

LOMA LINDA UNIVERSITY
DEPARTMENT OF SOCIAL WORK and SOCIAL ECOLOGY
SOWK 787B Advanced Professional Practicum and Seminar: Child Welfare
Winter Quarter 2006-2007

Section:	Instructor:	Contact Info:	Lecture:	Room:
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TEXTBOOK

DePanfilis, D., & Salus, M. (2003). *Child protective services: A guide for caseworkers*. Washington, D.C.: National Clearinghouse on Child Abuse and Neglect.

Students should have this textbook from 787A

Manning, G., Curtis, K., & McMillen, S. (1996). *Building community: The human side of work*. Cincinnati, OH: Thompson Executive Press.

Loma Linda University Graduate School (2005-2006). *Loma Linda University Department of Social Work Field Manual*. Loma Linda, CA: Author.

SUPPLEMENTAL READINGS FROM THE FOLLOWING BOOKS

Boone, L.E., Kurtz, D.L., & Hearsh, D. (2000). *Planning your financial future*. Orlando, FL: The Dryden Press.

Fukuyama, M.A., & Sevig, T.D. (1999). *Integrating spirituality into multicultural counseling*. Thousand Oaks, CA: Sage Pub.

Giardino, A., & Giardino, F. (2002). *Recognition of Child Abuse for the Mandated Reporter* (3rd ed). St Louis, MO: CW Medical Publishing.

Manning, G., Curtis, K., & McMillen, S. (1996). *Building community: The human side of work*. Cincinnati, OH: Thompson Executive Press.

Sattler, J. (1998). *Clinical and forensic interviewing of children and families*. San Diego, CA: Jerome M. Sattler, Publisher, Inc.

Stamm, B.H. (Ed.). (1999). *Secondary traumatic stress: Self-care issues for clinicians, researchers, and educators*. Lutherville, MD: Sidran Press.

Edwards, L.P. (Consultant). (2004). *California juvenile laws and rules*. Belmont, CA: Thomson/West.

COURSE CONTEXT AND DESCRIPTION

Advanced Clinical Practicum and Seminar (SOWK 687 A-C) build on the practice experiences and foundation courses of the first year while providing a forum for integrating the advanced practice experiences and course work of students' selected concentration. Both the advanced practicum and seminar move students to consider competency for advanced practice as affected by interdisciplinary and peer collegial interactions, as well as formation of mechanisms assuring sustained professional commitment.

COURSE GOAL

To provide a forum for integrating the advanced practice experiences and course work of students in the clinical/policy concentration.

COURSE OBJECTIVES

- To formalize students' proficiency in the communication of conceptual linkages between theories, analytical models, and assumptions that shape their understanding of assessment and intervention;
- To prepare students for advanced clinical practice with individuals, families, households, and groups by operationalizing into students' practice an understanding of the rationales and assumptions underpinning various treatment modalities, techniques and strategies used in a variety of health and mental health settings for working with different populations and presenting problems;
- To solidify students' understanding of the multi-dimensional dynamics of physical and mental illness as these have impact on individuals, groups, household, families, and communities, and the consequent continuum of professions;
- To formalize students' comprehensive understanding of the assessment process and diagnostic schemata involving intrapersonal and interpersonal factors, cultural diversity, and environmental influences on client systems;
- To solidify students' understanding of the principle determinants of individual and collective behavior, taking into consideration the values, history, and culture of varied racial, ethnic, and socio-economic groups;
- To operationalize for students an understanding of the significance of self-awareness on professional conduct and treatment objectives;
- To solidify students' abilities in seeking out and locating resources to complement their established knowledge base with the goal of benefitting the client system;
- To solidify students' understanding of the multiple conceptual frameworks for examining the dynamics of planned and unplanned change that occur within the differential contexts of social work practice, with emphasis on developing students' capacity to articulate these metamorphic events into researchable queries and practice interventions;
- To formalize students' application of research principles as applied to the analysis, planning, and evaluation of clinical practice in health and mental health; and
- To provide students with clinical practice opportunities, thus instilling competence in using integrative strategies to deal with the range of issues and services needed in the client system.
- Prepare students for advanced social work practice with organizations and communities in a broad range of health and mental health care settings;
- Prepare students for interdisciplinary practice with a variety of providers, administrators, policy makers, and educators to facilitate humane and equitable health and mental health care services;
- Solidify students' capacity to identify the presence of race/gender issues within and among organizations in all areas of professional practice, but specifically as these affect the operation and delivery of health and mental health systems and services;
- Formalize students' understanding and appreciation of the concepts that undergird major models of planned change with application of these paradigms to health care and mental health organizations, systems, and services;

- Solidify students' understanding of the multi-dimensional aspects of health and mental health care systems, including current controversial issues, such as cost containment, access, resource allocation, and proposed reform;
- Solidify students' understanding of the impact of health and mental health policy on subgroups, such as minorities, women, the elderly, and populations affected by specific illnesses (e.g., AIDS, chronic mental illness), and the impact these subgroups have on the development of policy;
- Operationalize students' understanding and application of research methodologies, techniques, and statistics (including use of related sociometric statistics as indicators of patterns of health care utilization and the health status of various population) for examining and proposing improvements in health and mental health care services, institutional practices and policies, and evaluation of professional practice;
- Solidify students' understanding of the multiple conceptual frameworks for examining the dynamics of planned and unplanned change that occur within the differential contexts of social work practice, with emphasis on developing students' capacity to articulate these metamorphic events into researchable queries and practice interventions;
- Formalize students' understanding and capacity for participating in and influencing the health and mental health care policy-making process as an aspect of planned change;
- Solidify for students' the knowledge and skills required in the design, planning, implementation, monitoring, and evaluation of programs;
- Deepen students' understanding of both the conceptual and analytical requirements of policy analysis through the integration of behavioral, political, economic, and sociometric frameworks for understanding human conditions; structuring and defining policy problems; establishing criteria for policy choices, mapping alternative strategies, and applying appropriate analytical and research methods to policy questions;
- Solidify students' understanding through advanced practicum opportunities of the complexities of large organizations and bureaucratic systems, including an appreciation for the nature of formal and informal structures, communication patterns and differing philosophical approaches as these affect the effectiveness and efficiency of services delivery, worker motivation, resource procurement and allocation; and
- Formalize students' application of knowledge through advanced practicum opportunities; the values, and skills to assist them in building administrative practices with which to develop, support, and maintain effective service delivery in health and mental health agencies and institutions, including role identification and development, situational leadership, strategic planning, levels and types of decision making, management of organizational behavior, use of information systems, budgeting, documentation and reporting, resource development and utilization, and networking.

LEARNING OUTCOMES

The following outcomes reflect the learning expectations of students through the combined experience of practicum and seminar.

Clinical Concentration Learning Objectives

- I. Understands, Respects, and Integrates the Ethics and Values of the Social Work Profession Competencies: The minimum learning expectation for all students
 - a. Demonstrates respect for right of self determination.

- b. Maintains appropriate guidelines for confidentiality.
- c. Maintains appropriate boundaries, distinguishing professional relationships from personal relationships.
- d. Demonstrates the capacity to respect diverse issues of gender, race, religion, class, disability, and age.
- e. Identifies ethical dilemmas as these arise and takes to supervision for discussion.
- f. Demonstrates use of professional judgment and conduct consonant with the values, ethics, legal, and multidimensional responsibilities of clinical practice.

II. Demonstrates Motivation in the Role of Learner

Competencies: The minimum learning expectation for all students

- a. Takes initiative to identify own learning needs.
- b. Demonstrates an ability to integrate new knowledge.
- c. Actively participates by asking questions and volunteering information while in supervision or other training experiences.
- d. Demonstrates ability to learn from a variety of sources (peers, other agency staff, field instructor, preceptors, consultants, assigned reading.)
- e. Demonstrates the integration of complex theories and research findings in developing his/her practice proficiency.
- f. Evidences interest and takes advantage of opportunities for expanding his/her knowledge and skills for working with population groups and problem area
- g. Demonstrates the capacity to evaluate his/her own practice in specific and meaningful ways.
- h. Accepts and utilizes constructive criticism.
- i. Acknowledges areas of strength.
- j. Acknowledges areas of needed growth and development.
- k. Demonstrates ability to identify own values and the potential impact on treatment objectives.
- l. Prepares for supervisory conferences.
- m. Participates in educational planning and evaluation of his/her performance.
- n. Demonstrates ability to assess need for direction from field instructor and is able to operate independently when appropriate.

III. Demonstrates Knowledge of the Agency's Mission, Goals, Organizational Structure and Community which is Served

Competencies: The minimum learning expectation for all students

- a. Demonstrates working knowledge of the practicum agency's mission, goals, policies, and procedures.
- b. Identifies and understands the intra-agency organizational relationships and activities.
- c. Demonstrates knowledge, respect, and ability to work cooperatively with support staff in the practicum setting.
- d. Collaborates appropriately with other professionals or as a member of a multi-disciplinary team to ensure integrated and comprehensive services to clients.
- e. Demonstrates competence in accessing and utilizing community resources that are appropriate for the population being served.
- f. Identifies social policies, laws, practices, etc. that impact the client system or delivery of service.

IV. Demonstrates Responsible Work Management Skills

Competencies: The minimum learning expectation for all students

- a. Keeps accurate and up-to-date case records following agency policy.
 - b. Completes and submits comprehensive process recordings (written, audio or video, minimum of one per week.)
 - c. Writes in a well organized, comprehensive, and concise manner, using appropriate grammar, spelling, and professional vocabulary.
 - d. Manages workload and prioritizes work assignments.
 - e. Complies with agreed upon field practicum hours, including responsibilities to client and agency site.
 - f. Writes legibly and thoroughly in all types of documentation.
- V. Demonstrates Skill in Developing an Appropriate Case/treatment Plan Based on the Biopsychosocial Assessment and Diagnosis (When Applicable.)

Competencies: The minimum learning expectation for all students

- a. Demonstrates competence in completing a biopsychosocial history.
 - b. Demonstrates basic knowledge of systems theory in work with clients.
 - c. Demonstrates the critical thinking necessary to identify diagnostic criteria.
 - d. Demonstrates awareness of self and responds objectively and purposefully rather than out of own needs and personal reactions.
 - e. Demonstrates an ability to integrate and apply multiple theoretical frameworks in assessing client's presenting problem, assessment, and intervention.
 - f. Student demonstrates a solid understanding of the multidimensional dynamics of physical and mental illness as these impact client systems (i.e., individuals, groups, households, families, and communities.)
 - g. Demonstrates capacity to elicit information, including facts, feelings, and goals from client and significant others.
 - h. Demonstrates ability to identify and clarify the presenting problem(s) and underlying dynamics and issues.
 - i. Demonstrates ability to assess client and/or family member at risk for suicide, homicide, child abuse, elder abuse, spousal abuse, substance abuse, etc.
 - j. Demonstrates ability to identify the client's internal strengths and support systems.
 - k. Demonstrates competence in formulating case/treatment plan based on the biopsychosocial assessment.
- VI. Demonstrates awareness of self and the impact on the helping process.

Competencies: The minimum learning expectation for all students

- a. Shows ability to differentiate one's own feelings, values, attitudes, and behavior from those of the client.
 - b. Demonstrates awareness of self and responds objectively and purposefully rather than out of own needs and personal reactions.
 - c. Constructively deals with conflict and stress within the therapeutic process and agency context.
- VII. Student demonstrates skill in managing and maintaining the intervention process.

Competencies: The minimum learning expectation for all students

- a. Demonstrates knowledge of a range of practice intervention reflecting the continuum of social work practice: information and referral, advocacy, case management, crisis intervention, short term intervention, and long term intervention.
- b. Formulates a specific intervention plan with the client on an ongoing basis that includes appropriate short term and/or long term goals.

- c. Demonstrates advanced clinical knowledge and skills through the differential selection and application of treatment modalities, techniques, and strategies appropriate to identified populations and presenting problems.
- d. Effectively deals with client resistance.
- e. Demonstrates knowledge and skill in clinical practice with individuals.
- f. Demonstrates knowledge and skill in clinical practice with families.
- g. Demonstrates knowledge and skill in clinical practice with groups.
- h. Plans and implements appropriate termination process with clients.
- i. Understands and uses verbal and non-verbal cues including: body positioning, eye contact, speech patterns, tone and volume of voice.
- j. Demonstrates an ability to use the following:
 - i. open and closed questioning, encouraging, paraphrasing, reflecting, and summarizing.
 - ii. reframing, partializing, prioritization, and focusing.
 - iii. clarification, interpretation, and use of silence.

VIII. Demonstrates basic understanding of the agencies service role within its community context.

Competencies: The minimum learning expectations for all students.

- a. Demonstrates an understanding of the complexities of larger organizations and bureaucratic systems.
- b. Demonstrates knowledge of the nature of formal and informal structures as they affect communication patterns, delegation of assignments, and services to clients.
- c. Student is able to identify the strengths and weaknesses of the field practicum agency as an organization.
- d. Student is able to assess the strengths and weaknesses of the agency's approach to cultural diversity.

XI. Demonstrates knowledge of planning, program development, and evaluation.

Competencies: The minimum learning expectations for all students.

- a. Student has an understanding of the tasks necessary to effectively organize service providers/community representatives toward development of a collaborative system of care.
- b. Identifies and selects appropriate program planning models relevant to organizational, community and client needs.
- c. Demonstrates an understanding of how program development and implementation occurs relevant to the agencies organizational context.
- d. Understands how to use information and technology to evaluate practice and program effectiveness.
- e. Understands the purpose and use of evaluation to achieve accountability at every level of care.
- f. Understands the administrator's responsibility to participate in planning and development of effective systems of care.

XII. Demonstrates an understanding of the impact of relevant policy on the delivery of services to populations at risk, such as minorities, women, the elderly, and populations affected by specific illness (e.g., AIDS, chronic mental illness).

Competencies: The minimum learning expectations for all students.

- a. Student demonstrates an understanding of the requirements of policy analysis:
 - i. ability to define policy problems
 - ii. ability to establish criteria for policy choices

- iii. ability to map alternative strategies
- iv. ability to select appropriate strategies for sustaining planned change.
- a. Student demonstrates an understanding of specific laws, policies, court decisions, and regulations, relevant to agency service delivery.

XIII. Demonstrates an understanding of a variety of administrative issues affecting organizations

Competencies: The minimum learning expectations for all students.

- a. Demonstrates an understanding of the roles and responsibilities of an administrator.
- b. Understands how a leader facilitates effective teamwork for the purpose of planning, formulating policy, and implementing service.
- c. Understands how administrators create opportunities for collaboration with other work units, related agencies, regulatory bodies, courts, and law enforcement.
- d. Demonstrates knowledge of different funding streams for social service agencies and client populations.
- e. Identifies how the administrator facilitates worker productivity and morale.

COGNITIVE AND AFFECTIVE LEARNING EXPERIENCES

The primary method for seminar will be interactive as opposed to didactic teaching. All students are required to actively participate in the teaching/learning process with the seminar instructor. Students are expected to take the initiative in presenting cases for class discussion and in giving feedback to other students.

COURSE ASSIGNMENTS

Required Readings: Course readings designated as required provide the major content for lectures discussions and skill building labs. *Required readings are located in either the course textbooks or the course supplement.*

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 effect 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.

Test Taking Policy: It is the policy of the department that all students are expected to take examinations at the scheduled time. The only acceptable excuse/s for not taking an examination on time is major illness (documented by the student health service or student's physician) or serious personal emergency. The consequences of missing an examination under these circumstances are determined by the Academic Standards Committee. If a student arrives late for an examination, s/he may be denied admission to the examination site. If a student arrives late for an

examination and is allowed to take the examination, s/he will not be given extra time but is required to finish the examination at the pre-scheduled completion time.

Process Recordings: One process recording is due to the field instructor each week.

Participant- Observer critiques: One Participant-speaker due to field motivation each week.

Professional Development Portfolio: The *Professional Development Portfolio* is incorporated into the field seminars beginning with the first quarter of the foundation practicum and concluding with the final quarter of the advanced practicum. This design engages students in continuous intentional reflection regarding their individualized professional growth. Field Seminar assignments are designed to progressively assist students in this process. During the advanced practicum these assignments include their:

1. Special projects and presentations completed at their practicum;
2. Professional resume;
3. Theoretical perspective paper; (fall):
4. Wholeness statement;(spring):
5. Employment plans and continuing professional development goals.
6. Workshops or colloquiums attended.

During the final quarter of the advanced practicum students present their completed portfolio, placing emphasis on significant milestones that represent their professional growth. Students conclude this presentation by summarizing their commitment to personal and professional wholeness and a career of contributions to the social work profession. In this way, the *Professional Development Portfolio* is seen as a capstone academic experience; facilitating review, reflection, and transition in the development of a self-motivated learner and master practitioner.

Group Presentation: Students will be given a vignette to critically examine and assess social work practice from a joint clinical (clinical concentration students) and CPS (Title IV-E) students perspectives. In order to maximize the learning experience, students will be working in a group format covering the following content areas:

Biopsychospiritual assessment; Developmental Issues: emotional; physical; psychological; Human diversity; Cultural considerations; Legal issues; Ethical issues; Interpersonal support; Style & use of self; Theoretical orientation; Case Management Strategies/Interventions Strategies; DSM-IV TR diagnosis; Goal setting/case planning;

Field Manual: Students are expected to fulfill the requirements set forth in the field manual.

GRADING

The grade for the practicum/seminar class is based on 1) attendance and active class participation, 2) completion of class assignments, and 3) the field evaluation. Class participation and completion of assignments are worth 50% of the grade; and, the field evaluation is worth 50% of the grade. Although the field instructor will complete the educational assessment at the end of the quarter, it will be the seminar professor who gives a final grade on the evaluation based on field performance.

Grading for the class is based on the Satisfactory (S) and Unsatisfactory (U) grading system. A satisfactory grade is equivalent to a 'B' on a 4.0 scale.

Attendance/Participation	15%
Portfolio	10%
Group Presentation	25%
Field Evaluation	<u>50%</u>
TOTAL	100%

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.

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 polices 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.

Anonymity and confidentiality of clients is to be maintained at all times in both class discussion and written communication.

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 787B Advanced Professional Practicum and Seminar: Child Welfare
COURSE SCHEDULE**

WEEK ONE-January 4, 2007

LECTURE TOPICS:

- I. Agency Experience Discussion
- II. Introduction to laws relating to CWS services
- III. Preparing for February 8th Group Presentations

READINGS/ASSIGNMENTS (REQUIRED):

Edwards, L.P. (Consultant). (2004). Article 6: Dependent children-Jurisdiction. *California juvenile laws and rules*. (35-39). Belmont, CA: Thomson/West.

WEEK TWO-January 11, 2007

LECTURE TOPICS:

- I. Agency Experience Discussion Assessment
- II. Physical Abuse
- III. Preparing for February 8th Group Presentations

READINGS/ASSIGNMENTS (REQUIRED):

Sattler, J. (1998). New York State Risk Assessment and Services Planning Model. In *Clinical and forensic interviewing of children and families* (897-912). San Diego, CA: Jerome M. Sattler, Publisher, Inc.

HANDOUT:

Giardino, A., & Giardino, F. (2002). Physical abuse. In *Recognition of Child Abuse for the Mandated Reporter*. St Louis, MO: CW Medical Publishing.

WEEK THREE-January 18, 2007

LECTURE TOPICS:

- I. Agency Experience Discussion
- II. Sexual abuse assessment in working with children

III. Preparing for February 8th Group Presentations

READINGS/ASSIGNMENTS (REQUIRED):

Giardino, A., & Giardino, F. (2002). Sexual Abuse. In *Recognition of Child Abuse for the Mandated Reporter* (pp. 23-37). St Louis, MO: CW Medical Publishing.

WEEK FOUR-January 25, 2007

LECTURE TOPICS:

- I. Agency Experience Discussion
- II. Skill Building Lab: Relative care giving-implications for treatment
- III. Guest Speaker

READINGS/ASSIGNMENTS (REQUIRED):

O'Brien, P. Rippey, C. Gleeson, J. (2001). Upping the anti: Relative caregivers perceptions of changes in child welfare policies. *Child Welfare*, 80 (6), pp. 719-749.

Available online through: <http://webbline.illu.edu> - (Academic Search Elite, EBSCO)

Roe, K., & Minkler, M. (1989). Grandparents raising grandchildren: challenges and responses. *Generations*, 22 (4), pp. 25-33.

Available online through: <http://webbline.illu.edu> - (Academic Search Elite, EBSCO)

Surman, M. (2002). Unexpected parents: Grandparents and other relatives raising children seek help from Inland agencies that are offering support services. *The Enterprise-Press*. December, 1, pp. B01.

WEEK FIVE- February 1, 2007

LECTURE TOPICS:

- I. Agency Experience Discussion
- II. Case planning
- III. Coordination of reasonable service
- IV. Preparing for February 8th Group Presentations

READINGS/ASSIGNMENTS (REQUIRED):

DePanfilis, D., & Salus, M. (2003). *Child protective services: A guide for caseworkers*. Washington, D.C.: National Clearinghouse on Child Abuse and Neglect.

Chapter 8 Case planning, pp. 77-82.

Chapter 9 Service provision, pp. 83-94.

WEEK SIX-February 8, 2007

LECTURE TOPICS:

- I. Group Presentation-Clinical Non IV-E
- II. Feedback and discussion of Presentation

READINGS/ASSIGNMENTS (REQUIRED):

Kilpatrick, A. (1999). Levels of family need. In *Working with families: An integrative model by level of need* (pp. 3-15). Needham Heights, MA: Allyn & Bacon.

WEEK SEVEN-February 15, 2007

LECTURE TOPICS:

- I. Case Review Group Presentation-Clinical IV-E
- II. Feedback and discussion

WEEK EIGHT-February 22, 2007

LECTURE TOPICS:

- I. Aging Experience Discussion
- II. Policy presentation
 - a. Critique of MOU/Collaboration Protocol for addressing child maltreatment. How is it working? How could it be improved?
- III. Feedback and discussion on policy presentation
- IV. Enhancing service delivery through community collaborative

READINGS/ASSIGNMENTS (*REQUIRED*):

Mulroy, E. A. (1997). Building a neighborhood network: Interorganizational collaboration to prevent child abuse and neglect. *Social Work, 42* (3), 255-264.

Available online through: <http://webbline.illu.edu> - (Academic Search Elite, EBSCO)

Weil, M. (1996). Community building: Building community practice. *Social Work, 41* (5), 481-499.

Available online through: <http://webbline.illu.edu> - (Academic Search Elite, EBSCO)

WEEK NINE- March 1, 2007

LECTURE TOPICS:

- I. Combined Class
- II. Video Viewing- Dr. Paladugu Psychotropic Drugs- Children and Adults

READINGS/ASSIGNMENTS (REQUIRED):

Raghavan, R., Zima, B., Andersen, R., Leibowitz, A., Schuster, M. & Landsverk, J. (2005). Psychotropic medication use in the national probability sample of children in the child welfare system. In *Journal of child and adolescent psychopharmacology*, 1 (15), 97-106.
Available online through: <http://webblinellu.edu> - (Academic Search Elite, EBSCO)

WEEK TEN-March 8, 2007

LECTURE TOPICS:

- I. Agency Experience Discussion
- II. Skill-Building Lab
 - A. Termination with clients
 - B. Role play: Managing termination

READINGS/ASSIGNMENTS (REQUIRED):

DePanfilis, D., & Salus, M. (2003). *Child protective services: A guide for caseworkers*. Washington, D.C.: National Clearinghouse on Child Abuse and Neglect.
Chapter 10 Family progress, pp. 95-98.
Chapter 11 Case closure, pp. 99-100.

Anthony, S. (1998). The therapeutic potential during the termination process. *Clinical Social Work Journal*, 26 (3), 281-297.
Available online through Del Webb Library catalog (Access electronic version via KluwerOnline)

WEEK ELEVEN-March 15, 2007

LECTURE TOPICS:

- I. Agency Experience Discussion
- II. Skill-Building Lab: Critique of sample resumes
- III. Review Curriculum competencies for Public Child Welfare in California
- IV. Professional development portfolios review
- V. Course evaluations

SOWK 787 B Field Seminar/Practicum: Title IV E
REFERENCE LIST AND SUGGESTED READINGS

- Adams, C. (1992). *Helping your child recover from sexual abuse*. Seattle: Univ. Of Washington Press.
- Bibliographic Instruction Section A. of C. and R. L. (1993). *Learning to teach: Workshops on instruction*.
- Booth Page, P. (1991). *Children of alcoholics: A sourcebook*. New York: Garland.
- Breemhaar, B., & Van-den-Borne, H. W. (1991). Effects of education and support for surgical patients: The role of perceived control. *Patient Education and Counseling*, 18 (3), 199-210.
- Brownstein, C. (1988). Practicum issues: A placement planning model. Special Issues: Empirical studies in field instruction. *Clinical Supervisor*, 6 (3-4), 93-104.
- Carrieri, J. (1991). *Child custody, foster care, and adoptions*. New York: Lexington.
- Combs-Orme, T. (Ed.). (1990). *Social work practice in maternal and child health*. New York: Springer.
- Corey, G., Schneider-Corey, M. & Callanan, P. (1988). *Issues and ethics in the helping professions*. (3rd). Pacific Grove, CA: Brooks/Cole.
- Corliss, L., & Corliss, R. (1998). *Human service agencies: An orientation to fieldwork*. Pacific Grove, CA: Brooks/Cole.
- Cournoyer, B. (2000). *The social work skills workbook*. Pacific Grove, CA: Brooks/Cole.
- Dhooper, S., Rompf, E., & Royse, D. (1999). *Field instruction: A guide for social work students*. New York: Longman.
- Durkin, R. (1990). Competency, relevance, and empowerment: A case for the restructuring of children's programs. *Child and Youth Services*, 13 (1), 105-117.
- DeMayo, R. A. (1997). How to present at case conference. *Clinical Supervisor*, 16 (1), 181-189.
- Edelwich, J., & Brodsky, A. (1991). *Sexual dilemmas for the helping professional* (Rev. and expanded.). New York: Brunner/Mazel.
- Forester-Miler, H., & Duncan, J. A. (1990). The ethics of dual relationships in the training of group counselors. Special Issue: Ethical and legal issues in group work. *Journal for Specialists in Group Work*, 15 (2), 88-93.
- Friedman, R M. (1993). Preparation of students to work with children and families: Is it meeting the need? Special Issue: Children's mental health administration. *Administration and Policy in Mental Health*, 20 (4), 297-310.
- Gadsby, J. (1992). *The supervision of child protection work*. Brookfield, VT: Avebury.
- Gil, E. (1991). *The healing power of play: Working with abused children*. New York: Guilford Press.
- Glassman, U., & Kates, L. (1988). Strategies for group work field instruction. *Social Work With Groups*, 11 (1-2), 111-124.
- Goldstein, J. (1979). *Beyond the best interests of the child*. New York: Free Press.
- Gumaer, J., & Martin, D. (1990). GROUP ETHICS: A multimodal model for training knowledge and skill competencies. Special Issue: Ethical and legal issues in group work. *Journal for Specialists in Group Work*, 15 (2), 94-103.
- Harchik, A. E., Sherman, J. A., Sheldon, J. B., & Strouse, M. C. (1992). On going consultation as a method of improving performance of staff members in a group home. *Journal of Applied Behavior Analysis*, 25 (3), 599-610.
- Harrison, M., & Gilbert, S. (Eds.). (1992). *The Americans with Disabilities Act handbook*. CA: Excellent Books.
- Hersen, M., & V. H., V. (Ed.). (1990). *Psychological aspects of developmental and physical disabilities: A casebook*. Thousand Oaks, CA: Sage.
- Jones, L. (1993). Decision making in child welfare: A critical review of the literature. *Child and Adolescent Social Work Journal*, 10 (3), 241-262.
- Kaplan, T. (1988). Group field instruction: Rationale an practical application. *Social Work With Groups*, 11 (1-2), 125-143.

- Kennedy, E., & Charles, S. C. (1990). *On becoming a counselor: A basic guide for nonprofessional counselors* (New expanded.). New York: Continuum.
- Kleinman, S. (1993). *Emotions and field work*. Thousand Oaks, CA: Sage.
- Ludwig, S., & Kornberg, A. E. (Eds.). (1992). *Child abuse: A medical reference* (2nd.). New York: Churchill Livingstone.
- Lum, D. (1999). *Culturally competent practice*. Pacific Grove, CA: Brooks/Cole.
- Martin, B. T., & F. C. (Ed.). (1991). *International handbook on old-age insurance*. New York: Greenwood Press.
- Mitchell, R. (1993). *Secrecy and field work*. Thousand Oaks, CA: Sage.
- Patterson, L., & Welfel, E. (2000). *The counseling process*. Pacific Grove, CA: Brooks/Cole.
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- Ramsay, R. F., Cooke, M. A., & Lang, W. A. (1990). Alberta's Suicide Prevention Training Programs: A retrospective comparison with Rothman's developmental research model. *Suicide and Life Threatening Behavior*, 20 (4), 335-351.
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- Sandler, B., & Paludi, M. (Eds.) (1993). *Educator's guide to controlling sexual harassment*. Washington DC: Thompson.
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- Shulman, L. (1993). *Teaching the helping skills*. Alexandria, VA: Council on Social Work Education.
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- Singer, M. I., Singer, L. T., & Anglin, T. M. (Eds.). (1993). *Handbook for screening adolescents at psychosocial risk*. New York: Lexington.
- Solnit, A., Nordhausm B., & Lord, R. (1992). *When home is not haven: Child placement issues*. New Haven: Yale University Press.
- Thomas, P. McC. (1990). *The AIDS benefits handbook: Everything you need to know to get social security, welfare, medicaid, medicare, food stamps, housing, drugs, and other benefits*. New Haven, CT: Yale University Press.
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