

Oncology social work is the primary professional discipline that provides biopsychosocialspiritual services to patients, families, and significant others facing the impact of a potential or actual diagnosis of cancer. Oncology social workers are knowledgeable about cancer and about the biopsychosocialspiritual and other effects of disease, treatment, and survivorship. The scope of oncology social work includes clinical practice, education, advocacy, administration, policy, and research.

The Board of Oncology Social Work (BOSWC) administers and confers the Certified Oncology Social Worker (OSW-C®) program to:

1. Validate the Licensed Social Worker's qualification, knowledge, and effective practice in the oncology-specific area of social work practice.
2. Provide nationally recognized, oncology-specific certification for the specialized knowledge and demonstrated practice ability of the certified social worker.
3. Represent to clients and colleagues the certificant's commitment and practical experience in the field of Oncology Social Work.
4. Promote public safety by establishing minimal standards for advanced oncology social workers.
5. Provide public acknowledgment that the professional has gone beyond the minimum expectations for professional practice in the specialty.

The program credentials individuals that have the knowledge, skills, and abilities (KSAs) to effectively practice at the advanced level (master's prepared) of licensed oncology social work. The OSW-C® eligibility criteria for initial and maintenance of certification stems directly from and is consistent with the defined purpose of the credential. To ensure the OSW-C® credential represents current practice, the program is grounded to a list of knowledge, skill, and ability (KSA) statements that comprise the role of the social worker in an oncology setting. This list—the OSW-C® Competencies and Domains—presents the Knowledge, Skills, and Abilities required for effective professional practice at the advanced level of social work in an oncology setting. The domains and competencies are based on current research and have been reviewed and validated by content experts for relevance to both adult and pediatric practice.

OSW-C® Core Competencies and Domains

Domain 1: Clinical Assessment and Intervention

1.A Clinical Assessment

1. Conduct a comprehensive assessment of patient, caregiver, and/or family biopsychosocialspiritual needs and ongoing assessment of coping
 - a. Assess and foster patient, caregiver, and/or family coping, resiliency, and adaptation skills
 - b. Assess patient/spouse/family/caregiver(s) understanding of treatment options (diagnosis, proposed treatment, side-effects, outcomes, etc.)
 - c. Assess patient risk for abuse/neglect and refer for appropriate services
 - d. Assess, refer, and/or treat depression and anxiety.
 - e. Assess patient/caregiver ability to adhere to a treatment regimen
 - f. Assess for ethical/moral dilemmas within patient care and present/advocate within the medical team.
 - g. Collaborate in the assessment of decision-making capacity
 - h. Conduct substance use risk assessment and refer for appropriate services
 - i. Conduct spiritual assessment and refer for appropriate services (Include in B as part of comprehensive and ongoing psycho-social assessment)

2. Promote and facilitate communication between patient, caregiver(s), and/or family—including talking to their children about cancer, talking to a child with cancer about their disease, and talking to siblings of a child with cancer about cancer.
3. Conduct suicide and homicide risk assessment and refer for appropriate intervention/services and/or create safety plans as necessary
4. Know processes for and be able to properly document clinical encounters; ensure all clinical encounters are documented

1.B Clinical Intervention

1. Provide emotional support
2. Facilitate goals of care/serious illness conversations.
3. Assist patients and families in advance health care planning and decision making, including long-term care planning and/or Advance Directives and POLST.
4. Provide ongoing assessment and monitoring of patient, caregiver, and/or family psychosocial needs, coping, role changes / transitions, and the impact of the treatment plan.
5. Provide supportive care, counseling and skill building to patient, couples, and family regarding adjustment to and coping with cancer diagnosis, treatment, side effects, late effects, and/or end of life
6. Utilize theories of clinical practice and their applications to OSW practice to provide support and counseling including: Person-in-Environment, Systems, Acceptance and Commitment Therapy, Ecological Approach, Normalizing, Crisis Theory, Psychoeducation, Psychodynamic, Ego Psychology, Attachment, Humanistic (Maslow), Family Systems/Life Cycle Perspective (Carter & McGoldrick), CBT, Meaning-Making, Psychosocial Dev. (Erikson), Narrative, Play Therapy, Motivational Interviewing, Trauma, Dignity Model, Couples, Witness Positions, Grief, Loss Bereavement Theories (Continuing Bonds, Anticipatory and Disenfranchised Grief, Ambiguous Loss, Context of Awareness, DBT, CBT, problem solving, and trauma informed care.
7. Maintain knowledge of and/or ability to provide crisis intervention / crisis counseling
8. Facilitate communication between family members and medical care providers
9. Effectively work with the support of other psychosocial team members, such as child life specialists, psychologists, expressive (art/music/movement) therapists, oncology schoolteachers, financial navigators, palliative care providers, and bereavement specialists.
10. Facilitate support groups, including psychoeducational, experiential (e.g., mindfulness stress reduction) and psychotherapeutic groups
11. Help patients/family/parents manage mental health conditions that impact treatment adherence
12. Use age-appropriate tools (e.g., Distress Thermometer) to screen patients before and during treatment for psychosocial and/or behavioral health concerns
13. Offer/Provide counseling and support on, but not limited to, issues related to intimacy, body image and changes, fertility, and sexual health (as appropriate given age and development of patient)
14. Coordinate, implement, and evaluate distress screening procedures per established model or accreditation recommendations/requirements.
15. Teach patients, families, and/or caregiver(s) skills to manage disease and symptoms
16. Counsel and assist patients, families, and/or caregiver(s) with work-related issues, such as working during treatment, disclosure of diagnosis, talking with coworkers, returning to work after leave, workplace rights, and disability.
17. Mediate conflict within families and among staff and patients
18. Assist and counsel patients to help them make informed treatment decisions
19. Be aware of the DSM criteria and knowledgeable of its application in oncology social work.
20. For those in working with pediatric/adolescent patients/families
 1. Counsel and assist patients and family with school-related issues, such as attending school while in treatment, setting up homebound instruction, disclosure to school staff and students, educating staff on diagnosis and age-appropriate language for classroom, educational rights, school reentry, and school supportive resources, etc.
 2. Transition to Survivorship Program and/or transition of adult based care.

Domain 2: Care Coordination

- A. Promote equitable access to care for vulnerable populations (e.g., persons of color, LGBTIQ+, young adult, elderly, disabled, Veterans, low income)
- B. Practice cultural awareness, humility, self-reflection, and leadership on teams
- C. Assist in developing a knowledge of and providing information for referrals to community and public resources for patients and families at local, regional, and national levels
- D. Facilitate access to and/or educate patients and families about community and public resources (including but not limited to mental health services and support groups, in-home care services, legal aid, transportation services, financial and benefits assistance programs such as SSDI/SSI, FMLA, food banks, etc.)
- E. Coordinate access to cancer care for patients with underlying mental health issues
- F. Facilitate patient and family ability to navigate the medical system
- G. Coordinate and facilitate family meetings with interdisciplinary team
- H. Provide navigation services in coordinating patient care between service lines.
- I. Arrange, facilitate, and/or support transition of patient care from oncology to the appropriate level of care in the community (e.g., primary care, hospice, in-home care, extended care, or rehabilitation, etc.)
- J. Maintain current knowledge of oncology case management practices and guidelines.
- K. Assess patient/family financial toxicity and barriers to care and provide resources/referral when appropriate
- L. Arrange or make referral for transportation services.
- M. Arrange or make referral to appropriate support services for patient/family lodging while undergoing cancer treatment
- N. Arrange/Coordinate for use of medical translators for patients/families who speak languages other than English or are hearing-impaired.
- O. Participate in transitions of care including discharge planning, survivorship, and end of life care.
- P. Provide referrals/information for health and wellness services for patients and families (e.g., massage, yoga, meditation, stress management) ensuring that all survivors have information on full range of wellness services provided on-site or in the community.
- Q. Provide school intervention/communicate with schools regarding treatment impact on school participation, as appropriate
- R. Advocate/Navigate Barriers to access to care and patient rights, dignity, and confidentiality.
- S. Monitor and coordinate neuropsychological evaluations for deficits and promote social skills training as appropriate.

Domain 3: Professional Advocacy and Political Action

- A. Utilize and provide peer consultation and supervision to facilitate learning and continued professional development
- B. Recognize, acknowledge, and actively address issues of power, privilege, and implicit bias in institution or agency
- C. Organize, advocate for, facilitate, and/or participate in professional activities that elevate persons of color and other minority/oppressed groups (e.g., participate in a Diversity, Equity and Inclusion initiative at your institution or agency)
- D. Support colleagues who experience discrimination, racism, micro-aggressions, or any other form of social injustice from patients, families, agency, health care system
- E. Advocate and inform lawmakers about cancer-related laws, policies, proposed bills, or funding.
- F. Advocate for oncology and healthcare policy issues by participating in community legislative process, writing letters, educating lawmakers, calling legislative offices, etc.
- G. Participate in advocacy efforts and education related to the elevation and growth of the oncology social work role within the medical setting.
- H. Work within the scope of and guidelines in the NASW Code of Ethics.

Domain 4: Patient and Staff Education and Advocacy

- A. Lead or participate in interdisciplinary team meetings, rounds, tumor board, patient care conferences
- B. Assist medical team in recognizing/understanding patient/family psychosocial history and behaviors in the context of family history/trauma/social determinants of health
- C. Identify ethical dilemmas and utilize ethics consultation service (including but not limited to bioethics, competing interests, equitable access, autonomy/self-determination, and resource allocation)
- D. Develop and/or coordinate support programs to meet specific needs of vulnerable groups (e.g., persons of color, LGBTQ, Veterans, disabled persons)
- E. Provide psychoeducation to patient, family, and/or caregiver(s) pertaining to the disease and treatment
- F. Develop patient education materials on biopsychosocialspiritual topics for patients and families
- G. Be aware of/advocate for/conduct patient focus groups to assist organization in improving service delivery
- H. Be aware of/advocate for/participate in the creation and implementation of patient education and wellness programs such as smoking cessation workshops, self-support / relaxation skills such as mindfulness meditation, guided imagery, drug use, nutrition, etc.

Domain 5: Organizational Support and Service

- A. Facilitate agency/organization compliance with biopsychosocialspiritual care guidelines (e.g., Commission on Cancer Patient-Centered Standards of Care, NAPBC, QOPI standards, NCCN guidelines, APOSW Psychosocial Standards of Care)
- B. Participate in or report to Cancer Committee; Act as psychosocial services coordinator on Cancer Committee.
- C. Create, evaluate, and participate in program improvement initiatives of social work programs or services to best meet the need of patients, caregivers, and/or families.
- D. Participate in the design and/or conduct of research that demonstrates oncology social work contributions to colleagues, oncology team, and improvements in cancer care
- E. Promote team building, cohesion, and staff support and retention.
- F. Offer in-services, trainings, conference presentations and community education programs on psychosocial issues related to cancer, cancer care, and oncology social work
- G. Offer peer consultation and clinical supervision
- H. Chair or serve on organizational and/or oncology-related committees and task forces, such as a strategic planning committee; Diversity, Equity, and Inclusion initiatives; quality assurance/process improvement initiatives; ethics committee; crisis management team; or other leadership initiatives/committees, PFAC
- I. Support, participate in, and/or conduct organizational / community needs assessment
- J. Seek and apply for grants to support programs at institution or agency
- K. Lead and/or participate in cancer preventions and education activities such as cancer screening and health fairs designed to address needs within the community.
- L. Support staff and colleagues experiencing compassion fatigue, vicarious trauma, and/or moral distress
- M. Offer self-care programs or activities for staff and colleagues (e.g., mindfulness exercises), or facilitate opportunities such as chair massages, reflexology, yoga class, loss support group, etc.
Plan, implement, and coordinate volunteer participation in oncology-related activities such as patient peer support and patient advisory councils

Domain 6: Professional Education

- A. Participate in ongoing oncology social work professional training and continuing education.
- B. Maintain membership with professional associations (e.g., AOSW, NASW, APOS, APOSW, SWPHN etc.)
- C. Represent agency/organization on local, regional, or national oncology-related committees/task forces.
- D. Provide field placement opportunities, MSW Intern Practicum instruction, academic advising, practicum student supervision, or licensure supervision, dissertation advising. (For purposes of the OSW-C Demonstrated Practice requirement, these activities must be at the MSW level, in oncology social work, and at least one (1) semester in duration.)

- E. Serve on boards and committees of professional organizations (e.g., BOSWC, APOSW, APOS, Association of Oncology Social Work, FSOSW, Social Workers in Hospice and Palliative Care Network)
- F. Serve on boards and committees of oncology-related non-profit organizations, community advisory boards, CSWE-accredited social work programs advisory boards (e.g., ACS, LLS, AONN)
- G. Be knowledgeable about and able to participate in media and community outreach efforts about psychosocial issues and services offered at your cancer center, program, agency
- H. Write and submit reports, articles, or book chapters on oncology social work and psychosocial issues related to cancer
- I. Plan or participate in community events (e.g., health fairs, cancer prevention efforts, cancer awareness or wellness programs, Cancer Survivorship Day)
- J. Write op-ed articles, fact sheets, brochures, blog posts, etc. that educate the public about the needs and experiences of people affected by cancer
- K. Teach as part of oncology social work BSW, MSW, and Post-Graduate curriculum or continuing education program at universities
- L. Develop educational programs/professional development opportunities for oncology social workers, social work students, other clinical social workers, etc. specific to oncology social work skills and topics.
- M. Provide educational presentations to healthcare providers within organization and/or on a local, state, or national level.

Sources:

Establishing core competencies, opportunities, roles, and expertise for oncology social work

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