

Process Recording II

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PRELIMINARY ASSESSEMENT

Ms. Carol Davis is a 54 year old divorced Caucasian female. She was court ordered December 6, 2007 by McMinn General Sessions to Moccasin Bend Mental Health Institution (MBMHI) for a 301-A (30 day evaluation) Pre-Trial Forensic Evaluation to determine competency to stand trial for the charges of: Stalking, Aggravated Burglary, and Phone Harassment, and her mental condition at the time of the alleged offenses. This is her first admission to MBMHI and she denies any previous psychiatric treatment or any psychiatric hospital admission. She was born in Michigan but moved to Athens Tennessee nine years ago. Ms. Davis stated her parents divorced before she was born. Her mother raised her and re-married when she was about three years old. She also stated her mother may have committed suicide. She has an older sister (Mary), two younger half brothers (David and Rick), and she stated one of her brothers (David) is deceased. Ms. Davis was married for seven years but was divorced in 1997. She raised three step-children but is not allowed to see them, because the law prevents her from seeing them. Ms. Davis stated her husband was conniving and abusive. After her divorce she was in a common-law marriage for seven years but had no children. She is very paranoid and anxious, and believes that people are out to get her and have done her wrong. She is currently staying with an acquaintance but was homeless at the time of the alleged charges. Ms. Davis is not on the Tennessee Felony Offender Register or Tennessee Sexual Offender Register.

PURPOSE OF THE INTERVIEW OR CONTACT

Ms. Davis was told about the session through my field supervisor, and she knew I was a student from UTC. I visited her for a few days before the process recording just to see if this was going to be suitable. Each time I introduced myself so I would not be a stranger to her. Ms. Davis suffers from memory lapses; she acted very surprised as if she did not know who I was. I introduced myself and explained to her about the process recording and its purpose. During the interview, she asked me several times what the purpose of this interview was. She became paranoid and began to walk and talk with others. She would come back and the session would start again. I don't know if she really understood the purpose of the interview.

As a student social worker, working with mental illness is always a challenge. One never knows what to expect. Conducting a process recording gives me the opportunity to improve my communication skills, note taking, self-awareness, assessments, learning to listen, observations, and role playing. Conducting a process recording provides me with an additional opportunity to practice social work values and ethics.

These perceptions are different because my client did not understand the purpose. This Process Recording demonstrates my future. In other words, I learn how to be a professional Social Worker even if the client does not understand my purpose. I must understand, and stay focused.

INITIAL OBSERVATIONS OF THE CLIENT:

My observation of Ms. Davis, she is a petite, and medium built. She has blonde hair, brown eyes, and wears blue jeans daily. She is neat and clean, well groomed, and her posture is good. Ms Davis uses eye contact during our sessions. She speaks loud and repeats the communication over and over. She is very paranoid and easy to be agitated. She has a short attention span that causes her to get up and walk during the process recording. She was concerned about her living situation, and employment. Her mood is unpredictable, one minute she is sitting, being cooperative and the next minute she is delusional and in a manic state.

My impression of Ms. Davis at the beginning of the session was good. I judged her because of her outer appearance, she was clean, spoke clearly, and she seems stabilized. The room had good lighting and I was not afraid because I had confidences about the assessment.

These are my feelings and attitude I brought to the session; “this is going to be easy, because Ms. Davis is not as sick as the other clients at MBMHI, and this will take only 20 minutes. This assessment took 60minutes because of her paranoid and manic state. She walked and repeated the same thing over and over. She was in denial about her mental illness and believed she was not supposed to be at MBMHI. This was not easy because I had to redirect her in staying on task, and this was continuous.

Ms. Davis expressed non-verbal communication by turning her eyes away from me when a topic arose that she did not want to collaborate on, and she would start walking. Additional to that, she would put her hands in her pockets and move her shoulders.

Documented Communication

| Field Instructor's Comments | Content- Dialogue | Gut-Level Feeling/Response | Student's Analysis/ Assessment |
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| <p>The field instructor can make comments and give feedback right opposite the interaction or feelings/reactions the student records.</p> | <p>SW: Hello, my name is Sandra Silvels, I am a Social Work Student at UTC and I am doing my internship here at MBMHI. How are you doing?</p> <p>Client: I am fine, but like to get my money for working.</p> <p>SW: Where do you work?</p> <p>Client: I work in the kitchen, one hour in the morning and one hour at noon. I like working it keep my mind occupied.</p> <p>SW: How are things going at MBMHI?</p> <p>Client: I really don't like this place because I don't have a mental disorder. I just need a little help with money.</p> <p>SW: Do you know why you are here?</p> <p>Client: Yes, because of my family but I do not want to talk about that.</p> <p><i>Client takes eye off</i></p> | <p>I started out good, but I became agitated as well. I wanted to stop but knew I was pressing for time.</p> <p>My tolerance was getting low. I realize that I must demonstrate my social work professional at all times.</p> <p>I thought to myself, Moccasin Bend is a hospital for mentally sick individuals. I began to respect Ms. Davis behavior.</p> <p>She appears to be in denial about her mental illness.</p> | <p>Techniques used for collecting data during this interview (questionnaire).</p> <p><i>Range of techniques include:</i> <i>verbal following,</i> <i>transitions, attending,</i> <i>paraphrasing,</i> <i>closed-ended questions</i> <i>open-ended questions.</i></p> <p>Reflecting feeling and content; Building rapport.</p> |

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| | <p><i>me and began looking around the room.</i></p> <p><i>SW, I see you are upset and this will not take long at all.</i></p> <p>SW: How was your childhood?</p> <p>Client: I did what other children did. I was in the Brownie club.</p> <p>SW: What elementary school did you attend?</p> <p>Client: I attended Jackson and Dodson Elem. in Michigan.</p> <p>SW: What high school did you attend?</p> <p>SW: What high school did you attend?</p> <p>Client: I attended Bentley High in Michigan and Activator Director there.</p> <p>SW: Did you go the Prom your last year in high school?</p> <p>Client: No, because I had the measles.</p> <p>SW: Did you attend</p> | <p>I sensed that she was feeling uncomfortable.</p> <p>I felt like, I could have utilized open-ended questions to help the client open up a little more.</p> <p>I could have reflected on her feelings about not going to the prom because of the measles. Mainly, because this is the highlight of high school.</p> | <p>I used the explicit expression of empathy, "I" to express understanding of the situation related to her feelings about her family.</p> <p>Bio-psycho-social; Systems Theory.</p> <p>This involve a person biological, psychological, and social functioning</p> |
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Process Recording II Outline7

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| | <p>college?</p> <p>Client: Yes, but did not graduate.</p> <p>SW: Have anyone ever abused you physically, mentally, and emotionally?</p> <p>Client: Yes, I have been abused many times but I do not want to talk about it.</p> <p><i>Client get up shovel shoulders and start walked out of the room for 2-3 minutes.</i></p> <p>When client return back</p> <p><i>SW, I understand that you do not want to talk about the abuse.</i></p> <p>SW: Can you recall any mental illness in your family?</p> <p>Client: My mother may have died from suicide. I don't really know but my brother knows the truth.</p> <p>SW: Have you ever attempted suicide?</p> <p>Client: No</p> | <p>I wondered if her mental illness contributed to her not graduating.</p> <p>I felt that maybe I intruded in her privacy which probably made her feel uncomfortable.</p> <p>I thought about my own mother deaths and I did not want to pursue this topic any further.</p> | <p>Exploration: collecting data to use in formulating an assessment.</p> <p>Ecological Theory: Identify patterns and relationships with individuals, families, groups, communities, and organizations.</p> <p>Reflecting feelings.</p> |
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| | <p>SW: Do you have an alcohol or drug problem?</p> <p>Client: I am not an alcoholic or drug addict but I do drink when I am troubled.</p> <p>SW: Have you ever been in treatment for Alcohol?</p> <p>Client: No, because I don't drink all the time.</p> <p>SW: Have you ever been married?</p> <p>Client: Yes, I am divorced and do not want to talk about him.</p> <p><i>Client became agitated and paranoid (looking around the room, looking up and down the hall, and asking me the same question over and over). Wanting to talk about other things. Asking why are we doing this? (Redirect her thinking and also reassuring her about confidentiality.</i></p> <p>SW: Do you have children?</p> <p>Client: I can't have</p> | <p>I felt she was in denial about her alcohol problem because her history shows issues with her drinking. She had two DUI for driving.</p> <p>Once again, I felt that I stepped on another sore spot with the client. Maybe there was some type of abuse in this relationship.</p> <p>I felt I could have reflected on these feelings but she was so frigidly that I was to nervous to continue.</p> | <p>Object Relations Explains situations and problems. It can be people or things such as transitional objects which form attachments. They become the building block of the self system.</p> <p>Paraphrasing her responses.</p> <p>Attending behaviors: eye contact and good body posture.</p> |
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| | <p>any children but I have 3 step-children, their names are Amanda, Adam, and Bryant. I am not allowed to see them.</p> <p>SW: what is your perception of a normal family?</p> <p>Client: Families that go to work and do activities together with your mate. My brother has a perfect family, he raised his children right. I don't have a relationship with my sister who lives in Hawaii.</p> <p>SW: What is your plan upon discharge?</p> <p>Client: I hope to find apartment, get a job, and have some money.</p> <p>SW: I think you for allowing me to due this assessment with you.</p> <p>Client: Good Luck in school.</p> | <p>She appeared to show that she loved her step children and wanted to continue the family relationship.</p> <p>She appeared to show emotions as if she wanted a family or be interactive with a family.</p> <p>I could have reflected more about the family, but she was still moving, going in and out the room.</p> <p>I really wanted to stop the interview because she kept getting up which made me feel uncomfortable.</p> <p>There was a lack of connection with her.</p> | <p>Strengths perspective</p> <p>Micro-Mezzo-Macro approach individuals and environment</p> |
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ASSESSMENT

Ms. Davis is a 54 year old Caucasian female born in Michigan. The client stated her mother is deceased but her father is still living. She stated her mother may have committed suicide, but really does not know. She also said her brother knows the truth. Client stated her parents divorced before she was born and her mother (Susan) re-married when she was three years old. She has an older sister and two half-brothers, and one of the brothers is deceased. The client did not want to talk about any abuse issues but stated she had been abused physically, mentally, and sexually. Ms. Davis stated she was married for seven years but divorced in 1997. She had no children but raised three step children. She stated also she is not allowed to see her step-children; the law prevents her from seeing them and would not go into details about the matter.

Ms. Davis graduated from Bentley High School and did not attend the prom because she had the measles at time. She continued her education at Oakland University in Michigan. She dropped out for a relationship and moved to Florida to continue the relationship.

This is Ms. Davis first admission to Moccasin Bend Mental Health Institution and she denies having been at any psychiatric hospitals or having any psychiatric treatment. She stated she drinks a lot when she is troubled but is not an alcoholic because she does not drink everyday. Client stated having a lot of depression in the past but denied having a mental disorder. She stated her religious preference is Christian but believes it may interfere with her treatment at MBMHI. Client is able to do her ADLS such as, hygiene and grooming. Ms. Davis stated she has worked at stores and had management positions at retail stores but resided from them.

Strengths

1. Education
2. Health

Problems/ Needs

- 1.Lack of Income
2. Homelessness

The original assessment is based upon the courts information and this is why she is a resident at Moccasin Bend Mental Health Institution. My current assessment is more detailed. It is about her life as a child growing up, and her feelings about her parents, her siblings, and her ex-husband and step-children. We talked about her future plans and preference of religion.

The knowledge I used to apply to Ms. Davis was the micro-mezzo-macro approach because it enables me to obtain more information about the clients past, present, and future.

ANALYSIS OF THE STUDENT SOCIAL WORKER'S PRACTICE

The skills and techniques I used during this process recording was listening and observing non-verbal communication. Listening helps me to give constructive feedback with total respect; it builds rapport, and empathy. I used the attending skill to show Ms. Davis she had my complete attention in order for her to see that I cared about what she was saying. One of the ways of doing that was to paraphrase back to her what she said. Another technique was acknowledging her feelings on situations that caused her to look away. I used a lot of eye contact mainly because she did. I know that this is important because it established trust. I also know that some cultures are intimidated with eye contact.

When I think about a specific skill I did not use, I should have used more empathy because I would have been able to understand Ms. Davis by seeing the world through her eyes and understanding her experience and feelings from a mental ill perspective. I always talk about how vulnerable they are and how our society has made them invisible. I utilized the verbal and nonverbal communication skill; I observed the way she dressed, her facial expression, and the movement of her hands and feet. By demonstrating attending behaviors, it reinforced verbal skills and it promoted a climate of mutual support and encouragement. I also used minimal prompts like “Mm-hmms,” head nods, and one word such as yes. Most of my nonverbal communication was at the beginning because I was trying to get to know and understand Ms. Davis. I did use open and close questions, but I tried not to use too many closed questions because it reduced the client’s response.

I used the bio-psychosocial approach to assess Ms. Davis. This approach helped me to ask questions based on past histories and family mental illness and her emotional development. I also used micro-mezzo-macro approach to gather a great deal of information about her life and how she interacts with the environment, to see how past issues on different levels have affected Ms. Davis as well as how they are affecting her current functioning.

The weaknesses and strengths during this session (weaknesses) were helping the client to identify her thoughts, feelings, and behaviors (such as walking) in order to complete the assessment. I need to be patient and allow her to determine her needs. The strengths were recognizing my boundaries, values, and bias.

The purpose of the sessions was accomplished because I was able to collect information and formulate it. I was able to practice what I learned through my education as a professional social worker. I also was able to accomplish the goal that I set for myself. I was able to relax and stay focused and then was able to redirect the client back to the original purpose of the session.

SUMMARY PARAGRAPH

I thought the interview went well, and I must admit during session as Ms. Davis began to walk in and out of the room, I started getting a little nervous because I did not know what to expect. I know she was agitated because of not being paid for the work she had done. This caused her to be somewhat Manic, delusional, and paranoid.

Ms. Davis responded OK, she had forgotten who I was, or acted like she did. She kept asking me the same question, why are we are doing this, and stated, I do not need to be here. Ms. Davis did not get out of order at all. She is a very respectful lady. Yes, my objectives were achieved; the whole assessment was to obtain information from the client that will help provide a treatment plan that will target Ms. Davis needs. This assignment will assist me in future practice, because I learned that people have the right to be themselves. I should always stay focused on why I am here, and that the client deserves my full attention. I also learned when to use open and close questions during an interview. My personal growth is that I can do a lot of things if I put my mind to it. I am not afraid of challenges; I look at challenges as opportunities to grow. I learned that

mistakes are tools for corrections and my failures yesterday do not have shackles on me today. I am excited about learning more about me in the professional world.