Plan B students must pass a Comprehensive Examination administered by the School as one of the requirements for the MSW degree. "A comprehensive examination is an assessment of the student’s ability to integrate the knowledge of the area, show critical and independent thinking, and demonstrate mastery of the subject matter. The results of the examination evidence independent thinking, appropriate organization and high level of writing competency, critical analysis, and accuracy of documentation" (The SDSU Bulletin of the Graduate Division, San Diego State University, 2015-2016, p. 72). The School has developed a written comprehensive examination process to meet this University requirement. Students are permitted to take the examination up to three times. If a student is unable to pass the examination after three tries the School will disqualify them from the MSW program and the degree will not be awarded. Thus the examination is seen by the School and the University as the culmination of your educational process and should be taken quite seriously.

**EXAM SCHEDULE**

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 18, 2016</td>
<td>Eligibility Criteria Must be Met</td>
</tr>
<tr>
<td>March 25, 2016</td>
<td>Eligibility List emailed to students</td>
</tr>
<tr>
<td>April 4, 2016</td>
<td>Examination – Direct practice 900 to 1300 at Templo Mayor, Aztec Student Union</td>
</tr>
<tr>
<td></td>
<td>Examination – Admin &amp; CD 900 to 1300 (Location: TBA)</td>
</tr>
<tr>
<td>April 11, 2016</td>
<td>Results are emailed to students.</td>
</tr>
<tr>
<td>April 12, 2016</td>
<td>Students who fail the exam may contact their assigned faculty reviewer to review the exam. Direct practice students should contact Dr. Ko. Macro students should contact Dr. Packard for the identity of their reviewer.</td>
</tr>
<tr>
<td>May 9, 2016</td>
<td>Retake Examination</td>
</tr>
<tr>
<td></td>
<td>Location and time TBA</td>
</tr>
<tr>
<td>May 16, 2016</td>
<td>Results of Retake Exam will be sent to you by Dr. Min.</td>
</tr>
</tbody>
</table>
ELIGIBILITY

To be eligible to take the written comprehensive examination you must meet ALL of the following criteria by the deadline date:

1. Complete all first year classes (31 units) and SW 744 or 740, SW 791, and 750 or 755 (4 units) with a minimum grade in each course of C in each letter graded course.
2. Be advanced to candidacy
3. Have a cumulative 3.0 GPA
4. Have no incomplete grades
5. Have filed for May graduation or be eligible to graduate in August or December

If you are not eligible to take the examination, you will have to wait until the Spring 2017 semester to take the examination. Taking the exam assumes that your eligibility problem has been cleared up. There are no exceptions to this rule, so it is the students' responsibility to ensure that they meet all eligibility criteria.

ELIGIBILITY LIST
All eligible students will receive an email indicating their eligibility by concentration on March 25, 2016. If you do not receive an email regarding your eligibility, it means:

a. You are a Plan A student doing a thesis or doing the Alternative publication option,
b. You have not met one or more eligibility criteria, or
c. We made an error

If you are left off the list, put under the wrong concentration, or do not plan to take the examination, please contact Dr. Min by phone at 619-594-6893, email him at jwmin@mail.sdsu.edu, or stop in at his office HH-119C.

EXAMINATION FORMAT
The examination is a four-hour exam focusing on your second year concentration in either the direct practice or administrative practice area. The macro students will be given a practice case to analyze utilizing an essay approach. The direct practice students will be given a series of vignettes where they will be asked to answer a series of objective questions that are related to that vignette. The direct practice exam will also include a series of objective questions covering a variety of topic areas, and these questions do not refer to a specific vignette. Both formats (essay and objective) require students to use appropriate social work intervention models, knowledge/skills, and methods of evaluating those interventions.

WHAT TO BRING
We will provide Scantron forms. Administration and Community Development students will complete the exam on the computers (location: TBA). Scratch paper for notes will be provided to the students taking the Admin & CD examination. All scratch paper and the exam will need to be returned to the proctor at the end of the examination.
NO SHOWS

The policy on students who miss the examination is:

a. If you are ill on the examination day, you must notify the School by either calling the main telephone number 619-594-6865, and leaving a message on the VMS, or informing HH 119 office staff directly, or by e-mailing Dr. Min (jwmin@mail.sdsu.edu). You must bring a letter from a doctor verifying your illness to be eligible to take the exam on the second examination day as your first try.

b. You may have an unanticipated event or emergency of a serious nature that prevents you from taking the examination. You should call the School office and follow the procedures outlined above. In addition, contact the School as early as possible so your request can be evaluated before the exam. If you are unable to make this early contact, you must present a justification and documentation that includes: (1) a description of the event that caused you to miss the exam, (2) a justification of why the event was unanticipated and necessitated missing the exam, and (3) you must present satisfactory reasons for why you were not able to contact the School prior to the exam. Based on the evidence you present, the School will decide whether or not you are eligible to take the exam on the second examination day as your first try.

c. If you do not meet the conditions in a and b, or the School decides based on the evidence you present that your reason for missing the exam was not justified, you forfeit your first examination try. This forfeit means you have only 2 actual chances to take the examination. You are eligible to take the examination on May 9th, the date scheduled for the retake examination day. You need to follow procedures outlined in this document in order to take the exam.

APPEALING FAILING GRADES

If a student sits for the exam, the grade will stand, unless they can demonstrate either of the following two conditions. (1) A student may believe that procedures outlined in this document have not been followed by the School. It is the student's responsibility to present evidence that this is the case. (2) A student can demonstrate that the answer key used to score grades was unambiguously wrong.

SPECIAL ARRANGEMENTS

Special testing arrangements are available for students identified through Student Disability Services (SDS). Students requiring these arrangements must contact Dr. Dan Finnegan, the Graduate Adviser, at dfinnega@mail.sdsu.edu and go through the appropriate procedures and documentation at Disabled Student Services.

EVALUATING THE EXAMINATION

Administration & Community Development

The case analysis is read anonymously (using the alphanumeric code number on each exam) by one faculty member and judged "High Pass" or "Low Pass", or "Failure" on the basis of "...evidence of independent thinking, appropriate organization, high level of writing competency, critical analysis and accuracy of documentation" (Graduate Bulletin 2015-2016, p.72). The specific evaluation criteria are outlined in the Study Guide. Included on
pages 17 & 18 of this Guide is the Macro Evaluation Form that will be used to evaluate your essay. For each of the ten criteria you will be rated on a 0 through 5 rating scale. A score of 30 and above will be regarded as a passing grade needing no other action by faculty. A grade of “Low Pass” (a score of 25 to 29) will require a second reader. The student will have passed the exam if this second reader gives a score of at least 25. If the reader rates the exam as a failure (a grade of 24 or lower), the examination goes to a third reader whose decision determines the outcome. A grade of at least 25 is needed on the third reading in order for the student to pass the exam. Comments will be made to support the reason for pass or failure, with suggestions for improvement, especially in cases of failure.

In the event of a failure by the first reader, a second reader is assigned to the examination. Should this second reader give a score of 24 or less the student fails the exam. A grade of pass (a grade of 25 or above) by the reader means the exam goes to a third reader. This third reader’s decision determines the outcome.

Direct Practice

Students must mark their Scantron form carefully using a #2 pencil. To change an answer a student must completely erase the former answer with a clean eraser. If a student has doubts about whether an answer was completely erased, please complete a new Scantron.

A Scantron machine will be used to score this test. The grade will be based on how the machine reads the Scantron. There will be 100 questions used to calculate the student’s score, and a score of 75 or more is a passing score. Students will have up to 4 hours to complete the exam. Questions may be included on the exam that are under consideration for use in future presentations of the exam. These will not be identified in the exam, but they will not be used in the calculation of your final score.

NOTIFICATION OF RESULTS

Results for the exam will be emailed to students by April 11, 2016. If a problem arises in the notification process, you will be contacted by Dr. Min.

EXAMINATION REVIEW-FAILURES

If you are an Administration/Community Development student that fails the exam, you are allowed to review your examination with a faculty member assigned by your concentration chair. The assigned faculty member will pick up the examination from the main office and review it with you. The purpose of this review is not to re-grade your exam, but is intended to provide guidance regarding the topic areas and types of errors made by the student.

If you are an Advanced Direct Practice concentration study, you will be assigned a faculty member to review your exam performance. The faculty member will not go over specific items in the exam nor will he/she allow you to read test items. The aim is to help you understand the areas in which you are weak as you prepare for your retake. You are not allowed to remove the examination from the faculty member’s office or to make copies.
EXAMINATION REVIEW-PASSES

If you were successful in passing the examination, you will be allowed to review your case analysis (see the timetable). Examinations must be reviewed in the room and cannot be removed or copied. Students will be required to leave their student ID with the faculty or staff monitoring the process to insure return of the examination. These are the only times we will be allowing review of the exams. If you cannot make these times, you will be able to review the examination in your file in the main office after graduation.

SECOND EXAMINATION PROCEDURE

Procedures duplicate the conditions of the first examination process. All the same expectations of the first examination will apply again and different examinations will be given. The different examinations, however, reflect the same set of knowledge and skills requirements, as the initial examinations required.

If you plan to retake the examination, you must notify Dr. Min by phone at 619-594-6893, by email (jwmin@mail.sdsu.edu), or stop by his office (HH-119C). If you do not notify us, you will not be permitted to sit for the examination(s).

SECOND EXAMINATION EVALUATION/NOTIFICATION

Evaluation and notification procedures for the second examination process are handled somewhat differently. Students must come into the main social work office, HH-119, to receive an evaluation sheet indicating their score. Results will not be communicated over the telephone. Results of the examination may take longer to review. Students should call or email Dr. Min to determine availability and specific method of notification.

THIRD EXAMINATION PROCESS

If a student fails the examination a second time, a meeting must be scheduled with the Graduate Adviser, Dr. Finnegan. At this meeting, a review of the issues and processes up to that point is made. No student is allowed to sit for the comprehensive examination for a third time until a written plan of action is developed and implemented to address the deficit areas or skills identified. The Student Affairs Committee must approve the written plan of action and approve its satisfactory completion. No student will be permitted to take the comprehensive examination a third time until after October 21, 2016 at the earliest. The third examination date and time is subject to the availability of faculty to proctor and grade the exam.

EXAM INTEGRITY

Your exam will be numbered and you will sign for receipt, and again when you return it. The Exam must be returned in order for you to receive a grade. No cell phones are allowed in the exam room. If you need to leave the room during the exam, you must ask the Proctor for permission. The Proctor will hold Direct Practice student’s scantron sheets while they are out of the room. Violations of any of the above may lead to the disqualification of your exam.


**STUDY GUIDE**

I. **Direct Practice**

If you are analyzing a direct practice vignette:
A series of vignettes will be presented which vary in length and detail. Following each vignette a number of questions will be posed that address some or all of the following areas. The “stand alone” questions that do not relate to a specific vignette are also based on these areas.

<table>
<thead>
<tr>
<th>General Area</th>
<th>Specific Content to be Included</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biopsychosocial assessment</td>
<td>Impact of current environmental and social issues; gathering developmental and social history; mental status exam; assessing biological and psychological functioning; assessing risk factors; assessing the presenting problem(s) and underlying individual and/or family issues</td>
</tr>
<tr>
<td>Diagnostic impressions</td>
<td>Developing a diagnostic impression or problem description; knowledge of the purpose and application of the Diagnostic &amp; Statistical Manual (DSM), process of exploring and analyzing relevant biological, psychological, ecological and high risk factors for clients</td>
</tr>
<tr>
<td>Clinical case management:</td>
<td>Person-In-Environment; intervention planning, evaluative criteria; appropriate referrals to other resources and services, and advocacy for clients</td>
</tr>
<tr>
<td>Practice theories/models:</td>
<td></td>
</tr>
<tr>
<td>Under each practice theory are</td>
<td>Practice Models: Generalist Intervention Model (problem-solving), Clinical Case Management, Multisystemic Therapy, Family Systems approaches</td>
</tr>
<tr>
<td>listed practice models that are</td>
<td>Psychodynamic: Major Developmental Theories: Psychoanalysis, Ego Psychology (Erikson), Attachment (Bowlby), Object Relations (Winnicott, Main), Self-Psychology(Kohut), Bowen Family Systems Therapy</td>
</tr>
<tr>
<td>primarily based on that particular</td>
<td>• Practice Models: Ego Supportive Therapy (Goldstein), Brief Therapy, Crisis theory/Crisis Intervention, Interpersonal Therapy</td>
</tr>
<tr>
<td>theory.</td>
<td>• Behavioral/Social Learning:</td>
</tr>
<tr>
<td>Content to be covered in each</td>
<td>• Practice Models: Behavior Therapy, Task Centered Therapy, Dialectical Behavioral Therapy,</td>
</tr>
<tr>
<td>theory or model may include:</td>
<td></td>
</tr>
<tr>
<td>Major theorist; major concepts</td>
<td></td>
</tr>
<tr>
<td>explicated by the theory/model;</td>
<td></td>
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<tr>
<td>how the concepts are used to</td>
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<tr>
<td>understand client functioning and</td>
<td></td>
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<tr>
<td>applied; strengths and limitations</td>
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<tr>
<td>in terms of demonstrated efficacy,</td>
<td></td>
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<tr>
<td>appropriateness with diverse</td>
<td></td>
</tr>
<tr>
<td>populations</td>
<td></td>
</tr>
</tbody>
</table>
Prolonged Exposure Therapy, Exposure and Response Prevention Therapy, Eye Movement Desensitization Therapy (EMDR), Structural Family Therapy, Strategic Family Therapy, Psychoeducational Family Therapy, Parent Child Interaction Therapy, Behavioral Couples Therapy, Behavioral Parent Training

- **Cognitive Theory:**
  - Practice Models: Cognitive Therapy (Beck), Rational Emotive Behavior Therapy (Ellis), Cognitive-Behavioral Therapy, Motivational Interviewing, Solution-Focused Therapy (Constructivist), Narrative Therapy, Trauma Focused Cognitive-Behavioral Therapy, Cognitive-Behavioral Play Therapy, Trauma Outcome Process

- **Humanistic Theory:**
  - Practice Models: Client Centered Therapy, Experiential Family Therapy

<table>
<thead>
<tr>
<th>Providing therapeutic intervention</th>
<th>Crisis intervention and support; individual, couples, adolescents, family therapy and therapeutic issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human diversity</td>
<td>Issues of culture, race, ethnicity, sexual orientation, gender, religion, age, or disability; appropriate professional conduct and response in the context of culturally sensitive practice</td>
</tr>
<tr>
<td>Legal requirements</td>
<td>Protective issues, professional conduct in California; legal issues related to dangerous client situations</td>
</tr>
<tr>
<td>Ethical standards</td>
<td>Professional conduct: understanding one’s scope of competency and responsibility in dangerous client situations; awareness of professional strengths and limitations, NASW Code of Ethics</td>
</tr>
<tr>
<td>Evaluation</td>
<td>Evidence-based practice issues, research designs, research strategies, instruments and tools; advantages and limitations of using evidence-based interventions</td>
</tr>
</tbody>
</table>

**Suggested topics and selected bibliography to guide preparation for the Comprehensive Examination taken by students in the Direct Practice Concentration only.**

A. **Individual Approaches to Change (SW 744)**
1. The Biopsychosocial Framework for Assessment & Clinical Intervention with Adult Individuals
   A. Using a Social Work Practice Framework to Guide Clinical Interventions with Individual Adult Clients
   B. Selection Criteria: What Works for Whom
      Application of EBP principles regarding efficacy with specific populations
   C. Short-term vs. Long-term Psychotherapy Approaches
   D. Cultural Issues
      Context of treatment; how could interventions be tailored to different cultures
   E. Clinical Settings in Social Work Practice
   F. Issues for the Therapist

2. Legal and Ethical Dilemmas: Assessment and Diagnosis
   A. Mental Health Disparities for Ethnic Minorities
   B. Implementation of DSM Skills in Assessment
      Cultural impact of diagnosis; purpose of the manual
   C. Cultural Assessment
   D. Mental Status Examination (MSE)
      Content and use of the MSE

3. Working with Persons with Personality Disorders.
   A. Practice Models and Concepts
      1. Psychodynamic and Integrative Approaches
      2. Intro to Linehan’s Model: Dialectical Behavioral Therapy
   B. Intervention Techniques
   C. Concepts Resistance, Transference & Countertransference
   D. Special Concerns
   E. Effect on Worker

4. Working with Persons with Mood Disorders
   A. Focus and Interventions: Depression and Interpersonal Psychotherapy
   B. Assessing for Suicidality
   C. Medications
   D. Effect on the Worker

5. Working with persons with Anxiety Disorders
   A. Cognitive-Behavioral Therapy
   B. Cultural Issues
   C. Early Childhood Trauma (Psychodynamic versus Cognitive-Behavioral approaches)
   D. Medications
   E. Behavioral Therapy - Relaxation and Desensitization Techniques

6. Working with persons with Psychotic Disorders
   A. Focus and Interventions: The Continuum of Care from Inpatient to the Community
   B. The Importance of Group Treatment
   C. Support Systems and Relapse
   D. Medications
7. Working with persons with Substance Abuse and Eating Disorders
   A. Dual diagnosis (Substance Abuse and Mental Health)
   B. Stages of Change model
   C. Motivational Interviewing
   D. Cognitive-Behavioral Therapy

B. Family Approaches to Change (SW 739)
   1. Family Systems
   2. Structural Family Therapy
   3. Bowenian Family Systems Therapy
   4. Experiential Family Therapy
   5. Psychoeducational Strategies

C. The Family Context (SW 739)
   1. Comprehensive and ongoing assessment of the individual within the context of the
      family, and of the family within larger systems
   2. Individual and family high risk and underlying issues
   3. Family Life Cycle
   4. Communication
   5. Boundaries, structure, roles and rules
   6. Family of origin issues
   7. Parents use of children as objects through parentification and projective
      identification
   8. Identified patient’s symptoms (i.e., acting out behavior, depression) and their
      relationship to family system dynamics, roles, structure, etc.
   9. Individual and family separation and differentiation issues
   10. Ethnocultural, racial, religion/spirituality, immigration, and socioeconomic contexts
   11. Strengths, social support, cultural and other emotional and instrumental resources
       at the individual-, family-, and community-level

D. Research (SW 791)
   1. Major risk areas and underlying issues at the individual- and family-level addressed
      in evaluation plan
   2. Using the EBP process to guide the choice of interventions
   3. Use of appropriate design, measurement tools, and procedures to evaluate goals of
      practice effectiveness and guide choice of intervention.
   4. Research Plan
      a. Formulation and implementation of a relevant evaluation plan (including but not
         limited to the use of instrument and measurement tools)
      b. The use of observation, self-report, and collateral information to evaluate
         practice and progress toward set goals
      c. Appropriate data analysis plan (visual and statistical procedures)

E. Skills (SW 744, 791, 739)
   1. Demonstration of skill in the application assessment and diagnostic knowledge to
      specific cases, as evidenced by application to a variety of vignettes and stand-alone
      questions.
   2. Demonstration of skill in the application of specific interventions, modalities and
      processes in the three phases of treatment, as evidenced by application to a variety
of vignettes and stand-alone questions.

3. Demonstration of skill in the referral process of direct social work practice in preventive and adjunctive services, as evidenced by application to a variety of vignettes and stand-alone questions.

4. Demonstration of understanding one’s scope of competency and ethical and legal issues related to confidentiality, professional conduct, and high risk client situations (e.g., child abuse, elder abuse, domestic violence, Tarasoff concerns) as evidenced by application to a variety of vignettes and stand-alone questions.
   a. Conscious use of the NASW Code of Ethics in guiding social work practice
   b. Conscious use of self in providing culturally-relevant, sensitive, and competent services at the individual, family, and community-level

**Direct Practice**


**Direct Practice Evaluation**


**Recommended Texts**


10
II. Administration & Community Development

A. Questions and factors to consider

In the Administration and Community Development Concentration, there will be two cases with both Administration and Community Development aspects. Answers to the questions below should also address ethical and professional behavior; diversity and difference; human rights and social, economic, and environmental justice; practice-informed research and research-informed practice; policy practice; and engagement with staff in organizations and with communities.

Students will address the following questions.

1. Assessment: Assess the organizational and community situation with supportive data. List and describe key issues and problems. Also note strengths and how these may be relevant to the issues. Discuss the top 3-4 issues, including why they are need attention and the effects they are having on the organization and/or the community. Use relevant theories, practice principles, and research to support and elaborate upon your analysis.

2. Goal setting: List goals for a change plan, in priority order with rationales for each goal. Relate these to the top identified issues and problems listed above.

3. Intervention: Describe your intervention/change plan for the accomplishment of each change goal. Describe specific strategies, techniques, or activities to be used. Include your rationales for each. Use relevant theories, principles, and research to support your plan.

4. Evaluation: Describe how you would evaluate the outcomes of your intervention using any relevant program evaluation or other research methods. Be specific about the design and process for each element. These should relate to the above assessment, goals, and intervention plan.

B. Suggested topics and selected bibliography to guide preparation for the Comprehensive Examination taken by students in the Administration and Community Development Concentration.

1. Social Work 740: ADVANCED SEMINAR IN SOCIAL WORK ADMINISTRATION AND COMMUNITY DEVELOPMENT

a. Strategic management
   Mission, vision, & values
   Stakeholders
   SWOT analysis
Strategy implementation

b. **Marketing**
   4 P’s: product, price, place, promotion
   Marketing audit
   Market niche, positioning
   Market mix

c. **Financial management**
   Variance analysis
   Fixed and variable costs
   Direct and indirect costs
   Cost efficiency, cost effectiveness
   Program structures and responsibility centers
   Break even analysis
   Financial ratios
   Revenue and expense analysis
   Cutback management

d. **Governance and boards**
   Roles: Board, CEO
   Board functions
   Board member criteria
   Board development

e. **Performance Management**
   Management audits
   Performance measurement: outputs, outcomes
   Cost effectiveness

g. **Diversity and discrimination**
   Diversity principles & practices
   Management of a multicultural workforce

i. **Ethics & Values**
   Ethical issues & requirements
   Ethical dilemmas in administration
   Ethics audit

**2. SW 720: CIVIC ENGAGEMENT AND THE SOCIAL ENVIRONMENT**

a. Recognizing Grassroots vs. grasstop community leaders
b. Civic Engagement versus Social Service Delivery
c. Role of Social Workers in community practice
d. Consensus Organizing
   Theories around various methods of organizing: conflict, consensus, women centered, faith based, coalition building
e. engaging diverse communities and recognizing your role as a community worker
f. Cultural competency in community practice
g. Politics and Political Participation
Identifying stakeholders
   - Internal and External Potential Partners
   - Shared Interest and Values

Developing Organizing Capacity
   - Recognizing leadership and capacity in various community groups, e.g. youth, elders, artists, business owners

Relational Building, Bridging, bonding,

Communications, strategies, tactics: one-on-ones, living room meetings, door knocking, online engagement

Building consensus amongst parties

Ethics in community practice

Advocacy and lending expertise when needed, e.g., understanding how a policy affects a community

Engaging partners outside of a community

Evidence-based community practice: identifying “wins” and ongoing assessment of agreed upon change

Sustaining change

Personality and method: inherent traits of various organizers

3. SW 791: RESEARCH

   a. Qualitative and mixed methods evaluations
   b. Formative and process evaluation
   c. Single system research designs
   d. Client satisfaction
   e. Measurement tools
   f. Data analysis

4. ORGANIZATION AND COMMUNITY THEORY AND PRACTICE (SW 619, SW 632)

   a. Management and Organization Theory
      - Scientific Management
      - Bureaucracy
      - Human Relations: Theory X and Theory Y, Systems 1-4
      - Contingency Theory
      - Organization Systems Theory
      - Political economy

   b. Program design & development
      - Principles of program design
      - Goals, objectives, activities
      - Logic Models
      - Evidence based practice in program design
      - Management by objectives (MBO)

   c. Management information systems
      - Inputs, throughputs, outputs, outcomes

   d. Organizational Climate and Culture
Norms, values, and ethics

e. **Leadership**
   - Trait theories
   - Situational leadership
   - Contingency theories
   - Visionary leadership
   - Transactional and transformational leadership

f. **Organizational Change**
   - Change tactics: create urgency, develop support and address resistance, develop an action system, implement the plan
   - Problem solving groups
   - Total Quality Management
   - Management analysis
   - Team building
   - Employee attitude survey

i. **Diversity and Ethics**
   - Creating diverse workplaces

j. **Community Practice**
   - Putting yourself in the picture
   - Knowing your community
   - Understanding community
   - Power
   - Building an organized effort
   - Strategies and tactics
   - Enhancing the quality of neighborhoods

**C. BIBLIOGRAPHY**


**Practice:**


Evaluation Research:


HBSE Civic Engagement:


ADMINISTRATION AND COMMUNITY DEVELOPMENT

A. In the Administration and Community Development Concentration, there will be one case with both Administration and Community Development aspects. Students will address four common questions which are listed below. Also, the Admin students will address some probing questions which specifically focus on administrative issues, and the CD students will address different probing questions which focus on community development issues. Do not respond to the probing questions as separate questions, but rather insert responses to the probing questions within one of the Common 4 questions which follow.

COMMON QUESTIONS

If you are analyzing the Administration and Community Development case, you will be asked to:

1. Assess the organizational, community, and administrative situation with supportive data. Include a list and description of key issues and problems. Also note strengths and how these may be relevant to the issues. Discuss the top 3-4 issues, including why they are need attention and the effects they are having on the organization and/or the community. Use relevant theories, practice principles, and research to support and elaborate upon your analysis.

2. List goals for a change plan, in priority order with rationales for each goal. Relate these to the top identified issues and problems listed above.

3. Describe your intervention/change plan for the accomplishment of each change goal. Describe specific strategies, techniques, or activities to be used. Include your rationales for each. Use relevant theories, principles, and research to support your plan.

4. Describe how you would evaluate the outcomes of your intervention using any relevant program evaluation or other research methods. Be specific about the design and process for each element. These should relate to the above assessment, goals, and intervention plan.

ADMINISTRATION PROBING QUESTIONS

1: What factors, issues, or conditions related to agency systems, processes, or operations need attention?

2: What specific changes should be made to these agency systems, processes, or operations to reach the new desired state?

3. What leadership behaviors and organizational change tactics by agency administrators would enhance prospects for successful change implementation?

COMMUNITY DEVELOPMENT PROBING QUESTIONS

1: What role can the community play in strengthening the Board of Directors?
2: What partnerships can be considered to strengthen the delivery of services?

3: How can social marketing be used to address some of the problems?

**B. Suggested topics and selected bibliography to guide preparation for the Comprehensive Examination taken by students in the Administration and Community Development concentration only.**

**1. Social Work 740: ADVANCED SEMINAR IN SOCIAL WORK ADMINISTRATION AND COMMUNITY DEVELOPMENT**

a. **Strategic management**
   - Mission & values
   - Stakeholders
   - SWOT analysis
   - Strategy development
   - Operational/tactical planning
   - Organizational vision
   - Strategy implementation

b. **Marketing**
   - 4 P’s: product, price, place, promotion
   - Marketing audit
   - Market niche, positioning
   - Market mix

c. **Financial management**
   - Variance analysis
   - Fixed and variable costs
   - Direct and indirect costs
   - Cost efficiency, cost effectiveness
   - Program structures and responsibility centers
   - Break even analysis
   - Financial ratios
   - Revenue and expense analysis
   - Cutback management

d. **Governance and boards**
   - Roles: Board, CEO
   - Board functions
   - Board member criteria
   - Board development

e. **Performance Management**
   - Management audits
   - Performance measurement: outputs, outcomes
   - Cost effectiveness

g. **Diversity and discrimination**
Diversity principles & practices  
Management of a multicultural workforce

i. Ethics & Values  
Ethical issues & requirements  
Ethical dilemmas in administration  
Ethics audit

2. SW 720: CIVIC ENGAGEMENT AND THE SOCIAL ENVIRONMENT

a. Grassroots organizing  
b. Community practice for social workers  
c. Civic Engagement versus Social Service Delivery  
d. Role of Social Workers in Civic Engagement  
e. Consensus Organizing  
   Limitations of Conflict  
   Conflict Organizing vs. Consensus Organizing  
   Role of Organizer  
f. Coalitions  
g. Dimensions of diversity in community practice  
h. Cultural competency in community practice  
i. Politics and Political Participation  
j. Identifying stakeholders  
   Internal and External Potential Partners  
   Shared Interest and Values  
k. Developing Organizing Capacity  
   Finding Young Talent  
   Spotting Organizing Ability  
   Seeking "Natural" Organizers  
l. Faith based community organizing  
m. Relational Building, Bridging, Establishing trust as an organizer  
n. Communications, strategies, tactics  
o. Building consensus  
p. Ethics in community practice  
q. Advocacy  
r. Engaging External Partners  
s. Evidence-based community practice  
t. Sustaining change  
u. Personality and method: inherent traits of various organizers

3. SW 791: RESEARCH

a. Qualitative and mixed methods evaluations  
b. Formative and process evaluation  
c. Single system research designs  
d. Client satisfaction  
e. Measurement tools  
f. Data analysis
4. ORGANIZATION AND COMMUNITY THEORY AND PRACTICE (SW 619, SW 632)

a. Management and Organization Theory
   - Scientific Management
   - Bureaucracy
   - Human Relations: Theory X and Theory Y, Systems 1-4
   - Contingency Theory

b. Program design & development
   - Principles of program design
   - Goals, objectives, activities
   - Logic Models
   - Evidence based practice in program design
   - Management by objectives (MBO)

c. Management information systems
   - Inputs, throughputs, outputs, outcomes
   - Forms, reports, and data base design
   - Balanced scorecard

d. Organizational Climate and Culture
   - Organizational culture
   - Norms, values, and ethics

e. Leadership
   - Trait theories
   - Situational leadership
   - Contingency theories
   - Visionary leadership
   - Transactional and transformational leadership

f. Organizational Change
   - Change tactics: create urgency, develop support and address resistance, develop an action system, implement the plan
   - Problem solving groups
   - Total Quality Management
   - Management analysis
   - Team building
   - Employee attitude survey

i. Diversity and Ethics
   - Barriers to enhancing diversity
   - Value of diverse workplaces and groups
   - Creating diverse workplaces

j. Community Theory and Practice
   - Community change
   - Theoretical Frameworks for social change
   - Understanding community
Power
Building an organized effort
Strategies and tactics
Utilizing community organizing in human service organizations

C. BIBLIOGRAPHY


Practice:


Evaluation Research:


HBSE:


D. ADMIN/CD SCORE SHEET

ANSWER SHEET #___________ EVALUATOR #__________

Criteria: Detailed comments must be made to support the reason for failure especially. These comments are available for release to the student. Suggestions for improvement should be made when appropriate.

Rating Key:

OUTSTANDING (5) Superior knowledge, exceptional organization and expression, comprehensive coverage of issues, and evidence of original thinking.

VERY GOOD (4) Better-than-average knowledge, fairly comprehensive coverage, and clarity of organization and writing.

GOOD (3) Adequate response with most points covered well, reasonably systematic organization, and acceptable writing.

FAIR (2) Less than adequate coverage in some areas; omissions, errors of judgment, and/or lack of clarity in the transmission of ideas.

POOR (1) Substantial examples of poor judgment or misinformation and/or significant omissions.

UNACCEPTABLE (0) No response.

Criteria (Circle a rating for each of the 10 criteria).

Assessment

1. Major issues are clearly identified and any relationships among them are shown; other key organizational or community factors (e.g., relevant strengths or weaknesses of the organization or the community) are identified. (5)(4)(3)(2)(1)

2. Assessment of each issue clearly shows its relevance and how it contributes to the problem or its solution. (5)(4)(3)(2)(1)(0)

3. Assessment elements are supported by reference to theories, principles or research (e.g. theories of management or community practice, accepted principles of effective practice behavior). (5)(4)(3)(2)(1)(0)

Goals

4. Specific prioritized change goals are listed and related to identified issues and assessment factors. (5)(4)(3)(2)(1)(0)

5. Rationales for the choice of each goal are articulated, based on assessment factors.
Intervention Plan

6. Strategies and tactics are adequately described and address identified goals. The overall plan is comprehensive, based on identified goals. (5)(4)(3)(2)(1)(0)

7. Clear rationales are provided for each strategy or tactic, indicating how each will aid goal achievement. Key relationships between the different strategies and tactics are noted. (5)(4)(3)(2)(1)(0)

8. The plan is supported by administrative or community development principles, concepts, or theories. (5)(4)(3)(2)(1)(0)

Evaluation Procedures.

9. Evaluation elements and measures to assess the effects of the intervention are clearly delineated and related to identified goals and issues. (5)(4)(3)(2)(1)(0)

10. Clear procedures are provided for implementing each evaluation element, indicating how each will measure the extent of goal accomplishment. (5)(4)(3)(2)(1)(0)

___________________Total Points

Circle level of pass or failure based on total points:

<table>
<thead>
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<th>Points</th>
<th>Description</th>
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<td>Low Failure</td>
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<tr>
<td>11-24</td>
<td>Failure</td>
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<tr>
<td>30-39</td>
<td>Pass</td>
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<tr>
<td>40-50</td>
<td>High Pass</td>
</tr>
</tbody>
</table>

Comments:
D. SCORE SHEET

ANSWER SHEET #___________ EVALUATOR #__________

Criteria: Detailed comments must be made to support the reason for failure especially. These comments are available for release to the student. Suggestions for improvement should be made when appropriate.

Rating Key:

OUTSTANDING  (5) Superior knowledge, exceptional organization and expression, comprehensive coverage of issues, and evidence of original thinking.

VERY GOOD  (4) Better-than-average knowledge, fairly comprehensive coverage, and clarity of organization and writing.

GOOD  (3) Adequate response with most points covered well, reasonably systematic organization, and acceptable writing.

FAIR  (2) Less than adequate coverage; significant omissions, errors of judgment, and/or lack of clarity in the transmission of ideas.

POOR  (1) Substantial examples of poor judgment or misinformation and/or significant omissions.

UNACCEPTABLE  (0) Completely misses the intent of the question with no significant points covered.

Criteria (Check rating for each of the 10 criteria).

Assessment

11. Major issues are clearly identified and any relationships among them are shown; other key organizational or community factors (e.g., relevant strengths or weaknesses of the organization or the community) are identified.  (5)(4)(3)(2)(1)(0)

12. Assessment of each issue clearly shows its relevance and how it contributes to the problem or its solution.  (5)(4)(3)(2)(1)(0)

13. Assessment elements are supported by reference to theories, principles or research (e.g. theories of management or community practice, accepted principles of effective practice behavior).  (5)(4)(3)(2)(1)(0)

Goals

14. Specific prioritized change goals are listed and related to identified issues and assessment factors.  (5)(4)(3)(2)(1)(0)

15. Rationales for the choice of each goal are articulated, based on assessment factors.
**Intervention Plan**

16. Strategies and tactics are adequately described and address identified goals. The overall plan is comprehensive, based on identified goals. (5)(4)(3)(2)(1)(0)

17. Clear rationales are provided for each strategy or tactic, indicating how each will aid goal achievement. Key relationships between the different strategies and tactics are noted. (5)(4)(3)(2)(1)(0)

18. The plan is supported by administrative or community development principles, concepts, or theories. (5)(4)(3)(2)(1)(0)

**Evaluation Procedures.**

19. Evaluation elements and measures to assess the effects of the intervention are clearly delineated and related to identified goals and issues. (5)(4)(3)(2)(1)(0)

20. Clear procedures are provided for implementing each evaluation element, indicating how each will measure the extent of goal accomplishment. (5)(4)(3)(2)(1)(0)

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General Comments: