The University of Texas at Austin
Steve Hicks School of Social Work

Course Number: SW n387R36

Professor's Name: Joan Asseff, LCSW-S
Pronouns: she, her, hers

Unique Number: 89300

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Semester: Summer 2022

Preferred Phone: 512-627-5008

Meeting Time/Place: M/W, 1:30 – 4:00 pm
              SSW 2.116

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In-Person or Zoom: Mondays 11:30 – 12:30
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TA: Chauncey Stephens

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SOCIAL WORK IN HEALTH CARE

I.   STANDARDIZED COURSE DESCRIPTION

This elective practice course is designed to explore aspects of social work practice in health care 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

By the end of the semester, students will be able to:

Upon completion of this 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 on 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 health care issues as they relate to cultural diversity, social justice, and disenfranchised populations.

7. 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.

8. Demonstrate an understanding of the clinical dimensions of clinical practice in the context of health care and multidisciplinary practice.

9. 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 practice competencies in health care social work. Learning activities may include readings, writings, discussions, lectures, guest speakers, social media, in-class group activities, student presentations, self-reflection, community experience, and experiential exercises.

IV.   REQUIRED TEXT AND MATERIALS

Optional Text (All chapters from the text will be made available on Canvas.)

Allen, K.M. & Spitzer, W.J. (2016). *Social Work Practice in Healthcare: Advanced Approaches and Emerging Trends.* Sage.

All additional readings will be available on Canvas.

V. COURSE REQUIREMENTS

Class Attendance and Contribution   **10 pts**

>   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. Class attendance and demonstration of thorough comprehension of assigned materials will be considered in assigning the final grade. **Class will begin promptly at 1:30 pm. Students will be allowed one unexcused absence, unless otherwise approved by the instructor. Please communicate with the instructor prior to class regarding any anticipated 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. All three of these aspects of class contribution: attendance, punctuality, and on-going participation will factor into the 10 points for attendance and contribution.

Discussion Boards: (4 Discussion Boards X 2.5 points each)   **10 pts**

>   Discussion Board questions will be assigned to support readings and classroom activities. Discussion Board questions are posted on Canvas in specific modules throughout the semester and students will respond to Discussion Board questions on Canvas. **Discussion Board responses are due on Canvas by the beginning of class on the day they are assigned (see course schedule for due dates).** Discussion Board grades are primarily based on completion and the application of social work ethics and relational skills in all interpersonal written communication. **Students will respond to questions in each Discussion Board AND reply to at least two of their peers' responses. There will be five Discussion Boards, but students only need to complete four. The fifth Discussion Board is a bonus opportunity worth two points.**

Identifying Culturally Responsive Suicide Risk Assessment in Health Care: **20 pts**
Due: June 22nd

>   The purpose of this assignment is to engage in active learning of suicide risk assessments commonly used in health care settings, including critical analysis of the cultural sensitivity/responsiveness of these tools. It is vital that all social workers in the health care field have the skill to assess patients for suicidality and optimize health care resources by directing people to the right level of care. **Students will choose to research and critically analyze one of four suicide risk assessment tools commonly utilized in health care settings:**

1. Columbia Suicide Severity Rating Scale (C-SSRS)
2. Patient Safety Screener-3
3. Patient Health Questionnaire-Item 9
4. Ask Suicide-Screening Questions (ASQ)

Instructions:

After selecting one of the four suicide risk assessment tools, each student will write a two to three-page reflection paper on their experience with researching and critically analyzing the tool they selected. With the research/literature they have available, each student will strive to answer the question: ***Is the suicide risk assessment tool I selected culturally sensitive or responsive?*** Cite at least three sources to support your determination (answer to this question) and at least two sources you used to conceptualize/define ***cultural sensitivity or cultural responsiveness***. The objective of this assignment is not to identify the most culturally sensitive or responsive assessment tool, but to simply critique the tool you selected. Each paper should have a minimum of 5 sources.

*See Canvas for a grading rubric.

Ethnographic Interview: **30 pts**
Due: July 11th

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 their experience and to identify what they think 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

Select an informant who is NOT well known to you and is currently experiencing a chronic, disabling and/or terminal physical illness or is the care partner for someone who is living with a chronic, disabling and/or terminal illness. You may interview a family member if they are not part of your immediate family and if you have not explored this topic with them in the past. 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 their world in the context of the illness

Confidentiality must be upheld and discussed with the informant before the interview occurs. Assure the informant that their name will not be used in any way in your verbal or written work.

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 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.

Acquaint yourself with the informant's illness PRIOR to the interview. 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 their 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 and/or religious beliefs affect their illness experience?
- How do they 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 their experience of accessing health care and of interactions with health care providers?

Part B: Written Report 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, including at least 3 direct quotes from the informant, and 3 relevant citations from the social work literature (2000-2022) 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 their viewpoint. How do they cope with the illness/what strategies do they 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?

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 to the professor.

*See Canvas for an assignment rubric.

A Real World Challenge Assignment: Due July 25th   30 pts
Reducing Health Disparities & Inequities in Your Community

(Assignment adapted from *Teaching Tolerance* www.tolerance.org)

The goal of this assignment is to increase student awareness of how local or statewide solution-focused ideas can make a positive impact on an identified health disparity. Teams will be formed within the cohort to research and choose a health disparity/inequity for their classroom presentation. The challenge involves convincing fellow classmates (in their role as community members) to consider the solution proposed by the group to reduce the identified health disparity/inequity. Possible areas include, but are not limited to: COVID19, HIV/AIDS, cancer, obesity, access to healthcare, infant birth weight, maternal mortality, infant mortality, life expectancy, depression, environmental disparities, suicide rate and heart disease. This goal will be achieved by demonstrating the adverse impact of the disparity/inequity on both specific groups and the community as a whole. Research the related statistics for at least 2 marginalized, oppressed, and/or disadvantaged groups. Examine the impact on the groups and the community as a whole. Think about the specific populations your group has researched and what could realistically work. Be sure to research what has been done before.

PROJECT DATES:

6/15 – Students will email their topic or area of interest to the class TA for the purpose of group placement.

6/20 – Project groups will be announced by course instructor, with 4-5 members each.

6/29 – In order to avoid duplicate areas of research, groups will email Professor Asseff 2 health disparity topics they wish to investigate and propose a solution for. Project proposals will be confirmed by 6/31.

7/25 – Final presentations are due. The format of the presentation is entirely up to the group. Powerpoints are not required and creativity is encouraged. Presentations should be a total of 25 minutes, including time for questions and answers. Proposals should include:

- Statistics to support your case about the health disparity
- A clear explanation of the impact to the people and community affected
- A workable solution, idea or program to reduce or end the health disparity

*See Canvas for a grading rubric.

Grading Scale

Attendance and Contribution	10
Discussion Boards	10
Columbia Suicide Severity Rating Scale	20
Ethnographic Interview	30
Health Disparity Assignment	30
TOTAL	**100 %**

The following scale will be used to determine your final letter grade:

VI. GRADES

94.0 and above	A
90.0 to 93.999	A-
87.0 to 89.999	B+
84.0 to 86.999	B
80.0 to 83.999	B-
77.0 to 79.999	C+
74.0 to 76.999	C
70.0 to 73.999	C-
67.0 to 69.999	D+
64.0 to 66.999	D
60.0 to 63.999	D-
Below 60.0	F

VII. CLASS POLICIES

Class Participation: Students are expected to attend class regularly and to participate in an interactive framework between collegiate students, professor and invited guest speakers. Students are expected to complete the readings prior to class and should be well prepared to participate in discussions and experiential learning. Failure to attend class and demonstrate through discussions that one has comprehended (or attempted to understand) the readings will be considered in assigning the final grade.

Use of Zoom Application (as needed): If directed by university at any time during the course, all students will use their UT approved Zoom account to attend class and office hours. When attending class in Zoom, students are expected to keep their video function on to demonstrate active listening, except for brief periods as needed for personal tasks. Brief breaks in your video feed are acceptable and students are welcome to take brief breaks as needed. A formal 10-minute break will also be provided in the middle of class. If you anticipate disruptive sounds in your immediate area, please set your audio to mute unless you are speaking. Otherwise, students are encouraged to "unmute" as much as possible to facilitate interactive discussion.

Attendance: Punctuality is one of the many important standards of professional behavior. Class will begin promptly at 1:30 each Wednesday. A student is considered absent if they arrive more than 10 minutes late to class, leave early, or are unable to come to class without prior communication with the course instructor. More than one unexcused absence may result in a reduction by one letter grade. If a student is going to be absent, efforts should be made to contact the professor in advance. Students are responsible for any material missed due to absence.

Late Assignments: Except in the case of emergencies, and then only with the permission of the professor, **late assignments will not be accepted without penalty**. Students are expected to turn in all required assignments on the agreed upon due date to Canvas by **the beginning of class**. Assignments turned in after class begins will be considered late. If accepted, late assignments will be assessed point penalties at the rate of **two (2) points each day late.** If the due date is a problem, the student can communicate with the instructor and negotiate another due date in advance.

Writing Assignments: The ability to write in a professional manner is very important for social workers, particularly in settings where they work as members of interdisciplinary teams. Written work must be typed, edited for grammatical, spelling and typographical errors. Work will be graded based on the American Psychological Association (APA – 7th edition) guidelines for references and citations, unless otherwise stated in the guidelines for the assignment.

Class Performance: If students have concerns about their class performance, the professor is more than willing to work with them to help improve their understanding of the class material of the assignments *prior to the end of the semester*. **Final grades assigned in the course are not negotiable**.

VIII. UNIVERSITY POLICIES

COVID-19 RELATED INFORMATION. The University's policies and practices related to the pandemic may be accessed at: https://protect.utexas.edu/

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.

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://diversity.utexas.edu/disability/.

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 race, 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. This atmosphere includes working intentionally to recognize and dismantle racism, sexism, heterosexism, and ableism in the classroom. 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 responsible for communicating clearly what kind of support is desired. If counseling is needed, students may contact a service provider of their choosing, including the UT Counseling Center at 512-471-3515 or online at https://cmhc.utexas.edu/.

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 (e.g. Facebook, Twitter, Instagram) and other forms of electronic communication (e.g. blogs) 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 ACADEMIC INTEGRITY. Students who violate University rules on academic 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 academic dishonesty will be strictly enforced. For further information, please visit the Student Conduct and Academic Integrity website at: http://deanofstudents.utexas.edu/conduct.

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.

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.

UNIVERSITY ELECTRONIC MAIL STUDENT NOTIFICATION. Electronic mail (email), like postal mail, is a mechanism for official University communication to students. The University will exercise the right to send email communications to all students, and the University will expect that email communications will be received and read in a timely manner. Students can find UT Austin's policies and instructions for updating their e-mail address at https://it.utexas.edu/policies/university-electronic-mail-student-notification-policy.

RELIGIOUS HOLY DAYS. A student who misses classes or other required activities, including examinations, for the observance of a religious holy day should inform the instructor as far in advance of the absence as possible so that arrangements can be made to complete an assignment within a reasonable period after the absence. A reasonable accommodation does not include substantial modification to academic standards, or adjustments of requirements essential to any program of instruction. Students and instructors who have questions or concerns about academic accommodations for religious observance or religious beliefs may contact the Office for Inclusion and Equity. The University does not maintain a list of religious holy days.

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 on the basis of sex https://titleix.utexas.edu/. Faculty, field instructors, staff, and/or teaching assistants in their supervisory roles are mandated reporters of incidents of sex discrimination, sexual harassment, sexual violence, stalking, dating violence, or any other forms of sexual misconduct. Students who report such incidents will be informed of University resources. Incidents will be reported to the University's Title IX Coordinator. Further information, including student resources related to Title IX, may also be found at https://titleix.utexas.edu/.

CAMPUS CARRY POLICY. The University's policy on campus carry may be found here: https://campuscarry.utexas.edu.

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 and COVID-19 ADVICE LINE (BCCAL). If students have concerns about their behavioral health, or if they are concerned about the behavioral health of someone else, students may use the Behavior Concerns and COVID-19 Advice Line to discuss by phone their concerns. 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 https://safety.utexas.edu/behavior-concerns-advice-line. The Behavior Concerns and COVID-19 Advice Line has been expanded to support The University of Texas at Austin community during the COVID-19 pandemic. By calling 512-232-5050 - Option 2 for COVID-19, students, faculty and staff can be assisted in English and Spanish with COVID-19 support.

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.

IX. COURSE SCHEDULE

*Other methods of teaching, such as TED talks and videos may be added onto Canvas throughout the semester. Students are expected to check the Canvas modules for additionally assigned material.

**Please note that all assignments will be posted on Canvas with requirements and instructions.

Date	Topic	Assignments Due	Readings
June 6	Overview of course syllabus, assignments, expectations, etc. NASW Health Care Standards History of Health Care Social Work. What Does a Health Care Social Worker Do?	**No Assignments Due** **Submit** "Why I'm Interested in Health Care Social Work?" Google slide as soon as possible, if not already submitted prior to the beginning of class. **(Students will receive email regarding this introductory exercise).**	Allen, K. & Spitzer, W. (2016). *Social work practice in health care: Advanced approaches and emerging trends*. Los Angeles, CA: Sage Publishing. (Chapters 1 & 2). NASW Healthcare Standards, pages 5-16 & 22-24. *See Canvas for additional assigned & optional materials.
June 8	Recognizing and Addressing Social Determinants of Health Recognizing and Addressing Health Disparities	**No Assignments Due**	National Academies of Sciences, Engineering, and Medicine (2017). Communities in action: Pathways to health equity. Washington, D.C: The National Academies Press. Doi: 10.177226/24624. (pages 57-88; 99-164). **Videos:** "Unnatural Causes: In Sickness and In Wealth" "Unnatural Causes: when the Bough Breaks **Video:** Racism is Making us Sick TED Talk:

			https://www.ted.com/talks/david_r_willi ams_how_racism_makes_us_sick?langu age=en *See Canvas for additional assigned & optional materials.
June 13	Health Care Social Work Theories & Evidence Based Clinical Approaches Evidence Informed Interventions Related to Providing Culturally Responsive, Identity Affirming Care The Influence of Spirituality in Healthcare • Assessing Spirituality	**Assignments:** Discussion Board #1 due by the beginning of class	Allen, K. & Spitzer, W. (2016). Chapter 3 Rice, S. (2014). Hospitals often ignore policies on using qualified medical interpreters. *Modern Healthcare*. Retrieved from: http://www.modern healthcare.com/article/2014-830/MAGAZINE/308309945. Saguil, A. & Phelps, K. (2012). *The Spiritual Assessment*. American Academy of Family Physicians. Retrieved from: www.aafp.org/afp Peitzmeier S.M., Potter J. (2017) Patients and Their Bodies: The Physical Exam. In: Eckstrand K., Potter J. (eds) Trauma, Resilience, and Health Promotion in LGBT Patients. Springer, Cham *See Canvas for additional assigned & optional materials.
June 15	Evidence Informed Care of Children and Families: • Practice Issues in the Care of Children and Families • Assessment • History Gathering Health Care Issues for Young Adults	**Assignments:** Email Health Care Disparity/Inequity area of interest to class TA in preparation for *A Real World Challenge Assignment.*	Allen, K. & Spitzer, W. (2016). Chapter 12 Texas Children's Hospital (2015). Guide to Communicating with Patients and Families. Baylor College of Medicine: pages 12-24. Fogg, N., Lauver, L, & Badgett, V. (2013). The Pediatric Bill of Rights. Society of Pediatric Nurses, 1-2.

			*See Canvas for additional assigned & optional materials.
June 20	Acute/Emergency Health Care Social Work Practice Interventions: • Care coordination • Biopsychosocial assessments • Discharge planning • Interdisciplinary teams • Suicide Risk Assessments and Mental Health First Aide	**Assignments:** Professor Asseff will post groups for *A Real World Challenge Assignment* on Canvas.	Allen, K. & Spitzer, W. (2016). Chapters 8 Posner, K., Brown, G.K., Stanley, B., et al (2011). The Columbia-Suicide Severity Rating Scale: Initial validity and internal consistency findings from three multisite studies with adolescents and adults. *American Journal of Psychiatry*, 168 (12), 1266-1277. Moody, H. (2004). Hospital Discharge Planning. *Journal of Gerontological Social Work*, 43 (1), 107-118. Discharge Planning: Fundamentals for the Hospital and other Acute Health Care Settings *See Canvas for additional assigned & optional materials.
June 22	Maternal Mental Health Addressing Substance Use and Abuse with Health Care Social Work Settings	**Assignments:** Culturally Responsive Suicide Risk Assessment assignment due *Possible Simulation at School of Nursing*	Allen, K. & Spitzer, W. (2016). Chapter 13 **Video:** Why Maternal Mental Health Matters, TED Talk *See Canvas for additional assigned & optional materials.

June 27	Social Work Intervention in Primary Care Social Work Intervention with Chronic Health Documentation in Healthcare Settings	**Assignments:** -Discussion Board # 2 due by the beginning of class	Allen, K. & Spitzer, W. (2016). Chapter 7 Common Medical Abbreviations for Social Workers. **Video:** "Unnatural Causes: Bad Sugar" *See Canvas for additional assigned & optional materials.
June 29	Gerontological Health Care Dementia Care Social Work Practice in Long Term Care: • Assisted Living • Skilled Nursing Facility • Home Health	**Assignments:** Email Professor Asseff your top two health care disparity/inequity topics for your *A Real World Challenge Assignment* group.	Allen, K. & Spitzer, W. (2016). Chapter 11 McGovern, J. (2015). Living Better With Dementia: Strengths-Based Social Work Practice and Dementia Care. *Social Work in Health Care,* 54, pages 408–421. Zimmerman, S., Connolly,R., Zlotnik, J.L., Bernklug, M., & Cohen, L. (2012). Psychosocial care in nursing homes in the era of the MDS 3.0: Perspectives of the experts. *Journal of Gerontological Social Work*, 55 (5), pages 444-461. *See Canvas for additional assigned & optional materials.
July 6	Social Work in Oncology The Importance of Interprofessional Teams in Health Care Social Work Practice	**Assignments:** -Discussion Board # 3 due by the beginning of class	Hudson, Quinn, O'Hanlon, and Aranda (2015). *Family Meetings For Patients with Advanced Disease: Multidisciplinary Clinical Practice.* The Center for Palliative Care.

	Documentation: Best Practices for Health Care Settings.		CCWP Chapters 1-Psychosocial Needs Of Cancer Patients and Chapter 8- A Research Agenda Bandman, B. (2007). Patients as Real Time Teachers. Journal of Cancer Education. 22(2) 131-133. Holland, J.C. (2004) IPOS Sutherland memorial lecture: An International perspective on the development of psychosocial oncology: Overcoming cultural and attitudinal barriers to improve psychosocial care. Psycho-Oncology. 13. 445-459. *See Canvas for additional assigned & optional materials.
July 11	Palliative Care End of Life Care (Hospice) Communicating with Seriously Ill Patients	**Assignments:** Ethnographic Interview due	Allen, K. & Spitzer, W. (2016). Chapter 9 Barros, C. (2012). Notes for the new hospice social worker, *Journal of Social Work in End-of-Life & Palliative Care*, 8(3), pages 207-210. Voluntary Stopping Eating and Drinking (VSED). (2020). Compassion Choices. Retrieved from: https://compassionandchoices.org/end-of-life-planning/learn/vsed/ **Video:** Centra Hospice – Except for 6 *See Canvas for additional assigned & optional materials.
July 13	Self Determination in Health Care: • Advance Care Planning – Honoring Choices		Searight H.R. (2019) Why Is There Such Diversity in Preferences for End-of-Life Care? Explanations and Narratives. In: Ethical Challenges in Multi-Cultural Patient Care. SpringerBriefs in Ethics. Springer,

	- Guardianships - HIPAA 1996 – Health Information Portability & Accountability Act - Social Work Practice on an Ethics Committee		Cham. Chapter 6 Dingfield & Kayser. (2017). Integrating Advance Care Planning into Practice. *Chest*, 151 (6), 1387-1393. Drolet, Marwaha, Hyatt, Blazar, & Lifchez. (2017). Electronic Communication of Protected Health Information: Privacy, Security and HIPAA Compliance. *Journal of Hand Surgery*, 42 (6),411-416. **Video:** "Honoring Choices" **View the following Advance Care Planning Documents:** Medical Power of Attorney, Directive to Physicians, Durable Power of Attorney, Declaration for Mental Health Treatment, Texas MOST form *See Canvas for additional assigned & optional materials.
July 18	Evidence Informed Interventions in Public/Community Health and Population Health Management Social Work Practice in Integrated Behavioral Health	**Assignments:** Discussion Board # 4 due by the beginning of class	Allen, K. & Spitzer, W. (2016). Chapter 10 Allen, K. & Spitzer, W. (2016). Chapter 16 **Video:** Social Work in Integrated Care *See Canvas for additional assigned & optional materials.
July 20	SSI, SSDI, Medicare and Medicaid Telehealth, Tele-Mental Health and COVID19	**No Assignments Due**	No assigned readings: Preparation for *A Real World Challenge Presentations.*

July 25	A Real World Challenge, Health Disparity/Inequity Presentations	**Assignments:** *A Real World Challenge, Health Disparity Presentations Due*	No Assigned Readings

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