



Course title:	Applied Assessment Skills in Integrated Health, Mental Health and Substance Abuse	
Course #/term:	SW601. Section 003. Winter 2021	
Time and place:	Tuesday's at 9 AM-Noon ONLINE via ZOOM Meeting ID: 997 8589 2004 Passcode: 6012021 (Link is on Canvas)	
Credit hours:	3	
Prerequisites:	Foundation Essentials Required or Permission of Instructor	
Instructor:	Cherish Fields, MSW, Ed.S	
Pronouns:	She/Her/Hers	
Contact info:	Email: cherisht@umich.edu	Phone: 586-805-6236 (text/call)
	<ul style="list-style-type: none">• <i>You may expect a response from contact (text, call or email) during the week within 24-48 hours. If a weekend, response can be expected by that Monday.</i>• <i>If sending an email, include "SW 601" in subject line</i>	
Office:	Online	
Office hours:	Tuesday Noon-1 PM and by appointment via ZOOM	
Required Text:	Jordan, C. & Frankin, C. (eds) (2021). Clinical Assessment for Social Workers: Quantitative and Qualitative Methods (5 th ed). Oxford University Press. Other Readings are made available on Canvas.	

Course Description

This course focuses on further developing and deepening skills and competencies to conduct brief, evidence-based and evidence informed developmentally appropriate assessment and screening for common health, mental health, substance use and other behavioral health concerns which impact and/or compromise health. Examples include screening and assessment for risky, harmful or dependent use of substances; cognitive impairment; mental health problems;

adjustment to illness, behaviors that compromise health; harm to self or others; and abuse, neglect, and domestic violence, etc.

Course Objectives and Competencies

Upon completion of this course, students will be able to demonstrate:

- Understanding and application of a holistic approach to health in conducting bio psychosocial spiritual assessments including person in environment (PIE), strengths-based client assets, nature of the client/family and social support system, cultural, spiritual and religious beliefs and other socio-economic resources that impact on health and delivery of care (EPAS 2,3,7)
- Understanding of the signs, symptoms and treatments clients may receive for the most common health conditions, health crises, and comorbidity seen in a variety of practice settings and resulting impact on client well-being. (EPAS 7 ,8).
- Ability to utilize established classification criteria, recognize and identify, the most common mental health and substance use conditions seen in a variety of practice settings. (EPAS 7)
- Competency in conducting brief, evidence-based, and developmentally sensitive screens for risky, harmful, or dependent use of substances, including alcohol, illicit drugs, and prescription medications. (EPAS 4, 7).
- Competency in conducting brief, evidence-based, and developmentally appropriate screens for cognitive impairment. (EPAS 3, 7)
- Competency in conducting brief screens for risk related to self-harm, harm to others, impairments in functional self-care, and environmental safety. (EPAS 3,7)
- Ability to identify signs of abuse, neglect, domestic violence and other trauma in individuals across the lifespan and conduct brief, evidence-based screenings. (EPAS 1,2,3,7)

Course Design

This course encourages a “*flipped classroom*” format in which students complete pre-class work (readings, videos, etc.). The majority of class time used for ALL students will focus on engaging in active clinical practice of assessment and screening using client vignettes and/or student-generated detailed client scenarios/role plays which represent diverse populations, health concerns/diagnoses, co-morbidities and lived experiences. Active practicing of skills, engaging in role-playing, observation and critical analysis of assessment process and mutually constructive feedback is critical to the skill development focus of this class. Clinical scenarios will address a diverse variety of client populations, needs and practice settings. Video and/or audio taping and

presenting of student screening and assessment practice for discussion and learning will be an integral part of skill building in this class. Where you see in the weekly class schedule “Consolidations and Competency Demonstrations Assignments” there will not be formal class but an opportunity for you and your partner (s) to work together, demonstrate and practice skills through role play, record video’s and give each other feedback, etc which will be turned in for review. There will also be no required readings on this day.

Curricular Themes

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 injustices and are consistent with scientific and professional knowledge. Through the use of a variety of instructional methods, this course will support students developing a vision of social justice, learn to recognize and reduce mechanisms that support oppression and injustice, work toward social justice processes, apply intersectionality and intercultural frameworks and strengthen critical consciousness, self-knowledge and self-awareness to facilitate PODS learning.

Consideration will be given to the ways in which diversity factors such as age, race, ethnicity, disadvantage, gender, sexual orientation, sexual identity, class, immigration status, ability, family status, geographic location, ethnicity and culture interact with and impact health, mental health and behavioral health impact assessment and screening. Culturally responsive engagement in the assessment process will be a focus.

“Multiculturalism & Diversity” is addressed from the perspective of critically considering how diverse dimensions (such as ability; age; class; color; culture; ethnicity; family structure; gender including gender identity and gender expression; marital status; national origin; race; religion, spirituality or worldview; sex; and sexual orientation) are socially constructed, embedded in societal structures across system levels, and maintained through social processes and intra and interpersonal relationships and schemas.

“Social Justice” is addressed from the perspective of critically analyzing theories and conceptualizations of justice, current trends and ethical issues and their implications for promoting social justice and social change, by considering the influence of normative rules and 3 conditions. Additional focus will be directed towards how structural and institutional conditions affect the opportunities and well-being of different populations (advantaged and disadvantaged groups) in society.

“Promotion, Prevention, Treatment & Rehabilitation” is addressed from the perspective of critically considering how varied ideological, theoretical and empirical perspectives influence the definition of social problems and, subsequently, the ways in which institutional policies and practices address access, promotion, prevention, treatment, and rehabilitation.

“Behavioral and Social Science Research” will be reflected in the theory, social science literature and research covered characterizing and analyzing macro-level structures, processes and their bearing and implications for the well-being of different vulnerable and disadvantaged

groups and populations in society, as well as how marginalized groups exert agency and influence society.

“Social Work Ethics and Values” – The NASW Code of Ethics will be used to give students direction about ethical issues as they relate to the experience of marginalized groups. The course will focus on social workers’ responsibility as professionals to promote general welfare by working toward the elimination of discrimination, expanding choices for all persons, encouraging respect for diversity, advocating for progressive changes in social policies, and encouraging informed participation by the public.

Class Requirements:

Text and Class Materials

Jordan, C. & Frankin, C. (eds) (2021). *Clinical Assessment for Social Workers: Quantitative and Qualitative Methods* (5th ed). Oxford University Press.

There are two ways to obtain the text:

- You can purchase hard copy on Amazon for \$75 w/free shipping or Kindle Version for \$60
- This book is also available digitally through the UM Library through the HathiTrust Emergency Temporary Access Service:

<https://search.lib.umich.edu/catalog/record/018297440>

Be mindful if you are going to rely on the copy through UM Library it will be first come, first serve as other courses are using it.

Supportive Resources:

- National Association of Social Workers (NASW). (2017). *NASW Code of Ethics*. National Association of Social Workers: Washington, D.C [NASW Code of Ethics Here](#)
- DSM 5 Manual
 - Available UM Library: <https://doi-org.proxy.lib.umich.edu/10.1176/appi.books.9780890425596>
 - Purchase Kindle Version on Amazon for \$8

All other readings for the course are available online via Canvas under each weekly module for quick access or you will find them under “files”→ “articles”. You can find the assigned reading under the date and week #.

You are expected to complete all readings and video course material prior to class time. These materials are vital to ensure application of learning outcomes that will be practiced in-class.

Relevant Webpages

<https://www.nimh.nih.gov/health/statistics/index.shtml>

Weekly Schedule

Reading Articles & Video links can be found in Weekly Module folders.

1/19 - Week 1- “What is Assessment & It’s Purpose”

Watch:

[What is the Assessment Process](#)

[Social Work Initial Assessment with Client](#)

Read:

- Jordan Chapter 1 pgs. 3-48
- James Drisko (2013) The Common Factors Model: Its Place in Clinical Practice and Research. *Smith College Studies in Social Work*, 83:4, 398-413, DOI:10.1080/00377317.2013.833435
<https://www.tandfonline.com/doi/pdf/10.1080/00377317.2013.833435?needAccess=true>

Suggested:

- Bourgois P, Holmes S, Sue K, Quesada J. (2017). Structural vulnerability: Operationalizing the concept to address health disparities in clinical care, *Academic Medicine*, 92(3):299-307.

1/26 - Week 2 – “Assessment Methods & the DSM”

Watch:

[Empathy Techniques](#)

[Clinical BPSS Interview](#)

[PROMIS Assessment](#)

[DSM-5](#)

[ICD-11 Mental Health Disorders](#)

[Assessment, Diagnosis and Treatment Planning in Clinical Social Work](#)

Read:

- Jordan Chapter 2

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- Taylor, L., Stotts, N., Humphreys, J., Treadwell, M. & Miaskowski, C. (2013). A biosychosocial-spiritual model of chronic pain in adults with sickle cell disease. *Pain Management Nursing*, 14(4), 287-301.
- Miller, C. (2019). Interviewing strategies, rapport and empathy. SpringerLink https://link-springer-com.proxy.lib.umich.edu/chapter/10.1007/978-1-4939-9127-3_2
- Hatala, A. R. (2012). The status of the “biopsychosocial” model in health psychology: Towards an integrated approach and a critique of cultural conceptions. *Open Journal of Medical Psychology*, 1(04), 51.

2/2 - Week 3 – “Assessing Suicide Risk & Safety Planning”

Watch:

[Mental Status Exam](#)

[Clinical Interviewing & Suicide Assessment with Shawn Shea](#)

[Suicide Risk Screening Training: How to Use the ASQ to Detect Patients at Risk for Suicide](#)

[Suicide Risk Screening: How to Manage Patients at Risk for Suicide](#)

[Suicide Assessment Role Play](#)

[Suicide Assessment of Client with Intent Subtle Warning Signs of Suicide](#)

[Risk Assessment with an Older Man After Suicide Attempt](#)

Read:

- Graybeal, C. (2001). Strengths-based Social Work assessment: transforming the dominant paradigm. *Families in Society*, 82(3), 233-242.
- Jordan Chapter 10 pgs. 369-381
- Bolton, J., Gunnell, D. and Turecki, G. (2017). Suicide risk assessment and intervention in people with mental illness. *British Medical Journal*, 351.
- Chu, J. P., Poon, G., Kwok, K. K., Leino, A. E., Goldblum, P., & Bongar, B. (2017). An assessment of training in and practice of culturally competent suicide assessment. *Training and Education in Professional Psychology*, 11(2), 69.

- Dhingra, K., Boduszek, D. and O'Connor, R. (2015). Differentiating suicide attempters from suicide ideators using the Integrated Motivational–Volitional model of suicidal behaviour. *Journal of Affective Disorders*, 186, 211-218.
- Diamond, G. S., Herres, J. L., Ewing, E. S. K., Atte, T. O., Scott, S. W., Wintersteen, M. B., & Gallop, R. J. (2017). Comprehensive screening for suicide risk in primary care. *American Journal of Preventive Medicine*, 53(1), 48-54.

Suggested:

- Harned, M., Lungu, A., Wilks, C. & Linehan, M. (2017). Evaluating a multimedia tool for suicide risk assessment and management: The Linehan suicide safety net. *Journal of Clinical Psychology*, 73 (2017), 308-318

2/9 - Week 4 - Consolidations and Competency Demonstration Assignments

2/16 - Week 5 - “Assessment & Screening of Adults”

Watch:

[Clinical Depression \(Major, Post-Partum, Atypical, Melancholic, Persistent](#)

[Bipolar Disorder Causes, Symptoms, Treatment & Pathology](#)

[Assessing for Depression in Mental Health Appointment](#)

[Psychiatric Interviews for Teaching Depression](#)

[Schizophrenia](#)

[Anderson Cooper Schizophrenia Simulation](#)

Read:

- Jordan Chapter 6 pgs. 225-255
- Siu, A. L., Bibbins-Domingo, K., Grossman, D. C., Baumann, L. C., Davidson, K. W., Ebell, M., ... & Krist, A. H. (2016). Screening for depression in adults: US Preventive Services Task Force recommendation statement. *Jama*, 315(4), 380-387.
- Culpepper, L., Lam, R. W., & McIntyre, R. S. (2017). Cognitive impairment in patients with depression: awareness, assessment, and management. *The Journal of Clinical Psychiatry*, 78(9), 1383-1394

- Chu and Williams, (2013). Early life trauma predicts self-reported levels of depressive and anxiety symptoms in nonclinical community adults: Relative contributions of early life stressor types and adult trauma exposure.

Suggested:

- Braun, S. A., & Cox, J. A. (2005). Managed Mental Health Care: Intentional Misdiagnosis of Mental Disorders. *Journal of Counseling & Development*, 83(4), 425–433.

2/23 - Week 6 – “Adults/Couples/Family Systems & Personality Disorders”

Watch:

[What It's Like to Live with Borderline Personality Disorder \(BPD\)](#)

Read:

- Jordan Chapter 7 pgs. 265-302
- Stanton, K., & Zimmerman, M. (2019). Unique and shared features of narcissistic and antisocial personality disorders: Implications for assessing and modeling externalizing traits. *Journal of clinical psychology*, 75(3), 433-444.
- Price, S., Coles, D., Wingold, T. (2017). Integrating Behavioral Health Risk Assessment into Centralized Intake for Maternal and Child Health Services *Health & Social Work*,42(4)231–240.
- Fruzzetti, A. & Payne, L. (2020). Assessment of parents, couples, and families in dialectical behavioral therapy. *Cognitive and Behavioral Practice*, 27(1), 39-49.

Suggested:

- Clark, L. Manifestations of personality impairment severity: comorbidity, course/prognosis, psychosocial dysfunction, and ‘borderline’ personality features.

3/2 - Week 7 – “Assessing Children & Adolescents”

Watch:

[Mental Health Assessment with Adolescents](#)

Read:

- Jordan Chapter 5 pgs. 177-214

- O'Reilly, L. & Dolan, P. (2016). The voice of the child in social work assessments: Age-appropriate communication with children. *The British Journal of Social Work*, 46(5), 1191–1207.
- George, M., Chandak, S., Wasnick, M., ., Khekade, S., Gahlod, N., & Shukla, H. (2019). Assessment of child's mental health problems using strengths and difficulties questionnaire. *Journal of Oral Research and Review*, 11, 7-11.
- Kiyimba, N. & O'Reilly, M. (2017). The clinical use of Subjective Units of Distress scales (SUDs) in child mental health assessments: A thematic evaluation. *Journal of Mental Health*. <https://doi.org/10.1080/09638237.2017.1340616>

Suggested:

- Aboujaoude, E. & Salame, W. (2016). Technology at the service of pediatric mental health: review and assessment. *Journal of Pediatrics (Medical Progress)*, 171, 2-24.

3/9 - Week 8 – “Children”

Watch:

[Mental Health Behavioral Disorder-ADHD in Children](#)

[Evaluation of the Child with ADHD](#)

[Detecting Early Signs of Autism](#)

[Treating Eating Disorders in Children](#)

Read:

- Mairs, R., & Nicholls, D. (2016). Assessment and treatment of eating disorders in children and adolescents. *Archives of Disease in Childhood*, 101(12), 1168-1175.
- Cancilliere, M. K., Freeman, J., Garcia, A., Benito, K., Sapyta, J., & Franklin, M. (2018). Assessing acute secondary treatment outcomes in early-onset obsessive–compulsive disorder. *Child Psychiatry & Human Development*, 49(5), 718-729.
- Brand, K. & Al-Rais, A. (2019). Pain assessment in children. *Anaesthesia & Intensive Care Medicine*, 20(6), 314-317.
- Power, T., Watkins, M., Anastopoulos, A., Reid, R., Lamber, M. & DuPaul, G. (2017) Multi-informant assessment of ADHD symptom-related impairments among children and adolescents. *Journal of Clinical Child & Adolescent Psychology*, 46:5, 661-67.

- Haack, L. & Gerdes, A. (2014). Culturally appropriate assessment of functional impairment in diverse children: validation of the ADHD-FX scale with an at-risk community sample. *Journal of Attention Disorders*, 21(11), 913-920.

3/16 - Week 9 – Consolidation and Competency Demonstration Assignments

3/23 - Week 10

WELL-BEING BREAK *No Readings/Class*

3/30- Week 11 – “Trauma”

Watch:

[Trauma Informed Practice: Working with Youth Who Have Suffered Adverse Experiences](#)

[Trauma Assessment in Children](#)

Read:

- Jordan Chapter 8 pgs. 308-330
- Hamberger, L. & 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.
- Arbeiter, E. & Roros, K. (2017). Parental engagement in child protection assessment: A qualitative analysis of worker and parent perspectives. *International Social Work* 60(6) 1469–1481.
- Fuller, T.L., Pacey, M.S., Schreiber, J.C. (2015). Differential response family assessments: listening to what parents say about service helpfulness, *Child Abuse & Neglect* 39: 7–17.
- Harris, N. (2012) ‘Assessment: When Does It Help and When Does It Hinder? Parents’ Experiences of the Assessment Process’, *Child & Family Social Work* 17: 180–91.

4/6 -Week 12 – “Substance Use Assessment Across the Life Span”

Watch:

[Everything You Think You Know About Addiction is Wrong](#)

[Substance Use Disorders](#)

Read:

- Powers, J., Benningfield, M. & Clinton, B. (2016). SBIRT (Screening Brief Intervention and Referral to Treatment) - A primary care tool to assess for substance use disorder. *Tennessee E-Journal* 2(1).
- Levy, S. J., & Williams, J. F. (2016). Substance use screening, brief intervention, and referral to treatment. *Pediatrics*, 138(1), e20161211.

4/13 - Week 13 - “Cognitive and Physical Functioning”**Watch:**

Montreal Cognitive Assessment (MoCA) <https://www.youtube.com/watch?v=7-9YBnqwZzo>

Short Physical Performance Battery (SPPB) https://www.youtube.com/watch?v=N_rJOGhQqZ4

Read:

- Schalet, B. D., Hays, R. D., Jensen, S. E., Beaumont, J. L., Fries, J. F., & Cella, D. (2016). Validity of PROMIS physical function measured in diverse clinical samples. *Journal of clinical epidemiology*, 73, 112-118.
- Howland, M., Tatsuoka, C., Smyth, K. A., & Sajatovic, M. (2017). Evaluating PROMIS (®) applied cognition items in a sample of older adults at risk for cognitive decline. *Psychiatry research*, 247, 39-42.

4/20 - Week 14**Final Consolidation and Competency Demonstration Assignments****Course Changes**

Course topics, assigned readings and/or assignments may change at the professor’s discretion. Students will be notified of course changes through Canvas and updates will be reviewed in class as applicable.

Assignments:

During these demonstrations, we will not hold class. You will have class time to conduct video simulations with your partners. Assignment guidelines will be posted to Canvas within the “Assignments” tab of the navigation toolbar. All assignments will be submitted via Canvas.

1. Student Competency Demonstration #1

1A Client Profile/Scenario Development 5%

DUE 2/6

1B BPSS Assessment Simulation 10%

DUE 2/9

Developing a character and a role play a BPSS, then the two students compare the two assessments (one student is the client the other one is an interviewer). Do a relatively simple case because this is still relatively early in the semester. It may be a good idea to keep developing using the same case throughout the semester to improve complexity. [a student would get to develop one case, assess one case, and evaluate their partners.] A student would submit a clinical case (the clinical case will not be graded but still needs to be submitted), a BPSS assessment report, and a reflection paper with their experience. During the feedback, students will share with each other about their perceptions and hinting about next steps in terms of the case development.

2. Student Competency Demonstration #2

Demonstration of most commonly Used Screening Tools 25%

DUE 3/16

Further developing a case with an additional layer of complexity Students will do a specialized assessment tool and then get feedback from their clients (e.g., introducing the tool, explaining the tool, usage of the tool clinically). The assessment tool plus additional questions required to establish a formal DSM-5 diagnosis.

3. Student Competency Demonstration #3 (4/20)

Demonstration of Assessment including relevant screening tools of diverse client with multiple concerns/co-morbidities 40%

DUE 4/24

Students are presented with a new clinical complex case and will be asked to demonstrate course competencies by completing a comprehensive assessment/screening demonstrating ability to integrate and apply class concepts and skills Grading will be based on skills demonstrated in the submitted video case demonstration.

4. Measurement of Class Engagement

- a. Completion of feedback/evaluation of other's demonstration competencies
- b. Participation and use of self- rubric
- c. Other pre-class or in-class assignments/activities graded as completed or not completed

Expectations of Assignments

We will review rubrics for each assignment before it is due. It is expected that assignments will be given authentic thought and effort. Assignments are to be written clearly, demonstrate organization, flow and have minimal grammatical errors. Demonstrate social work values and ethics. Assignments should be written in a professional language showing clear incorporation of course material, concepts and clinical thought. Lastly, assignments are expected to be turned in on-time.

Late Assignments are accepted in some situations, alternative arrangements for submitting assignments at times other than the due dates may be made with the instructor but must be done

with advance notice and a qualifying reason. Communication is key. I'm always reachable at cherisht@umich.edu. In cases where assignments are late and alternatives arrangements have not been made, three points will be deducted for each day the assignment is late. Assignments more than 3 days late will NOT be accepted.

Writing Skills

Papers and assignments are *expected* to be well organized, clearly written, and show minimal grammatical errors. In this and most of your classes, you will be asked to demonstrate proper grammar, spelling, and the rules of the American Psychological Association Publication Manual (6th Ed). You are not required to purchase the manual; however, I do encourage you to access it and other writing recourses online (e.g <http://guides.lib.umich.edu/c.php?g=282964&p=1885441>). Please be aware that there will be a reduction of points for poor writing skills (including grammatical errors) and APA errors (when APA is requested).

Writing Assistance

If you need any help with writing, there is help! Please reach out to Betsy Williams, SSW Writing Skills/Study Skills Coordinator. She is able meet over Zoom with individual students or small groups, to discuss their writing task at whatever point in the process is most helpful for them. Students can email Betsy at betsywil@umich.edu to request an appointment.

A website has been created for students; please check it out: ssw.umich.edu/writing-help

Attendance and Class Participation

The University of Michigan provides a detailed policy on class attendance in the MSW Student Guide. This policy is linked here: [Policy on Class Attendance](#). Students should plan to attend each class prepared to participate online. Participation includes attending class, arriving on time and staying the entire session, being prepared for classroom discussion through reading and analysis of assigned readings and/or activities, remaining focused on course content and linking questions and comments to assigned readings as well as to contributions of other students. Sharing and debating ideas and offering solutions are important components. Respect for everyone is expected at all times. You may disagree with the opinions of other students and faculty, but you must respect their contributions to class. Critical thinking, analysis and application of the material to real life situations is a vital part of the social work learning experience. As always, ongoing communication with your instructor is expected.

Student Time Expectation

This is a 3-credit course and is offered online. This means that as a student, you are expected to spend a total of 112.5 hours throughout 14 weeks (breaks down to 8 hours per week) including synchronous & asynchronous classroom time.

We will be using Zoom meetings as online method of "in-class" sessions. These sessions will be

reduced to 1.5-2 hrs. For effective time management and learning purposes we will hold regular synchronous session every Tuesday from 9-11 A.M. The last hour 11 A.M.-12 P.M is reserved for offline course related works, like group meetings, follow-up on assignments, etc. If students are unable to attend or participate in the scheduled session, communication to the instructor is requested as soon as possible. If more than two absences occur, the student will need to meet with the instructor and can result in a reduction of your grade.

Grading

A+=100	B+=87-89	C+=77-79	D=66-69
A=96-99	B=83-86	C=73-76	E=Less than 66
A-=90-95	B-=80-82	C-=70-72	

Accommodations for Students with Disabilities

If you need an accommodation for a disability, please let me know at your earliest convenience. Some aspects of this course, the assignments, the in-class activities online, and the way the course is usually taught may be modified to facilitate your participation and progress. As soon as you make the request, we can work with the Office of Services for Students with Disabilities to help determine appropriate accommodations. Any information you provide is private and confidential. For more information and resources, please contact Services for Students with Disabilities Office at G664 Haven Hall, 734- 763-3000 or ssdoffice@umich.edu

Class Recording and Course Materials

Audio and video recording of in-class lectures and discussions is prohibited without the advance written permission of the instructor. Students with an approved accommodation from the Office of Services for Students with Disabilities permitting the recording of class meetings must present documentation to the instructor in advance of any recording being done. The instructor reserves the right to disallow recording for a portion of any class time where privacy is a special concern. If the instructor chooses to record a class, they will decide which classes, if any, are recorded, what portion of each class is recorded, and whether a recording is made available on the course management website. On days when classes are recorded, students will be notified a recording is occurring. Class recordings and course materials may not be reproduced, sold, published or distributed to others, in whole or in part, without the written consent of the instructor.

COVID-19 Statement

For the safety of all students, faculty, and staff on campus, it is important for each of us to be mindful of safety measures that have been put in place for our protection. By returning to campus, you have acknowledged your responsibility for protecting the collective health of our

community. Your participation in this course on an in-person/hybrid basis is conditional upon your adherence to all safety measures mandated by the state of Michigan and the University, including maintaining physical distancing of six feet from others, and properly wearing a face covering in class. Other applicable safety measures may be described in the [Wolverine Culture of Care](#) and the [University's Face Covering Policy for COVID-19](#). Your ability to participate in this course in-person/hybrid may be impacted by failure to comply with campus safety measures. Individuals seeking to request an accommodation related to the face covering requirement under the Americans with Disabilities Act should contact the [Office for Institutional Equity](#). If you are unable or unwilling to adhere to these safety measures while in a face-to-face class setting, you will be required to participate on a remote basis. I also encourage you to review the [Statement of Student Rights and Responsibilities](#) and the [COVID-related Addendum to the Statement of Student Rights and Responsibilities](#).

Health-Related Class Absences

Please evaluate your own health status regularly and refrain from attending class and coming to campus if you are ill. You are encouraged to seek appropriate medical attention for treatment. School of Social Work students who miss class due to illness of any kind will be given opportunities to access course materials online or provided with alternative learning opportunities. Please notify me by email at cherisht@umich.edu about your absence as soon as practical, so that I can make accommodations. Please note that documentation (a doctor's note) for medical excuses is *not* required.

Additional School and University policies, information and resources are available here: <https://ssw.umich.edu/standard-policies-information-resources>. They include:

- *Safety and emergency preparedness*
- *Mental health and well-being*
- *Teaching evaluations*
- *Proper use of names and pronouns*
- *Accommodations for students with disabilities*
- *Religious/spiritual observances*
- *Military deployment*
- *Writing skills and expectations*
- *Academic integrity and plagiarism*