

Appendix L

Social Work Interview

Note: This interview was conducted with the Director of Social Work or his/her designate. Sometimes it was compiled from interviews with multiple department members. The interview has been formatted to eliminate spaces for comments.

Name of facility: _____

Name of person(s) interviewed:

Position: _____

Name of Interviewer: _____

Date of Interview: _____

Social Work Interview

1. Do social workers report to a social work or social service department, or is some other mechanism used?

____ yes, there is a social work department

____ no social work department/ social workers are part of unit teams

____ other

1. How many persons and FTEs serve as social workers?

_____ number of people _____ number FTEs

2. Are social work personnel assigned to specific units?

____ yes

____ no

3. How many social workers have the following training?

FTEs with MSW degree (master in social work). _____.

FTEs with BSW degree (bachelor in social work) _____.

FTEs with BA degree. _____

FTE with other professional training. _____ SPECIFY

Note: Social workers can have more than one type of formal training leading to more than total FTEs under 20a. Indicate if a person has dual training.

3. a. Do you have designated social work aides/assistants?

____ yes

____ no

- b. If yes, how many FTEs are designated as sw aides. _____

Describe social work aide function.

4. Which of the following general functions are done by the social work program.

Yes, Lead	Yes involved	No	
___	___	___	a. Preadmission interviews.
___	___	___	b. Admission interviews.
___	___	___	c. Roommate assignment
___	___	___	d. Roommate problems
___	___	___	e. Table assignment
___	___	___	f. Table assignment problems
___	___	___	g. Resident council
___	___	___	h. Family council
___	___	___	i. Resident possessions/theft/security
___	___	___	j. Family counseling
___	___	___	k. Conduct direct resident counseling/mental health programs
___	___	___	l. Conduct staff mental health programs/counseling
___	___	___	m. Grief issues/bereavement program
___	___	___	n. Advance directives/end-of-life care
___	___	___	q. Financial arrangements with family
___	___	___	o. Fund raising
___	___	___	p. Assist residents in managing their funds
___	___	___	q. Assist with Medicaid applications
___	___	___	r. Other SPECIFY
___	___	___	s. Other SPECIFY

5. To what extent do social workers participate in care planning?

___ All or almost all the time.
 ___ Sometimes
 ___ Seldom

6. a. Is there a family council in facility?

___ yes
 ___ no

b. If yes, how often does family council meet?

___ more than once a month
 ___ once a month
 ___ more than once a quarter, less than once a month
 ___ less than once a quarter

c. How many people typically attend family council meetings? _____

7. Are any of the following formal relationships established between the facility and outside agencies?

- ☐ With senior centers
- ☐ With mental health program
- ☐ With community transportation organization.
- ☐ With one or more public schools –elementary or secondary
- ☐ With one or more community colleges
- ☐ With Alzheimer's association
- ☐ Other SPECIFY
- ☐ Other SPECIFY
- ☐ Other SPECIFY

8. Is there a formal mechanism to deal with roommate problems, complaints?

- ☐ yes DESCRIBE
- ☐ no

9. a .Is there a formal mechanism to deal with lost or stolen property?

- ☐ yes DESCRIBE
- ☐ no

if yes, are any of the following true:

- ☐ facility takes inventory of resident's valuables
- ☐ if resident property is missing or damaged, facility will restore it.

Yes No Under some circumstances

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | large articles of clothing–e.g. over \$25 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | small articles of clothing |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | jewelery, watches etc |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | toilet articles–perfume, shampoo, etc |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | dentures, glasses, hearing aides, small equipment |

IF SPECIAL CIRCUMSTANCES, DESCRIBE.

10. Is resident clothing laundered:

- ☐ in resident-specific batches
- ☐ along with other residents' laundry

11. Are residents:

yes no

- ☐ ☐ a. Cautioned against bringing any articles of value to the facility.
☐ ☐ b. Required to put name labels in their clothing

12. Has the social work department developed a program to assist with discharge of residents?

- ☐ yes, but only for planned short-term (Medicare) residents
☐ yes, for all residents.
☐ no

a. IF YES, DESCRIBE

b. Have any residents left in the past three months due to the assistance of the social work department.

☐ yes IF SO DESCRIBE ONE.

☐ no

13. Do social workers lead any of the following resident or family groups?

- ☐ General family support groups.
☐ Dementia caregiver groups
☐ Family education groups
☐ Resident groups for depression.
☐ Other SPECIFY
☐ Other SPECIFY

14. a. Does any formal complaint mechanism exist for residents and family?

☐ yes
DESCRIBE

☐ no

b. What mechanism is used to respond to resident or family complaints?

15. What in the social work program makes you most proud—seems to contribute most to quality of life.