



Children's Case Management

Placement Description

Provides intensive case management services to children to link to and monitor needed services at the CSB or in the community, such as therapy, medication management, school placements, and teaching of parenting skills. Practicum students are expected to abide by rules and regulations as outlined by the Standard Operating Procedures and the Student/Volunteer Agreement. Practicum students are expected to maintain effective relationships with co-workers and customers based on courtesy, compassion and respect.

Intern or Field Placement Responsibilities/Opportunities

- Role model appropriate parenting techniques
- Assist families in learning life-skills such as shopping and money management
- Write treatment plans
- Sit in on family sessions in home
- Networking with other agencies in town
- Demonstrating appropriate social skills by taking children out into the community
- Attend parent teacher conferences and other school meetings such as IEP or eligibility
- Accompany clients to doctor's appointments
- Accompany clients to psychiatric appointments
- Participate in staff meetings twice a month
- Participate in assessment and planning meeting (interagency) once a month

Contact Information

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Read about students' experiences at this site below:

Fall 2022 - Catherine LeHanka

I completed an internship at the Harrisonburg-Rockingham Community Services Board (HRCSB) in the Children's Mental Health Case Management Division during the Fall 2022 semester. The HRCSB's goal is to aid the "community by offering high quality mental health, substance use, and developmental services." The Community Services Board is a community psychology focus organization that is funded through state funds from grants and human services agencies to serve the Harrisonburg and Rockingham communities. The children's subdivision of the HRCSB coordinates children and their families with services, such as therapy, psychiatry, school-services, at-home care, parent and community mentoring, and financial assistance. The HRCSB's clients are referred to services through a variety of methods, such as school administrators, law enforcement, the Department of Social Services, and others. The division is made up of family care coordinators and case workers managed by the Supervisor of Child Outreach Services, John Wilson.

Through my placement, I was able to gain a variety of experiences in the field. My immediate supervisor was Lindsey White, a Family Care Coordinator, working in the Children's Mental Health Case Management Division. The HRCSB's Family Care Coordination program assists families with children who are pre, post, or at-risk for a residential treatment placement. While at the CSB, I had the opportunity to attend family care coordination meetings, home and school visits, medical and psychiatric appointments, and Family Assessment and Planning Team (FAPT) meetings. Through sitting in on family care coordination meetings, I learned about how community supports, such as therapists, mentors, schools, parents, siblings, case managers, and sometimes law enforcement, can come together to help the clients. Additionally, I was able to read meeting reports when it pertained to cases I was observing. Furthermore, I assisted in the transportation of clients to and from community appointments. Also, one of the most hands on opportunities I had, involved assisting in the adolescent support groups. The HRCSB has two main support groups, 2nd Chances, for substance abuse, and Choices, for anger management. Most of the participants are court mandated have some type of legal reason that led them to the class. I had the opportunity to attend the sessions, interact with the participants, and organize curriculum. Another experience that occupied my time was research. I frequently completed research for clients, find community services to link them to resources that met their needs.



I was very thankful for my placement at the HRCSB as it helped me to gain a unique and detailed understanding of community and children psychology. A major advantage of this placement is that I received exposure to a large variety of situations and clients, such as working with clients with different mental health conditions. I also was able to observe and participate in many aspects of community psychology to see how they all interact to support the clients. In addition, in the Children's Mental Health Division all the employees are extremely welcoming and helpful. The team is a great asset to the HRCSB, and they made my experience immensely better because I felt so supported. However, one disadvantage of the HRCSB is that interns do not receive access to *Credible*, which is the client information management system. This is because *Credible* is where the extremely sensitive HIPPA protected health information and records are located. Although, I do understand the reasoning, sometimes the records could have helped me better understand the background for the meetings I was observing or aided in my research for client services. Another aspect of the internship that can be both an advantage and a disadvantage is the downtime. It is a positive because this gives you time to process the difficult parts of working in the mental health profession. However, it can also be a negative for when you are looking to get more client experiences, but everyone is occupied with administrative and management activities.

At this placement, I felt like my outside psychology education supported my work at the HRCSB. My clinical psychology course helped me conceptualize the work I was doing beyond the individual cases by using a community psychology lens. Additionally, the material I previously learned in my counseling psychology and abnormal psychology courses helped me analyze cases and offer suggestions of possible resources for clients to my supervisor. Since through my previous coursework, I learned about specific mental illnesses, I was able to participate in discussions about what services could be helpful for clients based off their diagnoses. Furthermore, along with my coursework, this placement affirmed my desire to be a children's therapist. It was so rewarding to watch the growth and progress from the children as they received support and were connected to community resources. Through observing situations where children showed monumental growth, it only served to increase my aspiration to want to be a part of that work and help other child build skills to live a healthier life. Moreover, speaking with the therapist that the HRCSB has on staff and hearing in meetings about the positive ways they have impacted the clients served as further motivation for me to pursue a career as a children's therapist.

During my time as the HRCSB, I completed a contribution project with the goal to leave behind something positive and informative. I focused my contribution projection on adverse childhood experiences (ACEs). Unfortunately, many of the HRCSB's clients had experienced ACEs, including abuse, neglect, and household challenges. I completed research on ACEs, their risk factors, prevalence, physical and mental effects, prevention, and solutions. Then I created resources to educate on ACEs and inform individuals of prevention and treatment. The first



resource I designed was an ACEs information fact sheet to distribute around the HRCSB and make available to clients. I believe that for clients it can help them to have a way to describe what they have been through and conceptualize its influence. In addition, I created an ACEs packet, which included the information fact sheet, therapist-made cognitive behavioral evidence-based worksheets, as well as a coping skills worksheet that I designed. The goal is for the packet to be used as an aid during the 2nd Chances and Choices adolescent support groups, since ACEs are extremely prevalent and can contribute to those problem behaviors addressed in the groups.

Spring 2022 - Michelle Pineda-Hernandez

This semester, I had the pleasure to work in the Children's Case Management Department in the Harrisonburg-Rockingham Community Services Board (HRCSB). Children's Case Management is one of the many children's services offered by the agency. HRCSB's mission to "provide services that promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and their families whose lives are affected by behavioral health or developmental disorders". The case management professionals follow this mission by providing coordinated care to at-risk youth (i.e., individuals battling with behavioral, mental, or substance abuse issues). They do this through collaboration with other professionals and agencies, including, psychiatrists, nurses, schools, department of social services, etc. Another significant service offered by Children's Services is Family Care Coordination (FCC). FCC offers professional support specifically to individuals who are at risk for behavioral health residential treatment or coming out of residential placement.

Anyone in the community can go to HRCSB in search of services – given the population located in Harrisonburg and Rockingham, a typical client served by Children's Case Management usually identifies as low-income and as a result, the MHCM plays a significant role in linking the individual to important services in the community. When I had initially interviewed for the internship position with the supervisor of the department, I had voiced that I was interested in participating in opportunities in which I could develop my Spanish translating/interpreting skills. He was very happy that this was an interest of mine and informed me that this would be something I could explore at HRCSB. In Children's Case Management, there is only one MHCM who is bilingual in Spanish and English. As in many other professional settings, there is currently a high need of bilingual professionals in order to meet the needs of community members. Given the diverse population that HRCSB serves, I initially became interested in this placement because I wanted to work towards closing the gap that currently exists between Spanish-speaking individuals and mental health services.



I had the unique opportunity to work closely with one of the bilingual MHCM's throughout the semester. Due to her fluency in both Spanish and English, most of her caseload included Spanish-speaking families. In general, most of my tasks included community outreach, keeping track of contact notes, transportation, and contacting clients regarding certain services. I also spoke with other agencies in the local area on behalf of my supervisor's clients with the goal of connecting them to the necessary resources. As I described, I had an interest in possibly expanding my interpreting/translating skills – I was given many opportunities to practice this including interpretation for an outpatient therapist during an in-take process and translation of documents for clients. Transporting clients to and from appointments was another important task that I would do on a regular basis throughout the semester. This can seem like a very daunting task because it can be scary to think about driving an agency vehicle with a child in the backseat but doing this was honestly one of the highlights of my placement. I transported children ranging from ages 5-17 which can keep you on your toes since you get to interact with a diverse group. Sometimes, I'd also be asked to transport for other case managers. For the most part, my transports would remain in Harrisonburg but sometimes I'd travel about 30 minutes away from town. Through these experiences, I was able to build rapport with clients and learn things about them beyond their clinical reports. In my experience, I'd transport one specific client on a bi-weekly basis to her therapy appointments – although my main role in her life was to pick her up from school every other Tuesday to go to therapy, it was still an honor to see her grow throughout the semester.

As an intern, I would typically shadow my supervisor during various meetings including, Family Assessment and Planning Team (FAPT) meetings, FCC meetings, court proceedings, or medical appointments. These are great shadowing experiences to learn from especially when I would actively listen and ask questions about the topics discussed. Another great aspect of this placement is the welcoming and kind atmosphere. From my first day, I felt very supported by my case manager and by other professionals in the department. They helped me with tasks related to my internship and supported my personal professional goals.

I work best in environments in which I have the opportunity to engage with a variety of people and in which I am able to explore diverse settings. This field placement is a perfect example of this! There was variability on the type of tasks I would be assigned, and some of the tasks would require me to step in and out of the office. If you are the type of person who loves working with children and variability throughout their day, this is the perfect placement for you. Through this experience, it affirmed my career goal of becoming a school psychologist in the future. Further, shadowing inter-professional meetings taught me the importance of maintaining relationships with the adults involved in a child's life. I have noticed that what I have learned from other courses, including Learning Psychology, Developmental Psychology, and Biological Psychology has helped me understand clients and their experiences. Moreover, the interpersonal



skills I have learned from other experiences related to the major including, SREUU and peer advising, have also prepared me for field placement.

As I have previously mentioned, I had the privilege to work alongside one of the bilingual MHCM's and as a result, I also had the opportunity to engage with Spanish-speaking families. As the semester progressed, I observed a disparity between this community and the use of mental health services. Due to language barriers, many of the Spanish-speaking clients did not understand what case management was and, in some cases, even refused services. My supervisor explained to me that often, her role seemed to have a negative connotation and her clients sometimes feared deportation. From a collection of these circumstances that I observed throughout the semester, I decided to focus my research paper on the current cultural and structural gaps that exist between immigrants and mental health services. Based on research I found, language barriers and harmful immigration tactics/laws are two of the main barriers to access to adequate services. Based on these findings, I chose to create a pamphlet in Spanish that explained what case management is and what rights undocumented individuals have in the United States. My goal with this material was to create a resource that the case managers could have easy access to and diminish language barriers that exists. My supervisor had voiced that many translated documents exist that explain what services HRCSB offers but there was not one available with information about case management. Overall, I left this experience feeling empowered to continue to work for the immigrant community and prepared to move forward towards the next step in my professional career.

Spring 2022 - Anya Keurajian

This semester I have had the privilege of interning at the Harrisonburg Rockingham Community Services Board (HRCSB) in their Children's Case Management (CCM) department. The HRCSB is one of 40 community services boards in the state of Virginia and aims to provide mental health, substance abuse, and developmental disability services to anyone in the community who needs it. The HRCSB's mission is to "promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and families whose lives are affected by behavioral health or developmental disorders." Children's case management focuses on helping at-risk youth in the community manage their mental health. A case manager assesses the individual's situation, connects them with the proper services, and monitors their progress for the treatment period. A case manager is often coordinating between the juvenile court, school, and the home. The HRCSB offers a handful of children's services including medication management, nursing/psychiatric, individual/group therapy, in-home/in-school, 24-hour emergency services, case management,



infant/toddler connection, family care coordination, residential services and more. The HRCSB is split into a children's wing and an adult wing and offers these services for both departments.

As an intern in CCM, I had the opportunity to experience a wide variety of these services. I was assigned to an immediate supervisor, named Andrea, who is one of the senior case managers. Andrea has been there for 15+ years, manages around 40 cases, and has had some of her cases for as long as she's been at the CSB. On most days, I arrived and went straight to Andrea's desk to find out the plan for the day and see if there was anything she needed help with. I was given my own desk, computer, and phone, so I had the flexibility to work independently on quarterly write ups, community outreach, or whatever else she needed help with.

Since Andrea managed close to 40 cases, there was usually something to do; whether it was a client coming in for an appointment, a home visit, a meeting with the parents to fill out paperwork, or a school meeting, each day was different. I was able to attend all home visits, sit in on medication/psychiatry appointments, help parents fill out paperwork, and attend school meetings via zoom. One of my favorite tasks was attending home visits. We typically went to the home to complete the initial intake. These home visits were eye-opening and sometimes a little bit sad but seeing the home environment was important in connecting the client to the best services for their situation. I also attended a good amount of psychiatric/medication management appointments. The HRCSB has a couple of in-house psychiatrists/nurse practitioners who are licensed to prescribe medication to clients, and these clients are required to come in every couple of months for a med check. I have always had an interest in psychiatry/neuroscience, so this was one of my favorite experiences. Having a background in abnormal psychology from psych 335 was very beneficial here, as I witnessed a wide variety of psych disorders as well as the medication that is used to treat them.

While I was with Andrea most of the time, sometimes I was tasked with driving to a family's home to get paperwork signed or transporting a client to and from appointments. Transporting became a big part of my job and something that I really enjoyed! A lot of these parents either work full time or do not care enough to bring their child in, so a lot of the time, it was up to me to bring the client in for their appointment and take them back to home or school. This was the only one on one time that I had with clients, and I really enjoyed being a friend and even a mentor for them. I think that knowledge from clinical psychology and counseling psychology was beneficial here. These classes emphasized the importance of active listening and empathetic understanding when speaking to a someone who is experiencing symptoms of their mental disorder.

I also did a lot of community outreach. On one of my first days, Andrea gave me the task of finding a home for an electric guitar that someone donated to the HRCSB. We wanted to find a teenager who would use it and whose family might not be able to afford such an instrument. I spent a whole day calling around and emailing school band directors in the community. Once I



found a recipient, I hand delivered the guitar to the student at school. Other community outreach looked like searching for available counselors in the community who took Medicaid.

One of the best parts of my experience was the people. Everyone was so welcoming and was always there to answer my questions, give me advice, and even get to know me on a personal level. On days when I didn't have much to do for Andrea, other case managers would offer for me to come to their meetings, court hearings, or appointments, and it was evident that they wanted me to get the most out of my experience. Mainly, I really loved working with the children. I do wish that I got to work with younger children, as most of the transports that I did were for teenagers. In addition, one limitation of this internship was the lack of hands-on experience with the kids. I wish that I could have been more involved in providing services instead of just observing and documenting. Although each day was different, I spent a lot of time at my desk either summarizing quarterly reports, reaching out to community orgs, or doing homework. I had to remind myself that the "desk" work was just as important as interacting with the child. An advantage of this is that I was given the responsibility and independence to do important work, which really increased my confidence and taught me how to be a professional in the field. Another true advantage of this site is that I got to see a variety of mental health occupations in action. I was able to see the impact of psychiatry, counseling, mentoring, and social work.

Another aspect of my experience that I really enjoyed was my contribution project. Over the course of the semester, I noticed that a good number of the children who were experiencing mental health issues were also overweight. My research focused on the impact of nutrition on pediatric mental health, and for my contribution project, I created a set of slides for the waiting room TV that aimed to educate parents and children on the harmful effects of unhealthy eating. Another idea that I had was to create a "menu" of healthy snack ideas, but my supervisor and I both agreed that most parents wouldn't take a copy. Another idea that I had was to implement a food drive, but I figured that educating parents about nutrition would be more worthwhile. Both of my supervisors were supportive of my contribution project and were open to all of my ideas.

Overall, I learned that there is such a need for children's mental health services, and it is something that is not going to improve anytime soon. During my experience, I learned that I do really want to work with children, but I dislike the "desk job" aspect, and would rather be actively interacting with the clients all the time, either as a psychiatric nurse or a counselor. A case manager is very knowledgeable about mental health disorders, but this experience made me realize that I want to be an expert in the field.

I cannot recommend this site enough for anyone who thinks they might be interested in case management. I feel that I was exposed to a variety of situations that helped me see all sides of being a case manager. I think that I will end up pursuing another path, but this internship taught me so much about myself and improved my skill set in writing, talking with people, working with mental disorders, and developing relationships.



Fall 2021 - Michelle Los Arcos Balasch

During Fall 2021, I worked at the Harrisonburg-Rockingham Community Service Board (HRCSB), specifically at Children's Case Management. The mission of the HRCSB is "to provide services that promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and their families whose lives are affected by behavioral health or developmental disorder." The HRCSB has diverse services such as emergency services, residential crisis stabilization, behavioral health wellness and prevention, case management for children and adults, developmental disabilities, infant and toddler's services, outpatient therapy, and substance abuse services, among others. More specifically, children's case management provides assessment of the situations and needs of clients, provides referrals to appropriate services, monitors care and conditions of clients, helps clients maintain their independence, supports at-risk individuals, and provides family care coordination (FCC). FCC is a more intensive, specialized aspect of children's case management services that provides assessment, treatment planning, direct monitoring, and proactive utilization management. In order to be eligible for these services, the child has to live in the Harrisonburg-Rockingham area, be less than 18 years old, and it must meet the Commonwealth of Virginia definition of serious emotional disturbance (SED) or meet the definition for being at risk of SED.

In a regular year, children's case management serves around 300 children, and a typical client at the HRCSB is between the ages of 8 and 13, lives in Harrisonburg-Rockingham County, attends public school, has a lower socioeconomic background, has severe emotional disturbance (SED), and comes from all types of ethnicities. I personally chose this site because I wanted to have the experience to work around children with all different types of backgrounds. I wanted to learn from their cultures and their experiences and use my own experiences and background to help them. Also, learning more about the community and how community-based services work was very important to me. Another reason that I chose this site was to participate in staff meetings, where I would be able to create a network and acquire more knowledge from my peers. One very amazing experience that I was hoping to gain in the time that I was at my site was to go to court. Fortunately, I experienced this once and it was very interesting to observe the process.

My own experience at the site was good in general. The site moved from the McNulty Center to the new building three months before I started my internship, so there was still a period of adjustment. I mostly picked-up and drove clients to their appointments from their school or house, which was a great opportunity to talk with the children and learn more about them. I participated in four staff meetings, and one of them was an entire staff meeting to get to know



each other since they were now going to be under the same director, which was not the case before. I also joined in on the group meetings with the case manager, the child, and the family, I did two home visits where we met with the family in their home for different reasons. During these visits, I was able to be a part of an assessment that done with the mother to see if the child was eligible for a waiver. Lastly, I did research on various things such as housing, immigration, Medicaid, food pantries and clothing.

I believe that everyone at Harrisonburg-Rockingham Community Services Board wants the best for their clients. Everyone works very hard to accomplish what is necessary to help their clients. The people who I worked with were very helpful and were always available in case I needed something. At times, I felt that I could do more and be more useful, but I know it is difficult because of the HIPPA regulations. Also, because of the move, I felt that things were slow at the beginning. By the end of the internship, it got better.

I learned so much in the four months that I spent at HRCSB. First, I learned about the different schools that exist in Harrisonburg. As an international student, the only thing I knew in Harrisonburg was JMU. However, this internship made me leave my comfort zone and go to different areas in the county. I chose this site mainly because I wanted to see if I would like to work with children, and I ended up realizing how difficult it could be. It made me realize that I would prefer to work with people who are 16 years old and older. I also learned how to manage different situations in the best way possible. For example, I had some concerns about something and the only way that I could resolve my concerns was to talk to my supervisor, which I did. However, if it was not for my time at this site, I would not have had the courage to go talk to my supervisor.

I think that the class that helped the most in this site was Abnormal Psychology, because most of the children who I met suffered from a disorder. Even though I did not know every time what disorder they had, the times that I did know, I felt that I was prepared to interact with them and manage any situation in case that something got out of control. In addition, Counseling Psychology was also helpful during times that I was able to talk to children. One thing I remembered during my interactions with clients was to be authentic, and that is what helped me the most when I interacted with children.

During my fourth week at the site, I realized that a lot of the parents of the children that use the services lost custody or were mandated from court to attend different meetings. The reason for this is mostly because of child maltreatment. My research paper was focused on five types of child maltreatment: substance abuse from the parents, physical abuse, sexual abuse, psychological abuse, and neglect. I included a definition for each type of child maltreatment, risk and protective factors, signs, consequences, and possible solutions. My additional materials included a brochure that included statistics about child maltreatment and the schedule of the programs offered for free at the HRCSB. Such programs include anger management, IOP, women's recovery, decisions, wellness and recovery, seeking safety, and strategies. In addition to



the brochure, I translated a book from English to Spanish for the anger management program. A large percentage of clients are Spanish-speakers and for the program to work, they must understand what they are reading and doing. The reason why I decided to translate the book was to give the Spanish-speakers a chance to understand and improve. The idea is to print the brochures and put them everywhere at the site and in different parts of the community where people can see them. The book will be given to the person in charge of the program to be used at the person's discretion.

My experience was very good, and I learned a lot in the time that I spent at the HRCSB. I hope that the next interns have as good an experience as I did, and that they enjoy it like I did.

Fall 2021 - Katherine Gardenier

This semester I worked at the Harrisonburg-Rockingham Community Services Board (HRCSB) in the Children's Case Management unit. Children's Case Management provides support to at-risk individuals by assessing and linking them to appropriate services within the community. The HRCSB's mission is to "promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and families whose lives are affected by behavioral health or developmental disorders." In order to fulfill this mission, the HRCSB provides a large variety of services such as case management, family care coordination, outpatient therapy, medication management, and psychiatric services. These services are offered to both adults and children, resulting in case management that is split into Adult Case Management and Children's Case Management. Case managers assess the client when they first come in, connect them to the appropriate services that HRCSB provides, and work with the schools and the Juvenile justice system in order to best treat the client. Once a client is connected with the correct services, the case managers continue to assess their progress and see if anything in their treatment plan needs to be changed.

As an intern for Children's Case Management, I was able to observe a large variety of services provided for children, specifically services that were handled under family care coordination. Family care coordination works with children and their families who are at-risk for Residential Placement or are coming out of Residential Placement. They work with the case managers to assess their situation and find a treatment plan that suits the child and family's needs. Working with the family care coordinator, I was able to attend home visits, family care coordination meetings, and attend court. During home visits, the family care coordinator would see the client and their family in the home setting and discuss their treatment plan and anything that has recently happened with the client. This was my favorite experience at Children's Case Management, because I was able to see the client in an environment that they were comfortable in and see how they interacted outside of treatment. Another job of mine as an intern was transporting the clients to and from appointments. I enjoyed the transportations because it gave



me one on one time with the clients, and I was able to learn more about them and what they enjoy doing. I was able to form connections with the clients from our conversations about their hobbies and what they enjoy doing.

Being an intern at Children's Case Management, I was able to experience and observe many different specialties in the field of psychology. Being able to observe a large range of specialists was one of the things I was looking for when choosing a field placement, and I was able to achieve that while working at Children's Case Management, which was a large advantage for me. I was able to observe Medical Management meetings, which are when a client discusses their treatment with their psychiatrist, and I was able to observe Court meetings that determined the placement of a child. There were many days that they did not have many things for me to do or to observe, so my supervisor allowed me to work on schoolwork, which was an advantage for me, because I did not have a lot of free time between my classes and my job outside of field placement. Having days that there were not many things for me to do was also a disadvantage, because I did want to be able to observe more and experience more parts of the work done by Case Managers but was not able to because they had nothing going on.

One limitation of Children's Case Management was that the work was not as hands on as some other sites are. Although you are given the opportunities to sit in on meetings and work with the clients during transports, you are not doing documentation or working with counselors or psychiatrists like some of the other placement sites. This can be seen as a disadvantage, but because I enjoyed my work and being able to attend meetings and court, I do not view it as a disadvantage because I got experiences that other placement sites do not provide. The atmosphere at Children's Case Management is very open and comfortable. The supervisor is very respectful of the case managers time outside of the office and does try to get to know everyone personally. The case managers did their best to include me in any meetings that they had with clients, and would give me research to do for a client when there was not much else to do during the day. It is a very inclusive environment, and the case managers were always happy to answer any questions that I had because they understood that I was still learning about the profession.

Something that I learned while interning at Children's Case Management was how to be more confident in my work and working with professionals and clients. Being in a position of authority with the clients was hard for me to adjust to at first, but many of the clients, both parents and children, asked me questions because they viewed me as a professional, and I learned how to interact with having a professional title attributed to me. I also learned how to be confident in the work that I presented to the Case Managers, and how to be confident when meeting with clients for the first time. This has influenced my career goals by reaffirming that I want to be a psychiatrist and work with children, because I feel like I know have a better understanding of the field and have more confidence in my abilities to work in a mental health facility.



From the other psychology courses I have taken, I was able to attribute much that I had learned during Abnormal Psychology to Children's Case Management. Since the population that case management works with has individuals with developmental or behavioral disorders, I was able to observe how topics that I had learned in relation to behavioral disorders affect the client's life. Being able to learn about a disorder and how it affects the person, and then help with the treatment plan of a person with the same disorder is a great advantage because you get to learn about the individual first and then learn about their life with the disorder. Children's Case Management allowed me to meet many individuals with disorders that I had previously learned about, and allowed me to have conversations with the case managers about the client and what could possibly work for the client in terms of treatment.

For my Contribution Project, I researched the advantages and disadvantages of Residential Placement and the benefits of having a Discharge Plan. Because I worked with the Family Care Coordinator, I saw many clients who were at-risk for Residential Placement or coming out of Residential. I created a Family Inclusive Discharge Plan from Residential because I was interested in how important the family is during the transition period of an adolescent out of Residential. Having a discharge plan can decrease the readmittance of an adolescent into Residential and help them continue with their treatment with the support of their family and community. The family is important during the transition period because the adolescent needs the support from them so that treatment progresses and the transition back into the community is smooth. I designed my Discharge Plan like a contract where both the adolescent and the parents write what they need and expect from the other party and also write what they want to see happen during the transition period. The goal was that communication would improve between the parents and the adolescent and so that the adolescent had a greater chance of not being readmitted into Residential.

Overall, I thoroughly enjoyed my time at Children's Case Management and learned a lot about the treatment process of a children with mental disorders. I also learned a lot about Residential and the process of going into Residential and returning to the community. I feel like I have improved as a professional and feel more prepared to enter the psychology profession. I had many different experiences with the case managers, and they all helped me to improve my critical thinking about treatment and how to work with clients and give them all the appropriate services that they need.

Fall 2020 – Caitlin Vu

This semester I worked at the McNulty Center, specifically helping in the Children's Case Management department. The McNulty Center provides and links services to children and their families that are needed for that family to live a full life in the community. Their mission statement is "To enable clients to manage their mental health symptoms effectively across all



settings. To improve client's level of functioning and overall well-being. To promote participation of recommended services." Because of the pandemic, my experience was a lot different than what I have heard past interns explain, but I was still surprised on how much I was able to experience. I was able to transport various children around Harrisonburg to get them to doctor's appointments, therapy sessions, or medication evaluations. I also made a lot of phone calls to set up appointments for clients or ask questions about various services so the clients can be more informed about what they may be signing up for. A lot of the time, I had to research various services around the community for clients. For example, a case manager asked the other intern and I to look for free grade 2 children's books for a client along with free clothes. I researched on Facebook and found a page where people in the community give various items for free and I was able to reach out to someone that had free children's books. The other intern was able to find the clothes around the community, as well. I also went out of my way to be available for my site in order to learn more about what they do. I came in on extra days for a month or so to shadow my supervisor in classes for children dealing with substance abuse and anger management. Although it is not always the case, these children are typically signed up because of a court order, so they have to attend, or they may be sent to juvenile detention. I found it really interesting how my supervisor was able to help these kids be more informed about anger and substance abuse without sounding judgmental or condescending.

I ended up really enjoying my internship at McNulty. McNulty was not one of the options that I picked, but they ended up asking me for an interview. To be completely honest, I did not know what case managers did before my internship. Now that I have learned and I have seen what they accomplish, I think case managers are crucial in every community. At McNulty, all of the staff members are super nice and welcoming; they really make it seem like a little family. Although I was not busy a lot of the time, I found it helpful that the case managers tried to give me tasks to do so I can make the best use out of my time there. Because of that, I was able to learn a lot about what case managers do and how integral they seem to be for this community. I can honestly say that I enjoyed coming in to the internship twice a week because of how nice everyone is and when I am doing a task, I feel that I am putting in effort to help the client and the community. One downside is that because of COVID-19, a lot of the case managers had fewer clients and appointments to minimize in-person contact. I have heard that in a normal semester, the interns would be on their feet running to and from meetings. Working here has really made me rethink my future and I can see myself staying and being a case manager myself. I am really excited for next semester so I can gain even more experience and see if this is the right path that I want to walk down.

These case managers, like all healthcare workers, focus a lot of their energy on helping these clients, but no one really looks at how this may, in turn, affect the case managers. This is why for my contribution project, I wanted to focus on these effects and find a way to help case managers. This will not only help their personal well-being, but increase work effectiveness, as



well. I researched a lot about secondary traumatic stress (STS) and vicarious trauma (VT) and their effect on case managers. These two phenomena occur when healthcare workers are working directly with clients who have experienced trauma in their lives. This can create a traumatic stress that is similar to post-traumatic stress disorder (PTSD) and change the way that case managers view themselves and the world. The implications of these things happening is decreased work efficiency and satisfaction, as well as decreased personal life and relationship satisfaction. In the research, there has come a conclusion that while personal stress-relief mechanisms may help, the best way to reduce STS and VT is to be educated about them. This way, case managers will be able to recognize the symptoms and be able to find help or do something about it. For my contribution project, I created a pamphlet that the company can give their workers that encourages them to attend a class that will inform them about STS and VT. This class will also share tools and ways to minimize these symptoms and also acknowledge opportunities available that the company will implement for case managers (therapy, teamwork activities, etc.). I am hoping that this will put a spotlight STS and VT so that they are less stigmatized in the healthcare field.

Fall 2020 – Tiffany Rodriguez

During this past semester, I had the wonderful opportunity of interning at the McNulty Center for Children and Families in their Children’s Case Management Department. The McNulty Center is part of the larger Harrisonburg-Rockingham Community Service Board (HRCSB), and its mission is to “promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and families whose lives are affected by behavioral health or developmental disorders.” The center provides a variety of mental health services, with its main services being case management, family care coordination (FCC), medication management, outpatient therapy, infant and toddler connection services, and children’s mobile crisis. These services target children and adolescents who are dealing with behavioral health or developmental disorders, as well as assisting their families throughout the process.

Due to the COVID-19 pandemic, there were limitations and restrictions put in place in order to protect the safety of the workers and their clients. Thus, the nature of my tasks as an intern looked quite different from that of previous semesters, as a much smaller percentage of clients were actually coming in person to the McNulty Center. Telehealth visits and virtual meetings often took the place of in-person interactions, and case managers followed an alternating remote/in-office work schedule. But as the weeks progressed, there were more opportunities for in-person interactions with clients, and the variety of my daily responsibilities



increased as well. One of my main tasks was to transport clients to and from their psychiatric appointments. Most days I would pick a client up from school or their home and drive them to the McNulty Center for therapy or a medication management appointment. Transporting clients grew to be one of my favorite tasks, because it really gave me the opportunity to bond with the children and provide them with an outlet where they could just talk freely about their day and the occurrences of their home or school environment. Through these frequent conversations, I was able to develop a connection with the children. This was not only rewarding for me but also for the child's case manager, because, by having richer conversations with the clients, we would be able to understand the present situation of the client more fully. After conversing with or transporting clients, I would then meet with the case manager about concerns that arose throughout our conversation and document the details of our interaction in a contact note.

As an intern, I was also able to observe many different aspects of case management such as Family Assessment and Planning Team (FAPT) meetings, the intake process, and home visits. During FAPT meetings, various medical providers and community partners meet to discuss the plan for a particular child and to approve funding for the specified services. Many services are reviewed and discussed as options throughout these meetings, such as forms of outpatient therapy, residential placements, and therapeutic mentors. These meetings were especially interesting to observe because the providers and the family reviewed the progress of the child and collaborated to determine which next steps would be most beneficial for the child. Because of COVID-19, house visit protocols were drastically modified. Everyone wore masks and conversations took place outside of the house, where the risk of infecting one another was significantly lower. In spite of the precautions, I was still able to observe how a case manager conducts themselves on a home visit and the way in which they aid families through their visits. On one of the home visits I observed, the case manager was helping the family to understand the transition of their adolescent into adult services. The case manager presented herself in a confident manner and answered all of the family's questions and concerns in a way that put them at ease regarding this major period of change. Observing this home visit truly allowed me to further my understanding of the role of a case manager and see their importance to these families. I was also tasked with collaborating with community agencies, such as Mercy House, to obtain items like shoes and clothing to help families at the McNulty Center. My other responsibilities included reaching out to different programs in the Harrisonburg-Rockingham area to determine if their services would be of benefit to our clients and scheduling appointments for clients.

After being at the McNulty Center for a few weeks, I realized that it was a common occurrence for clients to miss or forget an appointment. This was what gave me the inspiration for my contribution project and research paper. I wanted to evaluate client engagement in community-based mental health services. There are many barriers when it comes to client's engagement level, but one way to combat this is through case management and accessible



transportation. Case managers at the McNulty Center often remind their clients about appointments and provide free transportation to and from appointments. However, I realized that the McNulty Center's website does not have a large amount of information describing their services in detail that can be easily understood; nor does it describe what a new client should expect when first attending community-based mental health services. Taking part in mental health services for the first time can definitely be an intimidating and nerve-racking experience for children, adolescents, and their families. Thus, I wanted to focus on mitigating one of the barriers of engagement—the mental health stigma. In our current age of technology and social media, adolescents are often searching the internet for accurate health information, but the information online is often provided by an unqualified source or inappropriate for their specific mental health concerns. To combat this misinformation, I felt that it would be important and beneficial to create videos that put forth appropriate and accessible health information for adolescents and their families to understand what the services being provided actually are and how they can help individuals specifically. In creating my contribution project, I really wanted to educate the population and start a conversation with the community so that more people would be willing to seek the mental health services they need and receive the appropriate care. To date, these videos have not been implemented at the McNulty Center. However, I am hopeful that within the next few months they will be added to the HRCSB website and streamed on televisions throughout HRCSB locations.

I am beyond grateful for the many unique experiences that I gained at the McNulty Center. I have always had a passion for working with children, and the McNulty Center gave me the opportunity to work with children of all ages and diverse backgrounds. There was one child that I transported from school to therapy almost every week, and our frequent encounters allowed me to get to know him quite well, and always made me smile. During my last week at the McNulty Center, the case manager for this child informed me that, upon going home, the child would tell his mom about me and the fun we had throughout the day. Hearing about the impact I had on this one child's day reaffirmed my passion for working with children and continually reminds me of how a career like this can really make a difference in the lives of others. I also enjoyed the opportunity of working with various case managers, because it allowed me to observe the ways that case managers approach different situations with their clients. The only downside to this internship was the impact of the pandemic. Due to COVID-19 limitations, there were not as many in-person court proceedings, IEP meetings, and residential placement visits. Thus, the number of opportunities to observe was limited. Despite these down periods, I really enjoyed the structured environment of the McNulty center and the wonderful case managers that I had the chance to work with. It was evident that the case managers are empathetic and hard-working individuals, and my experience allowed me to understand and really respect the work that case managers do each day. This experience has even impacted my



future career goals, as I am now applying for social work job opportunities and psychology graduate programs.

Spring 2020 – Shiri Abramovitch

This semester I was granted the opportunity to complete my capstone fieldwork in the Children’s Case Management department at the McNulty Center. Recognized as a branch of the Harrisonburg-Rockingham Community Services Board, the McNulty Center strives to provide a variety of services that “promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and families whose lives are affected by behavioral health or developmental disorders.” The case managers within the facility diligently assess each client's situation and needs and collaborate with specialists to link the child and their families to the appropriate services. In addition to case management, the McNulty Center also provides services such as psychiatric services, outpatient therapy, infant and toddler connection, juvenile justice, school-based programs and autism services. Once the case manager links the client to the appropriate services, they continue to monitor the case, assessing the benefits of the services and whether or not changes are needed to be made.

As an intern, I was able to gain a wide range of new opportunities and experiences. I mainly worked under my supervisor, John Wilson, and my assigned case manager, Stephanie Ross. I completed tasks for Stephanie’s clients, but on occasion I would also complete work for one of the other case managers and their clients. One of my main responsibilities was transporting clients. During these transportations I would pick up a client either from their school or their house and take them to an appointment at the McNulty Center, or to an off-site appointment. Transportations were one of the small moments in which I was able to gain one-on-one interactions with the clients and get to know them as a person and listen to their stories. I had many clients whom I would transport on a weekly basis and I enjoyed being able to ask about their week since my familiarity became more comforting to them. On occasion, if I was transporting a client to a medication management meeting, I would be able to sit in with a case manager and the psychiatrist and examine what needs were being addressed for the client. This was a great avenue for me as I was able to observe why certain recommendations are being put in place based on the clients’ needs at the current time.

I also had the privilege to sit in on various meetings. I attended multiple child specific meetings in which representatives from school systems, social services departments, the child’s guardians, and sometimes the child depending on their age would come together to discuss the client's current plan and how to resolve any issues that were impeding the child from being successful in his/her services. I also attended Family Assessment and Planning Team (FAPT) Meetings. These meetings are held for when Medicare will not cover a service needed for a



client. The case manager will make an argument to the board at the FAPT meeting to grant funding for the needed service. I also was able to sit in on intakes. This when a case manager meets a new client for the first time and asks questions regarding the clients reason for seeking out the McNulty Center's services. Afterwards I was able to sit down with the case manager and ask questions about what services they would recommend linking the client towards and their reasoning behind those recommendations.

Although it was different from what my post-graduation plans were, I still found each day at McNulty to be exciting and learned valuable information. Some advantages that I found was that you are often on the move, gaining valuable information that is very helpful to know when moving into a post-graduate life. I believe that for someone who is very interested in the social work world, this placement is a great way to dip your toes in and get a sense for what kind of work one would experience. Another advantage was that since there are many case managers within the department, I was able to complete work for anyone else if my case manager did not have a task for me to complete. Always be sure to ask everyone if they have any work they would like you to complete. Everyone within the department is very friendly and was always open to bringing me along whatever their schedules allocated for during the day. Some of the disadvantages of this internship were that some days could be rather slow. If none of the case managers had any tasks for me to complete, there was not much else to do except school work. However, these days were not the norm and I was often still given work to complete even if there was no meeting or transportation needed. Another disadvantage is that in order to get the most out of your experience, it is better if your schedule allows you to be at the site for at least 3-4 hours for one day. I attended my site for 6 hours on one day and 4 hours another day and I personally believe that my schedule allowed me to attend more experiences. The best hours to be able to attend are between 10-4. Therefore, if you are going to have a busy schedule during the semester, this site may not be the most valuable to you.

For my contribution project, I decided to do my research on the benefits of community-based programs and mentoring on the development of the children who are clients at the McNulty Center. The case managers work hard to link their clients with services such as out-patient therapy, and medication management, and residential placements which have a high impact on their development. However, I felt that the focus on community-based programs was absent and I decided to research the positive impacts that could be made from incorporating such programs into treatment preparations. For my materials, I created brochures for two community-based programs located within the Harrisonburg community. My goal was to have these brochures placed at the reception desk at the McNulty Center and to have the case managers have them on hand to recommend for a client and the guardian if they find that one of the programs may be of interest during an intake. I also decided to develop a Venn diagram that families may want to consider looking at if they are hesitant whether or not their child could benefit from either program.



One facet that I gained while interning that I felt I did not bear before was my ability to be confident and professional when interacting with adults and other professionals. I have always felt myself to be timid and afraid to ask questions. At McNulty, the environment was truly unguarded and friendly allowing me to feel more confident asking for assignments or simply just having a regular conversation with the other staff members. I truly enjoyed my time interning in the Case Management Department. I felt that I learned valuable skills that I will be able to carry along with me when I enter my graduate studies and eventually the job market. I am very thankful for all of the possibilities that John Wilson and the case managers had in store for me and I enjoyed working alongside everyone for the semester.

Fall 2019 – Marta Rampini

During this semester, I was able to complete my capstone requirement while serving the Children’s Case Management department of the McNulty Center for Children and Families. Part of the Harrisonburg-Rockingham Community Services Board, their mission is to “promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and families whose lives are affected by behavioral health or developmental disorders”. The McNulty Center offers many different services to their clients, including case management, behavioral wellness and protection, school-based services, autism services, juvenile justice, psychiatric services, outpatient therapy, emergency services, infant and toddler connection, and developmental disabilities services. The mental health case managers staffed at the McNulty Center serve children and adolescents with behavioral, developmental, and/or other severe mental health issues by assessing their situation and needs, linking the client and their family to appropriate services, and monitoring care and conditions. Additionally, the case managers not only collaborate with on-site psychiatrists, nurses, therapists, and other qualified professionals, but also other agencies such as schools, primary care physicians, specialists, the Department of Social Services, the juvenile court system, and the Social Security Administration in order to provide the best care possible.

As an intern in the Children’s Case Management department of the McNulty Center, I was given the opportunity to shadow case managers during their normal workday. I attended juvenile court hearings, where I had the chance to observe court processes and the outcomes of custody battles as well as the result of juvenile criminal charges. I was able to visit the clients in detention centers after their court hearing, which gave me a different perspective on how each client reacts to their placement in detention. I was also able to visit a client at a residential facility in Richmond (UMFS) and speak with therapists there about their progress and what they can improve on to leave the facility. Furthermore, case managers brought me to child specific, IEP and child study meetings in schools to address problems that a client was having and how different community partners as well as the school and parent can properly support the client.



Sometimes, after these school meetings or residential placements, case managers would visit the client in their home to make sure they were properly adjusting and to potentially put additional services in place to support them. Finally, I attended psychiatric medication management meetings at the McNulty Center, in which the client and their guardian(s) would collaborate with the case manager and the psychiatrist to ensure that the prescribed medication was working, and if not, how they can find a solution. Overall, these experiences gave me an inside look at how many ways a case manager can help their client, and how much responsibility they have.

One of my main responsibilities as an intern was transporting clients from their school to the McNulty Center. Transporting clients typically meant that I would pick them up from school or sometimes their home and take them to their therapy or medication management appointment at the McNulty Center. This experience offered me a rare chance to independently speak with clients and learn more about their life and things they liked to do. Sometimes, the client would be silent during the car ride, and I would turn on some fun music and let them have quiet time. However, some clients loved to talk, and I would be able to get a better idea of who they were, and why they needed services. Transporting clients showed me that each client has different needs, and as an intern, I could offer them either the peace and quiet or the listening ear that they may not get at home or at school.

As part of my field placement, I completed a research paper and contribution project on a topic I was passionate about. I focused my research on potential improvements to contemporary drug education, and found that educators, parents, and the youth must collaborate by incorporating peer-led interventions and youth input, and by investigating social environments in the school, the home, the mass media, and the community. In order to truly explore this as an option, I collaborated with an Early Intervention Clinician at Harrisonburg High School, which was starting their first substance awareness group for students caught with substances at school. I supplied the EIC with research on substance use education and other resources, such as worksheets to use during group. Towards the end of the semester, I attended weekly meetings and helped lead discussion-based education on how substances can affect your life in different ways, and how to know when substance use becomes a problem. After attending group, I had a better understanding of the thought processes of young people who use drugs, including their motives for using them and how it affects their daily lives in various ways. According to students in this group, they use drugs to escape reality, have fun with friends, reduce anxiety or sadness, and fit in with social groups. I noticed that students were very open with the EIC and I about their drug habits, how often they use, and what substances they use (cannabis and nicotine, mostly).

The McNulty Center offered a comprehensive and welcoming atmosphere that made my internship very enjoyable. While some days were slow and there was not much else to do beside schoolwork, many days were fast paced and offered many opportunities to partake in. Each case manager is kind, intelligent, compassionate, and cares deeply about their clients and how they



can better serve them. They would always offer to bring me to any meeting they had, and if they knew of a particular experience that would be enjoyable or interesting to me, they would ensure that I could go and participate. The amount of different settings allows students to get a taste of everything, and can show students how much more social work and psychology can offer them. Students thinking about an internship at the McNulty Center should know that much of the internship involves driving, and that some days can be slow and offer very little to do. Despite that, I have learned so much about social work and the Harrisonburg-Rockingham Community at the McNulty Center this semester, and how psychology and social work are so closely intertwined. This experience has shown me that my true passion for serving others would be best channeled into a social work career, specifically as a Licensed Clinical Social Worker (LCSW). Prospective interns should speak with the supervisor, John, about which days might offer the most opportunity, and also ensure that they have a light and/or flexible schedule for the semester.

Fall 2019 – Emery Dahl

Over the past semester, I had the wonderful opportunity to complete my internship at the McNulty Center for Children and Families in the Case Management department. The McNulty Center is a part of the Harrisonburg-Rockingham Community Services Board and the center's mission statement is "Our case management professionals have a strong focus on health and functionality for the people we work with and their support systems. We professionally assess the situation and needs, link to appropriate services, and monitor care and conditions. Our goal is to help people maintain their independence while living with severe and persistent mental health, substance use and developmental disorders. Our extensive work with supporting agencies and community resources gets the right service to the right person at the right time". The services provided at the McNulty Center are behavioral health wellness and prevention, juvenile justice, school based services, autism services, psychiatric services, outpatient therapy, emergency services, developmental disabilities services, case management and infant and toddler connection.

While at the McNulty Center I experienced a wide range of new opportunities and experiences that I was grateful to participate in. What I loved about my internship was how I was taken out of my comfort zone especially while transporting clients. A lot of my days at my internship revolved around bringing clients to the McNulty Center for therapy and medical appointments from school or their houses. I still remember the first day I transported for the McNulty Center - I was so nervous when I got into the car I was practically shaking! Once I dropped the clients off at their destinations, I instantly became more confident in my ability to transport. Transporting clients was one of my main jobs while at McNulty and I appreciated every minute of it. I loved having valuable time to chat with clients about how they're doing or even about simple things like the songs on the radio. I felt that even having a simple conversation



with a client brightened their day. I had a favorite client who I drove to McNulty every week; I developed a good relationship with this client who slowly started conversing more with me. Driving around Harrisonburg and interacting with clients really opened my eyes to the different circumstances people live in. I loved driving to a new place or even somewhere I had been before! I felt as if I was really experiencing the world around me in a different light than I had seen before starting my internship.

I also experienced going different meetings during my internship, I attended IEP meetings, FAPT meetings, intakes, child specific meetings and various medical meetings. These meetings really opened my eyes to the many services that the McNulty Center provides to the community around them. The medical meetings were very influential to me because that's where I came to my idea for my contribution project. I sat in on various meetings where parents or clients were concerned about their recent diagnosis of ADHD. I came to realize that lots of individuals at the McNulty Center were misinformed about the disorder so I decided to create a pamphlet to inform these individuals. My pamphlet talked about the various treatments behind ADHD, the basics of ADHD, and coverage from Medicaid. I used this pamphlet to inform parents/clients about ADHD by giving them information that can help them have a better idea of how to go about getting the best treatment for their child.

I also went on home visits which was a very interesting experience to me. I first felt strange because I was in somebody's house that wasn't mine. I realized that being able to see how somebody else lives reveals a lot about their personalities. I also got to experience going to court while at my internship. Going to court was probably one of the most shocking experiences to me. I saw all different type of court cases whenever I was there. The cases ranged from simple traffic tickets or to much worse offenses. It was very interesting to see how the court system worked and see how court was very much a part of services at the McNulty Center.

As an intern at the McNulty Center, I had lots of new opportunities that I wouldn't have been able to participate in anywhere else. I had a behind the scenes look at the inner workings of this organization and seeing what they do for the community. It was very interesting to see how the center works together with the community to find affordable treatments to help clients get the help they deserve. Being under the wing of my supervisor and the other case managers, I got to see how they go about their daily tasks and work hard to help their clients the best that they can do.

Working at the McNulty Center was a very fun, exciting, and influential opportunity that I was glad to partake in - there was always new things every day for me to do! This job wasn't a desk job, I was constantly on the move and getting to join in on new experiences. I wouldn't have been able to experience all the new exciting things at my internship without the fast-paced environment I was in. There were some days where the case managers didn't have things for me to do, but this wasn't that bad since I normally always had work for my contribution project or schoolwork to do. My advice for anybody wanting to have their internship at the McNulty center



is to not be afraid to speak up if you have any specific things you want to do! The case managers would always ask me if had specific things I wanted to do/go to and they were always open to having me come along with them. Overall, working at the McNulty Center was a wonderful experience, I learned a lot about myself and the world every day that I was there.

One of the main things I've learned at the McNulty Center was how to interact with other clients/staff in a more professional manner. All my life I've never thought of myself as a very professional person because of my struggle with my learning disabilities. Seeing how case managers interact with one another and their clients taught me a lot about how to communicate. I've learned how to speak to individuals in a calming yet professional manner, skills that I hadn't been able to learn yet at this point. I know that I still have more learning to do but these skills have brought up my confidence with speaking to individuals in a professional way. What I have learned while at the McNulty Center influenced me to pursue my goals to working as a case manager once I get my masters in social work. Seeing how much of an impact the case managers make on the lives of others really inspires me to get a job helping others. I want to be able to impact others' lives in the best way possible by finding solutions that will help them grow and learn.

Spring 2019 – McKenna Raymond

This past semester, I was granted the privilege of completing my field placement experience within the Children's Case Management department at the McNulty Center for Children and Families. Recognized as a branch of the Harrisonburg-Rockingham Community Services Board, the McNulty Center prides itself in providing services that "promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and families whose lives are affected by behavioral health or developmental disorders". With case management being only one type of service offered within the facility, the McNulty Center also provides services such as behavioral health wellness and protection, juvenile justice, school-based services, autism services, psychiatric services, outpatient therapy, infant and toddler connection, emergency services, and developmental disabilities services.

Case management in particular serves children and adolescents with behavioral, developmental, or other severe mental health issues by linking them to needed services within the community and monitoring their progress; these services could include therapy, medication management, or even different school placements. The case managers at the McNulty Center collaborate with on-site psychiatrists, nurses, and therapists along with other agencies such as local schools, primary care physicians, mental health specialists, the Department of Social Services, the juvenile court system, and the Social Security Administration. Each case manager



can have a caseload of up to thirty children at one time, but this number often fluctuates based on each child's success rates.

Throughout the entirety of my time spent at the McNulty Center, I was an intern for one particular case manager who I would shadow on a daily basis. If her day was rather slow, I would then be allowed to shadow and interact with other case managers and their clients. I had a wide range of responsibilities in my four months as an intern, learning through both observation and independent application. The first sort of observing experience that I was introduced to was intake meetings. An intake meeting simply consists of a new client and his or her caretaker answering relevant questions for the case manager regarding the child or adolescent's reason for either being referred to or seeking out the services that the McNulty Center provides. While others may have found this drawn-out process to be rather dull, I found it to be a considerably telling process for both the client and the caretaker. I would always be curious to see how involved the caretaker was with the client along with how effectively the client and caretaker communicated with each other. These meetings were also my first contact with the client – my first chance to become familiar with who they are and what they struggle with. I found it beneficial to take advantage of this opportunity and would try to connect with them as much as possible.

One of my favorite independent tasks to complete was the construction of monthly and quarterly summaries from the clients' TDT updates. TDT stands for Therapeutic Day Treatment, which is essentially a therapy setting of professionals within each client's school environment. Each month, the TDT workers will send the case managers an update about their designated child's progress in school; this could include academic grades, peer relations, medication management, behavioral tendencies, personal hygiene, or emotional regulation. My job involved consolidating the most important information about each client into a paragraph-length summary. I took the most pleasure in this particular task because it allowed me to become better associated with each client on a more personal level without having to question them about topics that they may have not felt the most comfortable discussing. Learning about each client's background and current hardships allowed me to find meaning in each client's behavior. I was also often asked to formulate contact notes which simply involved me documenting the interaction that occurred between the client and my case manager, but this task did not hold as much value as TDT summaries did to me.

Home visits for clients shifted between observation and independent experiences for me depending on the reason for the visit. My first home visits consisted of me accompanying my case manager for matters such as a face-to-face or a treatment plan update. A face-to-face home visit is required for clients that receive case management services, meaning that the client must be seen at least once every ninety days by their designated case manager. The case manager will often ask the client about recent events and how things are going at home or in general while the caretaker is informed of any information that has come to the case manager's attention by the



therapist, the school, or any other relevant community-based agency. Home visits for treatment plan updates are moderately short and are usually used as a confirmation to continue the treatment plan that is already in place for the client. Less common reasons for solo house visits on my part mostly dealt with matters such as updating contact and housing information or confirming upcoming appointments. I found that being present in the client's home environment as well as seeing how their family system operates was very beneficial for filling in the pieces as to where this child or adolescent came from.

Some of my other most cherished experiences involved me sitting in on clients' psychiatric and therapeutic appointments. I found that the psychiatric appointments were much more emotional than I had anticipated them to be. Similar to a therapist, the psychiatrist asks how things have been going in the client's life whether that be problems related to home or school, emotional regulation, physical symptoms, internal conflict, or other pressing issues. I noticed that the psychiatric meetings dealing with continuation of medication were the most fluid while meetings introducing the possibility of beginning medication, switching medication, or going off of medication presented the most tension-filled appointments. I only had the chance to sit in on a couple therapeutic appointments, but I was extremely thankful because I did get the opportunity to view one of my favorite clients participate in play therapy. I admired the psychiatric and therapeutic appointments to such a large extent because they allowed me to analyze each client's nonverbal cues, behavioral tendencies, and breaking points while in their most vulnerable state.

Being exposed to client-specific meetings was also a tremendous interest of mine. Client-specific meetings varied in subject matters, but always addressed a significant concern that directly impacted and impeded a client's mental health progress. To give a more descriptive example, I had the privilege of sitting in on a client-specific meeting for a young boy who had recently started to develop aggressive behavior, insomnia, and schizophrenic symptoms. In order to improve the client's current condition, the child's grandmother, principal, vice principal, juvenile officer, TDT worker, DSS officer, and case manager gathered to develop a plan to alleviate the young boy's symptoms and ultimately determine how to better serve him. School visits play an extremely similar role in that they include the same group of individuals gathering to decide how they are going to resolve the child's current circumstances. IEP and interdisciplinary meetings were the most common reason for our school visits, with both of them calling for review of the concerns relative to the child's academic grades, peer relations, and behavior at home and school. I gained such an immense amount from each of these types of meetings because it was always amazing to see how many people contribute toward the betterment of the child and how much collaboration occurs throughout each child's mini support system.

The most lasting moments that resonated with me most from this field placement were my time spent with clients during transports. Transporting clients was one of my main



responsibilities as an intern, whether that be to and from appointments or to and from other necessary locations such as a grocery store, a realtor's building, a phone company, or a Social Security office. I valued these transportation trips because these were some of the only moments that I was granted one-on-one time with each client. I will soon be attending graduate school with a focus in Clinical Mental Health Counseling for young trauma-care patients, so being able to communicate effectively with these clients who possessed varying mental health challenges was exceptionally important to me. This aspect of my field placement better prepared me for my future occupation by teaching me how to read nonverbal cues, how to set the pace for conversation depending on the client's condition, and how to treat each client as a survivor rather than a victim. The last part became substantially important to me because I recognized how reluctant clients were to discuss their previous trauma or current condition once we had already become familiar with each other – they did not want to be pitied, they did not want to be apologized to, and they did not want to be treated like an outsider.

The remaining time at my field placement site was spent on completing miscellaneous and rather unfamiliar tasks for clients and their caretakers who were not fully capable of accomplishing them on their own. Some tasks are as follows: shopping for lice repellent, searching for a map of roadways for a local region, contacting shelters and apartment complexes regarding availability, helping caretakers fill out food stamps/Medicaid forms and rental applications, contacting phone companies, scheduling taxi rides, contacting pharmacies to check which medications are in stock, and picking up applications/making appointments for clients at the Social Security office.

Overall, I was extremely pleased with my time spent at the McNulty Center. Given my future plans, this opportunity to work with such a wide age range of children with varying mental health challenges was such a blessing and affirmation as to what I want to spend the rest of my life doing. The only drawbacks that I found to be a disadvantage during my field placement were the sporadically slow days; if there were no appointments or tasks assigned to me that day, there was not much that I was capable of doing besides schoolwork. However, I believe that this would be the case for almost any office-related internship.

Furthermore, a huge advantage to being an intern within the case management department was the amount of room I was allowed to explore. This is not an office job where you sit in a cubicle – I found myself in a different context nearly every day where no two clients were the same. I encourage any individual who plans to intern at the McNulty Center to take initiative and always remember to ask if any case managers need assistance with any tasks or have any upcoming appointments that you could sit in on! The more you ask, the more they will remember to include you. The McNulty Center was everything that I could have asked for in an internship and I am eternally grateful for this opportunity.

Spring 2018 – Lakeisha Hawkins



This semester I completed my field placement at the McNulty Center, specifically in the Children's Case Management Department. As a division of the Harrisonburg-Rockingham Community Services Board, the McNulty Center's mission states that the agency "provides services that promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and their families whose lives are affected by behavioral health or developmental disorders." At the McNulty Center, case management provides services that link at-risk, mentally ill, or emotionally disturbed children to community resources, or services within the CSB that will benefit them. These services can include therapy, medication services, and other useful resources. Once the client is linked to appropriate services, case managers assess whether or not the services are beneficial and monitor client progress.

As an intern, I was able to gain many valuable experiences. One thing that I experienced quite often was client transports. During transports, I would pick up a client either from school or home and bring them in for therapy or medication appointments. While transporting clients, I was able to talk with them and get to know them. I enjoyed transports because the children seemed to be more relaxed in the car and were willing to have conversations with me about things like school and what they like to do in their free time. I was also able to accompany a case manager on home visits, meetings, and court cases. During home visits, the case manager would check on the client and speak with the guardian about how the child is doing with services, or how the child is doing in school if that was the presenting issue. One of the main experiences that I was able to be a part of was meetings. I attended several child specific meetings and family partnership meetings for clients. At these meetings, representatives from local agencies like the school system, Department of Social Services, court services, as well as the child's guardian would come together to make a plan that would help the child and the child's parents resolve issues that were keeping the child from being successful in services.

I was able to observe truancy court twice and it was a different, yet exciting experience for me. I sat in the courtroom with a case manager who usually had to testify regarding the client's compliance with services. At court I was able to learn how the court system works and how the CSB interacts with the court in order to offer services that will benefit the population that they work with. It was interesting to experience court because it was my first time being exposed to the judicial system in Virginia and I was able to learn how everyone fulfills their role in the court system.

Another experience that I was able to gain at McNulty was visiting a residential facility. I travelled with my supervisor and another colleague to Culpeper to visit a residential facility called Childhelp. From this experience I learned about another sector of the community that case managers interact with in order to get their clients linked with services that are most beneficial to



them. While at the facility, I was able to see the grounds and interact with the clients that we were there to visit.

As an intern, I had many opportunities to experience different things and that is one of the things that I liked most about McNulty. I was able to choose what kind of meetings I attended and other experiences that I felt were more relevant to my interests. For me, McNulty was the perfect site because I was not stuck behind a desk all day, but I also was not constantly on my feet. At McNulty, I was able to work in a calm environment while also being exposed to many other environments such as schools, court, or the Department of Social Services. However, because it is more of a desk job, some days there is more downtime than others. Sometimes I got restless with nothing to do, but I was able to work on other assignments if the case managers had nothing for me to do.

One of the main things that I learned at McNulty was how to interact with the at-risk population. Before field placement, I had not worked closely with others who were so different from me. This experience gave me insight on how to be professional with people who come from different backgrounds than me. I also learned how to interact in a professional way with coworkers and my supervisor. Another skill that I gained during my time at McNulty was documentation skills. Every interaction with a client had to be written about and scanned into their file. I had to learn how to write concisely about what the client told me and other things that I found important during the interaction. Learning these skills allowed me to prepare myself for the professional field where I will be interacting with clients and coworkers.

One piece of advice that I would give to students who are considering placement at McNulty would be to try to leave your week open as much as possible so that you are able to be at the site as much as possible. I went on Monday mornings when I did a lot of transports, Thursday evenings, and Fridays. I had no Friday classes, so I was able to spend all day at the site. Fridays were usually slow at McNulty, so I would not recommend having Friday as your open day. It would also be good to leave your evenings open because you may be asked to mentor. Mentoring can only take place in the evenings when the children are out of school. I would highly recommend being a mentor because the children really enjoy it and as an intern, you will be able to learn a lot from it.

Overall, I really enjoyed my time at McNulty and I feel as though it was a great decision to intern there. The skills and experiences that I gained there are invaluable, and I feel equipped to enter the workforce because of field placement and my time at the McNulty Center.

Fall 2017 – Kristin Gross

McNulty Center for Children and Family Services is a part of the Harrisonburg-Rockingham Community Services Board. Its mission is to “help people maintain



their independence while living with severe and persistent mental health, substance use and developmental disorders.” The McNulty Center evaluates the situation and needs of a child and then links them to suitable services while consistently monitoring their care and conditions. They serve children, 18 years or younger, from Rockingham County and Harrisonburg City of all gender, races and ethnicities. No two clients ever look the same. They can range from showing signs of ADHD to needing hospitalization for suicidal thoughts. The McNulty Center is made up of many services: Case Management, Out Patient Therapy, Medication Management, Family Care Coordination, Mobile Crisis Service, and Early Intervention Specialist. I worked in the Case Management Department during my field placement experience.

My first day immediately set the tone for what was expected of me as an intern. Only a few hours on the job, I was asked to use an agency’s car to go to a client’s house and fill out a Food Stamp Application with the mother because she could not read English well. I remember feeling slightly uncomfortable because I had never filled out a ten-page government document before, let alone interacted with someone whose preferred language is Spanish. Due to my supervisor, John and case manager, Stephanie, I learned how to quickly embrace situations that were outside of my comfort zone.

One of the first things I learned was that for every interaction with a client, there must be a contact note documented. Interactions can range from calling a client to inform them of a doctor’s appointment to a face-to-face interaction like filling out social service documents with them (Food Stamps, TANIF, Fuel Assistance, etc.). The main source of my contact notes came from transporting clients to and from their med management and therapy appointments. During these interactions I was able to gain clients’ trust and develop deep connections with them. I will never forget how excited a client was when her grandmother let her bring in real mash potatoes to her class Thanksgiving Day Feast. She informed me that they only get to eat the “real” kind for special occasions. This is just one of the many instances where I realized how absorbed I was in the “JMU bubble.”

During my internship, I witnessed the one-hour intake process where the case manager has to ask the client’s parents everything about their family, school, social and behavioral aspects. I accompanied Stephanie on many “surprise” in-home visits for the clients. This is where we were able to get a sense of the real environment the child is living in and address any problems. I also attended John’s anger management group called Choices where I was able to analyze the progress of the children throughout each session.

While working at that McNulty Center I was able to immerse myself in a variety of new experiences. I attended truancy meetings where an Attendance Improvement Plan is held to correct the absenteeism of a student. If the student does not follow the plan then a referral is made to the courts. I was able to attend a court hearing for a client that did not follow the plan. My client was sentence to ten days in a detention facility and issued a family planning meeting to be put in place. I had the opportunity to visit the detention center to have a face-to-face visit and



see the structure of the facility. I also attended the family planning meeting where a CPS, truancy, case management worker all discussed the next steps for the client after detention. The result of the meeting was made to remove him from his current living situation and move him into his relative's house.

I also had the opportunity to attend FAPT (Family Assessment and Planning Team) meetings. When Medicare does not cover a service a client needs then the case manager will make an argument to FAPT to allocate funding for the service. Usually this is for clients who have severe behavioral problems and need to go to a residential facility where there is 24-hour care, guidance and protection. During my internship I took a trip to Richmond with my supervisor and case manager to visit clients who have been in a residential facility for years.

If it weren't for my field placement site, I would have never been exposed to the diverse community in Harrisonburg. I now understand the responsibilities and expectations for a case manager and how to connect with people who come from a different background.

A clear advantage for working at this field placement site is that you will never get treated like a "typical intern" –one who just does desk work for their supervisors. You truly get hands on experience where no two days look similar. For example, I accompanied John to Sentara RMH Medical Center where we visited a client who tried to commit suicide the night before. Being close in age to the teen, John let me give my input and advice to her. Afterwards he applauded me for how well I was able to connect with her. I loved working for an organization that consistently gives feedback to help develop your professional skills. The biggest advantage of working for the McNulty Center is the culture they have created amongst their employees. There was never a dull moment in the office between the seven case managers. Everyone is so supportive of each other. Whether it's a client in crisis or a difficult meeting, the case managers are great outlets to debrief your experiences.

Being exposed to children was one of my favorite aspects of this internship because I had never worked with this population. Sometimes I found it to be emotionally challenging when I found out that a guardian was not complying with the case manager's recommendations to improve their child's well being. Even though I found this frustrating, I learned how to keep my composure and act professionally. One of the reasons I believe I had such an incredible experience is because I was able to work a half day on Tuesday and the whole day on Thursday. If I worked on a Friday I could see how this would be a disadvantage because an intern would experience a lot more downtime and missed out on invaluable experiences. Therefore, for future interns I recommend setting up your class schedule so you could avoid this.

At the McNulty Center, I learned how to assess the situation, connect the child with the proper resources and the do a follow up with the client to make sure the resources were the best fit. This is important for my future career goal as an Industrial Organization Psychologist. I will assess the company's current situation, discuss options to make the company more efficient and then make sure these options were the best fit for the company. I also improved my



communication and networking skills, which built up my confidence in myself. I am extremely grateful to have had the chance to work with such inspiring people that had such an impact on my JMU career and future career.

Spring 2017 – Samantha Tanzola

I completed my Field Placement at the McNulty Center for Children and Families, which is a branch of the Harrisonburg-Rockingham Community Services Board. The mission of the McNulty Center is to provide effective and community-based services to children and adolescents who have physical, mental, and intellectual disabilities. There are many services offered at the McNulty Center, the most notable being individual and group therapy, psychiatric and nursing services (there is an on-site doctor and psychiatric nurse at the McNulty Center that both prescribes and monitors psychiatric medication), preventive services (this includes regular therapy and medication appointments, and routine check-ups), behavioral wellness services (such as support groups and the Choices group that is tailored to adolescents with substance abuse problems), and the infant and toddler connection. The infant and toddler connection is an at-home early-prevention service for toddlers with intellectual and physical disabilities. The McNulty Center also offers case management services. Case managers are assigned to clients to assess the needs and preferences of those individuals and link them to services in the community. The case managers then continually monitor those services and regularly (every two weeks or so) see the client. During my field placement I worked solely with the case managers.

My responsibilities at my site were accompanying case managers to home visits, attending parent-teacher conferences and child-specific meetings, transporting clients to appointments, linking clients to other services in the community, writing contact notes for clients, and helping parents assist their children with basic needs (such as making them doctor appointments and finding their children transportation to school). During home visits I would take notes and assist the case manager with anything else that they needed. I attended child-specific meetings and parent-teacher conferences with case managers to give me perspective about how the case managers work with the schools in the community to help their clients. A big part of my responsibilities were linking clients to other services in the community. For example, if a child was misbehaving at school, I would network with other agencies in the community (such as Big Brothers Big Sisters) that I believed would help this client. I also helped the client's parents with anything from helping them file for disability, finding transportation for their children to get to school, and making doctor appointments for their children.

I really enjoyed my experience at the McNulty Center, the work environment was very welcoming and laid-back, but not so laid-back that I felt that I was not being challenged. However, there is a lot of down time at this site. For example, if the case managers did not have an appointment for me to go to or a client they needed help linking to other service, there was not



much for me to do. Therefore, this site might not be suited for someone that wants a lot of hands-on experience. There can be a lot of down time, and a lot of my job responsibilities was shadowing the case managers. I enjoy shadowing a lot, but this may not be suited for someone that likes to do everything themselves. Because of the fast and slow past of the McNulty Center (as in it is either really busy or not busy at all), this site requires you to have a pretty flexible schedule. I had a full course load (16 credits) while I was at this site, and was only able to come in the morning and early afternoons. Since the case managers do a lot of their work in the later part of the afternoon (2 pm-5 pm) when kids are out of school, my schedule caused me to miss out on a lot of opportunities, like mentoring. Interns are encouraged to mentor clients, but in order to do so, you have to be available after school hours.

An advantage of this site is that every day is different and things never get dull, and you also have the opportunity to work with six different case managers and their clients, so you get to work with a wide variety of clients. A disadvantage of this site that I think prospective interns should be made aware of is transporting. Since children and adolescents are at school during the day, and most of their parent's work during the day, they do not have a way to get to the McNulty Center for their appointments. Therefore, either a case manager or an intern will go to pick up this child or adolescent at their school to bring them in for their appointment. The intern may also have to pick up the client's parents if the parent is attending the appointment. You use the McNulty Center agency vehicle to do this transporting so nothing is coming out of your own pocket. There is an advantage to transporting because you get the opportunity to talk to clients you may not have had the opportunity to do otherwise, and you get to interact with a wide variety of people. However, not everyone likes to drive or would feel comfortable transporting clients. Therefore, I feel that it should be made more cognizant to prospective interns that transporting is a part of the job responsibilities as an intern.

I have learned a lot from my experience at the McNulty Center, but the most valuable thing I learned is how to network with other people and agencies. At the McNulty Center a big part of my job was calling other agencies in the community and forming a partnership with them to help a client. This required networking skills, communication skills, and proper phone etiquette. These will surely help me at any job, but especially the career field of human resources that I am interested in. While working in a human resource department in a company, a huge part of my job would be effectively communicating with people, and networking with other departments within the company to create a cohesive working environment. Through my field placement I have also learned about different kinds of therapies, which will not only be helpful in the mental health field, but in any field I choose to pursue after college. In any career path you are going to have to be able to understand people, how they work, and how to help them. Through sitting in on countless therapy sessions I have learned effective therapy techniques and conflict resolution skills that will surely help me in any career.



My field placement at the McNulty Center for Children and Families was a very positive experience. I am particularly impressed with the way the case managers help their clients, their efficient work methods, and my supervisor John Wilson, who created a welcoming and cohesive working environment for all.

Fall 2015 - Kayla Palfrey

Children's Case management is a part of the Harrisonburg-Rockingham County Community Service Board (HRCBSB). The mission statement of the HRCBSB is to provide "services that promote dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for individuals and families whose lives are affected by behavioral health or developmental disorders". At Children's Case Management, we help our clients, who are under the age of 18, gain access to all of the services in the community that they could benefit from. We work with parents, schools, psychiatrists, therapists, and other professionals to create the best possible environment for our clients.

During my time with Children's Case Management, I have been fortunate to have various experiences with a lot of different types of people. I have worked most closely with a mother of one of our clients, who speaks Kurdish. I have been helping her fill out paperwork to apply for citizenship, and my supervisor and I have helped her apply for and move into a new apartment. Originally, I was very nervous about working with someone who does not speak the same language as me, but I learned how to use our interpreting service and how to use body language and facial expressions to communicate with this client.

I was also able to sit in on and participate in various different meetings with families, such as home visits, school visits, and psychiatry appointments. During home visits, my supervisor and I would discuss how the child's behavior has been at home and any concerns that the parents have. During a school visit that I went on with one of the case managers, we observed a kindergartener in class, talked to her teacher about her behavior, and talked to her therapeutic day treatment worker about her progress since starting school. We then went and had a home visit with her mother and grandparents. It is interesting to gain input from parents and professionals to get the big picture of a child's performance. I also had the opportunity to visit a teenaged client in a detention center with one of the case managers. This client had been in and out of the detention center many times. We discussed with him about what would happen when he got out this time. Seeing a client in this environment was very interesting. Being able to see how all of these different aspects of a child's life come together has been very eye opening for me.



One thing that I was able to do that may not seem as interesting as the field work, but I really enjoyed, was completing quarterly performance updates for some of our clients. For each client, the case manager creates goals and objectives that are to be worked on. Every quarter of a year, case managers must submit a performance update for these goals and objectives. I learned how to pull information from contact notes, medical notes, and any other information on the client, to write the quarterly updates. This was a good learning opportunity for me because I am studying to be a special education teacher. Special education teachers do similar paperwork on goals and progress for their students, which must be updated annually.

Working with Children's Case Management has been extremely eye opening for me. I have had so many great experiences during my time there. All of the case managers were so friendly and always happy to have me tag along to their meetings with clients. On slow days, there can be a lot of down time when the case managers are doing paperwork or making phone calls that they do not need assistance with, but there is usually something you can help out with around the office. My favorite part of working with Children's Case Management has been going on home visits and talking with parents about their children. Often times, the parents will talk about difficulties they have with their child's teachers, which has helped me realize how I can better connect with parents in my future as a teacher. I also really enjoy listening to the similarities and differences between the parent's descriptions of their children's behavior and the teacher's descriptions of their behavior.

The biggest thing that I have learned since working with Children's Case Management is to take into account my biases towards people who are different from me. Before I met one family that one of the case managers was working with, she told me that the mother lives in a trailer and relies on her parents for everything. So, I assumed that she probably would have a messy home and probably would not care a lot about her child's education. This was not true at all, the home was neat and tidy, with a few kids' toys on the floor, and when we spoke to her about her child at school, the mother was extremely knowledgeable about everything going on at school. This is the day that I realized I needed to notice my biases before making judgements about people that I have not gotten to know. That day I also learned that parents, no matter how uneducated themselves, are usually experts on their own children.

The lessons that I have learned since working with Children's Case Management will help me in my future as a special education teacher. I now have the skills to better understand how to work with diverse children and families, something that will really come in handy for teaching in the DC area, which is where I hope to teach one day. I also have the skills now to work with parents in a more respectful and unbiased way, which is important in being a teacher for students



with special needs. I have enjoyed my time with Children's Case Management and I have learned a lot.

Fall 2015 – Hayden Heath

The experience at the McNulty Center for Children and Family Services was one that was filled with valuable lessons, as this site experience was able to foster my professional skills. Services provided by my site included: “case management, individual and group therapy, psychiatric and nursing services, prevention services, in-home and in-school services, mental health support services, developmental evaluations, and the infant and toddler connection program (a.k.a. PACE: ages 0-3)”. The mission of this site explicitly states that they want to provide adequate services that promote ‘dignity, choice, recovery, and the highest possible level of participation in work, relationships, and all aspects of community life for the individuals and families whose lives are affected by behavioral health or developmental disorders.’” During my time at the McNulty Center, I was able to watch this mission statement in action because every day that I worked with the child case managers, I was able to see their collaboration with the therapist and psychiatrist in an attempt to provide the best possible services for their clients.

This site provided many opportunities to shadow the activities of the daily tasks of a child, family, and case manager, as well as the opportunity to perform some of these daily tasks. These experiences include: documentation opportunities, client-transports and in-home visits, and lastly opportunities to shadow assessments. Initially working with my supervisor Sarah Deavers, I was able to shadow her on her home-visits to check-in on families, as well as get families to sign treatment plans for the clients. Another opportunity found at the McNulty Center was the chance to document interactions with or for clients. For example, making phone calls is part of the linking process when you are a case manager, and after a conversation with an agency, school, or other service provider about a particular client the case manager must document each contact in a note. The case manager must also document interactions with the client as well. These opportunities gave me the time to experience how to document contact notes to meet the stringent HIPAA requirements for the agency to be funded appropriately. Client-Transports and in-home visits were initially conducted with my supervisor, but eventually I was able to complete my own home-visits and client-transports. These experiences allowed me the opportunity to show my professionalism and convey my competence in the field work experience. These experiences required much planning to make sure that the appointments were confirmed, as well as knowing when to pick the client up for their appointments. These moments were the highlight of my experience because I was able to work with the clients hands on without supervision. Knowing that I had the confidence from my supervisor to complete these acts alone made me



feel needed in this opportunity. Lastly, I was able to observe many assessment types at this site, and eventually conduct one myself. The first assessment that I was able to observe was called a VICAP, where I was able to watch John assess a client for TDT. This client struggled at school and needed some assistance during the day because of the lack of focus and aggressive behaviors. I was able to gain a valuable experience from this observation, and towards the middle of the semester, I was able to conduct an assessment. During this opportunity, I contacted a client and helped them fill out an intake form over the phone. This was a great experience to see the initial process that families must go through to acquire services. An opening intake assessment was the last thing that I was able to observe at the McNulty Center, and I traveled with Sarah to a client's home and conducted a 2-hour intake assessment to sign the client up for a treatment plan and case management services. I was able to observe the aggression of a very young child that was oppositional defiant, and this experience allowed me the opportunity to see the hardships that the case workers deal with on certain cases. The child was calling my supervisor many derogatory names which was unwarranted.

The impression that I have of this site is that it could have been better and could have had more opportunities if I was able to spend more time at the site. This site necessitates that the intern have a light academic schedule because this site does not always lend itself to constant work throughout the day. For example, my schedule only allowed for me to work Monday, Tuesday, and Friday, and as a result, I was only able to work these days rather than coming in when my supervisor needed me. My chaotic schedule created a disadvantage for me, and I would caution the next intern because of this issue. I think if I would have had a fluid schedule, I could have attended more opportunities at this site, but my schedule was pretty set in stone (Mondays and Tuesdays). An advantage of this site is that the supervisors are willing to offer every opportunity that is available, and the advantage of this site is that when your supervisor is not available the other case workers are willing to offer you opportunities. This site has many opportunities to offer as stated above that allow the intern to learn how to document interactions with clients as well as learn to transport clients to appointments and coordinated services. I thought that the work environment was very laid back rather than extremely formal, which I was expecting at first, and each staff member is willing to offer help and assistance. I recommend the next intern to work through the orientation process as quickly as possible, so that you can start working hands on with the supervisor at this site. Again, my impression is that if you want to get the most from this site you need a fluid schedule where you can plan around your supervisor to come in ahead of time to gain access to these opportunities.

I learned a great amount of skills over the course of the semester and the mid-term evaluation made it clear what attributes I really needed to focus on. Psychology does not lend itself to working as a social worker, and honestly, I felt incompetent while at this site. I made a mistake initially at my site because I did not dress appropriately enough to show professionalism. I think for my future career and vocational goals have been influenced a great deal because of



this experience. I was able to learn that I didn't want to be a case manager in my future, as well as gain a sense of direction for where I wanted to go after graduation. During this experience, I slowly developed my desired future career goals, and now I know that I would like to work with a different population of people. I am now applying for graduate school for a master's program in applied behavioral analysis.