



On January 9, 2017, the **2017 Social Work & Health Convening *State of Our Knowledge, State of Our Training*** brought together a diverse set of participants from social work research, education, policy, and practice who are involved in building capacity of social work to address issues of health care access, quality, and cost. Specific goals of the Convening included:

- (1) To review and assess the state of social work knowledge, practice and educational in health policy and practice;
- (2) To identify emerging models of service delivery addressing social determinants of health and optimizing health and social service integration;
- (3) To contribute to ongoing effort to increase capacity of health social work to contribute to improving Nation's health.

A variety of speakers highlighted program development and advocacy efforts that aim to advance social work's presence in improving health outcomes and enhancing the healthcare system's ability to promote health. The conference agenda and speaker slides can be viewed [here](#). A brief summary of salient points from the day follows:

- **Social workers can play effective roles in improving health across the spectrum of care needs**
 - Prevention and increasing access to health care (e.g., public health campaigns, working towards economic equality and a livable minimum wage, community-based workshops and social network building, engaging people in health care after identification in other settings)
 - Outreach to improve understanding of health care and health coverage
 - Interventions based in primary care settings (typically upon referral and/or identification of risk due to presentation of symptoms, social history, mental health concerns, etc.)
 - Interventions based upon exacerbation of a health condition or specialty care needs (e.g., social worker integrated within a cancer clinic or providing transitional care supports after an emergency department visit or hospitalization)
- **Yet, defining and operationalizing role of social work in various settings remains a challenge**
 - This makes it harder for social work profession to persuade other medical professionals and policymakers of the importance of investing in social work services
 - Demonstrating social work impact difficult when wellbeing and quality of life remain hard things to measure; many social work interventions opt to identify

impact on health outcomes (e.g., pre-post test showing reduction in A1c after psychoeducation group or after participation in community-based participatory research) or on healthcare utilization (e.g., reductions in hospitalization rates)

- **Healthcare reform has provided numerous opportunities for social work to fill in gaps**
 - Medicare has run demonstration projects via the Centers for Medicare and Medicaid Services (CMMI), such as Accountable Care Organizations. Yet, practice change and organizational culture shifts take a long time and we have yet to see significant benefits.
 - Medicaid has also been a laboratory for innovation, through programs and waivers that provide linkages to social service programs (e.g., food assistance, child care), stable and safe housing, employment and job stability supports, peer and community supports, and case management.
 - While with time the system is moving toward risk-based capitated payments, new Medicare fee-for-service reimbursement codes (e.g., complex care management, behavioral health integration) are a good opportunity for social work partnership with outpatient practices to reimburse for tasks that social workers are well equipped to perform and that may create new avenues for sustainability of social work roles.
 - Despite significant progress under the Affordable Care Act since 2010, the Trump administration brings significant uncertainty in terms of access to affordable health care, coverage of mental health care, payment reform, and demonstration project funding.

- **Other themes and opportunities**
 - The increasing focus on home- and community-based services and supports offers a lot of promise, but can't be used just because they have historically been inexpensive due to exploiting frontline workers and family caregivers.
 - A coalition of social work providers that gives negotiating power to employers (e.g., managed care organizations) offers great potential in strengthening the profession.
 - The vast range of work environments that social workers work in (and corresponding interventions they provide and populations they work with) makes it difficult to succinctly define social works role and identify their impact as a profession.
 - There is a growth in the use of para-professionals or individuals without formal training (e.g., home health aids, peer support specialists, volunteers, caregivers) to do tasks that social workers have history and training for.
 - Important to keep historical context in mind: the issues we're facing aren't really new; they're likely getting attention again because we haven't effectively addressed root causes. In this vein, some of the current provider payment reforms (e.g., bundled payments) have been used in past.

- **Priorities moving forward and opportunities to watch**
 - Research priorities
 - Cost-benefit studies
 - Mixed methods studies, which analyze qualitative and quantitative data
 - Comparative research showing impact when social worker is involved vs. other staff/provider vs. no intervention

- Advocacy for social work to policymakers and funders
 - Efforts to get a consensus report on addressing social care needs (and social work's role in that) from the National Academies of Sciences, Engineering, and Medicine
- Strengthening social work training and education, as well as advancing interprofessional education and training
 - Exposure to innovative roles (e.g., beyond mental health providers and case management) via field placements and other hands-on experiences is imperative for social work to continue growing in this space
 - Need for continuing education for social workers who have been out of school for a while
 - Social work students need to have an elevator speech and should consider highlighting their skills and competencies, not just value system
 - Increasing exposure of undergraduate students to social work is an important opportunity, as some pre-medical school students who are attracted to medicine because they want to “help others” may be interested in social work
 - Need to include health information technology (e.g., electronic health record) and informatics in social work curricula
- Academic medical centers taking lead with addressing community risk factors by building on health promotions and partnership development activities to also making strategic decisions in terms of how their investment funds, procurement, and hiring practices impact the health and strength of surrounding communities

The 2017 Social Work & Health Convening was hosted by the Center for Health Administration Studies (CHAS) at the University of Chicago. Thank you to all who attended, to the speakers for sharing their expertise, and to the organizational partners who worked with CHAS to put this on!

