

**University of Pennsylvania**  
**School of Social Policy and Practice**  
**SW 702: Social Work Practice in Health Care**  
**Spring 2017**  
**Instructor:**  
**Email:**  
**Phone:**  
**Office Hours:**

**I. Course Purpose**

The purpose of this course is to develop, reinforce and sharpen social work competencies in health practice within the context of our rapidly changing health care system. The content of the course will include current and emerging health behavior theory, research, and practice specific to a variety of health related settings and to populations diverse on gender, age, ethnicity, sexual orientation and health status. This course will use the lens of the 2010 Patient Protection and Affordable Care Act (P.L. 111-148) to examine the organization of health care delivery systems, the historical development and organizational context of social work practice in health care, emerging social work roles and functions in the era of health care reform, race and class-based disparities in health outcomes, the identification of health care needs of vulnerable populations, and the implementation and evaluation of evidence based practice. Students will be exposed to a broad-range of behavioral and social science theories related to health with special emphasis on theories of health behavior change, social determinants of health, ecological frameworks, and theories of health care utilization.

Building on a foundation of knowledge common to all fields of practice, the course focuses on the specialized content needed for interventions with patients, their families, groups and health care providers in a variety of health settings. Ethical dilemmas arising from current health care practice are analyzed. The relevance for practice of socioeconomic, racial, ethnic, age, gender and disease variables in delivery of and access to services will be explored. Social Work practice is examined within the context of the biopsychosocial consequences of chronic or catastrophic medical illness for individuals, families and groups within the current health and social service delivery system. Attention will be given to issues of interdisciplinary teamwork in the health care setting.

Social Work 702 enhances the knowledge and skills of individual, family and group interventions that are acquired in Social Work 704 and 714. It accomplishes this by building upon the knowledge of the multi-factorial elements in a comprehensive biopsychosocial assessment and extending knowledge in the practice of interdisciplinary collaboration in health care settings. Building on the content of both the foundational research course (SW715) and advanced macro practice curricula (SW708 and SW718), this course will introduce students to the application of health-related research to social work practice and to the development of skills in administration and planning in health care settings. Students are challenged to extend knowledge gained in SW602 (Individual Functioning in the Social Environment), through an understanding of the dynamic interplay of human behavior and health status, health beliefs, cultural responses to illness, and the value of biopsychosocial models for evaluation and intervention. Building on knowledge from SW 611 (Contemporary Social Policy) students are asked to concurrently explore policies that impact on health service delivery and the ethical dilemmas that are posed to the provider community and society at large.

## **II. Educational Objectives**

Upon completing this course, students will:

1. Demonstrate an advanced theoretical base for helping individuals, families, and groups in varied health care settings, utilizing a bio-psychosocial, ecological perspective in oral and written materials.
2. Articulate range of roles and functions required to perform as a valued professional in a trans-disciplinary health care setting.
3. Construct rationale for selection of and identify critical elements of application and evaluation of practice approaches, for work with individuals, couples, families, and groups.
4. Demonstrate awareness of self as it impacts on professional practice and ethical decision-making while integrating knowledge of social work values and ethics as guides to professional social work practice in health care settings.
5. Conduct benchmarking and literature reviews for critical analysis of evidence-based practice and the planning and provision of social work services in health care settings.
6. Integrate knowledge of health policy and the critical influence of government and financing on practice; in particular students will demonstrate knowledge of the influence of the Affordable Care Act on practice competencies.
7. Develop an awareness of the meaning of health/illness to different ethno-cultural groups as it relates to their utilization of health care services.
8. Identify and consult lifelong learning resources to sustain excellence in current clinical practices and contribute to evolution of trends in the health and social work fields, including but not limited to Internet-related sources, professional associations, conferences, and journals.

## **III. Course Requirements & Expectations**

In this seminar course, learning is dependent upon student involvement. A variety of teaching methods will be incorporated including lectures, guest presentations, discussion, and student presentation. Students are **expected** to read widely from the reading assignments before each class session and to participate actively in class discussions. Attendance and participation are noted. Students should notify the instructor about planned absences **in advance** by telephone or e-mail and learn what work is needed to make up the missed material. Students whose performance is minimal or failing at midterm will be notified in writing.

### **A. What Is Expected**

- Come to class prepared, having read and thought about the assigned readings prior to each class;
- Participate actively and relevantly in class discussions and experiential exercises;
- Submit written assignments on time;
- Demonstrate an integration of theory, research and practice skills,
- The use of phones and laptops is not permitted in class.

### **B. Attendance Policy**

Classroom learning is a fundamental component of your professional education. Students are, therefore, expected to attend each class, arrive at class on time, and be in attendance for the full class. In the event that you are unable to attend class for any reason, you must notify your instructor

in advance and learn how you are to make up the content you missed. **Missing more than two classes could result in failing the course.**

### **C. Evaluating Your Work**

- 1) Quality of written assignments: all papers are to be of second-year graduate level quality, well documented, using APA format, and submitted on time. Papers will be evaluated on the following bases:
  - Follows requirements of the assignment
  - Conceptual clarity
  - Organization
  - Incorporation of course concepts
  - Demonstration of understanding of course concepts
  - Evidence of critical thinking
  - Evidence of critical engagement with the literature (not simply name dropping)
  - The extensiveness of the use of scholarly literature
  - Quality of writing (includes spelling, grammar, punctuation)
  - Evidence of cultural awareness
- 2) Class participation: attendance, quality and quantity of oral participation, evidence of preparation for class, and peer discussion assignments.
- 3) Demonstration of your having done assigned readings and having understood course concepts. This is evident in class participation and in the incorporation of concepts and references from the readings in written assignments.
- 4) Demonstration of integration of theory, research and practice.

### **D. Grading Policies**

The final course grade is based on the student's overall performance, based on the criteria listed in **section C** above. A grade of B- or above is required to pass the course. Students whose performance is marginal or failing at midterm will be notified in writing.

For the final grade, specific assignments and integration of theory and practice will be given the following weights:

- Assignment #1 Current Issues Paper - 20 %
- Assignment #2 Social Work Interventions Paper - 40%
- Assignment #3 Self Care Paper - 20 %
- Course Participation - 20 %

Letter grades based on these weighted values will be assigned using to the University criteria for MA and PhD Programs.

(See Student Handbook: <http://www.sp2.upenn.edu/resources/handbook/index.html>)

### **E. Rewriting of Papers Policy**

If a student receives a grade of B or lower on a paper, the student may rewrite the paper at the discretion of the instructor. In such cases, the grade for that paper will be the average of the initial grade and the new grade.

## **F. Academic Integrity**

Students are expected to adhere to the University's Code of Academic Integrity. Care should be taken to avoid academic integrity violations, including: plagiarism, fabrication of information, and multiple submissions (see descriptions below).\*\* Students who engage in any of these actions will be referred to the Office of Academic Integrity, which investigates and decides on sanctions in cases of academic dishonesty.

1. Plagiarism: using the ideas, data, or language of another without specific or proper acknowledgment. Example: copying, in part or in its entirety, another person's paper, article, or web-based material and submitting it for an assignment; using someone else's ideas without attribution; failing to use quotation marks where appropriate, etc.
2. Fabrication: submitting contrived or altered information in any academic exercise. Example: making up data or statistics, citing nonexistent articles, contriving sources, etc.
3. Multiple submissions: submitting, without prior permission, any work submitted to fulfill another academic requirement.

*\*\*It is the student's responsibility to consult with the instructor if the student is unsure about whether something constitutes a violation of the Code of Academic Integrity\*\*\**

## **G. Assigned Readings**

All class readings will be posted on Canvas or provided as hand-outs by the instructor. There is no textbook required for this class, however recommended a text is indicated below in **section I**.

## **H. Recommended Readings**

Students are expected to read journal articles that relate to the current discussion about the role of social work in the health care environment and the impact of public policy on health care social work practice. Students should come prepared to discuss the media's presentation of these issues. In addition, students should become familiar with the literature in this area. In particular, the following journals are especially pertinent:

American Journal of Public Health	Journal of Health and Social Behavior
Community Mental Health Journal	Milbank Memorial Fund Quarterly
Health Affairs	New England Journal of Medicine (NEJM)
Health and Social Work	Psychiatric Services
Health Services Research	Social Science and Medicine
Journal of the American Medical Association (JAMA)	
Journal of Health Care for the Poor and Underserved (JHCPU)	
Social Work and Health Care	

Internet searches of the many private and governmental organizations dedicated to understanding health and mental- health policies that impact social work practice in the health care arena should also be explored to add to the student's learning. Examples include:

<a href="http://www.phlp.org/">http://www.phlp.org/</a>	<a href="http://www.accesstobenefits.org">http://www.accesstobenefits.org</a>
<a href="http://www.ohcr.state.pa.us/">http://www.ohcr.state.pa.us/</a>	<a href="http://www.medicarerights.org/">http://www.medicarerights.org/</a>
<a href="http://www.hhs.gov/">http://www.hhs.gov/</a>	<a href="http://www.esresearch.org/">http://www.esresearch.org/</a>
<a href="http://www.cdc.gov/nchs/">http://www.cdc.gov/nchs/</a>	<a href="http://www.childrensdefense.org/">http://www.childrensdefense.org/</a>
<a href="http://www.kff.org">http://www.kff.org</a>	<a href="http://www.familiesusa.org">http://www.familiesusa.org</a>
<a href="http://www.surgeongeneral.gov">http://www.surgeongeneral.gov</a>	<a href="http://www.bazelon.org">http://www.bazelon.org</a>

<http://www.omhrc.gov/>  
<http://www.cms.hhs.gov/>  
<http://www.apha.org>  
<http://www.ahcpr.gov/>  
<http://www.measuredhs.com/>  
<http://www.hschange.com>  
<http://www.cmwf.org>  
<http://www.phmc.org>  
<http://www.cbpp.org>

<http://www.nami.org>  
<http://www.nmha.org>  
<http://www.samhsa.gov>  
<http://www.hsph.harvard.edu/healthliteracy/>  
<http://www.naswdc.org>  
<http://www.iaswresearch.org>  
<http://www.cbpp.org>

### **I. Recommended Text:**

Gehlert, S. & Browne, T. A. (Eds.) (2011). *Handbook of health social work, 2<sup>nd</sup> edition*. Wiley: New York.

Kerson, T.S., McCoy, J.L.M. & Associates (2010). *Social Work in Health Settings: Practice in Context, 3<sup>rd</sup> Ed*. Routledge: New York.

### **IV. Course Assignments**

Assignments for this course include four written assignments (**Due February 8<sup>th</sup>, February 22<sup>nd</sup>, March 29<sup>th</sup>, and April 26<sup>th</sup>**). All assignments are expected to be handed in on time unless alternative arrangements have been made with the instructor prior to the due date of the assignment.

All assignments are expected to be double spaced, in Times New Roman 12-point font, and in APA 5<sup>th</sup> edition format. If you are unsure of the APA “rules”, please refer to the guidelines provided on Canvas.

Assignments can be e-mailed to the instructor prior to 3pm on the day it is due, or a hard-copy can be provided the day of class. It is the instructor’s expectation that you take time to read and edit your work. If you need assistance with any of the assignments, please feel free to contact the instructor. Meetings can be via phone or in person. Please utilize the Marks Family Writing Center <http://writing.upenn.edu/critical/wc/>

#### **Assignment I: Current Issues in Health Care Social Work** **Due Week 4 (February 8<sup>th</sup>)**

The purpose of this paper is to develop a more in-depth understanding of contemporary issues that impact the delivery of social work services in our rapidly changing health care system. This paper focuses on how current issues influence the roles and functions of social work in the health care field. Choose a current issue in health care social work that influences the delivery of services to clients. For example, you may explore how Medicaid managed care has influenced the delivery of mental health services to children, or how new technologies have expanded the human life span and how this impacts social work services for the elderly.

**The paper should be approximately 3-4 pages in length and include the following:**

1. Identification of the current issue including historical development and current impact on social work service delivery.

2. Identification of the affected population group, their social work needs, and how the current issues either facilitates the delivery of social work services or creates barriers to services.
3. How the issue influences the development of the roles and functions of social workers in health care.

### **Grading**

The Current Issues paper will count 20% toward the final grade, based on:

- clarity in statement of the current issue;
- exploration of how the issue impacts delivery of social work services including social work roles and functions;
- organization and mechanics.

### **Assignment II: Social Work Interventions in Health Care** **Due Week 10 (March 29<sup>th</sup>)**

This paper is designed to provide you with an opportunity to do an in-depth exploration of a particular health problem or illness affecting a specific population. For example, you may focus on a health problem or issue such as teen pregnancy, access to quality health care services, end-of-life care for the elderly, obesity, prevention of smoking among teens, or on an illness, such as breast cancer, drug addiction, AIDS in adolescents or children, etc.

**Please submit a 3-4 page draft describing the health problem or illness you wish to study and the population group affected, along with a preliminary list of 10 relevant references from the literature to be used in the final paper, on February 22nd.** You are expected to add to these references over the semester so that your paper contains a comprehensive and well-integrated bibliography.

**The paper should be approximately 12-15 pages in length and include the following:**

- A definition of the selected illness or health problem for study and the population group affected. This should include incidence, prevalence, a description of the history of the health problem, medical course (if a specific illness), and current medical treatment and/or interventions, as applicable.
- Identification of any pertinent policies or regulations in the health care delivery system that particularly influence services to the group affected.
- Significant socio-cultural dimensions of the illness or problem: e.g., socioeconomic status, race, gender, culture, etc.
- The impact of the illness or health problem on the individual, family/caregiver, including identification of the specific stresses faced by the patient and family/caregiver, and the challenges to internal and external resources, support networks and coping capacities.
- Discussion of the theoretical and evidence based interventions a social worker can make to assist in the development of capacities for individuals and families. This section should be based on your review of the literature.

- Discussion of the opportunities and/or barriers for effective social work intervention and interdisciplinary collaboration. What strategies might a social worker engage in to facilitate effective teamwork?

### **Grading**

The Intervention Paper will count 40% toward the final grade, based on:

- clarity in the statement of the problem including the historical review and current state of social work intervention(s);
- a coherent and compelling set of reasons how the intervention(s) you are advocating for ameliorates the problem;
- exploration of the interconnected nature of socio-cultural influences on individual and family function; and
- organization and mechanics.

### Assignment III: Self-Care

**Due Week 14 (April 26<sup>th</sup>)**

#### **Part 1: (1-2 pages): Define Quality of Life**

1. Reflect on your personal definitions of health and illness as influenced by your cultural background, familial beliefs, spirituality and/or religion, education and socioeconomic status. Think in terms of “what makes life worth living” and “what makes life unacceptable”;
2. Critically analyze your own wishes for dignity, autonomy, self-determination and quality of life;
3. What will insure your quality of life as a social worker?
4. How will you address quality of life issues with your clients/patients in your clinical settings?
5. How may your beliefs impact your work with clients?

#### **Part 2: Construct a Self Care Contract for Insuring your Quality of Life as a Social Work Practitioner**

Self care is a key concept to maintaining your professional sense of self and well being in social work; however many practitioners do not dedicate time to developing mechanisms to care for themselves emotionally, professionally, spiritually, intellectually, physically and personally.

Design a contract; format is up to you---creativity is welcome, but define at least five activities that will help you insure your professional quality of life (reflecting on what you wrote in part 1), how you will achieve them, how often you plan to do them and why these activities are important to you. Examples include:

- Hobbies, culture, travel, spirituality/religious involvement, volunteer work, exercise, relationships, intellectual stimulation, further education etc. Do not

forget to include things you need to do in your professional setting to contribute to your self-care.

- What will be your system of checks and balances- to make sure you are devoting enough time to self care and self preservation?
- How often will you revisit, evaluate and revise your contract?
- What will you do if you begin to feel symptoms of burnout, compassion fatigue or secondary traumatic stress?

### **Grading**

The Self Care paper will count 20% toward the final grade.

### **V. Course Participation**

This class will meet once a week on Wednesdays, from 9:00-11:30 Classroom learning is a fundamental component of your professional education. Attendance is therefore expected and will be considered in the determination of overall achievement of class learning objectives. In the event that you are sick or cannot attend class for other reasons, you should notify your class instructor by phone or email.

### **Grading**

Course Participation will be count 20% toward the final grade.

- a) Education takes place in the context of mutual responsibility. Students have the responsibility to participate actively and respectfully in evaluating the course throughout the semester.
- b) Classroom participation should reflect a spirit of respectful, collaborative discussion and learning. Students are encouraged to share information gleaned from outside reading and practice experience. Students should demonstrate a familiarity with the material as evidenced by initiative in raising issues for exploration and learning and an ability to be thoughtful in discussions with fellow students.
- c) Classroom requirements include evidence that the students have completed reading weekly assignments and adherence to deadlines for all assignments. The deadline for all written assignments is the beginning of class on the due date.
- d) Comments from students about pace, content, and clarity are welcome by the instructor throughout the semester as they help to ensure that student needs and course goals are best achieved.

### **VI. Office Hours**

A meeting with the Instructor can be arranged at a mutually convenient time - meetings are encouraged to foster a deeper understanding of the course, the readings, and the assignments.



## Class Schedule & Reading Assignments

### Week 1: 1.18.2017

1. Course overview & historical perspective of medical social work practice
2. Role/Function of a social worker in healthcare: assessment, treatment, case management, multidisciplinary teams, discharge planning, ethics, cultural relevancy and diversity
3. A review of social work practice skills: engagement, assessment, diagnosis, treatment, termination, leadership in evidence-based practice and evaluation

### **Required Reading:**

- Bronstein, L., Kovacs, P., & Vega, A. (2007). Goodness of fit: Social work education and practice in health care. *Social Work in Health Care, 45*(2), 59-76.
- Gehlert & Browne, Chapter 2 “Social Work Roles and the Healthcare Setting”
- Judd, R. G., & Sheffield, S. (2010). Hospital social work: Contemporary roles and professional activity. *Social Work in Health Care, 49*(9), 856-71.
- Pecukonis, E.V., Cornelius, L. & Parrish, M. (2003). The future of health social work. *Social Work in Health Care, 37*(3), 1-15.
- Stuart, P.H. (2004). Individualization and prevention: Richard. C. Cabot and early medical social work. *Social Work in Mental Health, 2*, 7-20.
- Silverman, E. (2008). From ideological to competency-based: The rebranding and maintaining of medical social work's identity. *Social Work, 53*(1), 89-91.
- Volland, P.J., Berkman, B., Phillips, M., & Stein, G. (2003). Social work education for health care: Addressing practice competencies. *Journal of Social Work in Health Care, 37*(4), 1-17.

### Week 2: 1.25.2017

1. Social Determinants of Health
2. Ethnicity, class, gender, sexual orientation, age, and culture as variables in health status, access to care, and the delivery of social work services

### **Required Reading:**

Review:

<http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=39>

- Explore

Farmer, P. (2003). *Pathologies of power: Health, human rights, and the new war on the poor.*(Ch 9 & Afterword). Los Angeles: University of California Press.

Gregg, J., & Saha, S. (2006). Losing culture on the way to competence: The use and misuse of culture in medical education. *Academic Medicine, 81*(6) 542-547.

Leichty, J. M. (2011). Health literacy: Critical opportunities for social work leadership in health care and research. *Health & Social Work, 36*(2), 99-107.

Levy, B. S., & Sidel, V. W. (2006). The nature of social injustice and its impact on public health. In B. Levy & V. Sidel, V. (Eds.), *Social injustice and public health* (5-21). New York: Oxford University Press.

Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care:

[http://www.nap.edu/openbook.php?record\\_id=12875&page=1](http://www.nap.edu/openbook.php?record_id=12875&page=1)

- Read the Summary (pages 1-28)

Wilkinson R, & Marmot M., eds. (2003). *Social determinants of health: The solid facts.* Copenhagen, Denmark: World Health Organization.

### **Week 3: 2.1.2017**

1. Insurance: Medicare, Medicaid, and private (group & individual markets)
2. Impact of insurance status on health access and outcomes
3. Patient Protection and Affordable Care Act (P.L. 11-148)

#### **Required Reading:**

Review:

Understanding the Affordable Care Act: <http://www.healthcare.gov/law/introduction/index.html>

The Henry J. Kaiser Family Foundation. Medicare: A Primer -

<http://kaiserfamilyfoundation.files.wordpress.com/2013/01/7615-03.pdf>

The Henry J. Kaiser Family Foundation. Medicaid: A Primer -

<http://kaiserfamilyfoundation.files.wordpress.com/2010/06/7334-05.pdf>

The Henry J. Kaiser Family Foundation. Private Insurance: A Primer -

<http://kaiserfamilyfoundation.files.wordpress.com/2013/01/7766.pdf>

The Kaiser Commission on Medicaid and the Uninsured.(2012, July). Health coverage of children: The role of Medicaid and CHIP. *The Henry J. Kaiser Family Foundation*. Retrieved from: <http://www.kff.org/uninsured/upload/7698-06.pdf>

The Kaiser Family Foundation. (2012, July). A guide to the Supreme Court's Affordable Care Act decision. *The Henry J. Kaiser Family Foundation*. Retrieved from: <http://www.kff.org/healthreform/upload/8332.pdf>

### **Week 4: 2.8.2017**

**\*\*\*Assignment I Due\*\*\***

1. Exploration of the concept of health
2. Impact of illness on the individual & families

#### **Required Reading:**

Bevans, M., & Sternberg, E. M. (2012). Caregiving burden, stress, and health effects among family caregivers of adult cancer patients. *JAMA*, 307(4), 398-403.

Butler, A., Ford, D., & Tregaskis, C. (2007). Who do we think we are? Self and reflexivity in social work practice. *Qualitative Social Work*, 6(3), 281-299.

Docherty, D., & McColl, M.A. (2003). Illness stories: Themes emerging through narrative. *Journal of Social Work in Health Care*, 37, 19-39.

Miczo, N. (2004). Stressors and social support perception predict illness attitudes and care-seeking intentions: Re-examining the sick role. *Health Communication*, 16, 347-361.

Guberman, N., Gagnon, E., Cote, D., Gilbert, C., Thivierge, N., & Tremblay, M. (2005). How the trivialization of the demands of high-tech care in the home is turning family members into para-medical personnel. *Journal of Family Issues*, 26, 247-272.

National Family Caregivers Association (2004). A portrait of family care giving: America's invisible workforce. Retrieved from: <http://www.thefamilycaregiver.org/pdfs/Portrait.pdf>.

Raymond, J. (2007). A guide for caregivers. *Newsweek*, June 18, 2007, 62-64.

### **Week 5: 2.15.2017**

1. Assessment in health care settings
2. Brief Interventions
3. Problem Solving Therapy
4. Short Term CBT

### **Required Reading:**

- Boutin-Roster, C., Euster, S., Rolon, Y., Motal, A., BeLue, R., Kloine, R., & Charlson, M.E. (2005). Social work admission assessment tool for identifying patients in need of a comprehensive social work evaluation. *Health & Social Work, 30*, 117-125.
- Gehlert & Browne, Chapter 8 “Physical and Mental Health: Interactions, Assessments, and Intervention”
- Gibbons, J. & Plath, D. (2009). Single contacts with hospital social workers: The clients' experiences. *Social Work in Health Care, 48(8)*, 721-35.
- Graybeal, C. (2001). Strengths-based social work assessment: Transforming the dominant paradigm. *Families in Society, 82*, 233-242.
- Kotrla, K. (2005). Social work practice in health care: The need to use brief interventions. *Health & Social Work, 30(4)*, 336-39.
- Nezu, A. M., & Nezu, C. M. (2001). Problem-solving therapy. *Journal of Psychotherapy Integration, 11(2)*, 187-205.
- Malouff, J. M., Thorsteinsson, E. B., Schutte, N. S. (2007). The efficacy of problem solving therapy in reducing mental and physical health problems: A meta-analysis. *Clinical Psychological Review, 27(1)*, 46-57.

### **Week 6: 2.22.2017**

#### **\*\*\*Assignment II Draft Due\*\*\***

1. Crisis Intervention & Medical Crisis Counseling skills
2. Domestic Violence Assessment & Intervention

### **Required Reading:**

- Boes, M. & McDermott, V. (2005). Crisis intervention in the hospital emergency room. In A. R. Roberts (Ed.), *Crisis intervention handbook*, (3rd ed.). (pp. 543-65). New York, NY: Oxford University Press.
- Dass-Brailsford, P. (2007). Chapter 5 Crisis interventions. In *A practical approach to trauma: Empowering interventions*. Thousand Oaks, CA: Sage Publications, Inc.
- Greene, G. J., Lee, M., Trask, R. & Rheinscheld, J. (2005). How to work with clients' strengths in crisis intervention: A solution-focused approach. In A. R. Roberts (Ed.), *Crisis intervention handbook*, (3rd ed.). (pp. 64-89). New York, NY: Oxford University Press.
- Koocher, G. P., Curtiss, E. K., Pollin, I. S., & Patton, K. E. (2001). Medical crisis counseling in a health maintenance organization: Preventative intervention. *Professional Psychology: Research and Practice, 32(1)*, 52-58.
- Lewis, S. & Roberts, A.R. (2001). Crisis assessment tools: The good, the bad, and the available. *Brief Treatment and Crisis Intervention, 1*, 17-28.
- Myer, R. A., & Conte, C. (2006). Assessment for crisis intervention. *Journal of Clinical Psychology: In Session, 62*, 959-970.
- Yeager, K. R. & Roberts, A. R. (2005). Differentiating among stress, acute stress disorder, acute crisis episodes, trauma, and PTSD: Paradigm and treatment goals. In A. R. Roberts (Ed.),

*Crisis intervention handbook*, (3rd ed.). (pp. 90-119). New York, NY: Oxford University Press.

### **Recommended Podcasts:**

- Singer, J. B. (Host). (2007, January 29). Crisis intervention and suicide assessment: Part 1 - history and assessment [Episode 3]. *Social Work Podcast*. Podcast retrieved Month Day, Year, from <http://socialworkpodcast.com/2007/01/crisis-intervention-and-suicide.html>
- Singer, J. B. (Host). (2007, January 29). Crisis intervention and suicide assessment: Part 2 - intervention and crisis assessment [Episode 4]. *Social Work Podcast*. Podcast retrieved Month Day, Year, from <http://socialworkpodcast.com/2007/02/crisis-intervention-and-suicide.html>

### **Week 7: 3.1.2017**

#### Theories of Behavior Change & Harm Reduction

1. Health Promotion-Advances in methods: lifelong learning strategies
2. Social capital/networks/support and the impact on health behaviors
3. Health behavior change theories & public health education models: Transtheoretical Model (stages of change), Health Belief Model, Ecological model, Social Learning Theory, Harm Reduction

### **Required Reading:**

- Aronson, R.E., Lovelace, K., Hatch, J.W., & Whitehead, T. L. (2006). Strengthening communities and the roles of individuals in community life. In B. Levy & V. Sidel, V. (Eds.), *Social injustice and public health* (433-48). New York: Oxford University Press.
- Betacourt, J. R., & Quinlan, J. (2007). Personal responsibility versus responsible options: Health care, community health promotion, and the battle against chronic disease. *Prevention of Chronic Disease* [serial online]. Available from: [http://www.cdc.gov/pcd/issues/2007/jul/07\\_0017.htm](http://www.cdc.gov/pcd/issues/2007/jul/07_0017.htm).
- Leslie KM, Canadian Paediatric Society, Adolescent Health Committee Harm reduction: An approach to reducing risky health behaviours in adolescents. *Paediatr Child Health*. 2008;13:53-6.
- Prochaska, J. O., & Velicer, W. F. (1997). Behavior change: The transtheoretical model of health behavior change. *American Journal of Health Promotion*, 12(1), 38-48.
- Reifsnider, E., Gallagher, M., & Forgione, B. (2005). Using ecological models in research on health disparities. *Journal of Professional Nursing*, 21(4), 216-22.
- Rosenstock, I. M., Strecher, V. J., & Becker, M. H. (1988). Social Learning Theory and the Health Belief Model. *Health Education Quarterly*, 15(2), 175-183.
- West, R. (2005). Time for a change: Putting the transtheoretical (stages of change) model to rest. *Addiction*, 100, 1036-1039.

### **Recommended Reading:**

Gehlert & Browne, Chapter 7 “Theories in Health Behavior”

\*\*\*\*\*March 8<sup>th</sup> is Spring Break\*\*\*\*\*

**Week 8: 3.15.2017**

1. Transitions in care
2. Impact of managed care on social work health care practice
3. Time-limited client encounters & discharge planning

**Required Reading:**

- Acker, G.M. (2010). The influence of managed care on job-related attitudes of social workers. *Social Work in Mental Health, (2)*, 174-89.
- Bachman, S.S., Drainoni, M. & Tobias, C. (2004). Medicaid managed care, substance abuse treatment, and people with disabilities: Review of the literature. *Health & Social Work, 29(3)*, 189-96.
- Claiborne, C., & Fortune, A. (2005). Preparing students for practice in a managed care environment. *Journal of Teaching in Social Work, 25(3)*, 177-95.
- Kane, M.N. (2004). Correlates of preparedness among MSW students for ethical behavior in US managed care environments. *Social Work Education, 23(4)*, 399-415.
- Kopels, S.; & Manselle, T.(2006). The Supreme Court's pre-emptive strike against patients' rights to sue their HMOs. *Social Work in Health Care, 43(1)*, 1-15.
- McAlynn, M., & McLaughlin, J. (2008). Key factors impeding discharge planning in hospital social work: An exploratory study. *Social Work in Health Care, 46(3)*, 1-27.
- Navarro, A. E., Enguidanos, S., & Wilber, K. H. (2012). Identifying risk of hospital readmission among Medicare aged patients: An approach using routinely collected data. *Home Health Care Services Quarterly, 31(2)*, 181-95.
- Prior, M. K., Bahret, B. A., Allen, R. I., & Pasupuleti, S., (2012). The efficacy of a senior outreach program in the reduction of hospital readmissions and emergency department visits among chronically ill seniors. *Social Work in Health Care, 51(4)*, 345-60.
- Sulman J., Savage, D., & Way, S. (2001). Retooling social work practice for high volume, short stay. *Social Work in Health Care, 34*, 315-332.
- Voss, R., Gardner, R., Baier, R., Butterfield, K., Lehrman, S., & Gravenstein, S. (2011). The care transitions intervention: Translating from efficacy to effectiveness. *Archives of Internal Medicine, 171(14)*, 1232-7.

**Week 9: 3.22.2017**

**Special Topics in Health Care Social Work Practice I:** End of life discussions, goals of care and bioethics-social work roles, values and functions

**Guest Lecturer:** Christina Bach, MBE, MSW, LCSW, OSW-C  
Clinical Oncology Social Worker  
Abramson Cancer Center & Infusion Suite @Penn Presbyterian

**See additional readings on Canvas**

**Required Reading:**

- Congress, E. P. (2008). What social workers should know about ethics: Understanding and resolving practice dilemmas. *Advances in Social Work, 1(1)*, 1-26.
- Mack, J. W., & Smith, T. J. (2012). Reasons why physicians do not have discussions about poor prognosis, why it matters, and what can be improved. *Journal of Clinical Oncology, 30 (22)*, 2715-17.

**Week 10: 3.29.2017**

**\*\*\*Assignment II Due\*\*\***

**Special Topics in Health Care Social Work Practice IV: Health care social work with immigrant populations**

**Required Reading:**

- Kaiser Commission on Medicaid and the Uninsured. (2008, March). Summary: Five basic facts on immigrants and their health care. (publication # 7761). Washington, DC: Kaiser Family Foundation. Retrieved from: <http://www.kff.org/medicaid/upload/7761.pdf>
- Kaiser Commission on Medicaid and the Uninsured. (2009, June). How does health coverage and access to care for immigrants vary by length of time in the U.S.? (publication # 7916). Washington, DC: Kaiser Family Foundation. Retrieved from: <http://www.kff.org/uninsured/upload/7916.pdf>
- Kaushal, N., & Kaestner, R. (2005). Welfare reform and health insurance of immigrants. *Health Services Research, 40*, 697-721.
- Ku, L., & Matani, S. (2001). Left out: Immigrants' access to health care and insurance. *Health Affairs, 20*, 247-256.
- McNeece, C.A., Falconer, M.K., & Springer, D. (2002). Impact of immigration on health and human services: Florida's experience. *Journal of Social Work in Health Care, 35*, 501-522.
- The Henry J. Kaiser Family Foundation. (2009, December). Immigrants' health coverage and health reform: Key Questions and answers. (Publication #7982). Washington, DC: Kaiser Family Foundation. Retrieved from: <http://www.kff.org/healthreform/upload/7982.pdf>
- Wike, V.S. (2012). Where should they go? Undocumented immigrants and long-term care in the United States. *HEC Forum*, DOI 10.1007/s10730-012-9183-z.

**Week 11: 4.5.2017**

**Special Topics in Health Care Social Work Practice V: TBD**

**TBD readings**

**Week 12: 4.12.2017**

**Special Topics in Health Care Social Work Practice V: Health care social work practice in aging and long-term care**

1. The elderly, the "young old," and the "old old", Healthy Aging, Aging in place, health technology (<http://www.generationsonline.com/>)
2. The three "D's" – delirium, depression, dementia
3. Elder abuse & mandated reporting, substance abuse, and sexuality
4. Caregivers

**Required Reading:**

- Berkman, B., Gardner, D., Zodikoff, B., & Harootyan, L. (2006). Social work and aging in the emerging health care world. *Journal of Gerontological Social Work, 48*(1-2), 203-17.

- Damron-Rodriguez, J., Lawrance, F. P., Barnett, D., & Simmons, J. (2006). Developing geriatric social work competencies for field education. *Journal of Gerontological Social Work, 48*(1-2), 139-60.
- Fenster, J., Zodikoff, B. D., Rozario, P. A., & Joyce, P. (2010). Implementing a geriatric-infused curriculum in advanced-level MSW courses in health, mental health and substance abuse: An evaluation. *Journal of Gerontological Social Work, 53*(7), 41-53.
- Gellis, Z. (2010). Social work practitioner knowledge and assessment of late-life depression. *Journal of Gerontological Social Work, 53*(6), 495-511.
- Gorbien, M. J., & Eisenstein, A. R. (2005). Elder abuse and neglect: An overview. *Clinics in Geriatric Medicine, 21*(2), 279-292.
- Marshall, V. W., & Altpeter, M. (2005). Cultivating social work leadership in health promotion and aging: Strategies for active aging interventions. *Health and Social Work, 30*(2), 135-44.
- Parker-Oliver, D., & DeCoster, V. A. (2006). Health care needs of aging adults: Unprecedented opportunities for social work. *Health & Social Work, 31*( 4),243-6.
- Raymond, J. (2007). How to talk about aging. *Newsweek, June 18, 2007, 59.*
- Sisco, S., Volland, P., & Gorin, S. (2005). Social work leadership and aging: meeting the demographic imperative. *Health & Social Work, 30*( 4),344-7.
- Zlotnik, J., Vourlekis, B., & Galambos C. (2006). Improving psychosocial care in nursing home settings: The next challenge. *Health & Social Work, 31*( 2), 183-6.

### **Week 13: 4.19.2017**

#### **Special Topics in Health Care Social Work Practice VI: Compassion Fatigue & Self-Care**

##### **Required Reading:**

- Cassel, E. J. (2001). The nature of suffering and the goals of medicine. In Weinberg, M. (Ed). *Medical ethics: Applying theories and principals to the patient encounter.* (pp.230-240). Amherst, NY: Prometheus Books.
- Adams, R. A., Figley, C. R., & Boscarion, J. A. (2008). The Compassion Fatigue Scale: Its use with social workers following urban disaster. *Research on Social Work Practice, 18*(3), 238-250.
- Radley, M. & Figley, C.R. (2007). The social psychology of compassion. *Journal of Clinical Social Work, 35*, 201-14.

### **4.26.2017**

#### **\*\*\*Assignment III Due\*\*\***

#### **Health Care Reform and Future Directions for Social Work Health Care Practice**

##### **Required Reading:**

**TBD**