

## Fall 2024

Course & Session Number	SOWK 630 S01	Classroom	TBD
Course Name	Clinical Social Work Practice with Mental Health & Addictions (19-64)		
Dates and Time	Start of Classes: September 5, 2024 End of Classes: October 10, 2024 Dates and Time: On-campus - September 5, 12, 19, 2; October 3, 10. 9:00am -11:50am and 1:00pm-3:50pm. Add/Drop/Withdrawal Dates: Please refer to the course-specific deadline in your Student Centre <sup>1</sup> .		
Instructor	Alan McLuckie, MSW, PhD, RCSW, RMFT	Office Hours	As requested and by appointment.
UCalgary E-mail	amclucki@ucalgary.ca	UCalgary Phone	403-220-2926 (email contact recommended/ preferred).

## OUR COMMITMENT TO EQUITY, RACIAL JUSTICE, DIVERSITY, INCLUSION AND DECOLONIZATION

The Faculty of Social Work (FSW), University of Calgary (UCalgary), is committed to promoting and actualizing equity, racial justice, diversity, inclusion and decolonization. We affirm that diversity and uniqueness are enriching and valuable, and that they can strengthen our teaching, learning, research, scholarship, and community connections. We aim to foster an inclusive, thriving and equitable environment for our students, non-academic and academic staff, and community members. We take the stand that equity does not mean sameness in treatment of people, but rather requires measures and accommodations for diverse life experiences and circumstances to ensure that no one of a particular social group is disadvantaged, underrepresented or overlooked in all aspects of our work. We intend to address systemic inequities and compounded disadvantages due to intersectionality of social locations, particularly for those who are members of racialized communities, Indigenous peoples, Black peoples, persons with disabilities, migrant groups (including refugees and immigrants), 2SLGBTQ+ communities, linguistic minorities as well as those who have experienced socioeconomic, caregiving, religious, political, and/or cultural barriers to their education and employment. We also recognize, honour, and integrate into our work diverse perspectives, ways of knowing and doing, experiences, and strengths. An

<sup>&</sup>lt;sup>1</sup> In the Enrolled Courses table, under Deadlines, click on the Calendar icon by each course and the deadlines will appear.

anti-oppressive lens, particularly intersectional, anti-colonial, anti-racist and decolonizing frameworks, will inform our work.

Please refer to our full statement of our <u>Commitment to Equity, Racial Justice, Diversity, Inclusion and Decolonization</u>, our <u>Statement on Anti-Black Racism</u> and the work of the faculty's <u>Anti-Black Racism Task Force</u>, our <u>Statement on Anti-Asian Racism</u>, and the university's <u>Indigenous Strategy</u>.

#### **SYLLABUS STATEMENT**

Examines multiple social work theories, models, and approaches to clinical practice relevant to mental health and addictions. Clinical social work practice is situated within in historical, economic, political, social, and cultural contexts. Critical perspectives, contemporary issues and research debates are discussed.

#### **COURSE DESCRIPTION**

This course provides base knowledge and skill for advanced clinical social work practice with emerging adults (19-25 years) and adults (26-64 years) affected by significant mental disorders and/or addiction. This course critically examines the clinical social work identity, philosophies of care, frameworks/theories of mental health and mental illness, and the practice implications of legislation, policies, and mental health strategies. This course includes a practice-based exploration of the principles, processes, and practices of clinical social work from engagement, assessment, formulation, diagnosis, treatment planning, implementation, and evaluation.

## **COURSE LEARNING OUTCOMES**

Upon completion of this course, students will be able to:

- 1. Demonstrate a working knowledge of theories and frameworks that inform social work practice with emerging adults (19-25 years) and adult populations (26-64 years) affected by mental health difficulties. Frameworks and theories include, but are not limited to, developmental psychopathology, neurobiological-informed practice, biopsychosocial and social determinants that inform the understanding of risk and protective factors that influence mental health and how these factors influence and are influenced by interpersonal relationships, familial factors, as well as contextual/environmental factors.
- 2. Demonstrate a critical understanding of philosophies of care relevant to clinical practice as a mental health professional with emerging adults and adults including evidence-based practice and recovery-based approaches to mental health.
- Demonstrate a critical understanding of policies, legislation, and standards of practice relevant to clinical practice as a mental health professional with emerging adults and adult populations affected by, or at risk for mental disorders.

- 4. Demonstrate a working knowledge to move through the various phases of evidence-based psychosocial intervention from engagement, assessment, formulation/case conceptualization, treatment planning, implementation, and evaluation.
- 5. Demonstrate a working knowledge of assessment procedures including the disorders and diagnostic procedures within mental health classification systems (i.e., DSM-5-TR), as well as a working knowledge of the use of screening tools relevant to clinical social work practice in diverse mental health settings with diverse populations.
- Demonstrate a working knowledge to develop, implement and evaluate a range of psychosocial interventions for mental health relevant to emerging adults (19-25 years), adults (25-64 years), and their families, from diverse and marginalized communities.

#### **LEARNING RESOURCES**

#### **REQUIRED TEXTBOOKS AND/OR READINGS**

American Psychiatric Association [APA]. (2022). *Diagnostic and statistical manual of mental disorders* (5<sup>th</sup> ed. Text Revision). APA.

# **LEARNING TECHNOLOGIES AND REQUIREMENTS**

A D2L site is set up for this course, which contains required readings and other relevant class resources and materials. A laptop, desktop or mobile device with Internet access, microphone and speaker is required for D2L and Zoom access.

#### **RELATIONSHIP TO OTHER COURSES**

This course is the first of four courses in the *Clinical Practice with Adult Mental Health & Addictions* cluster. This course provides a foundation related to theory, frameworks, policies, and practice-based clinical processes that will be explored in greater depth in the other three courses. These principles and practices will be applied to the respective emerging adults and adult populations affected by significant mental disorders and/or addictions.

## **CLASS SCHEDULE**

#### **Important Dates for Fall 2024**

- Start of Term: Monday, August 26, 2024
- First Day of Class: Tuesday, September 3, 2024
- End of Term: Tuesday, December 24, 2024
- Last Day of Class: Friday, December 6, 2024
- o Fee Deadline: Friday, September 20, 2024
- Labour Day, no classes: Monday, September 2, 2024
- National Day for Truth and Reconciliation, no classes: Monday, September 30, 2024
- Thanksgiving Day, no classes: Monday, October 14, 2024
- o Remembrance Day, no classes: Monday, November 11, 2024

Date & Time	Topics	Readings
Sept. 5 Morning 9:00- 11:50am	Clinical Social Work: A Mental Health Profession.  History, values, identity, and scope of clinical social work.  Knowledge, knowing, and thinking in clinical social work: Epistemology/ontology, paradigms of practice, theories, and practice-models.  Review of the course outline/course structure, and course assignments.  Course Objectives: 2, 3.	Berzoff, J., & Drisko, J. (2015). What clinical social workers need to know: Bio-psychosocial knowledge and skills for the twenty first century. Clinical Social Work Journal, 43(3), 263-273. doi:10.1007/s10615-015-0544-3.  Gonzales, M. J., & Gelman, C. R. (2015). Clinical social work practice in the twenty-first century: A changing landscape. Clinical Social Work Journal, 43(3), 257-262.
Sept. 5 Afternoon 1:00- 3:50pm	<ul> <li>Introduction to Neuroscience in Clinical Social Work Practice.</li> <li>Introduction to the basic structures and functions of the brain.</li> <li>Examination of the neurological structures and processes implicated in mental disorders.</li> <li>Genetics, epigenetics, geneenvironment interactions (G X E), and gene-environment correlations (rGE).</li> <li>Course Objectives: 1, 2, 3.</li> </ul>	Gibson, M. F. (2021). The helpful brain?  Translation of neuroscience into social work.  The British Journal of Social Work, 51(7), 2665-2679.  Musci, R. J., Augustinavicius, J. L., & Volk, H. (2019). Gene-environment interactions in psychiatry. Recent evidence and clinical implications. Current Psychiatry Reports, 21(81).  Yorke, J., & Bergere, T. (2018). Where the rubber hits the road: Neuroscience and social work. Social Work in Health Care, 57(2), 79-94.
Sept. 12 Morning 9:00- 11:50am	Understanding Mental Health and Mental Disorders within Complex and Diverse Contexts: Moving Beyond Single-Factor Explanations.  • Exploring frameworks to understand developmental trajectories and disruptions to these trajectories and outcomes (i.e., developmental psychopathology) including stress-diathesis and differential susceptibility frameworks; gene X environment influences;	Belsky, J., & Pluess, M. (2009). Beyond diathesis stress: Differential susceptibility to environmental influences. Psychological Bulletin, 135(6), 885–908.  Bolton, D., & Gillett, G. (2019). The biopsychosocial model 40 years on. In D. Bolton & G. Gillett (Eds.), The biopsychosocial model of health and disease (pp. 1-35). Palgrave McMillan.  Taylor, E. H. (2015). Theoretical foundations for treating bioecological mental disorders and illnesses. In E. H. Taylor (Ed.), Assessing, diagnosing, and treating serious mental

	attachment; approaches to resilience and stigma.  Critical examination of approaches, frameworks, models of mental illness/health (i.e., biopsychosocial/bioecological, diathesis stress, differential susceptibility).  Course Objectives: 1, 2, 3.	<u>disorders: A bioecological approach</u> (pp. 7-48). Oxford University Press.
Sept. 12 Afternoon 1:00- 3:50pm	<ul> <li>Clinical Social Work: Philosophies of Care, Legislation, and Standards of Practice.</li> <li>Philosophies of care (e.g., evidence-based practice, recovery-oriented approaches) important for effective clinical social work practice in the mental health field.</li> <li>Standards of practice &amp; legislation for working in the field of mental health.</li> <li>Mental health strategies and policy frameworks.</li> <li>Course Objectives: 1, 2, 3, 5.</li> </ul>	Alberta College of Social Workers [ACSW].  (2023). Standards of practice. ACSW.  Available from <a href="https://acsw.in1touch.org/uploaded/web/ACSW%20Council/ACSW%20Standards%20">https://acsw.in1touch.org/uploaded/web/ACSW%20Council/ACSW%20Standards%20</a> of%20Practice%202023.pdf  Government of Alberta (2021). Mental health act, R.S.A. 2000. M-13. Alberta Queen's Printer. Available from <a href="https://open.alberta.ca/publications/m13">https://open.alberta.ca/publications/m13</a> Kourgiantakis, T., Ashcroft, R., Mohamud, F.,  Benedict, A., Lee, E., Criag, S., Sewell, K.,  Johnston, M., McLuckie, A., & Sur, D.  (2022). Clinical social work practice in Canada: A critical examination of regulation. Research on Social Work Practice, 33(1), 15-28.
Sept. 19  Morning 9:00- 11:50am	Engagement and planning in clinical social work practice: Part I.  Developing and maintaining collaborative, empowering therapeutic relationships.  Ethics of Practice: Informed consent processes/consent to service, record keeping, confidentiality, ethics in practice, standards of practice including confidentiality, legally dependent persons.  Patient and family-centred care in practice.  Course Objectives: 1, 2, 3, 5.	Frey, J. & Hall, A. (2021). MI with people experiencing mental health issues. In J. Frey & A. Hall (Eds.) Motivational interviewing for mental health clinicians: A toolkit for skills enhancement. (pp. 7- 23). PESI Publishing.  Rollnick, S., Butler, C. C., Kinnersley, P., Gregory, J., & Mash, B. (2010).  Motivational interviewing. British Medical Journal, 340(7758), 1242-1245.  Shor, R., Nahoum Shaty, A., & Shalev, A. (2022). Barriers to pathways to care for family members of persons with severe mental illness in a family-centered service. Journal of Family Social Work, 25(1), 25–43.

Sept. 19 Afternoon 1:00- 3:50pm	Engagement and planning in clinical social work practice: Part II.  • Practice model(s) critically examined: Motivational Interviewing.  • Course Objectives: 1, 2, 3, 5.	***No required Readings***
Sept. 26	Clinical Social Work: Principles,	Gold, L. H., (2020). Suicide risk assessment. In
	Practices, and Processes: Focus on	L. H. Gold, & R. L. Frierson (Eds.), <u>Suicide</u>
Morning	Biopsychosocial Assessment,	risk assessment and management (pp. 3-
9:00-	Mental Status Exam, and Risk	16). American Psychiatric Publishing.
11:50 am	Assessment. Part I	Wiger, D. E. (2021). The biopsychosocial
	<ul> <li>An overview of the principles, practices, and processes</li> </ul>	assessment. In D. E. Wiger (Ed.), <u>The</u> <pre>psychotherapy documentation primer (4th</pre>
	associated with conducting a	ed., pp. 59-92). John Wiley & Sons.
	biopsychosocial assessment	Wiger, D. E. (2021). The clinical interview:
	within the scope of practice	Mental status exam. In D. E. Wiger (Ed.),
	related to mental health.	The psychotherapy documentation primer
	<ul> <li>Introduction to screening tools,</li> </ul>	(4 <sup>th</sup> ed., pp. 93-109). John Wiley & Sons.
	and standardized measures.	
	<ul> <li>Understanding the change process within complex and</li> </ul>	
	diverse contexts and	
	considering factors such as	
	power and social justice.	
	Practice model(s) critically	
	examined: <u>Biopsychosocial</u>	
	assessment framework, Mental	
	Status Exam, and Risk	
	Assessment.	
	• Course Objectives: 1, 2, 4, 5, 6	
Sept. 26	Clinical Social Work: Principles,	***No required Readings***
	Practices, and Processes: Focus on	
Afternoon	Biopsychosocial Assessment,	
1:00-	Mental Status Exam, and Risk	
3:50pm	Assessment. Part II.	
	Experiential learning & critical	
	examination: Biopsychosocial	
	assessment for mental health	
	<ul><li>concerns/disorders.</li><li>Course Objectives: 1, 2, 4, 5, 6.</li></ul>	
	- Course Objectives. 1, 2, 4, 5, 6.	

Oct. 3  Morning 9:00- 11:50am	Case Formulation (case conceptualization) in Clinical Social Work Practice in Mental Health.  • Critical examination of case formulation (case conceptualization) as pertains to clinical social work practice in the mental health field.  • In-depth exploration of the principles, practices, and process of case formulation/ case conceptualization.  • Working formulation, codeveloped formulations, written formal case formulations.  • Course Objectives: 1, 2, 4, 5, 6.	MacNeil, C., Hasty, M. K., Conus, P., & Berk, M. (2012). Is diagnosis enough to guide interventions in mental health? Using case formulation in clinical practice. BMC Medicine, 10(111). doi.org/10.1186/1741-7015-10-111.  Weerasekera, P. (1993). Formulation: A multiperspective model. Canadian Journal of Psychiatry, 38(5), 351-358. doi.org/10.1177/070674379303800513. (Available via D2L.)
Oct. 3  Afternoon 1:00- 3:50pm	<ul> <li>Classification Frameworks and Diagnosis in the Mental Health</li> <li>Field.</li> <li>Classification frameworks (i.e., ICD-11, DSM-5-TR), taxonomy, nosology, and diagnosis as it pertains to clinical social work's scope of practice.</li> <li>Diagnosis as a scope of clinical social work practice.</li> <li>Critical examination of the DSM-5-TR as a tool for informing clinical work diagnosis in the mental health field.</li> <li>Critical examination of diagnosis, the diagnostic process, and differential diagnosis.</li> <li>Reviewing diagnosis as a scope of clinical social work practice.</li> <li>Course Objectives: 1, 2, 4, 5, 6.</li> </ul>	American Psychiatric Association [APA]. (2022). Introduction. In Diagnostic and statistical manual of mental disorders (5 <sup>th</sup> ed. TR, pp. 5- 20). APA.  American Psychiatric Association [APA]. (2022). Use of the manual. In Diagnostic and statistical manual of mental disorders (5 <sup>th</sup> ed. TR, pp. 21-28). APA.  American Psychiatric Association [APA]. (2022). Culture and psychiatric diagnosis. In Diagnostic and statistical manual of mental disorders (5 <sup>th</sup> ed. TR, pp. 859-879). APA.
Oct. 10  Morning 9:00- 11:50am	Single-session Clinical Interview.  • Critical exploration of single-session clinical interviews as they relate to transitional-	Dolan, Y. (2023). What does a solution-focused therapy session look like? In Y. Dolan (Ed.). Solution-focused therapy: The basics (pp. 48-62). Taylor & Francis.

	<ul> <li>age/adult mental health and addiction populations.</li> <li>Understanding the principles, practice, and changes process of single-session clinical interviews within complex and diverse contexts and considering factors such as power and social justice.</li> <li>Course Objectives: 1, 2, 4, 5, 6.</li> </ul>	Turnell, A., & Hopwood, L. (1994). Solution- focused brief therapy: An outline for second and subsequent sessions. <i>Case Studies in Brief</i> and Family Therapy, 8(2), 52-64. (Available via D2L).
Oct. 10  Afternoon 1:00- 3:50pm	<ul> <li>Practice model(s) critically examined: <u>Single-session clinical interviews.</u></li> <li>Course Objectives: 1, 2, 4, 5, 6.</li> </ul>	***No required Readings***

#### ADDITIONAL CLASSROOM CONDUCT AND RELATED INFORMATION

#### **GUIDELINES FOR ZOOM SESSIONS IN ONLINE CLASSES**

Students are expected to participate actively in all Zoom sessions. If you are unable to attend a Zoom session, please contact your instructor to arrange an alternative activity for the missed session (e.g., to review a recorded session) for your best learning experiences. Please be prepared, as best as you are able, to join class in a quiet space that will allow you to be fully present and engaged in Zoom sessions. Unless advised (or agreed) otherwise by their instructors, video cameras should be turned on during class and students are expected to manage their microphones as required. All students are expected to behave in a professional manner during all Zoom sessions.

#### MEDIA RECORDING FOR ASSESSMENT OF STUDENT LEARNING (By instructor)

The instructor may use Zoom media recordings as part of the assessment of students. This may include but is not limited to classroom discussions, presentations, clinical practice, or skills testing that occur during the course. These recordings will be used for student assessment purposes only and will not be shared or used for any other purpose. Students will be advised before the instructor initiates a recording of a Zoom session.

# **RECORDINGS OF ONLINE CLASSES (By Students)**

Recording of lectures is generally not permitted. You must seek authorization from your instructor to record any lecture. Any student with a disability who is registered with Student Accessibility Services (SAS), and who requires an accommodation to make audio recordings of course material shall be provided with such an accommodation if determined necessary by an Access Advisor in SAS. Please refer to the Recording of Lectures Policy and Student Non-Academic Misconduct Policy for the additional information.

#### ASSESSMENT COMPONENTS

**Assignment 1: Mental Health Literacy (Knowledge Translation) / Psychoeducation Resource Brochure - (worth 20%).** This assignment may be completed individually, or students can **choose to complete this in a small group** with other members of class (**maximum group size is 4 students**). Please see below for details/requirements related to the group assignment option.

Due Date: To be completed by September 16 by 11:59pm MST

Aligned Course Learning Outcomes: 1, 5

# **Assignment Description:**

Engaging knowledge translation skills to develop accurate and accessible education resources for clients, family, and community members is a key aspect of practice for clinical social workers practicing in the field of mental health. Students will sign-up for, and create educational materials specific to <u>one</u> (1) of the diagnostic areas covered within the Adult Mental Health and Addictions cluster (e.g., Schizotypal Disorder, Schizophrenia, Schizophreniform Disorder, Bipolar I Disorder, Bipolar II, Cyclothymic Disorder, Persistent Depressive Disorder, Major Depressive Disorder, Panic Disorder, Generalized Anxiety Disorder, Obsessive-Compulsive Disorder, Posttraumatic Stress Disorder, Adjustment Disorders, Anorexia Nervosa, Bulimia Nervosa, Alcohol Use Disorder, Cannabis Use Disorder, Opioid-Related Disorders, Stimulant-Related Disorders, Paranoid Personality Disorder, Schizoid Personality Disorder, Antisocial Personality Disorder, Borderline Personality Disorder, Histrionic Personality Disorder, Narcissistic Personality Disorder).

A key purpose of this assignment is to gain familiarity with the DSM-5-TR while simultaneously developing/enhancing the clinical competency related to knowledge-translation and psychoeducation. Accurate and accessible educational resources help inform client/patient and family members regarding health /health care decisions, as well as challenge stigma at a broader community level. The information materials (i.e., brochure, digital webpage) developed should be designed as if they will be shared with **new clients/patients**, or **potential clients/patients** (i.e., those considering/contemplating accessing mental health services). This material should consider the population focus of this course (i.e., 19-64 years). Students should consider including materials pertinent to the following:

- Provide clear and concise information summarizing the nature of the disorder, including such
  factors as a) diagnostic criteria, b) diagnostic features, c) associated features, d) prevalence and
  course, e) risk and prognostic factors, f) culture-related diagnostic issues, g) sex- and genderrelated diagnostic issues, h) functional consequences, i) differential diagnosis, and j)
  comorbidity.
- This information should be written in a manner that is accessible to the intended audience. In creating these materials, special consideration should be given to factors such as reading level and be inclusive/meaningful/accessible to diverse populations (e.g., culture, social location, language etc.).
- It is also important to consider that to heighten the chances of clients/patients reading mental health literacy/educational materials, these materials must be engaging (e.g., visually etc.) and useful/meaningful (e.g., containing helpful information that is easily understood). Therefore, it is important to consider how best to balance the use of 'content' and the 'process' through which your materials convey/present this content.

This material will be no longer than two (2) pages (front and back of a letter-sized piece of paper; brochure format is acceptable) using 11-point Calibri font. References throughout the paper (within text citation) and the reference section must be included within the two-page limit, and are required to conform to APA format [American Psychological Association, 2020 Publication Manual (7<sup>th</sup> ed.)]. Assignments are to be submitted via the D2L Dropbox.

<u>Assessment Criteria:</u> A marking/grading rubric will be provided via D2L. This assignment is worth 20% of the total grade for the course. The late bank is <u>NOT</u> applicable for Assignment 1 (i.e., cannot be used for Assignment 1). If the group format is selected all students in the group will receive the same grade.

# Assignment 2 - <u>Option A</u>: Demonstration of Clinical Competencies: Informed-consent (video) Demonstration (worth 20%).

Due Date: September 30<sup>th</sup> by 11:59pm MST

Aligned Course Learning Outcomes: 1, 2, 3, 4

# **Assignment Description:**

The informed consent process is a key competence (skill and knowledge) that is integral to all clinical social work services. This assignment will help support the student moving from a theoretical knowledge/understanding of the informed consent process towards synthesizing this knowledge into their skill base and clinical practice repertoire. Students completing this assignment are required to produce a brief video (approximately 10 minutes duration) demonstrating their skill set to work through an informed consent process with a simulated partner. It is recommended, although not required for you to use a partner from class to role-play a emerging adult/adult (i.e., 19-64-year-old) 'client' accessing mental health and/or addictions services. If the student elects to use a simulated client that is not a classmate, it is **NOT permitted to use an actual client for the assignment.** A brief clinical vignette/case scenario will be provided in class (i.e., posted to D2L) to provide ample context/background material to guide the informed consent role-play. This demonstration can be conducted via Zoom. If Zoom is used to complete the assignment, the student must ensure that both the interviewer role and the simulated client are both visible at all times throughout the recording. Students should practice prior to video recording, by themselves and/or with their role play partner, prior to completing the final recording. The student can inform their demonstration via notes (i.e., they can refer to notes, including a checklist provided via D2L related to the informed consent process) throughout the video demonstration. It is **NOT** expected for this demonstration to be done from memory (i.e., without notes). The focus of this assignment is to practice the skill of task engagement, which typically begins with the informed consent process. The student is practicing their accuracy related to covering the key points of the informed consent process with the client, while also displaying their ability to **build rapport**. Therefore, the video recorded demonstration should **NOT** be a scripted interaction, nor should the student simply read from their notes. The Zoom recording or a link to this Zoom recording (video and audio) should be submitted via Dropbox.

<u>Assessment Criteria:</u> A grading/marking rubric will be available via D2L. This assignment is eligible for the Late Bank (i.e., you are permitted to use the late bank days for this assignment).

Assignment 2- <u>Option B</u>: Demonstration of Clinical Competencies: Biopsychosocial Assessment Report (worth 20%).

Due Date: September 30th by 11:59pm MST

Aligned Course Learning Outcomes: 1, 2, 3, 4, 5, 6

### **Assignment Description:**

The ability to write a biopsychosocial assessment report is a key competence (skill and knowledge) that is integral to clinical social work services. This assignment option will help support students moving from a theoretical knowledge/understanding of best-practices (i.e., principles, processes, and parameters) towards synthesizing this knowledge into their skill base and clinical practice repertoire. From a case scenario (i.e., simulated patient/client file posted to D2L), and consistent with the template for a general biopsychosocial assessment template (posted to D2L) utilized within the course, students will write a formal assessment report that accounts for bio-psycho-social influences including familial and social cultural factors and risk and protective factors. This assignment is **NOT** a theoretical paper about biopsychosocial assessments and will be written from the perspective that you were the social worker who conducted the interview(s)/assessment and gathered the rough materials provided in the simulated patient/client file. You will write up the assessment report as if you were writing a professional report to be placed in the patient/client file in a manner consistent with social work values and professional standards and will accurately reflect the case materials (i.e., virtual case file). You should draw directly from course materials including theories, frameworks and/or research and utilize the template provided for this assignment. For this assignment you will NOT be completing a mental status exam, formulation, diagnosis, or treatment plan.

This submitted paper will be **no longer than six (6) double-spaced typed pages** excluding references using 11-point Calibri font and 1-inch margins. As the formatting for this assignment is to be consistent with the template. As the formatting for this assignment is to be consistent of a clinical report/document, it is **NOT** expected that students will explicitly reference materials/ resources (i.e., literature) in their paper. However, if sources are drawn upon, then they should be referenced within the paper and on the reference page in a manner conforming to APA guidelines [American Psychological Association, 2020 Publication Manual (7<sup>th</sup> ed.)]. Assignments are to be submitted via the D2L Dropbox.

<u>Assessment Criteria:</u> A grading/marking rubric will be available via D2L. This assignment is eligible for the Late Bank (i.e., you are permitted to use the late bank days for this assignment).

# Assignment 3: Demonstration of Clinical Competencies: Working case formulation/case conceptualization (i.e., 4P Grid) (worth 20%).

Due Date: October 7th by 11:59pm MST

Aligned Course Learning Outcomes: 1, 2, 3, 4, 5, 6

#### Assignment Description:

The ability to develop a working formulation is integral to guide/inform intentional clinical social work practice in the field of mental health. The working formulation (i.e., represented by the 4P Grid) is also an important intermediary step that informs the development of formal written case formulations/case conceptualizations (i.e., a step that will be covered in future courses in the MHA

cluster). From a case scenario provided in class, students will adopt the stance/perspective that they are the clinical social worker working with this case. The task of this clinical social worker is to develop a rough/working case formulation/case conceptualization informed by the bioecological frameworks of mental health. Specifically, in relation to the case vignette materials provided you will complete a "4 P Formulation Grid" examined in the course including identifying the presenting problem, predisposing, precipitating, perpetuating, and protective factors, in relation to biological, psychology, socio-structural contexts relevant to the case. A template for the Formulation Grid will be provided. Students will be required to write succinctly in bulleted/point-form (8-point Ariel Narrow font) typing the relevant information from the case vignette into the area of the Grid they determine to be most relevant/applicable to the information provided in the case-vignette.

<u>Assessment Criteria:</u> A grading/marking rubric will be available via D2L. This assignment is eligible for the Late Bank (i.e., you are permitted to use the late bank days for this assignment).

# Assignment 4: Knowledge-based Quiz Regarding the DSM-5-TR Classification tool (i.e., DSM-5-TR introduction, Use of the manual, Culture and psychiatry diagnosis) (worth 10%).

<u>Due Date:</u> To be completed in-class (9:00-9:30am) October 10, 2024.

Aligned Course Learning Outcomes: 1, 2, 3, 5

## **Assignment Description:**

Knowledge of the DSM-5-TR, as it pertains to the nature of the classification tool/nosology (i.e., Introductory Chapter of the DSM-5-TR; Use of the Manual, Culture and Psychiatric Diagnosis) is an essential tool for clinical social work practice. This closed book 10-question multiple choice quiz evaluates your knowledge of materials covered in the course specific to DSM-5-TR. This quiz will NOT cover the DSM-5 chapter on Assessment Measures. This quiz is completed within class.

<u>Assessment Criteria:</u> This a multiple-choice quiz with four potential responses (A, B, C, D). Correct responses are summed to a total score and converted to a percentage of the course total. The Late Bank is <u>NOT</u> applicable for Assignment 4 (i.e., the late bank cannot be used).

# Assignment 5 - <u>Option A</u>: Demonstration of Clinical Competencies: Motivational Interviewing demonstration (worth 30%).

<u>Due Date</u>: October 14<sup>th</sup> by 11:59pm MST

Aligned Course Learning Outcomes: 1, 2, 3, 4, 5, 6

# **Assignment Description:**

The ability to conduct a interview informed by motivational interviewing (MI) is an important competence (skill and knowledge) for clinical social work services. This assignment will help support students moving from a theoretical knowledge/understanding of best-practices for MI in a mental health context towards synthesizing this knowledge into their skill base and clinical practice repertoire. Students are required to produce a brief video (approximately 20-30 minutes duration) demonstrating a shortened/truncated MI interview. For the purposes of this assignment the student

will select one, or two phases of MI (i.e., engagement, focusing, evoking, planning). Due to time constraints the video demonstration will end following the completion of the select phase (i.e., you do not need to conduct a full session). This demonstration will NOT include the informed consent process, as this has been demonstrated in a previous assignment. It is recommended, although not required for you to use a partner from class to role-play an emerging adult/adult (i.e., 19-64-yearold) 'client' accessing mental health and/or addictions services. If the student elects to use a simulated client that is not a classmate, it is NOT permitted to use an actual client. A brief clinical vignette/case scenario will be provided in class (i.e., posted to D2L) to provide ample context/background material to guide the informed consent role-play. This demonstration can be conducted via Zoom. If Zoom is used to complete the assignment, the student must ensure that both the interviewer role and the simulated client are both visible at all times throughout the recording. Students should practice prior to video recording, by themselves and/or with their role play partner, prior to the assignment, using the tool-box provided within the course (posted to D2L). The intention of this assignment is not to record a demonstration that is a scripted interaction, where the student and role play partner are simply reading from their notes or a script. The Zoom recording or a link to this Zoom recording (video and audio) should be submitted via Dropbox.

<u>Assessment Criteria:</u> A grading/marking rubric will be available via D2L. Only the student acting in the role of the simulated clinical social worker will be evaluated/graded for this assignment. This assignment is eligible for the Late Bank (i.e., you are permitted to use the late bank days for this assignment).

# Assignment 5 - <u>Option B:</u> Demonstration of Clinical Competencies: Single-Session Interview demonstration (worth 30%).

Due Date: October 14th by 11:59pm MST

Aligned Course Learning Outcomes: 1, 2, 3, 4, 5, 6

### <u>Assignment Description:</u>

The ability to conduct a single-session interview is an important competence (skill and knowledge) for clinical social work services. This assignment will help support students moving from a theoretical knowledge/understanding of best-practices for single-session interviewing in a mental health context towards synthesizing this knowledge into their skill base and clinical practice repertoire. Students are required to produce a brief video (approximately 20-30 minutes duration) demonstrating a shortened/truncated single-session interview. For the purposes of this assignment the student will conduct a segment of a single-session interview. For example, the student may decide to demonstrate the beginning phase (i.e., exploring client's story, reason for attending/client's hopes regarding service engagement, including exploration of current coping), or aspects of the middle phase (i.e., exploring specific client goals/focus for the session, co-developing and communicating a formulation, setting therapeutic goals; exploring the miracle question), or the ending phase (i.e., exceptions, scaling, affirmations/normalizing, home-based task). Due to time constraints the video demonstration will end following the completion of the selected phase in a manner that does not demonstrate a full beginning, middle and end of a single session interview. Regardless of the phase of the session selected for the demonstration, this assignment will **NOT** include the informed consent process, as this has been demonstrated in a previous assignment. It is recommended, although not required for you to use a partner from class to role-play an emerging adult/adult (i.e., 19-64-yearold) 'client' accessing mental health and/or addictions services. If the student elects to use a

simulated client that is not a classmate, it is **NOT permitted to use an actual client**, or a video recording of a client. A brief clinical vignette/case scenario will be provided in class (i.e., posted to D2L) to provide ample context/background material to guide the informed consent role-play. This demonstration can be conducted via Zoom. If Zoom is used to complete the assignment, the student must ensure that both the interviewer role and the simulated client are both visible at all times throughout the recording. Students should practice prior to video recording, by themselves and/or with their role play partner, prior to the assignment, using the tool-box provided within the course (posted to D2L). The intention of this assignment is not to record a demonstration that is a scripted interaction, where the student and role play partner are simply reading from their notes or a script. The Zoom recording or a link to this Zoom recording (video and audio) should be submitted via Dropbox.

<u>Assessment Criteria:</u> A grading/marking rubric will be available via D2L. Only the student acting in the role of the simulated clinical social worker will be evaluated/graded for this assignment. This assignment is eligible for the Late Bank (i.e., you are permitted to use the late bank days for this assignment).

#### ADDITIONAL ASSESSMENT AND EVALUATION INFORMATION

# **ATTENDANCE AND PARTICIPATION EXPECTATIONS**

Students are expected to be fully present and engaged in each class activities and discussions. If a student must miss a class, it is the student's responsibility to catch up on discussions, notes and other information through other classmates and/or D2L. All class PowerPoints, videos, reading and other material will be posted on D2L. If classes are conducted virtually, Zoom sessions will be recorded when appropriate for lecture material but some class discussion may not be recorded due to confidentiality concerns of other students.

### **GUIDELINES FOR SUBMITTING ASSIGNMENTS**

Please submit all assignments electronically through their respective Dropbox in D2L. Assignments may be submitted in Word or PDF format. Assignments should have a file name as follows: "Full name and assignment number" (e.g., Jane Smith Assignment 2). Please note that it is the student's responsibility to keep a copy of each submitted assignment and to ensure that the proper version is submitted.

### **LATE ASSIGNMENTS**

A 5 day 'Late Bank' will be available to all students, and they can use these days at their own discretion and without explanation. You do not need to let the instructor know ahead of time that you are using days in your Late Bank for a task. Rather, simply make a note in Dropbox when you submit the task that you are using your late bank days when you submit. **The late bank is only available for Assignments 2, 3, & 5** (i.e., you cannot use the late bank for Assignment 1 or Assignment 4). Please note that the five (5) days in your late bank is <u>five days total</u> (i.e., not 5 days per assignment). Once you have used up your 5 Late Bank days, a penalty of 10% per day will apply for assignments submitted late, without prior communication and approval from the course instructor.

# **EXPECTATIONS FOR WRITING**

All assignments will be assessed partly on writing skills. Writing skills include not only surface correctness (grammar, punctuation, sentence structure, etc.) but also general clarity and organization. Sources used in research papers must be properly documented and referenced in APA 7<sup>th</sup> edition format (2020). If you need writing support, please connect with the Student Success Centre, at: <a href="https://www.ucalgary.ca/student-services/student-success/writing-support">https://www.ucalgary.ca/student-services/student-success/writing-support</a>

# **ACADEMIC MISCONDUCT**

It is expected that all work submitted in assignments is the student's own work, written expressly by the student for this particular course. Students are reminded that academic misconduct, including plagiarism, has serious consequences, as set out in the University Calendar: <a href="http://www.ucalgary.ca/pubs/calendar/current/k.html">http://www.ucalgary.ca/pubs/calendar/current/k.html</a>

#### **GRADING**

A student's final grade for the course is the sum of the separate assignments. It is not necessary to pass each assignment separately in order to pass the course. The University of Calgary Graduate Grading System and Faculty of Social Work Percentage Conversion will be used. This grading system overrides the grading system in D2L. The rounding up of grades will occur when the earned grade is calculated to be greater than, or equal to a .5, in situations where this will result in an elevation of the submitted Letter Grade (i.e., 84.5 will be rounded up to 85; 89.5 will be rounded up to 90; 94.5 will be rounded up to 95 etc.). The rounding of grades only occurs in relation to the calculation of the final course grade and not to individual assignments.

Grade	Grade Point	Description	Percentage Range
A+	4.0	Outstanding performance	95-100
А	4.0	Excellent performance	95-100
A-	3.7	Very Good Performance	90-94
B+	3.3	Good Performance	85-89
В	3.0	Satisfactory performance. <b>Note</b> : The grade point value (3.0) associated with this grade is the minimum acceptable <b>average</b> that a graduate student must maintain throughout the programme as computed at the end of each year of their program.	80-84
B-	2.7	Minimum pass. <b>Note:</b> Students who accumulate two grades of "B-" or lower can be required by the	75-79

		Faculty to withdraw from the program regardless of their grade point average.	
C+	2.3	All grades of "C+" or lower are indicative of failure at the graduate level and cannot be counted towards Faculty of Graduate Studies course requirements.	70-74
С	2.00		65-69
C-	1.70		60-64
D+	1.30		55-59
D	1.00		50-54
F	0.00		Below 50
CR		Completed Requirements. Carries no weight in calculating the grade point average. This will be noted in the calendar description as "Not Included in GPA" where applicable.	

#### **COURSE EVALUATION**

At the close of each term, students can provide feedback on their academic learning experience in their courses, including their instructors, through university-wide online surveys. Student feedback contributes to ensuring academic excellence in the university's curriculum by bringing direct feedback to instructors.

Students will receive an email from UCalgary Course Experience Surveys with direct links to their current course surveys, or they can access within the D2L course shell. For more information, visit: https://www.ucalgary.ca/provost/teaching-learning/student-surveys/usri

Students are welcome to discuss the process and content of the course at any time with the instructor. Student feedback will be sought weekly through the student participation form. This feedback is optional.

# **ADDITIONAL SUGGESTED READINGS**

Additional suggested readings will be posted to D2L.

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# **Professional Conduct**

As members of the University community, students and staff are expected to demonstrate conduct that is consistent with the University of Calgary's <u>Code of Conduct</u>.

Students and staff are also expected to demonstrate professional behaviour in class that promotes and maintains a positive and productive learning environment. Consistent with the aims of the Social Work Program and the University of Calgary, all students and staff are expected to respect, appreciate, and encourage expression of diverse world views and perspectives; to offer their fellow community members unconditional respect and constructive feedback; and to contribute to building learning communities that promote individual and collective professional and personal growth. While critical thought and debate is valued in response to concepts and opinions shared in class, feedback must always be focused on the ideas or opinions shared and not on the person who has stated them.

Students and staff are expected to model behaviour in class that is consistent with our professional values and ethics, as outlined in the <u>Canadian Association for Social Workers, Code of Ethics</u> (2005) and the Alberta College of Social Work Standards of Practice (2019).

#### **Academic Accommodation**

It is the student's responsibility to request academic accommodations according to the University policies and procedures. Students seeking an accommodation based on disability or medical concerns should contact <u>Student Accessibility Services</u> (SAS). SAS will process the request and issue letters of accommodation to instructors. Students who require an accommodation in relation to their coursework based on a protected ground other than disability should communicate this need in writing to their instructor. Please refer to the full policy on <u>Student Accommodations</u>.

#### **Research Ethics**

"If a student is interested in undertaking an assignment that will involve collecting information from members of the public, they should speak with the course instructor and consult the <a href="CFREB Ethics">CFREB Ethics</a> Website before beginning the assignment.

### **Academic Misconduct**

For information on academic misconduct and its consequences, please refer to the <u>Integrity and Conduct</u> section in the University of Calgary Calendar.

# **Instructor Intellectual Property**

Course materials created by professor(s) (including presentations and posted notes, labs, case studies, assignments and exams) remain the intellectual property of the professor(s). These materials may NOT be reproduced, redistributed or copied without the explicit consent of the professor. The posting of course materials to third party websites such as note-sharing sites without permission is prohibited. Sharing of extracts of these course materials with other students enrolled in the course at the same time may be allowed under fair dealing.

# **Copyright Legislation**

All students who use materials protected by copyright are expected to comply with the University of Calgary policy on <u>Acceptable Use of Material Protected by Copyright</u> and requirements of the <u>Copyright Act</u> to ensure they are aware of the consequences of unauthorised sharing of course materials (including instructor notes, electronic versions of textbooks etc.). Students who use material protected by copyright in violation of this policy may be disciplined under the <u>Non-Academic Misconduct Policy</u>.

## Freedom of Information and Protection of Privacy

Student information will be collected in accordance with typical (or usual) classroom practice. Students' assignments will be accessible only by the authorized course faculty. Private information related to the individual student is treated with the utmost regard by the faculty at the University of Calgary.

## **Sexual and Gender-Based Violence Policy**

The University recognizes that all members of the University Community should be able to learn, work, teach and live in an environment where they are free from harassment, discrimination, and violence. The University of Calgary's <u>Sexual and Gender-based Violence Policy</u> guides us in how we respond to incidents of sexual violence, including supports available to those who have experienced or witnessed sexual violence, or those who are alleged to have committed sexual violence. It provides clear response procedures and timelines, defines complex concepts, and addresses incidents that occur off-campus in certain circumstances.

# **Other Important Information**

Please visit the Registrar's website for additional important information on the following:

- Wellness and Mental Health Resources
- Student Success
- Student Ombuds Office
- Student Union (SU) Information
- Graduate Students' Association (GSA) Information