



Course Title:	Advanced Clinical Social Work Practice in Integrated Healthcare
Course #/Term:	SW 630, Section 001, Spring/Summer 2019
Time/Location:	Mondays, 8:00 – 12:00pm, Room: B780
Credit hours:	3
Instructor:	Abigail Eiler, LMSW, MSW
Contact info:	E-mail: rowea@umich.edu Phone: 734-845-1442 You may expect a response within 48-72 hours
Office/Office Hours:	Room 3728 / Mondays, 12:00 – 2:00pm, and by appointment

“The price of inaction is far greater than the cost of making a mistake.”
– Meister Eckhart

1. COURSE STATEMENT

Course Description

The objective of this course is to introduce social work students to the direct practice of integrated behavioral health across a range of settings. Because the populations served in integrated settings span the spectrum of severity in both the physical and behavioral health dimensions, students will develop competencies in engaging and supporting patients across a range of health conditions.

Course Content & Objectives

Students will become knowledgeable of the roles of behavioral health providers working across a range of settings, theories and models of care, and cross-cultural issues. They will develop skills in engagement, assessment, intervention planning and implementation, and practice evaluation.

Students will develop skills and knowledge in the Core Competencies for Integrated Health as identified by SAMHSA.

1. **Interpersonal Communication:** ability to establish rapport quickly and to communicate effectively with consumers of healthcare, their family members and other providers.
2. **Collaboration and Teamwork:** ability to function effectively as a member of an interprofessional team that includes behavioral health and primary care providers, consumers and family members.
3. **Screening and Assessment:** ability to conduct brief, evidence-based and developmentally appropriate screening and to conduct or arrange for more detailed assessments when indicated.
4. **Care Planning and Care Coordination:** ability to create and implement integrated care plans, ensuring access to an array of linked services and the exchange of information among consumers, family members and providers.
5. **Intervention:** The ability to provide a range of brief, focused prevention, treatment and recovery services, as well as longer-term treatment and support for consumers with persistent illnesses.
6. **Cultural Competence and Adaptation:** The ability to provide services that are relevant to the culture of the consumer and family.
7. **System Oriented Practice:** The ability to function effectively within the organizational and financial structures of the local system of healthcare.
8. **Practice-Based Learning and Quality Improvement:** The ability to assess and continually improve the services delivered as an individual provider and as an interprofessional team.
9. **Informatics:** The ability to use information technology to support and improve integrated healthcare.

Emphasis will be placed on: Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS

Relationship to Social Work Ethics and Values

This course will examine current ethical issues and controversies in the field integrated health care. The NASW Code of Ethics www.socialworkers.org/pubs/code/code.asp will be used to inform practice in this area. Students will analyze ethical issues related to: stigmatization and psychiatric labels; client confidentiality; client rights and prerogatives; especially the rights of populations at risk; prevention and elimination of discrimination; equal access to resources, services, and opportunities; respect for the diversity of cultures; changes in policy and legislation that promote improvements in social conditions; and informed participation of the public.

Intensive Focus on Privilege, Oppression, Diversity and Social Justice (PODS)

This course integrates PODS content and skills with a special emphasis on the identification of theories, practice, and/or policies that promote social justice, illuminate social injustices and are consistent with scientific and professional knowledge. Through the use of a variety of instructional methods, this course will facilitate PODS learning and support students' development toward: a vision of social justice; learning social justice processes; applying intersectional and intercultural frameworks; and overall strengthening of critical consciousness, self-knowledge, and self-awareness.

Course Design & Format

This course uses an engaged-learning approach, which employs myriad pedagogical strategies such as: class discussions, small group work, experiential/simulated exercises, case examples, role-plays and other activities in order to facilitate understanding of the course content and to promote skill development. Most class classes will include a lecture or presentation, accompanied by a discussion or clinical practice/activity period. This course is designed to be practice-oriented and will highlight advanced clinical practice techniques to work effectively with clients and colleagues in a variety of integrated healthcare settings.

Course Assignments & Grading:

Course Assignments	Due Date	Points
Attendance & Participation	<i>Ongoing</i>	10
SIMmersion Assignments <ul style="list-style-type: none">Alcohol Screening and Brief InterventionHealth Risk Behaviors	<i>June 3, 2019</i>	10 (5 points each)
Psychopharmacology Quiz	<i>July 2, 2018</i>	10
Integrated Healthcare Assignment <ul style="list-style-type: none">Part A: Patient Education Handout and *Patient ProfilePart B: Intervention and Role Play	<i>June 10, 2019</i> <i>July 1, 2019</i>	15 20
In-class Recording and Peer Critique	<i>July 15, 2019</i>	5
Simulated Final Exam	<i>July 22 & 29, 2019</i>	30
Total Possible Points		100

My practice is to provide detailed feedback on your papers. As such, it may take me up to three weeks to return them. Papers are graded on:

Quality of clinical thinking: Papers that rate the highest will show strong analytic skills; evidence strong clinical insight; show strong understanding of human behavior; demonstrate a curiosity about what they hear or see; have a level of empathy for others and know when they are struggling to achieve that; and demonstrate an ability to think about what they heard, as well as what they did not hear.

Integration of materials: Papers that rate the highest will show superior skill in linking reading and lecture materials to their written work; pull from multiple sources; typically go above the requirements but not excessively so; go beyond "person on the street" thinking.

Level of Self-reflection: Papers that rate the highest will show a strong self-awareness or willingness to develop that capacity; they show a willingness to take risks with thinking or note areas where that is difficult; are able to address what is evoked in them response to the work and demonstrate an understanding of social work values and

ethics (PODS, empathy, strengths-based thinking, etc).

Writing skills: Papers that rate the highest will have no typographical or grammatical errors. They will be well organized and written, comprehensive and coherent. They will be within the guidelines, neither excessively short nor excessively long. Any citations will be accurate and there will be effective use of quotations.

References and Referencing Style

When using others' work, it is mandatory to cite the original source. Social work publications generally follow the referencing format specified by the American Psychological Association (APA); therefore you are expected to follow this referencing style. Publication Manual of the American Psychological Association (6th Edition) is accessible via internet: <http://www.apastyle.org/manual/> Additionally, you may access APA examples at: <http://owl.english.purdue.edu/owl/resource/560/01/> for further help citing references in course assignments.

Intellectual Honesty and Plagiarism

It is your responsibility to be familiar with and abide by the School of Social Work's standards regarding intellectual honesty and plagiarism. These can be found in the MSW Student Handbook. These are taken from <http://www.ssw.umich.edu/studentGuide/2007/>.

Attendance & Participation (10 points/10%)

As an advanced practice course, it is important that you attend each class session. The class sessions involve skill development experiences that go beyond course readings/learning tasks. Missing class sessions will lower your grade since your participation as a co-learner is essential to meet the learning goals for this requirement. If you are not able to attend a particular class session, please notify the instructor prior to the class session so that arrangements can be made for you to address the material that you missed

Your attendance and participation also reflects the basic elements of any social work relationship – you show up and remain present. If, for any reason, I have concerns about your participation or attendance, I will discuss my concerns with you in a timely fashion. Your grade will be negatively impacted if more than one class is missed as an unexcused absence. Please communicate any classes that you may miss to this Instructor via email (rowea@umich.edu) or phone/text (734-845-1442). Any failure to communicate an absence to this Instructor will result in a two-point deduction for that day.

Each class encourages dialogue regarding the readings, lectures, and in-class skills demonstrations. Participation in this course will occur in small and large group discussions. It is essential to abide by the NASW Code of Ethics and maintain the highest level of respect for another as colleagues/peers, as well as for the clients/communities that we will be discussing in class. Please avoid the use of electronics during the course. If you need to take a phone call or respond to a text message or email, then please step out of the class and return when you are done. It is expected that your computer only be used to take notes during lectures.

Levels of participation may vary based on comfort and interest in topics discussed. I will do my best to honor each student's participation level in the course. Please communicate any difficulty that you are experiencing related to course materials and discussions and I will do my best to help resolve the matter or identify appropriate support services if requested.

A Note on the Learning Environment:

The class is designed as a co-learning environment and one where class members are encouraged to try new skills and take risks. Your contribution as a "teacher and a learner" in the class will enhance the learning for all class members.

Quality social workers must be self-aware, self-reflective, and open to exploring our own histories and issues regarding any given concern or population. Be prepared to reflect on and explore your own family history, social systems, experiences, identity, cultural background and assumptions regarding all forms of diversity. There will be a variety of ways that students can do this through critical thinking, assignments and active participation in class discussions and activities.

Being honest, sensitive, and respectful to each other in preparation for quality social work practice is one of the learning environment goals. Please share opinions and feedback with others in discussions and exercises, and when you do so, please try to state them in a respectful and constructive manner.

Also, prepare yourself to hear varying opinions and feedback non-defensively, and to use those data or challenge them constructively. Please practice tolerance, not expecting yourself or your classmates to be polished in discussions about issues that can be challenging and confusing. We can expect to blunder and make mistakes in the classroom so that we are better prepared when we are in the field; please honor this process.

A student is expected to be on time, prepared with questions from readings, DVDs and assignments, respectful of diverse perspectives, open to learning and to complete assignments on time.

All assignments are expected to be handed in on their due date prior to the end of the day (11:59pm).

Late assignments will be marked down 5% for every day late.

Religious/Spiritual Observances

Students will be excused from class for religious/spiritual observances. Please let the instructor know ahead of time about any conflicts between class sessions, assignments, and religious observances. Every reasonable effort will be made to help students avoid negative academic consequences when their religious obligations conflict with academic requirements. Absence from classes or examinations for religious reasons does not relieve students from responsibility for any part of the course work required during the period of absence. Students who expect to miss classes, examinations, or other assignments as a consequence of their religious observance shall be provided with a reasonable alternative opportunity to complete such academic responsibilities.

Incompletes

Incompletes are given only when it can be demonstrated that it would be unfair to hold the student the stated time limits of the course. The Student Guide, Vol. 1, Sec. 8.01 states that and I grade is used when illness or other compelling reasons prevent completion of work, and there is a definite plan and date for completion of course work approved by the instructor. The student must formally request an incomplete from the instructor prior to the final week of classes.

Grading for this Course

A+ = 100%	B+= 89 – 91%	C+= 78 – 80%
A = 97 – 99%	B = 85 – 88%	C = 74 – 77%
A- = 92 – 96%	B- = 81 – 84%	C- = 70 – 73%

SIMmersion Assignment - Simulated Exercises (10 points/10%)

Due: June 3, 2019

Students will login to the SIMmersion Training Center to practice sharpening their practical knowledge of how to deliver Motivational Interviewing techniques to a client. These cutting-edge simulations are not yet publically available and provide students with exposure to practicing therapeutic skills with a client in a safe and secure setting. Moreover, as students begin mastering their skills they can also explore what happens when ineffective approaches are made in a therapeutic context and how these approaches can impact rapport with a client.

To earn 10% of your total grade, students will be expected to:

1. Score 90% or better for each simulated character (see below); however, you do not need to exceed six attempts with each character as long as your score is improving each time.
2. In addition to the online trainings, you are required to write a ***1 – 2 page reflection paper*** on this experience.

This paper should include the following:

- 1) In your own words, describe how you would utilize this intervention/treatment approach with a client.
- 2) What personal reactions did you notice as you worked through the training?
- 3) What are you taking away from this assignment/training that will guide your future practice?

Any late submissions will result in a 1-point deduction for the first day and a ½ point for each subsequent day.

How to Use SIMmersion Simulations Video:

<https://mail.google.com/mail/u/0/#search/simmersion?projector=1>

Alcohol Screening & Brief Intervention with Christy Johnson (5 points/5%)

You are a healthcare practitioner in a suburban health clinic. You will be talking with **Christy Johnson**, a 42-year-old new patient at your clinic. Christy was in a minor car accident a week ago. She went to the ER immediately after the accident, complaining of a severe headache. She received a CAT scan at the ER, which was normal.

Staff at the ER suggested that Christy follow up with a health practitioner in about a week to check on possible injuries from the accident. Christy made an appointment with your clinic for that follow-up care.

In the week since her accident, Christy's headaches have subsided, and she has suffered no other adverse symptoms. Christy's vital signs, which were taken upon her arrival at the clinic, are normal: her blood pressure is 120/80, her pulse is 82, and her respiratory rate is 16. Your conversation with Christy begins after you have discussed her headaches with her.

Health Risk Behaviors with Tony Frazier (5 points/5%)

In this exercise, you will have the opportunity to talk with Tony Frazier, a fictional patient in your practice. You are about to talk with Tony Frazier, a 48 year old patient. This is your first appointment with Tony, even though he has been a patient with your practice for about three years. Your colleagues have noted the following in his chart:

- Overweight: BMI of 27
- No patient or family history of hypertension, diabetes, or coronary disease
- Doesn't smoke
- Drinks 5-6 beers/week; no more than 3 at a time

After each conversation with Tony, you will receive a score and feedback on your use of a MI-inspired approach to discussing health risk behaviors. The score is divided into three sections; stages, skills and relationship.

Psychopharmacology On-line Lecture In-Class Quiz (10 points/10%)

Due: July 8, 2019

As a social worker, it is important to have basic knowledge regarding medical assisted interventions utilized to treat health and mental health disorders. Prior to arrive to class on July 8, 2018, you will be required to view an on-line lecture on psychopharmacology. You will attest on-line to completing the lecture.

The in-class quiz will assess your understanding of medications prescribed by Primary Care Physicians and Psychiatrists. The quiz will consist of 20 questions; each question will receive .5 points for a correct answer and 0 points for an incorrect answer.

Integrated Health Assessment, Presentation, & Reflection (35 points/35%)

This is a two-part assignment that you will complete with a partner. The due dates for the assignment are as follows:

Session 5 (6/10): Part A - Hard copy submission and in-class share

Session 8 (7/1): Part B – Hard copy submission and in-class role-play

Part A: Patient Education Handout and Patient Profile

Due: June 10, 2019

Patient Education Handout: Select a health issue or disease/illness/condition (see included list). Develop a patient education handout (no more than 2 pages) that provides a descriptive summary of the selected issue, it's medical aspects, risk factors, treatment options, and prognosis. Be creative, using illustrations, diagrams, photos, or graphs, as appropriate. You will present/share your handout in class on June 10, 2019. Your patient education handout needs to contain the following components:

- Description of the health issue or disease: main features, symptoms, characteristics, and comorbidities
- Population(s) effected by this health issue or disease: prevalence, risk factors, severity, and preventative measures
- Description of treatment methods: what does the scientific literature say? What are the key medications used, if any?
- Explain how the health issue/disease/illness may impact the individual and their family. Include psychological, developmental, social, and/or emotional issues that arise from the illness or treatment.
- Identify best methods to improve and maintain positive mental health, include relevant psychopharmacological treatment.
- List any resources (community/local/state/federal) that may assist patient or family with additional information, data, financial assistance, referrals, or emotional support to deal with the impact of the health issue/disease/illness.

Patient Profile: Develop a *case profile for a hypothetical patient who is diagnosed with the health issue/disease/illness you selected. You will use this profile for Part B of the assignment. The patient profile should include the information one might find in an assessment: referral information/demographics/setting, current presentation and history of presenting illness (HPI), information from at least 1 relevant screening tool, pertinent background information (including family, coping, etc.), and a brief recommendation for treatment based on your setting. In an ideal world, the treatment plan will set you up for the Intervention & Role Play portion of the assignment.

Part B: Intervention and Role Play

Due: July 1, 2019

Intervention: Identify an evidence-based or evidence-informed clinical social work intervention that is most appropriate for the health issue/disease/illness you selected. The intervention should assist the patient and/or family in coping or improving their emotional state with this health issue/disease/illness. Make sure you include the following:

- Briefly describe the intervention and your rationale for selecting it for your patient.
- Summarize/Describe what the intervention entails (key principles, frequency, duration of contact, & types of activities)
- Describe key steps or techniques of the intervention
- Briefly describe how you would monitor for the effectiveness of the intervention for your patient
- Critique the feasibility, applicability, and ethical conflicts related to using this intervention in your role play case and in your own social work practice. Consider: how culturally responsive is the intervention? How does the intervention address social justice issues? Would you recommend it to other social workers (why or why not)? Future directions of study related to this intervention or condition?

****Use at least 6 references, with at least 4 from peer-reviewed literature. Use APA style for all citations, references, and paper format. Intervention paper should be between 4-6 pages in length.*

Role Play: Develop a 10- to 15-minute role-play based on your patient profile and demonstrate a technique you discussed in your intervention paper. You and your partner will take turns being clinician and patient (i.e., you will each have 10-15 minutes to be a clinician). Role-plays will be shared in small groups during the class session and observers will provide feedback for each clinician.

In-class Recording and Peer Critique (5 points/5%)

Due: July 15, 2019

During class on July 1, you will record your role-play intervention with one of your classmates. In this exercise, you will be required to demonstrate the following criteria:

- clearly provide informed consent to your patient;
- assess for current strengths and identify the patient's current needs;
- utilize a mental health screening tool based on the patient's reported symptoms; and
- provide an internal or external referral to ongoing treatment/services.

You will complete the Session Rating Scale for your classmate while you are role-playing as the patient. At the end of the intervention you will give completed SRS to your classmate and discuss the ratings.

Your SRS will be uploaded to CANVAS, along with a list of things that you feel you did well in the recorded intervention and what you'd like to work to improve during your stimulated client final exam. The list should outline any specific

learning goals and objectives that you'd like to receive feedback on for your final exam.

Health Issues / Conditions / Diseases / Illnesses

Asthma	Back Pain	Cancer/Oncology	Cardiac Disease
COPD	Diabetes	Fibromyalgia	HIV/AIDS
Hypertension	Hypothyroidism	Hyperlipidemia	Obesity
Stroke	Traumatic Brain Injury (TBI) Other: _____		

Simulated Final Exam (30 points/30%)

Due: July 22 & 29, 2019

This course will prepare you with the skills necessary to complete an effective brief intervention with a simulated, clinically relevant client/patient encounter. Following the May 27th break, you will sign up for an exam time slot on July 22nd or July 29th.

You will receive a set of case vignettes approximately 2 weeks prior to the final exam to review and prepare; each student will be randomly assigned one case for their exam. Grades will be assigned based on evaluations completed by the simulated patient and course instructor. You will also complete clinical documentation (utilizing the SOAP format) and a self-evaluation immediately following your session.

More details for your final exam will be posted in CANVAS on July 8, 2019.

2. CLASS REQUIREMENTS

Required Texts and Class Materials:

- *No Required Texts for this Course. Required and recommended readings are listed below.*

COURSE OUTLINE

MAY BE REVISED BY INSTRUCTOR TO FIT NEEDS OF THE COURSE

5/13 Welcome Back! Ethics in Integrated Health Settings

- Review of course expectations & syllabus
- Ethical Considerations when Establishing Professional Boundaries w/ Colleagues and Clients
- Exploring Inter-disciplinary Ethics

Required Readings:

NASW Code of Ethics: <https://socialwork.sdsu.edu/wp-content/uploads/2011/09/NASW-Code-of-Ethics2017.pdf>

Nursing Code of Ethics:

<http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics-For-Nurses.html>

Physician Code of Ethics:

<http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/principles-medical-ethics.page>

Psychologist Code of Ethics: <http://www.apa.org/ethics/code/>

Case Managers Code of Ethics:

<http://ccmcertification.org/content/ccm-exam-portal/code-professional-conduct-case-managers>

5/20 Introduction to Integrated Health Frameworks in Practice (Joined Lecture - Rm B780)

Required Readings:

Landis, S. E., Barrett, M., & Galvin, S. L. (2013). Effects of different models of integrated collaborative care in a family medicine residency program. *Families, Systems, & Health*, 31(3), 264.

Nasir, A., Watanabe-Galloway, S., & DiRenzo-Coffey, G. (2014). Health Services for Behavioral Problems in Pediatric Primary Care. *The journal of behavioral health services & research*, 1-6.

Stanhope, V., Videka, L., Thorning, H., & McKay, M. (2015). Moving Toward Integrated Health: An Opportunity for Social Work. *Social work in health care*, 54(5), 383-407.

Wissow, L. S., van Ginneken, N., Chandna, J., & Rahman, A. (2016). Integrating Children's Mental Health into Primary Care. *Pediatric Clinics of North America*, 63(1), 97-113.

Recommended Readings:

Horevitz, E., & Manoleas, P. (2013). Professional competencies and training needs of professional social workers in integrated behavioral health in primary care. *Social work in health care*, 52(8), 752-787.

Hunkeler, E. M., Katon, W., Tang, L., Williams Jr, J. W., Kroenke, K., Lin, E. H., ... & Hargreaves, W. A. (2006). Long term outcomes from the IMPACT randomised trial for depressed elderly patients in primary care. *Bmj*, 332(7536), 259-263.

Thielke, S., Vannoy, S., & Unützer, J. (2007). Integrating mental health and primary care. *Primary care: Clinics in office practice*, 34(3), 571-592.

5/27 No Class – Memorial Day

6/3 Integrated Health Screening Tools

Required Readings:

Dowdy, E., Furlong, M., Raines, T. C., Boverly, B., Kauffman, B., Kamphaus, R. W., ... & Murdock, J. (2015). Enhancing school-based mental health services with a preventive and promotive approach to universal screening for complete mental health. *Journal of Educational and Psychological Consultation*, 25(2-3), 178-197.

Hamberger, L. K., Rhodes, K., & Brown, J. (2015). Screening and Intervention for Intimate Partner Violence in Healthcare Settings: Creating Sustainable System-Level Programs. *Journal of Women's Health*, 24(1), 86-91.

Murphy, J. M., Bergmann, P., Chiang, C., Sturner, R., Howard, B., Abel, M. R., & Jellinek, M. (2016). The PSC-17: subscale scores, reliability, and factor structure in a new national sample. *Pediatrics*, 138(3), e20160038.

Maruish, Mark E. , "Handbook of Psychological Assessment in Primary Care Settings" (Abingdon: Routledge, 04 May 2017), accessed 06 May 2018 , Routledge Handbooks Online.

Spitzer, R. L., Kroenke, K., Williams, J. B., & Patient Health Questionnaire Primary Care Study Group. (1999). Validation and utility of a self-report version of PRIME-MD: the PHQ primary care study. *Jama*, 282(18), 1737-1744.

Recommended Readings:

Ali G-C, Ryan G, De Silva MJ (2016) Validated Screening Tools for Common Mental Disorders in Low and Middle Income Countries: A Systematic Review. *PLoS ONE* 11(6): e0156939.
<https://doi.org/10.1371/journal.pone.0156939>

Berwick, D., Murphy, J., Goldman, P., Ware, J., Barsky, A., & Weinstein, M. (1991). Performance of a Five-Item Mental Health Screening Test. *Medical Care*, 29(2), 169-176. Retrieved from <http://www.jstor.org/stable/3766262>

Kessler RC, Barker PR, Colpe LJ, et al. Screening for Serious Mental Illness in the General Population. *Arch Gen Psychiatry*. 2003;60(2):184–189. doi:10.1001/archpsyc.60.2.184

6/10 **Understanding Health & Mental Health Disorders: Chronic Illness, the DSM-5 and ICD-10 Session & Outcome Rating Scales**

Required Readings:

Compas, B., Jaser, S., Dunn, M., & Rodriguez, E. (2012). Coping with chronic illness in childhood and adolescence. *Annual Review of Clinical Psychology*, 8, 455-480.

Duncan, B. L., Sparks, J. A., & Timimi, S. (2018). Beyond Critique: The Partners for Change Outcome Management System as an Alternative Paradigm to Psychiatric Diagnosis. *Journal of Humanistic Psychology*, 58(1), 7-29.

Hansen, H. B., Donaldson, Z., Link, B. G., Bearman, P. S., Hopper, K., Bates, L. M., Teitler, J. O. (2013). Independent review of social and population variation in mental health could improve diagnosis in DSM revisions. *Health Affairs*, 32(5), 984-93.

Kupfer, D.J., Regier, D.A., & Kuhl, E.A. (2008). On the road to DSM-V and ICD-11. *European Archives of Psychiatry and Clinical Neuroscience*, 258 (Supp 5), 2-6.

Recommended Readings:

Currie C et al., eds. (2012). Social determinants of health and well-being among young people. Health Behaviour in School-aged Children (HBSC) study: international report from the 2009/2010 survey. Copenhagen, WHO Regional Office for Europe, 2012 (Health Policy for Children and Adolescents, No. 6).

Lin EHB, Katon W, Von Korff M, Rutter C, Simon GE, Oliver M, et al. Relationship of depression and diabetes self-care, medication adherence, and preventive care. *Diabetes Care*. 2004; 27(9):2154–60.

Miller, et. al (2009). Continuity of care for children with complex chronic health conditions: parents' perspectives. *BMC Health Services Research*, 9.

Perrin, J.M., Bloom, S.R., Gortmaker, S.L. (2007). The increase of childhood chronic conditions in the United States. *Journal of the American Medical Association*, 297(24), 2755-2759.

6/17 **Brief Interventions – CLASS BEGINS AT 9:30AM (Joined Lecture - Rm B780)**

Required Readings:

Dunn, C. , Deroo, L. and Rivara, F. P. (2001) 'The Use of Brief Interventions Adapted from Motivational Interviewing Across Behavioral Domains: A Systematic Review' , *Addiction* 96(12): 1725-1742 .

Wahab, S. (2005). Motivational interviewing and social work practice. *Journal of Social Work*, 5(1), 45-60.

Recommended Readings:

Berge, J. M., Law, D. D., Johnson, J., & Wells, M. G. (2010). Effectiveness of a psychoeducational parenting group on child, parent, and family behavior: a pilot study in a family practice clinic with an underserved population. *Families, Systems, & Health*, 28(3), 224.

Oliver, D.P., Washington, K., Wittenberg-Lyles, E., Gage, A., Mooney, M., & Demiris, G.

(2015). Lessons learned from a secret Facebook support group. *Health and Social Work*, 40 (2), 125-133.

Powers, J.D. & Swick, D.C. (2014). Empirically supported mental health interventions with groups: Using research to support vulnerable students in schools. *Clinical Social Work Journal*, 42, 143 – 150.

Sheppard, M. & Clibbens, J. (2015). Preventive therapy and resilience promotion: An evaluation of social work led skills development group work. *Child and Family Social Work*, 20, 288 – 299.

6/24 SBIRT Presentation – Guest Speaker (Joined Lecture - Rm B780)

Required Readings:

Guerrero, E. G., Marsh, J. C., Khachikian, T., Amaro, H., & Vega, W. A. (2013). Disparities in Latino substance use, service use, and treatment: implications for culturally and evidence-based interventions under healthcare reform. *Drug and alcohol dependence*, 133(3), 805-813.

Madras, B. K., Compton, W. M., Avula, D., Stegbauer, T., Stein, J. B., & Clark, H. W. (2009). Screening, brief interventions, referral to treatment (SBIRT) for illicit drug and alcohol use at multiple healthcare sites: comparison at intake and 6 months later. *Drug and alcohol dependence*, 99(1), 280-295.

Ozechowski, T. J., Becker, S. J., & Hogue, A. (2015). SBIRT-A: Adapting SBIRT to Maximize Developmental Fit for Adolescents in Primary Care. *Journal of substance abuse treatment*. (2016) 62: 28–37

Roy-Byrne, P., Bumgardner, K., Krupski, A., Dunn, C., Ries, R., Donovan, D., ... & Joesch, J. M. (2014). Brief intervention for problem drug use in safety-net primary care settings: a randomized clinical trial. *Jama*, 312(5), 492-501.

Recommended Readings:

Nelson-Zlupko, L., Kauffman, E., & Dore, M. M. (1995). Gender differences in drug addiction and treatment: Implications for social work intervention with substance-abusing women. *Social work*, 40(1), 45-54.

Saitz R, Alford DP, Bernstein J, Cheng DM, Samet J, Palfai T. Screening and brief intervention for unhealthy drug use in primary care settings: randomized clinical trials are needed. *J Addict Med*. 2010;4(3):123–30.

7/1 Practice Day!!!

7/8 Referrals, Advanced Directives & Psychopharmacology

*****In-Class Quiz*****

Required Readings:

Henry, A., Kisicki, M. D., & Varley, C. (2012). Efficacy and safety of antidepressant drug treatment in children and adolescents. *Molecular psychiatry*, 17(12), 1186-1193.

Manassis, K., & Wilansky-Traynor, P. (2013). Special Considerations in Treating Anxiety Disorders in Adolescents. In *Handbook of Treating Variants and Complications in Anxiety Disorders* (pp. 163-176). Springer New York.

Manson, C., Gordon, R., & Baldwin, D. (2016). Safety and Tolerability of Antidepressants. In *Pharmacovigilance in Psychiatry* (pp. 149-166). Springer International Publishing.

Prins, M. A., Verhaak, P. F., Bensing, J. M., & van der Meer, K. (2008). Health beliefs and perceived need for mental health care of anxiety and depression—The patients' perspective explored. *Clinical psychology*

Recommended Readings:

Gilmer, T. P., Dolder, C. R., Lacro, J. P., Folsom, D. P., Lindamer, L., Garcia, P., & Jeste, D. V. (2004). Adherence to treatment with antipsychotic medication and health care costs among Medicaid beneficiaries with schizophrenia. *American Journal of Psychiatry*.

Krupnick, J. L., Sotsky, S. M., Simmens, S., Moyer, J., Elkin, I., Watkins, J., & Pilkonis, P. A. (1996). The role of the therapeutic alliance in psychotherapy and pharmacotherapy outcome: Findings in the National Institute of Mental Health Treatment of Depression Collaborative Research Program. *Journal Of Consulting And Clinical Psychology*, 64(3), 532-539.

**7/15 Care Planning & Coordination of Care/Complex Care Management Across HC Disciplines
Guest Presenters – Roundtable Discussions (Joined Lecture - Rm TBD)**

Navigating Resources and Identifying Human Trafficking in Care

Complete DWC training: [Child Sex Trafficking in America](#) (Upload certificate of completion onto Canvas)

Required Readings:

Baldwin, S. B., Eisenman, D. P., Sayles, J. N., Ryan, G., & Chuang, K. S. (2011). Identification of human trafficking victims in health care settings. *Health Hum Rights*, 13(1), e36-e49.

Berry, J. G., Agrawal, R. K., Cohen, E., & Kuo, D. Z. (2013). The landscape of medical care for children with medical complexity. *Children's Hospital Association*.

Cohen, D. J., Davis, M., Balasubramanian, B. A., Gunn, R., Hall, J., Peek, C. J., ... & Pollack, D. (2015). Integrating behavioral health and primary care: consulting, coordinating and collaborating among professionals. *The Journal of the American Board of Family Medicine*, 28(Supplement 1), S21-S31.

DiTomasso, R.A., Golden, B.A., Morris, H.J., Eds. (2010). *Handbook of Cognitive Behavioral Approaches in Primary Care*. Ch 22: Pediatric Problems in Primary Care.

Macy, R. J., Graham, L. M. (2012) Identifying Domestic and International Sex-Trafficking Victims During Human Service Provision. *Trauma, Violence, & Abuse*, 13(2), 59-76.

Recommended Readings:

Bodenheimer, T. (2008). Coordinating care—a perilous journey through the health care system. *New England Journal of Medicine*, 358(10), 1064.

O'Donnell, L., O'Donnell, C., Wardlaw, D., & Stueve, A. (2004). Risk and resiliency factors influencing suicidality among urban African American and Latino youth. *American Journal of Community Psychology*, 33(1/2), 37-49.

Luoma, J. B., Martin, C. E., & Pearson, J. L. (2014). Contact with mental health and primary care providers before suicide: a review of the evidence. *American Journal of Psychiatry*.

Stanley, B., & Brown, G. K. (2012). Safety planning intervention: a brief intervention to mitigate suicide risk. *Cognitive and Behavioral Practice*, 19(2), 256-264.

Taylor, E. F., Machta, R. M., Meyers, D. S., Genevro, J., & Peikes, D. N. (2013). Enhancing the primary care team to provide redesigned care: the roles of practice facilitators and care managers. *The Annals of Family Medicine*, 11(1), 80-83.

7/22 Simulated Final Exams (8:00AM – 12:00PM) – *Arrive to B780 for your final exam*

7/29 Simulated Final Exams (8:00AM – 12:00PM) – *Arrive to B780 for your final exam*

3. ADDITIONAL COURSE INFORMATION AND RESOURCES

Proper use of names and pronouns:

All students will be referred to by the names and pronouns they use (e.g. she, they, ze, he). If you have a name that differs from the one that appears on the roster, please inform the instructor before the second class period so that I use your correct name and pronouns. Students can designate their personal pronouns on the class roster via Wolverine Access: *Student Business > Campus Personal Information > Gender Identity.*

There are two inclusive restrooms in the SSW building: room 1784 (1st floor, near Registrar's Office) and B833T (Lower Level). Click here for the Spectrum Center's map of gender inclusive restrooms on campus.

Accommodations for Students with Disabilities:

If you are in need of an accommodation for a disability, please let me know at your earliest convenience. Any information you provide is private and confidential and will be treated as such. Additional information about accommodations for students with disabilities, as well as a list of appropriate accommodation forms, is available here. Please present the appropriate paperwork at least two weeks prior to the need for the accommodation (test, project, etc.).

For more information, contact:
Services for Students with Disabilities
G-664 Haven Hall | 505 South State St.
(734) 763-3000 | ssdoffice@umich.edu

Religious/Spiritual Observances:

An overview of the process for students who have conflicts with religious observances:

- Students are responsible for work acquired during their absence
- Students will have a reasonable alternative opportunity to complete any academic work
- Reasonable notice must be given to faculty before drop/add deadline of term
- Any concerns or conflicts should be brought to the Dean or Ombudsperson

Please click here to find more information about the University's policy concerning religious holidays as well as a non-exhaustive list of religious holidays.

Military Deployment:

Please click here for more information and resources for students called to Active Duty status while enrolled at the University of Michigan.

Student Mental Health and Wellbeing:

The University of Michigan is committed to advancing the mental health and well being of all students. If you or someone you know is feeling overwhelmed, depressed, and/or in need of support, services are available. For help, contact:

- [Counseling and Psychological Services](#) (CAPS) at (734) 764-8312
 - The SSW embedded CAPS Counselor is Meghan Shaughnessy-Mogill, LLMSW. She is dedicated to supporting the wellbeing of social work students and the SSW community and offers short-term, solution-focused individual therapy. All services are free and confidential. Contact her at (734) 763-7894 or via email at mshaughm@umich.edu.
- [University Health Service](#) (UHS) at (734) 764-8320
- [Additional campus health and wellness resources](#)

The Office of Student Services' Health and Wellness Program provides supportive services to MSW students which promote wellness, self care and maintenance of a healthy academic and mental health balance, as well as to increase disability awareness.

- [SSW Health and Wellness Guide](#)
- Contact the Health and Wellness Program at ssw.wellness@umich.edu

Teaching Evaluations:

Students are strongly encouraged to complete teaching evaluations at the end of each term. Teaching evaluations are administered via Canvas and will be emailed to students during the last week of classes. Student identity is completely anonymous, and instructors cannot view evaluation reports until after grades are submitted.

Writing Skills and Expectations

Strong writing and communication skills are essential to students' academic success and professional career. The Writing Coordinator for the School of Social Work is open to meeting with students during any phase of the writing process. The Writing Coordinator's office is housed within the Career Services Office. The Career Services Office also offers workshops, resources and individual assistance to help improve skills and confidence in written communication.

For more information or to schedule an appointment, contact:

[SSW Writing Assistance Career Services](#) (Room 1696; (734) 763-6259; ssw-cso@umich.edu)

APA Formatting

Any social work assignments presented as professional papers or presentations should utilize APA formatting. Review the [MLibrary APA Citation Guide](#) as needed. [The Purdue Owl website is another helpful resource for assistance with APA formatting.](#)

Academic Integrity and Plagiarism

Plagiarism is prohibited in any academic writing at the University of Michigan. [More information on academic integrity policies can be found in the MSW Student Guide.](#)

Safety & Emergency Preparedness

In the event of an emergency, dial 9-1-1 from any cell phone or campus phone. In the event of a non-life threatening emergency, or for general assistance, call 647-0007 or 7-0007 from any campus phone.

All University of Michigan students, faculty and staff are required to familiarize themselves with emergency procedures and protocols for both inside and outside of the classroom. In the event of possible building closure (i.e. severe weather conditions, public health notices, etc.) you may contact (734) 764-SSWB (7793) for up-to-date School closure information.

Be Prepared. Familiarize yourself with the [emergency card posted](#) next to the phone in every classroom/meeting room. Review the information on the emergency evacuation sign (located nearest the door) and locate at least (2) emergency exits nearest the classroom.

For more information visit the [U-M Division of Public Safety and Security website](#).

[Active Attacker Response and Prevention Video](#)

[Register for U-M Emergency Alerts](#)

[Report a hate crime or bias-related incident](#)

[U-M Annual Emergency Guidelines](#)

Weather Emergency

In the event of a weather emergency during building hours, Students should find shelter in the nearest restroom, windowless offices, or proceed to the Curtis Center (room B660) in the lower level. Building Occupants should avoid using the elevator even if it is in service as a power failure may occur in transit. Maps to the nearest weather emergency shelters are indicated on the emergency maps located at each stairwell, entrance, and classroom. At the beginning of each semester instructors will review the emergency plan for each classroom where classes are held.

Building Evacuation

In the case of fire or building mechanical failure the occupants may be asked to evacuate the building and proceed to a designated staging area. Staff member wearing orange emergency vests will be on hand to assist with a orderly evacuation. Maps to the nearest emergency exit are indicated on the emergency maps located at each stairwell, entrance, and classroom. At the beginning of each semester instructors will review the emergency plan for each classroom where classes are held.

[View the SSW Building Egress Map.](#)

School Closures

From time to time the University of Michigan may be forced to close for any number of reasons. The most commons instances are do to inclimate weather, health epidemic, or building mechanical failure. Updates can also be found on the following radio stations:

WUOM 91.7 FM

WWJ 950 AM

WJR 760 AM

In the event that the building is closed (loss of power for example) students can call the Building Emergency Update line (734) 764-SSWB (7792) for updates or [check the SSW school website.](#)

ADA Evacuation

If you are concerned about your ability to exit the building in the case of an emergency, contact the Office of Student Services and/or email ssw-ADA_compliance@umich.edu.

Office of Student Services

School of Social Work

Room 1748

(734) 936-0961