

PRACTICE EVALUATION

Tools And Instruments That Measure Client Progress and Evaluate Effectiveness of An Intervention

Working with clients this year of internship amidst the COVID-19 pandemic has been challenging. Primarily due to the temporary shut down early this year and the safety protocols that we all had to observe thus far. One can hardly argue that this has been an unprecedented time for everyone. One of the major hurdles many in the field of social work had to deal with was the immediate shift from face to face interaction to remote communication with clients. Not to mention the closures of many municipalities that serve many of the members that we work with, like HRA (Human Resources Administration) and Medicaid centers governing entitlements. These limitations have fostered much creativity and a new normal that will be here for several years to come. The platform zoom has become a household name and a significant conduit for communication between staff and clients. It's the next best thing to interfacing with individuals without having to be in their immediate space.

The tools and instruments that I have used to engage client progress and evaluate the effectiveness of interventions were based on the CSWE Competencies rubric:

1. Identify as a professional social worker and conduct oneself accordingly.
2. Apply social work ethical principles to guide professional practice.
3. Apply critical thinking to inform and communicate professional judgment.
4. Engage diversity and difference in practice.
5. Advance human rights and socio-economic justice.
6. Engage in research-informed practice and practice-informed research.
7. Apply knowledge of human behavior and the social environment.

8. Engage in policy practice to advance social and economic well-being, and to deliver effective social work service.
9. Respond to contexts that shape practice.
10. Engage, assess, intervene, and educate with individuals, families, groups, organizations, and communities (<https://www.noodle.com/articles/social-work-core-competencies>).

I was fortunate to work with a few clients in my internship program that were considered mild.

Working with clients who exhibit good behavior and communicate well is conducive for an intern just starting. As reflected in my paper the therapy model I used was Solution Focused Therapy. I employed this approach because of the timing of therapy and the philosophy that upholds dealing with the solution over the problem. Solution Focused Therapy highlights solutions instead of the reasoning behind the problem and its origins. Using this tool I have found three techniques that work well with SFT. The first one is exploring exceptions which refer to a line of questioning that helps the client realize that the problem isn't as intense or significant. Oftentimes the client may realize that there are exceptions to the severity of their problems. If the therapist can successfully help the client identify that there are times when the problems do not exist or maybe less apparent, the intervention worked.

The second technique that I have found to work well with SFT, is scaling questions. Scaling questions is designed to help the client realize that things will get better over time. The technique consists of a series of questions that depict how incremental actions will make an issue minimal or even non-existent. The third technique and in my opinion the most effective is the miracle question scenario. This was the primary tool I used to help my client come to some resolve for a better outcome to his problem. Tom is a client I started working with early this fall who struggles with depression. He was diagnosed with major depression in his late twenties. Tom has had

very little communication with his family and friends and sequesters himself in his apartment most of the day. He often feels like people do not like him because of his weight, as he is overweight.

Tools And Instruments To Measure And Evaluate Own Performance And Practice

Working with Tom has allowed me the opportunity to draw on the Solution Focused approach. Sitting with him and having a conversation about how things can be like if he were normal was interesting. I was able to help Tom imagine a world with him as happy and gregarious. It was interesting to hear him describe what normal looks like and how being friendly and gregarious would make him feel. Tom was able to explore the possibilities and at that moment to see the change in demeanor and tone was priceless. I found that when Tom began to create this possibility, it changed him and he became more verbose during our interaction. This was the ideal assessment for growth I could note as I believe I was making progress. Having only met with Tom three times, it was encouraging to see that I was working an intervention and experiencing results.

Experiencing this result fostered greater enthusiasm on my part and I was glad to serve my client Tom in this capacity. I must also note that it gave me a new sense of motivation and respect for the field. I felt proud and compelled to continue working with Tom until the fourth session.

During our fourth session, what I had expected of Tom did not manifest. He was not as light or verbose, he was mostly silent and did not show much enthusiasm as before. Keeping with the

CSWE competency principle 3, I applied critical thinking to inform and communicate professional judgment, I ended the session and scheduled another. During our fifth session, things were much better, turns out that the client did not take his medication, and had a pretty rough day the last time we met. I learned that day, that it is fine to have a bad day. Working a

technique is not always going to render perfection. Change is not an event but a process and it will take time for favorable conditions to stick. I continue to work with Tom and the signs of progress are encouraging, he comes to communicate with me when I see him. He has demonstrated a desire to change and I perceive a measure of hope in his tone.

Describe Corrective Measures Regarding The Intervention and Social Work Practice

In my quest to obtain a Master's in Clinical Social Work, it was incredibly helpful to have undergone an internship. My internship experience has worked in tandem with what I have been learning academically. It is my sincere recommendation that any individual going into the field have this dual experience. Working with clients and having been informed of all of the therapies and interventions that could be employed to help has been rewarding. The greatest benefit of working with clients with diverse problems is the experience that I have obtained. A corrective measure that has by default surfaced in my experience working with clients is the trial and error process. Working with clients taught me that not every client will subscribe to the same method or intervention. The client's experiences are different and each client comes with a different cultural, socio-economic, and ethnic background. With more experience the more seasoned a social worker. While I am not a fully-accredited social worker, I can say that the corrective measure for me has been my brief experience working with clients. I learned to make judgment calls based on the situations at hand.

Demonstrate Social Work Skills That Display Professional Demeanor In Behavior, Appearance, And Communication

One observation I have made about myself regarding social work is just how natural I flow within the field. I am by nature a nurturing person, as a clergyman, I demonstrate empathy and

sympathy with the marginalized. I enjoy helping people and seeing them grow to be fruitful and productive. What I find to be a truth is how close social work and the ministry are in retrospect. In a nutshell, social work is ministry outside the four walls of a church. With great examination as Christians and followers of Jesus, we are all called to be social workers. Working within the social context to make the lives of our brothers and sisters better. I find that this is the greatest motivation that keeps me focused on completing my training. My social work practice will be hinged heavily on my faith and commitment to others.

Self-awareness for me is ever-evolving because while I may think some protocols to be professional, that is not always the case. One example is in the case of a pedophile receiving counseling. A therapist must not show any bias to someone like that or be judgemental towards them. As a professional, a social worker must be impartial in practice and seek to learn how to work with all kinds of clients. A wonderful resource I mentioned before is the NASW Code of Ethics which has taught me the importance of professional demeanor and behavior. As for appearance and communication, I do not see the need for much improvement because I hold to the belief that modesty is safe. Following agency policy and drawing from colleagues about how to present one's self has been a bedrock in my training. Communicating clearly has always been an area of strength for me, as I indicated before being a minister developed that all-important trait. I should also mention that working with clients also helps with self-awareness when I consider how many of my clients behaved. It provided fodder on what I perceived to be appropriate and inappropriate. As social workers, we are expected to be the mature ones having the answers and behaving as the professional. The idea is for social workers to be the examples demonstrating to the clients how life is to be handled. I have discovered in my own experience as an intern that being intentional in my professional demeanor has shaped my conduct. I draw in

my mind a barrier that separates me from the client. While it is my proclivity to collaborate with the client on an intervention, I do keep in mind that this therapy session has an outcome.

Utilize supervision and consultation in class and fieldwork

My safe place through all of this is the supervision I have with my program director and field instructor. I appreciate the liberty I m given to exercise my acumen, but time is provided for me to review the course of action. When I am consulted on my actions the favorable initiatives that I demonstrated are highlighted and the poor ones are called out. My supervision has proven to be productive because reasons are given as to why certain actions were good or bad, thus cultivating healthy clinical habits.

Engagement

The engagement strategies I used working with my client were eye contact, empathy, and active listening. They served to be effective as my client responded well when I asked him questions about his challenges. I perceived that as I listened intently it drew on the client's strength of wanting attention.

Assessment

The three assessment strategies I used working with my client were interviewing, genogram, and eco mapping. I used the genogram to track the family history identifying any close family member dealing with depression. Furthermore, I used the ecomap to identify where my client enjoyed going, and where did the people in his life frequent. These strategies were helpful to my client and I identify possible places and people of concern. It helped my client see where he needed to spend more time and places he need to stop going. My client was able to connect the dots about the people and places that he identified with affected his mood.

Intervention

As mentioned above the three techniques/interventions that I used worked well with Solution Focused Therapy. The first one is exploring exceptions which helped my client realize that the problem isn't as intense or significant as he thought. Using this intervention my client did realize that there are exceptions to the severity of his problems. The second technique that I have found to work well with SFT, is scaling questions. This technique helped my client realize that things will get better over time. The technique consists of a series of questions that depict how incremental actions will make an issue minimal or even non-existent. During our sessions, I was able to ask my client questions about some of the people in his life and how they affected his disposition. As we discussed these individuals, my client began to understand how important it was to limit and welcome some people in his life. The third technique I found to be most effective was the miracle question scenario. This was the primary tool I used to help my client come to some resolve for a better outcome to his problem. He was able to paint the picture of a world where there didn't exist certain people and where the scenario of his life was different from his present reality. What I noticed when my client began to share with me about his scenario is the sense of calm and enthusiasm that surfaced in communication and gesture.

Evaluation

I truly believed that my intervention was successful. My client responded favorably as I mentioned earlier. I will also note that the goal of helping with his depression was successful. My client looked forward to meeting with me and exhibited a sense of peace and happiness when communicating his hopes. My client and I put in place three things that he can do to create a close enough reality of what he imagined his ideal world would look like: Spend more time with

people that makes him happy, visit places that he likes and empower himself with motivation resources.

Achievement	Task 1 Meeting New People	Task 2 Visiting New Places	Task 3 Investing In Self
No Progress (0)	Attends church once a week	Visit the Museum once a week	Attends conferences investing in self
Partial Progress (2)	✓ Makes phone calls 3 times a week to family and friends	✓ Visits the library once a week	Read self-motivating books
Completely Achieved (4)	Has Facebook Page	Goes to the park once a week	✓ Listens to motivation and self-esteem promoting CD's
Score	2	2	4
Possible Change	4	4	N/A
% of Possible change Achieved	50	50	100

My client exhibited some change he was able to make calls to people he felt somewhat close to, he was also demonstrated some progress by visiting the library once a week to offset his depression. Lastly, he was able to purchase resources that encourage and prompted healthy self-esteem. With some of the progress made, my client will need to continue meeting the demands of fulfilling the goals he and I set for him. With time I do believe that my client will meet them, it's been three months thus far.