



Course title:	Integrated Healthcare Policies and Services
Course #/term:	SW637.003, Winter 2021
Time and place:	Tuesday, 2-5pm, ONLINE
Credit hours:	3
Prerequisites:	--
Instructor:	Colleen E. Crane MSW, LMSW
Pronouns:	She, Her, Hers
Contact info:	Email: kennac@umich.edu You may expect a response within 24 hours
Office:	ONLINE
Office hours:	By appointment only

1. Course Statement

a. Course Description and Content

This course will examine the integration of policies, financing, organization and delivery of physical health and behavioral health (mental health and substance abuse) care services and programs for adults, youth and children. The primary focus of study will be the U.S. healthcare system, with international comparisons, including promotion, prevention, treatment and rehabilitation services in primary care, acute care, chronic care, and long-term care settings. The evolution of the integration of primary care and behavioral health care services will constitute the focus of our policy analysis. Historical and contemporary policy issues and trends, including ethical dilemmas, controversies, marginalized and stigmatized populations, social movements and the role of the Patient Protection and Affordable Care Act (ACA) as they affect access to care and health care quality will be discussed. Strategies for influencing policies and programs, inequities and disparities in care and the impact of key diversity dimensions such as ability, age, income, class, color, culture, ethnicity, family structure, sex, sexual orientation, gender identity, gender expression, marital status, national origin, race, religion and spirituality on health care, will be examined. Opportunities for direct involvement by students in the political and organizational processes used to influence policy and delivery systems will be encouraged. The course reflects the values of the profession and focuses on the role of the social worker as "social policy practitioner" in promoting the maintenance or attainment of optimal physical and mental health, recovery and wellness and social and economic justice.

b. Course Objectives and Competencies

1. Describe the evolution, organization, and distribution of health care services in the U.S., including gaps and excesses, and inequities in access and quality of care, including physical and behavioral health services. 2. Identify the strengths and limitations of the U.S. healthcare system compared with health care systems in other countries and directions for needed change. 3. Describe financing mechanisms for health care services, including physical and behavioral health care, and the impact of these mechanisms on equity, access and successful integration of services. 4. Describe evidence-based models for health care delivery including integrated physical and behavioral health care services in a variety of settings and addressing a variety of populations. 5. Describe disparities in health care in the U.S., their sources, and systemic strategies for intervention. 6. Identify the role of government in healthcare policy and in planning, organizing, and delivering health and behavioral health services, including advocating for systems change. 7. Identify, describe and discuss the key elements of the Affordable Care Act, and assess progress toward implementation at the federal and state levels. 8. Discuss current ethical issues and controversies and apply ethical principles and decision-making in health care. 9. Identify the role of social work in policy development, services planning and delivery of health care and behavioral health care services. 10. Discuss innovative approaches to improving health care access, quality and delivery, particularly addressed to eliminating health care inequities.

c. Course Design

This class will strive to foster a learning environment where each student can reflect critically on sources of power and mechanisms of oppression and privilege, construct a framework for justice, and examine sources of their beliefs and perspectives that helps to understand historical and modern health care systems and policies and how these influence access and care.

This course will work to create a climate that supports critical analyses, mutual learning, engaging within and across differences and examining sources of power and knowledge. It involves lectures, video, and participation in experiential activities. Additionally, this course will provide a forum to critically examine how health policy and care impact our multiple status locations, and shape our beliefs, assumptions, behaviors, and life experiences. Special attention will also be given knowledge about health equity and policy change, and principles of community advocacy. Groupwork and collaboration is a central focus of the course design. To mirror the partnerships that social workers participate in at micro, mezzo and macro levels, students will have the experience to collaborate on groups, give and receive constructive feedback, and contribute to and manage complex projects, and navigate relationships with colleagues. Students will have the opportunity to simulate collaboration as part of a care group, part of an advocacy organization, and part of a research group or think tank.

The class will be very hands-on and will also utilize innovative resources in teaching content, including MOOCs, online training, webinars, videos, and simulations. Skills will be learned, practiced, and applied in class-based and project-based experiences.

Additionally, this course is an advanced level course with adult learners. Thus, the expectation is that students take charge of their own learning, their own participation and their support for the learning of their colleagues in the classroom. The class will consist of a combination of mini-lectures and direct application of skills in small groups or pairs to take theory to the level of community change. Students must come prepared to fully engage in order to get the most out of this class. Additionally, this class does not approach education from the “banking” perspective. Everyone in the classroom has expertise and experience to offer into the learning space. Thus, students will be asked to bring and share examples and root the larger theories of change in their own background and experience.

Synchronous class: Each week we will have synchronous (live) class time ranging from 60-90 minutes. However, to optimize our time together, acknowledge our (limited) attention spans, and to follow online teaching best practices, I will strive to keep our synchronous time closer to 60 minutes immediately followed by time to apply to lecture topics to skills lab assignments.

Asynchronous class: In addition to our limited synchronous time together, you are expected to engage in our course content via our Canvas modules, discussion boards and other course assignments each week. I highly encourage you to keep pace week by week with the asynchronous materials (including group work). This will keep you on track.

d. Curricular Themes

Theme Relation to Multiculturalism & Diversity

Multiculturalism and Diversity issues will be integrated throughout the course and prominent in content and assignments related to health care disparities. The course will address a range of diversity dimensions (including ability, age, class, color, culture, ethnicity, family structure, gender (including gender identity and gender expression), sex and sexual orientation, marital status, national origin, race, and religion or spirituality.

Theme Relation to Social Justice

Social Justice and Social Change will be addressed throughout the course, including content on equity, quality and access, ethical issues in healthcare, and the role of social work in promoting social justice and social change in the healthcare system.

Theme Relation to Promotion, Prevention, Treatment & Rehabilitation

Promotion, Prevention, Treatment, and Rehabilitation will be addressed through content on the organization of health care services, allocation of resources, ethical issues in healthcare, the delivery of preventive, primary, acute, chronic and long-term care and care for people with disabilities and in the scope of policies and services addressed in health care reform efforts.

Theme Relation to Behavioral and Social Science Research

Behavioral and Social Science Research will be presented throughout the course and will include findings from medical sociology, geography and anthropology; political science, health care economics and health psychology; social work, public health, nursing and medicine.

e. Relationship to Social Work Ethics and Values

The course reflects the values of the profession and focuses on the role of the social worker as "social policy practitioner" in promoting the maintenance or attainment of optimal physical and mental health, recovery and wellness and social and economic justice.

f. 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 practice, theories and/or policies that promote health equity, 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 health equity and policy change, quality care and access, ethical issues in healthcare, and the role of social work in promoting social justice and social change in the healthcare system.

g. Anti-Oppression Statement:

As a community, we encourage each other to critically examine issues related to power, privilege, and oppression. These issues; therefore, are integrated into each classroom experience. As a result, there will be class discussions that may be difficult or challenging. In order to have the most supportive environment possible, we must all commit ourselves to fostering an inclusive, anti-oppressive space in which each person takes responsibility for their own language, actions and interactions. It is important that we listen to each other about how our words and actions are affecting one another and the learning environment. We share the task of negotiating the dual priorities of authentic free speech and active regard for one another, being open to diverse perspectives and ideas. We recognize that microaggressions happen; however, overt slurs in relation to race, age, ethnicity, gender, gender identity, gender expression, sexual orientation, religion/world view, immigration status, size, nationality, dis/ability, marital status, political affiliation, or any other identities, will be addressed directly. Throughout the course, we will negotiate other guidelines about class discussions.

2. Class Requirements

a. Text and Class Materials

This class does not require a physical text. All readings, media, and handouts from recent social science/medical journals and pertinent news articles and/or social media publications, blogs, short videos, and other sources will be distributed to students via Canvas. This course will also include supplemental videos and social media use to enhance and support your learning experience. All items

will be posted to Canvas, we are all responsible to check Canvas regularly throughout the week for updates to course materials and discussion boards.

b. Class Schedule – subject to change

Session 1: 1.19.2021

Introduction to course. Review of Syllabus and course expectations. Social Workers as Policy Practitioners and Social Work Ethics in Health Care

Budetti PP. Market justice and US health care. JAMA. 2008; 299(1): 92-94.

Stanhope, V. (2018). The need for integrated healthcare in the United States. In Stanhope, V., & Straussner, S. L. A. (Eds.) *Social work and integrated health care: From policy to practice and back* (pp.3-20). Oxford University Press.

Session 2: 1.26.2021

History and Organization of U.S. Healthcare System, Affordable Care Act Impact

Gorin, S. & Moniz C. (2019) Health and mental health policy past, present, and future. In Reisch, M (Ed.), *Social policy and social justice: Meeting the challenges of a diverse society.* (pp 411-438). Cognella.

Budetti PP. Market justice and US health care. JAMA. 2008; 299(1): 92-94

Berwick, D. (2013). The Toxic Politics of Health Care. JAMA. 310(18):1921–1922.

doi:<https://doi-org.proxy.lib.umich.edu/10.1001/jama.2013.281965>

Session 3: 2.2.2021

Financing of Health and BH Services

Barr, D. A. (2016). Introduction to US Health Policy: the organization, financing, and delivery of health care in America (pp.70-90). JHU Press.

Campanelli, P., & Cleek, A., & McKay, M. (2018). Health Care Financing. In Stanhope, V., & Straussner, S. L. A. (Eds.) *Social work and integrated health care: From policy to practice and back* (pp.85-96). Oxford University Press.

Session 4: 2.9.2021

Integrated health at policy and practitioner levels

McGinty, E. & Daumit, G. (2020). Integrating Mental Health and Addiction Treatment Into General Medical Care: The Role of Policy. *Psychiatric Services*, 71:11, 1163-1169.

Hoge M.A., Morris J.A., Laraia M., Pomerantz A., & Farley, T. (2014). Core Competencies for Integrated Behavioral Health and Primary Care. Washington, DC: SAMHSA - HRSA Center for Integrated Health Solutions.

National Council for Behavioral Health. (October 2020). Making the case for high functioning, team-based care in behavioral health.

Session 5: 2.16.2021

Integrated Health Models

Advisory Committee on Training in Primary Care Medicine and Dentistry. (2019). Integrated care: Meeting America's 21st century healthcare training needs.

Sullivan, P. W.. (2018). Integrated Health Care Models and Frameworks. In Stanhope, V., & Straussner, S. L. A. (Eds.) *Social work and integrated health care: From policy to practice and back* (pp.21-32). Oxford University Press.

Session 6: 2.23.2021

Workforce in Integrated Health

De Saxe Zerden, Lisa, Lombardi, Brianna M, & Richman, Erica L. (2019). Social workers on the interprofessional integrated team: Elements of team integration and barriers to practice. *Journal of interprofessional education & practice*, 17, 100286. Elsevier Inc. Retrieved from <https://search.lib.umich.edu/articles/record/FETCH-LOGICAL-c1516-4c599abb12445b0b3b05cc2b97159c0018d70586495bb4f833c24c22a2ae86243>

Kwan, Bethany M, Valeras, Aimee B, Levey, Shandra Brown, Nease, Donald E, & Talen, Mary E. (2015). An Evidence Roadmap for Implementation of Integrated Behavioral Health under the Affordable Care Act. *AIMS public health*, 2(4), 691–717. Journal Article, United States: AIMS Press. Retrieved from <https://search.lib.umich.edu/articles/record/FETCH-LOGICAL-13536-cca459359c9ca908a59d964052a215e2f3a5d40c301c64a3e0de378cd7c2f5323>

Session 7: 3.2.2021

Integrated Population Health Management

Klusaritz, H., Cederbaum, J., & Krauss, M.(2018). Population Health. In Stanhope, V., & Straussner, S. L. A. (Eds.) *Social work and integrated health care: From policy to practice and back* (pp.33-45). Oxford University Press.

Miller, Daniel P, Bazzi, Angela R, Allen, Heidi L, Martinson, Melissa L, Salas-Wright, Christopher P, Jantz, Kathryn, Crevi, Katherine, et al. (2017). A Social Work Approach to Policy: Implications for Population

Health. American journal of public health (1971), 107(S3), S243–S249. Journal Article, United States: American Public Health Association.

Rose, Stephen M, Hatzenbuehler, Stephanie, Gilbert, Erika, Bouchard, Mark P, & McGill, Debra. (2016). A Population Health Approach to Clinical Social Work with Complex Patients in Primary Care. Health & social work, 41(2), 93–100. Journal Article, United States: Oxford University Press.

Session 8: 3.9.2021

Disparities in Health

Moniz, C. (2019). Analyzing the problem: Disparities in health for people of color. In C.D., Moniz & Gorin, S.H. (fifth eds.) Health care policy and practice: A biopsychosocial perspective (pp. 204- 242). New York & London Routledge.

Moniz, C. (2019). Analyzing the problem: Disparities in health for women, children, older adults, and the LGBTQ community. In C.D., Moniz & Gorin, S.H. (fifth eds.) Health care policy and practice: A biopsychosocial perspective (pp. 243-302). New York & London Routledge.

Session 9: 3.16.2021

Health Care Delivery - Governmental and Private

Niles NJ (2015). Government's role in U.S. health care. In: Basics of the U.S. Health Care System. Burlington, MA: Jones & Bartlett Learning; 2, (pp. 101-110).

Session 10: 3.30.2021

Public Health

Niles NJ (2015).. Public health's role in health care. In: Basics of the U.S. Health Care System. Burlington, MA: Jones & Bartlett Learning; 2, (pp. 123-142).

Session 11: 4.6.2021

Special Topics: (1) Crisis Services (2) Pharma industry, vaccines

Barr, D. A. (2016). Chapter Ten: Pharmaceutical policy & the rising cost of prescription drugs. In Introduction to u.s. health policy: The organization, financing & delivery of health care in America, 4th Ed. (pp. 277-310). Baltimore, MD: Johns Hopkins University Press.

Substance Abuse and Mental Health Services Administration (SAMHSA). National Guidelines for Behavioral Health Crisis Care, Best Practice Toolkit. Published 2020. Available at <https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-care242020.pdf>

Session 12: 4.13.2021

Special Topics: (1) International Comparisons (2) Long-Term and Palliative Care

Aldridge, Melissa D, Hasselaar, Jeroen, Garralda, Eduardo, van der Eerden, Marlieke, Stevenson, David, McKendrick, Karen, Centeno, Carlos, et al. (2016). Education, implementation, and policy barriers to greater integration of palliative care: A literature review. *Palliative Medicine*. Research Support, Non-U.S. Gov't, London, England: SAGE Publications.

Barr, D. A. (2016). Chapter Eleven: Long Term Care. In *Introduction to u.s. health policy: The organization, financing & delivery of health care in America*, 4th Ed. (pp. 235-247). Baltimore, MD: Johns Hopkins University Press.

Tikkanen, R & Abrams, M.K. (2020). U.S. health care from a global perspective, 2019: Higher spending, worse outcomes?. *Commonwealth Fund*.
<https://www.commonwealthfund.org/publications/issue-briefs/2020/jan/us-health-care-global-perspective-2019>

Session 13: 4.20.2021

Future of integrated health

Iyengar, K., Mabrouk, A., Jain, V. K., Venkatesan, A., & Vaishya, R. (2020). Learning opportunities from COVID-19 and future effects on health care system. *Diabetes & metabolic syndrome*, 14(5), 943–946.
<https://doi.org/10.1016/j.dsx.2020.06.036>

Oliver, K., Lorenc, T., Tinkler, J., & Bonell, C. (2019). Understanding the unintended consequences of public health policies: the views of policymakers and evaluators. *BMC public health*, 19(1), 1-9.

c. Assignments:

Self-Reflexive Journals (4) – 20 Points. Pass/Fail

DUE – Please see Canvas for due dates

Throughout this course, you will complete a total of four (4) reflections detailing your learning, growth, and areas of needed clarification in this class. You will be provided an article, video, or other resource to review and then discuss your reflections through a critical consciousness lens. Reflexive journals may include your observations and subjective experiences, but should always be tied to course content and theory, and at least one (1) reading or lecture should be cited. For example, reflections may include

discussion on how course content is applicable to current health policy, health administration, health management, or health equity issues happening locally, nationally, within your field placement, or otherwise. All sources should be cited using APA-format. You may choose the delivery format of your self-reflexive journals such as a written document, a graphical document, or a video recording. If you have another creative method for delivering your reflexive journal, please notify the instructor.

Prompt Topics (more details on Canvas):

1. Characteristics of White Supremacy in Healthcare
2. Application of Course Content to your Field Placement
3. Self-Care
4. Learning Outcomes from the Course (option for meeting and discussing with instructor)

Overview of Health Policy Analysis Group Project

The class will be divided into groups for developing a four-part health policy analysis and advocacy application, throughout the semester. The purpose of this assignment is to identify and understand the historical and current context that shapes policy development, implementation, and evaluation. As integrated health policy and care are implemented through collaborative internal groups and/or external community partners, group work is a foundational component focus of this assignment. groups are expected to meet outside of synchronous class time, however, the instructor will provide time following our synchronous class lectures/discussion whenever possible.

As the groups are assigned, the groups should decide on a project timeline and which activities are done collectively and which activities will be divided up and integrated later on. This is completely open to interpretation and the interest areas of the group. Since this class and the field of integrated health heavily relies on group and group collaboration, participation includes your contribution to a positive and constructive group learning environment and experience. Students will complete the Self and Peer Assessment that indicates how well the group worked together, and if each member contributed in a valuable way to the project. These assessments will inform the participation grade for the course.

Part 1: Policy Analysis Proposal/Framing the Issue: 15 points

DUE: 2/7/2021 at 11:59pm

Your group must submit a 2-page proposal of your group's selected topic area and policy focus (with 3-6 references presented as an annotated bibliography). Please see this resource for how to complete an annotated bibliography:

https://owl.purdue.edu/owl/general_writing/common_writing_assignments/annotated_bibliographies/index.html). This proposal must identify the health care or policy problem (some examples: unethical care, discrimination, program effectiveness, funding mechanisms, etc), select a specific health policy

(existing or proposed), and identify the target population the policy was developed to impact. Your 2-page proposal should be in 12 pt font and double spaced. The rubric for this assignment is on Canvas.

Part 2: Policy Analysis Presentation and Discussion: 20 points

DUE: 2/28/2021 at 11:59pm

For this assignment, each group will explore, in-depth, the historical and current context shaping the policy, what US and societal values influence this policy, identify the benefits and gaps of the policy. This includes the process of briefly describing the scope of the problem, major cause(s) and consequences. By the end of the presentation, everyone should have a basic understanding of the issue being explored, the policy selected to address it and the scope of the policy's impact on its intended population from a diversity, equity and inclusion lens.

Presentations may not be longer than 15 minutes and then there is 15 minutes for discussion – come prepared with three discussion questions to ask the class. There should be a visual component (poster, Powerpoint, Prezi, etc.), and all images should include a description for accessibility. Visual representation should include the context that they were obtained (name of commercial/movie, topic of a billboard, artist, or physical location of artwork). The last screen of the presentation should include a reference list. The group will work with facilities staff to arrange any audio-visual needs, if necessary.

Each presentation should be uploaded before class on the discussion boards under your assigned group.

Health Policy Analysis Project Part 3

Policy Brief: 30 points

DUE: 4/5/2021 at 11:59pm

This assignment is to continue to explore a health policy topic incorporating various perspectives and using this information to convey recommendations for next steps. The policy brief is a written document that describes the issue the policy attempts to address, background related to the issue, information that informs the issue (this may include current law, debate about the issue, data about the issue), policy options for addressing the issue, and your recommended policy solution. This assignment also requires a form of community engagement that involves identifying an organization/stakeholder already involved in addressing the policy problem you have been analyzing. This may include key informant interviews or researching gray literature from an organization working on the policy to get a better understanding of current policy efforts. This assignment will be submitted and graded individually; however, you can still work as a group to share resources and collaborate. For example, your group might have been focusing on Health Care of Vets. This is a broad policy issue. Your policy brief might then focus more narrowly on the fact that while Tricare (insurance for vets) does cover transgender health care, it does not cover transition-related surgery, which is prohibit by VA regulations regardless of medical need.

Policy briefs should be created with the target audience being an “on the fence policy-maker.” For examples of a policy brief see: <https://writingcenter.unc.edu/tips-and-tools/policy-briefs/>
This assignment should be in 12 pt font with double spacing.

Health Policy Analysis Project Part 4

Advocacy Application of Policy Brief

DUE: 4/24/2021 at 11:59pm

This last part of the policy analysis assignment is focused on the application of putting theory into practice. You will select **one option below** or please notify your instructor if you would like to choose a different/creative advocacy strategy for this assignment. Using the information and work you have completed thus far from Parts I, II, & III, you will apply that knowledge to a form of advocacy practice that will be dependent upon your policy analysis topic area (organizational, local, state, federal, etc). The advocacy strategy you choose should be based upon what makes the most sense for your topic area and policy recommendation. For example, if you have been examining an organizational policy, a letter to a public official would not make sense for this assignment. You may or may not implement your advocacy strategy, however, you are encouraged to make it as realistic as possible.

A. Advocacy Letter Writing: Writing letters to public officials and organizations is a common form of political action for both clients and social workers. Clients telling their personal stories puts a “face” on a problem. Social workers and other professionals attempt to influence policy by not only telling their client’s stories but also by adding “facts and figures” about the problem or issue.

For this assignment you should prepare a letter to an elected official regarding your chosen policy issue. You are not required to actually send the letter; however it must demonstrate the appropriate format and content. In the letter, explain how you want the legislator to vote on the position and why. Your letter should include reference to the policy, facts and figures regarding the policy from reputable sources.

This letter should be no more than one page, single spaced. Use this resource to help guide you: <https://ctb.ku.edu/en/table-of-contents/advocacy/direct-action/letters-to-elected-officials/main>

Attach a reference list of your resources in APA style. To be taken seriously, advocacy letters to the media and elected officials must be well-organized and written with excellent grammar and spelling.

B. Infographic: “Infographics have an emotional power because they can show you an idea — or a relationship, or how something works — very quickly. People respond to that. A persuasive infographic surprises the viewer. It moves them in some way and makes them want to keep looking at it or show it to other people (Ovans, 2014).” Review (Ovans, 2014) to further understand the importance and power of infographics: <https://hbr.org/2014/04/what-makes-the-best-infographics-so-convincing>

For this assignment you will create a one page infographic on a policy that you are interested in. Many students have used Canva in the past for this assignment; however, you can also use any software that you feel most comfortable using. You will not be graded per say on your graphic design skills but on your ability to convey the importance of your policy issue.

1. It is clear to the viewer what your policy is?
2. Does your infographic share important statistics or information that is relevant to your policy?
3. Would the viewer be able to interpret the importance of the issue at hand (i.e. is language persuasive and relates to social work values and ethics)?

C. Mock Testimony (organization, city, state, federal): A succinct testimony provides information about the scope of the issue, existing policy, policy alternatives/current efforts (including key points from key informant interview).

1. Introduction: Who you are and why you are there to testify. Explain to people why they should pay attention.
2. Summarize policy main points: A succinct presentation of the policy's main points that provides information about the scope of the issue, existing policy, policy alternatives/current efforts (including key points from key informant interview).
3. Description of Policy Recommendations: Persuasively present your selected policy recommendation/solution and provide supporting evidence on why it's the most desirable.
4. Social Work Practice Implications: Using the NASW Code of Ethics, identify what social work values are embedded in this policy recommendation and what are the implications for social work practice.
5. Wrap Up: Succinctly summarize the main points of your presentation.
6. If opportunity is available, present at relevant entity

D. Create an Organizational Committee:

Based on your analysis of the organizational policy, would creating an internal committee be an advocacy strategy that can be implemented to address any gaps or issues. Here are things to consider in developing a committee:

1. The scope of the committee: Are you going to focus on getting to the agency by car or bus or will you also include telehealth services? i.e. access to telephone or computer? Would it be best to include all or separate telehealth services from accessibility by car or bus?
2. The expectations of the committee: How many people? How often will you meet? Is this a volunteer committee or will you be asking individuals from the executive committee to participate?
3. Goals of the committee? 1 or 2 goals. Please identify.
4. Deliverables of the committee: What information will you share with the broader agency?

5. Resources and budget of the committee: Do you need additional funds to run the committee or access to budgets or records.
6. Governance or human resources of the committee: Who is in charge? How will you vote? Who will you report to and how often. Is this an ad hoc committee or a permanent committee?

Assignments:	Points:	Due Date:
Self-Reflexive Journals (4)	5 points each = 20 points	On CANVAS
Health Policy Analysis Group Project Part 1: Policy Analysis Proposal	15 points	2.7.2021
Health Policy Analysis Group Project Part 2: Policy Analysis Presentation	20 points	2.28.2021
Health Policy Analysis Project Part 3: Policy Brief (individual submission)	30 points	4.5.2021
Health Policy Analysis Project Part 4: Advocacy Application of Policy Brief (individual submission)	15 points	4.24.2021

Submission of Assignments

All assignments must be submitted online via Canvas before or by 11:59pm on the day it is due as indicated on the syllabus. **After the due date, 1 point will be deducted per day each day late from your grade on the assignment, with a maximum of 5 points deducted for a late submission.**

d. Attendance and Class Participation

Attendance: Attendance is necessary for participation to occur but attendance alone is not enough –you have to actively engage – ask and answer questions, make comments. If you are to miss more than 1 class during the semester, you will need to speak with me, as an additional writing assignment will be required of you.

Typically each week we'll have some combination of lecture, small group discussion and full class discussion. Lecture outline will be posted on Canvas before the night of the lecture. Each week there will be assigned readings. As we progress through the semester, I will begin to highlight readings based on our class discussions. Each week, in discussion you will be asked about the core concepts and relevant implications of these concepts. Core concepts should link from one week to the next in the sense that you should be asking yourself (and me) how the current week's content relates to what we already learned. The goal of the discussions is to create an active learning context in which each week's content

is actively linked to prior content so that by the end of the semester, students will have a linked memory structure, facilitating later recall and use of the material in class and in the field.

Please refer to the MSW Student Guide for policies related to attendance and class participation found here: <https://ssw.umich.edu/msw-student-guide/section/1.08.00/17/policy-on-class-attendance>

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 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.

Inclusivity Policy

Social and economic justice is one of the key themes of social work practice, research, and education. As a social work community, we must encourage each other to critically examine issues related to power, privilege, and oppression. As a result, there will be class discussions, activities, or assignments that may be difficult or challenging. In order to have the most supportive environment possible, we must all commit ourselves to fostering an inclusive, anti-oppressive space in which each person takes responsibility for their own language, actions and interactions. It is important that we actively *listen* to each other about how our words and actions are affecting one another and the learning environment, knowing the impact is more important than intent. It can be difficult to navigate the dual priorities of supporting authentic free speech, and holding active regard for one another being open to diverse perspectives and ideas. I recognize that microaggressions happen (by all of us, to all of us); however, overt slurs in relation to race, sex, age, ethnicity, gender, gender identity, gender expression, sexual orientation, religion/world view, immigration status, size, nationality, dis/ability status, marital status, political affiliation, or any other identities, will be addressed directly. Throughout the course, we will negotiate other guidelines about class discussions. Please bring your best selves to our classroom space.

WINTER 2021 SEMESTER NOTE:

This semester will continue to pose many challenges to our physical and emotional wellbeing. We are still living through a pandemic, have a shifting political environment leading to community mobilization and civic unrest, and our semester will be occurring through a tumultuous and contentious transfer of presidential power and the fallout thereafter. Considering the stress and distress these factors will contribute to our daily lives throughout the semester, I encourage you to think about your capacity and strive for trying your best and not for perfection. Please communicate often with your instructor with any barriers or issues that come up throughout the semester so we can collaboratively support your success in this course.

e. Grading

The Grading Scale is:

A = 100% - 95%	B+ = 89% - 86%	C+ = 79% -76%
A- = 94% - 90%	B = 85% - 83%	C = 75% -73%
	B- = 82% - 80%	C- = 72% - 70%

A+ is reserved for exceptional work.

Please refer to the MSW Student Guide for additional questions on grading and grading for special circumstances:

<https://ssw.umich.edu/msw-student-guide/section/1.07.00/14/grades-in-academic-courses-and-in-field-instruction>.

<https://ssw.umich.edu/msw-student-guide/section/1.07.01/15/grades-for-special-circumstances>.

f. 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.

g. 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.

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*