

Mental Illness and Its Treatment in Adults
Mid-Course Check In
Summit Behavioral Health Organization
March 17, 2006

I Introductions

Kevin Beamon, Donna Bowels, Janice Curry, Angie DeKate, Janice Lockett, Stephan Massey, Kate Cauley, Carla Lachecki

II Course Assessment

Logistics: The room was good for the class. Centrally located and not hard to get to. Good technical support with computers and the web available, and generally good resources at the community site. It was critical to be able to offer the class on site at the BHO.

Curriculum: The films were not particularly useful for the most part, and quite lengthy. Faculty indicated they could have used more time on schizophrenia and less time on personality disorders. Counter-transference was pretty tough to get a hold of. But faculty were going beyond the curriculum in some areas like introducing Blackboard as a teaching and feedback tool, and homework assignments. Faculty developed many of their own quizzes, using the assessments in the materials as study guides. The case studies were on target and some of the videos were useful. The therapeutic approach was a rich area and much time was spent with students reviewing these principles. Faculty generally liked the structure of the curriculum. The additional resources, particularly information available on the web was very useful. Faculty requested a clearer indication in the curriculum that a particular resource was indeed an audio-visual, so there would be time for the faculty to review it before the class. Faculty also drew on additional resources that they identified. The pages in the Resources book should be numbers and the information needs to be in a more sturdy binder. Maybe we should use a flash disc. SOAP note forms should be included in the Additional Resources, and the ISP forms were not particularly helpful. Both faculty are available for fall quarter to teach the second course and again winter quarter to lead a second cohort of students through the first course.

Students: Faculty reported that the students had knowledge and experience to bring to the course, and were very attentive to the content, and that they were making a connection between the lessons and their work. There were “light bulb moments” when students made connections to their experience. It was important to help students understand what they are expected to know and how to use it and how to impact change with students who have not taken the course. Faculty report the students to be very responsive, and enthusiastic, as well as open and willing to talk about their experiences. The least experienced among the students was a TPW with only ten years on the job, and the most experiences had been with the BHO of 40 years. Students identified the important of accountability not only to their patients and their supervisors, but also to themselves and each other. Those who took the class reported feeling that they needed to be role models and

be sure to teach others what they have learned. Students arrived early for class. The students were reported to have said “We’re learning all this information, watch out for us!” Students have begun to challenge the teachers and this demonstrates good rapport and confidence on the part of the students.

Teaching approaches: The faculty met weekly to review lesson planning, homework and assessments. Often one of the faculty would develop a powerpoint for the lesson to help organize and outline the material. Discussion worked well, and getting students to talk about their own experiences, sort of applied theory. Students seemed to respect the faculty. Often, though class had ended, a student would ask a question and if one of the faculty began to respond, the students stayed after to hear the answer.

Other: Training staff had many questions about moving forward and encouraged us not to lose momentum, and get several classes started up in the fall. Training staff was also interested in the overall evaluation report, and when the next three curricular content would be available.

III Evaluation and transfer of knowledge

Faculty report the students are taking very seriously a responsibility to make sure their co-workers learn from them about what they are learning in the class. Additionally student reported “getting it” now that they have had some theory and research exposure to support their experiences with patients on the floor. Students are using the assessments more for study guides and faculty are developing additional content evaluation tools.

IV Schedule end of course meeting

The Summit team will meet again the first week in April, date and time to be determined.