

# Using a Latent Class Approach to Better Understand Social Work Roles in Integrated Health Settings

Brianna M. Lombardi, PhD, MSW; Erica L. Richman, PhD, MSW; Lisa de Saxe Zerden, PhD, MSW

Cecil G. Sheps Center for Health Services Research & School of Social Work, University of North Carolina at Chapel Hill

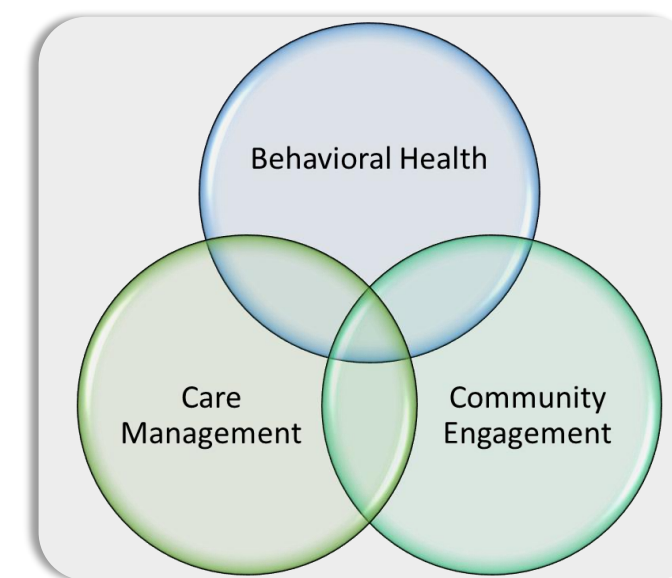
## Introduction and Study Aims

### Background:

- The social work workforce is deployed in healthcare to address complex patient needs, behavioral health & SDOH
- BLS estimated 20% growth of social workers in healthcare by 2022<sup>1</sup>
- HRSA Behavioral Health Workforce Education & Training Grant (BHWET, 2014/7) funded 75+ Schools of Social Work

### Initial Work and Pilot Study:

- Systematic review of RCTs in primary care where social workers were part of integrated care teams<sup>2</sup>
- 21 MSW students & their 21 supervisors in the BHWET program were surveyed to identify most used tasks and functions in integrated settings.<sup>3</sup>



### Aims:

- Are there meaningful classes of social work roles in integrated healthcare settings?
- What characterizes the classes of social work roles?

## Methods, Analysis, and Basic Results

### Survey:

- An electronic survey was developed, piloted, and administered to a convenience sample of MSW students and field instructors from 62 Schools of Social Work that received HRSA BHWET Grant
- Survey focused on how often respondents engaged in 24 tasks, functions, & interventions as well as info on patient populations, settings and elements of integration

### Analyses:

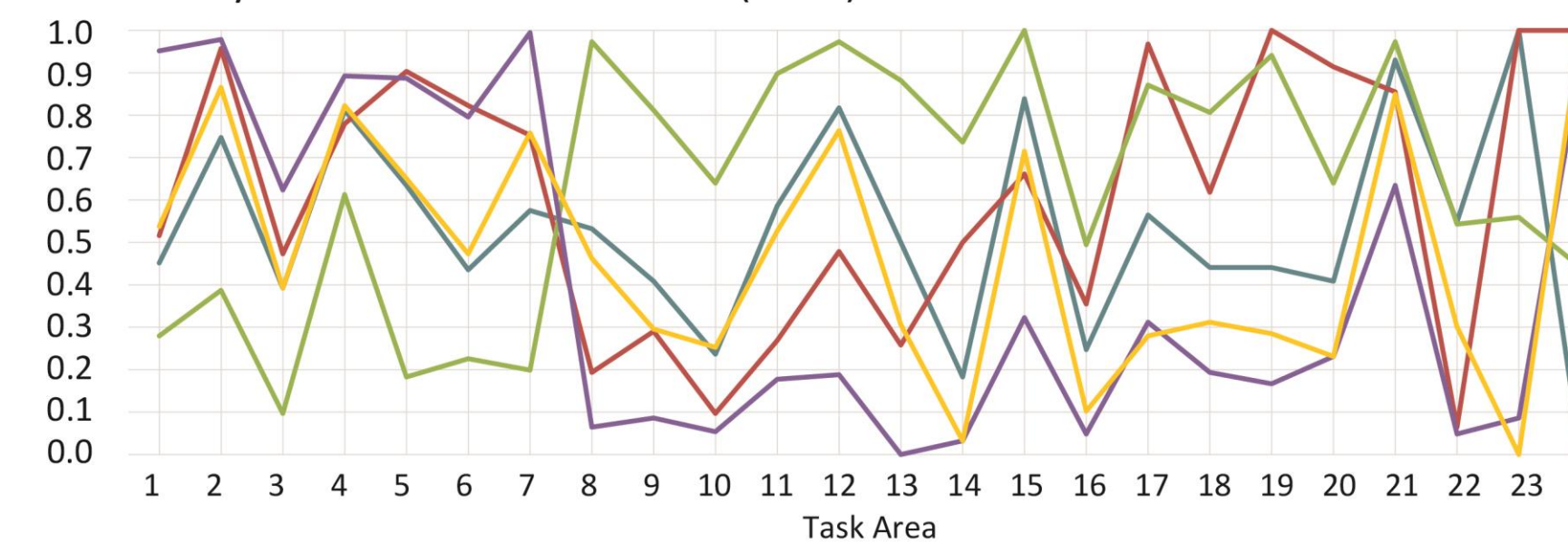
- Descriptive Statistics
- Evaluation of Task use/frequency
- Latent Class Analysis – to distinguish meaningful classes of healthcare social workers

Social workers used 15 (SD=5.9) skills at least weekly			
Task	MSW Students	Field Instructors	All
	%	%	%
Team Based Care**	80%	91%	83%
Motivational Interviewing (MI)**	77%	91%	82%
Psychoeducation	82%	79%	81%
Address SDOH	81%	78%	80%
Adapt to Culture	77%	84%	80%
Facilitate Team Communication***	70%	91%	77%
Psychosocial Assessments**	73%	86%	77%

## Results

- Classes varied by: student/supervisor, setting, type of patients served
- 5 class solution had best model fit (AIC & BIC)
- Y-axis is probability that they use this skill at least weekly (0.8 = 80% probability this is used weekly or more)

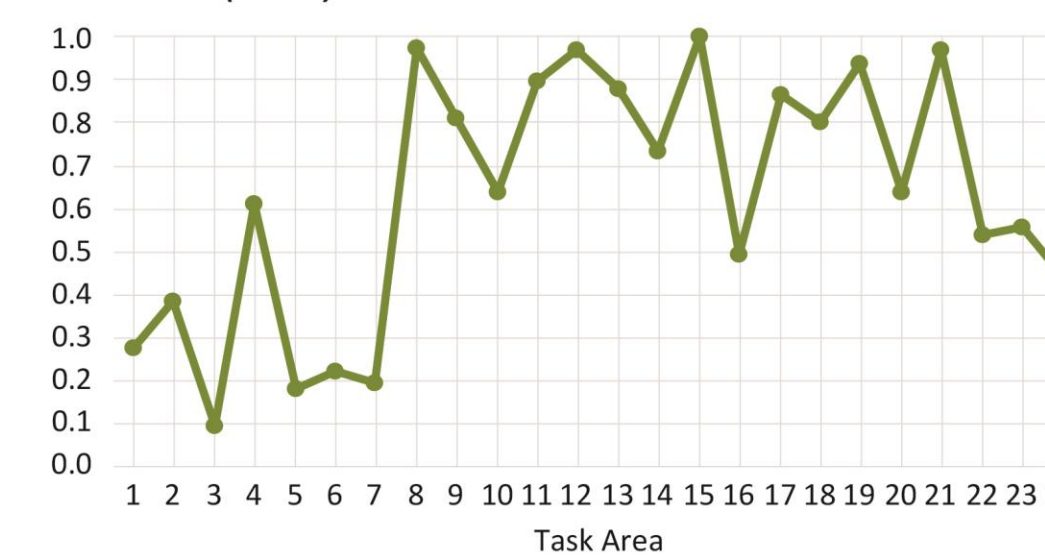
Probability of Each Social Work Role (Class) to Perform Task Areas Each Week



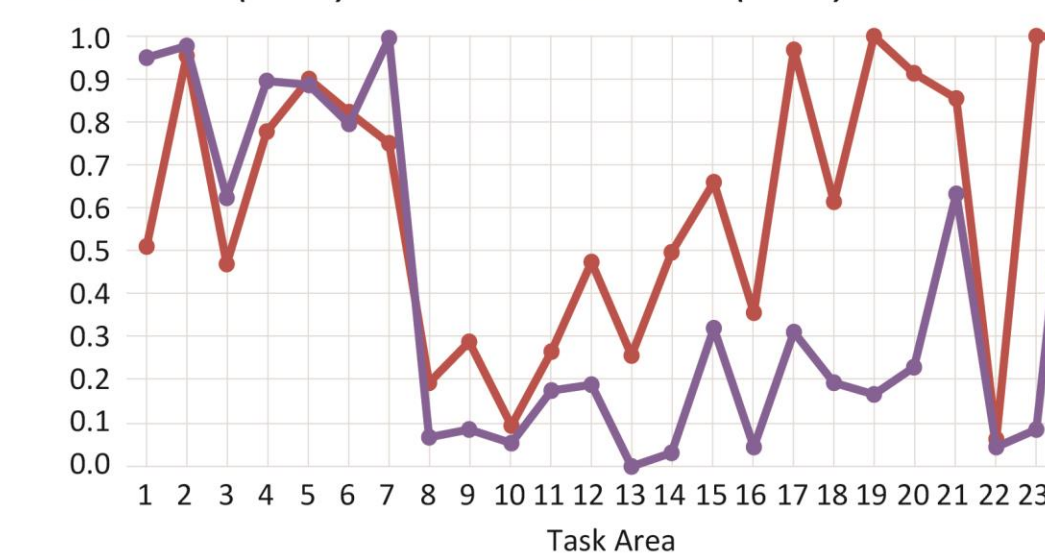
Task Areas (X-Axis)

- Standardized Assessment
- Team Based Care
- Functional Assessment of Daily Living
- Psycho-Social Assessments
- Care Management
- Patient Navigation
- Contribute to Patient Care Plan
- Treatment Team Meeting
- Facilitate Communication Among Team
- Huddle
- Warm Handoff
- Patient Education
- Psycho-Education
- Medication Management
- Motivational Interviewing
- Behavioral Activation
- Problem Solving Therapy
- Cognitive Behavioral Therapy
- Relaxation Training
- SBIRT
- Electronic Health Record
- Addressing Social Determinants of Health
- Adapt Services to be Culturally Inclusive
- Linking to Community Resources

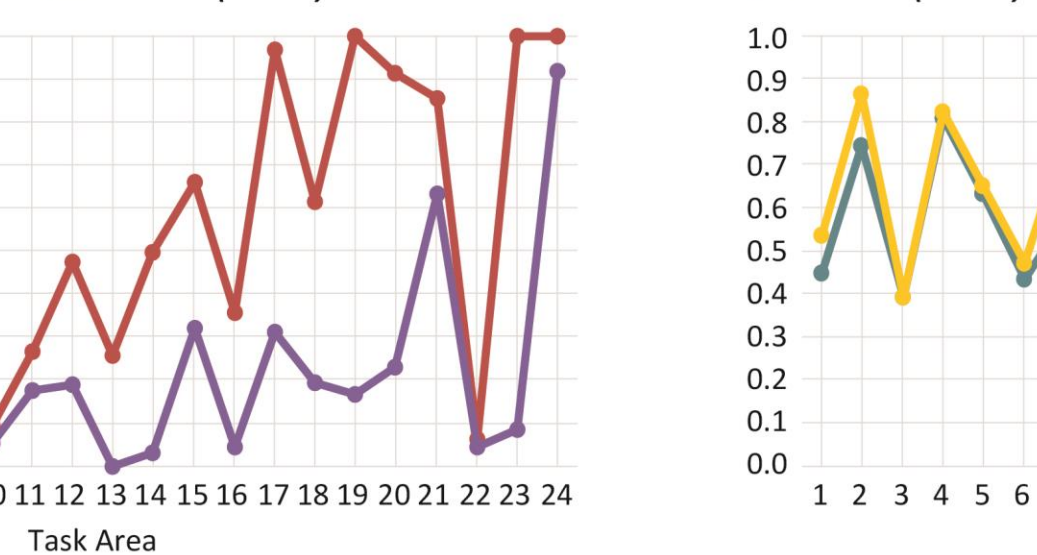
Class 3:  
Behavioral Health Specialist  
n=44 (12%)



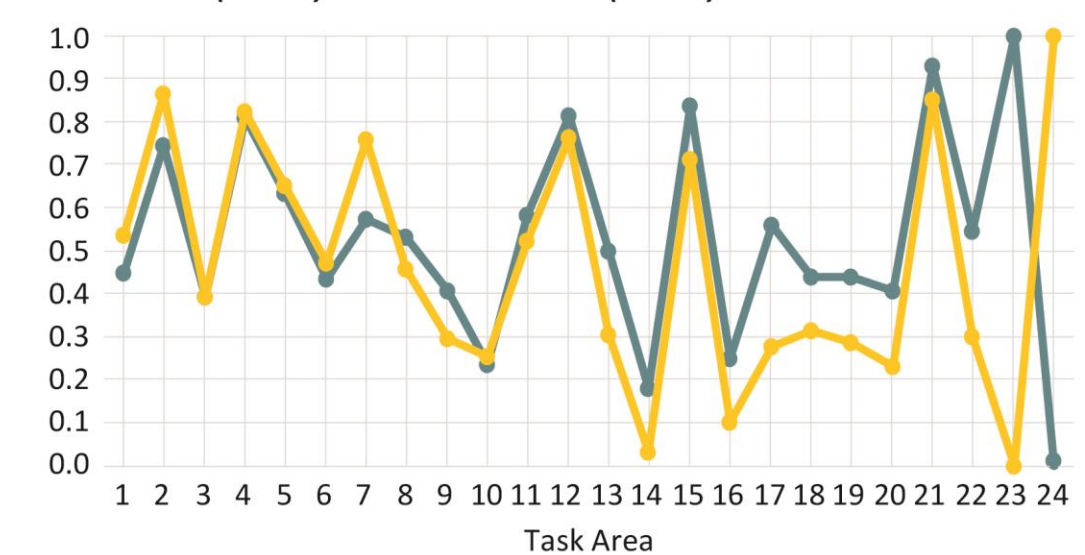
Class 2:  
Flexible SWs  
n=49 (13%)



Class 4: Care Manager  
(High Intake/Referral)  
n=88 (24%)



Class 1:  
Diffuse/Hybrid  
n=41 (11%)



Class 5: High Linking/Patient Ed/  
Motivational Interviewing  
n=150 (40%)

## Limitations, Conclusions, & Implications

- Social work roles are heterogeneous and at times diffuse, but were more complex than expected
- Setting and patient needs characterize classes, but the direction of the relationship is unclear
- Study highlights the limitation of blanket approach to research, practice, and policy recommendations for ALL social workers
- Scope of social work double-edged: Highly flexible to meet the unique needs of patients and team but also high opportunity for role confusion
- Reimbursement, Licensure, and Education Considerations