



**Social Workers and Diagnosis Using the DSM-5.  
Practice Guideline**

**Adopted February 7, 2020**

## INTRODUCTION

The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) is a manual used by health care professionals to diagnose mental disorders. According to the American Psychiatric Association (n.d.) “DSM contains descriptions, symptoms, and other criteria for diagnosing mental disorders. It provides a common language for clinicians to communicate about their patients and establishes consistent and reliable diagnoses that can be used in the research of mental disorders”.

Social workers bring extensive knowledge and expertise in their interventions with clients. Through the completion of comprehensive biopsychosocial assessments, social workers work with clients to enhance health and social well-being. As one of the largest providers of mental health services, social workers are an integral part of health care service delivery.

Registered Social Workers (RSW's) in Newfoundland and Labrador who use the DSM-5 and other diagnostic classification systems in the assessment, diagnosis and treatment of mental disorders must ensure they have the appropriate level of education, knowledge, skill and competency in the use of the DSM-5.

The purpose of this document is to assist registered social workers in understanding their professional responsibilities to ensure safe, ethical and competent practice in relation to the use of the DSM-5 in practice and highlight areas for consideration.

## PROFESSIONAL RESPONSIBILITIES

Social workers in Newfoundland and Labrador (NL) must be aware of and adhere to the Canadian Association of Social Workers (CASW) (2005) Code of Ethics, the CASW (2005) Guidelines for Ethical Practice, and the Newfoundland and Labrador Association of Social Workers (NLASW) (2018) Standards of Practice for Social Workers in NL.

In relation to the use of the DSM-5 in practice, the following values and standards are important.

### Competence

As outlined in the CASW (2005) Code of Ethics:

“Social workers uphold the right of clients to be offered the highest quality service possible”

“Social workers strive to maintain and increase their professional knowledge and skill”

“Social workers demonstrate due care for client’s interests and safety by limiting professional practice to areas of demonstrated competence”

The NLASW (2018) Standards of Practice also addresses competence and states:

“Social workers have a professional responsibility to maintain proficiency in social work knowledge, theory and practice, to continually strive to increase their professional knowledge and skills, and to apply new knowledge in practice commensurate with their level of education, skill and competency” (p.3).

- Social workers demonstrate commitment to maintaining and enhancing their knowledge, skills and expertise and engage in continuing education
- Social workers seek to ensure they have the appropriate knowledge of and can articulate their use of social work theory, practice methods and intervention techniques.
- Social workers ensure they have the necessary skills to carry out their work efficiently and effectively. These skills include, but are not limited to, communication, assessment, interviewing, and documentation.
- Social workers provide clients with information pertaining to their education and area of expertise and competence.
- Social workers do not claim formal social work education in an area of expertise or training solely by attending a lecture, demonstration, conference, workshop or similar teaching presentation.

(NLASW 2018 Standards of Practice, p, 3)

Social workers using the DSM-5 in practice must be able to demonstrate that they have the necessary education, knowledge and skill to effectively use the DSM-5 in practice and engage in continuing professional education on its' use to ensure that clients continue to receive the highest quality services. This education should consist of coursework, certificate programs, and/or comprehensive training workshops. Practice supervision in the use of the DSM-5 is also an important component of continuous learning.

### **Informed Consent**

“Social workers respect the client’s right to make choices based on voluntary, informed consent” (CASW 2005 Code of Ethics p. 4). The NLASW (2018) Standards of Practice highlight the following standards:

- Social workers seek informed consent from clients prior to the delivery of social work services and throughout the duration of the social worker-client relationship as necessary.
- Social workers document client informed consent in the client record and update as necessary.
- Social workers evaluate a client’s capacity to give informed consent as early in the relationship as possible and through the duration of the social work relationship.

- Social workers provide clients with information on the social work services being provided, risks and benefits of the proposed intervention, and alternate options that exist.
- Social workers provide information in a manner that is easily understood by the client and is culturally appropriate.

Social workers using the DSM-5 in practice must seek the informed consent of clients prior to offering a diagnosis. Clients must be given information on the social workers' competency in using the DSM-5, the rationale for providing a diagnosis and how a diagnosis will be in the treatment plan for the client.

## **AREAS FOR FUTHER CONSIDERATION**

### **Education and Supervision**

It is recommended that social workers diagnosing using the DSM-5 in practice have a Master of Social Work degree (clinical focus), at least 5 years of experience in mental health, and have had access to clinical supervision regarding the use of the DSM-5.

Diagnosing using the DSM-5 is not an entry level competency. However, consideration may be given for social workers with a Bachelor of Social Work with significant education training, experience and supervision in using the DSM-5 in their practice.

### **Collegial Relationships and Interdisciplinary Practice**

As noted in the CASW (2005) Guidelines for Ethical Practice "social workers seek the advice and counsel of colleagues whenever such consultation is in the best interests of clients" (p. 14). When using the DSM-5, there may be times when a social worker would need to consult with another social work colleague or professional regarding a client diagnosis. This should be done with the informed consent of clients. A physician referral would also be necessary if the client is seeking medical treatment (i.e., prescription medication).

### **Documentation**

As with any social work assessment, social workers using the DSM-5 to diagnose must document their diagnosis and how they arrived at this diagnosis in the client file. A diagnosis must be followed with an intervention plan.

### **Professional Liability Insurance**

Social workers engaged in private practice are required to have professional liability insurance. It is recommended that social workers in clinical settings, outside of private practice, and whom are using the DSM-5 to diagnose also have professional liability insurance.

## GUIDING QUESTIONS

- 1) Do I have the appropriate education and training to diagnose using the DSM-5?
- 2) Do I have a thorough understanding on how to use the DSM-5 to diagnose?
- 3) For what purpose would I need to diagnose using the DSM-5 in my practice?
- 4) Am I using the DSM-5 to understand symptomology and guide intervention or am I using it to provide a diagnosis? How am I communicating this to my clients?
- 5) How would a 'diagnosis' impact on my work with clients?
- 6) Do I have access to supervision and/or consultation on the DSM-5?
- 7) How do I incorporate this as part of my informed consent process with clients?

## REFERENCES

American Psychiatric Association (APA). (n.d.). *DSM-5: Frequently asked questions*. Retrieved January 2, 2020 from website <https://www.psychiatry.org/psychiatrists/practice/dsm/feedback-and-questions/frequently-asked-questions>

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