

Social Work and Private Practice Part 2 – Erin McLeod (MSW, RSW)

Brad Fraser 00:00

Hello and welcome to the Social Work Beginnings' podcast. Social Work Beginnings is a student hosted podcast: engaging with instructors, agencies and members in the Social Work community in Canada. As we strive to learn to become effective social workers at the beginning of our careers, we seek to amplify the ongoing work to advance social justice in Canada within social work. This podcast is born out of a desire to equitably increase the accessibility of opportunity, when outside the classroom, about our diverse field. Today on the podcast, we have the second part of our two part episode, where we discuss social work, and private practice in Saskatchewan. Our guests is Erin McLeod, who has been in private practice since the beginning of her social work career. Working with mentors and supervisors until co-founding her private practice in 2015. She holds her Master of Social Work degree and has knowledge and training in many areas of mental health, including as an EMDR therapist, Erin also works as a sessional lecturer for the Faculty of Social Work, and from time to time as a research assistant at the University of Regina. Hello, Erin, thanks for joining us today.

Erin McLeod 01:16

Thank you very much for inviting me. I'm really looking forward to this. It's my first podcast experience!

Brad Fraser 01:21

Awesome. Well, you and I have chatted before about things like private practice and just our interactions in committees. So it's really cool to kind of dialogue around what does private practice look like for you as someone that's actually actively doing it in the field today.

Erin McLeod 01:36

Yeah, I love the chance to talk about it honestly, could probably go on and on. So so this will be really good.

Brad Fraser 01:42

When we were discussing as students what type of things could we be talking about? When we first sat down with the SASW and wanted to chat with them about what's their role in terms of private practice? How did they regulate it? There was a lot of questions from students that were like, okay, but like, what does it actually look like to do the private practice? And so, our understanding is, is that you've been doing private practice for a few years now?

Erin McLeod 02:07

Yeah, I've been. So the practice that I'm in right now with my business partner, two of us opened up a practice together, about eight years ago. And prior to that, I was worked in a different private practice under a supervisor for I'm gonna say around a year, maybe a little more or less.

Brad Fraser 02:29

Right. And that supervision is something that in past conversations you've told me about still happens today?

Erin McLeod 02:36

Yeah, absolutely. Supervision is a big, big part of my practice.

Brad Fraser 02:41

When you thought about private practice, and you thought about doing social work as a whole, what was some of the motivation to get into private practice, specifically as part of social work?

Erin McLeod 02:55

So the journey. I thought about how I might describe my journey to ending up where I am, and it's varied. When I (my) very first university degree when I graduated high school, and moved to university, and all of that was, I received, a Bachelor of Science degree and I worked in a genetics lab. Because my dream was to be a scientist, and life changed. Circumstances happened, I ended up choosing to move home, we had some stuff going on personal life. So I moved home to deal with that. And in the meantime, I thought, you know what, I need to just get a job. Prince Albert isn't the research kind of hub of the province, what I wanted to do wasn't available. So I thought for now, find some work and I'll sort the rest out when I can. And I ended up getting a job in a law firm. I'd never been in a law firm before, never talked to a lawyer before. And I got a job as a corporate and commercial paralegal of all things. Loved that work as well. And sort of, through this personal stuff, for lack of a better word that I was going through, it exposed me to the idea of being in this helping role that exposed me to social work, things like that. And so it was really an evolution over these 10 years of working in the law firm, that I decided I wanted to pursue that education. And that's kind of the direction that I would take a new career, which is what I did. And it was looking at, like the values of social work, looking at what the options are there was psychology. What did that look like, actually talking to people working in both of those fields? And social work, the values aligned with me personally, I would say. Just the type of work in that I wasn't so drawn to doing things like assessing or diagnosing or things like that and, social work seem to align better with what I would like to do. And so that's kind of why I chose the field of social work. And then private practice specifically came out of my practicum experience, and just how in-depth and robust it was. And I mean, there's this aspect of my entire family are self-employed people, my all my siblings, my parents, my grandparents. So self employment is a very natural kind of fit for me as well. But I guess I share that whole story to make the point is all of those experiences from being in research, from knowing how to legally set up and run corporations to establishing my own business? I don't know if it's like hindsight bias, or what, but I look back on my life, and I can see very clearly how what seemed like random events, really set the foundation for me in private practice and made it a great fit.

Brad Fraser 06:00

Wow, yeah, you've had this foundational building that you've been really doing, it sounds like, ever since the beginning of pursuing your career, like you said, with the research and that background, and how to incorporate a business and that entrepreneurial spirit that you have in your family, I imagine that

when you are doing private practice with your business partner, so much of that is outside of the scope of social work, because you are running a business, yes, you are a social worker, and you are helping people. But there's this business side that sits adjacent to that.

Erin McLeod 06:34

Yeah, it's a huge piece of it. And that's where going into private practice. And choosing a really good business partner was important. But part of it is we brought this balance to our practice. She's been in the field of mental health as a clinician, clinical social worker for like 15 years before we got into private practice. So I had the benefit of her clinical skill for me, and she received the benefit of my business skill. Because and I think Karen touched on it opening a private practice is so much more than simply seeing people putting bodies in the chair and being helpful. And I mean, I could there's a lot of detail to get in. But it is about how you establish your business or the laws by that you have to follow the recordings, the tax implications, the licensing, the insurance, that keeping your books, doing all the bookwork, billing, it's really, really complex. Whether you're doing dividends and recording minutes, and doing annual with filings, and all of that stuff. So that came very easily for me, which was a benefit, and then her clinical skill for me, I've just learned so much from her in the last eight years that, yeah, it was a really good fit for us.

Brad Fraser 07:53

You talk about her clinical experience informing the, before you even started the practice together. Are there specific areas that either you individually, or, together, that you focus on from perhaps like professional development that have benefited both yourselves and the people that you work with.

Erin McLeod 08:13

Um, so her experience has been generalist in the sense of generalist and mental health, she did have a lot of experience working with youth and families for the beginning portion of her career, which was something that I did not have experience with in my, my practicum setting and in the work I had done up till then I'd only worked with adults. And so I gained that experience and still do that learning from her. But we both had goals of just general continued education and continued supervision, which, I mean is also professional development, right. So we've both taken, I think all of the same training, more or less. I don't know how much detail we want to go into. But there is this annual conference in Washington DC. The psychotherapy networker symposium, it's like the big wigs of the big wigs that go, and we've gone for the last few years. And at that symposium, you choose your workshops that you're going to attend. We don't always choose the same. She does have different areas of interest in terms of like that she wants to build her learning and skillset then I might, but generally our overall we want to meet the needs of our community, right. So that's what we're looking to what would benefit we've both taken really intensive EMDR training. Were both EMDR trained therapists, I think we might be the only ones in kind of the northern part of the province. We did that because there was no one else who did it and after doing the research and understanding how beneficial it could be, we thought it would be a great addition to our practice. And we were we both chose to, to be become trained in that.

Brad Fraser 10:08

And so for those that don't know, give us like a one minute overview of EMDR and what that's involved for both yourself as the clinician, but also the people that you're helping.

Erin McLeod 10:18

Sure, yeah. Um, EMDR stands for eye movement desensitization and reprocessing. They joke in the training that they really should have named it something else.

Brad Fraser 10:28

Yeah, it's a mouthful, for sure.

Erin McLeod 10:32

Yeah, absolutely. Um, but basically, it's a way of processing, memory, and events. And so we primarily hear about it used in trauma situations where there's trauma memories that seem to be present in working memory. And you can use specific eye movements, not a lot of talk therapy, it's more about eye movements. And basic, I would say scaling, like reporting on a scale of one to 10, how you're feeling. So the combination of those two things is basically how the therapy goes in session. But the eye movements help to process those memories into long-term storage, so that they don't feel like that their current recent memories, it's really linked to the somatic experiences. Which mean they'd, like, people that experience high levels of anxiety, those kinds of feelings, flashbacks, things like that. We want to process it. So it might be not a great memory to think about, but you don't feel it in your body anymore. It's not distressing in your body to think about now, because it's been processed properly.

Brad Fraser 11:53

And this is something that you specifically specialized in. This is training that's completely outside of a BSW or a MSW?

Erin McLeod 12:01

Yeah, absolutely. It was training, we had to invest, you know, financially. And it was a very intensive training in that it was a lot of hours, I think. So my business partner, and I did the training together, and we paired up for the training. And I think we did something like 12 hours of EMDR therapy on each other. That was outside of any of the actual lecture time and things like that. So it was a huge time and financial investment. That was not a part of any of our like academia, academic training, but formal in the sense that you can, you know, you get your certificate at the end of it to confirm that, you know you're doing.

Brad Fraser 12:43

For sure. Yeah, I imagine that there's people out there that are looking for help, specifically with EMDR in mind, and if you're, to your knowledge, one of the only providers that are doing that in the northern part of the province, that's creating equity, hopefully for those that do live in that area. So they're not having to commute so far down. I imagine if they're confronting trauma, or any of the other things that you listed, having that closer to home is a huge benefit to them.

Erin McLeod 13:10

Yeah, absolutely. Again, it's about being of service to our community and recognizing what needs might be out there.

Brad Fraser 13:17

And so when you talk about that community, what are some of the other things that you look at as specialization point for yourself when meeting those needs.

Erin McLeod 13:26

So some of the other more formal training we've received. We've both taken training, and I would say, I've probably taken it a little bit further in our clinical practice than maybe my colleague has, for various reasons, probably just opportunity for me to, but is training in something called Collaborative Law, collaborative family breakdown. And it is basically involving mental health professionals in the process of separation and divorce, legal separation and divorce. The Divorce Act has changed recently. And it now requires that people try to sort themselves out, outside of court. The courts kind of, doesn't want to deal, with these issues of, you know, who gets the family dog on what weekend, right? They've got lots of things to deal with. And they're hoping that people can find other ways of dealing. But I mean, I say that a little facetiously, because these are big issues for families, of course, but the idea is also court just inflames things. It's an awful process for families to go through in particular children of a judge arbitrarily just decide how things go. The laws have changed now that they would like people to try other methods and one of those can be this method of collaborative divorce, which is essentially creating a team of people that work with a family and a mental health. Professional is one of the roles on that team. So we've taken training so that we can act as that. And, yeah, I have participated in a couple of cases. It's actually what I did my Master's thesis on as well. But we've taken formal training, we went out to Nova Scotia for some training, we took some training in Saskatoon. It's been very thorough training as well. And we are registered with that professional association as well, the Collaborative Professionals of Saskatchewan.

Brad Fraser 15:33

So that collaborative law, if I heard you correctly on what it's called, and you coming alongside, do you find that since you focus on it during your MSW, that there's a particular social work lens that you bring to that work?

Erin McLeod 15:51

Yeah, entirely. Working with lawyers and financial professionals, they definitely have a different lens than a social workers. And if I can just share an anecdote from a recent experience, when I was working with to like, and lawyers have to be collaboratively trained as well, you can't just ask any lawyer to participate in this process, they have to understand kind of the dynamics anyway. So these two collaboratively trained lawyers reached out to me and said, We have clients that are going through a legal separation, we'd like to use this collaborative approach with them, would you be willing to act as the mental health professional? Sure. And so I get information, like, without going into too much of the detail of the process, but the clients are aware of the process, they're aware that certain information is shared with the team for the benefit of the process, all of that. So what I'm getting from the lawyers is that they don't think this process is going to work. These clients are too conflictual, it's not going to work. The lawyers are irritated with each other. Your client, yeah, but your clients withholding this. But that's because your client won't. So you get a social worker in there. Sometimes we're not just you know, working magic with clients, sometimes we're working magic with the other professionals as well. And at the end of the day, it was an extremely lovely experience. And it went very well, and the clients,

in fact, not too long ago, reached out to me together, without their lawyers present, just said, Hey, do you just want to meet with the two of us we'd like to talk about our future a little bit as CO parents? Well, holy cow, I thought we started this process with two unreasonable people, that we're never going to be able to work together, right. So, you know, sometimes it's even having conversations with the lawyer saying, hey, let's just, you know, take a step back and using our social work skills that are too so yeah, it's it's a really lovely experience, that social work does bring a unique perspective to absolutely.

Brad Fraser 17:53

And you've had that opportunity now, to not only, as you said, bring two professionals, maybe, perhaps closer to that collaborative spirit, but now to parents as well, which is going to benefit kids. Which you had mentioned earlier is, you know, something that can be so traumatic about the legal part of that process with court. And I think that's one of the things that when I hear yourself talk about private practice, there's this opportunity to create space that wouldn't otherwise be there. To be able to create, quite literally not just a physical space, but then like a safe place for these families to come together with your support in a way that a social worker definitely can provide.

Erin McLeod 18:35

Yeah, absolutely, like private practices where you're going to be able to participate in these kinds of teams or in these different scenarios. I have the flexibility to do that. Because I'm in private practice. I'm not sure that if I worked for a different organization or something, if I would have the freedom to choose to take on these other roles, right. They're time consuming. They're really challenging. And, yeah, so private practice does allow me the freedom definitely to do that. And again, it fits well with the value, like kind of our mission, the social work values, but our mission in terms of our business, that kind of thing, helping families helping children. Yeah.

Brad Fraser 19:18

And when you mentioned earlier that this was an area of focus for you with your MSW, could you maybe expand on what does it look like when you go from a BSW into an MSW? What are these other things that you're getting out of that Masters of Social Work that perhaps wouldn't be present in a BSW alone?

Erin McLeod 19:38

Right. So I think Karen had mentioned like, the BSW program at the U of R at least is a generalist degree, right, which is wonderful. But the MSW just offers you a little bit more specialization. And I think that's a piece of it. So for me the MSW did help, like for sure with things like clinical skill research skills that was obviously doing a thesis route MSW, I developed some really good research skills. And that's been really helpful. Again, how often I rely on research skills and private practice maybe wouldn't seem intuitive to people. But it's been a really important skill to have. And I can talk about why later, but that was a big piece of the MSW was developing those skills. But then there's also the MSW, really, it was a different sense of, I would say, maybe community or connection and learning in that class sizes were a lot smaller. You really kind of worked with your cohort that you were in the MSW program with you took a lot of the same classes together. As well as connection to faculty, you had different access to them. And it was really good to develop those relationships. And I think the other part of it is, it develops that skill of say, working independently, which is a big piece of being in private practice that MSW sort of

demands, like nobody's holding your hand through anything through that program, right? It's an expectation that you've got a skill set to be able to do a lot of this work independently. And, of course, in private practice, it's the same kind of thing you're on your own.

Brad Fraser 21:38

When you mentioned earlier that there's this research skill set that you developed even further, tell us about what does that look like when you apply that to private practice?

Erin McLeod 21:51

Well, so and I guess I should clarify, when I say private practice, you're on your own, I mean, in some ways that's as on your own as you choose to be, you can choose to have and access different supports, for sure. And the SASW is always an option. But I guess that I mean, on your own is like kind of daily, right? And the research skill, to me, becomes important in that because you have to be able to figure things out. And you have to be able to, on your own do research around what is the best practice, best approach, evidence based information about what it is that I'm maybe working with, in a specific situation or with a particular clients, right? Again, taking the EMDR training, I actually did some research on EMDR. To see, I didn't know exactly what it was, it sounded funny getting people to move their eyes around as somehow solving trauma didn't didn't make much sense to me. But diving into the research, and like the really peer reviewed empirical research, it became obvious that it is a fairly, very well researched intervention. And so that helps me, you know, kind of decide to take that training. But there's other research, just in getting a difficult case, not actually having somebody to walk down the hall and say, Hey, I do access supervisors. And again, I can talk more about that, but they're not always available on demand. Funny enough, so I have to have ways and skills of being able to find information. And that's really informed my practice, it just makes it much more ethical, right, to make sure that I'm doing the research around what it is that I'm doing.

Brad Fraser 23:38

Yeah, and I think when you talk about those social work values, we're very clear that we hold a competency. But we have to make sure we know the boundaries of that. And so when you're talking about that research, what does it look like to maybe expand that competency to an area of need, but to do so with that evidence and to do so with the training so that ethically we are expanding that competency in a way that isn't a stretch beyond what's good for both ourselves? And for the people that we're helping? Is that kind of resonate with what I've heard you say?

Erin McLeod 24:09

Yeah, absolutely. And a recent example of that is an EMDR. Client, client who had reached out wanting to try some EMDR. And in an initial intake session, she disclosed to me that she struggled with a particular I don't even know what I would say, cognitive issue, I'll just call it I don't want to say too much to give too much away, but and it was something that I had not, I'm not familiar with in general, but certainly in connection with doing EMDR with someone, so I let her know that right away, right. Like I need to be clear. This is not something I'm familiar with. I don't want to pretend to know more than I do or give you the impression that I do that's not fair. But I'm willing to do some research and you because she had said sort of the same thing. Like, there's nobody around here that does EMDR, though. So like, I'm totally okay, if you want to just give it a go. And I was like, Well, I'm not sure that I've going to quite

do that. But let me do some research. Let me consult with people. Let's do that. Yeah. And so when I did go into the research, there is very, very, very, very little research around this specific issue. So I ended up just having to say, I think I have to decline this, I don't feel that I have enough information to feel confident that I'm competent. So maybe I can refer you to a clinician with more years of EMDR experience, it might be something you have to do virtually, if they're not close to you. But just ethically, I didn't want to just try and see what happened. Right.

Brad Fraser 25:48

Right. Well, I think that's something too, that when we're tying this together with the threat of private practice, you've talked about, you know, you're dealing with billing, right. So when you say no to a particular client, not only is that an ethical boundary, but right, you're also making a decision financially in terms of what you're receiving. And it's not to say that you're not going to have other clients that you're going to see instead, but, at your, it's a very different boundary than if you're a salaried social worker working in an environment where whether or not you see that client through or not, doesn't financially affect you. Obviously, as social workers, we're all there to help. And so we want to be able to help the people and so whether that's referring out or in or staying with us or not, that's all there. But it's interesting to hear how there's these different dynamics that come into play. And you had to do some research to come back and actually say, Well, no, it's actually going to be a boundary for me.

Erin McLeod 26:42

Yeah, it is. And I mean, I think it would not be entirely transparent to say that the financial aspect doesn't come into play in making some decisions as well. The idea, like doing the research, even, nobody's paying for that. I am just finding the time in my schedule to do that research. And, again, you know, that's not the priority. That's, that's not that's not the drive for me to do the work. But I also can't do the work if I can't afford to do the work, if that makes sense. So if you're mindful of these things, but at the end of the day, the ethics of it always, always trumps everything else. But it is true, you do. I think thinking about going into private practice, that's something that some people don't consider, there's a ton of time that you don't get paid for. Today is a really good day, I was supposed to be seeing clients all afternoon, because of weather conditions and road conditions. I've canceled everybody, meaning no income for today. So it's, you know, these aren't things to be taken necessarily irresponsibly. When we're making decisions about private practice, you have to know that you have the skill set and the fortitude to navigate all of that.

Brad Fraser 28:06

Absolutely. And I think, you know, for from a student perspective, that's what's so beneficial about hearing from people like yourself that are doing it, because we're going to build some of that skill set within our BSW many of us that are interested in this type of work may move to that MSW, as is so advocated for, and we're gonna keep building these competencies. But there's these other factors at play that also speak to what stage of life are you in? Or are you at a season of life where you're okay with investing time without a direct return and as students, for many of us that have student loans or otherwise, that's a huge consideration. And I think about, as I mentioned earlier with the SA SW practicums, give us supervision automatically. And for those listening, it's quality, of course, but it's there for like a very specific reason. And you've mentioned earlier that supervision continues to form

part of your practice and your own individual experience, not just for your benefit, but for that of the people that you're working with.

Erin McLeod 29:11

Yeah, absolutely. So my supervision in my practicum setting was so beneficial that I just carried that with me and have ever since and so in private practice, I have always had supervision. Now it's tapered, the more experience I get. Initially, I still maintained a lot of supervision, especially like I said, working for that other practice under a direct supervisor that was so that she could really supervise me very well. But now that I'm on my own, so what supervision looks like today is monthly supervision where I meet with a supervisor. I bring forward cases that I go over with her, she gives me feedback direction, consultation, that kind of thing. And I do that monthly. And I would say about quarterly, sometimes more often, sometimes less, I also have a psychologist that I consult with. She is EMDR certified. She's in Alberta. And so I will consult with her specifically on EMDR cases, but also on other things as well. And so, and all of this is an expense, right, you have to pay for the supervision, but well worth the investment again. And in at some level, it is professional development as well, right? So, but I think it's ethically it's so important that we don't think we know everything about everything all the time. And it's just made me a better clinician. And sometimes I go to my supervisor and ask the same question a whole bunch of times. Because it's just the nature of learning, right? But yeah, it's having access to supervision is, I think, extremely important in private practice, because it's not just automatic. It's not just assigned to you. It's not just expected necessarily. And I do I even encourage clients, when, if there's a client that I I can't take on for one reason or another. And they might ask me, like, who else would you recommend or whatever? Or even just, they're moving to a different community? And so they'll find someone there, I always tell them that one of the things like you should, you should interview your therapist, for sure. And ask them questions, but one thing you should ask for is do they have like a supervisor? Right? I think that the clients get the benefit of that supervision. And they should know that that's important, or that they're talking to someone who never reflects, who never, you know, doesn't have anybody making sure that they're on track with what they're doing.

Brad Fraser 32:07

Absolutely and I know, speaking from my own current practicum experience, my peers and I are constantly talking about how do we build critical reflection into the day to day tasks, you're fulfilling your practicum duties. But how do you make sure you carve out that time for that reflection, not only just as a peer group, but then back to our supervisor, and it sounds like that continues. And I mean, you can see the smile on my face. Hopefully, the listeners can hear my smile, because I think for many of us, when we get into social work, we want that continued learning, we want the continued opportunity to collaborate. We are excited to help people. But then it's awesome to be able to relate back to fellow professionals and other people to be able to say, hey, what does this look like? What else do you know about this? How can we continue that learning?

Erin McLeod 32:53

Yeah, absolutely. And I think different experiences, obviously, like your supervisors are going to have different approaches a different lived experience, different professional experience. And we don't know what we don't know. And, I mean, we can get our own tunnel vision working, you know, working with a specific client or on a specific case, or however you want to say, and sometimes we need that

supervisor to say, like, give us just a different perspective of it, right, remind us that we can look at things differently. And sometimes I like I've had the experience where I've just been over invested in something and had like a supervisor, point that out to me, like hey Erin, this sounds like it's more important to you than it is to your client. And I'm like, Oh, interesting thing to point out, you know, who's holding me accountable if I'm not meeting with her or her to keep me in check, right?

Brad Fraser 33:50

Absolutely. And I think that's something that we see as part of that social work value again, right, is that when we're doing all of those different things, it's helpful to have multiple people advocating, right, that advocacy doesn't just fall squarely on just us individually, but also, I think collaboratively as a profession and beyond. And I think when you talk about that desire to collaborate, and that really that benefit of that accountability, we read your bio earlier and my getting to know you was in your community involvement. And you're currently doing a sessional job at the U of R and you're lecturing. And so what motivates you to stay so active outside of private practice in these varied roles?

Erin McLeod 34:37

Yeah, so I think it's a little bit twofold. I think. I am always looking for new opportunity. I think I always expect that I'm going to go on to the next thing. Whatever that looks like, right? Not saying that I want to always be in private practice, but that I'm always looking for like what else I can learn what else I can do. Take part in. And the other piece of it is just simply education. It is a value of mine for sure. And participating on the Education Committee, I'm learning there for sure. But it did I kind of keep a pulse on what's going on, honestly. So that's part of the motivation is just to be in the know. But also, because I am bringing this perspective, my own perspective as a as a working social worker as a clinical social worker. And I think that that's helpful. Like we need a well rounded committee, right of social workers. And sessional. Being a sessional. And doing that kind of lecturing is honestly I learned so much from doing it. I both learned like content. It's always good to read, you know, I'm teaching research right now. Absolutely. I was knee deep in research when I did my MSW, but that is a skill that if you're not using daily does not just stick with you. Right, especially the language of and all of that. So I mean, even kind of grounding myself to teach this class means that I was relearning a lot, which I love doing. So I like that I'm getting this education. Again, maybe or even new. But the idea of contributing, right? It's, I'm a big believer in kind of the supporting the up and coming the passing of the torch the sharing knowledge. And I, I feel like I as we all do, we have a our own ways of being right, we have our own ways of interacting our own ways of teaching. And I think it's good for people to get exposed to all of that. And so I bring my own kind of style to teaching. And, and I think, yeah, it's just good experience for everybody to to, I guess, from a student's perspective, it would be a good experience to be taught by a sessional that isn't just in academia, a sessional. That's doing some frontline work, that is working with the clientele and can bring that into the teaching as well. So that makes sense.

Brad Fraser 37:25

Absolutely, I think that's the amazing thing about being in a program that has both tenured professors that are heavy in research and policy development and actively there and are very deep and specialized in particular areas. And then you've got people like yourself that are coming in, that are equally deep into the research and specialization, but in a different way. And and that's coming from that frontline experience in such a way that I think it helps connect the dots for students to have both

those types of roles to be able to get to know and like you said, there's these different styles. And quite frankly, as students, I think it helps us to see the theory then applied. And it's great to be able to see that in individuals who are actively doing the thing that so many of us want to do, or most of us are not going to end up teaching social work as doctorate level professors someday, there's probably someone listening that will, but it's gonna be a very small percentage of us. So what does it look like to embody that ongoing desire to collaborate and learn that you're talking about? And to have that demonstrated is amazing. So when you think of those students Erin, is there anything else you'd tell them, that when they're listening, and they're thinking about, hey, you know what, private practice, maybe it's for me, but they're in their BSW right now, what would you tell them? What would you encourage them to focus on?

Erin McLeod 38:53

Hmmm, If the interest is in private practice, I guess, I would, as always be very critically reflective. What's my motivation for it? I think that that's really important to know and be clear on and understand because it's no small undertaking. Definitely pursue an MSW if possible. I think that gives you skills that are so critical and helpful to being in private practice. And the ethics piece is really important to me, and I'm pretty passionate about I think seeking ethical training, or sorry, I should say training on ethics outside of what was offered in the BSW program is really, really important. As an example, I've taken some training regarding, like clinical case notes. So when you're in private practice and you're taking your case notes, how should you be doing He knows unethical ways, because they can be extremely damaging if they were used in a legal situation. But they also have to be appropriate, right? And so who teaches us how to do that? Or do we just sit down and start writing down everything everybody tells us verbatim for pages and pages. So I think it's important to recognize that there, there is a lot to learn about private practice beyond what is taught in your BSW. And that gives you a great foundation. And I think one of the kind of great ways to do that is to reach out to someone who's doing the job that you want to do, and learn more about that.

Brad Fraser 40:39

I think it's interesting you talk about what does that notetaking look like? Because, as you've said, whether it's in our courses, or in our practicum experiences, we're going to have to write a lot. And that's a big part of competing social work students, and then social work professionals. But what's the audience for what we're writing? And when you're entering into private practice? Those notes? Who do they serve? Are they for you? Is the clinician, are they there for, you know, the person that's receiving the help? Is there going to be another audience that subpoenas the record set? You know, what, what's that going to look like? And I think when you're in a traditional agency environment, they're probably going to have a very set template on how you should take notes. What does that look like? But private practice is more than likely a little bit more of a blank sheet of paper could be the start. So what does it look like?

Erin McLeod 41:34

Yeah, it's, it's so critically important. So as an example, I guess I could say, I did some research. And I did publish a paper and social work journal online, years ago, was about something called an O'Connor application. And so this is when your clinical case notes could possibly be called into court. And essentially, without getting into too much detail here, but essentially, a client's notes could be used

against them. So as an example, again, if we're talking about family breakdown, and there's some sort of custody battle going on in court, and I'm working with the mother, and she's struggling with some pretty significant depression or something like that, because of everything that's going on. And my notes get called to court, they could be used against her to kind of paint her as an unfit mother, because she has mental health issues. So if my notes, detail, a lot of struggle, or, you know, in indicate anything and towards those things could actually be used against her. And so I think we're not aware of that when we get into clinical practice that we could cause damage to our own clients, depending on what were the purpose of these notes being used. I had the benefit of working in a law firm. And so some legal advice around how to keep my notes. But then I took this ethical training, which was tons of information about the best way to keep your clinical notes. And it also gave me information around. No, that's not true. This training didn't give me this information. But a consult with my supervisor gave me this information. I was becoming aware that I had a file that might be subpoenaed to court. And so I wanted to know how to prepare for that. And I consulted with a psychologist and she's actually someone who is often called to court to disprove therapists notes to discredit therapists. And then outside of the court situation, she helps therapists make her notes so that she can't discredit them. So that's kind of her approach. She's like, I you know, I if it was me, called into court, here's what I'd be looking for in your notes to discredit you, or whatever. But she walked me through that once you're served with a subpoena, here's the things you should do. And nobody else had told me that. Right. And so I was very, very prepared. The subpoena never came. So all that's fine, but I was very prepared knowing how to handle that situation and that you don't actually just give up your clinical file. The second you receive a subpoena. There's more questions to be asked and more dialogue to be had. And, I was unaware of that. So again, training, consulting all of this is super important. And I don't know how often files or even called to court really hasn't happened to me and my experience, but it would only take it once. And you know, if it's not done right, I could be out of a job so or I could have a damaging effect on the client. We did have a request so The Saskatchewan Health Authority had a request, I don't even understand their process could apparently, if someone wants to request their file from the Health Authority, there's a process they have to go through. And so in reviewing that, there was information from my practice in their file. So essentially, we had this mutual client, I had emailed someone in the SAS health authority about this client. And so they emailed me saying, like, Hey, here's this passport, password protected document and all of this legal jargon out of the act and data. And can you let us know if we can release this? So after I figured it all out and saw that it was an email, I was like, Well, absolutely, I've already actually given it to the client, because I give up my files to my clients, the moment they asked for them. That's ethical of me to do. So it's a different approach in private practice. But I'm comfortable to do that, because I've learned a lot about how to take my notes. And I don't feel like I have to, or will have to sit down with my files, and worry about a lot. Should somebody ever come to review them, right, I feel like I've learned a lot about how to how to do this in the best way possible for the client and for me.

Brad Fraser 46:17

Everything you just said, is, this process, behind the process, behind a process that is built off of that experience that no single individual can have, whether they've got years and years of experience or not. And so with that in mind, is there anything else that you would tell the students before we close?

Erin McLeod 46:41

Nothing specific that comes to mind. Other than take every opportunity to learn that you can. I mean, now in your BSW really appreciating the education that you're getting the access to the faculty that you have, and peers that you can, you know, collaborate with. But beyond that, don't think that the buck stops with convocation. There's lots of ways to continue to learn and to continue to build your skillset and be a really great social worker in private practice or not. And I would just encourage everybody to do as much of that kind of continued learning as they can.

Brad Fraser 47:23

Absolutely. Well, thank you so much for joining us today Erin.

Erin McLeod 47:26

Thank you. Absolutely for asking me, it's been lovely.

Brad Fraser 47:29

Thank you again to our guest Erin McLeod. Please watch for our next episode coming out in November where we sit down with practicum coordinator Bayani Trinidad. Bayani shares about the practicum process for both students and agencies, as well as shares about his love of breakdancing and how he has incorporated art and culture into social work with youth. This podcast is brought to you by the University of Regina Faculty of Social Work. Go to www.uregina.ca/socialwork/ to find out more about the program. The views, information, and opinions expressed in this podcast do not necessarily represent the views of our sponsors.