



SOCIAL WORK IN HEALTH AND BEHAVIORAL HEALTH CARE: Visioning the Future

June 20, 2012

> FOCUS

Exploring social work's important roles and functions in the context of the changing health and behavioral health care landscape served as the impetus for convening an interdisciplinary dialogue of representatives from front-line service delivery, federal agencies, national and state organizations, insurers, and university leaders on June 20, 2012. Organized by the Social Work Policy Institute (SWPI) of the National Association of Social Workers (NASW), this first in a series of *Critical Conversations* highlighted how social work expertise contributes to enhancing health and behavioral health outcomes; explored a vision for the social work profession within the context of health care reform; and recommended future steps that should be taken to expand social work leadership and visibility within the interdisciplinary policy, practice, research and education arenas.

> PERSPECTIVES

To set the context for this *Critical Conversation*, four speakers briefly offered their perspective. The following is a summary of those comments.

Promoting Social Work Leadership in Health Care Delivery

Edward Woome, Associate Administrator, Nemours/Alfred I. duPont Hospital for

Children and President, Society for Social Work Leadership in Health Care

The importance of listening to, and learning from clients is critical for effective social work practice and central to all the work we do daily. Nemours/duPont Hospital principally serves a diverse socioeconomic population. A critical part of the mission of the hospital is to provide primary care to the most underserved children in Delaware. The 22 licensed clinical social workers have expertise in numerous therapeutic methods, work with patients, families and other members of the health team and lead discharge planning within the hospital setting. They also provide clinical case management to a chronically ill patient population. One example of innovation is that social workers will be a key part of a new Center for Medicaid and Medicare Services (CMS) Innovation Center grant program which will pilot a medical home model in primary care - to reduce hospitalizations and emergency room visits of children with asthma.

New terms are being used for providers that are intended to enhance the quality of care and health outcomes. Such terms include patient navigator, family navigator, community organizer, health lead, peer counselor, community health worker, and community integrator along with the long-time

used terms of care coordinator and case manager. In many ways these terms address functions that need to be fulfilled, rather than individual professions. It is critical that social workers identify how these functions fit with social work knowledge and skills and what roles social workers might take on as supervisors, program managers, trainers and clinicians in fulfilling these functions. The goal of eliminating health disparities and the attention to social determinants of health provide additional opportunities for greater social work involvement. Strategies that focus on population and community health are also in social worker's practice domain; however, social workers are not always at the table in plans to eliminate health disparities.

The innovations and multiple roles of social workers in Nemours/duPont Hospital — as clinicians, care coordinators, administrators, supervisors, consultants, program developers, advocates and trainers — are mirrored across the United States by the 1100 members of the Society for Social Work Leadership in Health Care (SSWLHC). SSWLHC members have developed innovations to enhance social work interventions and improve client outcomes. For example, the Partners in Care Foundation has developed an evidence-based

technology tool, the Medication Management Improvement System (MMIS), that enables social workers making home visits to help frail elders living in the community identify and resolve certain common medication problems (www.picf.org/landing_pages/23,3.html). The SSWLHC serves as a longstanding forum for the exchange of ideas around innovations and as an advocate for the importance of addressing the psychosocial needs of persons who are receiving health care services. The move toward integrated health services, the establishment of accountable care organizations (ACO) and medical homes will bring new opportunities for social workers, and it is critical for them to be involved in planning and implementing programs.

Supporting Innovation to Improve Health Outcomes and Meet Psychosocial Needs

Susannah Cafardi, Social Science Research Analyst, Center for Medicare and Medicaid Services (CMS) Innovation Center

The creation of the CMS Innovation Center is one of the outcomes of the Patient Protection and Affordable Care Act of 2010 and provides the opportunity through 2019 to “foster health care transformation by finding new ways to pay for and deliver care that improve care and health while lowering costs. The Center identifies, develops, supports, and evaluates innovative models of payment and care service delivery for Medicare, Medicaid and Children’s Health Insurance Program (CHIP) beneficiaries using an open, transparent, and competitive process” (www.innovations.cms.gov/). Cafardi has brought her clinical expertise and front-line experience to CMS where she is working on innovations related to transitions of care. With 20% of Medicare beneficiaries who are discharged from the hospital being

re-hospitalized within 30 days, and with the high health care costs for persons who are beneficiaries of both Medicare and Medicaid (referred to as “dual eligibles,”) careful examination of both large and small scale transitions between settings, between programs, and between care providers are essential.

Hospitals need to look beyond just the provision of medical care to understand what interventions will reduce hospitalization and lower costs. Hospitals will need to partner with community providers and build-up supportive services and communication and coordination strategies. Social workers should be involved in demonstrating how addressing psychosocial needs can result in improved health outcomes. Social workers can also play key roles as communication links between patients and their physicians; and social workers, in understanding patient’s needs in the context of their environment, can help achieve successful transitions. As innovations are developed social work should take a more visible role in connecting with CMS and its programs.

Several of the care transition innovations underway do include key roles for social workers. As the CMS Innovation Center tests person-centered innovations that are in keeping with the goals of the ACA, evaluation will be extremely important. CMS will carefully evaluate and examine outcomes and will scale up those models that are shown to be effective.

Educating Competent Social Workers for Health and Behavioral Health Practice

Wynne Korr, Dean, School of Social Work, University of Illinois at Urbana-Champaign

Several initiatives underway through the Council on Social Work Education (CSWE) and the National Association of Deans and Directors of Schools of

Social Work (NADD) are geared to ensuring that social work education is focused on preparing BSW and MSW students for changing health and behavioral health practice. The CSWE Educational Policy and Accreditation Standards (EPAS) were revised in 2008 to focus on competencies rather than specific content as the basis for curriculum design and student outcomes. Core competencies and practice behaviors are developed for BSW and MSW students and advanced practice behaviors for MSWs are specified by each program. Using EPAS as a guide, CSWE has developed MSW advanced practice competencies in several areas including clinical social work, substance abuse disorders, military social work and aging (www.cswe.org/Accreditation/EPASImplementation.aspx). CSWE is also working with the Center for Integrated Health Solutions to develop practice and policy course materials as well as field education modules on integrated health care.

Looking forward, Korr identified several challenges that face the social work profession including: How will social workers be involved in the development of ACOs and medical homes?; will integration of behavioral health into primary care and other new models of service delivery end community mental health centers as we have known them?; what will be the impact of state budget cuts on service delivery and the opportunities for new graduates moving into the workforce?; and will students have adequate supervision in systems that focus on billable hour models.

Measuring Quality Behavioral Health Practice by Social Workers

Avivah Goldman, National Quality Director, Aetna Behavioral Health

With 15 million members across 50 states, Aetna has a large behavioral

health program with 123,000 behavioral health providers. Sixty percent of the providers are master's level practitioners with the majority of those being clinical social workers. Aetna is very interested in identifying more specific indicators to assess quality behavioral health outcomes. It is also looking to find ways that can distinguish service outcomes among providers with different backgrounds (e.g., clinical social workers as compared to psychologists or licensed professional counselors).

The National Committee for Quality Assurance (NCQA) standards have minimal requirements for providers, requiring that the insurance company make sure that a provider is licensed, that the provider's graduation is verified, and that sanctions and liability claims against the provider are explored. This standard, however, does not indicate the quality of the service provided. Simply counting the number of sessions or comparing providers whose clients are readmitted for hospitalization to those who have lower rates of readmission are not necessarily quality indicators.

For psychiatrists, there are data available regarding the appropriateness of the medication to the diagnosis or required laboratory tests. However, it is harder to identify such concrete objective measures for social workers. Consideration has been given to looking at the extent to which clinicians' use standardized assessment tools and evidence-based practice guidelines; however, these have not proved to be easy to measure. Goldman challenged the participants to sit down with Aetna to develop outcome assessment guidelines for clinical social work practice.

> TARGETING THE CONVERSATION

Following the presentations, the participants broke into four workgroups that explored preparation of social workers for emerging health and behavioral health care practice; education and professional development strategies; research questions that need further study in order to demonstrate social work effectiveness and contributions to outcomes of those who are receiving services; and how can social workers best connect with and support the non-traditional workforce (peers, recovery coaches, community health workers, patient navigators, etc.) as it grows. The small groups developed recommended action steps and also created statements to be part of a vision statement regarding social work expertise.

> VISION STATEMENT

Social Work expertise is highly valued in health and behavioral health care as evidenced by:

- > Use of skills that support collaboration and service integration, promote relationship-building, and demonstrate the ability to create linkages across systems.
- > Demonstration of knowledge, skills and competencies that are effective in managing transitions between settings, across systems, and among care providers.
- > Capability to deal with complex situations requiring interventions at multiple levels and across numerous systems.
- > Use of person and family-centered approaches, working together with the service user in the context of their environment.
- > Demonstration of the core social work value of "starting where the client is," a fundamental of person-centered services.
- > Ability to undertake multiple roles

and functions from front-line clinical practice and care coordination to training, supervision, coordination and management of services and interventions across disciplines.

- > Possession of knowledge and skills to influence positive developmental outcomes at all of life's stages.
- > Access to social work interventions that lead to improved outcomes, costs savings and cost effectiveness.
- > Demonstration of a unique skill set targeted to prevention as well as quality and continuity of care.
- > Contribution to enhanced outcomes by serving as an essential member of the interprofessional team.
- > Incorporation into practice of core professional values related to human rights and social justice; serving as an advocate for change and working to restore the fabric of our society.
- > Ability to serve as brokers and facilitators of cultural competence.
- > Demonstration of effectiveness as problem solvers.

> RECOMMENDATIONS

The following recommendations were articulated to build social work leadership and visibility and to ensure the demonstration of social work effectiveness.

Link Practice, Research and Evaluation

- > Social workers need to quantify outcomes of their work.
- > Applied research should be used to examine how quality social work practice is linked to the cost-benefit equation.

- > Studies should examine the roles, tasks and indicators that distinguish outcomes between social workers and paraprofessionals, and social workers and other disciplines performing the same functions.
- > Practice and policy should be integrated through the case study model and problem-based learning.
- > Additional research is needed on how effective social work interventions can lead to both long-term and short-term cost savings, reduced hospitalizations and improved person-centered outcomes.
- > Expanded research is needed to test social work interventions that can prevent adverse childhood experiences.
- > The multiple roles of social workers need to be more fully articulated.

Expand the Parameters and Approaches to Education and Training

- > Students should be educated to quantify outcomes of their practice.
- > Additional professional development (within social work education and as part of continuing education efforts) should be created so that social workers can work more effectively with persons who have chronic diseases and co-morbid conditions and their caregivers.
- > Social work education and post-degree continuing education efforts are needed to ensure that social workers' skills are current and

responsive to changing trends in services – e.g., interdisciplinary, community-based models of care.

- > Leadership training on the intersection of behavioral health care, advocacy and system change within an interprofessional context should be available.
- > BSW and MSW graduates should be connected to mentors and should be taught how to build a strong professional support system.

Engage in Policy Deliberations to Improve Practice and Service User Outcomes

- > Practitioner organizations, across disciplines, need to collaborate with each other and with government agencies at the state and federal levels.
- > As attention is paid to creation of electronic health records and development of outcome measures, social work should be at the table to ensure that psychosocial needs and interventions can be documented and measured.
- > The development of ACOs and medical homes and the focus on transitions of care provide excellent opportunities for social work to exert its leadership and its value.

> SUMMARY

As the social work profession moves forward in this era of health care reform, we need to not only promote leadership among individual social workers, but social work national organizations must also be active leaders. We need to be effective advocates with policy makers to ensure that the many roles and functions that social workers can and do perform in health and behavioral health care service delivery are recognized and are adequately reimbursed. We must also advocate for workforce development strategies to ensure a competent workforce.

In an outcome-driven world, research on social work practice and developing outcome assessment tools, and using data to inform practice and policy are extremely necessary. Disciplines, within academia, among national organizations, and at the practice level need to be engaged together to support and promote interdisciplinary practice and research. It will be essential to use the vision statement for social work and these recommendations as we move forward over the next decade.

For additional resources, including background materials provided to the *Critical Conversation* participants, visit SocialWorkPolicy.org and click on Publications.



ABOUT THE SOCIAL WORK POLICY INSTITUTE

The Social Work Policy Institute was established in 2009 and is a division of the NASW Foundation. Its mission is:

- To strengthen social work's voice in public policy deliberations.
- To inform policy-makers through the collection and dissemination of information on social work effectiveness.
- To create a forum to examine current and future issues in health care and social service delivery.

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