# MISSISSIPPI VALLEY STATE UNIVERSITY DEPARTMENT OF SOCIAL WORK

# SW 600 Advanced Social Work Practice with Children and Families: Direct Practice

This document does not constitute a contract with the University. It contains guidelines only.

Academic Term and Year: Fall 2018-2019

**Course Prefix and Number:** SW 600 – HE1

Course Title: Advanced Social Work Practice with

Children and Families: Direct Practice

Credit Hours: 3

Days, Time and Location of class:

Daily- Online/Hybrid

Saturday 9:00 – 11:50

2<sup>nd</sup> Floor William Sutton Administration

Room 202

**Professor:** Vincent J. Venturini, Ph.D., LCSW

**Office Location:** Department of Social Work

William Sutton Administration Building,

Room 210

Office Hours: Monday: 9:00AM - 12:00 Noon

Tuesday: 9:00AM – 11:00AM Other times by appointment only.

**Office Phone Number:** (662) 254-3376

Main Office Number (662) 254-3365

**Email Address:**Bb Email

**Prerequisite:** All Social Work Foundation Courses

including Foundation Field Internship and

Field Seminar I

#### **Required Technology Skills:**

Students in the class are expected to be efficient in the use of computers, Basic computer skills, the internet, and PowerPoint.

#### CATALOG COURSE DESCRIPTION:

Preparation for specialized social work practice with children and families.

#### **COURSE DESCRIPTION**

This course is designed to prepare students to become specialized social workers in practice with children and families. Students will integrate a variety of direct practice roles into their practice. Using an ecosystems perspective, students will incorporate the knowledge and skills essential to conduct multi-dimensional assessments on complex issues that include biological and psychological aspects of clients. Students will also interpret the influences of social, cultural and spiritual factors both on the presenting problems of clients and possible solutions. They will also learn to evaluate, integrate, synthesize and apply theories that incorporate strengths-based and empowerment approaches to practice with children and families. Students will incorporate an understanding of rural culture and environmental dynamics into work with children and families.

#### DEPARTMENT OF SOCIAL WORK/MSW PROGRAM MISSION

The mission of the Department of Social Work at Mississippi Valley State University is to prepare graduates to practice with individuals in need and populations-at-risk in rural areas. The Master of Social Work (MSW) Program prepares students for professional social work practice at the micro, mezzo, and macro levels. Through the curriculum, the program instills in students advanced social work knowledge, values and skills in a manner which enables students to work with diverse populations in a wide range of settings. Concurrently, special emphasis is place on social work practice with impoverished minorities living in rural regions, such as the Mississippi Delta where the University is located and committed to serve, as well as rural areas globally. Within the framework of rural social work, the area of concentration is Child and Family Welfare.

#### PROGRAM GOALS

The goals of the Master of Social Work Program are:

- 1. Educate students for social work positions for advanced levels of practice with individuals, families, groups, organizations and communities.
- 2. Provide students with the necessary knowledge and skills for working with diverse populations, including oppressed, minority and rural populations.
- 3. Instill in students a professional social work identity and the values and ethics of the profession.

#### **COMPETENCIES**

- 1. **EPAS Competency: 2.1.1** Identify as a professional social worker and conduct oneself accordingly.
- 2. **EPAS Competency: 2.1.2** Apply social work ethical principles to guide professional practice.
- 3. **EPAS Competency: 2.1.3** Apply critical thinking to inform and communicate professional judgments.
- 4. **EPAS Competency: 2.1.4** Engage diversity and difference in practice.

- **5. EPAS Competency: 2.1.5** Advance human rights and social and economic justice.
- 6. **EPAS Competency: 2.1.6** Engage in research-informed practice and practice-informed research.
- 7. **EPAS Competency: 2.1.7** Apply knowledge of human behavior and the social environment.
- 8. **EPAS Competency: 2.1.8** Engage in policy practice to advance social and economic well-being and to deliver effective social work practice
- 9. **EPAS Competency: 2.1.9** Respond to contexts that shape practice
- 10. **EPAS Competency: 2.1.10(a)–(d)** Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities
- 11. **Rural Competency: 2.1.11** Demonstrate knowledge and skills to apply a biopsychosocial-cultural-spiritual perspective in advanced social work practice with children and families.
- 12. **Rural Competency: 2.1.12** Integrate knowledge of rural values and customs into autonomous social work practice with children and families.

# EXPECTED CORE COMPETENCIES & PRACTICE BEHAVIORS

<b>Course Competencies</b>	Practice Behaviors	Assessment of Practice Behaviors
<b>EPAS Competency: 2.1.1</b> Identify as a professional social worker and conduct oneself accordingly.	Function within clearly-defined professional roles and boundaries based on the needs of the client, the agency context, the type of services provided, and differential use of self. (2.1.1b)	Individual Assessment & Treatment Plan Group Therapy Intervention
	Demonstrate professional demeanor in behavior, appearance, and communication appropriate for the clinical relationship and setting. (2.1.1d)	Bio-psychosocial Assessment Bibliotherapy Intervention
EPAS Competency: 2.1.2 Apply social work ethical principles to guide professional practice.	Integrate the use of complex social work practice knowledge and skills in the application of social work values and ethics with children and families.  (2.1.2a)  Apply ethical decision-making skills in working with rural children and families. (2.1.2b)	Individual Assessment & Treatment Plan Group Therapy Intervention Bio-psychosocial Assessment Case Assessment

		& Documentation
<b>EPAS Competency: 2.1.3</b> Apply critical thinking to inform and communicate professional judgments.	Evaluate, integrate, synthesize, and apply theories, incorporating strengths-based approaches to practice with children and families. (2.1.3a)	Bio-psychosocial Assessment
	Critically evaluate, select, and implement evidence-informed assessment, intervention, and evaluation tools and techniques with rural children and families. (2.1.3b)	Bio-psychosocial Assessment  Individual Assessment & Treatment Plan  Group Therapy Intervention
	Communicate effectively, in oral and written form, with diverse clients and with other professionals. (2.1.3c)	Bibliotherapy Intervention  Case Assessment & Documentation
<b>EPAS Competency: 2.1.4</b> Engage diversity and difference in practice.	Accurately identify and assess issues among diverse client populations in a rural environment (2.1.4b)	Individual Assessment & Treatment Plan Bio-psychosocial Assessment
	Recognize how factors related to diversity may influence client functioning and help-seeking behaviors. (2.1.4c)	Individual Assessment & Treatment Plan Bio-psychosocial Assessment
	Implement assessment, develop and implement intervention, and use evaluation tools that are	Individual Assessment & Treatment Plan Bio-psychosocial Assessment

	culturally sensitive and appropriate to diverse clients.	
	(2.1.4d)	
<b>EPAS Competency: 2.1.6</b> Engage in research-informed practice and practice-informed research.	Generate and apply research knowledge to critical discussions on best practices for children and	Bibliotherapy Intervention
	families. (2.1.6b)	Individual Assessment & Treatment Plan
		Group Therapy Intervention
		Individual Play Therapy Intervention
<b>EPAS Competency: 2.1.7</b> Apply knowledge of human behavior and the social environment.	Integrate knowledge of rural values and customs into autonomous social work practice with children and families.  (2.1.7a)	Individual Assessment & Treatment Plan Bibliotherapy
	Apply appropriate theories, models, and research to diverse client systems and circumstances.	Intervention  Group Therapy Intervention
	(2.1.7b)	Individual Assessment & Treatment Plan
	Demonstrate the ability to critically evaluate and select from multiple theories when working with children and families.  (2.1.7d)	Bio-psychosocial Assessment
EPAS Competency: 2.1.10(a)–(d) Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities	Conduct multidimensional assessments on complex issues that include client system and environmental strengths and stressors such as cultural, economic and social/relationship factors. (2.1.10a)	Individual Assessment & Treatment Plan Bio-psychosocial Assessment

	Apply bio-psycho-social-cultural-spiritual perspective in advanced social work practice with children and their families. (2.1.10b)	Individual Assessment & Treatment Plan Bio-psychosocial Assessment
Rural Competency: 2.1.11 – Demonstrate knowledge and skills to apply a bio-psychosocial-cultural-spiritual perspective in advanced social work practice with children and families.	Utilize advanced social work knowledge, value and skills in order to appropriately assess and intervene in the lives of children and families in a rural setting.  (2.1.11a)	Individual Assessment & Treatment Plan Bio-psychosocial Assessment
Rural Competency: 2.1.12 – Integrate knowledge of rural values and customs into autonomous social work practice with children and families.	Demonstrate knowledge of local resources in rural settings in order to effectively empower children and families to enhance their capacities. (2.1.12a)	Individual Assessment & Treatment Plan Bio-psychosocial Assessment Case Assessment & Documentation

# **COURSE REQUIREMENTS**

# **Required Textbooks:**

American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders*, *Fifth Edition*. Arlington, VA, American Psychiatric Association, 2013.

Kearney, C.A. (2017) Casebook in child behavior disorders (6<sup>th</sup> ed.) Boston: Cengage Learning.

Webb, N.B. (2011). Social work practice with children. (3rd ed.) New York: The Guilford Press.

# **Supplemental Text/Materials:**

Barnes, V. (2018) Child-centered social work: theory and practice. Palgrave.

Coady, N. & Lehmann, P. (2008). *Theoretical perspectives for Direct Social Work Practice*. New York: Springer Publishing Company, LLC.

Drewes, A. A. (2009). Blending play therapy with cognitive behavioral therapy: Evidence-Based and other effective treatments and techniques. Hoboken, New Jersey: John Wiley & Sons, Inc.

Ferguson, H. (2011) Child protection practice. Palgrave MacMillan

Landreth, G.L. (2012) Play therapy: The art of the relationship. (3<sup>rd</sup> ed.) Routledge

Pomeroy, E. & Wambach, K. (2003). *The clinical assessment workbook: Balancing strengths and differential diagnosis.* California: Brooks/Cole.

National Association of Social Workers (2008). Code of ethics of the National Association of Social Workers. National Association of Social Workers.

Toys and other counseling materials used in play therapy will be provided. Student may wish to use some of their personal materials when learning about play therapy. Reading will also be assigned from other sources which will be on reserve in the J. H. White Library.

# **Class Attendance Policy:**

Each student is required to participate in using Blackboard Communication Tools, taking online exams, and other aspects of Blackboard. You are expected to log in regularly (daily, perhaps several times per day) to submit assignments, check grades, personal messages, and view course materials. Student(s) who fail to participate in the online course during a course week will be deemed absent for that week. The absence will be annotated as <u>absent unexcused</u> (AU), unless the instructor has been informed beforehand and deemed the absence as <u>absent excused</u> (AE). The instructor shall report all absences to the main campus as required. A student who has not participated for 7 consecutive days regardless if the absences were deemed AU or AE shall be recommended for administrative withdrawal to the main campus. In a traditional classroom just because a student contacts the instructor and is excused from a scheduled class meeting does not mean the student is given credit for participation or attendance. The student is still annotated as AU or AE. The online classroom shall be no different in this respect. It is the instructor's sole discretion as to what he/she shall consider AU or AE.

#### **Policy and Procedure on Cheating and Plagiarism:**

#### **Philosophy**

Honesty and integrity are essential values of Mississippi Valley State University's mission to pursue truth and knowledge. All persons – administrators, faculty, staff, and students – share the responsibility for achieving high standards of excellence. Academic dishonesty of any kind negates this mission and is unethical to the development of morally and ethically sound human beings. Therefore, Mississippi Valley State University will not tolerate cheating or plagiarism in any form. Cheating and plagiarism compromise the process of fair and equitable evaluation conferred by the University. Students who engage in such activities deny themselves the opportunity to benefit from accurate assessment and feedback and prevent full academic and personal development.

#### Responsibility

Although the faculty of Mississippi Valley State University is responsible for establishing the standards for moral and academic excellence in teaching and learning, these standards can be reached only with the cooperation and support of students. Each student is expected, therefore, to accept responsibility for maintaining honesty and integrity in all endeavors inside and outside the

classroom, studio, or laboratory. Faculty encourages ethical behaviors by: establishing an atmosphere of respect in the classroom; stating clearly on the syllabus their standards and expectations for academic performance, structuring learning situations that encourage honesty and deter cheating and plagiarism; and for presenting and enforcing the University's policy on academic dishonesty.

#### **Definitions**

Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit. Such behavior also includes assisting another student in such practice. Although cheating is often associated with examinations, it is the intent of this definition that the term "cheating" not be limited to examination situations only, but also that it includes any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means.

**Plagiarism** is a specific type of cheating which consist of the misuse of the published and/or unpublished works of others by misrepresenting the intellectual property of others as one's own ideas or works.

# **Academic Sanctions for Cheating or Plagiarism**

When a faculty member responsible for a course has reason to believe that an action of a student falls within one or both of the aforementioned definitions, the faculty member should initiate a conference with the student to present the student with the charge and the evidence. If the student admits to the wrong doing, the instructor shall impose an academic sanction. The instructor has the prerogative of lowering the grade, assigning a grade of "0" or "F" for the work submitted, assigning an "F" for the entire course, or recommending another penalty, including dismissal from the University. In the event that the student does not admit wrong doing or that no mutually agreeable settlement is reached as a result of the faculty-student conference, the faculty member will consult the department chair. (See page 33 for examples).

#### **Make-Up Examination Policy:**

It is the responsibility of the student to request a makeup examination within one week following the missed examination. The decision rests with the class instructor as to whether a student will be allowed to make up the test. The decision will be based on whether the instructor considers the reason for missing the examination to be justifiable.

#### **Teaching/Learning Strategies:**

Various teaching methods will be used to meet the core competencies and to stimulate discussions in the classroom. Students are expected to participate in discussion and share their thoughts regarding issues being discussed. This class will be formatted to accommodate the use of videos, assigned readings, presentations, and lectures. Guest speakers will also be invited to share knowledge and experiences in policy development and advocacy to help students to understand better about macro practice.

#### **Submission of Work:**

Scheduled assignments MUST be completed and successfully submitted through the MVSU Blackboard Upload Assignment Page by due date and time. Assignments automatically become unavailable after the due date/time expires. Every assignment should have a cover page, and the cover page and the assignment should be in the same electronic file in the right order. All assignments MUST be keyed using MS Word (saved as a .doc file); and no multiple submissions will be allowed.

### **Course Drops/Incompletes:**

Students not completing the course for any reason are required to submit official drop notices to the Registrar's Office prior to the deadline date. **This is your responsibility**. Failure to comply with the procedure WILL result in your receiving a letter grade of "**F**".

Not officially withdrawing from the university may impact your financial aid and result in you owing the university.

### Online Communication Observation of "Netiquette"

Students MUST use Blackboard mail for contact with the instructor and other members of the class. All your online communications should be composed with fairness, honesty and tact. What you put into an online course reflects on your level of professionalism.

# **Technology Infusion:**

<b>Hardware:</b>	Windows 98, 2000, NT, XP or a	
<b>Operating System:</b>	Macintosh System 8.1 or higher	
Processor:	200 MHz or higher	
Memory:	32 MB of RAM	
H Drive Space:	100 MB free disk space	
Modem:	28.8 kbps or higher	
Monitor:	800x600 resolution	
Software:	Any Internet Service Provider	
<b>Internet Access:</b>		
Browser:	Internet Explorer, Netscape r 4.7 or	
	higher*, AOL 5.0 or higher**	
Application	Recommend Microsoft Word or	
	application file name .doc	
Audio & Video:	RealPlayer, Quick Time	

#### **Technical Problems:**

If you experience technical/computer difficulties (need help downloading browsers or plug-in, logging into your course, using your course web site tools, or experience errors or problems while in your online course), contact MR. MACK PENDLETON at 662.254.3114 as well as your instructor.

# **Services for Students with Disabilities (SSD)**

Mississippi Valley State University is committed to providing reasonable accommodations for students with a documented disability. If you feel you are eligible to receive accommodations for a covered disability (medical, physical, psychiatric, learning, vision, hearing, etc.) and would like to request it for this course, you must be registered with the Services for Students with

Disabilities (SSD) program administered by University College. It is recommended that you visit the Disabilities Office located inside the EMAP Computer Lab in the Technical Education (IT) Building to register for the program at the beginning of each semester. If you are determined to be eligible after your confidential consultation, you will be provided with a Memo of Accommodations that must be submitted to each of your instructors.

For more information or to schedule an appointment, please contact Mr. Billy Benson, Jr. via phone or email at 662-254-3005 or <a href="mailto:benson@mvsu.edu">billy.benson@mvsu.edu</a>.

# **Required Tasks/Activities:**

1. **Bio-psychosocial Assessment:** Students will interview the parent(s) of a child or adolescent (ages 6-17) to conduct a bio-psychosocial interview; this can be a family member, family friend, etc. Please do not use the child's real name and address; however, other information can be documented. When interviewing children you must collaborate and receive information from the historian (parent or guardian). After gathering the data about the child, each student will write up the bio-psychosocial assessment and submit via Blackboard under assignments by the due date. It is highly suggested that students refer to chapter 6 of Timberlake and Cutler to help them understand the entire assessment process.

Students must use the bio-psychosocial assessment format that is provided in the attachment in Bb9 under the assignment.

- 2. Clinical Assessment & Treatment Plan: Students will use the assigned case study to complete an individual assessment and treatment plan. Student will use the format provided as an attachment for Case Summary Report. After completing the individual assessment, students will complete a treatment plan. Students must use evidence-based treatment intervention. This evidence must be documented in the rationale for treatment. Make sure you rule out any diagnosis that are appropriate to be ruled out. Make sure you have a cover page and a reference page.
- 3. **Group Therapy Intervention:** a) Students will research an assigned diagnosis which will include the appropriate treatment modality; b) students will conduct a therapeutic group to address this diagnosis; c) one student will serve as the social worker (leader of group) and the remainder of the group; members will play the role of children or adolescents participating in group. d) you are to select a characteristic or behavior of the diagnosis to address in group; e) each group will use a therapeutic group technique appropriate for children and or adolescents to address the assigned diagnosis; f) please see the chart below with the assigned diagnosis and age group of the group participants; f) make sure your group activity is appropriate for the age group and the diagnosis; g) parents are not a part of this group activity; h) to start the group you must have an introduction which will include group goal(s) and objective(s) no more than two of each; i) the introduction will allow group member to tell their name (role play), diagnosis and age and; j) each group member will prepare an annotated bibliography with a minimum of six scholarly sources; three of which should address the treatment modality (i.e. cognitive behavior, behavior, etc.) and three which should discuss using group intervention for the disorder. NOTE: Your

annotated bib must be different from group members. Submit work under Group Therapy Intervention by due date. Be creative and play this out as if you are truly conducting a group.

- 4. **Bibliotherapy Intervention:** Students will use bibliotherapy in an individual therapy session with a child or adolescent to address the assigned diagnosis. Please see the chart in Bb9 under assignment as an attachment with the assigned diagnosis and age group of participants. Make sure your book or literature is appropriate for the age group and the diagnosis. Parents are not a part of this activity. You will take on the role of the therapist and you can select one of your classmates to play the child's role. You are to select a characteristic or behavior that is prevalent for the diagnosis to address through the use of bibliotherapy. Make sure you bring to class a two page summary of the diagnosis being addressed in bibliotherapy and why you choose this particular material/book. Include your goal(s) and objective(s) for therapy. There should only be two group goals and objectives. Information on the diagnosis should be based on scholarly literature within the last five years. You must also discuss the use of bibliotherapy as an intervention (based on literature) for this diagnosis. Make sure you have a cover page and a reference page. You will upload this information into Bb9 under assignment.
- 5. Individual Play Therapy Intervention: Students will demonstrate assigned play therapy technique to the class. Student will research assigned play therapy technique using scholarly literature to support the use of the technique. Student will submit a one to two page paper discussing the technique. The paper must include: a) an introduction/overview of the play therapy technique; b) the appropriate population including age group, diagnosis, etc. for the technique; c) appropriateness of the intervention for group or individual activity; d) what treatment modality supports the use of the activity; e) it is highly suggested that you read chapter 7 in Webb & chapter 1 pages 22-26 in Timberlake and Cutler to help strengthen your understanding about play therapy.
- **6. Clinical Documentation:** Students are required to write four clinical SOAP notes: the first will document the interview of a child or adolescent including the parents' interview as part of the bio-psychosocial assessment; the second note will document a follow-up with a child or adolescent who express suicidal thoughts; the third note will document a follow-up office visit after the child or adolescent no longer has suicidal thoughts; the fourth note will document the termination of services for a child or adolescent client.
- 7. Mid-Term Examination location TBA
- 8. Final Examination location TBA

**Evaluation Procedures:** 

**Performance Standards/Grading Policy** 

**Assessments** 

	Value	Points	<b>Assignment Due</b>
Bio-psychosocial Assessment	1@100	100	September 8, 2018
Clinical Documentation I	1@ 25	25	September 8, 2018
Clinical Assessment & Treatment Plan	1@100	100	September 22, 2018
Clinical Documentation II	1@ 25	25	September 29, 2018
Mid-Term Examination	1@ 100	100	October 6, 2018
Clinical Documentation III	1@25	25	October 13, 2018
Simulation Bibliotherapy Intervention	1@ 100	100	October 20, 2018
Discussion on Bibliotherapy Intervention	1@100	100	October 27, 2018
Simulation on Bibliotherapy Intervention	1 @ 100	100	November 3, 2018
Simulation of Group Therapy Intervention	1@100	100	November 10, 2018
Clinical Documentation V	1@25	25	November 17, 2018
Simulation of Individual Play Therapy Intervention	1@100	100	December 1, 2018
Final Clinical Case Paper/Presentation	1@100	100	December 8, 2018
Class Participation	8@2=16		
Total		1000	

# **Grading Scale:**

A	≥900	90% and above
В	800-899	80% to 89%
C	700-799	70% to 79%
D	600-699	60% to 69%
F	Less than 600	59% and below

<sup>\*</sup>While a grade of "C" is passing, a student may not make more than two C's in the Program.

# **Distance Education Policy:**

In compliance with IHL policy an SACSCOC guidelines, MVSU Department of Social Work requires a minimum of 2250 minutes per three semester hour course, regardless of course delivery method, and may include final examination time. The number of weeks must meet federal financial aid requirements.

Syllabi for courses taught on-line or hybrid (partially on-line) must include outlines, calendars, and/or schedules of activities that demonstrate compliance with the 2250 minute requirement.

<sup>\*</sup> A grade of "D" is failing

**Department of Social Work Hour Conversion Standards:** 

Activity	Undergraduate	Graduate
Reading	15 pages per hour	20 pages per hour
Research paper writing	3 hours per page	3 hours per page
Essay writing	1.5 hours per page	1.5 hours per page
Quiz/exam	1 minute per multiple choice	1 minute per multiple choice
	2 minutes per short answer	2 minutes per short answer
Exam study time	4 hours	4 hours
Threaded discussion	120 minutes per thread	120 minutes per thread
Group work	Number of minutes of	Number of minutes of
	interaction among group	interaction among group
	members	members

These conversion standards are adopted and set by the Department of Social Work and approved by the Chair. Use of any other standards must be presented to the department and approved by the Chair.

# **COURSE ACTIVITIES**

Week 1 August 25, 2018	Scholarly Dialogue & Interactive Clinical Activity
Meet in class	Webb Chapter 3:Building Relationships with All Relevant Systems
NOTE:	Systems
Students must read chapters prior to	Webb Chapter 4: Bio-psychosocial Assessment of the Child. Discussion of assigned cases from a developmental perspective.
attending class.	Discussion of Chapter one of Kearney Text
Check Bb email & message & discussion board daily.	Students must choose one chapter/disorder from Kearney text and prepare to complete paper/presentation on a case assigned related to that disorder. The DSM-V will be used in this case as well.
Week 2	
September 1, 2018 Bb	Research and review Ecosystems Perspective and Strengths Perspectives
	Webb-An Ecological-Developmental Framework for Helping Children: Chapter 1: The Challenge of Meeting Children Needs Chapter 2: Necessary Background for Helping Children
	Bb Discussion Question I: What are some of the challenges to

	meeting children needs? What are some solutions to this problem? Support information with your textbook reading with scholarly journals.  Bb Discussion Question 2: How can the challenges of meeting children needs be addressed using Ecosytems Perspective and Strengths Perspective. Make sure you cite your work.  Research, textbook reading and discussion 6 Hrs.
Week 3	(Use of Play Therapy)
September 8, 2018	Chapter 7 of Webb: Play Therapy
NOTE: Students must read chapters prior to attending class  Meet in class	<ul> <li>Bio-psychosocial Assessment Due – Upload under assignment         DONOT EMAIL ASSIGNMENT</li> <li>Clinical (SOAP) Documentation I on bio-psychosocial assessment Due</li> </ul>
Video: Child Centered Play Therapy: A Clinical Session.	
Week 4	Assessing for Suicidality
September 15, 2018  Bb (online)	Bb Discussion 1: A case study will be presented for discussion.  • Discuss the process of assessing for suicide and the intervention used to address the clients suicidal ideations or attempted suicide. What may some predictors of suicide in children and youth be?
	Bb Discussion 2: Discuss why is it important to utilize strengths and empowerment approaches and risk and resilience perspective in working with children? You must support your response using a minimum of four scholarly articles on the subject. A reference list is required.  Required Article:
	Barrio, C. A. (2007). Assessing suicide risk in children: Guidelines for developmentally appropriate interviewing. <i>Journal of Mental Health Counseling</i> , 29(1), 50-66.
	Look for additional scholarly materials related to suicide

	ideations and be prepared to discuss how to work with clients when presented with such problems.  Chapter 2 of Kearney: Social Anxiety and Withdrawal Be prepared to discuss how play therapy can be effective in working with children who suffer from social anxiety and withdrawal.  Familiarize self with the DSM diagnostic criterion for anxiety and withdrawal  Researching and reading articles and answering discussion questions 4 hours.
Week 5 September 22, 2018	Scholarly Dialogue & Interactive Clinical Activity
Meet in Class  Video 1—Systems of Psychotherapy: Cognitive Therapy (Judith S. Beck, Ph.D.)  Video 2—Cognitive-Behavioral Therapy (John Krumboltz, Ph.D.)	Chapter 5 of Webb: Contracting, Planning Interventions, and Tracking Progress  Chapter 6 of Webb: Working with the Family  Clinical Assessment & Diagnosis/Treatment Plan Due
Week 6 September 29, 2018 Bb	Scholarly Dialogue & Interactive Clinical Activity  Attachment Theory  Coady and Lehmann Chapter 9: Cognitive-Behavioral Theory and Treatment  Clinical (SOAP) Documentation II- Abuse & Neglect Case Due  Discussion Question 1: Discuss the efficacy of play
	therapy in working with abused children and adolescents (use text and at least three articles to support your work)

	attach reference list.
	<b>Discussion 2:</b> Briefly discuss the tenets of attachment theory.
	Researching and reading articles and answering discussion questions 4 hours.
Week 7 October 6, 2018	COMPREHENSIVE MID-TERM EXAMINATION
Meet in Classroom	
Week 8	A discussion on the following chapters:
October 13, 2018	Webb Chapter 10: Children Living in Kinship and Foster Home Placements
	Webb Chapter 11: Single-Parent Divorcing and Blended Families
Bb	Webb Chapter 12: Children in Families Affected by Illness and Death
	Clinical (SOAP) Documentation III Due
	<b>Discussion I:</b> Discuss the benefits of living with relatives' verses living in a foster home. Support your work with textbook and scholarly articles. Make sure you reference information
	Researching and reading articles and answering discussion questions 4 hours.
Week 9	
October 20, 2018	Scholarly Dialogue & Interactive Clinical Activity
Meet in Classroom	Chapter 8 of Webb Group Work with Children
	Webb Chapter 9: School-Based Interventions
	Drewes Chapter 3: An Illustration of Science and Practice: Strengthening the Whole Through Its Part
	Chapter 13 of Timberlake and Cutler: Evaluating Therapeutic
	Change Discussion on Bibliotherapy Intervention
Week 10 October 27, 2018	Scholarly Dialogue & Interactive Clinical Activity

Meet in Classroom	Chapter 8 of Webb Group Work with Children
	Webb Chapter 9: School-Based Interventions
	Drewes Chapter 3: An Illustration of Science and Practice:
	Strengthening the Whole Through Its Part
	Chapter 13 of Timberlake and Cutler: Evaluating Therapeutic
	Change Discussion on Bibliotherapy Intervention
Week 11 November 3, 2018	Scholarly Dialogue & Interactive Clinical Activity
Bb	Webb Chapter 13: Children in Substance-Abusing Families
	Webb Chapter 14: Child Victims and Witnesses of Family and Community Violence
	Read Webb Chapter 15: The Interpersonal Violence of Bulling: Impact on Victims, Perpetrators, and Bystanders/Witnesses
	<b>Discussion 1:</b> Discuss the impact of violence on children and families. Make sure you support your response with scholarly articles and the textbook.
	Researching and reading articles and answering discussion questions 4 hours.
	• Simulation Bibliotherapy Intervention
Week 12 November 10, 2018	Scholarly Dialogue & Interactive Clinical Activity
Classroom	• Simulation of Group Therapy Intervention
W1-12	Scholarly Dialogue & Interactive Clinical Activity
Week 13 November 17, 2018	Read Drewes Chapter 17: Play Therapy Techniques for Affect Regulation
Meet in Classroom	Read Drewes Chapter 18: Building Self-Esteem, Coping, Skills, and Changing Cognitive Distortions
	o Clinical (SOAP) Documentation IV
November 19 - 25	Fall Break/Thanksgiving Holidays
TT7 1 4 4	
Week 14 December 1, 2018	Scholarly Dialogue & Interactive Clinical Activity

Classroom	Timberlake and Cutler Chapter 10: Learning Disabilities and Attention-Deficit Disorder			
	Timberlake and Cutler Chapter 11: Anxiety Disorders			
	Timberlake and Cutler Chapter 12: Post-Traumatic			
	• Simulation Individual Play Therapy Intervention			
Week 15	Case Paper/Presentation			
December 8 2018	This will be the Final Examination			

# 600 ADVANCED PRACTICE WITH CHILDREN & FAMILIES: DIRECT PRACTICE RUBRIC BIO-PSYCHOSOCIAL ASSESSMENT

# STUDENT:

Completeness	12-14	9-11	6-8	3-5	0-2
	The majority of the	Bio-	Bio-	Bio-	Bio-
	components are	psychosocial is	psychosocial is	psychosocial is	psychosocial is
	present with no more	missing three to	missing three	missing five to	missing more
	than one to two	four of the	to four of the	six of the	than six of the
	components missing.	required	required	required	required
	Areas not applicable	components.	components or	components	components
	to the client are	Areas not	the area of	and /or	and /or
	indicated as such	applicable to	specialty is not	information is	information is
	Identifying	the client are	comprehensive	not	not
	Information	indicated.	and/ or sections	comprehensive	comprehensive
	Name, date of birth,		that are not	and/ or sections	and/ or sections
	age, school, religion, parents, address,		applicable to	that are not	that are not
	telephone number,		the client are	applicable to	applicable to
	parent employment & salary, household		not indicated as	the client are	the client are
	membership, referral date & source of		such.	not indicated as	not indicated as
	referral, date of			such.	such.
	assessment, & clinician's name.				
	chincian s name.				
Points					
Received					
Completeness	12-14	9-11	6-8	3-5	0-2
	The majority of the	Bio-	Bio-	Bio-	Bio-
	components are	psychosocial is	psychosocial is	psychosocial is	psychosocial is
	present with no more	missing three to	missing three	missing five to	missing more
	than one to two	four of the	to four of the	six of the	than six of the
	components missing.	required	required	required	required
	Areas not applicable	components.	components or	components	components

	to the client are indicated as such. Presenting Problem (in client's own words) and History Reason for referral, chief complaint, & history of present illness.	Areas not applicable to the client are indicated as such.	the area of specialty is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.	and /or information is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.	and /or information is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.
Points Received					
Completeness	12-14	9-11	6-8	3-5	0-2
	The majority of the components are present with no more than one to two components missing.  Areas not applicable to the client are indicated as such.  Current Family  Situation  Family history & current situation	psychosocial is missing three to four of the required components.  Areas not applicable to the client are indicated as such.	Bio- psychosocial is missing three to four of the required components or the area of specialty is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.	Bio- psychosocial is missing five to six of the required components and /or information is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.	Bio- psychosocial is missing more than six of the required components and /or information is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.
Points  Received					
Completeness	13-15	10-12	7-9	4-6	0-3
	The majority of the components are present with no more than one to two components missing.	Bio- psychosocial is missing three to four of the required	Bio- psychosocial is missing three to four of the required	Bio- psychosocial is missing five to six of the required	Bio- psychosocial is missing more than six of the required

	Areas not applicable to the client are indicated as such. Development History of Child Education, medical, legal, & psychiatric.	components.  Areas not applicable to the client are indicated as such	components or the area of specialty is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.	components and /or information is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.	components and /or information is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.
Points Received					
Completeness	13-15	10-12	7-9	4-6	0-3
	The majority of the components are present with no more than one to two components missing. Areas not applicable to the client are indicated as such. Psychosocial Assessment Summary Name, age, overall description of the child, appearance, behavior, interpersonal observation, client's environment, mental state, strengths, social, suicidal/homicidal, assessment supported by information from case & other sources,	Bio- psychosocial is missing three to four of the required components. Areas not applicable to the client are indicated as such	Bio- psychosocial is missing three to four of the required components or the area of specialty is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.	Bio- psychosocial is missing five to six of the required components and /or information is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.	psychosocial is missing more than six of the required components and /or information is not comprehensive and/ or sections that are not applicable to the client are not indicated as such.

	etc.				
Points					
Received					
Completeness	13-15	10-12	7-9	4-6	0-3
	The majority of the	Bio-	Bio-	Bio-	Bio-
	components are	psychosocial is	psychosocial is	psychosocial is	psychosocial is
	present with no more	missing three to	missing three	missing five to	missing more
	than one to two	four of the	to four of the	six of the	than six of the
	components missing.	required	required	required	required
	Areas not applicable	components.	components or	components	components
	to the client are	Areas not	the area of	and /or	and /or
	indicated as such.	applicable to	specialty is not	information is	information is
	Clinical	the client are	comprehensive	not	not
	Impression/Diagnosis	indicated as	and/ or sections	comprehensive	comprehensive
	Summary of your	such	that are not	and/ or sections	and/ or sections
	impression of the		applicable to	that are not	that are not
	client, motivation for		the client are	applicable to	applicable to
	treatment, barriers to		not indicated as	the client are	the client are
	treatment, barriers to		such.	not indicated as	not indicated as
	treatment, mental			such.	such.
	status (mood & affect)				
	and cognitive aspects,				
	scales used, rule outs,				
	rationale for clinical				
	diagnosis, etc. Axis I-				
	IV.				
Points Received					
Organization &	11-13	7-9	4-6	2-3	0-1
Written Expression					
	Bio-psychosocial is	Bio-	Bio-	Bio-	Bio-
	organized into logical	psychosocial is	psychosocial is	psychosocial	psychosocial
	sections, formatted so	organized but	not well	and narrative	assessment is
	that information is	in a format	organized and	summary are	incomplete and
	easily found,	different from	data is difficult	disorganized.	or fragmented.
	professional in	the one	to locate or the	Document is	Five or more
	appearance, free of	suggested. The	narrative .	unprofessional	spelling or
	spelling and	narrative	summary is	in appearance.	grammatical

	grammatical errors	summary is	disorganized.	Five or more	errors present.
	and summary is	well organized,	Document is	spelling or	
	professionally stated	missing	missing the	grammatical	
	using clinical	sectional	sectional	errors present	
	language.	headings but	headings and	and or	
		pages are still	pages appear	summary is not	
		professional in	unprofessional	professional	
		appearance.	in design.	stated.	
		One to two	Three to four		
		grammatical	spelling or		
		errors are	grammatical		
		present and	errors are		
		summary is	present and		
		professionally	summary is		
		stated.	professional		
			stated.		
Points Received					
TOTAL POINTS					

Comments:

#### BIBLIOGRAPHY

- Aldgate, J., Jones, D., Rose, W. & Jeffrey, C. (2006). *The developing world of the child*. London: Jessica Kingsley Publishers.
- Brooks, S. (2005). Current issues for child welfare practice in rural communities. *Reaching Out* 1- 12. The Center for Human Services, UC Davis Extension. The University of California.
- Cohen, N.A. (ran, V. & Rhee, S.Y (2007). *Multicultural approaches in caring for children, youth, and their families*. Boston: Allyn and Bacon.
- Cohn, T.J., & Hastings, S.L. (2013). Building a practice in rural settings: Special considerations. *Journal of Mental Health Counseling*, 35(3), 228-244.
- Conradi, L., Wherry, J., & Krisiel, C. (n.d.). Linking child welfare and mental health using trauma-informed screening and assessment practices. *Child Welfare*, 90(6), 129-147.
- Hunt, J. (2014). Bio-psycho-social-spiritual assessment? Teaching the skill of spiritual assessment. *Social Work & Christianity*, 41(4), 373-384.
- Saleeby, D. (2006). The strengths perspective in social work practice. Boston: Allyn and Bacon.
- Smalley, K.B., Yancey, C.T., Warren, K.N., Ryan, R., & Pugh, J. (2010). Rural mental health and psychological treatment: A review for practitioners. *Journal of Clinical Psychology*, 66(5), 479-489.
- Tse, J. (2006). Research on day treatment programs for preschoolers with disruptive behavior Disorders. *Psychiatric Services*, 57(4), 477-486.
- Webb, N.B. (ed) (2006) Working with traumatized youth in child welfare. New York: The Guilford Press.
- Werth, J. L., Hastings, S. L., & Riding-Malon, R. (2010). Ethical challenges of practicing in rural areas. *Journal of Clinical Psychology*, 66(5), 537-548.