The Role of Social Workers Within Veterinary Medicine: A Veterinarian’s Perspective

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Learning Objectives

• Medical social worker’s role (5 min)
• Similarities & differences between MD/DVM medical social work (5 min)
• Barriers (5 min)
• Opportunities (5 min)
Medical Social Work

- Help navigate world of health care
- Help individuals, couples and families cope with the social, psychological, cultural and medical issues resulting from an illness. (Mayo school of health sciences, 2013)
  - Plan for post-hospital patient needs by arranging for services at another facility or in the home
  - Understand the social, cultural and religious variables that contribute to patients’ responses to illness and their use of health care resources
  - Provide advocacy through appropriate organizations

Veterinary Social Work

- Help navigate world of veterinary care
- Help individuals, couples and families cope with the social, psychological, cultural and medical issues resulting from a pet’s illness.
  - Plan for post-hospital patient needs by arranging for services at another facility or in the home
  - Facilitate Goals of Care conversations at admission & during hospitalization
  - Understand the social, cultural and religious variables that contribute to client responses to their pet’s illness and their use of veterinary resources
  - Provide advocacy through appropriate organizations (SWARH, APHS, IAMHPC)
Veterinary Social Work, UTK

- Attend to the human needs that arise from human-animal interactions (Strand, UTK)
  - Grief/bereavement
  - Animal Assisted Interactions
  - Link between human & animal violence
  - Compassion Fatigue & conflict management
Veterinary Setting (unmet needs)

- Attend to the human needs that arise from human-animal interactions (Strand, UTK)
  - Grief/bereavement
  - Compassion Fatigue & conflict management
- Goals of Care conversation(s)
  - Decision making
  - Medical futility
  - Ethics committees
  - Palliative care teams

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The NEW ENGLAND JOURNAL of MEDICINE

REVIEW ARTICLE

CRITICAL CARE MEDICINE
Simon R. Finfer, M.D., and Jean-Louis Vincent, M.D., Ph.D., Editors

Dying with Dignity in the Intensive Care Unit
Deborah Cook, M.D., and Graeme Rocker, D.M.

Critical care doctors should be as concerned with palliation and end of life care, as prevention, diagnosis, monitoring and treatment of life threatening illnesses.

What is Palliative Care?

Center To Advance Palliative Care (CAPC) 2013

- Time for close communication
- Expert management of pain and other symptoms
- Help navigating the healthcare system
- Guidance with difficult and complex treatment choices
- Emotional and spiritual support for you and your family

What is medical/veterinary social work?

Center To Advance Palliative Care (CAPC) 2013

- Time for close communication
- Expert management of pain and other symptoms
- Help navigating the healthcare system
- Guidance with difficult and complex treatment choices
- Emotional and spiritual support for you and your family
Dominant (not palliative) model of veterinary care

- Binary system: treat or euthanize
  - “Let me know when it’s time” / “You’ll know when it’s time”
  - “There’s nothing more that can be done”
- Undertrained system: core curricula lacking
  - <10% of vet schools have >1 hour EOL training
  - (14.64 hours per Dickinson et al 2010, 100% return rate)
- Patient-focused system: family dynamics unaddressed
  - Social work partnerships underutilized


3rd & 4th year veterinary students

- 100% had minimal or no exposure to veterinary-social work partnerships

Gerontology, Hospice & Palliative Care: elective course at Cornell University College of Veterinary Medicine, 2015
3rd & 4th year veterinary students

- 100% believe knowledge of veterinary-social work partnerships is important
- Students also said that having social work resources in a private practice would influence interest in employment there

Gerontology, Hospice & Palliative Care: elective course at Cornell University College of Veterinary Medicine, 2015

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3rd & 4th year veterinary students

- 77.7% know more about veterinary-social work partnerships

Gerontology, Hospice & Palliative Care: elective course at Cornell University College of Veterinary Medicine, 2015
3rd & 4th year veterinary students

- 88.9% are more prepared to partner with social workers and other mental health professionals

Gerontology, Hospice & Palliative Care elective course at Cornell University College of Veterinary Medicine, 2015

Professional impact, status quo

- Veterinarians and technicians experience death five times more than human physicians¹-³
- Veterinarians four times more likely to commit suicide⁴,⁵
- Enhanced turnover in workers expected to perform euthanasia⁶
- 28.8% knew one veterinarian who had left profession due to CF⁷
- 30.4% knew one technician who had left profession due to CF⁷

1. Nolen RS. When caring too much is an occupational hazard. JAVMA 2006;228(11):1653
Societal impact, status quo

- 30% of pet owners report grief lasting >6 months following pet loss\(^1\)
- 12% experienced "severe grief resulting in a major life disruption"\(^1\)
- What resources do we have to deal with this?


“Nothing ever goes away until it teaches us what we need to know.”

—Pema Chodron

The Missing Piece

- Curative Treatment
- Hospice & Palliation
- Euthanasia
The Missing Piece

“Best” option for patient

“Best” option for client

Social Work Support

Strengths
Barriers

- Dominance of dominant system, culture change
  - Perception of need
- Correct classification of unmet needs – are they social work needs? (or HR needs)
- Training
  - Of veterinarians, to demonstrate existence of unmet needs
  - Of social workers, to get into veterinary settings
- Resistance to Goals of Care (GOC) conversation itself
  - GOC conversation = key that will unlock sea change

Barriers to Goals of Care Discussions With Seriously Ill Hospitalized Patients and Their Families: A Multicenter Survey

- JAMA Internal Medicine; Feb 2, 2015, J. You et al
- Seriously ill patients have identified communication and decision making about GOC as high priorities for quality improvement in end of life care
- 21 barriers to GOC discussions rated on 7 point scale
- 3 clinician groups: nurses, residents, staff physicians
- Consistently identified by all 3 groups:
  - Family or patient difficulty accepting poor prognosis
  - Family or patient difficulty understanding limitations & complications of LST
  - Patient incapacity to make GOC decisions
Barriers to Goals of Care Discussions With Seriously Ill Hospitalized Patients and Their Families: A Multicenter Survey

- Promising interventions:
  - More & better communication skills training for clinicians
  - Conversation guides
  - Greater involvement of interprofessional health care team

Summary

- Veterinary social work shares significant overlap with medical social work
- Palliative care goals and priorities are virtually interchangeable with those of med/vet social work
- Addressing family dynamics + building veterinary/social work partnerships = missing piece in complete care
- GOC conversations, GOC conversations, GOC conversations...
Questions?