



**SCHOOL OF SOCIAL WORK**

**FALL 2012**

**CLINICAL PRACTICE IN MENTAL HEALTH**

**SWK 510-01**

**Mondays 6:00 PM – 9:00 PM**

**HENDERSON HALL: 302**

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<b>INSTRUCTOR:</b>	Chris Stewart, Ph.D.
<b>OFFICE:</b>	Henderson 323C
<b>PHONE:</b>	(903) 468-3103
<b>E-MAIL:</b>	Chris.Stewart@tamuc.edu
<b>OFFICE HOURS:</b>	TBA

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**COURSE DESCRIPTION:**

The purpose of this course is (1) to present the Diagnostic and Statistical Manual of Mental Disorders (“DSM”) as a knowledge base for enhancing social workers’ understanding of the individual biopsychosocial function and (2) to expand social workers’ ability to use the DSM-IV-TR to work with at-risk populations across diverse settings and with diverse mental health professionals. The course is critical for social workers to learn how to perform comprehensive assessments and to devise effective interventions for clinically impaired populations. Additionally, the nomenclature is applicable across diverse contexts and multi-theoretical orientations. Ethical dilemmas inherent in categorizing and labeling will be highlighted along with cultural concerns in using a homogenous system of diagnostic classes.

**GOAL & COMPETENCIES:**

**1. Prepare MSW graduates for professional advanced generalist practice that reflects application and integration of critical thinking, theoretical frameworks, and differential interventions. Graduates will be able to demonstrate the following competencies:**

C 1.1 Apply critical and independent analysis of practice situations and effectively communicate their judgments, reasoning and decision-making processes (2.1.3)

C 1.2 Apply and contribute to evidence-based and best practice approaches to continuously assess and improve the efficacy and effectiveness of practice (2.1.6)

C 1.3 Differentially apply theories and frameworks of HBSE and critique interactions between and among biological, psychological, social, spiritual and cultural systems and their reciprocal relationships with HBSE. (2.1.7)

**2. Enable MSW graduates to apply ethical reasoning to advance equality, justice, and social change. Graduates will be able to reflect the following competencies:**

C. 2.2 Apply social work ethical principles to resolve dilemmas and create positive change among individuals, families, groups, organizations & communities (2.1.2)

**3. Promote leadership and service that is relevant to individual contexts of practice and enhances well-being and quality of life. Graduates will be able to reflect the following competencies:**

C. 3.1 Exemplify and model professional social work standards and strive to enhance their professional growth and development (2.1.1)

C 3.2 Use leadership skills indicative of an advanced generalist practitioner to proactively respond amidst changing contexts (2.1.9)

C 3.4 Effectively intervene with individuals, families and groups, and provide administrative leadership and direction in organizations and communities as advanced generalist practitioners. (\*\* New AGP Objective)

**COURSE OBJECTIVES:**

1. Students will be able to define mental health, mental illness, and mental well-being.
2. Students will be able to compare etiology and treatment options and evidence-based practice criteria for various mental disorders.
3. Students will understand the nomenclature, coding, and classification system of the DSM-IV-TR, a common reference frame across mental health disciplines.
4. Students will be able to articulate the role of DSM-IV-TR diagnoses in a comprehensive biopsychosocial assessment and integrated treatment plan.
5. Students will be able to describe the ethical dilemmas in classifying and reporting procedures of the DSM-IV-TR, specifically the hazards of labeling.
6. Students will demonstrate awareness of the professional role of social workers in working with multidisciplinary treatment teams.
7. Students will be aware of the empirical research studies that are conducted in the ongoing development of the DSM-IV-TR.
8. Students will be able to use decision tree tools to enhance critical thinking skills.
9. Students will develop a heightened awareness of their own biases associated with the stigmas against persons with mental disorders.
10. Students will be able to articulate the cultural biases inherent in classification systems designed to assign person to homogenous categories.
11. Students will gain an in-depth understanding about special groups (GLBT, older adults and racial/ethnic groups) and mental illness and mental health treatment.
12. Students will learn the intake process used by a social worker in a mental health setting.

**STUDENT LEARNING OUTCOMES:**

1. Students will be able to understand and effectively use the Diagnostic and Statistical Manual of Mental Disorders- IV-TR in clinical social work practice with adolescent, adult and older adult clients.

2. Students will understand the impact of race, ethnicity, gender, age, sexual orientation, and socioeconomic status on mental health of adults, particularly on symptom presentation, diagnosis, and access to care.

3. Students will be able to articulate the physical and psychological manifestations and course of

a range of conditions that can affect adolescent and adult functioning and development.

4. Students will be sensitive to the potential use of personal data in mental health assessments for persons who may be in vulnerable and in oppressed situations.
5. Students will recognize the impact of mental health conditions on individual, family, and community functioning and development.
6. Students will demonstrate an understanding of the ethical issues in assessment and diagnosis of mental health conditions.
7. Students will think critically about a client's condition to determine if the client has any type of mental health disorder
8. Students will be able to write a DSM-IV diagnostic axial statement for a client and be familiar with at least one other method of assessment.
9. Students will be able to frame questions to determine the presence of "red flags" of major disorders/health issues.
10. Students will be able to describe major mental disorders, or groups of disorders in terms that are clear and appropriate for clients and their family members.

**RELATIONSHIP TO OTHER COURSES:**

This course builds upon social work direct practice courses in the MSW Curriculum:

- SWK 506: Advanced Generalist Practice with Families
- SWK 505: Advanced Generalist Practice with Individuals
- SWK 509: Advanced Generalist Practice with Small Groups
- SWK 555, 557 and 559: Advanced Generalist Practice in Field Internship

**TEXTS:**

**Required Text:**

American Psychiatric Association. (2000). *Diagnostic and Statistical Manual of Mental Disorders (4<sup>th</sup> ed.) Text Revision DSM-IV-R*. Washington, D.C.: American Psychiatric Association. (May bring from agency or borrow one)

**Recommended Texts:**

- Bentley, K.J. (2002). *Social Work Practice in Mental Health: Contemporary Roles, Tasks, and Techniques*. Pacific Grove, CA: Brooks/Cole.
- Bentley, K.J., & Walsh, J.W. (2001). *The Social Worker and Psychotropic Medication. Toward Effective Collaboration with Mental Health Clients, Families, and Providers (2<sup>nd</sup> ed)*. Belmont, CA: Wadsworth.
- Dziegielewski, S.F. (2010). *DSM-IV-TR™ in Action (2nd Edition)*. New York: John Wiley & Sons.
- Gray, S. (2010). *Competency-based assessments in mental health practice and practical Applications*. New York: John Wiley & Sons.
- Wedding, D., Boyd, M.A., Niemic, R.M. (2005). *Movies & Mental Illness. Using Films to Understand Psychopathology (2<sup>nd</sup> ed)*. Hogrefe & Huber Publishing.
- Walsh, J. (2000). *Clinical Case Management with Persons Having Mental Illness. A Relationship-Based Perspective*. Belmont, CA: Brooks/Cole-Thomson Learning.

**CLASS ATTENDANCE:**

Students are expected to be on time and prepared to participate when class begins as well as be present throughout the entire class meeting. Classroom exercises, discussions, role plays, guest speakers and other in-class experiential exercises are essential for a student's professional learning and continued development of self-awareness. This form of learning cannot be "made up" once missed. Accordingly, attendance is required at all class meetings. There are no excused absences (except for military leave, jury duty, or religious holidays that are planned in advance). A student is considered absent if he/she arrives more than 30 minutes late to class, leaves 30 or more minutes early or does not come to class. **Students who have more than 2 absences, regardless of the reason, will have their grade lowered by one letter grade for each additional absence, beginning with the 3rd.** Missing 5 or more classes, for whatever reason, will result in a failing grade for the course.

Attendance is generally taken at the beginning of each class; students are responsible for letting the instructor know if they arrive late. Students who arrive for class after the first hour will be given .5 absences for that session. Additionally students, who choose to leave before the class has concluded, will be given .5 absences for that session.

If assignments are due on the date of an absence, it is the *student's responsibility* to make sure that the assignment is sent to the instructor on or before the due date. Students are also responsible for material covered in class during an absence and should make appropriate arrangements with a classmate to obtain notes from the material covered in class during their absence.

## **PARTICIPATION:**

Active participation in class lectures, discussions, and exercises is expected. Students should come to class prepared to discuss assigned readings and material presented in lectures. Students are responsible for information contained in the assigned readings, regardless of whether it is discussed in class. Students are required to utilize the required text. Students must come to class prepared to discuss and articulate in detail with critical thinking and analysis, each assigned chapter.

Full participation includes individual contribution to class discussion and respectfully providing thoughtful feedback to classmates. Students are expected to participate actively by drawing from field and other related experiences and by sharing with the rest of us anything of interest you may have found between classes (e.g., articles, media stories, handouts, etc.). As adult learners with a variety of professional and personal experiences your contributions are valued.

## **POLICY ON DUE DATES:**

All assignments are due **at the beginning** of the class period on the due date stated in the Course Schedule. Late assignments will automatically have 25 points deducted from the grade per day beginning with the due date and each day thereafter. ASSIGNMENTS WILL NOT BE ACCEPTED AFTER ONE WEEK past the due date. (*Assignments due at the beginning of class on Monday will not be accepted after class begins the following Monday*). *Please do not email an assignment to me unless you have received prior permission. It is easy to "lose" an email or have trouble opening attachments.*

## **WRITTEN ASSIGNMENTS:**

All written assignments must demonstrate acceptable writing style, including the use of Standard English, acceptable grammar, and the use of the American Psychological Association (APA) style of reference citation.

Part of the grading process will include an evaluation of presentation, including clarity, coherence, logic and organization of the assignment. All assignments must be typewritten, using double-spacing and standard margins. It is the student's responsibility to ensure the paper is in

the possession of the instructor by the designated time. Any papers left in the mailbox or any other place are not the instructor's responsibility. **All assignments must be turned in on hard copy, no electronic papers; either e-mail or disks will be accepted.** At the discretion of the instructor, it may be required to submit written assignments via "Turn-It-In", a program utilized to determine instances of plagiarism. Below is a partial list of factors that are addressed in the grading process:

- Any error in APA reference or citation format from the 6<sup>th</sup> edition
- Lack of quotation marks at the beginning and end of all direct quotes
- Extra or missing punctuation (i.e. commas, semi-colons, colons, periods)
- Incomplete sentences (i.e., sentences without a verb)
- Run-on sentences (i.e., sentences that run together without appropriate punctuation and capitalization delineating each sentence)
- Incorrect spelling
- Inappropriate and inconsistent verb tense
- Lack of noun-verb agreement
- Incorrect use of capitalization (e.g., social work is generally not capitalized)
- Incorrect use of possessives (examples of correct use are Shawn's book, the parents' child)
- Any contractions (e.g., I'm, can't, won't), except in direct quotes from another source)
- Lack of neatness (e.g., hand written corrections, uneven indentions)
- Papers that are not typewritten
- Use of a size other than #12 font
- Lines not double spaced
- Margins that are less than or wider than 1 inch
- Failure to indent the first line of a paragraph
- Incoherent sentences

## **CORRESPONDANCE:**

Students are expected to stay in communication with the instructor of this course either verbally, in writing or via e-mail. ***The preferred method of contact for the instructor is email.*** Only Texas A&M-Commerce University email accounts will be used in corresponding with the instructor.

## **CELL PHONES/PAGERS:**

Please turn your cell phone and/or pager (and other electronic devices) off during class. If you are on-call for your work, please place the cell phone or pager on silent mode. Texting during class is prohibited and really rude!

If you utilize a laptop to take class notes, please be aware of potentially distracting others around you and seat yourself accordingly. *Additionally, you may be asked to leave the class if it*

is determined you are utilizing a computer to do outside work, surf the web inappropriately or communicate personal conversations.

All students enrolled at the University shall follow the tenets of common decency and acceptable behavior conducive to a positive learning environment. (See Students' Guide Handbook, Policies and Procedures).

## **TAPES AND NOTES:**

While recordings of this class may be made for personal use recordings may not be sold or distributed to others. While you may make copies of these notes for your personal use, no copy of these notes may be distributed to anyone other than persons currently enrolled in the class; nor may any copies be sold.

## **UNIVERSITY HONOR CODE:**

“All students enrolled at the University shall follow the tenets of common decency and acceptable behaviour conducive to a positive learning environment” (Student's Guide Book, 1996-97, pp. 64-70). See also: Social Work Department Policies and Procedures, NASW Code of Ethics, and your MSW student handbook. A Departmental Code of Conduct is attached at the end of the syllabus.

Plagiarism is the “[A]ct of appropriating the literary composition of another, or parts of passages of his [or her] writings, or the ideas or language of the same, and passing them off as the product of one's own mind.” (Black's Law Dictionary, Abridged Fifth Edition, 1983). When a student gives proper credit to the source, it is not plagiarism.

Some examples of cheating include copying answers from another's test or assignment, using notes during an exam, giving or receiving help on assignments, and submitting work already submitted for a previous class for credit in another class. If a student suspects cheating is occurring during an exam, the student must immediately notify the instructor, so that the instructor can evaluate the situation while it is occurring.

Law, University policy, and ethical standards all require that students refrain from plagiarism or cheating in any form. Social workers must be honest, trustworthy, and therefore social work students must avoid any behavior that is dishonest, or impairs the trust of others. Instances of suspected plagiarism and/or cheating will be thoroughly evaluated. Students found in violation of this policy will be subject to disciplinary action by the Department and University. Violation of the above guidelines will result in a failing grade and possibly dismissal from the program.

## **ACCEPTABLE CLASSROOM BEHAVIOR:**

“Students at Texas A&M University-Commerce are expected to obey all federal, state, and local laws, in addition to the regulations of the University. The standards of Student Conduct including disciplinary rules and procedures are designed to provide and conform to the basic tenets of due process, as developed by institutions of higher education. As such, the University distinguishes these procedures and regulations as an educational and growth process which is not intended to conform to adversary proceedings as in a court of law. (Student’s Guide Book, 2011, p. 35).

## **CODE OF CONDUCT FOR SOCIAL WORK STUDENTS:**

The Department of Social Work expects all social work students to conduct themselves in an ethical, professional manner. Professional ethics are at the core of social work. The profession articulates its basic values, ethical principles, and ethical standards as set forth in the *NASW Code of Ethics* to guide social workers’ conduct. The *Code* is relevant to all social workers and social work students, regardless of their professional functions, the settings in which they work, or the populations they serve. Accordingly, we expect social work students to demonstrate courtesy, respect and support for fellow students, instructors, clients, and all other persons.

All students enrolled in BSW or MSW classes are expected to observe the tenets of the NASW Code of Ethics and the Social Work Student Code of Conduct. Our Code of Conduct is reflective of professional and academic expectations – a student who cannot demonstrate appropriate behaviors will not be appropriate for practice in the social work profession. Students who violate these Codes may be asked to meet with appropriate Social Work faculty (instructors or Program Directors). In addition, the department’s Academic and Professional Issues (API) Committee is responsible for dealing with student issues when requested by faculty. A copy of the Departmental code is available at the end of the syllabus.

## **STUDENTS WITH DISABILITIES:**

It is the policy of Texas A&M University-Commerce and the Social Work Department to do everything we can to accommodate students with disabilities, pursuant to federal and state law, and the University’s commitment to providing equal opportunities. Any student with a disability who needs accommodation, for example, in accessibility, seating placement or in arrangements for examinations should not hesitate to inform the instructor. If required, large type, Braille or cassette recordings of syllabus or assignments can be provided.

Students with conditions that require special attention or accommodation should contact the Director of Disability Resources & Services at 903-468-5150 (located in the Library, Room 132).

## **OVERVIEW OF ASSIGNMENTS:**

### **QUIZZES (4@25 points: 100 Points):**

Four quizzes will be given at the beginning of class (see schedule for dates). Questions will be developed on assigned readings and lecture materials. The format may include multiple choice, true/false, short answer and essay questions. **Students who come to class late will not be allowed to take the quiz and will receive a zero for the grade. No make-up quizzes will be given.**

### **CASE STUDIES (4@25 points: 100 Points):**

Four case studies will be assigned during the semester (see syllabus schedule for dates). The cases will require you to study the DSM-IV-TR to determine the diagnosis and prognosis for the client. You will be expected to write a clear synopsis of differential diagnoses, carefully depicting your reasoning for ruling out alternative diagnoses for each case study. The case study format can be seen in Appendix B.

### **CLIENT ASSESSMENT (100 Points):**

Each student will write a case study utilizing a client from your field class; should be a client with a DSM diagnosis. The assessment should include the following: 1) Complete data addressing all five axes of the DSM-IV-TR, 2) A quality assessment as to how alternative diagnoses were ruled-out, 3) Complete treatment plan, including a discussion of best-practices supported by current literature, 4) At least five appropriate resources, not including the DSM-IV-TR.

The mental health problem should be clearly identified, as well as how the problem affects the client's functioning (GAF) including family life, work, and social functioning. Write a treatment and termination plan to address the identified problem(s). See Appendix A for suggested outline. The assessment is due **11/26/12**.

### **COMPREHENSIVE TEST (50 Points):**

A comprehensive test will be given which reflects content from the entire course, including all lectures and class readings. The format may include multiple choice, true/false, short answer and essay questions. Questions may also come from any weekly readings or quizzes. The date of the comprehensive test is **12/03/2012**.

## **GRADING SCALE:**

The grading scale is based on a percentage of available points; any change in available points will result in a corresponding change in the grading scale.

315 – 350 points = (90%) A

280 – 314 points = (80%) B

245 – 279 points = (70%) C

> 245 – Don't go here!

## **Course Schedule**

The following outline is provided as a guide though variations may occur. The Instructor reserves the right to make schedule changes to enhance the presentation of course materials. Readings are to be completed prior to class meeting. Class activities are based on the assumption that readings have been completed. Lecture information is to be considered as supplemental to required readings. Students are responsible for all assigned reading even if it is not discussed during class meetings. Class time will highlight and add to the knowledge gained through assigned reading; it is not intended to replace knowledge gained through reading. Assignments are to be submitted at the beginning of the class period.

<b>COURSE SCHEDULE</b>			
<b>Week</b>	<b>Date</b>	<b>Topic</b>	<b>Assignments</b>
Week 1	08/27/12	Introduction to the Course; Course Expectations  Review Syllabus	DSM-IV-TR: (Introduction: xxiii-xxxvii)
Week 2	09/03/12	<b>LABOR DAY</b>	
Week 3	09/10/12	The Mind/Body Problem; What is a "Disorder?"  Introduction to the DSM-IV-TR	DSM-IV-TR: (pp. 1-37; 745-757)
Week 4	09/17/12	Diagnostic/Multiaxial Assessment	
Week 5	09/24/12	Disorders Usually First Diagnosed in Infancy, Childhood, or Adolescence	DSM-IV-TR: (pp. 39-134; 663-684)
Week 6	10/01/12	Cognitive Disorders	DSM-IV-TR: (pp. 135- 180)
Week 7	10/08/12	Mental Disorders Due to a General Medical Condition	DSM-IV-TR: (pp. 181-190)
Week 8	10/15/12	Substance-Related Disorders: Part I	DSM-IV-TR: (pp. 191- 295)
Week 9	10/22/12	Schizophrenia and Other Psychotic Disorders	DSM-IV-TR: (pp. 297-344)
Week 10	10/29/12	Mood Disorders	DSM-IV-TR: (pp. 345-42)
Week 11	11/05/12	Anxiety Disorders	DSM-IV-TR: (pp. 429-484)
Week 12	11/12/12	Eating Disorders	DSM-IV-TR: (pp. 583-596)
Week 13	11/19/12	Personality Disorders	DSM-IV-TR: (pp. 685-730)
Week 14	11/26/12	Review for Test	<b>Client Assessment Paper Due</b>
Week 15	12/03/12		<b>TEST</b>

**BIBLIOGRAPHY-JOURNAL ARTICLES:**

- Bekker, M.H.J., Belt,U. (2006). The role of autonomy in depression and anxiety. *Depression and Anxiety*, 23(5), 274-280.
- Bentley, K.J., Walsh, J., Farmer, R.L. (2005). Social work roles and activities regarding psychiatric medication: Results of a national survey. *Social Work*, 50(4), 295-303.
- Boyer, F., Novella, J.-L., Morrone, I., Jolly, D., Blanchard, F. (2004). The feasibility and effectiveness of brief interventions to prevent depression in older subjects: A systemic review. *International Journal of Geriatric Psychology*, 19(11), 1019-1034.
- Chaudron, L.H. (2007). Treating pregnant women with antidepressants : The gray zone. *Journal of Women's Health*, 16(4), 551-553.
- Courbasson, C.M.A., de sorkin, A.A., Dullerud, B., Van Wyk, L. (2007). Acupuncture treatment for women with concurrent substance use and anxiety/depression. *Family&Community Health*, 30(2), 112-120.
- Duffy, A. (2007). Does bipolar disorder exist in children? A selected review. *Canadian Journal of Psychiatry*, 52(7), 409-417.
- Forsell, Y., Winblad, B. (1998). Feelings of anxiety and associated variables in a very elderly population. *International Journal of Geriatric Psychiatry*, 13(7), 454-458.
- Fournier, R.R. (2002). A trauma education workshop on posttraumatic stress. *Health&Social Work*, 27(2), 113.
- Hinrichsen, H., Morrison, T., Waller, G., Schmidt, V. (2007). Triggers of self induced vomiting in bulimic disorders: The roles of core beliefs and imagery. *Journal of Cognitive Psychotherapy*, 21(3), 261-272.
- Hopcroft, R.L., Bradley, D.B. (2007). The sex difference in depression across 29 countries. *Social Forces*, 85(4), 1483-1507.
- Linhorst, D.M., Hamilton, G., Young, E., Eckert, A. (2002). Opportunities and barriers to empowering people with severe mental illness through participation in treatment planning. *Social Work*, 47(4), 425-434.
- McCrae, R.R., Jian Yang, Costa Jr., P.T., Xiaoang Dai, Shuqiao Yao, Taisheng Cai, Beiling Gao, (2001). Personality profiles and the prediction of categorical personality disorders. *Journal of Personality*, 69(2), 155-174.

- Power, M.J, Tarisia, M. (2007). Basic and complex emotions in depression and anxiety. *Clinical Psychology&Psychotherapy*, 14(1), 19-31.
- Raikes, J. (2003). Splitting hairs. *Psychology Today*, 36(3), 38.
- Rieher-Roller, A., Gschwandtner, U., Borgwardt, S., Aston, J., Pfluger, M., Rossler, W. (2006). Early detection and treatment of schizophrenia: How early? *Acta Psychiatrica Scandinavica*, 429(113), 73-80.
- Thompson, S., Herrmann, N., Rapoport, M.J., Lanctot, K.L. (2007). Efficacy and safety of antidepressants for treatment of depression in Alzheimer's disease. *Journal of Psychiatry*, 52(4), 248-255.
- Vogt, D.S., Tanner, L.R. (2007). Risk and resilience factors for posttraumatic stress symptomatology in Gulf War I veterans. *Journal of Traumatic Stress*, 20(1), 27-38.
- Walsh, J., Green, R., Matthews, J., Bonucelli-Puerto, B. (2005). Social workers' views of the etiology of mental disorders: Results of a national study. *Social Work*, 50(1) 43-52.
- Walsh, J. (2002). Shyness and social phobia. *Health&Social Work*, 27(2), 113.
- Williams, D.R., Haile, R., Neighbors, H., Gonzalez, H.M., Baser, R., Jackson, J.S. (2007). The mental health of black Caribbean immigrants: Results from the national survey of American life. *American Journal of Public Health*, 97(1), 52-59.



## School of Social Work Code of Conduct for Social Work Students

The School of Social Work expects all social work students to conduct themselves in an ethical, professional manner, consistent with our profession's Code of Ethics.

Preamble of the NASW Code of Ethics: The primary mission of the social work profession is to enhance human wellbeing and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty. The mission of the social work profession is rooted in a set of core values. These core values, embraced by social workers throughout the profession's history, are the foundation of social work's unique purpose and perspective:

- *Service*
- *Social justice*
- *Dignity and worth of the person*
- *Importance of human relationships*
- *Integrity*
- *Competence*

Professional ethics are at the core of social work. The profession has an obligation to articulate its basic values, ethical principles, and ethical standards. The *NASW Code of Ethics* sets forth these values, principles, and standards to guide social workers' conduct. The *Code* is relevant to all social workers and social work students, regardless of their professional functions, the settings in which they work, or the populations they serve.

Accordingly, we expect social work students to demonstrate courtesy, respect and support for fellow students, instructors, clients and all other persons. While the values of the profession are codified in the NASW Code of Ethics, we feel that the following additional standards of behavior are to be exhibited as well by all students enrolled in our program:

- 1. Accountability** – Attend class, arrive on time, return from breaks in a timely manner • Participate in activities and assignments in a level comparable to peers • Complete work in a timely fashion according to directions • Be prepared and engaged in the learning process.
- 2. Respect** – Treat your peers, instructors, and all other persons with dignity and respect at all times • Listen while others are speaking • Give constructive feedback when appropriate • Approach conflict in a cooperative manner • Use positive and nonjudgmental language.
- 3. Confidentiality and Boundaries** – Treat any personal information that you hear (or read) about a peer or an instructor as strictly confidential • Maintain information shared in class as confidential • Use judgment in self-disclosing information of a personal nature in the classroom (Class time is not therapy or treatment – seek a referral if you need it) • Never use names of clients or disclose other identifying information • Exercise clear and

appropriate boundaries between yourself and other students, your instructors and other professional relationships.

**4. Competence** – Apply yourself to all your academic pursuits with seriousness and conscientiousness • Meet deadlines given by your instructors • Constantly strive to learn and improve your abilities • Come to class prepared • Seek appropriate support when having difficulties • Take responsibility for the quality of completed tests and assignments • Strive to achieve greater awareness of personal issues that may impede your effectiveness with clients.

**5. Diversity** – Strive to become more open to people, ideas and creeds with which you are not familiar • Embrace diversity • Maintain speech free of racism, sexism, ageism, heterosexism, stereotyping, etc. • Exhibit a willingness to serve diverse groups of persons • Demonstrate an understanding of how values and culture interact.

**6. Integrity** – Practice honesty with yourself, your peers, and your instructors • Constantly strive to improve your abilities • Commit yourself to the academic discipline of citing other people’s work properly • Acknowledge areas where improvement is needed • Accept and benefit from constructive feedback.

**7. Communication** – Strive to improve both verbal and written communication skills as those skills are the benchmark for effective professional practice and helping relationships • Demonstrate appropriately assertive communication with peers and instructors • Practice positive, constructive, respectful and professional communication skills (both verbal and non-verbal) with peers, instructors and all other persons.

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*Adapted from Florida Atlantic University School of Social Work*

All students enrolled in BSW or MSW classes are expected to observe the tenets of the NASW Code of Ethics and the Social Work Student Code of Conduct. Students who violate these may be asked to meet with appropriate Social Work faculty (instructors or Program Directors). In addition, the department’s Academic and Professional Issues (API) Committee is responsible for dealing with academic and non-academic student issues when requested by faculty. The API is comprised of the various program directors and is chaired by the Department Head. The decisions or actions of the API are considered the final say of the department. Students may be disciplined or dismissed from the program for violation of this Code of Conduct. Students have the right to appeal any decision to the Dean of the College of Education and Human Services, as specified by university policy.

By signing below, I verify that I agree to abide by the standards of the NASW Code of Ethics and the Code of Conduct stated above.

\_\_\_\_\_

Print Name

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

## **APPENDIX A**

### **Client Assessment Outline**

- I. Multiaxial DSM-IV-TR Diagnosis (Axis I - V)
- II. Differential diagnosis (possible diagnostic alternatives) and rationale for the assigned diagnosis
- III. What else would you like to know?
- IV. Plan to obtain any additional assessment information (Evidenced-Based Assessment)?
- V. What are the client strengths; if none identified, how would you determine client's strengths ?
- VI. Initial Treatment Goals
- VII. What are some evidenced-based treatments for the client?
- VIII. Prognosis

**APPENDIX B**

**CASE STUDIES OUTLINE**

For Case Study Reports # 1 and # 2 you will only provide information under Axis I and Axis II. All five axes will be assessed for Case Study Reports # 3 and # 4.

**Multiaxial Evaluation Report Form**

**Axis I: Clinical Disorder/ Other Conditions that may be focus of clinical attention**

**Diagnostic Code**

**DSM-IV Name**

\_\_\_\_.\_\_\_\_

\_\_\_\_\_

\_\_\_\_.\_\_\_\_

\_\_\_\_\_

\_\_\_\_.\_\_\_\_

\_\_\_\_\_

**Axis II: Personality Disorders/Mental Retardation**

**Diagnostic Code**

**DSM-IV Name**

\_\_\_\_.\_\_\_\_

\_\_\_\_\_

\_\_\_\_.\_\_\_\_

\_\_\_\_\_

**Axis III: General Medical Conditions**

**ICD-9-CM Code**

**ICD-9-CM Name**

\_\_\_\_.\_\_\_\_

\_\_\_\_\_

\_\_\_\_.\_\_\_\_

\_\_\_\_\_

\_\_\_\_.\_\_\_\_

\_\_\_\_\_

**Axis IV: Psychosocial and Environmental Problems**

**Check:**

\_\_\_ Problems with primary support group-

Specify \_\_\_\_\_

\_\_\_ Problems related to the social environment

Specify \_\_\_\_\_

\_\_\_ Educational problems-

Specify \_\_\_\_\_

\_\_\_ Occupational problems-

Specify \_\_\_\_\_

\_\_\_ Housing problems-

Specify \_\_\_\_\_

\_\_\_ Economic problems-

Specify \_\_\_\_\_

\_\_\_ Problems with access to health care

Specify \_\_\_\_\_

\_\_\_ Problems related to interaction with the legal system/crime-

Specify \_\_\_\_\_

\_\_\_ Other psychosocial and environmental problems-

Specify \_\_\_\_\_

**Axis V: Global Assessment of Functioning Scale:** Score \_\_\_ \_\_\_ \_\_\_ Time Frame \_\_\_\_\_