

SERIOUS ILLNESS CARE PROGRAM

THE ROLE OF SOCIAL WORKERS

The Serious Illness Conversation Guide can be used by all members of the care team to have meaningful conversations with patients experiencing serious illness. This tool is designed to be used alongside the Guide. It highlights the important perspectives and skills that social workers bring to these conversations. Patients, caregivers, and the entire care team benefit from having social workers engaged in serious illness communication and care.



The Advance Care

Planning Continuum



Serious illness conversations are emotionally supportive conversations about a patient's prognosis, values, and priorities.

Social workers strengthen serious illness conversations by:

- > Facilitating effective communication between patients, their important people, and care teams
- > Assessing psychosocial functioning and barriers to patient/family-centered care
- > Identifying resource needs and referring to appropriate community supports
- > Promoting cultural humility
- > Developing clinical formulations and recommendations

APPROACHES FOR SOCIAL WORKERS TO DISCUSS PROGNOSIS

While social workers are unable to share a time-based prognosis, here are three ways they can discuss prognosis during serious illness conversations:

- 1) Ask patients how much they want to know about what may be ahead with their illness. Assure them that you will share their preferences with the rest of the care team.
- 2) Share prognoses as *anticipatory guidance*. The Guide provides two options for sharing prognosis that allow for the reality of uncertainty or getting sicker, without making a time-based prediction.
- 3) Team up with a clinician who can deliver a time-based prognosis (physician or advanced practice provider).



A CHECKLIST FOR SOCIAL WORKERS HAVING SERIOUS ILLNESS CONVERSATIONS

1 BEFORE THE CONVERSATION

- ☐ Are there family or cultural dynamics that might affect the conversation or plan of care?
- ☐ Is there advance care planning documentation available?
- □ Should any community and consult service providers be invited to the conversation?
- ☐ Are team members on the same page with respect to prognosis and recommendations?
- ☐ Are there clinical formulations the team should know about prior to the conversation?
- □ Does the patient have a trauma history?
- □ Is there an opportunity to prepare the patient for the conversation?

2 DURING THE CONVERSATION

- ☐ Use the Serious Illness Conversation Guide
- □ Discuss prognosis (see suggested approaches on page one)
- ☐ Ensure emotions are acknowledged
- □ Provide space for those close to the patient to speak

OPTIONS FOR MAKING RECOMMENDATIONS

- 1) Given what you have told me about what is important to you, I recommend we...
 - □ reach out to…medical providers, community supports, chaplain, patient advocate, etc.
 - □ invite...to your next appointment
 - □ share information (prognosis, goals, priorities, wishes) with... medical provider, community supports, chaplain, patient advocate, etc.
- 2) Based on what you have shared, I'm concerned that...
 - □ you may need more support than you are currently receiving. Would you like to talk about additional support and resources that are available?
 - □ you are experiencing...anxiety, depression, trauma.

AFTER THE CONVERSATION

- □ Would the patient/family or the care team benefit from debriefing the conversation?
- □ Does the patient or family demonstrate any significant distress?
- ☐ Are complex psychosocial dynamics impacting the patient's treatment plan?
- ☐ Would the patient benefit from legacy work? Would education be helpful?
- □ Would a conversation about completing advance care planning documentation be beneficial?