



Social Work in Integrated Primary Care: A Systematic Review

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Background: In conjunction with other legislation, the Patient Protection and Affordable Care Act (ACA) is transforming medical care in the United States. The ACA is seeking to improve patient and population health outcomes while lowering costs. One mechanism is to incentivize the use of interprofessional health teams in primary and specialty care settings. These changes require reconfiguring and strengthening the capabilities of the healthcare workforce. This includes building the capacity of the workforce to focus on both the physical and social determinants of health^{1,2}. Social workers are increasingly being hired to assist in integrated health care settings because their services are crucial in addressing the social determinants of health, which often interfere with treatment uptake and adherence³. The purpose of this work was to better define the functions of social workers in integrated care delivery models. To do this, we examined the activities of social workers in randomized controlled trials (RCTs) in which behavioral and physical healthcare were integrated and provided by interprofessional health care teams.

Methods: We conducted a systematic review of RCTs in which social workers were, in collaboration with other members of the health care team, the intervention agents in providing integrated health care. The primary focus of the systematic review was to identify the roles and functions performed by social workers in integrated settings. A secondary aim was to identify the effectiveness of the interventions, where effectiveness was measured by patients' physical and behavioral health outcomes, health care utilization rates, and costs of care. Two independent researchers conducted the literature search, screened citations, and extracted data from the studies. The review was limited to peer-reviewed studies, written in the English language, and published between 2000 and 2016. Nine bibliographic databases were searched using terms developed in collaboration with a reference librarian and experts in the field. In total, 502 citations were retrieved. After screening the abstracts, 107 were retained for a full-text review. Of these, 32 reports from 26 RCTs met study criteria. Data from the 26 RCTs were extracted using standardized tables and included details of the study method, intervention, social worker role and function, and study outcomes. Any disagreements in extraction were resolved through consensus and consultation with a third reviewer.

Conclusions and Policy Implications

- 1) The systematic literature review revealed three primary roles for social workers in integrated health care:
 - behavioral health specialists;
 - care managers;
 - a referral role.
- 2) The 26 RCTs indicated that compared to usual care, integrated care provided by interprofessional teams that included social work, improved both the behavioral and physical health of patients without increasing the cost of care.
- 3) The strongest evidence of this benefit was found for behavioral health outcomes for patients reporting depression and anxiety.
- 4) Social workers on interprofessional teams are improving patient health outcomes by addressing service utilization, resource needs, and functional quality of life that may mitigate barriers caused by negative social determinants of health.
- 5) Findings from these 26 studies reveal that team based health care (inclusive of social workers) is one of the building blocks that can transform our healthcare system to better address population health.

Findings: In the 26 RCTs, social workers performed three primary functions. First, as *behavioral health specialists*, social workers provided behavioral health treatment for patients with mental health, substance use, and other behavioral health disorders. Second, as *care managers/behavioral health care managers*, social workers managed the care of patients with chronic conditions and (sometimes in collaboration with nurses) monitored care plans, assessed treatment progress, consulted with primary care physicians, and provided brief behavioral health interventions. Third, social workers acted in a *referral role*, connecting patients to community resources when social determinants of health threatened or compromised treatment uptake and adherence. In this referral role, social workers often directly contacted agencies to secure resources (e.g., housing, transportation) for patients. Most often social workers were performing more than one of these 3 functions at the same time. The combination of functions could be considered the social worker's role on the team based on needs of the organization and patient population. These 26 RCTs indicated that when compared to usual care, integrated care provided by interprofessional teams with social workers as team members improved both behavioral and physical health of patients without increasing the overall cost of care. Findings supported use of integrated care with social workers across several populations including children, adults with chronic illness and behavioral health needs, and older adults. The review identified the strongest evidence for the treatment of depression and anxiety in integrated primary care settings.

Results suggest that social workers fulfill a variety of tasks in integrated care across a range of health care settings. Social workers collaborate with other health care professionals in frequent – often short – meetings related to patient plans of care. They use standardized screening tools to assess the physical and behavioral health of patients. In addition, social workers provide metrics-based treatment for mental health and substance use problems, and they provide psychoeducational training and use brief problem-solving interventions to help patients engage in treatment, prevent relapse, and manage chronic conditions. Finally, they assist patients in securing housing, food, transportation, and other community resources.

Conclusion/Policy Implications: Three core functions define the scope of practice for social workers in integrated care: 1) providing clinical interventions for patients with behavioral health problems; 2) managing care plans for patients with chronic conditions; and 3) engaging community resources on behalf of patients. To promote treatment uptake and ensure follow through, the coordination of health and community services is now gaining traction as payment and care delivery models emphasize these boundary-spanning functions, which help to keep patients healthy while continuing to live in their homes and communities⁴. In summary, social workers on interprofessional healthcare teams are improving patient health outcomes by helping mitigate barriers caused by negative social determinants of health—without increasing costs. Findings from these 26 studies reveal that team based health care inclusive of social work is one of the building blocks that can transform our healthcare system to better address population health.

References

- ¹ Andrews CM, Darnell JS, McBride TD, Gehlert S. Social work and implementation of the Affordable Care Act. *Health & Social Work*. 2013; 38(2): 67-71. doi:10.1093/hsw/hlt002
- ² National Association of Deans and Directors Schools of Social Work. A behavioral health disparities curriculum infusion initiative: Eliminating behavioral health disparities for racial and ethnic minority populations. Rockville, MD: U.S. Department of Health and Human Services. 2012. Retrieved from <http://www.naddssw.org/pages/wp-content/uploads/2010/07/FinalReport-ConsensusStatementsRecommendations.pdf>.
- ³ Wilkinson R, Marmot M. (Eds.) *Social determinants of health: The solid facts* (2nd ed.). Copenhagen: World Health Organization. 2003. Retrieved from <http://www.euro.who.int/document/e81384.pdf>.
- ⁴ Fraher EP, Ricketts TC. Building a value-based workforce in North Carolina. *North Carolina Medical Journal*. 2016; 77(2): 94-98. doi:10.18043/ncm.77.2.94