A Fellowship in Pediatric Palliative Care: A qualitative study of social workers participating in an interdisciplinary fellowship program

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Objectives:

- Participants will leave with an understanding of the evolution of the first Pediatric Palliative Care Fellowship for Social workers.
- Participants will be able to provide examples of how this fellowship program influenced the social worker’s professional identity as social workers.
- Participants will be able to articulate the skills gained in the fellowship and how these influence future leadership roles taken on by PACT fellows.
Background: How do palliative care SWs learn?

- Developing interest in training palliative care social workers as specialty providers
- Evolving consensus regarding knowledge base, competencies, and skills in palliative social work (Gwyther et al. 2005)
- Differing approaches for best pedagogical strategies (Walsh-Burke & Csikai 2005)
- Mentorship and hands-on training as essential components (Gardener et al. 2015)
- Demand for Palliative SW increasing, though few formal opportunities for specific palliative/EOL training (Sumser et al. 2015)
The Pediatric Advanced Care Team (PACT)

Interdisciplinary consult service

- Core: MDs, NPs, SWs
- Committee: nursing, chaplaincy, child life, parent reps
- Fellowship class

Key activities:

- Clinical care - Interdisciplinary/Anywhere any time
  - Focus on four main areas:
    - Pain and Symptom Management
    - Communication
    - Complex decision making
    - Quality of Life

- Research
- Training
Current PACT SW Fellowship

- Bereavement program
  - HOPE Bereavement Group
  - Bereavement mailings

- Academic projects
  - Quality improvement project
  - Grand Rounds
  - Journal club presentation
  - Submission for academic presentation (i.e. SWHPN, AAHPM)

- SW Supervision and interdisciplinary mentorship
Qualitative Study

Purpose

To broadly explore the *experience* of social workers who were involved in a well-established interdisciplinary fellowship program.

Research Questions

1) How do social workers describe the effect this fellowship had on them?
2) What aspects of the fellowship were the most significant in their learning?
3) How did the interdisciplinary nature of this fellowship impact their experience?
Methods and Analysis

- **Semi-structured 60 minute interviews:**
  - 11 previous PACT fellows were a recruitment email.
  - 10 alumni interviewed: 9 women, 1 man

Analysis

- **Braun and Clark Thematic Analysis**
  - Between cases (#of times mentioned by 10 participants)
  - Within each case
    - Developed summaries of each person
Why do social workers attend this fellowship?

- 4 knew they wanted to be a medical social worker and wanted to gain skills in palliative care, but did not expect to become a palliative care social worker.

- 4 thought they wanted to be a palliative care social worker for their career and wanted to gain skills and see if it was right for them.

- 2 knew this was their career path wanted to launch career and build connections.
Participants

- 9 of the 10 fellows work in Pediatric Palliative Care, many hold leadership positions.
- 8 of the 10 teach others formally in their jobs.

Range of jobs by job title

- Social worker for first pediatric inpatient hospice in the US
- Inpatient Palliative Care Social worker (Children’s hospitals) (5 held this position)
- Bereavement Director at a Hospice Agency
- Director of Pediatric Palliative care at a home health agency
- Social worker at first DPH Pediatric Home hospice program
- Director of Support Services at a Hospice agency
- Supervisor at Boston Healthcare for the Homeless
- Project Manager Partners in Health- International Palliative Care Initiative
How do the fellows describe their experience of the fellowship?

“I think PACT was the most formative clinical training that I have received and I feel like its really created the foundation for the work that I do now. It was a tough year and there were some challenges, but I think overall it was an incredible experience.” Alumni 13

“I think it changed, it totally changed me. I think that was the thing that surprised me the most is I went into it knowing it would change how I practice as a clinician going forward, I don't think I realized how much it would change me as a person.” Alumni 09
What did they gain?

Confidence

• 8 of the 10 social workers cited that the fellowship helped them gain confidence in their skills

“..it's given me a lot of confidence to advocate in ways that I don't think I really would've known was possible until the fellowship” Alumni 9

“..the fellowship awoke in my an interest in being a part of things like research or academic teaching in the future. And that's not something I'd ever really thought about before. I just thought about being a social worker and being a clinician. And getting the opportunity to do stuff at AAHPM, grand rounds, that was empowering and exciting. It felt like, "Oh, I can do this too. This isn't simply just for the medical folks. We have a voice to show for the future of research and education.” Alumni 16
**Communication Skills**

- Skills to work with families
- Ways to advocate with other medical professionals
- How to “listen with different ears”
- How to “be emphatically bold in conversations”
- How to teach others, present at conferences, facilitate family meetings

“I think I am a stronger, better social worker because of that year... I can see how I built a lot of skills and I have a comfort talking about really challenging subjects and sitting with people in some of the worst moments of their lives. That is really valuable as a social worker in a variety of places.” ALUMNI 12
Defined them professionally, personally

“I feel really really grateful because I think it's really changed the trajectory of where my whole practice and career is going.” Alumni 14

“I think it solidified that this is the kind of social worker that I am....it just made me feel more secure in myself too.. and there's a lot of things in my life that led to me going into this field and being in the fellowship - I think I just feel like all of the pieces of myself are a bit more together now.” Alumni 16

“And to me, just being able to learn how to bear witness to these children, their families and their process. There is so much love that's there, and to see the things that are possible even when faced with life ending illnesses was really humbling. It has really played a huge role in my practice, moving forward.” ALUMNI 6
Finding their Voice:
Learning their role and value as social workers

Being on a interdisciplinary team forced/encouraged social workers to fully define their role and develop their own voice that led to their professional identity development.

“It really taught me the value of having a social worker on the interdisciplinary team and what we bring... it totally changed the way that I viewed the voice of the social worker in that I think in a lot of hospital systems...social workers get quieted.

It taught me that the social worker's voice is really important and should be valued... it shaped me to have the confidence to pipe up even if I don't necessarily agree with that's being said-- obviously there's a way to disagree in a good way, right?”

Alumni 15
“But the truth is, that it's nearly a decade later and I feel like there isn't anything that I couldn't reach out to them [PACT team] or at any point be in Boston, and stop by, and not feel like a part of that team. And I don't think that there are very many things in life that create that kind of bond...it's just such a unique group of people that I'm eternally grateful that I'm connected to such an amazing community”

Alumni 9
Fellow experiences and emerging leadership

- Enhancing confidence in clinical skills and academics
- Developing, practicing, and teaching higher-level communication strategies
- Building professional identities while solidifying sense of role, value, and self
- Providing an environment of supportive, though highly individualized and independent, post-graduate education
- Creating formal and informal networks and connections to larger palliative care world
Implications on curriculum

- Extending and aligning SW fellowship year with medical academic year
- Incorporating SW Fellow into larger Fellowship Curriculum
- Increased incorporation of SW in academic projects
- Clinical supervision offered outside of PACT
- Intentional, dedicated IDT mentorship
- Formalized development of educational milestone tool

*Larger presence and role of SW on interdisciplinary faculty and education of palliative care clinicians*

- Social workers as palliative care educators
Conclusions

Post-graduate interdisciplinary training (*rooted in the tradition of social work experiential learning*)...

- Allows social workers to develop a stronger professional palliative identity while further defining their role and individual voice

- Helps create leaders in palliative care—further contributing to the visibility of social workers as key players in this field

- Provides a foundational basis for developing more opportunities for this type of training
Questions?
Assumed themes of a fellowship

- Layers of training
  - Larger palliative care didactic curriculum
  - Pediatric specific training
  - Social work training: clinical experience, observation, and supervision
  - Mentorship: both SW and interprofessional
- Independent clinical practice: primary palliative social work across the palliative life-cycle
- The individualized learning experience
- The integration of bereavement throughout
- Creating palliative care leaders
What aspects of the fellowship did you get the most from?

Codes- LEARNING

• Supervision
  • Documentation
• Research/Presentation Skills
• Hospital Systems
• Interdisciplinary team work
• Clinical Skills
  • Communication
  • Listening
  • Advocacy
  • Difficult decision making
  • Assessment
  • Family Meetings
  • Bereavement support/Groups

• How? Supervision, Role Models on the team, seeing people do it wrong, making mistakes
Professional Identity Development

There is a process of socialization through which professional identity is formed:

**Personal Domain**
- **Existing personal identities**
  - "Who you are"
  - Genes
  - Sex/Race
  - Personal characteristics
  - Experiences
  - Religion/Culture
  - Class
  - Education
  - Sexual orientation
  - Other

**Relational Domain**
- **Socialization**
  - Negotiation
  - Acceptance
  - Compromise
  - Rejection

**Collective Domain**
- **Personal & professional identities**
  - "Who you become"
  - Student
  - Resident
  - Physician

**Legitimate peripheral participation**
- Community of practice
- Social interaction
- Full participation