Palliative care addresses the suffering and stress associated with a serious medical condition. These services are generally covered by insurance and available in hospitals, clinics, and community settings to people of any age, and any stage of illness. Palliative care teams are specially trained professionals who support the whole person – mind, body, and spirit. This collaborative approach is essential for the provision of person- and family-centered, culturally congruent, quality care, and is key to better health.

Palliative social workers promote health and enhance hope by providing individualized support, education, and counseling to patients and families by:

- Completing biopsychosocial-spiritual assessments to identify strengths and resource needs
- Providing evidence-informed interventions to enhance coping and well-being
- Navigating complex healthcare systems
- Facilitating family meetings to aid in understanding illness and treatment decisions
- Leading advance care planning conversations
- Coordinating care across settings
- Advocating for policies that improve services
- Addressing social drivers of health and other barriers to care

Palliative social workers enable healthcare providers to focus on what they do best, while working to ensure that people get what is needed to manage their health. Committed to social justice, social workers improve healthcare outcomes by aligning treatments to patient needs and preferences which can reduce unnecessary expenditures and overtreatment, increase patient satisfaction, and minimize healthcare disparities.

Palliative Social Work in Action:
Maria (age 6) is a cancer patient. Her family is devastated by Maria’s diagnosis and hospitalizations, and strains to balance appointments with work. While other healthcare team members manage Maria’s pain and medical treatments, the social worker assists her family with concrete needs and offers support as they cope. The social worker plans seamless care transitions with Maria’s medical team and links the family to resources for improved access to care. Throughout treatment, the social worker continues to aid Maria’s family with physical, social, emotional, financial, and spiritual concerns. After several years, Maria’s cancer recurs, and the social worker organizes her referral to hospice. Upon Maria’s passing, the social worker supports Maria’s medical team as they, too, express grief.

References:

Join the movement to elevate and expand social work’s impact in improving our nation’s health: www.chasci.org/cswh

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