

**LOMA LINDA UNIVERSITY**  
**DEPARTMENT OF SOCIAL WORK AND SOCIAL ECOLOGY**  
**SOWK 654B Therapeutic Interventions with Older Adults**  
**Spring Quarter 2005-2006**

<b>Section:</b>	<b>Instructor:</b>	<b>Contact Information:</b>	<b>Units:</b>	<b>Lecture:</b>	<b>Room:</b>
1	Lorraine Hedtke, MSW, ASCW, LCSW	h: 909-335-9767 c: 909-327-7249 lhedtke1@aol.com www.rememberingpractices.com Please call or email for appointments.	3	Wednesday, 6:10- 9:00 p.m.	TBA

**COURSE DESCRIPTION**

As this is course continues with the emphasis of class 654A, 654B will continue to explore clinical applications that are helpful for older adults. This course provides an intensive examination of clinical issues related to social work practice with older adults and their families. Specific focus will be paid to work with frail and vulnerable older adults. Students will continue in their developing knowledge about the social construction of aging as it pertains to issues that are germane to this population including, but not limited to, Alzheimer's and dementia, substance abuse, violence, poverty, institutionalization, illness, emotional and mental duress, and death and grief. Attention will be given to issues related to culturally-competent practice and the interplay of race, ethnicity and culture as well as issues of power and politics to create effective service delivery.

**OBJECTIVES**

Students will gain knowledge and practice skills to provide social work support, intervention and counsel to address a variety of clinical issues that are found in populations that are older. These knowledge and skills will relate specifically to the following:

1. Creation of a template for support group for elders who are living with grief, including how to develop questions and enlist participants at an independent living facility for elderly persons.
2. the execution of a support group for elders living with grief.
3. reflections about strengths, successes and need for improvement following the grief group.
4. Creation of a template for a support group for family members of elderly populations living at an independent living facility, including strategies, questions and referral options
5. Execution of the support group for family members of elderly populations
6. Reflections about strength, successes and need for improvement following the family support group.
7. creation of a template for a positive aging support group for people who are elderly living at an independent living facility, including questions, and recruitment of participants.
8. Completion of a thorough written analysis of the theories used and the clinical applications practiced in the groups.
9. The needs, strengths, and diversity of active older adults.
10. Discursive influences that impact upon people who are older and how policies are shaped by these discursive influences.
11. An appreciative inquiry model of aging and the clinical application of this model.

**GRADING**

To pass the course, *all of the following pieces of work must be completed.*

Resubmissions of unsatisfactory work may be accepted for assessment after consultation with the lecturer, but resubmitted work can achieve a maximum grade of B.

1. Construction of template for group 20%
2. Group facilitation 20%
3. 2 Essays related to group facilitation 40% ( 20 points each)
4. Short reflection papers 20%

A	A-	B+	B	B-	C+	C	C-	D+	D	D-	F
93-100	90-92	87-89	83-86	82-80	77-79	73-76	70-72	67-69	63-66	60-62	<60
4.0	3.7	3.3	3.0	2.7	2.3	2.0	1.7	1.3	1.0	0.0 Assigned value for calculation of grade point averages.	

A further examination, in the form of extra work, is available in this course.

Written assignments (case study and essay style test) will be graded using a written rubric. Please see appendix for this rubric. Rubric will be used to evaluate the group template and facilitation as well. Please see appendix for these rubrics.

*Attendance Policy:* Students are expected to attend all sessions of all classes. Failure to do so will negatively impact the student’s grade and may place the student in jeopardy of course failure. This policy exists because the social work program is one of professional preparation. In addition to acquiring theoretical knowledge, students are expected to acquire professional values, to integrate knowledge from a range of courses, to develop professional skills and be socialized into the profession. The faculty of the Department of Social Work and Social Ecology are convinced that this cannot be accomplished through independent study alone. Thus, attendance is required unless legitimate and special reasons exist for absences or tardiness. Any such absences or tardiness should be discussed directly with the course instructor.

Classes begin at 10 minutes after the hour unless otherwise arranged. Students are required to be in the classroom and seated by that time. Instructors have the right to refuse entry or reentry to any students who are tardy or who take frequent and/or extended breaks from class. Early departures from classes are also not acceptable. Tardiness, frequent and/or extended breaks, and early departures are all recorded as absences. All absences are factored into the course grade and may be substantial enough to affect the final course grade; including assignment of an unsatisfactory or failing grade. Absences due to personal emergencies, jury duty, or work responsibilities will be excused only if appropriate documentation is provided. Students should give special attention to arranging for child care and making voluntary personal appointments at times that do not conflict with their responsibilities regarding class attendance.

Faculty members may choose to incorporate a + or - 1% tolerance range in the grading system. This option will be used to reflect attendance (missed classes, late arrivals and early departures) and passive participation. Faculty members also reserve the right to make adjustments in assignment weights so as to benefit the grade distribution for students.

*Professional Conduct:*

Please note that as a student in a graduate program, you are expected to foster professional behavior that fits with the professional conduct of a Masters prepared social worker. This includes timeliness and punctuality of assignments and class attendance, professional integrity and honoring commitments, coming prepared to classes and groups, and professional conduct while in class or groups. While you cannot be graded for these items per se, poor attitudes, lack of preparedness, and unprofessional behavior will be accounted for in your evaluation and are a part of the rubric scaling. Matters that persist in these areas will be referred to your advisor for follow up. Should have questions or concerns about these, please speak to your professor.

Student Educational Outcomes:

**COGNITIVE AND AFFECTIVE LEARNING EXPERIENCES**

Specific attention is given to students acquiring professional-level values, knowledge, and skills in a graduate-level exchange, i.e., lecture-discussion; audio-visual presentations; quizzes; case presentations, targeted reading

assignments, and handouts. All written assignments are expected to meet APA guidelines and referenced appropriately. All reading assigned is expected to be completed prior to each class.

*Required Readings:* Course readings designated as required provide the major content for lectures, discussions, examinations and quizzes. *Required readings are located in either the course text books or the course supplement.*

*Recommended Readings:* Recommended readings refer to the text and journal materials used to enhance course lectures, discussions, and student research. Examination and quiz questions are not taken from recommended readings. *Recommended readings will be assigned and available.*

*Assignments:*

1. Construction of template for group (20%). Due 4/12/06

Each student will be expected to co-create a template for the two groups you will be facilitating. You will design the model, the example questions and any exercises and handouts that will be provided. In addition the outline needs to include how you will be publicizing the group at the facility. The rubric for grading the template is attached to the syllabus.

2. Group facilitation. (20%) Due one in April & one in May

This quarter we will facilitate groups at an independent living facility for people who are elderly. The groups will be topic specific and are as follows: Each student will facilitate two groups along with another student using the template designed. You will be graded in part from evaluations completed by group members that will be provided to you in class. In addition, each student will evaluate their co-facilitator on forms provided in class. You will be expected to present to your colleagues about the group following the meeting(s) as well. The evaluations & presentations will be factored into your grade.

3. 2 Essays Related to the development of the template and the group facilitation. (40% total – 20% for each essay) Due 5/3/06 & 5/17/06. Writing rubric will be used to grade.

You will be required to write up a summary of the two groups you facilitate. Each group will be a separate essay and will include information from your template, the facilitation itself and the evaluations. The writing should be presented in APA format and should reference sections. You will not receive full credit unless this is done. You may want to consider:

What topic(s) were discussed?

What was the theoretical thinking that informed the use of the template, the questions, exercises and handouts?

Describe the group process and include a piece of transcribed conversation.

How do you imagine the group members benefited from the group?

What did you do well with this group? What areas need developing?

How does this group impact upon your professional identity?

What theories and thinking can you draw from class readings and lecture

4. Reflection paper about movie. Due 5/24/06. Writing Rubric will be used to grade.

You will be asked to write one short paper (approximately 3 pages each) in response to one of the films about issues facing people who are older. In the paper reflect on what issues of social significance the people in the film face. Please explain how you notice this and what you think it means to the character(s) in the film. Please direct attention to what you think would be helpful for this person. If they were to come into your office, how would you help them? What policies and practices would be supportive in their lives? Papers, although short in length, must be in accordance with graduate studies standards using APA formatting and referenced to the readings from class. You will not receive full credit unless this is done.

## **ACADEMIC POLICIES AND STANDARDS FOR PERFORMANCE**

All students receive copies of the MSW Program Student Handbook and the Loma Linda University Student Handbook upon admission to the University and program. Students are held responsible for becoming familiar with the policies contained in these documents. Specifically, students need to know and understand the academic policies that guide their classroom and practicum experiences. These include but are not limited to policies for assignment standards, late assignments, attendance, identification of codes for course assignments, and academic dishonesty. Students should address any questions they may have regarding these policies to the Department's Academic Standards Committee.

## **AMERICANS WITH DISABILITIES ACT (ADA) POLICY**

If you are an individual with a certifiable disability and need to make a request for reasonable accommodation to fully participate in this class, please visit the Dean's Office of your school. To view the Disability Accommodation Policy please go to: <http://www.llu.edu/llu/handbook/6e.htm>

## **ACADEMIC INTEGRITY POLICY**

[Sample; pending approval of a university-wide policy] Acts of dishonesty including theft, plagiarism, giving or obtaining information in examinations or other academic exercises, or knowingly giving false information are unacceptable. Substantiated violations are to be brought before the dean for disciplinary action. Such action may include, but is not limited to, academic probation or dismissal from the program. To view the Standards of Academic Conduct Policy please visit: <http://www.llu.edu/llu/handbook/6r.htm>

**Loma Linda University**  
**All Undergraduate & Graduate Programs**  
**Requirements for the Appropriate Use of PHI**  
**Addendum to Syllabus, Prospectus Guidelines or other Program Material**

**Applicability:** All Students (LLU Students in all schools/programs & Non-LLU Students)

**Purpose:** To provide guidance and establish clear expectations for students regarding the appropriate access to and use of protected health information (PHI) during course studies and related program activities.

**Scope:** PHI or Protected Health Information. Under the Health Insurance Portability and Accountability Act (HIPAA), patient health information is protected. Patient health information is considered protected if any of the identifiers listed under “List of Patient Identifiers” below is attached to health data.

### **Requirements & Expectations**

PHI may be accessed and used under the direction of the instructor for learning and education within the student’s formal field of study. In a course where PHI is needed to enhance and promote learning, students are allowed to access or use PHI in a manner consistent with expectations of the course and within the limits of information that would otherwise be accessed or used in the role of a licensed professional within the student’s formal field of study.

While in the possession of PHI belonging to LLU or its affiliates, students must assume legal responsibility and provide necessary security means to ensure data integrity and patient confidentiality. PHI stored on electronic portable devices e.g., laptops, PDA’s must be password protected and encrypted. PHI must be encrypted when transferred via the Internet.

If PHI is not required to meet course objectives, accessing PHI via any means (including but not limited to access to hardcopy patient charts, computers, downloading of data to electronic devices (portable or otherwise) via USB ports, flash drives, and transferring data to LLU or non-LLU email accounts e.g., Yahoo, AOL, or other means), is strictly prohibited.

Students must adhere to all outlined guidance for the proper access to and use of PHI. Non-adherence to the requirements or established expectations regarding the access to, use or disclosure of PHI is subject to disciplinary action.

#### 1. Access to PHI

Access to PHI must be within approved methods/channels (e.g., Health Information Management (HIM) Department) established by the hospital or entity holding the PHI. Students granted system access are only allowed access to PHI when necessary to fulfill required course objectives (e.g., rotations, patient care and treatment). Students must not use system access for any other purpose.

#### 2. Minimum Necessary

Minimum necessary applies to any access to PHI. Minimum necessary means that students must only obtain the information necessary to complete the required course objective. The required course objective will be defined class by class by instructors and listed in the class syllabus.

#### 3. De-Identification

Any PHI that is obtained to meet a required course objective must not leave the hospital or the entity holding the PHI. Only de-identified data can be removed from the facility. Students must obtain permission from the hospital or entity holding the data to access PHI for de-identification purposes. See the “List of Patient Identifiers” section below for the fields that must be removed in order to de-identify data. Copies of PHI can only

be made with written approval by the entity holding the data. The written approval must include acknowledgement by the authorizing individual of the specific purpose of use of copies. Copies of PHI must be de-identified prior to leaving the hospital or entity.

#### 4. Case Studies involving Patients

If a unique case is described that may identify an individual to the general public simply by describing the disease or the unique treatment received, authorization from the patient is required prior to disclosing the information as part of a published article, meeting abstract, or any other form of public presentation.

IRB-approved recruitment practices should be followed in order to contact a patient or patients to acquire their authorization for disclosure of information for a case report. For example, if the case is being researched or presented by someone other than the treating physician, then the initial contact should be made by, or at least in collaboration with, the clinical department that treated the patient and with whom the patient is familiar. For further guidance on recruitment practices, see section VIII of the LLU Researcher's Guide to HIPAA, which can be found at <http://research.llu.edu>.

#### 5. Research

Research protocol/studies must be reviewed/approved through the Institutional Review Board (IRB). Visit the Office of Sponsored Research (OSR's) website (<http://research.llu.edu>) for special requirements associated with conducting research.

#### 6. Other Publications

Students must not use PHI in any publication without a valid written authorization and approval from the following: Dean of School, Legal Counsel and Compliance.

#### 7. Photographs

Photographs must not be taken of patients or any proprietary information (e.g., equipment, facilities) without obtaining appropriate consents and/or authorizations. If photographs are required for coursework, students must obtain documentation from the instructor that photographs are needed and must follow entity specific policy for taking photographs. For patient photographs, written authorization to use or disclose the photograph must be obtained from the patient in addition to obtaining written consent to take the patient's photograph. All consent/authorization forms used must be approved forms currently in use by the hospital or facility in which the photograph is taken. Note: The term "photograph" means any motion picture or still photography in any format, as well as video/digital tape, disc, or any other mechanical or electronic means of recording and reproducing images, including cell phones.

#### 8. Disclosure

PHI accessed/learned/obtained from LLU or its affiliated entities must not be shared in any way with family members, friends, fellow students, other trainees or any other individual. Family/friends that come to visit may not visit in areas where PHI is easily accessible. Note: For patient care and training purposes, PHI can be shared with those that have a need to know in order to meet patient care and training objectives.

#### 9. Disposal and Destruction of PHI

Immediately upon completion of its intended use, PHI that will not be placed in the patient medical record must be shredded. Destruction of PHI on media such as, but not limited to, CD or diskette must be handled in accordance with entity specific policy to ensure proper destruction.

#### 10. Incident Reporting

Students must report incidents of potential privacy or security breaches immediately to their instructor or Program Director. Potential privacy or security breaches include but are not limited to events or incidents that may result in compromised patient data, loss/theft of patient chart(s) or electronic devices which store patient data, and possible harm to a patient due to use/disclosure of PHI in a manner contrary to stated guidance for the proper access to and use of PHI.

**List of Patient Identifiers to be Removed for De-Identification**

To de-identify data, the following fields for the patient and of the patient's family or employer must be removed:

<i>List of Patient Identifiers</i>	
Names	Health plan beneficiary numbers
Addresses (geographic subdivisions smaller than a state)	Account numbers
Zip codes	Certificate/License Numbers
All elements of dates (except year) (e.g. birth/death; admission/discharge)	Vehicle identifiers/Serial numbers (e.g., driver's license numbers)
All ages over 89 and all elements of dates (including year)	Device identifiers
Telephone Numbers	Web Universal Resource Locators (URLs)
Fax Numbers	Internet Protocol (IP) address numbers
Email addresses	Biometric identifiers, including voice and finger prints
Social security numbers	Full face photographic images and any comparable images
Medical record numbers	Any other unique identifying number, characteristic, or code (e.g., birthmarks, tattoos, identifying anomalies)

**SOWK 654B Therapeutic Interventions with Older Adults**  
**TENTATIVE COURSE SCHEDULE**

<b>Date</b>	<b>Topic</b>	<b>Reading</b>	<b>Due/projects</b>
3/29/06	Groups skills with Elderly populations	McInnis-Dittrich, Ch. 6 & 7	
4/5/06	Developing a Template: questions, exercises and handouts	McInnis-Dittrich Ch. 9;	
4/12/06	Poverty and vulnerability	McInnis-Dittrich Ch.11; Dressel	Templates due
4/19/06	Elders support systems	McInnis-Dittrich Ch. 12	groups
4/26/06	Movie: Umberto D		groups
5/3/06	Reflections about groups to date		Reflections about groups due
5/10/06	Alzheimer's & Memory and Reality	Gubruim; Scheibe; Noyes	groups
5/17/06	Reflections about groups Movie: Iris or The Notebook	McInnis-Dittrich Ch. 5	Reflections about groups due
5/24/06	Institutionalization & community options	Paterniti; Keay	Movie Reflection due
5/31/06	Suicide in Older People	Arbore	
6/7/06	Reflections of coursework and projects		

**Reading list**

- Arbore, P. (2002). Suicide in older people. In K. Doka, Ed., (2002). *Loss in later life*. Washington D.C: Hospice Foundation of America. Pp 253 – 271.
- Dressel, P. (1991). Gender, race and class: Beyond the feminization of poverty in later life. In, M. Minkler & C Estes (1991). *Critical perspectives on aging: The political and moral economy of growing old*. pp. 245 – 252.
- Gubruim, J (1989). The Domestic meaning of institutionalization. In, Eugene Thomas, (1989) *Adulthood and aging: The human science approach*. (pp. 89 - 106).
- McInnis – Dittrich, K., (2005). *Social work with elders: A biopsychosocial approach to assessment and intervention (2<sup>nd</sup> Edn.)*.
- Noyes, L. (2002). Loss and alzheimer's disease. In K. Doka, Ed., (2002). *Loss in later life*. Washington D.C: Hospice Foundation of America. Pp 60 – 70.
- Paterniti, D. (2002). Claiming Identity in a nursing home. In, J. Gubrium, & J. Holstein,. Eds. (2002). *Ways of aging*. Blackwell publishing. pp 58 -74 .
- Scheibe, K. (1989). Memory, identity, history and the understanding of dementia. In, Eugene Thomas, (1989) *Adulthood and aging: The human science approach*. (pp. 141 - 159).

WRITING RUBRIC

Student:

Class:

Evaluator:

Date:

Total Score

	Superior (4 points)	Strong (3 points)	Adequate (2 points)	Marginal (1 point)	
<b><i>Addresses topic clearly (including following instruction)</i></b>	Explores topic in a full & thoughtful manner	Addresses topic in a meaningful manner, but not fully	Addresses topic, but not completely, lacks analysis	Addresses topic inadequately; poor use of analytical thinking	
<b><i>Support of main idea</i></b>	Provides specific details & examples	Provides general details & examples	Provides some details & examples	Lacks adequate details & examples	
<b><i>Organization of ideas</i></b>	Unusually clear plan related to topic	Well organized & logical plan related to topic	Adequately organized in logical manner	Poorly organized. Shows little order or clear plan related to the topic.	
<b><i>Command of the language</i></b>	Displays superior, consistent control of syntax, and writing skills	Displays good control of syntax and writing skills	Displays adequate control of syntax, and writing skills	Inadequate use of syntax and poor writing skill	
<b><i>Mechanics</i></b>	Is free of errors in grammar, punctuation & spelling. Referenced appropriately	Contains a few errors in grammar, punctuation & spelling. Referenced inconsistently	Contains many errors in grammar, spelling, punctuation, & word choice. Poorly referenced.	Multiple errors, poorly constructed and/or not referenced.	

Group Facilitation RUBRIC

Student:

Class:

Evaluator:

Date:

Total Score

	Superior (4 points)	Strong (3 points)	Adequate (2 points)	Marginal (1 point)	
<b><i>Joining</i></b>	Consistently connects with group members and their life circumstance	Mostly connects with group members about life	Connects some, but misses opportunities for compassionate joining	Disregards or misses opportunities for joining	
<b><i>Empathy</i></b>	Demonstrates skill & compassion while tending to nuances of member's experiences	Recognizes member's experiences	Demonstrates awareness of member's experiences but without accurate communication	Does not hear or take note of member's experiences	
<b><i>Story Development</i></b>	Consistently explores nuances & meanings of multiple events and stories	Explore some nuances & meanings of events and stories	Develops some history without exploring many meanings around events and stories	Misses opportunities to explore stories and life review	
<b><i>Questions</i></b>	Consistently asks generative, creative questions	Asks some generative & creative questions	Minimal generative, creative questions	Misses opportunities for generative & creative questions	