



Title: (2021) Opening Keynote: Anticipating and Addressing the Behavioral Health Impacts of COVID-19: Implications for Cancer and Community Care

Date: Wednesday, 6/9/2021

Time: 12:00pm - 1:00pm ET

Presenter: Susan Hedlund, MSW, LCSW, OSW-C, FAOSW

Abstract Summary:

COVID-19 has presented unprecedented challenges both nationally and internationally. As a pandemic, there continues to exist great unknowns and uncertainty which has resulted in fear, anxiety, depression and in some cases heightened risk of suicide. The encouragement of social isolation has further complicated the mental health impact of the virus. Additionally, COVID-19 has disproportionately affected persons of color, further highlighting health disparities in the U.S (SAMSHA, 2020). The University of Washington forecasts that the impact will last between 12- 14 months, and may be further complicated by potential COVID spikes (Univ. WA, 2020). A recent study conducted by the Center for Disease Control of 5,000 U.S. adults in June suggested that 40% had experienced a mental or behavioral health condition related to COVID-19 (CDC, 2020). Another study conducted by the Commonwealth Fund suggests that Americans are doing worse psychologically due to COVID-19 compared to other high income countries (Williams, et al, 2020). Rates of depression are forecast to be much higher in the general population (30-60%) due to the chronic and ongoing social and economic disruption as a result of COVID-19. Additionally, suicide rates are influenced by unemployment rates (Phillips, 2014). According to the University of Washington's Forecast, the "disillusionment phase" is anticipated to peak in the Fall of 2020 and Winter of 2021. It is described as the "trauma cascade" which results in higher rates of depression, suicide and substance abuse. Cancer patients are also affected by the pandemic. Many hospitals and treatment settings have modified their operations and/or postponed treatment as a result of COVID-19 (NCCN,2020) Some patients indicate that they are fearful about coming for care and risk being exposed to COVID-19 (JCO, 2020). Some have indicated that they would rather risk dying of cancer than of COVID. Health care workers and First Responders are at particular risk for experiencing stress, PTSD, and other psychological symptoms (Annals, 2020, CDC,2020). Understanding the phases of adaptation and recognizing populations at risk may help social workers and mental health providers anticipate and plan for intervention strategies. This presentation will address the emerging behavioral health impacts of COVID-19. The impact of the pandemic on cancer care as well as identifying populations at risk for greater distress will be considered as well as proactive intervention strategies. Resilience and strategies to improve coping for both patients as well as health care providers will be outlined. Psychological First Aid, Brief Supportive Therapy, the cultivation of resilience and meaning will be included in this presentation.

Learning Objectives:

1. Discuss the mental/behavioral health impacts of the Coronavirus Pandemic for both those with the infection and those affected.
2. Describe best practices for clinical interventions and strategies to proactively assist vulnerable and at risk people, especially those affected by cancer.
3. Integrate established and valid clinical and concrete disaster responses for COVID patients, caregivers, and at risk health care workers.

Course Designation: Clinical

Level: Intermediate

Keywords: Clinical Practice/Skill Building, Specialized Needs



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Title: (2021) Implementation of Oncology Social Work Intervention Index Practice Version: Issues Faced, Barriers Overcome, Benefits Experienced After a Year in Practice

Date: Wednesday, 6/9/2021

Time: 1:15 - 2:15pm ET

Presenter: Alison Snow, PhD, MSW, LCSW, Julianne Oktay, MSW, PhD, FAOSW, Brittany Lawton, MSW, MA

Abstract Summary:

As primary providers of psychosocial care, oncology social workers can benefit from a tracking system that monitors the services they provide. In January 2019, the Mount Sinai Downtown Oncology Social Workers began implementing the OSWiiPV. This presentation will describe the experience of one oncology social work department (five distinct locations) which has used the OSWiiPV for over a year. The presentation covers our decision-making about implementation, adapting the instrument to the setting, problems experienced and barriers overcome. We also describe how we used the data, and the benefits to the department from doing so. Finally, the next steps for broader implementation, research, and comparison of results with other departments are discussed.

Learning Objectives:

1. State the three reasons why implementing OSWiiPV is useful in practice sessions.
2. Identify how to use data collected to monitor social work productivity, determining appropriate staffing levels, and submitting reports to administration.
3. State three ways in which the use of tracking software, like OSWiiPV can enhance oncology social work practice.

Course Designation: Clinical

Level: Intermediate

Keywords: Research, Leadership/Administration



Title: (2021) Brain Death: A Family Affair - Creating Policy that Supports Families and Staff During a Difficult Time

Date: Wednesday, 6/9/2021

Time: 1:15 - 2:15pm ET

Presenter: Jennifer Buehrer, LMSW

Abstract Summary:

The issue of brain death has been increasingly in the spotlight after recent high profile cases have called into question how it is determined, and then handled, by hospitals. Less attention has been paid to what happens next. This presentation follows a process taken on by a hospital palliative care social worker who recognized the need for consistent and thoughtful practice beyond just determination of brain death, to family communication, education, support and ancillary staff involvement. Beginning with two challenging cases in the ICU, and substantial moral distress among the bedside staff, this social worker built an interdisciplinary task force to create policy that guides medical teams in involving appropriate ancillary support, clear and direct communication, education of families, and establishing expectations for the process of withdrawal when brain death is determined. Educational materials were also created out of this process and are now available in the ICUs and provided to families as early in the process as is feasible. This presentation will provide guidance for others who are interested in policy and effecting change in our day to day practice in critical patient situations.

Learning Objectives:

1. Describe the key elements of building a coalition or task force to produce policy and practice change that is most likely to secure buy-in from necessary stakeholders.
2. Produce policy where it is needed, and identifying necessary support to make it successful.
3. Summarize the definition of death by neurological criteria, and express understanding of the supports necessary for families to find acceptance of the diagnosis and appropriate next steps.

Course Designation: Ethics

Level: Intermediate

Keywords: Interdisciplinary Care, Pain, Palliative Care and End of Life



Title: (2021) 2020, What Else Can Change??? Understanding the Commission on Cancer’s Standards that Affect Patient Navigation

Date: Wednesday, 6/9/2021

Time: 1:15 - 2:15pm ET

Presenter: Kristina Teran, MSW, LCSW-BACS, OSW-C

Abstract Summary:

Ever since Dr. Harold Freeman created the first patient navigation program in Harlem in 1990, patient navigation programs have been evolving. The year 2020 has brought unprecedented changes and patient navigation is no different. Prior to everyone’s “normal” changing with the COVID-19 pandemic, the Commission on Cancer (CoC) revised their Cancer Care Standards. Although patient navigation is no longer identified as a requirement to achieve CoC certification, navigation continues to be recognized as an essential element in achieving and documenting patient-focused quality cancer care. Navigation programs embrace duties that support key priorities for cancer care programs and healthcare systems as a whole. Ten years has passed since the Oncology Nursing Society, Association of Oncology Social Work, and the National Association of Social Workers issued a joint position paper on the role of patient navigation and is still relevant today: Patient navigation processes “are essential components of cancer care services”, “Patient outcomes are optimal when a social worker, nurse, and lay navigator function as a multidisciplinary team”, and “Patient navigation programs must lay the groundwork for sustainability” We will discuss the changes in the CoC’s standards and identify efficient ways AOSW members can support each other and easily access resources that may be available to our patients to address their barriers to care.

Learning Objectives:

1. Discern between the 2016 and the current 2020 CoC standards affecting patient navigation.
2. Identify a system for providing patient-focused assessments to identify both patient- and system-related barriers to care and make appropriate utilization of resources.
3. Utilize an AOSW- member directory of referral resources.

Course Designation: Clinical

Level: Intermediate

Keywords: Patient Navigation, Special Populations



Title: (2021) COVID-19 and the Oncology Social Worker: How Telehealth Impacts Cancer Care of Our Patients

Date: Wednesday, 6/9/2021

Time: 2:30 - 3:30pm ET

Presenter: Amy Coreveleyn, MSW, LICSW, Ellie McMann, MSW, Bhumika Dahal, LMSW, Sonja Chestnut, MSW, LICSW, LCSW-C, OSW-C

Abstract Summary:

Social workers are working at the front line to address psychosocial needs and barriers even during the time of a global pandemic. Social workers continue to provide their knowledge, skills and expertise at various settings - inpatient hospitals, ambulatory clinics and community centers. The COVID-19 global pandemic has highlighted the necessity for social workers to adapt and change in an uncertain time. The rapid shift of medical appointments from in-person visits to virtual visits have had lasting impacts on patients. Using a tailored approach to care, social workers have had to work with diverse populations to ensure that cancer care continues during this chaotic and stressful time.

This symposium will feature four oncology social workers from different settings who will discuss how they pivoted and installed change in their cancer care centers. The first presentation will specifically highlight the impacts of sudden transition to telehealth on patients whose primary language is not English. Enhanced advocacy for appropriate cultural and linguistic services is imperative, especially now. Through this presentation, social workers will have knowledge of unique needs and barriers of patients with Limited English Proficiency. The second presentation will address the need for education of both patients and providers on the use of digital health applications. It will review how social workers connected patients with the needed technology to participate in new telehealth practices. The third presentation will discuss the inequities that patients with a serious mental illness and a new cancer diagnosis have faced during the pandemic. It will discuss the importance of a collaborative care approach with this population and how that approach changed to ensure patients received cancer care and disruptions in care were prevented. The final presentation will discuss the difficulties to transition to telehealth with a primary patient population of older adults in a rural area. This presentation will explore the ways to approach teaching patients to use technology/telehealth from a distance. It will also discuss the unique challenges facing patients who live in rural areas with limited access to cellphone reception and internet connection. These presentations will bring together social workers from different backgrounds to illustrate how vital oncology social work has been during the pandemic. It will also offer time for questions or case consultations.

Learning Objectives:

1. Identify three ways that oncology social workers adapted care during the pandemic.
2. Utilize one skill from adapted care that they can use in their own setting.
3. Identify interventions that were successful during the global pandemic with oncology patients and caregivers.

Course Designation: Clinical

Level: Intermediate

Keywords: Special Populations,



Title: (2021) Helping Clinicians Improve Empathic Communication to Reduce Lung Cancer Stigma: Skills Training Preliminary Results

Date: Wednesday, 6/9/2021

Time: 2:30 - 3:30pm ET

Presenter: Maureen Rigney, MSW, LICSW

Abstract Summary:

Lung cancer stigma is high, with 48% of patients reporting stigma attributable to interactions with cancer care providers. Stigma can result in multiple negative psychological outcomes such as misreporting and underreporting of symptoms and smoking behaviors and avoidance of help seeking. Oncology social workers can be instrumental in mitigating these negative consequences through normalizing concerns about discussing smoking history and helping patients cope with their reactions to stigmatizing conversations with other treatment team members. Can improving the empathic communication skills of thoracic oncology care providers, including physicians and advanced practice clinicians, improve the patient experience and decrease the stigma lung cancer patients feel? To find out, the Empathic Communication Skills Training Module to Reduce Lung Cancer Stigma in Patients Undergoing Treatment for Lung Cancer was developed and evaluated. Participating cancer care providers learned specific communication skills such as providing a rationale for tobacco use discussions; normalizing, acknowledging and preparing patients for recurring smoking questions; and encouraging expression of feelings. Preliminary efficacy of the empathic communication module was examined by assessing participating clinicians' evaluation of the training module as well as perceived self-efficacy before and after the training. Overall, clinicians favorably reviewed the training and perceived self-efficacy to communicate empathically with lung cancer patients increased significantly. Examination of patient outcomes is pending but these preliminary results indicate this promising empathic training module may be worthy of being replicable to other cancer care settings to decrease the stigma-related distress that lung cancer patients experience during interactions with treatment team members.

Learning Objectives:

1. Recognize how people with lung cancer perceive conversations with healthcare professionals
2. Demonstrate empathic communication techniques with the potential to improve provider discussions with those diagnosed with lung cancer
3. Distinguish discussions with healthcare providers people with lung cancer might find helpful versus those that are not.

Course Designation: Clinical

Level: Intermediate

Keywords: Clinical Practice/Skill Building, Special Populations



Title: (2021) “Mind Over Matter:” Implementing a 5-week Evidence-based Group Intervention to Improve Emotional Coping for Cancer Patients & Survivors

Date: Wednesday, 6/9/2021

Time: 2:30 - 3:30pm ET

Presenter: Michelle Ferretti, MSW, LCSW, OSW-C, Rebecca McIntyre, LCSW

Abstract Summary:

Up to half of patients with cancer will experience psychological distress, including anxiety and depression (Guan et al., 2016). Cognitive behavioral therapy (CBT) and Acceptance and Commitment Therapy (ACT) have shown promise in reducing the anxiety and stress associated with managing cancer (Abad, Bakhtiari, Kashani, & Habibi, 2016). ACT encourages psychological flexibility and CBT helps patients with cancer learn how to recognize and reframe maladaptive thoughts (Low et al., 2016). Mind-body techniques give participants another tool to increase self-efficacy as well as influence the physiological effects of the chronic stress response (Kwekkeboom, Cherwin, Lee & Wanta, 2010). This presentation offers the week-by-week agenda for the Mind Over Matter (MOM) intervention, as well as opportunities to participate in experiential exercises including meditation, leading diaphragmatic breath, and participating/leading small group processes geared to support attendees feeling empowered to offer MOM. This novel, 5-week, group intervention aims to increase emotional coping and reconnect the participant with a sense of control. MOM is based on the foundations of CBT, ACT, and introduces mind-body techniques. Results from a pilot study show a statistically significant decrease in anxiety symptoms and a decrease in depression symptoms following participation in the MOM program.

Learning Objectives:

1. Review founding theories and concepts of the intervention including Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, and the stress response.
2. Summarize the Mind Over Matter program, offering the agenda of five week intervention, an opportunity to experience exercises that are part of the intervention, and an opportunity to practice facilitating aspects of the intervention.
3. Discuss implementation and evaluation of Mind Over Matter in its current setting and explore potential settings. Review Mind Over Matter data regarding emotional and physical symptoms.

Course Designation: Clinical

Level: Intermediate

Keywords: Clinical Practice/Skill Building, Survivorship



Title: (2021) Defining Self-Disclosure of Personal Cancer Coping Experience in Oncology Social Workers' Helping Relationships: When Cancer Hits Home

Date: Wednesday, 6/9/2021

Time: 2:30 - 3:30pm ET

Presenter: Frances Fitzgerald, BA

Abstract Summary:

This paper explores an understudied area in oncology social work, with increasing relevance to an aging and sandwich generation workforce, namely, how might (and how are) personal experiences with as a cancer patient or caregiver influence the ways in which oncology social work services are delivered? This question becomes increasingly salient as the psychosocial oncology workforce ages and is increasingly diagnosed with or caring for loved ones with cancer while working simultaneously in oncology care settings. In this exploratory study, the primary researcher used intensive, in-depth interviews with social workers who specialize in oncology, and who have had a cancer diagnosis and / or who have been a cancer caregiver. We used a constructivist grounded theory approach to data collection and analysis, employing the constant comparative method of simultaneous data collection and analysis to optimize interpretation. Participants made explicit and implicit reference to evolving philosophies that guided self-disclosure in their practice, and recommendations for its judicious use in practice. These recommendations identified the critical need for self-disclosure only when clinically appropriate, to advance the therapeutic relationship, support client coping and adaptation to a diagnosis or treatment, and/or prepare clients and families for end of life decisions.

Learning Objectives:

1. Define therapist self-disclosure and synthesize definitions from a review of the literature and empirical findings from the study data.
2. Distinguish ethical and appropriate self disclosure from disclosure motivated by the workers needs.
3. Consider mechanism for ensuring appropriate, ethical, and judicious use of self-disclosure.

Course Designation: Ethics

Level: Intermediate

Keywords: Clinical Practice/Skill Building, Education



Title: (2021) When a Member of the Healthcare Team Becomes a Patient: Navigating the Complexity of Dual Relationships in Cancer Care

Date: Wednesday, 6/9/2021

Time: 3:45 - 5:15pm ET

Presenter: Christina Bach, MSW, MBE, LCSW, OSW-C, FAOSW, Bryan Miller, MSW, LCSW, OSW-C, Katie Tremel, MSW, LCSW, OSW-C, Christina Ensinger, MSW, LSW

Abstract Summary:

One of the core values of social work practice is the importance of human relationships. When providing care to patients and their families, our work is centered around connection, sharing, trust, vulnerability and honesty. These relationships enhance the well-being of those we work with. Maintaining clarity about the nature, functions and goals of the relationship is fundamental to ethically sound social work practice. Our Code of Ethics provides an essential framework to guide these relationships and avoid boundary and role violations that can cloud the work and the relationship. When a member of our healthcare team—a part of our “work family”—is the patient, the relationship is automatically dual in nature. This duality is necessary and unavoidable. Duality in a relationship exists on a continuum. It can have positive aspects and, it also can provoke tension. Unanticipated challenges can arise. When providing care to a member of our team, we must be keenly aware of our sense of and use of self. We need to be aware of our own abilities, functions, and biases to provide optimal psycho-oncology support to our patients and our teams. This presentation will focus on four key areas: (1) clinical and interprofessional team practice skills, (2) policy development and administrative management, (3) navigating ethical gray space and (4) self-preservation/self-care. Through the use of case presentations, personal experiences, and theoretical examination we will attempt to navigate these stormy waters with an ethical lens. Our goal: improving delivery of care to all patients and supporting our interprofessional teams.

Learning Objectives:

1. Identify three key ethical tension points that arise when working with members of our team who are also our patients.
2. Discuss administrative and policy recommendations to employ best practices at our own treatment centers.
3. Recognize the impact of the work on our use of self in clinical practice, self-regulation, self-preservation and in navigating our space within our interprofessional team.

Course Designation: Ethics

Level: Intermediate

Keywords: Ethics, Clinical Practice/Skill Building



Title: (2021) Tools for Healing People with Cancer: Using EMDR as a Response to Trauma

Date: Wednesday, 6/9/2021

Time: 3:45 - 5:15pm ET

Presenter: Yvette Colon, PhD, BCD, LMSW, FAOSW

Abstract Summary:

Eye Movement Desensitization and Reprocessing (EMDR) originally was developed as a psychotherapy treatment approach for post-traumatic stress disorder and has shown efficacy in the treatment of cancer symptoms and side effects. Research studies show evidence that EMDR, an evidence-informed treatment that targets emotional distress and associated physical symptoms, can reduce the physical and emotional distress of cancer and side effects successfully. This presentation will consider the development of EMDR and its use in the psychological support of people with trauma and with cancer. It will review the basic EMDR trauma protocol and eight phases of treatment. Additionally, it will outline other EMDR protocols used with cancer patients. EMDR demonstration with a mock patient will provide an opportunity to observe EMDR in context. Information about basic and advanced training, continuing education, and professional resources will be provided.

Learning Objectives:

1. Consider the development of Eye Movement Desensitization & Reprocessing (EMDR) as a treatment approach for cancer trauma.
2. Describe the original 8-Phase model and other protocols for EMDR therapy with cancer patients.
3. Identify EMDR training requirements, continuing education opportunities, and professional support.

Course Designation: Clinical

Level: Introductory

Keywords: Clinical Practice/Skill Building, Specialized Needs



Title: (2021) Valued Living for Survivors: An Acceptance and Commitment Therapy (ACT) Based Group Intervention

Date: Wednesday, 6/9/2021

Time: 3:45 - 5:15pm ET

Presenter: Jill Mitchell, PhD, LCSW, OSW-C

Abstract Summary:

Although many cancer survivors adjust very well post-treatment, a significant number still experience fear of recurrence, anxiety, and depression lasting for months or years (Yi & Syrjala, 2017). Survivorship distress decreases quality of life and increases risk for full-blown anxiety and depressive disorders. Distress may also be associated with inefficient utilization of medical care and negative health behaviors (Otto, Soriano, Siegel, LoSavio & Laurenceau, 2018; Fisher, Beeken, Heinrich, Williams & Wardle, 2016). To better serve distressed cancer survivors, we developed a group intervention, “Valued Living for Survivors”, based on Acceptance and Commitment Therapy (ACT). ACT is a therapeutic approach well-suited for people living in the shadow of cancer because it promotes acceptance, mindfulness, cognitive defusion, and value-based behavioral change, while at the same time allowing space for challenging thoughts and emotions reflective of the reality of survivors (Harris, 2008; Hayes & Smith, 2005). In a 2016 pilot study of 42 participants we compared participation in “Valued Living” to change in time alone and showed beneficial outcomes with regard to anxiety, depressive symptoms, fear of recurrence, vitality, and sense of life meaning (Arch & Mitchell, 2016). In 2019 we completed a larger, randomized controlled trial of the intervention with 139 anxious post-treatment survivors (Arch et al., 2019). This presentation will inform about key concepts in ACT and its relevance to work with cancer survivors. In addition, we will share the results of the recently completed Valued Living RCT, and will give an experiential overview of techniques used in the intervention.

Learning Objectives:

1. Discuss an Acceptance and Commitment Therapy approach and its relevance for cancer survivors.
2. Discuss the impact of an ACT-based intervention (“Valued Living”) for anxious post-treatment survivors.
3. Describe specific strategies and tools used in the “Valued Living” intervention and offer participants an opportunity to directly experience some of the tools.

Course Designation: Clinical

Level: Intermediate

Keywords: Clinical Practice/Skill Building, Survivorship



Title: (2021) Oncology Social Work 101: Preparing to Launch and Flying Through The First Years Part 1

Date: Thursday, 6/10/2021

Time: 11:30am - 1:00pm ET

Presenter: Catherine Credeur, LMSW, OSW-C, FAOSW, Carolyn Messner, DSW, OSW-C, FAPOS, FAOSW, BCD, LCSW-R, Alison Sachs, MSW, OSW-C, FAOSW, Wendy Kimbley, MSSW, LMSW

Abstract Summary:

This skill building, two-part practice intensive is an orientation to the field of psychosocial oncology and oncology social work career development. The target audience for this session are oncology social workers with three years or less in this niche field. Participants may be new graduates or practitioners shifting from another area of social work. The goals for this session are to provide a brief introduction to current trends and significant tasks in oncology social work, connect with oncology social workers in similar areas of practice for ongoing networking, and identify opportunities for self-care and career growth. Special attention will be given to working with underserved populations and the transference of prior experience and skills into oncology social work.

Learning Objectives:

1. Recognize the history of oncology social work in diverse settings and anticipate potential career paths.
2. Identify the importance of use of self, self-care, and the development of a professional skill set, network, and mentorship in growth as oncology social worker.
3. Discuss the influence of models of care; specifically, patient-and-family-centered care and values based care, on the practice of oncology social work.

Course Designation: Clinical

Level: Introductory

Keywords: Clinical Practice/Skill Building,



Title: (2021) Bringing Sex Into the Conversation: Understanding and Overcoming our Own Biases of Differing Sexual Behaviors Part 1

Date: Thursday, 6/10/2021

Time: 11:30am - 1:00pm ET

Presenter: Sage Bolte, PhD, LCSW, CST, Jennifer Bires, MSW, LICSW, OSW-C

Abstract Summary:

A Sexual Attitude Reassessment (SAR), often the cornerstone of sexual health trainings, use media, vignettes, and other information to begin examining and understanding the many layers of our sexual attitudes and beliefs. This mini SAR will allow participants to begin to explore their own sexual health value system. Sexual health is a critical aspect of quality of life. Cancer and its treatments have both acute and chronic impact on a patient's and partner's sexual health (Flynn et al., 2011), yet this critical assessment and conversation is all too often overlooked in medical assessments (Arora et al., 2013; Bdair & ConsTantino, 2017; Nusbaum & Hamilton, 2002). Barriers to more challenging conversations like sexual health can certainly be environmental including real time constraints, but many of the major barriers are our own internal barriers – perceptions, assumptions, discomfort, misinformation and fear (Bdair & Constantino, 2017). To do this, it requires a level of comfort in raising the questions of sexual health along with a level of comfort in being open to whatever information or additional questions may arise once the topic is broached. This interactive presentation using didactic and experiential teaching methods, grounded in research and evidenced based interventions, will explore our own perceived and real barriers along with the discomforts we may experience in doing sexual health assessments so that we can be fully present and the best advocates for our patients and their sexual health and lead by example within our teams.

Learning Objectives:

1. Recognize their own biases, attitudes, values and beliefs when people's sexual behaviors differ from their own.
2. Address and discuss a wide range of sexual health topics with increased comfort level.
3. Discuss fresh ideas in sexual health enabling them to provide high quality, equitable sexual health information and referral or treatment.

Course Designation: Cultural Competency

Level: Advanced

Keywords: Clinical Practice/Skill Building, Specialized Needs



Title: (2021) Advance Care Planning: Implementing an Educational Program to Improve ACP Discussion with Oncology Patients and Families Part 1

Date: Thursday, 6/10/2021

Time: 11:30am - 1:00pm ET

Presenter: Annabelle Bitter, MSW, LCSW, Teresa Van Oort, MHA, MSSW, LCSW, OSW-C, Mark Anderson, JD, LMSW

Abstract Summary:

We will explore what Advance Care Planning encompasses, the documents often involved in these conversations, how legacy planning plays a role in the process, and how to engage staff in a daylong training curriculum. Trainees will learn to better address advance care planning needs and how to have a richer more comprehensive conversation with their patients about these very important issues. Presenters have many years of experience addressing advance care planning with patients, teaching these skills to their colleagues, and supervising other social workers as they learn to better address these needs. Target audience will be any social workers and/or supervisors who work with oncology patients in a healthcare setting.

Learning Objectives:

1. Explain the Advance Care Planning process throughout the oncology patient's disease cycle (new diagnosis, disease progression, remission, end of life and legacy planning).
2. Discuss their beliefs about Advance Care Planning, and ethical implications when teaching others Advance Care Planning techniques.
3. Design a similar Advance Care Planning educational program for their departments.

Course Designation: Clinical

Level: Intermediate

Keywords: Pain, Palliative Care and End of Life, Education



Title: (2021) Oncology Social Work 101: Preparing to Launch and Flying Through The First Years Part 2

Date: Thursday, 6/10/2021

Time: 1:30 - 3:00pm ET

Presenter: Catherine Credeur, LMSW, OSW-C, FAOSW, Carolyn Messner, DSW, OSW-C, FAPOS, FAOSW, BCD, LCSW-R, Alison Sachs, MSW, OSW-C, FAOSW, Wendy Kimbley, MSSW, LMSW

Abstract Summary:

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Learning Objectives:

1. Summarize current research on issues of prime concern in oncology social work, including distress screening and suicide assessments with patients in the context of oncology treatment and advanced illness.
2. Formulate methods of intervention with diverse populations coping with cancer along the continuum of care.
3. Apply social work ethics and assessments to case examples and prepare a case presentation that speaks to the concerns and language used by interdisciplinary oncology care teams.

Course Designation: Clinical

Level: Introductory

Keywords: Clinical Practice/Skill Building,



Title: (2021) Bringing Sex Into the Conversation: Understanding and Overcoming our Own Biases of Differing Sexual Behaviors Part 2

Date: Thursday, 6/10/2021

Time: 1:30 - 3:00pm ET

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Abstract Summary:

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Course Designation: Cultural Competency

Level: Advanced

Keywords: Clinical Practice/Skill Building, Specialized Needs



Title: (2021) Advance Care Planning: Implementing an Educational Program to Improve ACP Discussion with Oncology Patients and Families Part 2

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3. Design a similar Advance Care Planning educational program for their departments.

Course Designation: Clinical

Level: Intermediate

Keywords: Pain, Palliative Care and End of Life, Education



Title: (2021) Primary Palliative Social Work: Laying the Foundation for Quality Oncology Service

Date: Thursday, 6/10/2021

Time: 3:30 - 4:30pm ET

Presenter: Shirley Otis-Green, LCSW, OSW-CE, FNAP, FAOSW

Abstract Summary:

This interactive seminar will explore how the core principles of primary palliative care lay the foundation for the delivery of quality oncology service. Using the Fourth Edition of the National Consensus Project Guidelines as our framework, we will consider how addressing patients' quality of life domains can enhance collaborative practice. We'll conclude with an exploration of leadership and advocacy opportunities that enhance our provision of person-centered, family-focused, culturally-congruent care.

Learning Objectives:

1. Identify core palliative care principles applicable to oncology social work practice.
2. Recognize how addressing patients' quality of life domains provides a framework to enhance collaborative practice.
3. Discuss leadership and advocacy opportunities that enhance our provision of person-centered, family-focused, culturally-congruent care.

Course Designation: Clinical

Level: Introductory

Keywords: Pain, Palliative Care and End of Life, Interdisciplinary Care



Title: (2021) Sex, Intimacy, and Palliative Care: Oh My! Information, Assessments and Interventions for Supporting Sexuality in Diverse Populations

Date: Thursday, 6/10/2021

Time: 3:30 - 4:30pm ET

Presenter: Andrea Lehman, MSW, LCSW, OSW-C, Cathy Weeks MSW, LCSW, OSW-C

Abstract Summary:

Palliative Care improves quality of life for patients/families facing problems associated with life threatening illness through prevention and relief of suffering. Sexuality is a key component for quality of life and an essential form of expression capable of relieving suffering, offering meaning, and maintaining connection with others. Though palliative care is supposed to be holistic in focus, sexuality is often overlooked and avoided during assessment. Between 10-100% of patients experience sexual dysfunction related to their cancer diagnosis/treatment. The National Hospice and Palliative Care Organization (NHPCO) determined that a core competency of Palliative Care social workers should be assessing sexuality in patients. Though patients want healthcare professionals to ask and discuss sexual health, multiple barriers have been identified as to why healthcare professionals do not and when discussions do occur are kept "medicalized". Due to the clinical skill set, social workers are perfectly poised to lead teams in discussing sexual health with patients and partners. Many models exist to assist healthcare professionals in starting sexual health conversations and assessments, including ALARM, PLISSIT (ex-PLISSIT), BETTER, and CARESS. Research is limited on how these models are applied to diverse patient populations and the unique cultural considerations that exist when discussing sexuality, such as past discrimination, distrust of the medical system, health inequality, and language barriers. This presentation will review research regarding beliefs around sexuality from diverse perspectives, cancer, and palliative care. Discussion will focus on sexual health assessments, appropriate interventions, and special considerations related to race, ethnicity, sexual orientation and/or gender identity.

Learning Objectives:

1. Identify the impacts of cancer on sexuality for patients/partners and differentiate between assessment models.
2. Recognize the barriers to communicating about sex, sexuality and intimacy with diverse palliative care patient populations from both provider and patient perspectives.
3. Apply knowledge of assessment models and interventions with diverse populations including Black, Latino/a, Asian and LGBTQ communities.

Course Designation: Clinical

Level: Intermediate

Keywords: Clinical Practice/Skill Building, Pain, Palliative Care and End of Life



Title: (2021) The Oncology Social Workers Role in Facilitating Safe & Effective Integrative Approaches

Date: Thursday, 6/10/2021

Time: 3:30 - 4:30pm ET

Presenter: Erin Price, MSW, LICSW, Michelle Ferretti, MSW, LCSW, OSW-C

Abstract Summary:

Estimates of complementary and alternative medicine usage among cancer patients and survivors varies from 30% to 80% (Horneber et al., 2011; Judson et al., 2017; Sanford et al., 2019). While some well-researched integrative modalities have been proven safe to use in concert with traditional cancer treatments, others modalities are ineffective or have been shown to interact with medical treatments and/or cause harm (National Cancer Institute, 2019). Therefore, patients must be empowered to make wise selections regarding integrative therapies and collaborate with their oncology team when making these decisions. Given that 30-40% of cancer patients do not disclose use of integrative modalities to their oncology provider, social workers are needed and uniquely suited to bridge this gap. This presentation will provide an overview of evidence-based integrative therapies for common cancer side-effects and provide social workers resources for cancer survivors to gain information about reputable and evidenced-based integrative cancer care modalities.

Learning Objectives:

1. Discuss the importance of communicating integrative modality use with medical providers.
2. Describe a variety of integrative modalities and their application in cancer treatment, prevention, and side-effect management.
3. Utilize select resources to facilitate safe and effective patient decision making around the use of integrative modalities.

Course Designation: Clinical

Level: Intermediate

Keywords: Interdisciplinary Care, Clinical Practice/Skill Building



Title: (2021) Life Turned, Flipped Upside Down? Sit Right There, Let us Share How a Center Changed the Delivery of Supportive Care

Date: Thursday, 6/10/2022

Time: 3:30 - 4:30pm ET

Presenter: Lisa Capparella, MSS, LCSW, OSW-C, Miriam Pomerantz, MSW, LSW, Gregory Garber, MSW, LCSW, Kristine Naputo, MSW

Abstract Summary:

This one hour paper presentation will focus on one institution's tiered response to the COVID-19 pandemic to create supportive and educational programs geared towards patients and families impacted by cancer and healthcare professionals on the frontline. This workshop will provide tangible steps and strategies to provide exceptional patient and staff programming. Using measurable tools and outcomes, this workshop will provide participants with resources to implement, execute and evaluate effective virtual programming to support patients in the time of a pandemic.

Learning Objectives:

1. Use practical skills to effectively coordinate, execute and evaluate meaningful programs to support those impacted by cancer during a pandemic.
2. Identify effective techniques to minimize barriers impacting access to healthcare while maximizing their reach to patients through use of resources within their own institution. (eg. EHR, Newsletters, cancer registrar).
3. Apply evidence based interventions to differentiate your cancer center as a leader in providing supportive care to staff during a crisis.

Course Designation: Clinical

Level: Intermediate

Keywords: Education, Clinical Practice/Skill Building



Title: (2021) A Vision for Working with Chinese-speaking Cancer Patients: Strategies for Program Development and Clinical Work

Date: Thursday, 6/10/2021

Time: 4:45 - 5:45pm ET

Presenter: Mi (Emma) Zhou, MSW, LCSW

Abstract Summary:

Chinese Americans are one of the fastest growing immigrant populations in the United States, and they have high rates of a variety of cancers. There is a growing need for culturally-tailored cancer support services for Chinese-speaking patients. However, this type of service is limited. In response to the needs of the Chinese-speaking cancer patients, oncology social workers at Mount Sinai The Blavatnik Family – Chelsea Medical Center started building a comprehensive cancer support program in February 2019. In this presentation, the development of the program will be reviewed, specifically, lessons learned and challenges overcome. The presentation will cover conducting biopsychosocial-cultural-spiritual assessment in a culturally sensitive way, identifying individual Chinese-speaking patients' psychosocial needs and providing support throughout cancer treatment, initiating and maintaining discussion about advance care planning, strategies for outreach and recruitment, and program monitoring. Through patient encounter aggregate data collected, participants will better understand the needs and concerns of this patient population.

Learning Objectives:

1. Identify at least 3 barriers for Chinese-speaking cancer patients to access psychosocial support services.
2. Identify questions that should be included in a biopsychosocial-cultural-spiritual assessment with Chinese-speaking cancer patients and providing education on completing Advanced Care Planning documents.
3. Participants will be able to identify strategies for recruitment of Chinese-speaking cancer patients to a support program.

Course Designation: Cultural Competency

Level: Introductory

Keywords: Special Populations, Specialized Needs



Title: (2021) Custody Planning in Palliative Oncology: An Out of the Box Collaboration Between an Adoption and Oncology Social Worker

Date: Thursday, 6/10/2021

Time: 4:45 - 5:45pm ET

Presenter: Michelle Bailiff, MSW, LCSW, OSW-C

Abstract Summary:

The leading cause of death for women in 2015, between the ages of 25-54, was cancer (Park et al., 2016). Many of these women were raising children at the time of their deaths. Coping with an advanced cancer diagnosis and single parenthood brings about complex challenges and uniquely specialized needs. It is particularly complex for single parents with dependent children, inadequate support systems and life-limiting illness, who confront complicated legal, pragmatic, emotional, financial and/or spiritual/existential issues when making decisions about who will care for their children upon their death. These decisions must be made hurriedly while enduring intense physical, emotional and/or existential suffering. Historically, health professionals have not consistently addressed parenting concerns as part of end of life care (Park et al., 2016), nor have best practices been established. As the disease burden intensifies, the family unit is at a heightened risk for destabilization, which could lead to a traumatic death and long-term psychological consequences for the child. The foundation of this paper presentation is a case study involving a 53-year-old single female who was diagnosed with a life-limiting gynecological cancer. The patient needed to complete custody planning on behalf of her 10-year-old daughter who had previously experienced several foster care placements before being permanently placed with the patient. The presentation will include intervention strategies focused on the implementation of an interprofessional team approach which was enhanced by a partnership between the palliative care team and an outside adoption agency.

Learning Objectives:

1. Describe custody planning in the context of life-limiting illness.
2. Demonstrate the practical and clinical benefits of a partnership between the adoption and oncology social worker in the context of custody planning during end of life care.
3. Evaluate the resources within your own institution/community which address parenting concerns during end of life care. Formulate key points for stakeholders at your institution about developing and/or enhancing supports for parenting concerns during palli

Course Designation: Clinical

Level: Intermediate

Keywords: Pain, Palliative Care and End of Life, Specialized Needs



Title: (2021) Trauma-Informed Care (TIC) in Oncology Social Work

Date: Thursday, 6/10/2021

Time: 4:45 - 5:45pm ET

Presenter: Sky Smith, DSW, LICSW

Abstract Summary:

Trauma-Informed Care (TIC) is increasing in prominence in a variety of social work fields of practice. This presentation offers an overview of TIC and its application to oncology social work. Included is a rationale for TIC model in inter-professional oncology teams, an overview of trauma-related symptomology, an overview of TIC evidenced based modalities, Adverse Childhood Experiences (ACES) and the relationship to healthcare utilization, and the impact of a healthcare trauma on the individual and family system.

Learning Objectives:

1. Apply principles of trauma-informed care to oncology settings, including clinical practice with individuals, families, and in our interactions with healthcare team members.
2. Summarize trauma informed modalities useful in oncology social work practice.
3. Integrate trauma-informed assessment in distress identification and management in order to optimize trauma-informed care for patients, survivors, and caregivers.

Course Designation: Clinical

Level: Intermediate

Keywords: Clinical Practice/Skill Building, Specialized Needs



Title: (2021) QOL Lecture: The Eye of the Storm: Oncology Social Work During a Time of Extreme Fragmentation and Social Challenges

Date: Friday, 6/11/2021

Time: 11:30am - 12:45pm ET

Presenter: Penny Damaskos, PhD, LCSW, OSW-C, FAOSW

Abstract Summary:

These are extremely challenging and unusual times. Each day we are confronted with events that make us confront our understanding of the world we live in. The recent crises of the last few years; racism, gun violence, climate related population displacement, immigration, poverty, financial hardships, homelessness are but a few of the issues that our patients come to us with as they manage the crisis of a cancer diagnosis and treatment. In the last year, the Covid pandemic has exacerbated some of these issues and further exposed health care disparities, especially in communities of color, in relationship to access to care and survival of the virus (Wells et al; 2015). The confluence of cancer, Covid and violence against BIPOC and AAPI populations also created an environment where the survival of our patients called for a response from that encompassed clinical interventions and advocacy for social justice (NASW, 2017). The events of the last year has caused many of us to adjust and widen our lens to include a deeper understanding of how race and racism informs access to care for many of our patients and ultimately impacts their survival.

The pandemic and the summer of protests, our patients and their communities experienced fragmentation and isolation in their care that can lead to feelings of hopelessness, heightened vulnerability and demoralization (Nathanson, 2019). These feelings were also experienced by the clinicians who were treating the patients leading to a heightened sense of vulnerability and hopelessness. While they undoubtedly present challenges, these times can also propel us to create community across distance and can present opportunities for leadership as well as clinical and professional growth. Extreme times as these propel us to develop a deeper connection to our work to our patients and to one another.

The focus of this talk will be to review background of healthcare disparities in the US and explore the cancer experience as an intersection with these issues. This talk will also review the use of resilience -based clinical supervision, to help staff better work with and witnessing the many stressors in patients' lives. Review of counter-transference issues that these issues bring up through our experiences of hopelessness, grief, institutional racism and increased violence against communities of color and the disproportionate impact of the pandemic on these communities and individuals will be discussed. Examples of self-reflection practices will be discussed as will the use of self in the clinical practice as a foundation for the development of personal resilience. Finally models for opportunities for creating multiple forums for discussion to help clinicians be aware of, and advocate for, social justice within the health care setting will be presented.

Learning Objectives:

1. Review background of healthcare disparities in the US and explore the cancer experience as an intersection with these issues.
2. Describe the use of resilience -based clinical supervision, to help staff better work with and witnessing the many stressors in patients' lives.
3. Discuss counter-transference issues that these issues bring up through our experiences of hopelessness, grief, institutional racism and increased violence against communities of color and the disproportionate impact of the pandemic on these communities



Course Designation: Cultural Competency

Level: Intermediate

Keywords: Special Populations,



Title: (2021) Plan C: Meeting Survivorship Needs in a Changing Health Care Landscape.

Date: Friday, 6/11/2021

Time: 1:00 - 2:00pm ET

Presenter: Billie Baldwin Ferguson, MSW, LCSW-C

Abstract Summary:

In 2020, the COC revised its Survivorship Standard to focus more on quality programming and less on the quantity of Survivorship Care Plans delivered. The new standards left many cancer programs scrambling for fresh ideas to meet the new standard, which requires a Survivorship Program Team be established and the documentation of three services focused on survivors. Our Cancer Network was on the way to creating a new menu of meaningful programming when COVID-19 interrupted the way healthcare services were being delivered. Brainstorming new ways of delivering Survivorship programming suddenly became imperative. Not only were there new requirements to meet the needs of survivors, but there were a variety of parameters in which these programs would need to function. The decision was made to take our Survivorship Goals to a digital platform, specifically using Facebook as a medium. While initially skeptical of an online community, research quickly showed us that even “lurking” behaviors can be beneficial for patients. This enabled us to extend our reach to patients who may otherwise not engage in Survivorship Programming, including those with late treatment effects. Creating novel digital programming with multi-disciplinary support developed cohesion, and made Survivorship Care a more intentional process. It forced innovation and creative thinking, strengthening our team’s sense of ownership of the content. This presentation will explore the twists and turns of Survivorship Program planning during COVID-19 and the journey to make digital programming that is meaningful, feasible, relevant, and according to our health network’s standards.

Learning Objectives:

1. Identify ways patients benefit from virtual Survivorship Programs.
2. Differentiate between types of interaction available through online platforms.
3. Summarize steps to create meaningful interdisciplinary online Survivorship content.

Course Designation: Clinical

Level: Intermediate

Keywords: Survivorship, Education



Title: (2021) Developing a Patient-Centered Intervention for Financial Navigation in Cancer Care: Providing “A Ray of Hope”

Date: Friday, 6/11/2021

Time: 1:00 - 2:00pm ET

Presenter: Julia Rodriguez-O'Donnell, MSW, LCSW

Abstract Summary:

In this pilot study, a multidisciplinary team comprised of oncology social workers and other disciplines, including cancer support program leadership and public health researchers, developed a patient-centered intervention for providing financial navigation to patients with cancer and their families. Cancer-specific financial distress screening, psychosocial assessment and ongoing check-ins formed the basis of this intervention, in which patients were assisted to apply to programs across the spectrum of government, non-profit organizations, local grant foundations, and in-hospital programs. Participants experienced a statistically significant decrease in financial toxicity, as measured by the COST, and reported feeling less overwhelmed and more supported in their search for financial assistance programs. Participants reported that the program had given them “piece of mind,” let them “know that doctors, nurses, social workers and everyone really cared,” enabled them to feel “less afraid of having cancer,” and ultimately became “a huge factor in treating my cancer.” Patients whose illness and/or financial situation deteriorated during their participation in the program still overwhelmingly reported the benefits of this model that involved frequent visits with social workers and that focused on their unique cancer treatment experience. We will discuss the skillset unique to social workers that facilitates the negotiation of complex, disjointed health care systems and financial assistance programs in the service of helping patients with cancer to proactively address the problem of financial toxicity, so that they can better adhere to treatment, experience higher quality of life and improved survival.

Learning Objectives:

1. Explain the link between financial toxicity and cancer care outcomes, barriers that exist for patients and providers in accessing oncology-specific financial assistance programs, and the disproportional impact of financial toxicity on the disabled, workin
2. Discuss patient-centered tools to screen for financial distress in cancer care, and to grasp the ongoing nature of financial assessment for oncology patients and their families as treatment progresses and their psychosocial situations change during the co
3. Formulate and apply a patient-centered, financial navigation intervention with oncology patients that integrates knowledge of the financial challenges facing cancer patients across backgrounds, as well as essential clinical social work skills needed in or

Course Designation: Clinical

Level: Introductory

Keywords: Financial Toxicity, Patient Navigation



Title: (2021) The Role of Diversity Training on Healthcare Professionals' Understanding of Diversity

Date: Friday, 6/11/2021

Time: 2:15 - 3:15pm ET

Presenter: Brittany Nwachuku, EdD, LCSW, OSW-C

Abstract Summary:

A qualitative study was designed and conducted to evaluate the understanding and knowledge of diversity for 10 healthcare professionals and leaders at UPMC Magee-Womens Hospital. This understanding was achieved by exploring how healthcare professionals conceptualize diversity, including race and gender differences, and about their participation in diversity training, resources, policies, and initiatives. The study conceptualized diversity through Madeline Leininger's cultural care diversity theory and Kimberlé Crenshaw's coined term of Intersectionality. This framework stressed the ethical responsibility of healthcare professionals to remain competent in understanding the multiple identities experienced by Women of Color and how this can impact their overall care.

Learning Objectives:

1. Examine the concept of Intersectionality and Madeline Leininger's Cultural Care Diversity theory as it applies to the ethical responsibility for healthcare professionals to provide competent care
2. Examine the differences in care for Women of Color based on the concept of intersectionality and the role of the healthcare professional
3. Discuss the implications for practice and how to provide a multi-dimensional approach to diversity training and resources for healthcare professionals

Course Designation: Cultural Competency

Level: Introductory

Keywords: Research,



Title: (2021) Family Conferences in Interprofessional Care: Applying Core Oncology Social Work Skills in Changing Environments

Date: Friday, 6/11/2021

Time: 2:15 - 3:15pm ET

Presenter: Iris C. Fineberg, PhD, MSW, OSW-C, FNAP, FAOSW, Shirley Otis-Green, LCSW, OSW-CE, FNAP, FAOSW

Abstract Summary:

Family conferences are a setting for communication between patients, families and health care professionals. Recognition that high quality oncology care is patient-centered, family-focused and culturally congruent has heightened the importance of skilled communication with families. Family conferences allow for information exchange and clarification, observation of dynamics, emotional expression and sharing, and shared decision making. Given the changing environment of health care in which traditional in-person communication may shift to video-based remote communication or a combination of the two modalities, oncology social workers need to apply their skills in these varied configurations. Social work leadership in family conference organization and implementation, regardless of who specifically runs the meeting, is an opportunity to apply and illustrate this expertise. Evidence informed elements and processes of family conferences will be reviewed and connected with oncology social work roles. An experiential approach in the session will allow participants to explore and apply social work practices across contemporary health care configurations of family conferences.

Learning Objectives:

1. Identify several roles of oncology social workers in family conferences in the context of contemporary changes in health care delivery configurations
2. Identify oncology social work leadership skills implemented in organizing and facilitating family conferences
3. Identify content areas, as well as structural and process elements, of family conferences for oncology, palliative and end of life care.

Course Designation: Clinical

Level: Introductory

Keywords: Clinical Practice/Skill Building, Interdisciplinary Care



Title: (2021) Informational, Supportive, and Practical Needs of Young Women with Breast Cancer and their Partners: Implications for Psychosocial Services

Date: Friday, 6/11/2022

Time: 2:15 - 3:15pm ET

Presenter: Chiara Acquati, PhD, MSW, LCSW

Abstract Summary:

Breast cancer, the most common cancer in women younger than age 50, accounts for approximately 25% of new cases. Studies have consistently documented that young women experience greater psychological and physical morbidity after breast cancer than older women and healthy peers, including significant impairment in quality of life across the cancer care continuum and into survivorship. Partners and spouses have a protective role in the emotional well-being and quality of life of patients, providing practical and emotional support. However, young couples are vulnerable to cancer-related stress because of greater affected well-being, greater interdependence, and multiple competing responsibilities. Therefore, there is a critical need to support young couples' adjustment to cancer and to offer psychosocial care tailored to their unique needs. To address gaps in clinical care, this presentation illustrates results of the Younger Couples Coping with Breast Cancer-Related Stress (YCBCS) project. Findings confirm the influential effect of breast cancer on the quality of life of young women with breast cancer and their partners. Additionally, the survey highlighted specific areas of needs and preferences for psychosocial care

Learning Objectives:

1. Discuss psychosocial issues experienced by young women with breast cancer and their partners
2. Identify cancer-related informational, supportive and practical needs reported by young women with breast cancer and their romantic partners
3. Develop psychosocial care approaches that are responsive to the informative, supportive, and practical needs of young women with breast cancer and their romantic partners.

Course Designation: Clinical

Level: Intermediate

Keywords: Adolescent and Young Adult, Research



Title: (2021) Supporting Young Adults with Metastatic Cancer: The Unique Role of Oncology Social Work

Date: Friday, 6/11/2021

Time: 3:30 - 4:30pm ET

Presenter: Lauren Broschak, MSW, LCSW, Erin Price, LICSW, Julia Leavitt, MSW, LCSW, OSW-C

Abstract Summary:

In recent years, awareness has been raised regarding the unique physical and psychosocial needs of young adult (YA) cancer patients (Knox et al. 2017). While more focus has been on the YA population, little research or clinical focus has been on YAs with advanced disease (Knox et al., 2017). Young adults with advanced cancers continue to describe feeling alone and forgotten, and with unmet and unrecognized needs (Lundquist & Berry, 2019). Even though many YAs experience disruption of developmental milestones, those diagnosed with metastatic cancer are faced with the reality that they may never attain these milestones (Zebrack & Isaacson, as cited in Lundquist & Berry, 2012), and grief adds a unique challenge to their cancer journey compared to other YAs (Lundquist & Berry, 2019). As a young adult, accepting the reality of a metastatic diagnosis is very difficult; “having a supportive space to process these challenges...allow(s) them to further explore their experience and come to terms with their personal reality” (Paul, 2018). As Oncology Social Workers we are perfectly suited to recognize, address, and educate other providers regarding the unique needs of this niche population of cancer patients. In this presentation, we will review how the needs of YAs with advanced disease differ from those without advanced cancers; the distress that providers tend to feel about young adults with metastatic disease; and how we can help these young patients process such a heavy diagnosis, including addressing mental health needs, relationships, developmental milestones, grief, legacy building, and end of life.

Learning Objectives:

1. Differentiate between needs found in a general young adult cancer population and those specific to young adults diagnosed with metastatic disease including differences in isolation from peers/psychosocial support, familial dynamics, navigating work or sch
2. Utilize this presentation to improve practitioner knowledge, young adult patient-provider communication, as well as, young adult patient quality of life by integrating best-practices and resources available.
3. Demonstrate knowledge in regards to psychosocial needs and specific resources for young adults diagnosed with metastatic disease.

Course Designation: Clinical

Level: Intermediate

Keywords: Adolescent and Young Adult, Specialized Needs



Title: (2021) Supporting Adult Caregivers of a Parent with a Blood Cancer: Communication Matters

Date: Friday, 6/11/2021

Time: 3:30 - 4:30pm ET

Presenter: Carma Bylund, PhD

Abstract Summary:

A theory-based presentation of original content focused on exploring and analyzing new and current issues, trends, perspectives and/or models in the field of oncology social work and demonstrating a relationship or gap of this new information to existing research and theory. In this interactive session, we will discuss: the communication theories that guided this work; present major themes from our findings; share participant narratives; demonstrate the Healthy Communication Practice intervention and how components of it may be useful to oncology social workers when assisting adult child caregivers with adjustment to cancer diagnosis and management within the family system; and share new supportive resources designed to help caregivers navigate the new and changing healthcare landscape.

Learning Objectives:

1. Describe gaps within cancer caregiver research literature, specifically about the unique needs of adult children caring for a parent and how to best support them, as well as the communication theories that guide that work.
2. Discuss findings from a three-year research program on the experience and communication practices of adult caregivers of a parent with a blood cancer.
3. Demonstrate the Healthy Communication Practice intervention and describe how components of it may be useful to oncology social workers when assisting adult child caregivers with adjustment to cancer diagnosis and management within the family unit.

Course Designation: Clinical

Level: Intermediate

Keywords: Research, Clinical Practice/Skill Building



Title: (2021) Recognizing the Value of Early Neuro-Palliative Care Interventions: An Opportunity for Patient Education, Team Collaboration, and Advocacy

Date: Friday, 6/11/2021

Time: 3:30 - 4:30pm ET

Presenter: Eden Mock, MSW

Abstract Summary:

Although underutilized in the past, the practice of neuro-palliative care is on the rise, especially in European countries, corresponding with an escalating number of trained facilitators (Vierhout, et. al, 2017). We know that palliative care, in general, is especially effective when introduced early to patients and their caregivers. Due to the depth of care needs - this is even truer for those individuals who have been diagnosed with a primary brain tumor. As an Oncology Social Worker with the Brain Tumor Network, a national nonprofit organization which is dedicated to providing navigational services, free of cost, to patients and caregivers across the United States - I field many requests for patient education specific to helping families understand and overcome misperceptions regarding palliative care. A common theme which has arisen within these conversations is lack of early education regarding the value of neuro-palliative care, as well as how palliative care services can be received in conjunction with active treatment. Recognizing that the integration of these services early on may feel like a careful dance between hope and the realities of a brain tumor diagnosis; there is an opportunity for team collaboration to make that careful dance more of a steady walk together. Paying attention to what our teams, patients, and caregivers are not saying can be just as important as what we are saying. This presentation will focus on current research, education, and advocacy dedicated to early neuro-palliative interventions for patients and caregivers impacted by a brain tumor.

Learning Objectives:

1. Express the ways in which Oncology Social Workers can lead early discussions that educate our patients, caregivers, and team members on the value of neuro-palliative care.
2. Describe how early conversations help facilitate open communication, quality of life, a better understanding of perceived goals of care, and ultimately hope.
3. Evaluate current barriers to early neuro-palliative care interventions through case analysis and group discussion.

Course Designation: Clinical

Level: Introductory

Keywords: Disease Type (ovarian, lung, GYN, etc.), Pain, Palliative Care and End of Life



Title: (2021) Closing Keynote: Establishing the CORE (Competencies, Opportunities, Roles, and Expertise) for Oncology Social Work: Results from the AOSW CORE Survey

Date: Friday, 6/11/2021

Time: 4:45 - 5:45pm ET

Presenter: Brad Zebrack, PhD, MSW, MPH, FAOSW

Abstract Summary:

As part of the cancer care workforce, oncology social workers are the primary providers of psychosocial services and interventions. While we can acknowledge variations in what oncology social workers do and how they work across different settings, AOSW's Standards of Practice suggest that there exists a core or universal set of activities and tasks that are grounded in the values and principles of Social Work and apply across all settings. The purpose of the AOSW CORE study is to identify a range of activities that distinguish and delineate the oncology social worker role. Conducted in two phases, the study first engaged an expert panel of 35 AOSW members in the derivation of a set of 91 tasks across six domains that distinguish the scope of oncology social work practice: (1) Clinical Assessment and Intervention; (2) Care Coordination; (3) Professional Advocacy and Political Action; (4) Patient Education and Advocacy; (5) Organizational Support and Service; and (6) Professional Education. A national survey then evaluated the extent to which an estimated 1,000 oncology social workers acknowledged the relevance of these tasks to their own practice. Achieving the highest levels of quality and equity in cancer care depends upon how well comprehensive oncology social work services, as identified in this study, are integrated into medical care systems, enhance patient outcomes, and achieve operational efficiencies and cost-offsets. Findings from the AOSW CORE survey may be used to inform initiatives related to social work education and training, credentialing and certification, health policy, and research.

Learning Objectives:

1. Summarize the multiple and varied activities in which oncology social worker engage across different cancer care settings.
2. Refine standards of practice for oncology social work in the 21st century
3. Inform advocacy efforts on behalf of the patients, families, agencies and communities that oncology social workers serve, in addition to the oncology social work profession

Course Designation: Clinical

Level: Intermediate

Keywords: Professional Issues, Research



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