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# The Role of a Transplant Social Worker

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*“So what exactly do you do?” This is a common question fielded by transplant social workers across the country.*

**T**ransplant Social Worker holds a Master degree in Social Work and often are licensed at the highest level in the state in which they practice. Furthermore, at UC San Diego Health many hold additional credentials specific to transplant.

Solid organ transplant affects much more than the isolated organ(s) that is failing. Patients who require solid organ transplant also face many psychological and social challenges. This is why the Centers for Medicare and Medicaid Services (CMS) require social work to be part of the multidisciplinary transplant team to work with patients and their families throughout all phases of transplant.

## PRE-TRANSPLANT:

When a patient is referred for transplant evaluation, the Transplant Social Worker is tasked with not only looking at a patient’s medical condition but obtaining important information about the psychological and social factors in a patient’s life. This includes completing a biopsychosocial assessment, providing education to patients and families, identifying risk and protective factors and providing resources. Some of the key areas evaluated by Transplant Social workers include:

caregiver support, local housing plan, access to transportation, mental health history, substance use history, medical treatment adherence history, and understanding of transplant education, patient’s goals, wishes, and desire for transplant.

Here at UC San Diego Health, the Transplant Social Workers use a series of tools including the Patient Health Questionnaire (PHQ), Generalized Anxiety Disorder (GAD), Drug Abuse Screening Tool (DAST), Alcohol Use Disorder Tool (AUDIT) and the Stanford



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**Kelli Swan-Vranish, LCSW, CCTSW** is the Clinical Social Work Supervisor for Solid Organ Transplant at UC San Diego Health. She has been working with the transplant program since 2004. She earned her bachelor’s degree in psychology from Drake University and her Master of Social Work from San Diego State University. Additionally she has held her Certified Clinical Transplant Social Worker Credential since 2013.

Integrated Psychosocial Assessment for Transplant Recipients (SIPAT). The SIPAT was developed by Dr. Jose Maldonado and his team at Stanford University in an effort to eliminate selection bias and standardize the psychosocial evaluation process (Sher, Maldonado 2019)<sup>1</sup>.

After completing the assessment and obtaining this important information, the Transplant Social Worker attempts to connect patients with resources needed to overcome any modifiable risk factors. They meet with the patient regularly throughout workup to assess progress



**Holly Hernandez, LCSW, CCTSW, CCSW-MCS**

graduated with her Master of Social Work from Portland State University in 2009. Holly is presently a VAD and heart transplant social worker at UC San Diego. She has worked with VAD patients for nearly eight years, and with heart transplant patients for nearly five years. Holly is inspired daily by the strength of the VAD and heart transplant patients she works with.



**Vanessa Mulsow, MSW, LCSW**

graduated with her Bachelors in Psychology from the University of California, Santa Cruz and her Masters in Social Work from San Diego State University. She has worked at UC San Diego Health with the transplant team since 2016.

and assist with overcoming barriers to transplantation.

Once a patient's medical and psychosocial work-up is complete, the patient is presented at selection committee, at which the Transplant Social Worker will discuss their SIPAT score and provide a summary of the psychosocial assessment. At committee, the Transplant Social Workers help the team gain a deeper understanding of the stability of a patient's support system, barriers that may interfere with a successful outcome, patient ambivalence and right to self-determination so that these factors can be taken into consideration.

The team, which includes surgeons, physicians, dieticians, nursing coordinators, and social workers, will then make a decision on candidacy. The possible outcomes are acceptance for transplant listing, deferral for listing until medical and/or psychosocial issues are satisfactorily addressed, or decline for listing.

### **IN-PATIENT AND DURING TRANSPLANT ADMISSION:**

Transplant Social Workers round with the transplant team and consult on pre-, newly transplanted and post-transplant patients. It is not uncommon for patients with solid organ failure to have multiple admissions with prolonged hospitalizations. At each step along the way, the Transplant Social Worker will assess patient and family's readiness and willingness for transplant. Often while patients are awaiting an organ offer, they become too ill for transplant. When this happens, the Transplant Social Worker will meet with the patient, their support, and members of the treatment team to assess the patient's definition of quality of life and to help transition goals from aggressive treatment to ensuring comfort and dignity for the patient. The Transplant Social Worker assists in facilitating goals of care discussions and should always be present at these meetings.

For patients successfully transplanted, Transplant Social Workers continue to work with the

patient and their support to confirm resources are in place so at the time of discharge the patient has the best chance for success.

### **POST-TRANSPLANT:**

The Transplant Social Worker will continue to meet with patients in the outpatient clinic following transplant. Patients attend clinic multiple times per week for several months following surgery, depending on medical need. Transplant Social Workers will continue to assess social and emotional health and provide resources as needed for the life of the patient.

In summary, a Transplant Social Worker is providing constant support to patients and families through all phases of transplant. There are numerous emotional, behavioral and psychological aspects that accompany failing health and it is the Transplant Social Workers job to provide emotional support, referrals to community agencies, empathy, and understanding through this difficult time. They are the constant thread throughout all transplant phases with goals of promoting emotional health and well-being so that they can be successful pre and post transplantation (STSW, 2019)<sup>2</sup>

### **REFERENCES:**

1. Sher, Yekuzaveta, M Maldonado, Jose. *Psychosocial Care of End-Stage Organ Disease and transplant Patients*. Cham Switzerland. Springer International Publishing, 2019. Print
2. Society for Transplant Social Workers (2019, 12 06). *Transplant Social Worker job Description*. Retrieved from [https://www.stsw.org/wp-content/uploads/2014/06/sw\\_job\\_description.pdf](https://www.stsw.org/wp-content/uploads/2014/06/sw_job_description.pdf)