California State University S ORIGINATOR'S SECTION:		ercos • COURSE	CHANGE	2(S) •	FORM C-2	
1. College: ☐ CHABSS ☐ CoBA ☒ CoEHHS ☐ CSM		Desired Term and Year of Summer 2016	of Implementat	ion (e.g	;, Fall 2008):	
2. Current Course abbreviati	on and	Number:				
NURS 532B						
TYPE OF CHANGE(S). Checl	k√all t					
Course Number Change		Delete Prerequisite		M	Other Prerequisite Change	
Course Title Change	$\boxtimes$	Add Corequisite		×	Grading Method Change	
Unit Value Change		Delete Corequisite			Mode of Instruction Change (C/S Number)	
Description Change		Add Consent for Enrollm	ient		Consider for G.E. If yes, also fill out appropriate GE form.	
Add Prerequisite	Ø	Delete Consent for Enrol	lment		Cross-list	
Information in t	his sec	tion- both current and ne			y for items checked (√) above. RMATION:	
CURRENT INFORMATIO	NI•		Course abbr	reviatio	n and Number:	
Families across the Lifespan  4. Abbreviated Title for Banne (no more than 25 characters):  Man of Chro Men Ill A	r	Acute Care Setting	Abbreviated	Lifespa Title fan 25 ch	l Health Management of Individual an or PeopleSoft: baracters, including spaces) mt of Individ.	
5. Number of Units:			Number of U	U <b>nits:</b>		
This course is the amanagement of acutely and with complex mental health nurses in a variety of acute practice nurse assumes resp for health promotion, asses management of client probipharmacological agents with The emphasis will be on the clinical decision making an The advanced practice nurse best practices to manage the families and populations, we team to provide quality, contact the state of the course of the cour	care so care so consibi sment, lems in thin an e deve d diag se uses e care vith the	s by advanced practice ettings. The advanced ility and accountability diagnosis, and acluding the use of acute care setting. lopment of sound nostic reasoning skills. theory, research, and of individuals, a multidisciplinary	Catalog Des conform to costyle and for consent for en enrollment, on to count to modalities mental head and evaluation intervention	eatalog of mat; incernollmocrossiss ward the pth explored for incalth neution or ons with n. Pres	n: (Not to exceed 80 words; language she copy. Please consult the catalog for modelude all necessary information regarding ent, pre- and/or corequisites, repeated ting, as detailed below. Such information to 80-word limit.)  ploration of psychotherapeutic treadividuals experiencing acute and codes. Emphasis on understanding, uf evidence-based psychotherapeut. In a range of psychiatric disorders requisite NURS 580 and NURS 580 SS 533C	n does  atment chronic use, ic across

<sup>\*</sup>If Originator is uncertain of this entry, please consult with Program Director/Chair,

Mode of Instru	iction* (See pages	17-23 at http://www.calstate.ed	u/cim/data-elem-dic	/APDB-Transactio	n-DED-SectionV.pdf for
efinitions of the C Type of Instruction	Number of Credit Units	Numbers) Instructional Mode (Course Classification Number)	Type of Instruction	Number of Credit Units	Instructional Mode (Course Classification Number)
Lecture	3	C-5	Lecture	2	C-5
Activity			Activity		
Lab			Lab		
Normal Plus  Credit/No Credit/No Cr Credit/No Cr	Allows Letter Grade Report-in-Progress (1 Credit, and Report- edit Only (C) edit or Report-in-Pro		☐ Normal Plus  Credit/N ☐ Credit/No Cool ☐ Credit/No Cool	(Allows Letter Grad Report-in-Progress o Credit, and Reportedit Only (C) redit or Report-in-P	de +/-, and Credit/No Credit) (NP) (Allows Letter Grade + rt-in-Progress) rogress Only (CP))
O. Carres Dage	ines Consent for En	rollmant?	Course Requires	s Consent for Enro	ollment?
7 Yes No	ires Consent for En	i unulcut.	Yes No		
Faculty (		☐ Dean	Faculty	Credential Analyst	☐ Dean
Program/Depa	rtment/Director/Chai	Mana than Onco?	Course Can be	artment/Director/Cl Taken for Credit N	More than Once?
1. Course Can	be Taken for Credit	More than Once:	Yes N		
	times (including first	offering)		times (including fi	rst offering)
•	oss Listed: Yes		Is Course Cross	-listed?	Yes No
f yes, indicate wh			If yes, indicate w		
			and check "yes"	in item #17 below.	
3. Prerequisite	(s): 502,503A,	504,506	Prerequisite(s):	NURS 5	80,583
4. Corequisite(	s):		Corequisite(s):	NULS 5	33C
5. Documentat	ion attached:	Outline			
■ Syllabus	☐ Detailed Course	Outime			
PROGRAM DII	RECTOR/CHAIR -	COLLEGE CURRICULUM	COMMITTEE SE	CTION:	
Mandatory info	rmation – all items in	this section must be complete	d.)		
16. Does this co	urse fulfill a require	ment for any major (i.e. core ments, minors in other depart	ments? Xes	□ No	
If you nlegge sne	cify:			tot at	Tue ole
Required course	for the MSN and Pos	st Certificate program in the Psy	chiatric Mental Hea	ith Nurse Practition	ier Track
check "ves" and	obtain signature.) C	other discipline(s)? (If there is heck "yes" if the course is cross tions should be stated in writing	s-listed. 🔲 Yes 🖂	140	cular discipline is affected,
				Support	Oppose
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	Signature		Dutt		
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Discipline			Date		

SIGNATURES: (COLLEGE LEVEL):

(UNIVERSITY LEVEL)

			Revised 3/28/2007
Office of Academic Programs	Banner:	Catalog:	Revised 3/28/2007
Office of Academic Linguistic			

CURRENT INFORMATION, NC	Ramia 3-16-16
1. Originator (Please Print)	Date
Denis Worren	3/16/16
2. Program Director/Chair	Date
ding and	3/17/14
3. College Curriculum Committee	Date
Denie Guis	3/17/16
4. College Dean (of Designee)	Date

### **NEW INFORMATION:**

5. UCC Committee Chair	Date
6. Vice President for Academic Affairs (or Designee)	Date
7. President (or Designee)	Date



OLD

See new gyllabus for revisions - C-Z form

**CSUSM School of Nursing** 

NUR 532B: Advanced Mental Health Management of Clients and Families across the Lifespan in the Acute Care Setting

Summer 2014

Faculty:

Professor:

Phone:

Email:

Office Hrs:

Course Units: 3 Units
Course Day and Time:
Course Location:

Course Description:

This course is the advanced study of the management of acutely and chronically ill individuals with complex mental health needs by advanced practice nurses in a variety of acute care settings. The advanced practice nurse assumes responsibility and accountability for health promotion, assessment, diagnosis, and management of client problems including the use of pharmacological agents within an acute care setting. The emphasis will be on the development of sound clinical decision making and diagnostic reasoning skills. The advanced practice nurse uses theory, research, and best practices to manage the care of individuals, families and populations, with the multidisciplinary team to provide quality, cost effective care. Prerequisites: NURS 500, 503, 504, 508, 510, and advancement to candidacy. Corequisites: NUR 590 and 533C

### **Student Learning Outcomes:**

Upon successful completion of this course the student will be able to:

- 1. Describe the advanced practice nursing role in the management of clients with mental health needs and their families in the acute care setting.
- 2. Explore contemporary issues in advanced practice management of acutely and chronically ill clients with mental health needs in the acute care setting
- 3. Discuss the role of theory, research, and best practices in managing the care of individuals, families and vulnerable populations in the acute care setting.
- 4. Describe the advanced practice nursing role in evaluating and achieving quality, cost-effective outcomes in the acute care setting

### **Graduate PSLOs:**

PSLO #1 Synthesize theoretical and empirical knowledge from the discipline of nursing, the humanities, the natural, social, cultural, organizational and biological sciences, and education applicable to the practice of professional nursing at the advanced level.

PSLO #8 Demonstrate cultural assessment and global awareness to provide culturally sensitive nursing care to clients, families and communities from around the world who differ from the nurse by virtue of race, culture and/or ethnicity.

### Special Assistance:

Students with disabilities who require reasonable accommodations must be approved for services by providing appropriate and recent documentation to the Office of Disabled Student Services (DSS). This office is located in Craven Hall 5205, and can be contacted by phone at (760) 750-4905, or TTY (760) 750-4909. Students authorized by DSS to receive reasonable accommodations should meet with faculty within the first two weeks of the semester during office hours in order to ensure confidentiality.

### Social Media:

The CSUSM SON Social Media Policy (available in Cougar Courses and distributed on the first class meeting) will be followed by all students.

### Attendance Policy:

All students are expected to attend each scheduled class meeting. If you will be absent for any reason you must contact the instructor via cell phone and e-mail with as much advance notice as possible. The format of this course is interactive and the absence of any student will impact the experience for all.

### Civility and CSUSM Community Values:

CSUSM strives to be a community demonstrating respect, for oneself, and for others. Treatment of others with dignity, and behaviors which promote a physically and psychologically safe, secure, and supportive climate. Enabling all community members to engage as full and active participants where the free flow of ideas is encouraged and affirmed

### **Student Academic Honesty Policy:**

You are expected to adhere to the University policies on academic honesty and integrity, as outlined in the Student Academic Honesty Policy. All written work and oral assignments will be original work. Any evidence of cheating, including plagiarism, constitutes sufficient reason for a failing grade for the assignment or even the entire course. To avoid any appearance of plagiarism, be sure to document the

sources of your work, using standard APA citation format. All quotations and all paraphrasing require a citation. Materials adapted from web-based references must also be properly cited. Disciplinary action may include lowering of grades or the assignment of a failing grade.

### **Course Expectations:**

- 1. This course will provide experiences in a variety of participatory activities including group work, discussion and lecture. Students are expected to prepare for and participate actively in class activities. Class participation includes respectful and receptive attitudes toward classmates and the professor. All cellular phones, pagers, beepers, and other such electronic equipment used to communicate text messages to others are to be turned off during class periods.
- 2. All written assignments are to be submitted typed in 12-point font (Ariel or New Times Roman) and double spaced. APA format is required. All papers are due by date and time posted in the syllabus. If an emergency situation occurs, contact the instructor to arrange for an alternate date.
- 3. For all assignments where peer-reviewed sources are required, textbooks may be used but will not be counted toward the # of required peer-reviewed sources for the assignment.
- 4. Maintain confidentiality on all personal and sensitive information obtained in this course. This includes, but is not limited to, avoiding discussions that would allow others to identify the subject of the information and removing names from course papers/class assignments. To discuss patient information in a student forum you may use initials or a name that is not the patient's. Failure to protect the privacy of others is a violation of the Health Insurance Portability and Accountability Act (HIPAA).
- 5. The teaching responsibilities in this course are shared equally by both faculty. In an effort to keep lines of communication clear, please make sure that e-mail communication is sent to both faculty.
- 6. Core Competencies. The National Organization of Nurse Practitioner Faculties (NONPF) developed eight Psychiatric Mental Health Nurse Practitioner Competency categories in 2003 to define the entry level competencies for psychiatric mental health nurse practitioners. Competencies from these eight categories which are can found in the CSUSM Graduate Student Handbook Appendices are incorporated in the specific objectives and expected learning outcomes in all courses and in the program. Students are responsible for reviewing the competencies at the beginning of each semester as part of their ongoing self-evaluation during their course of study.

### **Course Requirements:**

Course Requirements were modified to fit the revised Student Learning Outcomes.

- 1. <u>Class Participation</u>: It is expected that students will take an active role in class discussion and application of the course readings and resources to clinical situations. Students will be expected to have completed the independent group or individual activities assigned prior to coming to face to face class meetings to maximize the opportunities to critically discuss the role of the advanced practice nurse in the acute setting. (Course objectives #1, #2)
- Class Discussion: On Line #1 (15% of course grade)
   The purpose of this assignment is to demonstrate an understanding of the advanced practice nursing role in the management of disruptive or dangerous behaviors in an acute setting. (Course Objectives #1, #2, #3)

Each student will be assigned a case to work on for this assignment. Using an unfolding case approach, students will have three weeks to complete this assignment. Each student will present his/her case to all student colleagues in class. The format of the presentation is at the discretion of the student (e.g., role play, case conference, power point presentation). The details of the assignment, and the rubric, will be posted each week with the assignment.

### 3. Class Discussion: On Line #2 (20% of course grade)

The purpose of this assignment is to demonstrate an understanding of the advanced practice nursing role in the management of clients with acute mental health needs, incorporating current best practices in management of these clients. (Course Objectives #1, #2)

Each student will present on 1 psychiatric emergency. The student should discuss the issue as if the audience were nurses from medical and other non-psychiatric units in an acute care setting. The presentation should demonstrate his/her ability to educate about management of psychiatric illnesses on medical and other non-psychiatric units. The presentation must include a case study to illustrate the discussion. These presentations are scheduled on the syllabus and students will select from a list of possible topics. The text (Riba & Ravindranath, 2010) should be used as the basis of the discussion of the problem and appropriate management, in addition to at least three peer-reviewed sources to support your recommended response to the psychiatric emergency. You should have power points and/or handouts to illustrate your content. The presentation should be 20 minutes in length. Please note the rubric, below, to judge the amount of time you should devote to each area in the presentation.

Grading Criteria: Managing Acute Problems Across the Lifespan*	<del>0/o</del>
1.Definition of problem and common presentation	<del>10</del>
2.Epidemiology, prevalence, and impact of problem	10
3.Assessment/evaluation of patient in the acute setting	10
4.Clinical management in the acute setting	<del>30</del>
5.Disposition issues including community resources	<del>15</del>
6.Case presentation to illustrates key clinical points	<del>20</del>
7.Presentation well-organized and professional quality	-5

<sup>\*</sup>Be sure to use a lifespan approach for items 1-5.

### 4. On Line #3 (10% of course grade)

The purpose of this activity is to demonstrate an understanding of the psychiatric nurse practice core competencies as related to his/her own professional growth. The instructions and rubric will be posted on line.

### 5. Cost and Effectiveness Presentation: (25% of course grade)

The purpose of this assignment is to demonstrate the student's ability to discuss measures of quality and cost effectiveness of mental health care in the US. He/she should discuss the available evidence documenting effectiveness psychiatric nurse practitioner care. (Course objective #4)

Each student will develop an oral presentation suitable for a professional audience addressing the quality and cost effectiveness of mental health care in the US. The presentation may be focused on a specific population (e.g., veterans, adolescents, adults with HIV) or on a specific disorder, at the student's discretion. Sources for this presentation must be research studies published in peer-reviewed journals. In the presentation, students must clearly describe the studies, including the outcome measures used (e.g., patient satisfaction, re-hospitalization, symptom control, length of stay). A minimum of 6 scientific, peer reviewed sources published between 2009 and 2014 are required. If power points are used, slides must include appropriate citations and a reference list. At the presentation, students must submit a reference list and photocopies of the research articles used. Alternatively these documents may be uploaded into Course in PDF format.

Grading Criteria: Cost and Effectiveness Presentation	%

Problem statement/question being investigated is clearly stated and supported by epidemiologic data	10
Minimum of five research studies are summarized correctly. Summary of research studies includes research question, population studied, outcomes measured, and results	<del>50</del>
Critical review of the research studies (How good is the evidence?)	15
Conclusion is supported by evidence presented	10
References are from peer reviewed journals 2009-2014.	10
Presentation well-organized and professional quality	-5

### 6. - Evidence-Based Interventions Paper (30% of course grade)

The purpose of this assignment is to demonstrate the student's ability to discuss evidence based interventions for acute psychiatric problems in vulnerable populations. (Course objective #3)

For this paper, each student will select a specific psychiatric issue (e.g., intimate partner violence, suicide, PTSD, violence in the emergency department) and population (e.g., pregnant women, veterans, older adults) and review the evidence-based interventions for this issue. A minimum of 10 peer-reviewed research articles published between 2004 and 2014 are required. The paper should be divided into 4 sections, described on the grading rubric, below. Please note that page limits must be adhered to and failure to do so will result in deduction of points.

% Grading Criteria: Evidence-Based Interventions Paper 15 Background: Clearly stated problem statement outlining the significance of the problem-in the population, supported by appropriate citations (1-2 pages). 10 Methods: Description of how the review of the literature was conducted (1 page or less) 10 Results: Overview of the evidence in a table format (1-2 pages) 30 Results: Detailed narrative summary elaborates but does not repeat the results presented in table (3-4 pages) 20 Discussion: A critical discussion of the available evidence, including issues of ethnicity and culture, legal and ethical concerns, and cost (4-5 pages) References are from peer-reviewed journals 2004-2014 and APA 10 **format** 

### **Methods of Evaluation:**

Requirement	% of grade
On Line Activity #1	15%
On Line Activity #2	-20%
On Line Activity #3	<del>-10%</del>
Cost and Effectiveness Presentation	<del>25%</del>
Evidence Based Interventions Paper	30%

Grading	Scale
Letter Grade	Points
A	90-100
В	80-89
С	70-79

D	60-69
F	<60

### **Required Textbooks:**

- Text books were modified to fit the new student learning objectives.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5<sup>th</sup> Ed.). Arlington VA: American Psychiatric Association.
- Herman, J. (1997). Trauma and recovery. New York: Basic Books.
- Riba, M., & Ravindranath, D. (Eds.). (2010). Clinical manual of emergency psychiatry. Washington DC: American Psychiatric Publishing. (Moved to recommended)
- Rollnick S, Miller W, & Butler C. (2008). *Motivational interviewing in health care: Helping patients change behavior*. New York: Guilford.
- Substance Abuse and Mental Health Services Administration. (2010). Mental health, United States, 2010. Retrieved from <a href="http://www.samhsa.gov/data/2k12/MHUS2010/index.aspx">http://www.samhsa.gov/data/2k12/MHUS2010/index.aspx</a>
- Yufit, R. & Lester, D. (Eds.). (2005). Assessment, treatment and prevention of suicidal behavior. New Jersey: Wiley and Sons. Moved to recommended.

### Recommended Textbooks and Resources

- Aguilara, D. (1998). Crisis intervention: Theory and methodology (8<sup>th</sup> Ed.). St. Louis, MO: CV Mosby.
- National Institute of Mental Health. *Statistics*. Retrieved from <a href="http://www.nimh.nih.gov/statistics/index.shtml">http://www.nimh.nih.gov/statistics/index.shtml</a> (A great source for data on prevalence of mental disorders, treatment, mental health-related disability, suicide, and costs associated with mental illness.) Moved to required.
- Preston, J., O'Neil, J., & Talaga, M. (2013) *Handbook of Clinical Pharmacology for Clincians*. Oakland CA: New Harbinger.
- Sadock, B.L, Sadock, V.A. & Ruiz, P. (2011). Study guide and self-examination review in psychiatry. Philadephia: Lippincott Williams & Wilken.
- Wheeler, K. (2007). *Psychotherapy for the advanced practice psychiatric nurse*. St. Louis: Mosby New edition moved to required.

# TOPICAL OUTLINE AND ASSIGNMENT SCHEDULE

## Add ADHD (was in N534B)

DATE	TOPIC	READING ASSIGNMENTS*
8/27/14 Week 1 6 – 8 pm	Introduction to management of acute psychiatrie illness Eliminated Overview of course	Riba and Ravindranath: Chapter 1
	On Line Activity #1 on Cougar Courses	
9/3/14 Week 2	Responding to an emergency: Moving from the clinic to the ED	Riba & Ravindrath: Chapters 2, 3, 11, 12, 13, 14 Department of Health and Human Services. (1999). Mental health: A
md 8-9	Suicide and violence risk assessment Legal and ethical issues	report of the surgeon general. Washington DC: Department of Health and Human Services. Retrieved from
		http://profiles.nlm.nih.gov/ps/retrieve/ResourceMetadata/NNBBHS
		Chapters 2, / Yufit & Lester: Chapters 1-9
		Additional resources in Cougar Courses.
	On Line Activity #1 on Cougar Courses	
9/10/14	The dangerous or disruptive patient: Prevention and	Riba & Ravindrath: Chapters 2, 3, 11, 12, 13, 14
Week 3	Kesponse   <u>Rectraints seclucion and de escalation</u>	standards of practice. Retrieved from
	Guest Speaker: Ellen Reardon, RN, PMHCNS	http://www.apna.org/files/public/APNA_SR_Standards-Final.pdf
	On Line Activity #1 on Cougar Courses	
9/17/14	Intervening for early signs of psychosis: an	Website: http://www.piertraining.com/pier-model/
Week 4 $6-9 \text{ pm}$	evidence based community approach Guest Speaker: Maria Morgan, MFT	Breitborde NJ et al. (2011). Multifamily group psychoeducation and
•	(Time reduced to 1.5 hours)	cognitive remediation for first-episode psychosis: a randomized controlled trial. <i>BMC Psych</i> .
		11:9.http://www.biomedcentral.com.ezproxy.bu.edu/1471-244X/11/9
		McFarlane WR et al. (2014). Reduction in incidence of hospitalizations for psychotic episodes through early identification and intervention. <i>Psychiatr Serv.</i> doi: 10.1176/appi.ps.201300336.

		[Epub ahead of print]
9/24/14 Week 5 6-8 pm	Student Presentations: On Line Activity #1 (6 students, 20 minutes each) (Moved to week 9)	
10/1/14 Week 6 6-9 pm	Clients who experience trauma: Physical, emotional, sexual abuse, war and other trauma across the lifespan Modified to: Psychodynamic therapy with clients who have experienced trauma	Herman: Chapters 2, 3, 5, 6,7, 8
10/8/14 Week 7 6-8 pm	Mental Health and Mass Disaster: Response to disaster including psychological first aid, early intervention for traumatic events, issues in children, and tips for survivors (Moved to N538)	Readings to be assigned.
10/15/14 Week 8 6-8 pm	Student Presentations: Cost and Quality Issues of cost and quality: The role of advanced practice nursing (Content covered in N554)	American Nurses Credentialing Center. (2012). Psychiatric nurse practitioner role delineation study. Retrieved from http://www.nursecredentialing.org/Certification/NurseSpecialties/FamilyPsychMentalHealthNP/RELATED-LINKS/FamilyPsychNP-2011RDS.pdf Department of Health and Human Services. (1999). Mental health: A report of the surgeon general. Washington DC: Department of Health and Human Services. Retrieved from http://profiles.nlm.nih.gov/ps/retrieve/ResourceMetadata/NNBBHS Chapter 8
10/17/14 Week 8 9 am- 4 pm	Motivational Interviewing Workshop: an evidence-based intervention Guest Speaker: James (Diego) Rogers PhD (Moved to N582)	Rollnick S, Miller W, & Butler C. (2008). Motivational interviewing in health care: Helping patients change behavior. New York: Guilford.
10/22/14 Week 9 6 – 9 pm	Trauma: Prevention and intervention strategies for patients and caregivers.  Trauma informed care and evidence based interventions. Moved to 538	Readings to be assigned.

10/29/14 Week 10	On Line Activity #2 NO IN CLASS MEETING	Riba & Ravindrath: Chapters 4, 5, 6, 7, 8, 9, 10
11/5/14 Week 11 6-8 pm	Student Presentations: On Line Activity #1 (6 students, 20 minutes each) (Moved to week 9)	Riba & Ravindrath: Chapters 4, 5, 6, 7, 8, 9, 10
	On Line Activity #3 on Cougar Courses	
11/12/14	Standardized Patient Experience	
Week 12	Responding to acute psychiatric problems: Cases	
md 6-9	(children and adolescents) Moved to 533C	
11/19/14	Standardized Patient Experience	
Week 13	Responding to acute psychiatric problems: Cases	
md 6-9	(adults and older adults) Moved to 533C	
11/26/14 Week 14		
12/3/14	Responding to Mental Health Needs of Women	Readings to be assigned.
Week 15	Guest Speaker: Theresa Nguyen, MSN, APMHNP-	
d 8-9	BC Moved to 538	
12/10/14 Week 16	Final Exam Week	

\*Additional reading assignments may be made throughout the semester as resources are identified by faculty and students. In addition, students are expected to be familiar with the appropriate sections in the DSM-V for each topical area and to have reviewed the appropriate sections in the SAMHSA Mental Health, United States, 2010 report.

Template for Table to Summarize of Evidence-Based Literature (May be single spaced)

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Type of Study #		Outcomes	Instruments	Results	Citation	_
	Participants					
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8		Satisfaction	by researchers	satisfaction with NP	satistaction measures. Nursing Kesearch	
				care	XX:xx-xx.	
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NEW

### **Course Syllabus**

### **CSUSM School of Nursing**

NUR 532B: Advanced Mental Health Management of Individuals across the Lifespan (Anticipated: Summer 2016)

Faculty:

Professor:

Phone:

Email:

Office Hrs:

Course Units: 2 Units

Course Day and Time: Course meets 3 hours/week for 10 weeks

Course Location:

### **Course Description:**

An in-depth exploration of psychotherapeutic treatment modalities for individuals experiencing acute and chronic mental health needs. Emphasis on understanding, use, and evaluation of evidence-based psychotherapeutic interventions with a range of psychiatric disorders across the lifespan.

Prerequisite: NURS 580 and NURS 583 Corequisites: NURS 533C

Student Learning Outcomes:	Graduate PSLOs:
Upon successful completion of this course the	1. Apply theoretical and empirical knowledge
student will be able to:	at the advanced level.
Describe selected individual	2. Conduct and critically analyze research to
psychotherapeutic treatment modalities for	apply sound clinical decision-making.
a range of psychiatric diagnoses across the	5. Recognize diversity and provide culturally
lifespan.	sensitive care.
2. Evaluate the evidence for selected	
psychotherapeutic treatment modalities.	
3. Discuss the role of theory, research, and	
evidence-based practices in the care of	
individuals with psychiatric symptoms	
and/or disorders.	
4. Describe strategies used to assess, prevent,	
and respond to psychiatric emergencies	
using a population perspective.	

### University and Program Policies (those marked with an \* are required elements of the syllabus):

### Please note this syllabus is subject to change by faculty.

### \*University Credit Hour:

Students are expected to spend a minimum of two hours outside of the classroom for each unit of credit engaged in learning. This course is a 2 unit course requiring 4 hours per week of student learning outside of class.

### \*Special Assistance:

Students with disabilities who require reasonable accommodations must be approved for services by providing appropriate and recent documentation to the Office of Disabled Student Services (DSS). This office is located in Craven Hall 4300, and can be contacted by phone at (760) 750-4905, and by email sent to <a href="mailto:dss@csusm.edu">dss@csusm.edu</a>. Students authorized by DSS to receive reasonable accommodations should meet with faculty during office hours in order to ensure confidentiality.

### \*Social Media:

The CSUSM SON Social Media Policy (available in the Student Handbook and posted in the Cougar Course) and will be followed by all students.

### \*Attendance Policy:

All students are expected to attend each scheduled class meeting. If you will be absent for any reason you must contact the instructor via cell phone and e-mail with as much advance notice as possible. The format of this course is interactive and the absence of any student will impact the experience for all.

### \*Late Work:

Work that is submitted after the posted due-date will not be accepted unless otherwise stipulated below.

### \*Civility and CSUSM Community Values:

CSUSM strives to be a community where students demonstrate respect, for oneself, and for others. Treatment of others with dignity, and behaviors which promote a physically and psychologically safe, secure, and supportive climate is expected of all students. Enabling all community members to engage as full and active participants where the free flow of ideas is encouraged and affirmed.

### \*University Writing Requirement:

Written assignments in this course fulfill the 1700 word requirement for a 2 unit course and must follow APA guidelines. Please refer to the required 6<sup>th</sup> edition of the APA Publication Manual.

### \*Student Academic Honesty Policy:

Students are expected to adhere to standards of academic honesty and integrity, as outlined in the Student Academic Honesty Policy. All written work and oral presentation assignments must be original work. All ideas/material that are borrowed from other sources must have appropriate references to the original sources. Any quoted material should give credit to the source and be punctuated with quotation marks.

Students are responsible for honest completion of their work including examinations. There will be no tolerance for infractions. If you believe there has been an infraction by someone in the class, please bring it to the instructor's attention. The instructor reserves the right to discipline any student for academic dishonesty, in accordance with the general rules and regulations of the university. Disciplinary action may include the lowering of grades and/or the assignment of a failing grade for an exam, assignment, or the class as a whole. Incidents of Academic Dishonesty will be reported to the Dean of Students. Sanctions at the University level may include suspension or expulsion from the University. For more information, refer to the full Academic Honesty Policy at

http://www.csusm.edu/policies/active/documents/Academic Honesty Policy.html

### \*Confidentiality:

Students will maintain confidentiality on all personal and sensitive information obtained in this course. This includes, but is not limited to, avoiding discussions that would allow others to identify the subject of the information and removing names from course papers/class assignments. To discuss patient

information in a student forum you may use initials or a name that is not the patient's. Failure to protect the privacy of others is a violation of the Health Information Protection and Privacy Act (HIPPA).

### \*Core Competencies:

The National Organization of Nurse Practitioner Faculties (NONPF) and the American Association of Colleges of Nursing (AACN) developed the nine core competencies for all nurse practitioners and population focused competencies for psychiatric mental health nurse practitioners and other nurse practitioners. The Competencies can be found in the CSUSM Graduate Student Handbook. Appendices are incorporated in the specific objectives and expected learning outcomes in all courses and in the program. Students are responsible for reviewing the competencies at the beginning of each semester as part of their ongoing self evaluation during their course of study.

### **Course Expectations:**

- 1. This course will provide experiences in a variety of participatory activities including group work, discussion and lecture. Students are expected to prepare for and participate actively in class activities. Class participation includes respectful and receptive attitudes toward classmates and the professor. All cellular phones, pagers, beepers, and other such electronic equipment used to communicate text messages to others are to be turned off during class periods.
- 2. All written assignments are to be submitted typed in 12-point font (Ariel or New Times Roman) and double spaced. APA format is required. All papers are due by date and time posted in the syllabus. If an emergency situation occurs, an alternate date may be arranged at the discretion of the faculty.
- 3. For all assignments where peer-reviewed sources are required, textbooks may be used but will not be counted toward the # of required peer-reviewed sources for the assignment.

### **Course Requirements:**

## Clinical Application of Psychodynamic Approach Presentation (Assesses Student Learning Outcome #1 and #3):

Each student will be assigned a diagnostic category (e.g., mood disorders) and prepare a 20 minute presentation that addresses the following components:

- a. Theoretical understanding of this diagnostic category (e.g., etiology, risk factors, treatment approaches) from a psychodynamic perspective. This discussion should include at least three psychodynamic theorists.
- b. Illustration of the use of psychodynamic approach in working with clients with this diagnosis, with clinical examples from the student's experience or the literature. The illustration should include therapeutic alliance, the core psychodynamic problem, psychodynamic formulation, change, and termination. (See Summers and Barber text.)
- c. Students may choose any method they like for presentation (e.g., role play) but must include a reference list in APA format for content presented.

Grading Criteria: Clinical Application Presentation	Points
Theoretical explanation of diagnostic category includes criteria,	10
etiology and risk factors.	
Compare/contrast three different psychodynamic theorist's	10
understanding of the diagnostic category.	
Illustration addresses (1) therapeutic alliance, (2) core problem, (3)	30
formulation, (4) change, and (5) termination (6 points each)	

Presentation is well organized, engaging, and professional quality	5
Citations in APA format	5
Total possible	60

### Evidence-Based Practice Paper (Assesses Student Learning Outcome #2 and #3):

Using the same diagnostic category assigned for the class presentation, students will evaluate the evidence base for psychodynamic therapy and one other psychotherapeutic modality of their choice. For example, a student might evaluate the effectiveness of psychodynamic compared with cognitive behavioral therapy with depressed clients. The paper should be 2000-2500 words in length and include a minimum of six peer-reviewed studies (i.e., 3 for each therapeutic approach). Students should use the template on the last page of this syllabus to summarize the peer-reviewed studies used in their papers. The template should be included as the last page of paper. References and the template are not included in the word count.

Grading Criteria: Evidence Based Practice Paper	Points
Introduction:	15
<ul> <li>brief description of diagnostic category selected for this paper, including signs and symptoms</li> </ul>	
<ul> <li>brief review of the two psychotherapeutic modalities to be evaluated.</li> </ul>	
Review of evidence:	25
<ul> <li>concise summaries of at least 6 peer-reviewed studies (3/each psychotherapeutic modality)</li> </ul>	
<ul> <li>summaries include study sample characteristics, intervention, outcome measures used, and results</li> </ul>	
Discussion:	10
<ul> <li>Critical evaluation of the evidence summarized including limitations of research studies, and considerations such as cost and efficacy</li> </ul>	
Conclusion:	5
Recommendation for use in student's client population, including rationale	
Paper is well organized and grammatically correct	5
Template completed and attached as last page	5
APA format	5
Total possible	70

### Case Study (Assesses Student Learning Outcome #1):

Using a case study format, each student will present a client from his/her clinical experience in N533. The format of this presentation is as if it were group supervision in a clinic setting—a discussion with colleagues. For this presentation students are encouraged to present a client who has challenged/is challenging them, so that they can learn from the discussion with peers. The goal is not to present the "perfect case". The presentation should include a brief synopsis of the client's presenting problem, psychiatric history, and any other components of the psychiatric evaluation relevant to the case presentation; treatment goals; progress toward goals over the course of therapy; effectiveness of psychotherapeutic interventions; and current challenges.

Grading Criteria: Case Study	Points
Summary includes presenting problem, psychiatric history and other relevant components	10
from psychiatric evaluation	

Treatment goals	5
Description of psychodynamic therapy with client (i.e., therapeutic alliance, core	15
problems, formulation, change, termination)	
Assessment of effectiveness of psychotherapeutic intervention (related to formulation and	5
change)	
Current challenges including anticipated challenges related to termination	5
Presentation includes examples from sessions with client (e.g., "client said"/ "student	5
said")	
Presenter engages colleagues in discussion of therapeutic successes and challenges	5
Total possible	50

### **Learning Module (Assesses Student Learning Outcome #4):**

Students will complete CDC's Principles of Prevention training module available at http://vetoviolence.cdc.gov/apps/pop/prevention-main.html

Approximately 90 minutes are required to complete the module. Students will submit a copy of the certificate to verify completion of this assignment. Bonus: The CDC awards 1.6 CEUs for successful completion of this program.

### Grading Criteria: Learning Module

Students who submit the certificate of completion on or before the class meeting on Week 3 (the due date) will earn 10 points for this assignment. Students who submit after the class meeting on week 3 will lose 1 point /day. This assignment will not be accepted after the class meeting on Week 4 and 0 points will be earned

### **Methods of Evaluation:**

Requirement	Points
Clinical Application Presentation (topics/dates on syllabus)	60
Evidence-Based Practice Paper (due week 8 at start of class)	70
Case Study Presentation (due week 10)	50
Learning Module (due week 3 at start of class)	20

Grading Scale		
Letter Grade	Points	
A	180-200	
В	160-179	
С	140-159	
D	120-139	
F	_<120	

### **Required Textbooks:**

Summers R. and Barber J. (2012). Psychodynamic Therapy: A Guide to Evidence Based Practice. New York: Guilford. ISBN 9781462509706

Summers R. and Barber J. (2014). Practicing Psychodynamic Therapy: A Case Book. New York: Guilford. ISBN 9781462517183

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5<sup>th</sup> Ed.). Arlington VA: American Psychiatric Association.
- Herman, J. (1997). Trauma and recovery. New York: Basic Books.
- National Institute of Mental Health. *Statistics*. Retrieved from <a href="http://www.nimh.nih.gov/statistics/index.shtml">http://www.nimh.nih.gov/statistics/index.shtml</a> (A great source for data on prevalence of mental disorders, treatment, mental health-related disability, suicide, and costs associated with mental illness.)
- Substance Abuse and Mental Health Services Administration. (2010). Mental health, United States, 2010. Retrieved from <a href="http://www.samhsa.gov/data/2k12/MHUS2010/index.aspx">http://www.samhsa.gov/data/2k12/MHUS2010/index.aspx</a>
- Riba, M. & Ravindranath, D. (2010). Clinical manual of emergency psychiatry. Arlington, VA: American Psychiatric Publishing. ISBN 978-1-58562-295-5
- Sue, D.W. & Sue D. (2013). *Counseling the culturally diverse: theory and practice.* (7<sup>th</sup> edition) New Jersey: Wiley & Sons. ISBN-13: 978-1119084303
- Wheeler, K. (2013). Psychotherapy for the advanced practice psychiatric nurse. (2<sup>nd</sup> edition) St. Louis: Mosby. ISBN 978-0323045223

### **Recommended Textbooks and Resources**

Yufit, R. & Lester, D. (Eds.). (2005). *Assessment, treatment and prevention of suicidal behavior*. New Jersey: Wiley and Sons.

TOPICAL OUTLINE AND ASSIGNMENT SCHEDULE (Based on 10 week summer)

DATE	TOPIC	READING ASSIGNMENTS/CLASS ACTIVITIES
Week 1	Overview of course	READING
	Community Mental Health- History	Federal:
	Healthy People 2020 – Mental Health	Healthy People:
	Leading Indicator- Progress Report	<ul> <li>http://www.thenationalcouncil.org/about/na</li> </ul>
	Community Guide Recommendations	tional-mental-health-
		association/overview/community-mental-
		health-act/
		<ul> <li>http://www.healthypeople.gov/2020/LHI/m</li> </ul>
		entalHealth.aspx
		<ul> <li>http://www.healthypeople.gov/2020/LHI/HP</li> </ul>
		2020 LHI Mental Hlth.pdf
		http://www.healthypeople.gov/2020/topicso
		bjectives2020/ebr.aspx?topicId=28
		SAMHSA
		www.samhsa.gov     National Institute of Mental Health
		• www.nimh.nih.gov
		State: California Dept. of Mental Health
		• www.dmh.ca.gov
		Local: MHSA- County of San Diego
		• www.sandiego.camhsa.org
YT7 1 0		CLASS ACTIVITY: Lecture and discussion
Week 2	Principles of psychodynamic therapy	READING:
	Therapeutic alliance, core	Summers and Barber (text): Chapters 1-4
	psychodynamic problem,	Summers and Barber (case book): Chapters 1, 2
	psychodynamic formulation,	Sue and Sue: Chapters 1, 2, 3
W 1.0	change, and termination	CLASS ACTIVITY: Lecture and discussion
Week 3	The Individual in Crisis: Psychodynamic	READING:
	Approach	Summers and Barber(text): Chapter 5-7
	Suicide and violence risk assessment,	Riba and Ravindranath: Chapters 1, 2, 3, 11, 12
	prevention, and response	CLASS ACTIVITY: Lecture and discussion
337 1 4	Legal and ethical issues	DRI DAVIG
Week 4	Psychodynamic approaches with clients	READING:
	who experience trauma	Herman: Chapters 2, 3, 5, 6,7, 8
	Psychodynamic approaches with clients	Summers and Barber (case book): Chapter 11 or 12
	who have eating disorders	CLASS ACTIVITY:
		Lecture and discussion
		#1 Clinical Application: Trauma
NY 1 5		#2 Clinical Application: Eating Disorders (Adolescents)
Week 5	Psychodynamic approaches with clients	READING:
	who have mood disorders across the	Summers and Barber (text) Chapter 8
	lifespan	Summers and Barber (case book) Chapter 3 or 4
		Wheeler Chapter 18
		CLASS ACTIVITY:
		Observe/critique in-class psychodynamic therapy session
		#3 Clinical Application: Mood Disorder in Older Adults

Week 6	Using psychodynamic approaches with	READING:					
., con o	children	Summers and Barber (text) Chapter 9, 10					
	omaion	Wheeler Chapter 17					
		DeNisco – Evaluation of Treatment of Pediatric ADHD					
		Valente – Recognizing and Treating Adult ADHD					
		CLASS ACTIVITY:					
		Lecture and discussion					
		#4 Clinical Application: ADHD in Children					
W. 1 7	D 1 1 1 1	#5 Clinical Application: Attachment Disorder					
Week 7	Psychodynamic approaches when	READING:					
	working with clients with personality	Summers and Barber (case book) Chapters 8 or 9 and 12					
	disorders	Summers and Barber (text) Chapter 11, 12					
	Psychodynamic approaches when	CLASS ACTIVITY:					
	working with clients with anxiety	Lecture and discussion					
	disorders	#6 Clinical Application: Personality Disorders					
		#7 Clinical Application: Anxiety Disorders					
Week 8	Psychodynamic approaches when	READING:					
	working with clients who use substances	Wheeler: Chapter 16					
		CLASS ACTIVITY:					
		Lecture and discussion					
		Observe/critique in-class psychodynamic therapy session					
Week 9	Application of psychodynamic approach	CLASS ACTIVITY:					
		Student Case Study Presentations					
Week	Screening, Early Diagnosis, and	READING:					
10	Interventions: A Panel Discussion of	Mandersheird – Integration of Physical Health and					
	Evidence Based Approaches	Behavioral Health Services					
	11	Daniels - Conceptual Model for Behavioral Health and					
	Behavioral health integration in primary	Primary Care Integration					
	care: an evidence based approach	Pomerantz – Primary Care Mental Health Integration in					
	Guest Speaker: Marty Adelman, MA	Health Care					
		Read Introduction and Chapter 1 on Behavioral					
	Intervening for early signs of psychosis:	Integrative Care					
	an evidence based community approach	Website: http://www.piertraining.com/pier-model/					
	Guest Speaker: Maria Morgan, MFT	Breitborde NJ et al. (2011). Multifamily group					
	Guest Speaker. What is 1910 gain, 1911 1	psychoeducation and cognitive remediation for first-					
		episode psychosis: a randomized controlled trial. BMC					
		Psych.					
		11:9. http://www.biomedcentral.com.ezproxy.bu.edu/147					
		1-244X/11/9 McFedera W.P. et al. (2014). Particular in incidence of					
		McFarlane WR et al. (2014). Reduction in incidence of					
		hospitalizations for psychotic episodes through early					
		identification and intervention. Psychiatr Serv. doi:					
		10.1176/appi.ps.201300336. [Epub ahead of print]					
		CLASS ACTIVITY:					
		Lecture and discussion					

<sup>\*</sup>Additional reading assignments may be made throughout the semester as resources are identified by faculty and students. In addition, students are expected to be familiar with the appropriate sections in the DSM-V for each topical area and to have reviewed the appropriate sections in the SAMHSA *Mental Health, United States, 2010* report.

Template for Table to Summarize of Evidence-Based Literature (May be single spaced)

Citation		Jones A & Smith B. (2013). Patient	satisfaction measures. Nursing Research	XX:xx-xx.									
Results		High level of patient	satisfaction with NP	care									
Instruments		Survey developed	by researchers										
Outcomes		Patient	Satisfaction										
#	<b>Participants</b>	40											
Type of Study		Observational											
	Outcomes Instruments Results	Outcomes Instruments Results	Outcomes Instruments Results urticipants Patient Survey developed High level of patient	Outcomes Instruments Results Irticipants Patient Survey developed High level of patient by researchers satisfaction with NP	Instruments Results Instruments Results  Patient Survey developed High level of patient by researchers satisfaction with NP care	Instruments Results Instruments Results  Patient Survey developed High level of patient by researchers satisfaction with NP care	Outcomes Instruments Results  rticipants	Outcomes Instruments Results Irticipants Patient Survey developed High level of patient by researchers satisfaction with NP care	Outcomes Instruments Results  rticipants Patient Survey developed High level of patient by researchers satisfaction with NP care	Instruments Results  Advicipants Survey developed High level of patient by researchers satisfaction with NP care	Outcomes Instruments Results Irticipants Patient Survey developed High level of patient by researchers satisfaction with NP care	Instruments Results Instruments Results  Patient Survey developed High level of patient by researchers care  care  care  care	Outcomes Instruments Results Irticipants Patient Survey developed High level of patient by researchers satisfaction with NP care