

Measuring Psychosocial Outcomes with the Social Work Assessment Tool (SWAT)

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- CMS requires evaluation
- Holistic focus of hospice and palliative care
- Responsibility to ensure effective care
- Justification for increasing number of social workers
 - Increased social work services leads to lower hospice costs (Reese & Raymer, 2004)

IMPORTANCE OF MEASURING PSYCHOSOCIAL OUTCOMES

- Half of the time, no documentation of psychosocial outcomes is being done (Parker Oliver, et al., 2009)
- CMS is developing measures, so far only requiring documentation of physical outcomes
- Assessment of hospice social work services has been limited to process evaluations conducted by a non-social worker
 - Not based on outcomes
 - Not based on social work research
- Social Work Assessment Tool (SWAT) was developed for this purpose

HOW ARE WE DOING ON MEASURING PSYCHOSOCIAL OUTCOMES?

- SWAT serves as a reminder to social workers about what they should be addressing
- Available on NHPCO website, along with its handbook
 - Members Only Section
- A number of hospices nationally and internationally have included the SWAT in their computerized psychosocial assessment form

USE OF THE SWAT

1. End of life decisions consistent with their religious and cultural norms
2. Patient thoughts of suicide or wanting to hasten death
3. Anxiety about death
4. Preferences about environment
5. Social support
6. Financial resources

ITEMS IN THE SWAT

7. Safety issues
8. Comfort issues
9. Complicated anticipatory grief
10. Awareness of prognosis
11. Spirituality

ITEMS IN THE SWAT

- Social worker rates patient and primary caregiver immediately after each session

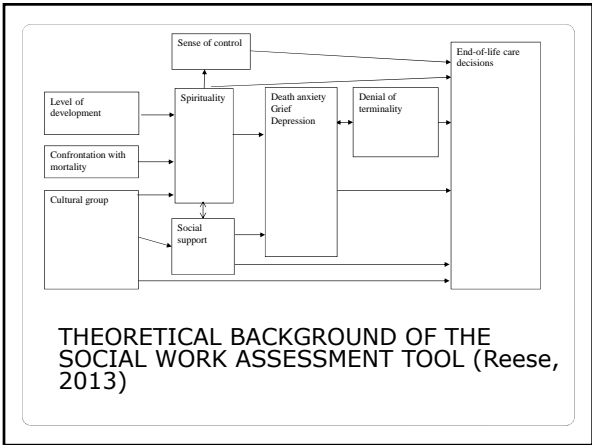
OR

- Patient and primary caregiver rate themselves
 - Patient version
 - Primary caregiver version
- Compare pre-test to post-test to document social work outcomes

USE OF THE SWAT

- SWAT is consistent with:
 - Professional organizations' articulation of the social work role in hospice and palliative care
 - *NASW Standards for Social Work Practice in Palliative and End of Life Care* (2011)
 - NCHPP Social Worker Section's *Social Work Guidelines* (2007)
 - *Pathways Document* (National Hospice and Palliative Care Organization, 1997)

DEVELOPED BY SOCIAL WORKERS



- Additional items based on the NHPCO Pathways Document (1997):
 - **Safety and comfort** issues
- Additional items based on hospice philosophy and practice wisdom:
 - **Environmental preferences**
 - **Assistance with financial resources**

ADDITIONAL ITEMS

- Testing of the path model
 - Reese, 1995-96
- End of life decisions consistent with their religious and cultural norms
 - Bullock, 2011
 - Reese, Ahern, Nair, O'Faite, & Warren, 1999
 - Reese & Beckwith, in press
 - Stark, 2011
- Suicide
 - Csikai, 2004

BASED ON SOCIAL WORK RESEARCH

- Death anxiety
 - Berzoff, 2004
 - Doka, 2011
 - Reese, 1995-96
- Social support
 - Callahan, 2013
 - Reese, 1995-96

BASED ON SOCIAL WORK RESEARCH

- Complicated anticipatory grief
 - BrintzenhofeSzoc, 2011
 - Crunkilton & Rubins, 2009
 - Walsh-Burke, 2004
- Denial
 - Blacker & Jordan, 2004
 - Reese, 2000
 - Reith & Payne, 2009

BASED ON SOCIAL WORK RESEARCH

Spirituality

- Crunkilton & Rubins, 2009
- Doka, 2011
- Reese, 2001
- Reese, 2011b
- Smith, 1995

BASED ON SOCIAL WORK RESEARCH

- The SWAT includes the major issues:
 - That should be addressed by social workers (Reese, et al., 2006)
 - That are addressed by social workers (Reese & Brown, 1997)
 - That hospice directors believe social workers are most qualified to address (Reese, 2011a)
 - That, when addressed, result in significant positive outcomes for clients (Reese, et al., 2006)

BASED ON SOCIAL WORK RESEARCH

• TESTING OF THE SWAT

- Two pilot studies and a formal study (Reese, et al., 2006)
- 19 social workers from 14 hospice and palliative care programs used the SWAT with 101 patients and 81 primary caregivers for a median of 44 days
- Significant differences in scores from pre-test to post-test
 - ($t = -2.60, df = 47, p = .01$)

BASED ON SOCIAL WORK RESEARCH

• TESTING OF THE SWAT

- Participants said the SWAT is appropriate for use with economically and culturally diverse clients
- Reliability testing of the SWAT
 - Cronbach's alpha = .80 for patient scores (n = 93) and .85 for primary caregiver scores (n = 81)

BASED ON SOCIAL WORK RESEARCH

• TESTING OF THE SWAT

- Current national study on measurement of psychosocial outcomes
 - Use of SWAT
 - Use of other tools
 - Lack of measurement of psychosocial outcomes
- Future study conducting additional testing on SWAT
 - Reliability and validity
 - Comparison of social work ratings with patient and primary caregiver ratings

BASED ON SOCIAL WORK RESEARCH

- **Case of Miss Frances**

- End of life decisions consistent with their religious and cultural norms
- Patient thoughts of suicide or wanting to hasten death
- Anxiety about death
- Preferences about environment
- Social support
- Financial resources
- Complicated anticipatory grief
- Awareness of prognosis
- Spirituality
- Safety
- Comfort

CASE EXAMPLE