to ensure continuity of care if/when patients transition to different psychiatric settings or providers.

Individual and Group Psychotherapy

Depending on their work setting, psychiatric social workers may deliver short-term or long-term psychotherapy to patients, utilizing different clinical social work methods according to each patient's individual psychological situation and needs. Psychotherapeutic methods that they may use include but are not limited to cognitive behavioral therapy, harm reduction techniques (for behavioral issues such as chemical dependency), motivational interviewing, dialectical behavioral therapy, mindfulness training, and experiential therapy.

For more information on psychotherapeutic methods, please refer to our [Clinical Social Work Guide](#).

Challenges of Psychiatric Social Work

Psychiatric social work is a very demanding and difficult profession. Psychiatric social workers must provide intensive and

at times holistic support to people who are suffering from incredibly severe, complex, and multifaceted mental health and behavioral issues. In addition, seeing individuals in acute suffering, and who may pose a danger to themselves and/or others, on a daily basis can prove disconcerting and draining for some professionals in the field.

“It’s hard to describe how to prepare for watching a patient be restrained, a child receive sedation, the assaults that can be witnessed that make the job hazardous,” Ms. Clark said, “Being aware, knowing safety precautions is vital for keeping safe and keeping the unit safe for others.”

Psychiatric social work can be unpredictable and dangerous, as Ms. Paffenroth explained to OnlineMSWPrograms.com. “One of the most challenging aspects of my job is the potential danger. When going out into the community to do evaluations I do not know what to expect,” she said, “I try to gather as much collateral information as possible before going, however you still do not know what you are walking into much of the time.”

The hazards of the job are not the only challenge that psychiatric social workers encounter. “For me I have never found the needs of my patients to be the challenge; rather, connecting my patients with a finite amount of resources has always been the most frustrating part of my work,” Ms. Clark noted, “Additionally, process and structural problems of the way social and mental health

services are distributed, managed and funded are equally as frustrating.”

The psychiatric social workers whom we interviewed encouraged professionals in the field to develop a plan for strong and consistent self-care. “I believe the largest asset a student can possess is a commitment to the patients and really good self care,” Ms. Clark said.

Mr. Berman described the importance of establishing boundaries between one’s professional and personal life, and engaging in self-care practices in order to stay balanced and energized at work. “It has been challenging to set boundaries between my work and personal life that will allow this career to be sustainable in the long-term. I have started forcing myself to leave work on time, no matter if not everything is done,” he said, “Because the truth is no matter how hard you work, it will never be enough. I have also become more committed to my own weekly therapy, which is important for self-care and professional development.”

Ms. Paffenroth also explained how, on the job, awareness and caution are extremely important. “The best way to address the safety challenges is to be very aware,” she advised, “This starts by asking the referring party if the individual has a history of violence or has made any threats of violence, gathering as much about the individuals history as possible. Once on scene, continue to be

aware of your surroundings, do not enter someone's home if you feel threatened or unsafe. We always go out in teams of two and we always make safety a priority.”

Why People Become Psychiatric Social Workers

For individuals who are drawn to a fast-paced and constantly challenging environment, and to responsibilities that are both intellectually engaging and socially impactful, psychiatric social work may be a rewarding field.

“I decided to become a psychiatric social worker partly because it is a way to combine my interest in the law with my interest in mental health and helping people,” Ms. Paffenroth told OnlineMSWPrograms.com, “I’m very happy where I ended up professionally.”

“I wanted to pursue psychiatric social work because I’m really interested in mental health and, personally, love thinking about how social, political, economic, and historical (ie macro) factors affect people’s wellbeing, and vice versa,” Ms. Friedman said. She also noted how the populations with which she works offer constant opportunities for personal growth and professional development. “One of the things I’ve loved most, but has also been difficult, about this training year is the diversity of my patient population,” she said.

Ms. Paffenroth cited the gratitude of her patients' families as a main source of professional energy. "One area I would like to highlight about this work is the way we help the people who are not the direct client. For example, family members, friends and even experienced clinicians call us when they have encountered a serious crisis or when they do not know what to do and need help," she noted. The unique expertise and services that psychiatric social workers provide mean that they can assist patients and their families in ways that other mental health professionals are unable to do. "It is extremely rewarding to offer these people help in their time of need. Family, friends and providers are often profusely thankful and tell us that they do not know what they would have done without our help," Ms. Paffenroth continued, "Through this kind of feedback it is clear that the impact of our service goes beyond just helping the client get to the hospital. We can start someone on the road to help and recovery in a way that most other providers cannot. That makes my job pretty special."

Ms. Clark told OnlineMSWPrograms.com how, in addition to the knowledge of the large scale impact of her work, the daily successes and impact she has with clients are also deeply rewarding. "The highlights are harder to measure because the successes can sometimes occur on a small scale," she noted, "On any given day the highlights of my job could be filing a police report, having a meaningful conversation, or transferring a patient

with chronic schizophrenia to an appropriate facility.” She also noted how one’s professional team can make a huge difference. “Working on a collaborative team of professionals continues to be one of the best parts of the job,” she said.

Advice on How to Become a Psychiatric Social Worker

The complexities, difficulties, and potential dangers of psychiatric social work mean that individuals generally need graduate-level training and internship and/or professional experience in medical or psychiatric settings in order to qualify for roles in this field.

In order to sufficiently address patients’ conditions, and to provide them with effective therapy as needed, students who wish to become psychiatric social workers should obtain a solid foundation in clinical social work modalities. “I recommend taking classes on therapeutic modalities you’re interested in (psychodynamic work, CBT, family systems, etc),” Ms. Friedman advised. Classes in trauma, family dynamics, and the Diagnostic Statistical Manual of Mental Disorders (DSM-IV) may also be useful. “[I]f your program offers elective classes on clinical diagnosis and the Diagnostic and Statistical Manual of Mental Disorders (DSM-V), take as many as you can!” Ms. Paffenroth said, “I have become a strong clinician in this area due to the nature

of my internships and jobs, however feel this was lacking in my overall academic work.”

Mr. Berman encouraged students to identify the populations they would like to work with, and take classes that are relevant to those populations. “Get training in substance abuse, therapy for borderline and psychotic clients, trauma work, and case management experience for homeless adults,” he advised.

Ms. Friedman recommended that students actively seek field placements in medical and/or psychiatric settings. “One of the reasons I’m doing a post-master’s training year in mental health is that I felt like my internships weren’t especially clinical,” she explained, “I think it can be hard to enter psychiatric social work after grad school if your internships haven’t been in this field, so I would encourage MSW students to pursue internships in agencies or organizations doing mental health work if this is an area they’d like to go into. Different settings provide different experiences in terms of duration of treatment – psychiatric ER will be short-term and crisis-focused, versus an agency providing long-term therapy to trauma survivors, for example.”

“I believe that having internships in medical facilities is the best advantage for selling oneself during interviews first out of school. Advocating for yourself while you are in school to get those internships is important,” Ms. Clark agreed.

Ms. Paffenroth encouraged social work students to be open to different concentrations going into the MSW program, citing her own experience changing concentrations after completing an employer-based internship with the Berkley Mobile Crisis Team. “I was initially enrolled in the Child Youth and Families concentration, however this limited my internship options and ultimately would have limited my career options if I had stayed within that concentration. Changing to Community Mental Health felt like a big step and was somewhat scary at the time,” she recalled, “In hindsight it was a very wise choice. So my advice is to be flexible and don’t limit your possibilities just because you have a certain mindset going in.”

Even after obtaining a job in psychiatric social work, students should continually seek to gain more information about the field and stay updated on ways they can improve their work with clients and colleagues in psychiatric settings. “Participate in lots of continuing education once you graduate! These courses will help you continue building your skills, allowing you to focus on a particular area that most interests you and is relevant to your clients. They are also great for networking,” Mr. Berman said.

Through careful preparation, continual self-evaluation, a solid self-care plan, and consistent efforts to learn more and contribute more on the job, social workers in psychiatric settings can enter and even excel in a field that offers unique opportunities to make a

profound difference in the lives of patients and families who would otherwise be unable to find the help and support they need.

About the Author: Kaitlin Louie is a content writer and editor who writes articles for OnlineMSWPrograms.com. She received her bachelor's and master's degrees in English from Stanford University, and aspires to be an author of fiction and creative non-fiction.

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