The purpose of this course is to develop interprofessional collaborative practice core competencies among nursing, social work, and psychology students, develop and refine advanced practice skills regarding issues in aging, and the clinical aspects of common geriatric syndromes.

This course is a hybrid online course. Half of the sessions will be taught in a traditional lecture format in a classroom and half of the sessions will be online in synchronous and asynchronous format.

II. COMPETENCIES AND PRACTICE BEHAVIORS

The Council on Social Work Education (CSWE) requires that students meet 10 core competencies, which are operationalized as practice behaviors. Each course is designed to cover one or more of the ten core competencies and each course is also designed to cover some, but not all of the practice behaviors within a competency. Upon completion of this course, students will able to demonstrate the following practice behaviors within the noted competencies:

<table>
<thead>
<tr>
<th>Competency</th>
<th>Practice Behaviors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competency #1 Professional Identity:</td>
<td>Social workers demonstrate professional use of self across all practice settings.</td>
</tr>
<tr>
<td>Identify as a clinical social worker &amp; conduct self</td>
<td>Develop, manage, and maintain therapeutic relationships with clients within the</td>
</tr>
<tr>
<td>accordingly.</td>
<td>person-invironment and strengths perspectives.</td>
</tr>
</tbody>
</table>
| Competency #2 Ethical Practice:                      | Social workers recognize and manage personal biases in practice settings.  
| Apply social work ethical principles to guide clinical practice. | Social workers apply ethical principles through the use of an ethical decision making model that helps in the resolution of an ethical dilemma |
| Competency #3 Critical Thinking:                    | Social workers engage in reflective practice. Social workers evaluate the strengths and weaknesses of multiple theoretical perspectives and differentially apply them to client situations.  
| Apply critical thinking to inform and communicate professional judgments. | |
| Competency #4: Diversity in Practice:               | Social workers use their self-awareness to understand the influence of their personal biases and values in working with others. Social workers practice within the context of difference in shaping the life experiences of clients, themselves, and the working alliance.  
| Engage diversity and demonstrate awareness of the complexities regarding identity differences and how they play out in clinical practice. | |
| Competency #6 Research Based Practice:              | Social workers critically evaluate and utilize theoretical models and empirical research methods for the purpose of informing and evaluating social work practice and programs.  
| Engage in research-informed practice and practice-informed research | |
| Competency #7 Human Behavior:                       | Social workers differentially apply theories of human behavior that address the bio-psycho-social-spiritual nature of clients and the social environment to guide social work practice.  
| Apply knowledge of human behavior and the social environment. | |
| Competency #9 Practice Contexts:                    | Social workers assess the current political, economic, social, and cultural climate as it affects the most vulnerable members of society. Social workers intervene through advocacy to serve the most vulnerable persons within the political, economic, social, and cultural contexts.  
| Respond to contexts that shape practice. | |
### Competency #10 Engage, Assess, Intervene, Evaluate:

**Engage:**
Engage, assess, and intervene with individuals, families, and groups.

**Assess:**
- Use empathy, active listening, and other clinical skills to establish rapport in order to set treatment goals with clients.
- Develop culturally responsive therapeutic relationships.
- Attend to the interpersonal dynamics and contextual factors that both strengthen and potentially threaten the therapeutic alliance.

**Intervene:**
- Use multi-dimensional assessment tools that include bio-psycho-social-spiritual data to assess client’s strengths, capacities, and readiness for change
- Develop, with clients, an intervention plan that incorporates client strengths, capacities, and protective factors.
- Use culturally appropriate clinical techniques for a range of presenting concerns identified in the assessment.
- Adapt appropriate intervention strategies based on continuous clinical assessment

**Evaluate:**
- Critically analyze, monitor, and evaluate interventions and program implementation and outcomes

### II. ADDITIONAL EDUCATIONAL OBJECTIVES

**At the completion of the course, the student should also be able to:**

1. Identify current and projected demographic characteristics of the changing U.S. population (differences in needs of coexisting “survivor” cohort vs. baby boomer cohort).

2. Describe current U.S. health care policies and impact on older adults health and functioning (health and financial status of older adult population; overview of Medicare, Medicaid, Social Security and health insurance coverage options other than Medicare; impact on older adults of health care provider Medicare/Medicaid reimbursement mechanisms; financial status/trends impacting older adult population).

3. Differentiate normal physical changes of aging from pathology of disease; identify the impact of normal physical changes of aging on presentation of illness and response to treatment.
IV. COURSE REQUIREMENTS

A. Required Reading


B. Recommended Reading


This web edition provides accessible, concise information for any healthcare professional or trainee caring for older adults with complex, chronic diseases and disorders.


Online quick reference that summarizes APA format: http://owl.english.purdue.edu/owl/resource/560/10/

C. Other Recommended Resources and Media

National Institute on Aging http://www.nia.nih.gov/
Centers for Disease Control and Prevention: Healthy Aging http://www.cdc.gov/aging/
Administration on Aging http://www.cdc.gov/aging/
National Council on Aging http://www.ncoa.org/
American Society on Aging http://www.asaging.org/
Health in Aging http://www.healthinaging.org/
American Federation for Aging Research http://www.afar.org/
Aging with Dignity http://www.agingwithdignity.org/
Medicare http://www.medicare.gov/
Medicaid http://www.medicaid.gov/
Social Security http://www.ssa.gov/pgm/ssi.htm

Geriatric Associations and Societies:

American Academy of Home Care Physicians  www.aahcp.org
Dedicated to promoting the art, science, and practice of medicine in the home.

American Association of Consulting Pharmacists
www.ascp.com
The American Association of Consulting Pharmacists is a professional association.
that provides leadership, education, advocacy and resources enabling senior care pharmacists to enhance quality of care and quality of life for older individuals.

**American Geriatrics Society**  
[www.americangeriatrics.org](http://www.americangeriatrics.org)  
The American Geriatrics Society (AGS) is an organization of over 6,000 health care providers working to improve the health and well-being of all older adults.

**American Medical Directors Association (AMDA)**  
[www.amda.com](http://www.amda.com)  
For physicians interested in the practice of medicine in long term care institutions.

**American Society on Aging**  
[www.asaging.org](http://www.asaging.org)  
A nonprofit organization with the goal of increasing the knowledge and skills of those working with older adults and their family.

**Gerontological Advanced Practice Nurses Association**  
[https://www.gapna.org](https://www.gapna.org)  
Represents the interests of certified advanced practice nurses who work with older adults in a wide variety of practice settings. GAPNA is the organization of choice for advanced practice nurses who want to pursue continuing education in gerontological care and who seek peer support from experienced clinicians.

**Geriatric Social Work Initiative**  
[www.gswi.org](http://www.gswi.org)  
The GSWI, supported by the John A. Hartford Foundation, collaborate with social work education programs to prepare needed, aging-savvy social workers and improve the care and well-being of older adults and their families.

**Gerontological Society of America (GSA)**  
[www.geron.org](http://www.geron.org)  
The GSA promotes using basic and applied research on aging to improve the quality of life as one ages.

**John A. Hartford Foundation**  
[www.jhartfound.org](http://www.jhartfound.org)  
Is a committed champion of health care training, research and service system innovations that will ensure the well-being and vitality of older adults. Its mission is to improve the health of older Americans.

**National Association of Professional Geriatric Care Managers**  
[www.caremanager.org](http://www.caremanager.org)  
NAPGCM is a non-profit professional development organization whose mission is to advance professional geriatric care management through education, collaboration, and leadership. A professional geriatric care manager is a health and human services specialist who helps families who are caring for older relatives. The GCM is trained and experienced in any of several fields related to care management, including nursing, gerontology, social work or psychology.

**National Center for Gerontological Social Work Education**
The CSWE Gero-Ed Center prepares social work faculty and students to meet the demographic realities of our aging society.

**Top Ten Geriatric Journals Listed by 2009 Impact Factor:**

*Aging Cell (7.55)*  
*Neurobiology of Aging (5.94)*  
*Age (5.84)*  
*Ageing Research Reviews (5.62)*  
*Mechanisms of Ageing and Development (4.18)*  
*Rejuvenation Research (4.14)*  
*Journal of the American Medical Directors Association (3.71)*  
*Journal of the American Geriatrics Society (3.66)*  
*American Journal of Geriatric Psychiatry (3.35)*  
*Experimental Gerontology (3.34)*

**Geriatric Journals (Nursing):**


*Research in Gerontological Nursing  [http://geronurseresearch.com/](http://geronurseresearch.com/) A forum for disseminating peer-reviewed, cutting-edge interdisciplinary gerontological nursing research to educators, academicians, clinicians, and policymakers involved with older adults in all health care settings.*

*Gero Gems Series  [http://nursing.uc.edu/centers/aging_with_dignity/exploring_aging/gero_gems.html](http://nursing.uc.edu/centers/aging_with_dignity/exploring_aging/gero_gems.html) From the University of Cincinnati Center for Aging with Dignity, this site offers Your Care Advocate publications intended primarily for professionals in health care and social services. Each publication covers a specific topic and provides resources and recommendations. These publications are learning tools and may be helpful as a refresher or review to enhance people’s understanding of aging-related issues.*

**Geriatric Journals (Social Work):**

*Journal of Gerontological Social Work  [http://www.tandfonline.com/loi/wger20](http://www.tandfonline.com/loi/wger20) With over 30 years of consistent, quality articles devoted to social work practice, theory, administration, and consultation in the field of aging, the Journal of Gerontological Social Work offers you the information you need to stay abreast of the changing and controversial issues of today's growing aging population.*
D. Course Assignments:

**Knowledge Checks:** Students will complete a Knowledge Check test before each class. These tests will cover material in the readings and online lectures assigned for each class. Each class a review of the Knowledge Checks will be reviewed in a class discussion. **Due by noon the day of class – except for the first one.**

**Interview of an individual over the age of 65.** Each student will conduct a structured interview with an individual over the age of 65. The student will write up a summary of the interview, what they learned new, how an interprofessional team might work with this individual, and a reflection on their experience during the interview. The structured interview questions will be provided by instructors. **Due March, 2 (Class 8) Dr. Selway students submit via Blackboard and Dr. B’s students send as a Word document attachment via email.**

**Scholarly Paper.** Each student will write a scholarly paper (minimum 12 pages excluding title page and reference list) on a topic of interest related to interprofessional practice or policy with older adults. There should be a minimum of 12 references cited in the paper. **Topic due to faculty for approval February 16 by start of class. Final Paper Due April, 27 (Class 14). For both parts: Dr. Selway students submit via Blackboard and Dr. B’s students send as a Word document attachment via email.**

**Case Study Team Presentation:** Students will be assigned to a team (all teams will include more than one profession). Each team will be assigned a case in which they will work together to develop a class presentation on how an interdisciplinary team would work together to resolve the issues within the case. Each team will work together to develop a presentation to the whole class. Presentation guidelines are provided.

E. Grading Policy and Weights of Assignments

Grades will be based on the CUA Grading Policy as described in the *Graduate Announcements*. Full credit will not be given for assignments that are submitted late. **No credit will be given for assignments submitted after they have been reviewed in class.** The following provides weights for the various course assignments:

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Study Team Presentation</td>
<td>35%</td>
</tr>
<tr>
<td>Knowledge Checks</td>
<td>15%</td>
</tr>
<tr>
<td>Scholarly Paper</td>
<td>20%</td>
</tr>
<tr>
<td>Interview of Older Adult Paper</td>
<td>20%</td>
</tr>
<tr>
<td>Class Participation</td>
<td>10%</td>
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</table>

<table>
<thead>
<tr>
<th>Grading System</th>
<th>Letter Grade</th>
<th>Numeric Range</th>
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<tbody>
<tr>
<td>A</td>
<td>95 – 100</td>
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</tr>
<tr>
<td>A-</td>
<td>90 – 94</td>
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<tr>
<td>B+</td>
<td>87 – 89</td>
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<tr>
<td>B</td>
<td>83 – 86</td>
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</tr>
<tr>
<td>B-</td>
<td>80 – 82</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>70 - 79</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>0 - 69</td>
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</tbody>
</table>
F. Preparation, Attendance & Participation
Students are required to attend classes and are expected to participate meaningfully in class discussion/exercises and online forums as required. The class participation grade will be determined by the instructor’s perception of the student’s preparation for and contributions to class discussion/activities. Different students will make different kinds of contributions. Some will have an easy time with spontaneous interactions while others will be more comfortable making planned statements about key ideas from the readings or other sources. Both types of contributions are valued.

G. Course and Instructor Evaluation
NCSSS requires electronic evaluation of this course and the instructor. At the end of the semester, the evaluation form may be accessed at http://evaluations.cua.edu/evaluations using your CUA username and password. Additional, informal written or verbal feedback to the instructor during the semester is encouraged and attempts will be made to respond to requests.

V. CLASS EXPECTATIONS

Please refer to NCSSS Announcements, or appropriate Program Handbook for Academic Requirements (http://ncsss.cua.edu/courses/index.cfm), including scholastic and behavioral requirements.

NCSSS is committed to creating an open and inclusive learning environment where all members - including students, faculty, administrators, and staff – strive to listen to and learn from one another. We recognize that in a multicultural society, it is inevitable that issues or tensions relative to diversity and different life experiences will arise. It is how we handle these events that matters. Therefore, when such issues occur – inside or outside of the classroom - we agree to engage in respectful and productive discussion with one another until learning is enhanced and understanding is deepened by all involved.

A. Scholastic Expectations
All written work should reflect the original thinking of the writer, cite references where material is quoted or adapted from existing sources, adhere to APA format, and should be carefully proof read by the student before submission to the instructor for grading.

B. Behavioral Requirements:
Students are expected to maintain accepted standards of professional conduct and personal integrity in the classroom. Students should:

- Attend all classes and contribute constructively to the classroom culture
- Recognize and avoid behavior that jeopardizes the learning/teaching environment of other students or the instructor
- Demonstrate competence in planning academic activities and in following through on those plans
- Reasonably respond to and respect others’ reactions to one’s comments or actions in the classroom
- Use an appropriate level of class time and instructor’s time and attention in and out of class
9

- Behave in a manner that is consistent with the ethical principles of the social work profession.

C. Academic Honesty
Joining the community of scholars at CUA entails accepting the standards, living by those standards, and upholding them. Please refer to University Policy (http://graduatesudies.cua.edu/currentstudents/academintgrt.cfm) and appropriate Program Handbooks.

D. Confidentiality
Each student is expected to adhere to the Confidentiality Agreement that is signed at the beginning of every semester. This agreement covers “practice materials” in classes, supervisory sessions, case conferences, seminars, and other educational settings within the NCSSS BSW or MSW programs are for professional learning purposes only and are subject to strict professional standards of confidentiality. These same standards of confidentiality also extend to various forms of written communication and peer consultation.

Adherence to these standards means all students refrain from communicating beyond the classroom setting about practice material that is presented in class. I will also refrain from using social media outlets (blogs, twitter, Facebook, etc.) or email to discuss practice settings, program responsibilities and projects with individuals who are not in teaching or supervision roles directly related to the situation.

E. Accommodations
Students with physical, learning, psychological or other disabilities wishing to request accommodations must identify with the Disability Support Services (DSS) and submit documentation of a disability. If you have documented such a disability to DSS that requires accommodations or an academic adjustment, you much present that documentation to your instructors and arrange a meeting with as soon as possible to discuss these accommodations.

F. Use of Electronic Devices (faculty agreed it is up to each instructor to allow or disallow laptops)
No laptops or other electronic devices are permitted in the classroom, unless you have a specific documented learning disability. Please turn off all cell phones or other devices that would disrupt the learning environment of the classroom and put them away and removed from the classroom environment.
## CLASS SCHEDULE

<table>
<thead>
<tr>
<th>Class #</th>
<th>Date</th>
<th>Topic</th>
</tr>
</thead>
</table>
| 1       | 1/12 | **Interprofessional Care**  
Interprofessional Education, Purpose of Course  
Teams and role understanding.  
Definitions of specific work roles, ethical imperatives by discipline, and dealing with conflicting values.  
**Required Reading:**  
Hirth: Chapter 1 (pp. 3 – 6), 4 (pp. 35 – 46), and 19 (pp. 257 – 270)  
Dunworth & Kirwan (2012). Do nurses and social workers have different values?  
Editorial. Not our mother’s old age.  
Koenig, Chapin, & Spano (2010). Using multidisciplinary teams to address ethical dilemma with older adults who hoard.  
**Required Video:**  
The Josie King Story  
Changing Populations |
| 2       | 1/26 | **Psychosocial/Developmental Theories of Aging**  
Aging facts and aging theories, definition of healthy or successful aging.  
**Required Reading**  
Hirth: Chapter 2 ( pp. 7 – 20) and 3 (pp. 21 – 34).  
Soniat & Micklos, pp. 1 - 27  
Johnson, & Mutcler (2014). The emergence of a positive gerontology: From disengagement to social involvement.  
**Required Narrated Lectures:**  
Psychosocial Theories of Aging (KB)  
Biologic Theories of Aging (JS); Myths and Realities of Aging (JS) |
Health Policy Issues: Gerontology and the Person in Environment
Policies and their social work and nursing implications: the National Alzheimer’s Act, the Elder Justice Act, and the Older Americans Act, Medicare, and Medicaid.
Living Environment Choices and Differing Challenges: Nursing home, Assisted living, Retirement community, Home, living alone at home, living with family; Alternative Housing initiatives for aging in place:

Levels of engagement: Group work, Individual counseling, Family counseling, Case management, Community organizing, Peer counseling, Advocacy policy development, Program development

Required Reading
Hirth, Chapter 22 (pp. 299 – 310), Chapter 24 (pp. 327 – 341), and Chapter 25 (pp. 341 - 354)
Jainto & Dziegielewski, Restorative Health Care: Long-Term and Home Care, pp. 255 – 288.

Required Narrated Lectures:
Aging Policies (KB)
Navigating the Geriatric Healthcare System (JS)

Culture and Aging
Ageism and its effect on mental health; myths about older people; cultural beliefs about aging and illness - Working with diverse populations: African Americans, Latinos, Asian and Pacific Islanders, Elders with developmental and psychiatric disabilities, Suicide and the elderly; Interpersonal theory of suicide applied to late life.

Required Reading
Hirth: Chapter 5 (pp. 47 – 58).
Matteliano & Street (2012). Nurse practitioners’ contributions to cultural competence in primary care settings.

Required Narrated Lectures:
Culture & Aging (KB)

Legal Issues
Capacity Risk Model
Legal Expert as Invited Speaker
Elder abuse and Neglect

Scholarly Paper Topic due to faculty by start of class
Teams assigned and cases assigned

Required Reading
**Required Narrated Lectures:**
Capacity Risk Model (KB)
Elder Mistreatment I & II (JS)

**6 2/23**
**Components of comprehensive geriatric assessment – Invited Speakers**
Conducting psychosocial assessments with elders: issues and techniques.

**Required Reading**

**Required Narrated Lectures:**
Key aspects of Psychosocial assessments(KB)
Comprehensive Geriatric Assessment (JS)
Geriatric Syndrome Overview (JS)

**7 2/24**
**ADMINISTRATIVE MONDAY – ALL MONDAY CLASSES ARE TAUGHT ON THIS TUESDAY.**
WE ARE GIVING THIS LECTURE TIME FOR THE GROUPS TO GET TOGETHER AND START WORKING ON THE GROUP PROJECT

**8 3/2**
**Health Promotion of the older adult**
**Health Promotion of the Older Adult**
*When Aging persons develop limitations*
Maintaining cognitive health through social networks and leisure activities
The impacts of social isolation and social engagement on health in aging
Psychosocial Intervention models with individuals and families when aging persons develop limitations that impact their safety or mental health or the safety of others.
Invited Speaker who is an Expert on Issues of Elderly Drivers

Interview of an individual over the age of 65 due by the start of class.

**Required Reading**

**Required Narrated Lectures:**
Healthy cognition/cognitive challenges (LS)
Healthy Aging (JS)
Aging Driver I and II (JS) (*Use only if guest speaker cannot come*)

**9 3/16**
**Illnesses Correlated with Aging**
Information on urinary incontinence; fall/mobility; Cancer, HIV, substance abuse, and polypharmacy

**Required Reading**
**Required Narrated Lectures:**
- Substance Use Disorder in Aging Adult (KB)
- Urinary Incontinence/Falls and Mobility (JS)
- Polypharmacy (JS)

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>3/23</td>
<td>End of Life/Advance Directives</td>
</tr>
<tr>
<td></td>
<td>Learning how to talk about End-of-Life issues with patients/clients and family caregivers.</td>
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<tr>
<td></td>
<td>Communication about Advance Directives</td>
</tr>
</tbody>
</table>

**Required Reading**
- Reith & Payne, Multiprofessional End-of-Life Care, pp. 155-178

**Required Narrated Lectures:**
- End Of Life issues (KB)

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>3/30</td>
<td>Sexual Issues in Gerontology</td>
</tr>
<tr>
<td></td>
<td>Understanding the difference between sexual intimacy and sexual functioning; understanding the five aspects of sexual functioning; when to consult a therapist; ways to communicate about sexual issues; ways to improve sexual health and intimacy, addressing potential obstacles.</td>
</tr>
<tr>
<td></td>
<td>Sexual Trauma and aging persons – myths and facts</td>
</tr>
</tbody>
</table>

**Required Reading**

**Required Narrated Lectures:**
- Understanding the spectrum of sexual intimacy and ways to continue intimacy into old age(LS)
- Sexuality and Aging (JS)

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<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>4/13</td>
<td>Students work on group presentations</td>
</tr>
<tr>
<td>4/20</td>
<td>Student Group presentation</td>
</tr>
<tr>
<td>4/27</td>
<td>Student Group presentation</td>
</tr>
<tr>
<td></td>
<td>Final Scholarly Paper Due by start of class</td>
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</tbody>
</table>