

## SOCIAL WORK PROFESSIONAL PRACTICE

**1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Handbook is issued to provide procedures for ensuring that Social Work professional practice and services to veteran patients are consistent with practice standards as defined by Social Work Service in VHA and by recognized Social Work professional organizations; and to ensure the practice and standards are addressed at each VHA facility, including Community-based Outpatient Clinics (CBOCs).

**2. SUMMARY OF MAJOR CHANGES.** This is a new VHA Handbook outlining the processes for:

a. Ensuring that essential Social Work clinical functions are provided.

b. Developing and monitoring compliance with Social Work practice standards and guidelines on documentation, workload, data entry, ethical practice and service delivery.

c. Developing a system for the review and evaluation of Social Work practice, including use of established performance improvement tools, development of quantifiable outcome measures, and benchmarking.

**3. RELATED DIRECTIVE.** VHA Directive 1010.01.

**4. RESPONSIBLE OFFICE.** The Office of Social Work Service (11SW) in the Office of Patient Care Services is responsible for the contents of this Handbook. Questions may be referred to the Director, Social Work Service at 202-273-8549.

**5. RECISSIONS.** VHA Directive 2002-029 is rescinded.

**6. RECERTIFICATION.** This VHA Handbook is scheduled for recertification on or before the last working day of July 2012.

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DISTRIBUTION: CO: E-mailed 7/11/07  
FLD: VISN, MA, DO, OC, OCRO, and 200 – E-mailed 7/11/07

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## **SOCIAL WORK PROFESSIONAL PRACTICE**

### **1. PURPOSE**

This Veterans Health Administration (VHA) Handbook provides procedures to ensure that Social Work professional practice and services to veteran patients are consistent with practice standards as defined by Social Work Service in VHA and by recognized Social Work professional organizations; and to ensure the practice and standards are addressed at each VHA facility, including Community-based Outpatient Clinics (CBOCs).

### **2. BACKGROUND**

a. VHA employs more than 4,500 masters-prepared social workers. Those hired after August 14, 1991, are required by Federal law to be licensed to practice independently. It is essential that systems and procedures be established to ensure quality Social Work practice at each VHA facility, regardless of organizational structure.

b. Where VHA facilities have been reorganized resulting in dissolution of professional departments, some social workers are not assigned to, or affiliated with, a Social Work service or department. Some have been assigned to various organizational units and report administratively to staff who are not social workers. These non-Social Work supervisors (program managers, care line managers, etc.) normally are not knowledgeable about Social Work practice and are unable to adequately support, evaluate, monitor or review Social Work practice. Therefore, this Handbook provides the procedures necessary to assist facilities in ensuring that Social Work practice issues and standards are appropriately addressed.

### **3. MISSION**

Social Work supports VHA strategic goals and performance measures and monitors through provision of a wide-range of psychosocial services based on core values and commitment to veterans and their families. Social workers are active participants in education, research, and performance improvement initiatives that help ensure VHA's continuing leadership in health care service delivery and the highest quality patient-centered health care.

### **4. SCOPE**

Social work services are an integral part of the overall VHA health care program and are provided as part of health care service delivery.

a. Social workers provide help to veterans and their families in resolving the psychosocial, emotional, and economic problems associated with the stresses of illness. Social workers bring skills in individual, group, and family treatment to the care of veteran patients as the veteran moves through the continuum of care to include but not limited to outpatient care, admission, hospitalization, post-hospital care back into the community and end of life care.

b. Social workers provide a major link between the VHA health care system and the community through the development and utilization of community resources and services in support of established treatment goals for veterans and their families. Social workers also play a key role in provision of case management services for veterans who are severely-injured or ill and those who otherwise need a case manager.

c. Comprehensive Social Work services are developed and implemented through a broad range of treatment programs offered at VHA facilities. Social workers participate fully in the planning, implementation, and evaluation of treatment programs designed for medical, surgical, rehabilitation and mental health patients, as well as for patients seen in primary and ambulatory care clinics and in community settings, including long-term care facilities. Social workers conduct psychosocial assessments as part of the initial interdisciplinary assessment, identifying psychosocial problems and stressors and developing treatment plans to address them. Social workers also typically serve as the main liaison with family members and oversee provision of caregiver assistance and family support services.

d. Social worker functional responsibilities are directed toward:

- (1) Helping patients and families cope with the crisis of illness;
- (2) Maximizing social and interpersonal functioning of patients;
- (3) Promoting vocational and social rehabilitation;
- (4) Providing education to patients and interdisciplinary team members on the psychosocial impact of illness and disease progression;
- (5) Facilitating the patient's return to the community at the highest level of functioning possible;
- (6) Working with terminally ill patients and bereaved families;
- (7) Developing special approaches to provide solutions to unique social problems;
- (8) Coordinating discharge planning, including providing information and referral services and accessing and coordinating community resources and services; and
- (9) Providing comprehensive case management services.

e. Clinical social workers conduct behavioral health and mental health assessments, make Diagnostic and Statistical Manual of Mental Disorders (DSM)-IV diagnoses, create behavioral health and mental health treatment plans, and offer psychotherapeutic and counseling services.

## **5. RESPONSIBILITIES OF THE FACILITY DIRECTOR**

Each VA Medical Center Director is responsible for:

a. Designating a Social Work leader to serve as Social Work Executive for the facility. The Social Work Executive is the liaison with other Services or care lines, other facilities, Veterans Integrated Service Network (VISN) offices, and VA Central Office.

(1) In medical centers with a centralized Social Work service or department, the Chief, Social Work Service functions as the Social Work Executive.

(2) At facilities without a centralized Social Work service or department, the Social Work Executive serves as the Social Work professional practice consultant and as the contact point for the Office of Social Work Service, VA Central Office.

b. Ensuring the Social Work Executive is an experienced social worker, recognized by VHA as an independent practitioner who can demonstrate ability in managing and evaluating programs, developing policy, and developing staff.

c. Ensuring the amount of designated time (.5 to 1.0 Full-time Equivalent (FTE)) and the General Schedule (GS) grades for the position reflect the complexity and scope of responsibility inherent in the oversight of professional health care delivery by social workers (i.e., GS-12 through GS-14).

d. Ensuring the Social Work Executive functions are incorporated into the incumbent's position description, and the amount of time allocated to these duties is specified.

e. Ensuring that Care Line Managers and Program Managers consult with the Social Work Executive on questions of Social Work practice.

f. Ensuring that all facility social workers have access to Microsoft (MS) Outlook or MS Exchange electronic mail systems.

## 6. RESPONSIBILITIES OF THE SOCIAL WORK EXECUTIVE

The Social Work Executive is responsible for:

a. **Social Work Practice.** Social Work Practice includes:

(1) Providing consultation to medical center leadership on implementation of special VHA programs in Transition Assistance and Care Management of Operating Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) Veterans Handbook 1010.01, dated March 23, 2007.

(2) Providing consultation to social workers and other staff on Social Work practice issues.

(3) Ensuring that the following social work functions are performed:

(a) Case management services for veterans at high medical and/or social risk.

(b) Case management services for chronic and/or seriously mentally ill veterans.

- (c) Psychosocial screening, assessment, planning, and intervention.
- (d) Pre-admission planning and admission diversion services.
- (e) Discharge planning and coordination.
- (f) Coordination of community-based services, including information and referral.
- (g) Community liaison and networking services.
- (h) Case finding and outreach services.
- (i) Crisis intervention services.
- (j) Professional consultation.
- (k) Coordination of family conferences and liaison with family members.
- (l) Patient and family education.

(4) Establishing a Social Work professional practice council to work with the Social Work Executive on oversight of practice functions. While this council does not have supervisory authority for social workers, it does need to have authority and responsibility for defining and reviewing the professional practice of social workers within the facility.

b. **Standards of Practice.** Standards of Practice include:

- (1) Developing and monitoring compliance with Social Work practice standards and guidelines on documentation, workload, data entry, ethical practice, and service delivery.
- (2) Participating in the oversight of facility Social Work clinical privileging or scope of practice processes.
- (3) Tracking, in collaboration with Human Resources or other office responsible for credentialing, required licensure and/or certification for all social workers, including: continuing education requirements, license renewal, and other requirements social workers must meet to deliver appropriate care.
- (4) Assisting with credentialing and primary source verification of degree and license or state certification.
- (5) Ensuring that unlicensed social workers have access to clinical supervision for licensure and/or certification from a licensed social worker.

c. **Professional Recruitment and Retention.** Professional recruitment and retention include:

(1) Recruiting qualified social workers, to include participating in interviewing, selection, and orientation.

(2) Overseeing orientation with new clinical staff regarding Social Work functions.

(3) Providing recommendations to the approving official for Social Work Professional Standards Board membership at the facility and Network levels.

(4) Serving as approving official for Social Work Professional Standards Board actions, if delegated by the medical center Director.

d. **Education and Career Development.** Education and career development include:

(1) Assessing the continuing education requirements of social workers and developing plans for meeting the educational requirements for licensure and clinical practice.

(2) Providing opportunities for professional continuing education through journal clubs, case presentations, workshops, and conferences.

(3) Participating in oversight of the Social Work Associated Health Trainee Program, including:

(a) Participating in negotiation of Memoranda of Affiliation with schools of social work and requesting trainee positions through the Office of Academic Affiliations;

(b) Selecting and training social workers to serve as field faculty (field instructors and preceptors); and

(c) Ensuring that Social Work graduate student interns receive education and training consistent with the requirements of the affiliated school(s) of social work and with the Council on Social Work Education (CSWE).

e. **Competency and Performance.** Competency and performance include:

(1) Developing and implementing a Social Work professional practice review system.

(2) Assessing the competency of each social worker.

(3) Participating in the development of position descriptions or functional statements and performance standards for social workers that ensure VHA meets/exceeds current VHA performance measures.

(4) Participating in, and providing input into, the performance appraisals of social workers.

(5) Mediating professional and service line conflicts around Social Work professional roles, continuity of care, and quality of care, including referral of veterans across service or care lines during episodes of care.

(6) Consulting with other Services, program managers, or care line managers on issues pertaining to Social Work ethics, ethical dilemmas in the delivery of care, and ethical issues within the larger organization.

f. **Risk Management.** Risk management includes:

(1) Ensuring compliance with the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and Commission on Accreditation of Rehabilitation Facilities (CARF) standards applicable to Social Work.

(2) Evaluating and assessing facility Social Work services and providing input to improve professional Social Work practice.

(3) Developing and implementing Social Work practice guidelines to streamline operations and increase the likelihood of positive patient outcomes to Social Work interventions.

(4) Developing a system for the review and evaluation of Social Work practice, including use of established performance improvement tools, development of quantifiable outcome measures, and benchmarking.

(5) Supporting Social Work research and program evaluation activities.

(6) Providing education and consultation to VA staff, veterans and their families, and staff of non-VA organizations regarding Social Work practice standards, the range of services provided by VA social workers, and Social Work professional roles and responsibilities (such as reporting suspected abuse and neglect).

g. **Resource Management.** Resource management includes:

(1) Establishing and monitoring Social Work productivity standards.

(2) Re-deploying or participating in decisions to re-deploy Social Work staffing resources based on patient need, productivity, and workload.

(3) Planning, and/or participating in planning, for optimal Social Work coverage in all program areas, including after-hours coverage, in conjunction with care line and program managers.

(4) Reviewing and resolving complaints about social workers and their practice. **NOTE:** *This function must include consultation with care line managers.*

(5) Validating and consulting on Decision Support System (DSS) labor mapping and Cost Distribution Reports (CDR) for social workers.

(6) Developing procedures for the coordination of Social Work services and deployment of social workers during disasters and emergency situations.

(7) Overseeing, and/or providing, the coordination and assignment of Social Work staff during disasters and emergencies, when indicated.

(8) Disseminating information pertinent to social worker practice at the facility. *NOTE: Whether this information is received from VA Central Office or other sources.*

## **7. RESPONSIBILITIES OF THE OFFICE OF SOCIAL WORK, CENTRAL OFFICE**

The Office of Social Work Service in VA Central Office is responsible for:

- a. Providing consultation on Social Work practice issues and assisting facilities in developing methods for adequately addressing these issues.
- b. Conducting site visits to assist facilities in resolving problems with the practice of Social Work.
- c. Complying with standards defined by accrediting organizations, such as TJC and CARF, and with Social Work professional practice standards developed by recognized Social Work organizations, such as the Council on Social Work Education (CSWE), the National Association of Social Workers (NASW), and the Society of Social Work Leadership in Healthcare (SSWLHC).
- d. Providing information and guidance using Outlook e-mail to Social Work Chiefs and Executives. All VHA social workers need information pertaining to Social Work practice and the ability to communicate easily with Social Work peers across VHA. The Social Work Executive from each facility must be included in the Social Work Managers mail group on Outlook.

## **8. REFERENCES**

- a. M-2, Part XII, Chapter 3.
- b. Veterans Benefits and Health Care Improvement Act of 2000, Public Law 106-419, Section 205.