

**LOMA LINDA UNIVERSITY**  
**DEPARTMENT OF SOCIAL WORK AND SOCIAL ECOLOGY**  
**SOWK 787A Advanced Professional Practicum & Seminar: Child Welfare**  
**Fall Quarter 2006-2007**

<b>Section:</b>	<b>Instructor:</b>	<b>Contact Info:</b>	<b>Lecture:</b>	<b>Room:</b>
1	Viola Lindsey, MSW	(909) 558-8547 vlindsey@llu.edu	Thursdays, 1:10-3:00 p.m. Thursdays, 6:00-8:00 p.m.	Griggs Hall, 105

**TEXTBOOK**

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

Goldman, J., Wocott, D., & Kennedy, K. (2003). *A Coordinated Response to Child Abuse and Neglect: The foundation for practice*. Washington DC: National Clearinghouse on Child Abuse and Neglect.

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

**SUPPLEMENTAL READINGS FROM THE FOLLOWING BOOKS**

Banner, D.K., & Gagne, T. E. (1995). *Designing effective organizations*. Thousand Oaks, CA: Sage.

Barskey, A. E. (2000). *Conflict resolution for the helping professions*. Stamford, CT: Brooks/Cole.

Brittain, C., & Hunt, D. E. (2004). *Helping in Child Protective Services*. New York: Oxford University Press.

Hepworth, D., Rooney, R. H., & Larsen, J. (1996). *Direct Social Work Practice: Theory and Skills* (5<sup>th</sup> ed.). Pacific Grove, CA: Brooks/Cole.

Kramer, R. M., & Neale, M. A. (Eds.) (1998). *Power and influence in organizations*. Thousand Oaks, CA: Sage.

**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 benefiting 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 effect the operation and delivery of health and mental health systems and services;
- Formalize students' understanding and appreciation of the concepts that underline 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 mentally ill), and the impact these subgroups have on the development of policy;
- Operationalize students' understanding and application of research methodologies, techniques, and statistics for examining and proposing improvements in health and mental health care services, institutional practices and policies, and evaluation of professional practice;
- 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 system, budgeting, documentation and reporting, resource development and utilization, and networking.

## LEARNING OBJECTIVES

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, sexual orientation 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 practice.
  - g. Demonstrates understanding of mandated reporting laws and responsibilities.
  
- 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

- g. 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 service delivery.
- 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.
- o. Demonstrates familiarity with and how to access information (i.e. ICWA, ICPC, MEPA) and /or policies unique to CPS.

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.
- g. Understands the principles of concurrent and permanency planning.
- h. Understands the process of the legal system and the role of social workers and other professional in relation to the juvenile justice court.

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.
- g. Demonstrates the ability to prepare written reports for court in a timely manner.
- h. Aware of risk management issues and able to appropriately resolve potentially harmful situations.
- i. Complies with contact requirement as mandated by program status.

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.
- j. Demonstrates competence in formulating case/treatment plan based on the biopsychosocial assessment.
- k. Demonstrates competence in completing comprehensive risk and safety assessment and having working knowledge of WIC300.
- l. Demonstrates the ability to identify the client's internal strengths and support systems as well as engage the client to do so.

VI. 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 the 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.

VII. 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.

VIII. 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

- e. effectiveness.
  - f. Understands the purpose and use of evaluation to achieve accountability at every level of care.
  - g. Understands the administrator's responsibility to participate in planning and development of effective systems of care.
- IX. Student demonstrates skill in managing and maintaining the intervention process.  
Competencies: The minimum learning expectation for all students
- a. Understands the dual responsibility of the child welfare caseworker to protect children and provide services that support families as caregivers.
  - b. Recognizes signs and symptoms of substance abuse in children and adults while incorporating knowledge of individual, family, and cultural dynamics, and is able to assess its impact.
  - c. 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 and on-going case reassessment.
  - d. Demonstrates knowledge of pre-placement preventative services, placement services, reasonable services, and concurrent planning.
  - e. Formulates a specific intervention plan with the client on an ongoing basis that includes appropriate short term and/or long term goals.
  - f. 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.
  - g. Effectively deals with client resistance by engaging client and understanding the dynamic processes involved in removal of child from their home.
  - 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. Refraining, partializing, prioritizing, and focusing.
    - iii. Clarification, interpretation, and use of silence.
- X. 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. establishing criteria for policy choices
    - iii. mapping alternative strategies
    - iv. selecting appropriate strategies for sustaining planned change.
  - b. Student demonstrates an understanding of specific laws, policies, court decisions, and regulations, relevant to agency service delivery.

## **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 discussions. *Required readings are located in either the course text books 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.

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.

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

*Participant-Observer Critiques/Process Recordings:* One participant-observer critique is due to the field instructor 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. The student will compile his/her learning plan, quarterly education assessments and self-evaluation from the practicum, and significant work prepared for seminar class. Examples of additional documents include:

1. Special projects and presentations completed at their practicum;
2. Professional resume;
3. Theoretical perspective paper (fall);
4. Professional contributions paper (spring);
5. Employment plans and continuing professional development goals; and
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 culminating academic experience; facilitating review, reflection, and transition in the development of a self-motivated learner and master practitioner.

*Professional Use of Self: "Paper"* Three page paper, double spaced, on the use of "self" in advanced clinical practice/child welfare services. The purpose of this paper is to develop an understanding of the concept of the use of self in advanced clinical practice.

- A. Identify personal characteristics and/or attributes that affect the therapeutic/administrative relationship. Refer to both overt characteristics (e.g. physical appearance) and covert attributes (e.g., attitudes, behaviors).
- B. Discuss how training and academic knowledge affects responses to colleagues and clients. For example, discuss appropriate responses to dealing with difficult situations of people, or an angry, resistive adolescent.
- C. Present ideas supporting the use of self in the agency environment/therapeutic relationship. Specifically, how does this concept contribute in a positive manner to client self-validation and/or empowerment?

**Case Presentation:** The presentation should be approximately seven minutes in length.

*Clinical:* It is to cover background information on the client/family, presenting problem, pertinent clinical issues including psychosocial stressors, treatment plan and rationale, and summary.

*Administrative:* It is to cover background information on an administrative issues or problem addressed as part of the field practicum experience. The presentation should include background information, pertinent administrative and/or policy issues, conditions internal or external to the organization that have impact of the decision-making process, proposed strategies for addressing the issue, and the selected plan of action and rationale for choosing this solution.

**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 participation, 2) completion of class assignments, and 3) the field evaluation. Class participation and completion of assignments are worth 50% of the grade; 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.

*Seminar class:*

Attendance/Participation	15%
Portfolio	10%
Paper	15%
Case presentation	10%
Field Evaluation	<u>50%</u>
<b>TOTAL</b>	<b>100%</b>

Letter Grade*	Assigned value for calculation of grade point averages.
A	4.0
A-	3.7
B+	3.3
B	3.0
B-	2.7
C+	2.3
C	2.0
C-	1.7
D+	1.3
D	1.0
F	0.0

\*Faculty members may choose to incorporate a + or - 1% tolerance range in the above 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.

\*\* Disclaimer: The attendance policy used in the MSW, Case Management and other department programs is currently under review.

## **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.

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

**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 787A Advanced Professional Practicum & Seminar: Child Welfare  
COURSE SCHEDULE**

**WEEK ONE-September 28, 2006**

LECTURE TOPICS:

- I. FIELD PRACTICUM/SEMINAR REVIEW
- II. Introduction to Advanced Clinical/Policy Seminar
- III. Learning Plan Reviewed: Expectations for the Second Year Student
- IV. Field Practicum/Agency Update/ Review of Professional Development Portfolio
- V. Skill-Building Lab
  - a. Establishing a framework for learning in supervision- Process recordings

**LEARNING PLAN DUE WEEK THREE**

**WEEK TWO-October 5, 2006**

LECTURE TOPICS:

- I. Agency/Field Experience Discussion
- II. Skill-Building Lab
  - a. History of CPS
  - b. Philosophy of CPS
  - c. Ethical responsibilities in professional social work practice
  - d. Exercise: "The Decision"

READINGS/ASSIGNMENTS (*REQUIRED*):

- DePanfilis, D., & Salus, M. (2003). *Child Protective Services: A guide for caseworkers*. Washington DC: National Clearinghouse on Child Abuse and Neglect.  
Ch 13 Supervision, consultation, and support, pp. 105-110
- Mattison, M. (2000). Ethical decision making: The person in the process. *Social Work, 45* (3), 201-212.  
*Available online through: <http://webbline.illu.edu> - (Academic Search Elite, EBSCO)*
- McDaniel, N., & Lescher, N. (2004). The history of child protective services. In Brittain, C. & Hunt, D. E. (Eds.), *Helping in Child Protective Services* (pp. 31-47). New York, NY: Oxford University Press.  
*Available on RESERVE at Del Webb Library*
- Strom-Gottfried, K. (2000). Ensuring ethical practice: An examination of NASW code violations, 1986-97. *Social Work, 45* (3), 251-262.  
*Available online through: <http://webbline.illu.edu> - (Academic Search Elite, EBSCO)*

**WEEK THREE-October 12, 2006**

LECTURE TOPICS:

- I. Agency/Field Experience Discussion
- II. Skill-Building lab
  - a. Defining child maltreatment
  - b. Etiology of abuse
  - c. Overview of consequences of abuse on micro and macro levels
  - d. Legal Documentation
  - e. Learning Discussion

**DUE TODAY: Learning Plan**

READINGS/ASSIGNMENTS (*REQUIRED*):

- Goldman, J., Wocott, D., & Kennedy, K. (2003). *A Coordinated Response to Child Abuse and Neglect: The foundation for practice*. Washington DC: National Clearinghouse on Child Abuse and Neglect.
- Ch 3      What is child maltreatment?, pp. 13-21.
- Ch 5      What factors contribute to child use and neglect?, pp. 27-34.
- Ch 6      What are the consequences of child abuse and neglect?, pp. 35-39.

**WEEK FOUR-October 19, 2006**

LECTURE TOPICS:

- I. Agency/Field Experience Discussion
- II. Domestic Violence
- III. Conflict management/Conflict resolution
  - a. Thomas- Kilmann conflict mode instrument

READINGS/ASSIGNMENTS (*REQUIRED*):

- Barsky, A. E. (2000). The reflective CR practitioner. In *Conflict resolution for the helping professions* (pp. 34-59). Pacific Grove, CA: Brooks/Cole.
- Comstock, A. (2004). Key partners in protecting and supporting families. In Brittain, C. & Hunt, D. E. (Eds.), *Helping in Child Protective Services* (pp. 77-107). New York, NY: Oxford University Press.  
*Available on RESERVE at Del Webb Library*
- Los Angeles County Sheriff's Department. *The Domestic Violence Handbook: A victim's guide*. Los Angeles: Author.
- Thomas, K. W., & Kilmann, R. H. (2001). Thomas-Kilmann conflict mode instrument: Profile and interpretive report. In *Thomas-Kilmann conflict mode instrument*. Consulting Psychologists Press, Inc.  
*Available at <https://www.skillsone.com/images/smp248148.pdf>*

Thomas-Kilmann conflict mode instrument: Instructions.

*Available at [www.lebow.drexel.edu/greenhausj/Self-Assessment%20Instruments/Conflict%20Management%20Style.pdf](http://www.lebow.drexel.edu/greenhausj/Self-Assessment%20Instruments/Conflict%20Management%20Style.pdf)*

Wahlgren, C., Metsger, L., & Brittain, C. (2004). Assessment. In Brittain, C. & Hunt, D. E. (Eds.), *Helping in Child Protective Services* (pp. 217-219). New York, NY: Oxford University Press.

*Available on RESERVE at Del Webb Library*

Zastrow, C. H., & Kirst-Ashman, K. K. (2004). Social systems and their impacts on middle adulthood. In *Understanding human behavior and the social environment* (6<sup>th</sup> ed.) (pp.442-444). Belmont, CA: Brooks/Cole.

### **WEEK FIVE-October 26, 2006**

#### LECTURE TOPICS:

- I. Agency/Field Experience Discussion
- II. The Impact of Domestic Violence on children- Elvira Pan, LCSW Kaiser Permanente Medical Center.

#### READINGS/ASSIGNMENTS (*REQUIRED*):

Alexander, S. (2004). Intervention with families. In Brittain, C. & Hunt, D. E. (Eds.), *Helping in Child Protective Services* (pp. 430-432). New York, NY: Oxford University Press.

*Available on RESERVE at Del Webb Library*

### **WEEK SIX-November 2, 2006**

#### LECTURE TOPICS:

- I. Agency/Field Experience Discussion
- II. Skill-Building Lab
  - a. Identifying transference in working with resistant clients
  - b. Countertransference issues in working with clients
- III. Substance abuse assessment
- IV. Film – “Why cant we be family again”

#### READINGS/ASSIGNMENTS (*REQUIRED*):

Jaudes, P. K., Ekwo, E., & Van Voorhis, J. (1995). Association of drug abuse and child abuse. *Child Abuse and Neglect*, 19 (9), 1065-1075.

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

Wahlgren, C., Metsger, L., & Brittain, C. (2004). Assessment. In Brittain, C. & Hunt, D. E. (Eds.), *Helping in Child Protective Services* (pp. 217). New York, NY: Oxford University Press.

*Available on RESERVE at Del Webb Library*

## **WEEK SEVEN-November 9, 2006**

### LECTURE TOPICS:

- I. Agency Experience Discussion
- II. Skill-Building Lab
  - a. Maintaining professionalism in interdisciplinary environment
  - b. Professional comportment
  - c. Use of self in administrative and organizational practice
  - d. Countertransference issues in the organizational environment
  - e. Role play: Vignettes related to organization culture

### READINGS/ASSIGNMENTS (*REQUIRED*):

Hepworth, D., Rooney, R. H., & Larsen, J. (1997). Managing individual, family and organizational barriers to change. In *Direct Social Work Practice: Theory and Skills* (pp. 556-596). Pacific Grove, CA: Brooks/Cole.

Valley, K. L., & Thompson, T. A. (1998). Sticky ties and bad attitudes: Relational and individual bases of resistance to change in organizational structure. In R. M. Kramer & M. A. Neale (Eds.), *Power and influence in organizations* (pp. 39-66). Thousand Oaks, CA: Sage Publications.

## **WEEK EIGHT-November 16, 2006**

### LECTURE TOPICS:

- I. Agency/Field Experience Discussion
- II. Skill-Building Lab: Developing collaborative relationships with communities in child welfare.
- III. Surviving organizational Policies

### READINGS/ASSIGNMENTS (*REQUIRED*):

Bacharach, S. B., & Lawler, E. J. (1998). Political alignments in organizations: Contextualization, mobilization, and coordination. In R. M. Kramer & M. A. Neale (Eds.), *Power and influence in organizations* (pp. 67-88). Thousand Oaks, CA: Sage.

Rivera, H. (2002). Developing Collaborations between Child Welfare Agencies and Latino communities. In *Child Welfare, LXXXI* (2), (pp. 371-384).

## **WEEK NINE-November 23, 2006: NO CLASS**

**Happy Thanksgiving Holiday**

## **WEEK TEN-November 30, 2006**

LECTURE TOPICS:

- I. Agency/Field Experience Discussion
- II. Skill-Building Lab
  - a. Oral presentations with accompanying written outline

**WEEK ELEVEN-December 7, 2006**

LECTURE TOPICS:

- I. Agency/Field Experience Discussion
- II. Skill-Building Lab
  - a. Oral presentations with accompanying written outline
  - b. Evaluation of organizational culture
  - c. Self-defeating organizations
  - d. Role play: "Five types of self-defeating organizations"

READINGS/ASSIGNMENTS (*REQUIRED*):

Banner, D.K., & Gagne, T. E. (1995). Organizational culture. In *Designing effective organizations* (pp. 369-394). Thousand Oaks, CA: Sage.

**DUE TODAY:** *"Use of Self" Paper and Educational Outcome Assessment*

**WEEK TWELVE-December 14, 2006**

LECTURE TOPICS:

- I. Agency Experience Discussion
- II. Skill-Building Lab
  - a. Closure–Reflections of learning for Fall Quarter
  - b. Professional Development Portfolio Discussion
  - c. Course evaluation

**DUE TODAY:** Wholeness Portfolio

**SOWK 787A Advanced Professional Field Practicum & Seminar**  
**REFERENCE AND SUGGESTED READINGS**

- Aile-Corliss, L., & Aile-Corliss, R. (1998). *Human service agencies: An orientation to fieldwork*. Pacific Grove, CA: Brooks/Cole.
- American Psychiatric Press. (1993). *Clinical manual of supportive psychotherapy*. Washington, DC: Author.
- Brems, C. (2000). *Dealing with challenges in psychotherapy and counseling*. Belmont, CA: Wadsworth.
- Cournoyer, R., & Stanley, M. (2002). *The social work portfolio: planning, assessing and documenting lifelong learning in a dynamic profession*. Pacific Grove, CA: Brooks/Cole.
- Dickson, D. (1998). *Confidentiality and privacy in social work*. New York, NY: The Free Press.
- Dveirin, G. F., & Adams, K. (1993). Empowering health care improvement: An operational model. *Journal on Quality Improvement*, 12, 222-223.
- Egan, G. (2002). *The skilled helper: A problem-management and opportunity-development approach to helping*. Pacific Grove, CA: Brooks/Cole.
- Faiver, C., Eisengart, S., & Colonna, R. (2000). *The counselor's intern handbook*. Belmont, CA: Wadsworth.
- 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.
- Haggerty, R., Roghmann, K., & Pless, I. (1993). *Child health and the community*. New Brunswick, NJ: Transaction Pub.
- Horejsi, C., & Garthwait, C. (2002). *The social work practicum*. Needham Heights, MA: Allyn & Bacon
- Jones, L. (1993). Decision making in child welfare: A critical review of the literature. *Child and Adolescent Social Work Journal*, 10 (3), 241-262.
- Kleinman, S. (1993). *Emotions and field work*. Thousand Oaks, CA: Sage Publications.
- Lambert, S. J. (1993, March). *Examining the career paths of men and women social workers*. Paper presented at the Annual Program Meeting of the Council on Social Work Education, New York.
- Lee, C. (1994). The feminization of management. *Training*, 31 (11), 25-31. .
- Mitchell, R. (1993). *Secrecy and field work*. Thousand Oaks, CA: Sage Publications.
- Lum, D. (2000). *Social work practice and people of color*. Belmont, CA: Wadsworth.
- Patterson, L., & Reynolds Welfel, E. (2000). *The counseling process, 5<sup>th</sup> ed.* Belmont, CA: Wadsworth
- Pedersen, P. (2000). *Hidden messages in culture centered counseling*. Thousand Oaks, CA: Sage.
- Reamer, F. (2001). *Ethics education in social work*. Alexandria, VA: Council on Social Work Education.
- Rivera, H. (2002). *Developing Collaborations between Child Welfare Agencies and Latino communities*. *Child Welfare*, LXXXI (2), 371-384.
- Saltzman, A., & Furman, D. (1999). *Law in social work practice*. Chicago, IL: Nelson-Hall.
- Schulman, L. (2003). *Interactional supervision*. NASW Press.
- Sweitzer, H. (2004). *The successful internship: Transformation and empowerment in experiential learning, 2<sup>nd</sup> ed.* Pacific Grove, CA: Brooks/Cole.
- Grobman, L. (Ed.). (2002). *The field placement survival guide*. Harrisburg, PA: White Hat Communications.