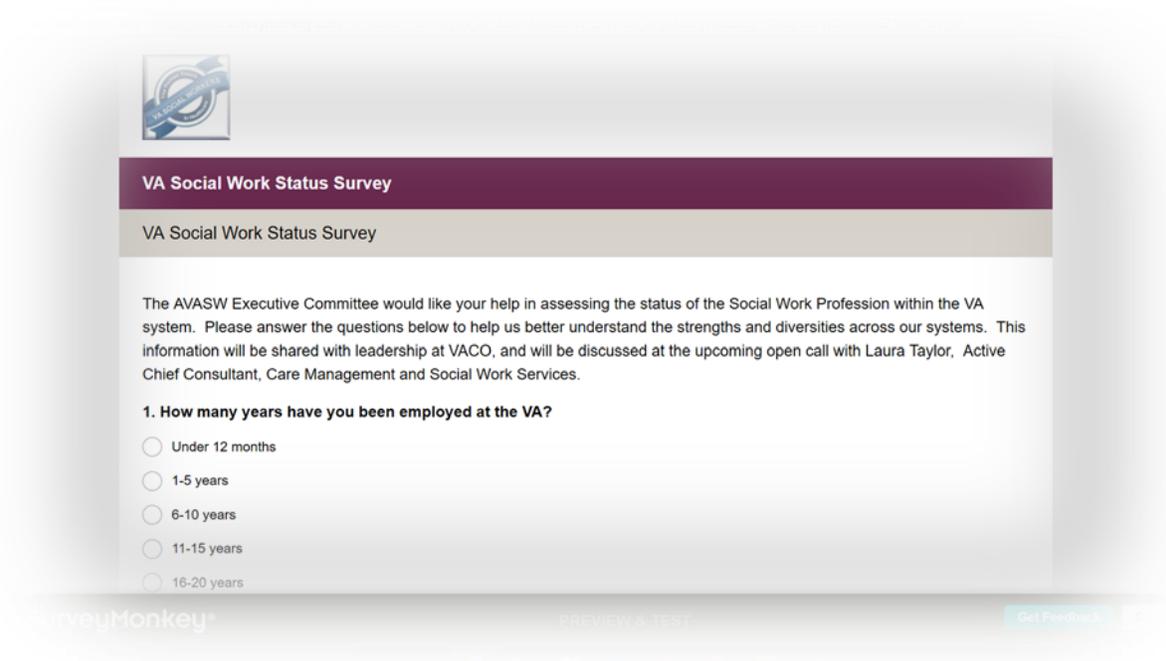


AVASW Social Work Status Survey: November 2015

Survey Summary: P 1-2

Comments from Participants: Attachment A

Survey Questions: Attachment B



The screenshot shows a SurveyMonkey survey interface. At the top left is the SurveyMonkey logo. Below it is a purple header bar with the text "VA Social Work Status Survey". Underneath is a light brown bar with the same text. The main content area contains the following text:

The AVASW Executive Committee would like your help in assessing the status of the Social Work Profession within the VA system. Please answer the questions below to help us better understand the strengths and diversities across our systems. This information will be shared with leadership at VACO, and will be discussed at the upcoming open call with Laura Taylor, Active Chief Consultant, Care Management and Social Work Services.

1. How many years have you been employed at the VA?

- Under 12 months
- 1-5 years
- 6-10 years
- 11-15 years
- 16-20 years

At the bottom of the survey, there is a "SurveyMonkey" logo on the left, a "PREVIEW & TEST" button in the center, and a "Get Feedback" button on the right.

Summary Results of Social Work Status Survey:

The following is a synopsis of the AVASW Social Work survey, as well as the follow up national conference call with AVASW members and Laura Taylor, discussing the results of the survey. Some questions posed by attendees were within the realm of general boarding processes, and some were personal, relating to current or past experiences within their VA experiences as Social Workers.

Some background on the survey: The intent was to get general information from the over 12,000 VA social workers nationwide, asking questions such as their grades and steps and how long they have been employed at the VA. The survey was sent to our AVASW members and the link was also posted on the AVASW Facebook page. Over 230 members and non-members responded and many added comments which have been, and are being looked at by VACO. Some of the results were what was expected, such as current license status (independent practice). Some were surprising, such as the length of time employed at the VA, with the majority 1-5 years.

Some of the less demographic questions posed that we thought most important included: *Do you know who your Chief and/or SW Exec is?* Ninety-seven percent responded yes. The follow-up question asked: *Are You assigned to Social Work Service?* A little over 50% responded yes. These two questions were asked as a way to clarify whether social workers assigned to a service line have knowledge of and/or access to social work leadership.

We posed two questions relating to promotion and the SAA process: *Have you have ever applied for a promotion* and *Has your supervisor ever submitted you to a Board for a SAA*. Sixty percent said their outcome was not positive and 60% said their outcome for the SAA was not positive. When asked if social workers are aware of whom the local board Chair is, a majority said no, nor has there been a time they have served either on the local or VISN board.

And lastly, we asked for an opinion about whether the board acts fairly. The answer was split at 48% (yes)/51% (No), and if the Director approved board recommendations which were the same split. In this grouping we also asked if pay grades are set fairly with 61% response as no. We then asked for causation, if known (see comments to #18 in the comments section)

Over the next few months we will be reviewing, discussing and processing the results of the survey. We will also be continuing the phone calls with Laura with different topics as we go along. During the follow-up call with Laura, several social workers asked *What is the boarding process* and *What is SAA?* This survey highlighted the fact that the boarding process and Special Advancement for Achievement is not well understood by many social workers nor is it implemented consistently throughout the system for a variety of reasons. (see comments section)

In summary, three major themes emerged:

- 1) A feeling that Social Work is not respected.

- 2) A concern about the disparity of HR functions (hiring, pay equity and promotion) throughout the system. What seems to apply in one Medical Center doesn't apply in another.
- 3) Lack of awareness on the part of the social workers to understand how things are structured and how they are supposed to best function in their professional roles at their medical centers (players involved and role of the Social Work Chief/Executive, Professional Standards Board, Human Resources, Medical Center Director, etc.).

AVASW Plans to Address the Themes:

- 1) We believe the year-long celebrations planned, and our high-level work with NASW & SSWLHC will help promote VA Social Work. We also believe we need to keep putting out positive articles and support papers promoting our profession.
- 2) Laura is working with a team on the revised Social Work QUAL Standards with a focus on better collaboration with HR nationally, addressing the concerns raised by social workers as noted in this survey. Plans are for the QUAL Standards to be completed with approvals finalized sometime in 2017 and distributed to the field.
- 3) Help Raise Awareness of the VA Social Work QUAL Standards throughout the field as well as the many contributions and value of VA Social Workers within the system, using our media outreach to keep educating, informing and clarifying.

From the Officers of the Board of AVASW, we thank you for your participation in either the survey and/or AVASW conference call with Laura.

AVASW SW Status Survey Results: Comments

*Please note that all VA identifying information has been expunged from the comments for anonymity

#19. There appears to be no incentive to perform well on the job. We were told that this year no performance bonuses were allowed to direct care employees other than physicians and psychologist. We were also told not to discuss this with other employees.

11/30/2015 12:18 PM

The PSB should review in total an individual's suitability for employment not just be a review/sign-off.

11/30/2015 10:54 AM

I believe there is significant over-boarding of positions at some medical centers, resulting in variability and disparity nationally. (ie. if you are licensed, you are automatically boarded as gs 12 at some sites, whereas at others, the GS 12 is for very specialized positions and experience) I am concerned that if there were a national review completed by OHRM, the result would be that many have been boarded higher than the standards will support. In my opinion this will result in reduced credibility of social work leaders in the VA, which in turn may have long term adverse outcomes for the profession.

11/29/2015 6:17 PM

I function fully independently at a rural CBOC with little to no supervision, but I can't be a GS-12. I have completed licensure and supervision for 2 yrs. A new SW (3 yrs VA experience) licensed out of state but with no supervision (and no plan for future supervision) makes \$1300 less than I do and practices independently, as does the other new SW. I believe in my profession, but the VA makes it very hard to tolerate.

11/25/2015 10:51 AM

A lot of former student interns get hired & have never worked anywhere else & then move up, even though they haven't paid their dues, like having done more challenging work in the community. When they are students, many act entitled to getting hired here, as many do, but are really just mediocre practitioners. There are many more experienced & quality practitioners who get paid less or at the same pay grade when they deserve more. Esp. b/c the school from which we have the majority of interns, is a crappy program & many of us went to high quality, academic, and research-based institutions.

11/24/2015 1:22 PM

One issues is that I have attempted to submit a boarding packet to be reviewed by the board, however I am told by my supervisor that our SW Chief has told us that we cannot increase our grade (i.e., to a step 12) in our current positions. Also, we need to apply for a job position posted as a step 12. The second issue is that our current Director of our program was boarded as a 12 in my position. Then she was promoted to a 13 as Director. When I asked what happened to the grade 12 position, I was informed by my supervisor that the grade 12 position was removed from the organizational chart by the SW admin. I am in the same grade 12 position that the Director had occupied yet I'm still a grade 11. I am doing the work of a 12. It is unfair to be paid grade 11 when I am doing the work of a 12. I am not sure how to proceed. It has been suggested that I go to the chief of SW with other SWs to discuss these issues. This feels like a waste of time. The work environment is hostile and I don't feel supported. I may just wait for a grade 12 position to be posted and apply for that job. Thank you

11/23/2015 1:58 PM

unfair hiring practices

11/23/2015 10:21 AM

16. I do not know whether or not my VA facility Director approves the recommendations of the SWPSB. 17. Promotions seem to be predetermined due to alliances and friendships that have been ongoing. 15. I recently learned that each VA or region (not sure) has their own board. No, I don't think it is running fairly. Again, alliances between friends. 14.) Actually, this was the first year that I am aware SW's could apply for the board. I did not apply. I don't believe I would be asked to sit on the board. A stronghold of people run SWS at this VA. However, they have been hiring primarily local people so when I can transfer they can enjoy their Peyton Place. 10. I have not been offered a Special Advancement for Achievement that would meet my needs at the time. 2. I have worked for the VA for 5 years and 5 months. 19. I have never heard of AVASW. I only recently heard of the leadership institute but was denied when asked if I could apply. 8. and 9. I have applied for a promotion two times at this facility. The staff being supervised by the Supervisors and in their committees were promoted. ** I am going to assume this is confidential.

11/19/2015 7:27 PM

I am very unsure of the SWPSB.

11/19/2015 3:02 PM

At this VA, LCSWs are not respected. Management of the MHSL has made it clear that the preference exists for PhD level only. It is clear that attempts are made to hire PhD level in positions for promotions. Our SW Executive is NOT an advocate, and in actuality, assists in this process. It is extremely disheartening.

11/19/2015 12:26 PM

we do a lot of independent work and psychologists are paid way more than us, not clear why

11/19/2015 8:12 AM

I don't know anything about our Social Work board at the facility I work for. Also, I work for a facility where licensed social workers are 11s, not 12s.

11/19/2015 8:08 AM

I am full-time, career (31 yrs) licensed (LMSW) yet not licensed at an independent practice level(LCSW). I am stalled in my grade & step. Experience, length of service, diversity of skills/training does not appear to matter. As a matter of fact, a young SW new to the VA system and recently licensed at independent level, was asked to supervise me due to my licensing status!

11/18/2015 4:41 PM

My position at ***** is paid lower than similar social work positions nationwide

11/18/2015 12:28 PM

In regards to the SAA. I did research and wanted to obtain a certification. I was told it was useless because even it is listed as a approved social work certification for SSA "you want get it" They give it to who they want to have it. After hearing that I was so discouraged I just gave up on attempting to obtain any of the SSA "that appear to be for a select few" As for obtaining a QSI (Quality Step Increase). Again it was explained to me that Those social workers in CBOC would need to meet the standards as social workers in ***** Texas at ***** and those are given to Hospital Social workers only. However, our jobs are not the same. As for the pay. When social workers have over 6-10 years of experience in case management all their experience should be taken into consideration and not automatically be placed in entry level category.

11/18/2015 12:01 PM

Discrepancies between mental health and medical social workers. Some medical social workers have more independent responsibilities and should be considered as 12s

11/18/2015 11:12 AM

#19 I believe the Social Work and Care Management on a National level is hurting social workers. When they say publicly, that we are generalists (in regards to practice) it is obvious how much they actually do not know about their own profession. Social workers who are advanced practitioners are able to assess, diagnosis and implement treatment. Working in mental health IS a specialty. Sometimes, the SWs are the only providers. Yet we do not get the same acknowledgment as our psychologist counterparts who are paid far more than us. It is also a sad situation when our own qualifications keep us down. And it is also sad that we allow facilities to choose whether they will use the GS-12 standards for senior social workers. I can't believe that we are losing extremely qualified, trained therapists to case management positions because they can't get paid. No one talks about this and I have no idea why? It is so sad that we are not advocating for ourselves more and it starts with the higher ups!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!

11/18/2015 9:40 AM

#16, I'm not sure. I transferred to this VA approximately 6 months ago.

11/18/2015 8:23 AM

we needed the option of N/A for some of these questions that were not either a yes or a no.

11/17/2015 4:30 PM

I have applied for several different positions and made the phase for interview. The last position was for a person to work in the day treatment and I was told after the position had closed. The chief had decided it needed to be a veteran. It did not state that on the application.

11/17/2015 4:26 PM

18 - Initial entry as an MSW with a provisional license all boarded GS-9 step 1, regardless of managerial experience or abilities associated with the position.

11/17/2015 2:49 PM

14. During my term on the professional standards board they boarded staff and never included me. When I inquired about it I was told that it had already been done. 10. The SAA were supposed to be step increases but this facility started giving 1 time financial awards instead.

11/17/2015 2:15 PM

19 - I am 68 and mostly have no concerns about the above - I'm not interested in advancements or pay raises. One time only I had a very negative evaluation based on a position I didn't ask for but was moved to without sufficient training. When I mentioned this I was told "that doesn't matter" - I'm still writing you up". In my current position my coworker lacks attention to the work we do - this seems to be obviously overlooked - I feel pretty certain the supervisor favors this person and does not counsel for their improvement just sayin' IT seems that there is, in fact, an attitude "that's the way we do it at the VA" - this attitude seems to run true. Patients in our clinic have 8am appointments and half the staff (not all are social work) show up late causing the veterans to be seen later than their 8am appointment - also causing those that are ready to work to not be able to do their job.

11/17/2015 2:14 PM

We don't get the opportunity to board locally and we should. An outside entity does not know or appreciate local needs or abilities. Outside boarding also allows for (perceived) bias and resentment if the outside facility does not "like" or appreciate our facility as much as their own.

11/17/2015 2:08 PM

Grades are set unfairly due to management bias and management just allowing the minimal at performance reviews. Management excuse is that leadership will not approve and/or one has to participate on multiple committees outside of their program in order to get step increases.

11/17/2015 1:58 PM

1) there should be a career ladder based on increased competency 9, 11, 12, 13, 14 & 15; 2) it seems to me that psychologists are a disproportionate influence on mental health services across the VA. Social Workers should not be treated subservient, especially from a value/cost perspective in light of patient care outcomes

11/17/2015 1:45 PM

#15. The professional standards board seems to only be known or involved with individuals with whom they find favor. #17. The lack of value afforded our position within the medical center directly impacts the levels attached to salary. #18. A poor understanding of what social workers really do and how we directly impact the well-being of our Veterans at multiple levels as well as not understanding our training and education allows senior leadership to devalue our profession and not engage us in policy and leadership roles. The disrespect is absolutely shameful.

11/17/2015 1:12 PM

In fairness, as a new employee, I'm unable to answer a majority of these questions.

11/17/2015 12:18 PM

Social Workers should be grade 12's. Also upper level SAA's do not get through-we are told hospital has no money.

11/17/2015 12:05 PM

It concerns me that I feel like regardless the quality of my work or how long I am in this system it appears impossible to advance any further than I already have.

11/17/2015 11:50 AM

#7: I do not attend because my HEAVY work load does not allow. #9 & 17: I requested promotion to GS/12 which I was while at an Army base; had to reduce to GS/11 to secure a different VA position than my current position. My co-worker here is a GS/12. We do the same job.

11/17/2015 10:27 AM

Staff being hired in supervisory/management/coordinator positions with lack of training/experience, skill and knowledge to fulfill roles assigned. More experienced Social Workers have retired with exception of a few who are not recognized to fulfill thru succession planning positions, panels, management positions to move services, identify needs. More grievances due to lack of understanding of how a service line should function with discipline specific staff. Chaos, no communication from Leaders with Social Workers in MHS, HPBC, and Homeless program. No support for Social Work via Service Lines in designated areas. Chief of Social Work detached from programs under service line. Seasoned staff who speak out, ask questions are retaliated against. Reorganization needed for CAVHS social work service to include sections/services under service line. Extreme difficulty obtaining Advanced Social Work Grade (12). Panels for selections of various disciplines biased and many who know are excluded. I came under old system that worked to a better degree than what has been over the years with service lines, despite the politics, poor selection of supervisors chosen to fulfill various sections etc.. People do not know and they do not know that they do not know. Don't have protocols, directives, guidelines with poor to no oversight for accountability. I would suggest an investigation to get opinions of staff. The MHICM program that I have been a part of for 11 out of my 34 years of Social Work practice and 32 with VA has not had a program manager in close to a year. Rather than appoint someone who has experience, the Social Work Lead assigned in Mental Health is functioning as supervisor to MHC, Ambulatory Mental Health staff, MHICM, CBOC (all out-patient) in all disciplines. This is unreal and he lacks the experience, leadership skills, knowledge of how any of the programs work, the VA organization and how we fit into the organization. MH leadership lacks the leadership capabilities with chosen staff in place to run an effective/efficient service. We are left to survive on our own. Quite discouraging. More knew people hired have no guidance, direction or qualified supervisors to show them what is

appropriate and to have a qualified consultant. My recommendations have been shut down with ways of improving processes and systems.

11/17/2015 10:18 AM

I do not know for certain that the SW Board's actions are unfair or fair. I do not actually know who is on the SW Board at my facility. I have a friend who came from DOD as a 12, and was demoted to an 11 when she transferred in. I felt this was unfair, as she already had several certifications including CPT, PE and EMDR. I have observed that there seems to be no particular reason for why one SW is designated as a 12 and others are designated as GS 11's. I will say, however, that the facility I transferred in from, in my opinion, was even more unfair, in that there was very rarely an occasion when a SW was promoted to a GS 12, despite years of experience, certifications, etc... In fact, from my understanding, SW's at that facility, have lost clinical privileges and most are now relegated to case management positions, despite advanced clinical training and certification. I saw this move coming, and transferred, as I was not willing to serve in a case management only position. I have spent far too many years developing advanced practice skills, to be satisfied in an administrative/support role. I strongly feel that social workers throughout the VA and Vet Center system, should be at equal levels. All advanced social workers with advanced certifications and advanced skills should be advanced to a GS 12 level, in my opinion.

11/17/2015 9:41 AM

the social work council was disbanded after they chose a social work executive. They state the monthly social work meeting replaces the council.

11/17/2015 9:27 AM

VA Social Work will never be considered fair until the VA recognizes "Advance Practice" either Advance Generalist or Clinical. Social Workers with license levels at Advance Generalist are made to feel less important and we are not eligible for any promotion to the GS level of 12. This action is oppressive to the SW who work at the Advance Generalist level. Advance Generalist Social Workers have many years of experience and advance practice skills that are not being recognized. It time for a change.

11/17/2015 9:25 AM

not even sure the social work standards board even communicates with director and / or supervisor.

11/17/2015 8:54 AM

At ***** the social workers are not regarded as professional and valued entities of the patient care system. There are few opportunities for promotions and upward mobility is not supported or encouraged and very limited SW management positions are available at the Montrose campus, and when openings are available pre-selection of candidates is done prior to interview. The morale among ***** Social Workers is very poor as we don't feel valued or provided with recognition of the important work that we do for the veterans.

11/17/2015 8:23 AM

In our facility the administrators are not supportive social workers. Low morale., nepotism, and bias.

11/17/2015 8:22 AM

There are major issues at our facility with trying to keep social workers down in the GS system. HR and the SW Executive have a poor understanding of the qualifications and do not advocate for positions to be fairly graded. It is a constant battle to get a social work position above a GS-11. We lose many of the MH social workers to other areas because these positions are GS-11, despite being some of the most important work of the VA. I hope something can be done to improve the system. Thank you.

11/16/2015 9:19 PM

This is related to many of the questions in the survey, specifically related to ethics in management. Our Social Work chief is incompetent, unprofessional, and often offensive to Social Work staff; however, there is no vehicle to complain or to do anything about it. It would likely require a lot of research and dead-end phone calls to file any kind of complaint, and even then, there's no guarantee that anything would be done. It's very disheartening. I reached out to our chief and cc'd my supervisor, requesting to become a representative for AVASW for our VA. My email was never even acknowledged. So, despite our chief forwarding out emails about AVASW, I do not believe she is not supportive of us getting involved. Social Workers at the ***** VA, specifically in the Homeless Services Program, are not treated fairly or with respect by higher management. We do not have the HR oversight that non-profits and public companies have, so we have no outlet for workplace injustices; most just quit and find other work. We have a union, but I've never heard a social worker say that they've been helpful. Your assistance, in any way, would make a huge impact for our Social Work staff here who often feel voiceless.

11/16/2015 7:50 PM

#15 We have well over 30 Social Workers at our facility and yet we are still boarded in *****. That's why I answered "No." #19 Should SW Exe or Chief jobs be competed for even if they are part-time or half-time or quarter-time or any time less than full time? Can leadership just pick whoever they want and say you shall be Exec or Chief, without competition?

11/16/2015 6:18 PM

10. Has your supervisor ever requested you to be considered for a Special Advancement for Achievement (SAA)? Yes, but some certifications listed on the SAA approved list are not considered as "evidence based", and so are not approved for SAA award at my facility. Why then are they on the SAA listing if they are not recognized?

11/16/2015 6:09 PM

I could not answer some questions.

11/16/2015 5:58 PM

The time it takes for the Social Work Professional Standards Boards to approve routine pay grade increases seems unnecessary and unprofessional.

11/16/2015 5:56 PM

#19 I am disappointed that the opportunities for within-grade step increases are so very restrictive in relation to earning a specialized Tier 1 or Tier 2 certification. Formerly, one could obtain the necessary training (approved first by one's supervisor) that is relevant to job position, then submit certification verification with assurance you would be approved for a within grade step increase. This is nigh to impossible now.

11/16/2015 5:11 PM

I think it is unfortunate that we do not have career tracks and that we get very little recognition within the bigger system.

11/16/2015 5:04 PM

My work location is in an area with lower pay grade than coworkers, even though I live in a close by area with higher one

11/16/2015 3:34 PM

HR Technical guidance is very weak regarding boarding and functional statements.

11/16/2015 3:23 PM

Workloads are not considered when assigned step increases. Some SW have huge caseloads, many more responsibilities than others and there is no way to account for that within the political

step system. If you're hired at the same time, you get the same pay even if others are lazy and have very minimal workloads.

11/16/2015 3:18 PM

Social Workers need more recognition for what they do. Although there are local and national awards, administration tends to not submit anyone for consideration. This also takes into account the AVASW quarterly nominations. It is discouraging to never even have a chance.

11/16/2015 2:58 PM

18. This VA does not list the Acute Psych SW position as a GS-12. In my previous VA, this was a GS-12 position, as it entails working with patients who carry a DSM diagnosis.

11/16/2015 12:12 PM

The board serves little function; we do not recommend a grade or step. we say yes we will sign off, or no we need more info. I assumed the board looked the qualifications and chose a step, but HR/the hiring person asks for the step they want and it is not discussed at the board meetings

11/13/2015 3:39 PM

Our director ignored PSB recommendations and unilaterally declared the step increase for SAAs void. In Jan2015, we received the news that instead of a step increase we would receive a \$2000 award. As of today we have not seen that either. Fair and just? Would you say?

11/13/2015 2:38 PM

#8. As an employee I feel disappointed that there is no opportunity for promotion and career advancement in my current position. I was told that I cannot apply for promotion if a higher position is not on the organizational chart. It seems that the only way for promotion is if employees leave their current position and apply for another one, which takes away valuable employees who are most experienced and knowledgeable in their work on a specific unit. This is also affecting patient care as it is affecting the continuity of their care. It also causes a higher turnover of clinicians in a setting where there is a high turnover already because we are a teaching facility/hospital. I hope employees can advance in their current positions and that our organizational charts reflect the growth and development of clinic programs and the work of the employees. Since I started work in my current position, I was able to achieve many professional advancements. I became licensed to practice independently. I have become a coordinator for a program in addition to my regular duties. I also had collateral duties as the facility Point of Contact for a VA national program which I did for about 2 years. I supervise social work interns. I also provide evidence-based psychoeducational workshops on ongoing base. I also have other eligible certificates to apply for the SAA, however until now I still have not received clear directions and encouragement to apply. It seems like a very mysterious process and I hope that all social workers are offered the information in the near future.

11/13/2015 11:18 AM

Not fair that everyone starts at step 1 so someone with 10 years' experiences is boarding a the same level as someone who has 2

11/13/2015 10:28 AM

#16 I have only heard from "effected SWs" that they have been denied salary increases via SAA. Our leadership does not recognize SWs as an important group. for instance, we have a new SW Chief and there was no social worker on the interviewing team! Positions are posted for PhDs and SWs but there is a big pay differential for the very same position! GS12 for SWs and GS13 for PhDs. I don't get it.

11/13/2015 7:43 AM

Social workers in non-supervisory positions are paid fairly. Social workers serving as program coordinators are paid a grade below what they should be paid according to National Social Work standards. This results in the social work executive also being paid at a lower grade. A social work

service line is not allowed and the social work executive would qualify for a higher grade if there were one or if a supervisory social worker were hired in addition to his position.

11/13/2015 2:10 AM

#19. In the VA, you cannot make abuse reports to the hotline. You must first go through channels which I find objectionable as a professional Social Worker.

11/12/2015 4:20 PM

#15: HRM makes the decision and then sends new employee information to the PSB for review of GS level and step. That's all the PSB here is used for. Also, regarding level of fairness, the PSB is chaired by the Social Work Exec, who also is involved in the interview process and has been at times listed as a reference on the applicant's application and/or as a prior supervisor of the applicant - such as in a VA internship situation. To my understanding, this presents a conflict of interest.

11/12/2015 4:00 PM

There is no consistency in how pay grades are determined and rated. There is open discrimination against social workers here, particularly those who function as therapists and who have been trained in the same evidence-based treatments as psychologists yet are consistently paid far less. The VA takes no account of experience in the mental health field, unlike every other mental health facility I have ever been a part of, and consistently favors education over experience, preferring to pay psychology NOVICES more money than mature, seasoned social work practitioners. This makes the working atmosphere for social workers hostile at best, and a career dead end for anyone with clinical interests and training. The only way for a social worker to advance here is through case management, thus negating the years of training in therapeutic modalities, both at the VA and elsewhere. #19

11/12/2015 1:30 PM

I believe that the entire profession is misunderstood, under paid, and underappreciated.

11/12/2015 12:18 PM

#19--Very frustrated with the posting system and lack of promotion opportunities. Find even lateral moves difficult. If you need a change in your job, and constantly are turned down, this can increase burnout. I also believe interviewees for different positions should be interviewed by DIFFERENT staff. I find they frequently use the same panels for different positions, and if you have applied for more than one position, I believe this can lead to biases. I am not convinced that the hiring and posting system is very objective here.

11/12/2015 11:19 AM

#16 I'm not sure what the Directors involvement is in the process. I didn't have another option other than yes or no.

11/12/2015 11:06 AM

#19--there does not seem to be a good understanding/respect for the social work profession from some in upper management at our facility. I think this hinders the growth of our profession within our facility and our promotion potential. There are many positions within our facility that are higher grades at other facilities, such as being a GS13 at other facilities but a GS12 at our facility. This has been a recent change as well, with positions such as the domiciliary chief position being at a GS13, becoming vacant, and being rehired at a GS12.

11/12/2015 10:21 AM

(17) HBPC social workers in other VA's are grade 12. Only LCSW's are hired for this position as we are required to practice independently.

11/12/2015 10:17 AM

#18. Every state is boarded at a 12 for our positions but we are 11's.

11/12/2015 10:12 AM

19 I feel that a better or more streamline program needs to be implemented regarding supervision for those of us that are seeking a clinical license such as an education liaison, i.e. someone that deals specifically with issues of supervision and training

11/12/2015 9:47 AM

#17 & 18 - there are many social workers with extensive and valuable clinical experience which is not taken into consideration since they are not psychologists. It would be great to see years of experience and post-graduate training to be taken into consideration for pay grade and steps.

11/12/2015 9:27 AM

#16- I am not sure if the director receives recommendations. Lately, no new SW have been hired, after one has left. It feels as if SW are second class to psychologists

11/12/2015 9:10 AM

18. There are psychologists who make 20-30 thousand dollars more than LCSWs who do exactly the same work. How do you justify a psychologist seeing less than 10 patients a week compared to a social worker who sees 25 or more? For individual therapy? Social Workers do the bulk of MH work and psychologists get the bulk of the money!

11/12/2015 8:51 AM

People have been promoted when they did not meet the minimum qualifications of grade in time, they have family relations, and these relationships have been used to hire and promote over and over again, individuals who may not be qualified or be the best for the position. Some people seem to get big promotions without actually earning through time and experience.

11/12/2015 8:24 AM

When someone starts employment at the VA, it seems that the board only looks at certifications and don't take experience into account at all. I had an employee who had 20 years' experience and was boarded at a Step 1. Another one of my employees, who started a year later, had 2 years' experience but had his SIFI and he was boarded at a Step 2. Also, when I started employment, I didn't know that having a SIFI would have resulted in an additional step so it wasn't on my resume. When I found out, I was told it was too late and I couldn't get it after the fact (once I started employment).

11/12/2015 8:20 AM

i recently retired from the VA but heard they finally got a Chief of Social Work. Yay! However, i believe the pay scales at the VA for social workers should be higher level.

11/11/2015 5:52 PM

#11 it took a year to get the SSA and because of that I lost a step that I would have gotten regardless of the extra work and personally paid to receive the SSA. The HR policies discourage people from putting efforts into professional improvements. #15 the PSB is improving as members are gaining knowledge of the process. It's not always been that way in the past. PSB members are not well trained. #17 I was the lowest paid Mental Health therapist in our clinic yet had the most certifications and saw the most patients. Last month that finally changed but only because I personally put in my own time and effort and personal finances to continue my education and skills. Now I'm at least being paid at a similar level. Also social workers are in a " special category" which means we are the only staff who don't get time and a half for working overtime. I and the other social workers were given a whopping .17 to .19 cents extra for providing services on Saturdays! Whereas all other staff were given time and a half or double time. I would not want to be promoted as all leadership positions I see for social workers don't pay any more than what I am getting. Why would I want more responsibilities without any incentives?

11/10/2015 9:40 PM

Our professional standards board is just a rubber stamp for human resources.

11/10/2015 8:40 PM

17/18. The grades are not chosen fairly because the standards for a licensed professional not independently licensed should all be the same regardless of the state of licensure. There is a general consensus among all states that independent is independent, and there is no variation to that level; therefore, a licensed masters level social worker in any state without independent licensure privileges should be considered as a GS 11 because all function in the same manner.

11/10/2015 6:25 PM

License levels are not consistent among states. It gets too confusing to determine license levels. Also, now we cannot take into consideration the post MSW work experience a candidate might have. If we try, we have to justify the "above the minimum" request with no guarantees that it will be approved.

11/10/2015 6:22 PM

#19 - Mental Health Leadership is extremely hesitant to offer GS 13 to Clinical Social Workers.

11/10/2015 5:32 PM

#19. The Social Work Dept. has to work so hard to be recognized as a professional Dept. within the confines of medical processes that even concern us. I feel we are so reluctant to step on toes, or be outspoken that when we do we are seen as, "Those Social Workers think they have it so bad, or who are they to speak out on that they don't do that." I feel that I have to make myself heard through an array of explanations with almost no support and especially none for the Social Worker at the VISN level, and I feel they have the same syndrome, "speak not and forever hold your peace." (author unknown to this writer.) We need a forum to stand on proudly and speak out, that we need to be the subject matter experts and when not called in on topics we much have someone to back us and say, e.g., "You will have Soc. Work representation present in all pt. matters."

11/10/2015 2:41 PM

15. I chose no - but honestly I do not know. I am not even aware that we have a Social Work professional standards board. Not sure who runs it etc.? 16. I chose no - honestly I do not know. I am not aware of any recommendations made by the social work professional standards board. 19. Social Work at the ***** desperately needs its own service. We are disjointed and absorbed into the care lines. It makes for an inefficient system disallowing social workers to provide cross coverage where needed. I believe that the system they currently employ devalues the social work profession.

11/10/2015 2:39 PM

Responses to # 9, 12, 15, 16, and 18 are NA. I have no experience or opinion on these items. I love my current position and have no interest in a promotion. I have no idea how to proceed on the SAA issues.

11/10/2015 2:31 PM

The SSA request was made by me to my supervisor who I had to hound to have it submitted. First one I rec'd a step increase. Second one I was told by HR that it was approved for a step increase but because it coincided with a regular step increase I could not get both, so essentially I rec'd nothing for that certification. I have inquired about joining the SWPSB, but my supervisor procrastinated on a response until it was too late (more than once!). There is NO transparency, really NO info on who is on the SWPSB let alone who the Chair is. All Social Workers are hired at 11.1 despite MANY have having MANY years of experience. When I was hired at 11.1, I had 12 years post-MSW plus 22 years mental health work experience and at the same time a new grad with ONE year social work experience was also hired at 11.1. I believe that they pay for those positions that are important to them...doctors and nurses...and take advantage of social workers because the pay is generally better than other jobs at community agencies. I don't think we are respected by administration and we do not get the same recognition for sure!

11/10/2015 1:55 PM

Some programs undervalue social workers in other ways besides pay. For instance, HUD-VASH social workers are not allowed an office in which to complete clinical notes because "they work in the field."

11/10/2015 1:49 PM

I have more than a decade of experience in the social work field, performed the EXACT position at a supervisory level prior to becoming a VA employee, and was still brought in at a Step 1 social worker. There are colleagues who are fresh out of their master's programs getting paid the same or more (because of time) than I despite my extensive knowledge. Our Social Work Executive is ineffective and a "yes" person. He is not a strong advocate for Social Workers. There is little chance that one can get a promotion in this VA as there are not many grade 12 positions. When going above and beyond (performed supervisor duties for 9 months while vacant), there was no financial compensation or incentive.

11/10/2015 1:25 PM

Social Workers should have their departments. You have many social workers in care lines and not in a social work service. that affects us significantly. thanks

11/10/2015 1:11 PM

I came to the VA 4 years ago after a career as an active duty social worker. I was greatly disappointed to see that the "pecking order" was so pronounced in the VA. I was surprised at Independent providers being treated as if they were subordinate to psychologists, that professional standards put a ceiling on what is possible. The disparity in pay for doing the same work is embarrassing. It seems that it goes unnoticed because most social workers don't reside in mental health, where I see this each day. Emails to national leaders about changing the standards for the past two years have produced zero results as far as I can see. A psychologist finishes their internship and is hired as a GS-12 to be a clinician. An LCSW must be a senior social worker to accomplish. LCSWs trained to deliver EBPs leave their GS-11 jobs to be HUD/VASH Case Managers to get a promotion to GS-12. Positions are announced to do the same work, only the psychologist is announced as a GS-14, the social worker a GS-13. I have lost count of how many of these instances occur. Our professional standards need to be on par with psychology. One year extra of school and a dissertation does not determine leadership nor clinical experience over time. Change the standards. Insist upon a professional staff, not medical staff, in all facilities.

11/10/2015 12:59 PM

LCSW at my facility are limited to mostly case management duties thus there are few opportunities for social workers to engage in clinical work thus there is a bias against the clinical judgment of social workers and a bias in favor of psychologist even when the social worker has advanced training and years of experience and the psychologist in not yet an ILP

11/10/2015 12:49 PM

Our facility will not allow us to have a Social Work Chief. All social workers are assigned to Mental Health. We had a Social Work Executive part time, but when that person left, Management gave the job to a new social worker who they were friends with. The other disciplines decided social work shouldn't have a SW exec because they didn't have one for LPCs, MFTs, etc. So Mental Health changed the job to SW Lead and assigned a LPC Lead, MFT Lead, etc. When it came time for boarding, we needed a SW Exec to sign boarding packets. The SW Exec position was dissolved, so they went thru HR trying to change her title so she could sign the documents. Our SW Lead/Exec is in charge of our RRTP, and does not have time allotted for SW Exec. She supervises several social workers, so they feel they can't go to her for work issues regarding SW. We have approx. 38 social workers without a SW Exec and we go thru VISN for boarding. #19 I would like clarification of whether social workers are considered LIPs. We are continuously told that we are not LIPs.

11/10/2015 12:46 PM

Supervisor has declared herself the social work executive, but rarely promotes true social work growth, values and education. She is also the Chair of the standards board - per rumor.

11/10/2015 12:44 PM

I am a contract employee working in research. I'm not sure if these questions apply as much to my work.

11/10/2015 12:41 PM

I left a couple of the items blank as they were not applicable or I did not know the answer. I have been very disappointed with the quality of supervision received. Several months ago, I asked my supervisor's opinion about being a preceptor and then possibly a field instructor for MSW students. I was discouraged with a caution that I would get no support from leadership to do it within my current position. Last month, at my annual appraisal with my supervisor, the overall rating was "fully successful." When asked about the reason for the rating, I was told that if I had been involved in field instruction, I would have been rated higher. I reminded my supervisor that when I asked him for advice about it last year, he was not supportive. I have found little to no accountability of my colleagues. I am in **** program which allows independence in scheduling, etc. I have witnessed colleagues taking care of personal business outside the lunch 1/2 hour by getting lashes, hair done or just doing shopping. The leadership and management within *** program is poor and punitive. Once, I went above my supervisor when not satisfied (wrote an e-mail) with a situation. I was "verbally counseled" because I wrote the e-mail. The supervisor added, "...I don't read e-mails anyway...and too many people misinterpret it...results in too much drama..."

11/10/2015 12:13 PM

#19 & # 14 Unfortunately, Social Work Chief and supervisors at *****VA prefers to ONLY promote white social workers no matter how much less experienced they are, no matter how many months or years as a VA social worker they have been, no matter how many less credentials they have. The *****VA Human Resources and Social Work Chief and supervisors and Social Work program managers promote "professional discrimination" but no one calls it that but rather the minority social worker is "not a good fit." Code words but the real meaning behind those words are "You are not white so you will stay where you are!" I am a minority social worker and never ever thought that working for the government meant being discriminated against and it is acceptable at the ***** VA. I have almost 25 years of social work services, 5 years with the VA, several credentials including the BCD BUT I am not going to be promoted and it goes as far as not even giving a lateral transfer because I am not white. Also, the same white SW Chief will not allow me to be on the social work board even though I have requested several times. I am being suffocated professionally by the Veterans Affairs in ***** Social Work Dept and fighting this discrimination is not easy since everyone from the Director to Human Resources accepts this type of discrimination. I am very disappointed in this but I do love working with Veterans and I do need to pay my bills. By the way, these same social work management are good to retaliate when people complain so who knows when that will be happening to me. Sorry I have no strengths to say about the ***** VA SW Dept but only heartbreaking weakness that ***** SW Dept demonstrates that I don't even think Laura Taylor will care about because it is "professional discrimination" and I and others are silent victims of this corrupt hiring system. Professional discrimination is not overt like wearing a KKK symbol or writing emails/verbalizing hurtful, derogatory words such as towel head or the N word but rather stifling minority social workers by giving them NO growth opportunities including promotion that we all want to grow in our VA SW career. Sorry for the harsh words but I am living a nightmare career wise at the ***** VA. If someone can help me, I would appreciate the help. Thanks.

Respectfully, *****

11/10/2015 12:07 PM

Since we moved to care line there is a lack of professionalism and professional accountability.

11/10/2015 12:06 PM

#12: I applied for two SAA's but because I had the credentials prior to my being hired they were denied. #17 the pendulum has swung both ways on this issue. Some hires are 9-1 or 11-1; some have been given higher steps based on experience thus inconsistent boarding outcomes
11/10/2015 12:00 PM

Social workers are not being compensated based on experience and training. Also people are getting jobs "behind the scenes" and there is no application process. They simply move who they want into a position.
11/10/2015 11:58 AM

I requested promotional boarding per Handbook 5005. The board never reviewed my packet because the organizational chart didn't have a 12 listed. I tried speaking with management in and out of SW and got nowhere. Labor Relations ignored me. I filed a complaint with the OSC, who said there was no legal standing for my complaint. Boarding is a joke. This process really opened my eyes and I see that promotions are done by posting jobs for people management decides should get promoted. I may actually be on that path now- due to reasons I don't wish to share, I seem to be one of management's favorites for the moment. I believe this has been a problem at other places, as well.
11/10/2015 11:56 AM

I applied for and met all the requirements for a professional certification: C-SWHC which is approved for a 2 step increase. I earned the credentialing and was advised that our facility is not awarding step increases (ie: my interpretation - does not value professional development) - ***** VA Medical Center.
11/10/2015 11:48 AM

Pay Grades and Step Levels: There is an obvious bias toward VA Social Workers who enter the system earlier in their social work careers. This is especially noted if a social worker transitions from an intern to an employee. Social Workers who are hired "from the outside" are not placed within the Grade and Step of the accepted position based on fair and equitable criteria. Most concerning is lack of consideration given to a seasoned social worker's work history, skill set and years of experience. When considering these factors, it is easy to see why or how morale can be negatively impacted by this blatant oversight. For example, I am a social worker who graduated with an MSW in 1997, and an MPH in 1998. I have been licensed to practice on an independent level since 2002. I completed a University Level Post-Graduate Certificate Course in 1999 with a focus on "Family, Couples, and Child Therapy" and also a yearlong State Fellowship in "Infant Mental Health". I have presented at numerous conferences, and have two publications. I have supervised MSW students doing fieldwork trainings in a variety of settings for over 10 years. I have also worked in an administrative role, a clinical role, and as a medical social worker. In addition to my LCSW credential I am also certified as Board Approved Clinical Supervisor, and a Certified Transplant Social Worker. I have specialized training of over two years in numerous settings including inpatient Adolescent Psychiatry, Outpatient mental health, transplant, cardiology, Infant Mental Health, medical social work, and almost three years with the OEF/OIF/OND team at the VA. I say all this because I, along with many other mid-career social workers have been boarded at the bottom level of the pay grade. Social workers who work in the same system, who are my peers, and co-workers with much less experience in the field of Social Work, who have not accumulated enough work history to earn additional certifications, supervise students, or work in a variety of settings and roles are graded at the same GS Level and Step as someone like myself; a social worker with years of experience and an advanced skill set. While the less experienced social workers are often bright and talented, I do not understand how or why the Board refuses to bring new social workers in at a Step greater than Step 1 of the GS Level. How can a social worker who was an intern at the VA and was then hired as a GS 9, be promoted to a GS 11 after one year of employment, and then promoted to a GS 12 (step 1) after earning the LCSW credential be boarded at the same level as someone like myself? I don't understand why the VA won't allow social workers to be hired at Steps that reflect their years of experience as well as

years working as an independent practitioner. I know of numerous social workers, myself included, who accepted positions at the VA at a Grade level lower than their practice level for the sake of entering the system. It seems like once these social workers, and again I include myself, are promoted, the promotion is automatically granted at the "two step" rate, rather than based on the years of experience, specialty practice areas, advanced practice skill set, and other important criteria. Why do other Boards, such as the Nursing Board, allow employees to be granted steps simply based on factors such as years of employment, other degrees, other certifications, publications, and factors related to work history? The system is unfair and biased toward seasoned social workers. I am sure physicians are not boarded the same way, and I know other professions do not belittle the work experience and skill set offered by all of their employees. Lastly, there does not seem to be a uniform boarding process across state lines or even from VISN to VISN. What one social worker may be awarded for in one local, another with the same credentials and history is not simply because of the geographical location and the functioning of the Board. The boarding process should reflect the true value and contributions of social workers across all areas and locations of employment.

11/10/2015 11:42 AM

17, 15 I am a SW and not under SWS, which is fine, however I don't have SW support unless I go to colleagues, again this is fine. In my program I am the only SW and from my coordinator, who is an RN, I don't always feel my profession is respected. I have been in this position for over nearly 3 years and have yet to have my grade increased to a GS-12 which would be a senior SW and to which I am fully qualified. I am working with the union on this and seem to have support from my coor AND SWS (who I am not under) but it is moving quite slow due to Union rep being out or has other duties AND my coor not helping to move it along. This VA has NOT had a service chief in MH for the nearly 3 years of being here. My current "acting sup" is a psychiatrist and does NOT know what my job is or what I do and on a daily basis does NOT know what our program does. The programs are separated strangely here vs the other VA I moved from (and others I have heard from). I hear that folks in SWS here are "Direct hire" into promotional positions w/o allowing it to be open to other SW's such as myself, who is under MH&BS service. as far as the Social work professional board, I likely would not be able to serve on it as long as I'm under MH&BS, I have to continuously advocate for myself (not as much lately) to even get added to their email list to get updated information on the goings on of SW activity in and outside the VA. 7.) I can't go to the SWS staff meetings because my tx team meeting is the same day and god forbid I miss less than an hour of a 4 hour tx team meeting. There are about 5 SW's that are NOT under SWS here; we are under MH&BS. sometimes I wonder who is the lesser of 2 evils. thanks.

11/10/2015 11:42 AM

BEST EXAMPLE: CLASSIFICATION OF SUPERVISORS WHO ARE 12'S SUPERVISING 12'S...EX-HCHV PROGRAM...VA HRMS APPEARS TO BE BEHIND THE NORM...HOW MANY 12 MUST BE UNDER UMBRELLA OF SUPERVISOR BEFORE IT IS CLASSIFIED AS 13?

11/10/2015 11:25 AM

I was hired in the ***** VA but work in what they call the "outlying area." Because of this we are somewhat ignored in many ways. We don't even have dedicated office space. Promotions are made from the ***** and our supervisor had less time in the VA than most of us, but she was picked from leadership without any posting to allow us to apply. The other very unfair issue is locality pay. Many of us are doing the same job with even higher caseloads but because our county lies between two higher paying areas, are getting the "Rest of the US" locality pay. We have asked to have this reviewed and social work leadership is not advocating for us. Thank you.

11/10/2015 11:19 AM

I am not adding any comments because I feel that nothing will change.

11/10/2015 11:19 AM

#17. My pay grade is based on the city where I work, ***** (which is a lower pay grade than the city where I live). I believe this is very unfair as I have added commuter costs (45 mile commute each way) in addition to the lower pay scale. I believe this policy needs to be reviewed and revised. #15. I do not know any details of the operations of the Social Work Standards Board of my facility.

11/10/2015 11:17 AM

I work in a Social Work Service replete with corruption of every kind. There is pre-selection in all promotional opportunities, unnecessary positions are even created to make sure the core group of those involved in the most egregious acts are compensated nicely by the VA for doing so. Social worker leadership operates as if the VA belongs to them, they run off anyone who does not operate as they do and take good care of those who do. They bully, coerce, intimidate and out of fear of being targeted convince professional social workers working under a code of ethical behavior to bully, harass and act in hostile manner to anyone leadership targets as needed to be taught the lesson that it is my way or no way around here. Very sad and very painful situation for those who attempt to act with integrity, ethically and with a focus on why we are here in the first place. No end in sight however since it is culturally, management knows and allows, everyone has something to cover. I hear often within service and outside by those not inclined to harass and bully that they have never seen a place like this. Well I am here to tell you it exists and I am one of those targets for saying so.

11/10/2015 11:07 AM

we bring on seasoned social workers, with 15-20+ years of experience and start them at grade 12 step 1 just like a newly licensed social worker.

11/10/2015 11:04 AM

The local Chair of the PSB at *** was appointed during the initial 1 time boarding in 2008(?). He remains as Chair and will only "accept" SAA's at his discretion. It has been alleged, but not confirmed, staff with identical requests for SAA's have experienced different outcomes.

11/10/2015 11:03 AM

#9 and #17: Since I was hired prior to boarding, my pay started lower than others. There are SW with less credentials and less experience, who are making more. I was informed that after I was in my position for 2 years, I would be eligible for a promotion, however, HR is now stating the process was originally set up wrong, therefore, not forwarding to the VISN PSB or the Facility Director.

11/10/2015 11:03 AM

I'm working at a CBOC and the possibilities of promotion are in the Hospital that is far to my home

11/10/2015 11:03 AM

I am part of VACO. although I was not hired as a social worker I use my social work skills in my current position. I advocate for social workers in clinical settings outside of mental health. There is a need for social work case management for chronic conditions like HIV/AIDS and hepatitis.

11/10/2015 11:01 AM

I received my SAA at the same time as my promotion did not know the HR rules that effect it. Although it was approved, I did not see any benefit from it because of the way it was processed per HR

11/10/2015 11:01 AM

#16, no answer due to not knowing if their process is fair and to what extent HR is involved. #17, no answer due to not knowing if the facility director ever really listened to any requests.

11/2/2015 11:23 AM



The AVASW Executive Committee would like your help in assessing the status of the Social Work Profession within the VA system. Please answer the questions below to help us better understand the strengths and diversities across our systems. This information will be shared with leadership at VACO, and will be discussed at the upcoming open call with Laura Taylor, Active Chief Consultant, Care Management and Social Work Services.

1. How many years have you been employed at the VA?

- Under 12 months
- 1-5 years
- 6-10 years
- 11-15 years
- 16-20 years
- over 20 years

2. How many years have you been practicing as a social worker?

- Under 12 months
- 1-5 years
- 6-10 years
- 11-15 years
- 16-20 years
- over 20 years

3. What is your license status?

- Not Licensed
- Working on Licensure
- Licensed, but unable to practice independently
- Licensed to practice independently

4. What is your current pay grade and step?

	Step
Grade 9	<input type="text"/>
Grade 10	<input type="text"/>
Grade 11	<input type="text"/>
Grade 12	<input type="text"/>
Grade 13	<input type="text"/>
Grade 14	<input type="text"/>

5. Do you know who the Social Work Chief/Executive is at your facility?

- Yes
- No

6. Are you assigned to Social Work Service?

- Yes
- No

7. Do you attend regularly scheduled social work staff meetings?

- Yes
- No

8. Have you ever applied for a promotion?

- Yes
- No

9. Did you have a positive outcome with this promotion request?

- Yes
- No

10. Has your supervisor ever requested you to be considered for a Special Advancement for Achievement (SAA)?

- Yes
- No

11. If yes, was it:

12. Did you have a positive outcome with this request?

- Yes
- No

13. Do you know who the chair of your facility Social Work Professional Standards Board is?

- Yes
- No

14. Have you ever served on a Social Work Professional Standards Board?

15. In your opinion, does the Social Work Professional Standards Board function fairly at your VA facility?
(You may give details at the end of this survey)

- Yes
- No

16. Does your VA facility Director generally approve recommendations made by the Social Work Professional Standards Board? (You may give additional details at the end of this survey)

- Yes
- No

17. In your experience, at your facility are social workers pay grades set fairly and impartially?

Yes

No

18. If no is selected, what do you believe the causes are:

19. Are you a member of AVASW?

Yes

No

20. Please add whatever comments you would like considered or reviewed as part of this survey. List the question number you are referring to at the beginning of your comment. If your comments do not pertain to a specific question, list the response as "#19".