

SAN DIEGO STATE UNIVERSITY SCHOOL OF SOCIAL WORK

Syllabus SW 781:

Seminar—Psychosocial Rehabilitation

For Individuals with Serious Mental Illness

Spring 2009

Mondays: 4:00 - 6:40 p.m. in HH146

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I. *Purpose and Description of Course*

This course is designed for students interested in working with individuals who have been diagnosed with severe mental illness. The course will focus on different practice approaches to this population with an emphasis on evidence-based models of psychosocial rehabilitation and recovery.

Class will consist of a combination of lecture, discussion, and student presentations. Audiovisual presentations and guest speakers will be utilized as appropriate. Students are expected to be prepared for class and participate actively in the learning process. In addition to their presentation (see below) students will be expected to draw from their own experiences with individual clients to illustrate course content and skill development.

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II. *Course Objectives*

Upon completion of this course students will be able to:

1. Identify characteristics of the population, including demographic factors, with special attention to poverty, racial and ethnic minorities and women.
2. Assess the relationship between culture and diagnosis.
3. Articulate an overview of schizophrenia and affective disorders, and understand the implications for utilizing different treatment modalities.
5. Define social rehabilitation models, and understand their conceptual differences from the medical model.
6. Apply assessment techniques in psychiatric rehabilitation.
7. Apply appropriate goal setting and establish priorities with this population of clients.

Course Competencies

1. Articulate an overview of schizophrenia and affective disorders as defined by the DSMIV-TR, and include this knowledge when considering different treatment modalities as evidenced by class discussion and exercises.
2. Assess clients' skill and resource level in the different areas necessary for community functioning, such as assertiveness skills, communication skills, job seeking skills, parenting skills, etc., as evidenced by an in-class exercise and course assignments.
3. Utilize these assessments to develop goal-directed strategies based on different modalities, with an emphasis on social rehabilitation and recovery, as evidenced by course assignments.
4. Identify characteristics of the population, including demographic factors, with special attention to poverty, racial and ethnic minorities and women, as evidenced by class discussion and an in-class exercise.
5. Develop culturally and linguistically appropriate treatment goals, critically evaluate interventions across diverse groups, and demonstrate an understanding of the issues surrounding work with interpreters, as evidenced by course assignments and discussions.
6. Demonstrate an awareness of the prevalence of co-occurring mental health and substance abuse issues, understand the impact of substance abuse on major mental health disorders, and be able to include this knowledge in assessment and treatment planning with consumers, as evidenced by course assignments.
7. Articulate the strengths and limitations of the evidence-based practices paradigm and be able to apply it to interventions with seriously mentally ill populations to support positive outcomes, as evidenced by a group assignment.

8. Articulate an awareness of and sensitivity to the stigma that is associated with mental illness and its effects on those diagnosed with severe mental illness and their families, as evidenced by class discussions and exercises.
9. Evaluate potential bias in clinical assessment instruments and critically interpret findings within the appropriate cultural, linguistic and life experience context of the consumer, as evidenced by course assignments.
10. Integrate knowledge of the principles of integrated services, continuity of care, integrated case management, collaboration and effective discharge from services in work with consumers and families, contrast these principles with the medical model of treatment, and synthesize the knowledge into a proposal for service adaptation, as evidenced by a group assignment.

III. *Textbooks - Readings*

A. *Required Textbooks (Available at the SDSU Bookstore):*

- Stout, C.E., & Hayes, R.A. (2005). *The evidence-based practice: Methods, models, and tools for mental health professionals*. New Jersey: Wiley & Sons.
- Walsh, J. (2000). *Clinical case management with persons having mental illness: A relationship-based perspective*. Belmont, CA: Brooks/Cole.
- Bellack, A., Mueser, K., Gingerich, S. & Agresta, J. (2004). *Social skills training for schizophrenia: A step-by-step guide*. New York: Guilford.

B. *Other Required Readings:*

NOTE: In addition to the texts, other required readings, as shown in the course outline, will be posted on the Blackboard site. It is the student's responsibility to regularly check the site to determine the required readings for the upcoming week.

The following books are recommended for students seeking additional background on working with the seriously mentally ill population. The professor can recommend additional resources within specific topic areas.

- Drake, R., Merrens, M., & Lynde, D. (2005). *Evidence-based mental health practice: A textbook*. New York: W.W. Norton.
- Green, M.F. (2001). *Schizophrenia revealed: From neurons to social interactions*. New York: W.W. Norton.
- Jackson, R.L. (2001). *The Clubhouse Model: Empowering applications of theory to generalist practice*. Belmont, CA: Brooks/Cole.
- Mosher, L., & Burti, L. (1994). *Community Mental Health: A practical guide*. New York: W.W. Norton & Company.

IV: *Course Assignments*

There are three assignments in this course: 1-Agency Paper and Panel Presentation (40% of the course grade), 2-In-class Assessment (20% of the course grade) and 3-Videotaped Skill and Written Summary (30% of the course grade). Class participation (10%) is measured by evaluations of presentations, speakers and videotaped skills.

ASSIGNMENT #1: Agency Paper and Panel Presentation (40% of course grade)

Overview:

The purpose of this assignment is for each student to gather information to document their perceptions and responses to the setting, program structure, service delivery approach, and attitudes regarding an agency that serves the severely mentally ill population. It is also intended to serve as a useful tool in evaluating collateral resources in the community, and as an opportunity to share these resources with fellow student professionals.

Each student will first choose a particular diagnostic group (1-schizophrenia, 2-bipolar disorder or major depression, or 3-co-occurring disorders) and a particular target population where there is an unmet need. The choice of diagnostic group will determine the composition of the panel discussion groups.

The target population may be defined by an aspect of the illness (e.g., cultural issues associated with the diagnosis, or the impact on family) or a subpopulation (e.g., those diagnosed with their first episode, or older adults or adolescents), or a treatment setting (school, etc.).

The choice of diagnostic area and particular target population must be finalized and approved by the instructor by Week 3.

NOTE: Every attempt will be made to accommodate each student's preferences, but in keeping with the learning goals, the instructor reserves the right to be sure that the panels are balanced and cover relevant target populations. BE PREPARED TO BE FLEXIBLE!

The first part of the assignment requires each student to visit a local agency that focuses on psychosocial rehabilitation, gather and summarize information, and write a critique of the agency in terms of the mission, goals and model used by the program within the context of the published literature for the chosen population (see details in next section).

The second part of the assignment requires the student to propose a new program or treatment expansion for the particular target group they have chosen. A proposal outline will be submitted separately as Part 2 of this assignment, and will be presented in the panel discussion with all other students who have chosen the same general diagnostic group. **Each student within the three the general diagnostic areas must choose a different target population** (see details in next section). For example, if you choose major depression/bipolar disorder as your diagnostic area, your particular target group must be distinct from all other students who choose the major depression/bipolar disorder diagnostic area.

Part 1 (critique) and Part 2 (proposal outline) will be graded together and will be worth 40% of the course grade.

Agency Paper Part 1: Agency Visit and Critique (DUE MARCH 2)

NOTE: The information gathered will be used as the basis for your panel presentation in terms of a documented need for a new agency or an expanded service. Therefore, be sure to consider your topic area and target population as you choose your agency.

Depending upon the number of students in the class you will form teams of 2-3 students and arrange to visit a psychosocial rehabilitation center in the San Diego area. A list of examples is provided in Appendix B, but this is not an exhaustive list. You may visit programs that are not on the list as long as they focus on rehabilitation and recovery.

This is not a group assignment. The purpose of forming the group will be to minimize the disruption to the agency by having one interview/visit scheduled per semester. Beyond the group interview/visit with the agency representative, all written work and observations will be made independently.

NOTE: Students may not select an agency or program where they are currently interning or where they have previously served as an intern or been employed. If you attended the MHTP tour of The Village in Long Beach, it may serve as a comparison to the program chosen in the San Diego area, but it may not be used as your agency choice.

After organizing schedules within the team, one team member should contact the person in charge, and clearly identify him/herself as a SDSU School of Social Work MSW student. Arrange a time when all members of the team can visit the agency.

During your visit, you will all be adopting the role of social workers that are learning about community resources for the seriously mentally ill. Each team member will make independent observations, and will gather material that is individually determined to be important in understanding the functioning of the agency. As you make your observations, think about the target population that you have chosen and if they would be best served in this setting and model, and what populations/problems/treatment issues would or would not be appropriately addressed. While many agencies may operate from a similar model, inquire about and describe the **unique aspects** that the individual program offers within the general model.

If possible and appropriate, tour the facility. Gather relevant documents about the agency that are available to the public and other professionals. If a tour is not possible, include that in your report and make every effort to observe aspects of the agency that will help you to form impressions about the program. Include in your paper how you felt during your visit there – e.g., did it feel like a comfortable place to you? The goal is access multiple and distinct sources of information: your observations, the perspective of the agency representative, written materials provided by the agency.

While each student will gather different information, all students should, at a minimum, obtain the following information during the interview with an agency representative and use it in your critique.

From the representative's perspective:

- **Description of the agency and/or program;**
- **Description of the program's mission;**

- Agency definition of psychosocial rehabilitation;
- What particular model or combination of models their program follows;
- Perspective on the role of social workers at the agency;
- Cultural make-up of clients and staff;
- Impact of client's culture on interactions within program, if any;
- What skills are important for those interested in working with the population;
- What they feel are the major strengths of the agency;
- What they would like to see change about the program.

From the student's perspective:

- Personal reactions to setting, clients, staff
- Observations of relevant interactions, implementation issues
- Strengths, limitations of observations

From course readings and other scholarly literature:

- Background on goals, ideals of the model used by the agency
- EBP with the diagnostic area and target population chosen

Based on the information gathered at the agency and your observations, each student will write a brief critique of the agency. A summary of the information you gathered will be placed in a table or in bullet form in an appendix. The critique will include your subjective impressions, both positive and constructive, and the perspectives provided by the agency representative. These personal accounts will be integrated with **course readings and other scholarly literature about evidence-based practices** for the diagnostic area and with the target population you have chosen, and the degree to which best practices are utilized both in principle (goals, missions, etc.) and in the implementation of the program.

The critique (Part 1) should be about 5-6 pages in length -- double-spaced, 1" margins, all in APA format). Any accompanying documentation may be placed in an appendix. The title page, abstract, reference list and appendix are not included in the page limit.

Students should write as if the papers were to be presented to other social workers in the professional community. Students are expected to write at a graduate level and produce a clear, well-organized paper, with correct grammar and spelling. Proper citation of source material is required. The written assignments should follow the stylistic guidelines suggested by the Fifth Edition of the APA manual.

You will be graded on the comprehensiveness and clarity of the critique, organization of the paper, the relevance of the content to your chosen topics, clarity of presentation of impressions vs. evidence (written or observed), comprehensiveness and creativity of the paper as a whole, the degree to which course materials and other literature is integrated into the paper and writing skills.

Part of the challenge of professionalism is to develop succinct writing skills that incorporate key elements; please do not write beyond the maximum page limit as that content will not be evaluated.

Agency Paper Part 2: Proposal Outline Documenting an Unmet Need for a Particular Target Population (DUE APRIL 20 FOR ALL STUDENTS)

In Part 1 of this assignment, each student selected both a diagnostic area and a selected a particular target population. An agency visit and critique of the agency for the chosen population was completed.

Part 2 of this assignment builds on the critique of the agency visit. The goal is to identify a gap in existing services for a particular population within one of the major mental illness categories (e.g. a new agency needs to be created or an existing agency needs to expand services to meet the need for this particular target population).

The student will integrate knowledge of the selected general diagnostic area and the particular target population and prepare a proposal outline for additional services. Students should utilize the paradigm of evidence-based practices in their search for support for their proposal.

Each diagnostic area has been assigned to one of three class periods (April 20, April 27, and May 4-see Course Outline). Panel members will each **briefly** present their proposals regarding new programs/expanded services during the designated class period. Discussion with the class will follow the presentations. Students should be prepared to discuss, answer questions and elaborate on their executive summary or outline during the class discussions.

The proposal outline (due April 20), Part 2 of the Agency Paper, should be appropriately referenced in APA style using course materials and other relevant sources regarding evidence-based practices. The outline for the proposal is presented below.

Proposal Outline:

An outline or executive summary of the proposed program/treatment expansion will be submitted to the instructor (as Part 2 of the agency paper, due on April 20) and to all class members at the time of the panel presentation.

Since each presentation will cover different topics due to the subpopulation or target population chosen, the material in the proposal outline will differ. But, at a minimum, the following elements must be included in the written proposal, in addition to the issues that relate directly to your chosen program/treatment expansion:

I. Need for Service

- Target population addressed
- Geographic area to be served
- Significance and background of the problem

- Data about the need for services, number of persons that may be affected, etc.
- Diagnostic issues (clarity, consensus, rule outs, misdiagnoses) for your specific area
- Etiology (both theoretical perspectives and empirical evidence if available)
- Prognosis (using any long term empirical studies available to support your discussion)
- Medication issues

II. Proposed Evidence-Based Intervention

****Best Practice (Evidence-Based) guidelines:** What does the literature indicate regarding effective interventions for your specific area of this diagnostic category? What modalities are most effective (Individual? Family? Self-help group)? What is the quality of the research that has been conducted (e.g., meta-analyses? Comprehensive reviews of the literature)?

- What are the major controversies/challenges, including ethical issues, regarding treatment of this population?
- Evidence-based model proposed
- Purposes, goals, objectives
- Adaptations needed to address differences (age, race, ethnicity, culture, language, sexual orientation, disability, gender)
- Make the case for why the new program/expansion of services will meet the needs of the target population

Assignment #2: In-Class Assessment (MARCH 23) (20% of course grade)

The purpose of the in-class assessment is to help students gain skill in the assessment of clients who are severely mentally ill by using both the DSM perspective and a psychosocial rehabilitation perspective. Completing the assignment in class using professional resources most closely emulates what will be required in mental health settings, and challenges students to produce a clearly written and organized handwritten product. This assessment is also designed to provide practice in assessing social skills and designing appropriate social skills training, as well as determining existing and needed resources.

The class will be presented with a case example. The assessment of this client will be completed in class. You may bring any resources that you feel would be useful to class, but no computers will be permitted. **Be sure to apply concepts and readings from class in your response. The Anthony article on Psychiatric Rehabilitation Diagnoses, DSM-IV-TR and the Social Skills textbook will be useful tools for this assignment.**

We will discuss the written responses in class, and the handwritten assessment will be submitted. As you will be evaluated on your organization and clarity of presentation, take time to outline or format your response, and take care to **write legibly**. Please focus on and include the following as a minimum response:

1: Presenting problem: Brief summary of client, including description of social system and pathology.

2: Traditional DSM IV multiaxial diagnosis: Your diagnosis should accurately reflect what you presented in the case summary.

3: Psychiatric Rehabilitation Diagnosis as follows (please see the Anthony article in the course outline for further details and rationale):

A. Include overall rehabilitation goal and include four critical skills and the definition (operationalization) of each one: for example, if the needed skill is transportation, define it as “needs to take the bus”, “needs to learn to drive”, etc. Be as specific as possible and indicate the degree to which the skill currently exists in your assessment. At least one of the four skills should be one that is not present. **Discuss specific skill development strategies that you would use to help the client develop this skill and the rationale for its inclusion.** The Social Skills text may be used here.

B. Include four critical resources and the definition of each one: for example, if a critical resource is parental support, define it as number of times it is needed for your client. Be as specific as possible and indicate the degree to which the resource currently exists in your assessment. At least one of the four resources should be one that is not present. **Discuss how you would help your client access/develop this resource and the rationale for its inclusion.**

4: Brief treatment plan for the client.

For this assignment, students may receive a grade of:

No credit (0) (includes late or missing exercises);

Completed the assignment but did not meet minimum expectations (1);

Met the minimum expectations (2);

Surpassed the minimum expectations (3).

These grades will roughly correspond to grades of: 0=F; 1=C or C+; 2=B or B+; 3=A- or A.
These grades are consistent with the School of Social Work grading policy.

#3 SOCIAL SKILLS TRAINING ASSIGNMENT

VIDEO DEMONSTRATION AND WRITTEN SUMMARY OF SOCIAL SKILLS

TRAINING: (VIDEO CLIPS DUE BY MARCH 27) (30% of course grade)

The purpose of this assignment is to provide students with the opportunity to apply a manualized evidence-based intervention in a simulated practice setting, and to critique the social skills training (SST) competency of other students. The assignment consists of a written summary (including assessment of social skills for a client at their internship and the individualized SST approach created for the consumer), and videotaped segments demonstrating their SST session. See Appendix E for the detailed assignment.

#4 CLASS PARTICIPATION: (10% of course grade)

This seminar course requires students to participate in meaningful and engaged interaction during the class sessions, and goes beyond attendance, which is expected. Evidence of participation in the class will be demonstrated by completing evaluations of other students' presentations, as well as guest speakers in the course

Students who do not complete the evaluations by the due date, or on the date of the presentation (for group presentations and guest speakers) will not receive credit: i.e., **no late evaluations will be accepted.**

1. **Student SST Evaluations: (DUE APRIL 13)** Each student will evaluate 2-videotaped sessions created by other students. The professor will randomly assign the videos to students. The evaluation form will be distributed during the semester.

2. **Speaker & Group Presentation Evaluations: (DUE AT END OF EACH PRESENTATION)**

Each student will complete a Presentation Feedback form after each of the group presentations they observe. This is intended to help students gain further understanding of their presentation skills. **This form will be available on Blackboard and must be used to receive credit for the evaluation and the evaluations must be turned in immediately after the presentation. No late evaluations or evaluations on other paper/forms will be accepted for credit.**

Students will also complete an evaluation form for 2 guest speakers that will present to the class, with the same guidelines as stated above (Blackboard form must be used; form must be turned in immediately after the presentation).

Credit for the evaluations is based on critical thinking, comprehensiveness, effort, and ability to provide constructive criticism, as well as the degree to which students actively and appropriately engage with the group presentations or guest speakers, and contribute to class discussions throughout the course.

The evaluations will be graded as a whole at the end of the semester using the same grading guidelines as other assignments (begin with a B; exceptional contributions/comprehensive evaluations would be an A- or A; less than the minimum would be B- or below). The evaluations will not be returned to the student unless requested. The SST, group presentation evaluations, group presentation evaluations plus the guest speaker evaluations will comprise the 10% Student/Speaker Evaluation grade.

V. Teaching Methods and Class Policies

Course competencies will be achieved through conceptual and experiential means. The instructor will use lectures, class discussion of selected readings, videotapes, written assignments, and guest speakers as teaching methods. Although the primary responsibility for introducing, organizing, and explaining course content rests with the instructor, it is expected that students will take responsibility for their own learning, incorporate critical thinking skills, show professional respect to the instructor and to each other, and help create a classroom atmosphere that facilitates the teaching/learning process.

A. Grading

Grades will be administered in accordance with the policies set forth in the Graduate Bulletin, based on the following grading scale:

95 - 100% of possible points= A	73 - 76% = C
90 - 94% = A-	70 - 72% = C-
87 - 89% = B+	67 - 69% = D+
83 - 86% = B	63 - 66% = D
80 - 82% = B-	60 - 62% = D-
77 - 79% = C+	59% and below = F

The final grade for the course will be based on the student's performance on the required assignments: (a) Agency Visit Paper, (b) Individual Presentation, (c) Panel Presentation, (d) In-Class Assessment and Class Participation. Grades will be determined in accordance with the following guidelines:

1. Grades of A or A- are reserved for student work that not only demonstrates very good mastery of content, but also shows that the student has (a) undertaken complex tasks, (b) applied critical thinking skills to the assignment, and/or (c) demonstrated creativity in her or his approach to the assignment. The degree to which the student demonstrates these skills determines whether he/she receives an A or an A-.
2. A grade of B+ is given to work that is judged to be very good. This grade denotes that a student has demonstrated a more-than competent understanding of the material being tested in the assignment.

3. A grade of B is given to student work that meets the basic requirements of the assignment. It denotes that the student has done adequate work on the assignment and meets the basic expectations of the course.
4. A grade of B- denotes that a student's performance was less than adequate on an assignment, reflecting only moderate grasp of content and/or expectations.
5. A grade of C reflects a minimal grasp of the assignments, poor organization of ideas and/or several significant areas requiring improvement.
6. Grades between C- and F denote a failure to meet minimum standards, reflecting serious deficiencies in a student's performance on the assignment.

Assignment 1:

Agency Paper and Panel Presentation	40%
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Assignment 2:

In-Class Assessment	20%
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Assignment 3:

SST Video & Summary	30%
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Class Participation:

SST, Group & Speaker Evals	10%
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100%

B. Attendance/Participation Policies

1. *Attendance* is expected. Learning in a seminar format requires diligent study of assigned readings, active participation in class discussions and attendance, particularly when guest speakers are scheduled. Absences and partial class attendance can significantly interfere with students' ability to meet course objectives and may impact the participation grade. Students are expected to come to class on time and stay for the entire class session. They should notify the instructor in advance if they need to miss class, arrive late, or leave early. They are responsible to ensure that they sign the attendance roll distributed by the instructor at each class.
2. *Absences*. The instructor will excuse absences resulting from verified unforeseen circumstances (e.g., illness, family emergency, unavoidable commitments). Students should obtain lecture notes from another student if they miss class and check with the instructor to see if a make-up assignment is needed. School of Social Work policy dictates that fieldwork should not conflict with class time. Please note that although responding to a client crisis at the field placement is a reasonable excuse for missing class; attending an agency staff meetings or trainings is not. In *rare* circumstances, a student might be excused from class to

attend a professional development conference/workshop, provided the content of the workshop relates directly to the content of the course. In this case, students are encouraged to share what they learned with their classmates.

C. Policies Related to Required Assignments

1. *Off-campus assignment:* This course requires students to participate in research or studies that include course work that may be performed off-campus (i.e., participation in a small group to organize Assignment #1). Participation in such activities may result in accidents or personal injury and therefore requires a signature on the “*Warning, Waiver and Release of Liability*” that will be passed around in class (see Appendix D). Students participating in these events are aware of these risks. They agree to hold harmless San Diego State University, the State of California, the Trustees of the California State University and Colleges and its officers, employees and agents against all claims, demands, suits, judgments, expenses and costs of any kind on account of their participation in the activities. Students using their own vehicles to transport other students to such activities should have current automobile insurance.

2. *Due dates and late papers.* Written assignments must be handed in on the specified due date at the beginning of the class period. Late papers may not be accepted. Students should assertively communicate any concerns that may prevent completion of the assignment. They should inform the instructor in advance if unforeseen circumstances beyond their control (e.g., severe illness, family emergency) prevent completion of work. If students cannot complete the assignment by the due date, they should inform the instructor immediately and set up a meeting to develop a plan and time frame for completion of the work.

3. *Incomplete grade.* On rare occasions (e.g., severe illness, family emergency), an “incomplete” grade may be granted, as long as the student does NOT have to make up more than 30% of the required course work. If a student is unable to complete the assignments of the course, he/she should contact the instructor to request an Incomplete. If the instructor agrees that the circumstances justify granting an “Incomplete,” a written contract between the student and the instructor will be drawn up specifying the actions needed to complete the course and a time line for completion. The student and the instructor must both sign the contract.

4. *Disabilities.* The San Diego State University School of Social Work abides by the Americans with Disabilities Act of 1990. Students who have disabilities that can potentially impact their academic performance may request special accommodations by contacting the SDSU Disabled Students Services (DSS) and receiving an evaluation. If DSS determines that a student has a disability and is therefore eligible to receive special accommodations (e.g., extended time for taking the Exam), it is the student’s responsibility to inform the instructor. Students who are eligible for special accommodations should meet with the

instructor and provide the necessary paperwork from DSS.

5. *Return of written assignments.* Written assignments may be retrieved from the instructor at the end of the semester after grades have been submitted. The instructor will mail corrected papers back to students if they provide a self-addressed stamped envelope. Materials will be held for up to one semester following the end of class.

D. Policies Related to the NASW Code of Ethics.

The NASW Code of Ethics (Revised, 1996) is an academic standard at the SDSU School of Social Work and should guide students in maintaining professionalism in the practice class and in their field placement. Adhering to the Code of Ethics includes (a) placing clients' interests in highest priority, (b) maintaining confidentiality, (c) demonstrating appropriate professional boundaries, (d) treating one's colleagues with respect, and (e) maintaining standards of honesty and integrity.

1. *Confidentiality of clients.* Students are expected to change all identifying information for the client they use for the Case Study. They also should protect client confidentiality when discussing client situations with the entire class or in discussion groups.
2. *Use of language.* Students should be careful not to contribute unintentionally to myths about mental illness and disability. They should avoid using any language that labels people or equates them with the conditions they have (e.g., "a schizophrenic," "a borderline," or "the disabled") or language that implies that the person as a whole is disordered (e.g., "disabled persons," "an ADHD child," "a learning disabled child"). Students should use terminology that preserves the integrity of the person (e.g., "an individual diagnosed with schizophrenia," "an individual diagnosed with borderline personality disorder," "people with disabilities," "a child diagnosed with Attention Deficit Hyperactivity Disorder," a child who has a learning disability"). Negative terms should also be avoided (e.g., "stroke victim" "a child confined to a wheelchair"); instead state "a person who experienced a stroke" or "a child who uses a wheelchair."
3. *Professional boundaries.* Professional communication involves interacting with others in an assertive, genuine way that respects the privacy of others and is considerate of their needs. Students should be careful to maintain appropriate boundaries and should monitor their level of self-disclosure in small discussion groups and with the entire class. They should limit self-disclosure to information that can be appropriately and safely shared in an academic setting and should generally avoid self-disclosing information that is highly personal and sensitive. In some situations, sharing highly personal information may be appropriate if it directly relates to the course content being discussed and is useful in enhancing learning. If students elect to share highly personal information, they should practice "conscious use of self" and ensure that the information they wish to

disclose directly applies to the course content being discussed and that sharing the information is likely to enhance the learning of their classmates.

4. *Confidentiality of colleagues / limitations to confidentiality.* Students should generally respect the privacy of their classmates and keep confidential personal information that they disclose. However, they should be aware that information disclosed in a classroom is subject to the same limitations as in social work practice (i.e., harm to self or others, evidence of child/elder abuse/neglect). They have a responsibility to take action if they become aware that a classmate has personal problems that present a risk of self-harm or behaviors that could harm others. Should they encounter a situation involving the impairment of a classmate, students should follow the guidelines established by the Code of Ethics:
 - “Social workers who have direct knowledge of a social work colleague's impairment that is due to personal problems, psychosocial distress, substance abuse, or mental health difficulties and that interferes with practice effectiveness should consult with that colleague when feasible and assist the colleague in taking remedial action” (NASW, Revised 1996, Section 2.09).
 - “When, after consultation, colleagues fail to take action to address their impairment, the Code of Ethics specifies that social workers “should take action through appropriate channels established by employers, agencies, NASW, licensing and regulatory bodies, and other professional organizations” (NASW, Revised, 1996, Section 2.09).
 - In the SDSU School of Social Work, informing the instructor is the “appropriate channel” for taking action when a classmate has failed to address his/her impairment due to personal problems, psychosocial distress, substance abuse, or mental health difficulties. The instructor will request an interview with the student(s) involved. Should the interview raise questions about a student’s ability to manage the stress of the MSW program and/or perform appropriately in the field placement, the instructor will discuss with the student whether to inform with the Graduate Advisor, the student’s assigned Faculty Liaison, and/or the Coordinator of Field Education about the concerns.
5. *Respect for colleagues.* Students are expected to respond to opinions expressed by other in the class professionally and respectfully. They have an obligation to respect the rights of others to hold their opinions and have them heard if they so desire. Each student has the right to disagree with the opinions of others, including the instructor, but should do so in a sensitive, respectful, and meaningful manner (e.g., “I have a different opinion.” “I see things differently.”).
6. *Honesty/integrity.* The NASW Code of Ethics asserts that social workers should “behave in a trustworthy manner” and “not participate in, condone, or be associated with dishonesty, fraud, or deception” (NASW, Rev 1996, Ethical Principles & Section 4.04). Social work students should conduct themselves in a manner consistent with this social work value of integrity and avoid all forms of academic misconduct including cheating, plagiarizing, stealing course

examinations, falsifying data, and intentionally assisting another individual in any of those actions. Note these definitions:

- Cheating includes (a) giving or taking exam answers to or from another student, (b) copying another student's paper (in part or in its entirety), and (c) falsifying one's own or another student's class attendance.
- Plagiarism is "formal work publicly misrepresented as original; it is any activity wherein one person knowingly, directly and for lucre, status, recognition, or any public gain resorts to the published or unpublished work of another in order to represent it as one's own. Work shall be deemed plagiarism (1) when prior work of another has been demonstrated as the accessible source; (2) when substantial or material parts of the source have been literally or evasively appropriated (substance denoting quantity; matter denoting qualitative format or style); and (3) when the work lacks sufficient or unequivocal citation so as to indicate or imply that the work was neither a copy nor an imitation. This definition comprises oral, written, and crafted pieces. In short, if one purports to present an original piece but copies ideas word for word or by paraphrase, these ideas should be duly noted" (Lindey, as cited in the Bulletin of the Graduate Division, San Diego State University, 2000-2001, p. 40).
- Code of Ethics. Students should be careful to give appropriate authorship credit to anyone from whom they have obtained information for written assignments, including citing books, journal articles, Internet websites, class lectures, professional colleagues, or classmates. The NASW Code of Ethics states the following in regards to plagiarism: "Social workers should take responsibility and credit, including authorship credit, only for work they have actually performed and to which they have contributed. Social workers should honestly acknowledge the work of and the contributions made by others." (NASW, 1996).
- Consequences for academic misconduct. Academic misconduct will be handled according to University policy. Students who are found plagiarizing the works of others or committing other forms of academic misconduct will be subject to standards set forth by the University. Such action could result in failing the assignment, failing the class, or expulsion from the University. Please refer to the Bulletin of the Graduate Division for additional information.
- Procedure in the event of cheating or plagiarism. A student who is found cheating or plagiarizing will be asked to meet with the instructor and with the Graduate Advisor to determine which of the above consequences will be implemented.
- Preventing plagiarism. If students have questions or are unclear about how to incorporate and cite the work of others, they should consult with the instructor.

VI. *Course Outline and Assignments*

Please note: Topics and dates may be changed by Dr. Mathiesen

Code: S & H=Stout & Hayes text; W=Walsh text; B=Bellack text

Session	Topic of Discussion	Assignments
<p>Session 1 January 26</p>	<p><u>Unit 1. Background</u></p> <p>Introduction to Course</p> <p>Discussion of Assignments Topics and populations for Panel Presentation</p> <p>Review of ethics and professionalism</p> <p>Theoretical and historical perspectives on mental illness: What is serious mental illness?</p>	<p>Required Readings:</p> <p>NASW Code of Ethics</p> <p>W:</p> <p>Ch. 6: Persons with schizophrenia Ch. 7: Persons with bipolar disorder Ch. 8: Persons with major depression</p> <p>On Blackboard: Lehman Goldman, Dixon, and Churchill: Evidence-based mental health treatments and services: Examples to inform public policy Guardian: Rosenhan replicated.</p>
<p>Session 2 February 2</p>	<p><u>Unit 2: Principles</u></p> <p>Principles of Evidence-Based Mental Health</p> <p>Social Skills Training as an EBP: Assessment and teaching</p> <p>Rehabilitation and Recovery</p>	<p>Required Readings:</p> <p>S & H: Hayes, R.A.: Ch. 1: Introduction to E-B practices</p> <p>Bruce, T.J. & Sanderson, W.C.: Ch. 10: E-B psychosocial practices: Past, present and future</p> <p>Zahniser, J.H.: Ch. 6-Psychosocial rehabilitation</p> <p>Rogers, E.S., Farkas, & Anthony, W.A.: Ch. 9: Recovery from severe mental illnesses and E-B practice research</p> <p>Bellack Text: Ch. 1: Schizophrenia and social skills Ch. 2: Social skills training as an EBP Ch. 3: Assessment of social skills Ch. 4: Teaching social skills</p>

<p>Session 3 February 9</p>	<p><u>Unit 3. Implementation Issues</u></p> <p>Starting a Social Skills Training Group (cont.)</p> <p>Developing Sustainable EBP Systems</p> <p>Psychiatric Patient Rights</p> <p>How cultural differences affect psychiatric treatment</p> <p>Diagnosis and Culture: DSM-IV</p> <p>Video: Adele Lynch, Patient Advocacy Program University of San Diego</p> <p>**DIAGNOSTIC AREA AND TARGET POPULATION MUST BE FINALIZED**</p>	<p>Required Readings:</p> <p><u>S & H:</u> Stout, C.E.: Ch. 11: Controversies and caveats</p> <p><u>Bellack Text:</u> Ch. 5: Starting a skills group Ch. 6: Using curricula for SST groups</p> <p>On Blackboard: Jenkins & Carpenter-Song: The new paradigm of recovery from schizophrenia: Cultural conundrums of improvement without cure.</p> <p>Whaley & Davis: Cultural competence and EBP in MH services</p> <p>Roe et al.: Patients' and staff members' attitudes about the rights of hospitalized psychiatric patients.</p>
<p>Session 4 February 16</p>	<p><u>Unit 3. Implementation Issues (cont.)</u></p> <p>Individualizing SST for clients (cont.)</p> <p>Clinical Case Management</p> <p>Family Involvement</p> <p>Video: Alex Kopelowicz</p>	<p>Required Readings</p> <p><u>S & H:</u> Jewell, T.C., McFarlane, W.R., Dixon, L. & Miklowitz, D.J.: Ch. 4: E-B Family services for adults with severe mental illness</p> <p><u>Bellack Text:</u> Ch. 7: Tailoring skills for individual needs Ch. 8: Troubleshooting: Common problems and challenging clients</p> <p><u>W:</u> Ch. 1: An introduction to clinical case management Ch. 2: Policy context of case management Ch. 4: Social support theory and community context of practice</p> <p>On Blackboard: Lieberman & Kopelowicz: Teaching persons with severe mental disabilities to be their own case managers. Kopelowicz & Lieberman: Integrating treatment with rehabilitation for persons with major mental illness.</p>

<p>Session 5 February 23</p>	<p><u>Unit 4: The Practices</u></p> <p>Introduction to Co-Occurring Disorders</p> <p>Integrated Services Program capacity for treating clients with COD Integrated Services exercise and discussion</p>	<p>Required Readings:</p> <p>Review assigned readings for Weeks 1-4</p> <p><u>S & H:</u> Corrigan, McCracken and McNeilly Ch. 7: Evidence-Based Practices for People with Serious Mental Illness and Substance Abuse Disorders</p> <p><u>On Blackboard:</u> COD Handouts, exercise will be placed on Blackboard</p>
<p>Session 6 March 2</p>	<p><u>Unit 4: The Practices (cont.)</u></p> <p>Supported Employment</p> <p>Video: Judith Cook: Supported Employment</p> <p><u>**AGENCY PAPER PART 1 DUE**</u></p>	<p>Required Readings:</p> <p><u>S & H:</u> Razzano, L.A. & Cook, J.A.: Ch. 2: E-B Practices in supported employment</p>
<p>Session 7 March 9</p>	<p><u>Unit 4: The Practices (cont.)</u></p> <p>Assertive Community Treatment (ACT)</p> <p>Implementing Evidence-Based Practice</p> <p>Guest Speaker: Troy Boyle Director of the IMPACT Program Community Research Foundation</p>	<p>Required Readings:</p> <p><u>S & H:</u> Boust, S.J., Kuhns, M.C., & Studer, L.: Ch. 3: Assertive community treatment Hayes, R.A.: Ch. 12: Evaluating readiness to implement E-B practice</p> <p><u>On Blackboard:</u> Gomory: A critique of the effectiveness of assertive community training. Burns: In reply. Rosenheck & Neale: In reply. Test: In reply.</p> <p>Trudel & Lesage: Care of patients with the most severe and persistent mental illness in an area without a psychiatric hospital. Frese et al: Integrating EB practices and the recovery model.</p> <p><u>W:</u> Ch. 16: Effective leadership in treatment groups</p> <p>Ch.17: Facilitating self-help groups.</p>

<p>Session 8 March 16</p>	<p><u>Unit 4. The Practices (cont.)</u></p> <p>Fidelity Issues in ACT</p> <p>Guest Speakers:</p> <p>Debbie Malcarne Ann Park</p> <p>Illness Management and Medications</p> <p>Psychiatric Rehabilitation Programs</p> <p>Soteria and Other Alternatives to Acute Psychiatric Hospitalization</p>	<p>Required Readings:</p> <p>On Blackboard: Minkoff: Developing standards of care for individuals with co-occurring psychiatric and substance use disorders.</p> <p>McHugo, Drake et al.: Fidelity outcomes in the National Implementing EBP Project</p> <p>S & H: Saeed. Ch. 5: Evidence-Based Psychopharmacotherapy: Medication Guidelines & Algorithms</p> <p>W: Ch. 3: Symbolic interactionism and relationship development Ch. 5: Case manager and psychotropic medications</p> <p>On Blackboard: **Anthony: Assessment in psychiatric diagnosis. (Required to complete in-class assessment)</p> <p>Gold Award: A community-based program providing a successful alternative to acute psychiatric hospitalization</p>
<p>Session 9 March 23</p>	<p><u>Unit 4. The Practices (cont.)</u></p> <p>Family Interventions</p> <p>Developing Strategies for Agency Change</p> <p>Assignment #2: In-Class Assessment</p> <p>***Video Clips must be turned in by March 27</p>	<p>Required readings:</p> <p>W: Ch.14: The family education and support group Ch. 12: Engaging the family of the person with mental illness</p> <p>S & H: Hayes, R.A.: Ch. 14: Build your own best practice protocols Hayes, R.A.: Ch. 13: How to start with your agency, practice or facility</p>
<p>March 30- April 3— Spring Break</p>	<p><i>NO CLASS</i> <i>Spring Break: ENJOY!!!</i></p>	

<p>Session 10 April 6</p>	<p>No Class Meeting (COMPREHENSIVE EXAMS)</p> <p><u>Assigned Readings & In-Class Assessment will be discussed at next class meeting.</u></p>	
<p>Session 11 April 13</p>	<p><u>Unit 4. The Practices (cont.)</u></p> <p>Co-Occurring Disorders (cont.)</p> <p>Screening, assessment and treatment planning for clients with COD</p> <p>General strategies for working with clients with COD</p> <p><u>***Evaluations of Video Clips Due</u></p>	<p>Required Readings:</p> <p>S & H: Corrigan, P.W., McCracken, S.G., & McNeilly, C.: Ch. 7: E-B practices for people with serious mental illness and substance abuse disorders</p> <p>On Blackboard: COD handouts, exercises will be placed on Blackboard</p>
<p>Session 12 April 20</p>	<p><u>Unit 5. Presentation of Adapted/Expanded EBP</u></p> <p>**PROPOSAL OUTLINES (AGENCY PAPER PART 2) DUE FOR ALL STUDENTS**</p> <p>Stakeholder Panel #1</p> <p>Schizophrenia</p>	<p>Required Readings:</p> <p>W: Ch. 13: Case managers as family educators about mental illness</p>
<p>Session 13 April 27</p>	<p><u>Unit 5. Presentation of Adapted/Expanded EBP (cont.)</u></p> <p>Stakeholder Panel #2</p> <p>Bipolar Disorder/Major Depression</p>	<p>Required Readings:</p> <p>Review Bellack text</p>

<p>Session 14 May 4</p>	<p><u>Unit 5. Presentation of Adapted/Expanded EBP (cont.)</u></p> <p>Stakeholder Panel #3</p> <p>Co-Occurring Disorders</p>	<p>Required Readings:</p> <p>S & H: Lyons, J.S. & Rawal, P.H.: Ch. 8: E-B Treatment for children and adolescents</p> <p>Hayes, R.A.: Ch. 12: Evaluating readiness to implement E-B practice</p> <p>On Blackboard: Waghorn, Chant & King: Work related subjective experience among community residents with schizophrenia or schizoaffective disorder.</p>
<p>Session 15 May 11</p>	<p><i>Termination & Evaluation</i></p> <p>Subjective Experience of Schizophrenia</p> <p>Guest Speakers: Consumer Panel</p> <p>CONGRATULATIONS!! SEE YOU AT GRADUATION!</p>	

APPENDIX A

References (* = available on Blackboard)

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APPENDIX B

EXAMPLES OF PROGRAMS AND CONTACT PERSONS

1. Central Region

THE CORNER CLUBHOUSE
2852 UNIVERSITY AVENUE
TEL: 619 683 7423

THE MEETING PLACE
4034 Park Blvd
SAN DIEGO CALIFORNIA 92103
Tel: 619 294 9582

2. South Central Region

FRIENDSHIP CLUBHOUSE
386 EUCLID AVENUE SUITE 102
SAN DIEGO, CALIFORNIA 92114-3679
TEL: 619 266 2111 X. 115 (or X. 106)

3. South Region

VISIONS
5th & H STREET
CHULA VISTA
TEL: 619 420 8603

CASA DEL SOL
1157 30th STREET
SAN DIEGO
TEL: 619 429 1937

4. East Region

EAST CORNER CLUBHOUSE
1060 ESTES STREET
EL CAJON, CALIFORNIA 92020
TEL: 619 440 5133

5. North Region

ESCONDIDO CLUBHOUSE
474 WEST VERMONT AVENUE
ESCONDIDO, CALIFORNIA 92025
TEL: 760 737 7125

MARIPOSA CLUBHOUSE
560 GREENBRIER DRIVE SUITE 107
OCEANSIDE, CALIFORNIA 92054
TEL: 760 439 6006

APPENDIX C

WARNING, WAIVER AND RELEASE OF LIABILITY

DATE: _____

I understand that participation in the _____ will require participating in off campus events.

I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which may have, or which hereafter accrue to me, against San Diego State University (the University) as a result of my participation in the event. This release is intended to discharge the University, its trustees, officers, employees and volunteers, and any public agencies from and against any and all liability arising out of or connected in any way with my participation in the event. I further understand that accidents and injuries can arise out of the event which may cause personal injury; knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all of the persons or agencies mentioned above who might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. It is the intention of the parties hereto that the provisions of this paragraph be interpreted to impose on each party responsibility for their own negligence.

I acknowledge that I have been fully informed of the risks and dangers involved in these events.

I acknowledge that I have read and fully understand the above Warning, Waiver and Release of Liability.

I further acknowledge that the reasons for my being requested to sign this Release have been fully explained to me and that I understand them.

I am signing this Release on my own free will and I have not been influenced or coerced by any representative or employee of the state.

Must sign in blue or black ink

Printed Name of Participant

Address

Signature of Participant

Red ID (If Student, Staff or Faculty)

Today's Date

Signature of Parent or Guardian (if under 18 years of age)

Date

Contact in Case of Emergency

Telephone Number

APPENDIX D

Social Skills Training Assignment

The required text to be used for this assignment is: *Social skills training for schizophrenia: A step-by-step guide* (Bellack, A., Mueser, K., Gingerich, S., & Agresta, J., 2004).

The purpose of this assignment is to provide students with the opportunity to apply a manualized evidence-based intervention in a simulated practice setting, and to critique the social skills training (SST) competency of other students. The assignment consists of a written paper (including assessment of social skills for a client at their internship and the individualized SST approach created for the consumer), and videotaped segments demonstrating their SST session.

Trainer Responsibilities:

The student (trainer) will use a consumer from their internship as a basis for this assignment. No names or other identifying information, behaviors or characteristics may be used in order to protect confidentiality. The trainer is responsible for providing sufficient information to their student partner (student consumer) to assume the role in the videotape.

Written Product:

This assignment will include a brief (5-6 page or less) paper that details background information of the consumer to be assisted and the specific social skills training. There are 2 areas to be detailed in the paper: 1-background of consumer and assessment of social skills, 2-rationale and plan for a specific curriculum tailored to the consumer's needs. In part 2, two or three individual goals will be created, and each goal will have steps (skills) toward achieving that goal.

1-Assessment: This section should include relevant background information about the consumer to be assisted by the social skills training. Next is a summary of the assessment of the person's social skills as detailed in Chapter 3 of the text. Each student should use either the Social Functioning Interview or the Social Adaptive Functioning Evaluation (SAFE) as an assessment tool (see Appendix B of text for complete forms). The information may be directly obtained from a client if appropriate and approved by the student's supervisor, or answers may be inferred, based on the student's knowledge of the consumer. Summarize the assessment information. You should **include the completed assessment tools as an appendix.**

2-Rationale and plan: Based on the assessment of social skills, the trainer will provide a rationale for and description of two or three individual goals that would enhance the consumer's functioning and the specific social skill steps needed to achieve that goal. Curriculum Skill Sheets are in Part II of the text.

Then select two (2) social skills that you will demonstrate with your partner in the role of the consumer and videotape a simulated session. The selected skills should be chosen

with the understanding that other students will be viewing the tape to determine the competency of the trainer, which will include both verbal and non-verbal behaviors. The acquisition of the skill is not being judged, since the “consumers” are acting in that role.

Videotaped Product:

Each individual student trainer will be required to videotape a brief, simulated social skills training (SST) session with a student partner who will be in the role of the consumer. The videotaped segments will be submitted to the professor.

The school has a digital video camera and operator that may be used for the assignment. In general, students should plan to form dyads for this assignment; blocks of time for a classroom or conference room with camera and operator will be made available for student dyads to select as needed. Further details about the video scheduling will be provided in class as soon as possible.

Student Feedback on Video Sessions:

When all segments have been made available, the professor will randomly assign each student to critique 2 other students' videotapes. The feedback will be in the form of both narrative comments and a behavioral measure of the trainer. This behavioral measure will be provided to the class later in the semester, and will consist of observable measures (e.g. counts) of verbal and non- verbal behaviors.