Social Work in Health Care

I. STANDARDIZED COURSE DESCRIPTION

This elective practice course is designed to explore aspects of social work practice in healthcare settings with a biopsychosocial and family-centered perspective. The foundation of the course is social work values and ethical decision-making process as illuminated in the NASW code of ethics. Practice issues to be explored include: the subjective experience and reactions to living with illness, change and adaptation, grief and loss, trauma and its connection to pain and chronic conditions, values and ethical dilemmas, economic justice and access issues in health care, disenfranchised populations and cultural humility and awareness. The complexities of health care social work will be examined in various settings including: inpatient, outpatient, clinics, home care agencies, hospice and community based centers. The current shifting role of social work in the interdisciplinary medical setting will be discussed. Students will be encouraged to think about their roles in facilitating health and wellness to individuals, families and communities. The role of individual differences (i.e. gender, race/ethnicity, spirituality, etc.) and societal/cultural beliefs in relation to situations involving illness will be highlighted. Skill development will focus upon all phases of the helping process, including attention to the unique aspects of termination with clients coping with illness. Examination of personal attitudes and experiences involving grief and loss will facilitate increased self-awareness.

II. STANDARDIZED COURSE OBJECTIVES

Upon completion of the course, the student will be able to:
1. Demonstrate an understanding of the historical significance of social work in medical settings and explore the current range of opportunities for practice.
2. Demonstrate an understanding of contemporary health care issues related to societal, political and organizational changes in health care.
3. Demonstrate an understanding of the impact and meaning of illness, life-threatening conditions, grief and bereavement for children, adults and families.
4. Demonstrate an understanding of the common psychosocial and spiritual challenges faced by individuals, families and communities confronting illness.
5. Demonstrate an understanding of the cultural factors at work in the clinical interface with individuals in medical settings.
6. Demonstrate an understanding of the Adult Childhood Experiences (ACE) Study and the link between childhood trauma and the risk of chronic health conditions, including chronic pain.
7. Demonstrate an understanding of the health care issues as they relate to cultural diversity, social justice, and disenfranchised populations.
8. Demonstrate an understanding of the nature of illness, its multidimensional aspects and the interrelationship between environmental, social, psychological, and biological factors in its cause, course and outcome.
9. Demonstrate an understanding of the clinical dimensions of clinical practice in the context of health care and multidisciplinary practice.
10. Develop a reflective awareness of the practitioner’s experiences of health and illness and the importance of self-care.
III. TEACHING METHODS

This course is designed to include a variety of teaching methodologies to achieve the expectation of student mastery of theoretically-grounded advanced practice skill competencies in the group work method, with emphasis on children, adolescents, and families. Learning activities will include readings, writings, discussions, lectures, speakers, videos, community experience, and experiential exercises.

IV. REQUIRED AND RECOMMENDED TEXTS AND COURSE MATERIALS

Required Text:


Recommended Text:


V. COURSE REQUIREMENTS

Greatest value will be attained by completing the assigned reading before each class session and will be the basis for class discussion. Students are encouraged to ask questions and make comments during the lectures. Student’s questions and comments provide the instructor with an important assessment tool for whether or not the readings are being completed outside of class.

All of your work in this class, particularly small group work, must be governed by the ethical standards published by the NASW, including very strict application of the rules governing confidentiality. It is important to familiarize yourself with these standards, and see your instructor immediately if you should encounter any problems or concerns related to these standards.

VI. COURSE ASSIGNMENTS

A. Class Attendance and Contribution 15 pts

Class contribution grade will be determined in two ways:

**First**, due to the format and content of the course, regular and punctual attendance is imperative. The class experience is co-constructed and students are expected to attend class regularly and to participate in an interactive framework between collegiate students and professor. Students are expected to complete the readings prior to class and should be well prepared to participate in discussions and experiential learning assignments. Failure to attend class and demonstrate the thorough discussions that one had comprehended the readings will be considered in assigning the final grade. Punctuality is an important professional practice. Class will begin promptly at 11:30am, and roll will be taken at the beginning of each class period. Students will be allowed one unexcused absence. If a student misses more than the allotted excused absence, the professor reserves the right to lower that student’s grade by one point for each class missed beyond the one allowed.

**Second**, to support informed class interaction, students will be divided into small groups (2-3 students) with each group asked to prepare two or three questions (either from the readings or specific to the guest lecturer) for at least one class during the semester. The question should address some issue or concern raised by the readings for that week that may be of special interest to the students, or perhaps an issue that seems unclear, or a question(s) for the guest lecturer about their experiences or opinions about health care practice. The questions need to be typed and double spaced, and the
small group will present the question and lead a brief class discussion concerning the issue raised, during the ending portion of their assigned class. The questions will then be turned in to the instructor. Grades on a scale of 1-10 will be given for the questions and will be determined by both the quality of the questions, and the ability to elicit informed involvement of the class.

All three of these aspects of class contribution: attendance and punctuality; question(s) prepared for class; and ongoing participation and interactions during class, will factor into the 15pts for attendance and contribution.

B. Cultural Heritage Paper  
**Due 10/1/15 at beginning of class**  
25pts

As we have discussed in class, health and illness are socially and culturally constructed. In order to assist you in your ability to learn about, understand and respect cultures other than your own, this assignment will allow you to go deeply into the experiences of a cultural group different than your own.

The goals of the assignment are:

1) To encourage you to seek information about issues related to illness, health, and loss in a culture different from your own.

2) To encourage all of us to remember that our cultural background can influence our perception of other cultures’ experience of illness, health, and loss.

Identify a population of interest that differs from your own background (i.e., different racial or ethnic heritage; different religious or spiritual background).

Write a 5-8 page paper (using APA 6th edition) that address the following:

- Demographic and Geographic data
- Traditional health beliefs
- Definition of illness
- Definition of health
- Overall health attitude
- Beliefs about causes/sources of illness
- Methods of maintaining, protecting and restoring health
- Visits and use of M.D. or other health care resources
- Health care resources such as neighborhood health centers
- Anyone else in the community who looks after people such as traditional healers
- Child-bearing and child-rearing beliefs and practices
- Rituals and beliefs surrounding death and dying
- Views of social work intervention
- Current literature discussing common issues and concerns for this community in terms of health care access, delivery and social work services

C. Ethnographic Interview  
**Due 11/5/15 at beginning of class**  
20pts

Social work in health care often involves the care and treatment of individuals with chronic diseases. The purpose of the interview is to understand what it means to “live with” a chronic or serious physical illness from the perspective of the person, also known as the informant, who has a chronic or serious illness or is a primary caregiver of someone with a chronic/serious physical illness.
In ethnography, since informants are living day-to-day with the illness, they are considered the “experts”, and you should approach the interview from the position of a naïve learner. It is important to let the informant teach you about his/her experience and to identify what he/she thinks is important for you to learn about the daily life of one who is living with a chronic, disabling or terminal illness.

**Part A: The Interview**

1. Select an informant who is NOT related to you and is currently experiencing a chronic, disabling or terminal physical illness or is the primary caregiver or significant other of someone who has a chronic/serious physical illness.

2. Unlike a clinical interview which focuses on gaining information for assessment and intervention, the ethnographic interview approach focuses on three main dimensions from the informant’s viewpoint:
   - The meaning of the illness;
   - The types of strategies used to cope with the illness;
   - The way in which the informant organizes his/her world in the context of the illness

3. Confidentiality must be upheld and discussed with the informant before the interview occurs; assure the informant that her/his name will not be used in any way in your verbal or written work.

4. Interviews are generally 1 to 2 hours long; you may take detailed handwritten notes during the session IF agreeable to the informant, BUT you may not tape record the interview. The interview should be fairly open, yet focused enough so that you can develop an understanding of what it’s like to live with the person’s illness/disability/or terminal illness.

5. Acquaint yourself with the informant’s illness PRIOR to the interview.

6. Develop an interview guide to help you during the interview. The following are suggestions for what you might want to cover/include in your interview guide:
   - How did the informant first notice that something was wrong or experience symptoms?
   - What were the informant’s initial feelings/response to symptoms and/or diagnosis and what did those mean for the informant?
   - How did the informant make sense of his/her illness (i.e., what kinds of explanations/theories about “why me?”)
   - How does the informant’s culture, ethnicity, age, gender, race, socioeconomic class, sexual orientation, gender identity, philosophical or religious beliefs affect his/her illness experience?
   - How does she/he cope with the illness on a daily basis?
   - What is the impact of the illness and of receiving medical treatment oneself, family life, work, career plans, social relationships, etc.?
   - What is his/her experience of accessing health care and of interactions with health care providers?

**Part B: Written assignment of the Interview**

Summarize the informant’s experience of being chronically ill as you uncovered/discovered/understood it from your interview.

Write a 5 page paper (using APA 6th edition), including at least 3 direct quotes from the informant, and 3 relevant citations from the social work literature (1996-2015) that addresses ALL the questions below:

1. What is your understanding of the condition/illness/disease of the informant?
   a. List sources you utilized to gain that understanding

2. Discuss the impact on the psychosocial life of the informant from his/her viewpoint. How does she/he cope with the illness/what strategies does he/she use to cope with/adapt to the illness?

3. What was the most compelling thing you learned about the informant’s experience from an insider’s perspective? How will you incorporate this learning in your practice as a professional social worker?
4. In retrospect, in general, how well do you think you elicited information from the informant about his/her illness experience/role as caregiver? Looking back, what areas do you wish you had covered in the interview but did not?

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5. How “connected” did you feel to the informant and why, and what part of the interview was the most difficult for you to “stay with” and why?

6. How was the health care service delivery system/provider/agency/managed care system barriers and/or resources for the informant and/or family? Analyze how these systems enhanced, challenged, or were neutral influences on the well being of the consumer and family.

7. Attach your interview guide to your paper and submit both in to the professor.

D. Advance Care Planning Assignment  Due 12/3/15 at beginning of class  20pts

The goals of this assignment are:
   a. To provide you with the opportunity to experience advance care planning from the perspective of your own values and family system.
   b. To provide a forum for the class to benefit from the information and knowledge that you have gained
   c. To encourage all of us to understand that those facing serious illness or life-limiting illness have a continuum of decisions to make throughout their disease trajectory

Part A:
This assignment is designed to have you discuss your wishes for your healthcare, should you become unable to speak for yourself. Identify the individual(s) to whom you want to communicate your wishes (advance care planning discussion). Try to choose one person you believe have similar values as your own, and one who may have different values related to end-of-life care. Complete the state legal advance directive documents: Directive to Physicians and Surrogates of Family Members (Living Will), Medical Power of Attorney for Health Care, and Out of Hospital DNR. These forms are available for download (Texas Advanced Directives). You will be required to meet outside of class to complete this assignment.

Part B:
Complete a two to three page type-written review of your personal experience which should include the following:
   a) How you chose the participants for your discussion
   b) Thoughts, feelings and reactions to the assignment and the experience
   c) Any new understanding about what people experience as they complete the advance care planning process
   d) Your own wishes for care at the end-of-life

Part C:
Bring two copies of your written review to class. Come to class prepared to discuss your papers and experience and participate in a group process with other class members

D. Pop Quizzes  20pts
Several times throughout the semester the instructor will administer unannounced quizzes over the weekly readings. Each quiz will consist of 1-3 questions drawn directly from assigned readings.

VIII. COURSE GRADING CRITERIA

Student Performance Evaluation

<table>
<thead>
<tr>
<th>Course Requirement</th>
<th>% of grade</th>
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<tr>
<td>Cultural Heritage Paper</td>
<td>25%</td>
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Ethnographic Interview/Paper 20%
Advanced Care Planning Paper 20%
Pop quizzes 20%
Class Attendance and Contribution 15%
TOTAL 100%

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GRADING POLICY/GRADING CRITERIA:

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<th>Grade</th>
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<td>A</td>
<td>94.0 and Above</td>
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Class failed/no credit: 73 and below.

To receive an “A” in this course you must have excellent attendance, participation, and you must produce work that is of superior quality.

Grading of all written assignments will take into account the quality and content of the writing. The American Psychological Association (APA) – 6th edition format should be used when relevant. Written material should be carefully proofread and errors (punctuation, typographical, spelling, etc.) corrected prior to submission in order to avoid losing points in the assignment grade, particularly the research paper.

VII. UNIVERSITY POLICIES

THE UNIVERSITY OF TEXAS HONOR CODE. The core values of The University of Texas at Austin are learning, discovery, freedom, leadership, individual opportunity, and responsibility. Each member of the university is expected to uphold these values through integrity, honesty, trust, fairness, and respect toward peers and community.

PROFESSIONAL CONDUCT AND CIVILITY IN THE CLASSROOM. The professor expects students to act as professionals in class. This means students should arrive on time for class, be prepared to participate in the class discussion, and show respect for one another’s opinions. A course brings together a group of diverse individuals with various backgrounds. Students are influenced and shaped by such factors as ethnicity, gender, sex, physical abilities, religious and political beliefs, national origins, and sexual orientations, among others. We expect to learn from each other in an atmosphere of positive engagement and mutual respect. Social Work also deals with complex and controversial issues. These issues may be challenging and uncomfortable, and it would be impossible to offer a substantive classroom experience that did not include potentially difficult conversations relating to challenging issues. In this environment we will be exposed to diverse ideas and opinions, and sometimes we will not agree with the ideas expressed by others. Nevertheless, the professor requires that students engage one another with civility, respect, and professionalism.

UNANTICIPATED DISTRESS. Students may experience unexpected and/or distressing reactions to course readings, videos, conversations, and assignments. If so, students are encouraged to inform the professor. The professor can be responsive and supportive regarding students’ participation in course assignments and activities, but students are
POLICY ON SOCIAL MEDIA AND PROFESSIONAL COMMUNICATION. Public social networks are not private. Even when open only to approved or invited members, users cannot be certain that privacy will exist among the general membership of sites. If social work students choose to participate in such forums, please assume that anything posted can be seen, read, and critiqued. What is said, posted, linked to, commented on, uploaded, subscribed to, etc., can be accessed and archived, posing potential harm to professional reputations and prospective careers.

Social work students who use social media (i.e. Facebook, Twitter, etc.) and other forms of electronic communication (i.e. blogs, etc.) must be mindful of how their communication may be perceived by clients, colleagues, faculty, and others. Social work students are expected to make every effort to minimize material which could be considered inappropriate for a professional social worker in training. Because of this, social work students are advised to manage security settings at their most private levels and avoid posting information/photos or using any language that could jeopardize their professional image.

Students are asked to consider the amount of personal information posted on these sites and are obliged to block any client access to involvement in the students’ social networks. Client material should not be referred to in any form of electronic media, including any information that might lead to the identification of a client or compromise client confidentiality in any way. Additionally, students must critically evaluate any material that is posted regarding community agencies and professional relationships, as certain material could violate the standards set by the School of Social Work, the Texas Code of Conduct for Social Workers, and/or the NASW Code of Ethics.

Social work students should consider that they will be representing professional social work practice as well as The University of Texas at Austin School of Social Work program while in the classroom, the university community, and the broader area communities.

POLICY ON SCHOLASTIC DISHONESTY. Students who violate University rules on scholastic dishonesty are subject to disciplinary penalties, including the possibility of failure in the course and/or dismissal from the University. Since such dishonesty harms the individual, all students, and the integrity of the University, policies on scholastic dishonesty will be strictly enforced. For further information, the student may refer to the Web Site of the Student Judicial Services, Office of the Dean of Students (http://deanofstudents.utexas.edu/sjs/).

USE OF COURSE MATERIALS. The materials used in this course, including, but not limited to exams, quizzes, and homework assignments, are copyright protected works. Any unauthorized duplication of the course materials is a violation of federal law and may result in disciplinary action being taken against the student. Additionally, the sharing of course materials without the specific, express approval of the professor may be a violation of the University’s Student Honor Code and an act of academic dishonesty, which could result in further disciplinary action. This sharing includes, among other things, uploading class materials to websites for the purpose of distributing those materials to other current or future students.

DOCUMENTED DISABILITY STATEMENT. Any student who requires special accommodations must obtain a letter that documents the disability from the Services for Students with Disabilities area of the Division of Diversity and Community Engagement (471- 6259 voice or 471-4641 TTY for users who are deaf or hard of hearing). A student should present the letter to the professor at the beginning of the semester so that needed accommodations can be discussed and followed. The student should remind the professor of any testing accommodations no later than five business days before an exam. For more information, visit http://www.utexas.edu/diversity/ddce/ssd/.

RELIGIOUS HOLIDAYS. By UT Austin policy, students must notify the professor of a pending absence at least fourteen days prior to the date of observance of a religious holy day. If the student must miss a class, examination, work
assignment, or project in order to observe a religious holy day, the professor will give the student an opportunity to complete the missed work within a reasonable time after the absence.

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TITLE IX REPORTING. In accordance with Title IX of the Education Amendments of 1972, the University of Texas at Austin is committed to maintaining a learning environment that is free from discriminatory conduct based on gender. Students who report incidents of sex discrimination, sexual harassment, sexual violence, or sexual misconduct to faculty, instructors, and/or staff who supervise students, will be provided a list of University resources. If the incident is impacting the academic environment, a report will be provided to the University’s Title IX Coordinator. Further information, including student resources related to Title IX, may be found at https://www.utexas.edu/student-affairs/policies/title-ix.

CLASSROOM CONFIDENTIALITY. Information shared in class about agencies, clients, and personal matters is considered confidential per the NASW Code of Ethics on educational supervision and is protected by regulations of the Family Educational Rights and Privacy Act (FERPA) as well. As such, sharing this information with individuals outside of the educational context is not permitted. Violations of confidentiality could result in actions taken according to the policies and procedure for review of academic performance located in sections 3.0, 3.1, and 3.2 of the Standards for Social Work Education.

SAFETY. As part of professional social work education, students may have assignments that involve working in agency settings and/or the community. As such, these assignments may present some risks. Sound choices and caution may lower risks inherent to the profession. It is the student's responsibility to be aware of and adhere to policies and practices related to agency and/or community safety. Students should notify the professor regarding any safety concerns.

BEHAVIOR CONCERNS ADVICE LINE (BCAL). If students are worried about someone who is acting differently, they may use the Behavior Concerns Advice Line to discuss by phone their concerns about another individual’s behavior. This service is provided through a partnership between the Office of the Dean of Students, the Counseling and Mental Health Center (CMHC), the Employee Assistance Program (EAP), and The University of Texas Police Department (UTPD). Call 512-232-5050 or visit http://www.utexas.edu/safety/bcal.

EMERGENCY EVACUATION POLICY. Occupants of buildings on the UT Austin campus are required to evacuate and assemble outside when a fire alarm is activated or an announcement is made. Please be aware of the following policies regarding evacuation:

• Familiarize yourself with all exit doors in the classroom and the building. Remember that the nearest exit door may not be the one you used when entering the building.
• If you require assistance to evacuate, inform the professor in writing during the first week of class.
• In the event of an evacuation, follow the professor’s instructions.
• Do not re-enter a building unless you are given instructions by the Austin Fire Department, the UT Austin Police Department, or the Fire Prevention Services office.
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<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Text/Readings</th>
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<tbody>
<tr>
<td>Session 1</td>
<td>Thursday, Aug 27</td>
<td>Overview of Course – Syllabus, Assignments, Due Dates, expectations Assigning Small Groups for weekly discussion Introduction to Social Work and Healthcare “Know your role – know your value”</td>
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<td>Johnson, Y.M. (1999), Indirect work: social work’s uncelebrated strength</td>
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<td>Session 2</td>
<td>Thursday, Sept 3</td>
<td>Health and Wellness Remembering the patient Guest speaker – Holly Kitchen</td>
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<td>Gehlert and Browne – Ch 1 and 11 Spector – Ch 3 Kerson, McCoyd &amp; Assoc – Ch 24</td>
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<td>Session 3</td>
<td>Thursday, Sept 10</td>
<td>Overview: Medical Social Work Practice approaches: biopsychosocial, medical model, family health Guest speaker – Angela Ngygun, LCSW</td>
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<td>Gehlert and Browne – Ch 2, 6, 8 Borst – Ch 4 &amp; 5</td>
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<td>Session 4</td>
<td>Thursday, Sept 17</td>
<td>Social inequities in health Access to healthcare/ social justice issues Societal, Political, and organizational shifts – impact on social work in health care Guest speaker – Mia Sneed, LMSW</td>
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<td>Kronenfeld, J (2009) – Health Disparities Bortst – Ch 2</td>
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<td>Session 5</td>
<td>Thursday, Sept 24</td>
<td>Medicare/Medicaid/ACA Hospital and acute care settings Discharge planning Guest speaker – Jakki Dozier, LCSW</td>
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<td>Gehlert and Browne – Ch 10 Cowles, L. – Ch 3, 4 Holliman &amp; Dziegielewski – Ch 12</td>
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<td>Session 6</td>
<td>Thursday, October 1</td>
<td>Assessment and interventions in Issues of violence in health care Rape, domestic violence, and child/elder abuse Working in acute care settings Discussion Questions – Group 5</td>
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<td>Benbeniskty, R &amp; Chen, W – decision making by child protection teams of a medical center Zink, T., Elder, N., Jacobson, J., Klostermann, B. – Medical management of intimate partner violence… Kerson, McCoyd, &amp; Assoc – Ch 3</td>
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<td>***cultural heritage paper due **</td>
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<td>Session 7</td>
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<td>Biomedical ethics and social work Gehlert and Browne – Ch 21</td>
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<td>Discussion Questions – Group</td>
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<td>Thursday, October 8</td>
<td>Organ procurement DNR/AMD &amp; advanced directives</td>
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<td><strong>Discussion Questions – Group 6</strong></td>
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<td>Session 8</td>
<td>ACE scores and trauma, relationship to chronic pain and other health conditions</td>
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<td>Thursday, October 15</td>
<td>Pain management – what you can’t see and assumptions we make</td>
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<td><strong>Discussion Questions – Group 7</strong></td>
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<td>Session 9</td>
<td>Living with HIV/AIDS Spirituality and healthcare</td>
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<td>Thursday, October 22</td>
<td>Chronic illness Dialysis and nephrology</td>
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<td><strong>Guest speaker: Emily Evans, NP</strong></td>
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<td><strong>Discussion Questions – Group 8</strong></td>
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<td>Session 10</td>
<td>Geriatric Social Work Home health, nursing homes, and skilled/assisted facilities</td>
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<td>Thursday, Nov 12</td>
<td><strong>Discussion Questions – Group 9</strong></td>
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<td>Session 11</td>
<td><strong>paper due ethnographic interview</strong></td>
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<td>Thursday, November 5</td>
<td>Palliative Care at end of life Hospice services: being a witness</td>
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<td><strong>Field trip: Christopher House, Hospice Austin</strong></td>
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<td><strong>Discussion Questions – Group 10</strong></td>
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<td>Session 12</td>
<td>Children and adolescent health care issues</td>
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<tr>
<td>Thursday, October 29</td>
<td>Family centered care Helping children face illness Grief bereavement and loss</td>
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<td><strong>Guest speaker: Anne Minor, LCSW</strong></td>
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<td><strong>Discussion Questions – Group 10</strong></td>
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<td>Session 13</td>
<td>Multi-disciplinary approach to health care Taking it to the people; patient navigators Preventative health care – psychosocial interventions</td>
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<td>Thursday, Nov 19</td>
<td><strong>Discussion Questions – Group 11</strong></td>
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<td>Session 14</td>
<td><em><strong>advanced care planning paper due</strong></em></td>
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<td>Thursday, Dec 3</td>
<td><strong>Guest Panel: Seton Total Health multi-disciplinary team: LCSW, RN, NP &amp; HP Future of Health Care Social Work</strong></td>
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<td>Survival, hope and resilience</td>
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<td>Care of self/personal awareness revisited</td>
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