



# THE FIDELITY OF A SOCIAL WORK INTERN INTERVENTION

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## Abstract

**Objectives:** A social work intern (SWI) was placed in an academic pediatric dental clinic at NYU College of Dentistry (NYUCD) to address barriers to care and complex treatment needs with the goal of increased patient utilization of dental care. This study investigated the fidelity of the SWI intervention. **Methods:** SWI placement was evaluated using the treatment fidelity criteria developed by Dane and Schneider (1998). The SWI calendar, log of interactions, a semi-structured exit interview, and self reports were analyzed for: adherence, exposure, quality of delivery, participant responsiveness, and program differentiation. **Results:** 202 patients had an interaction logged with the social work intern; of these, 34 were referred from NYUCD and 168 from community outreach programs. Rationale for referral and frequency of referral did not meet intervention expectations (adherence, exposure). Quality of delivery was moderately met with time as leader preparedness improved. Levels of participation did not meet intervention expectations as referrals were low (participant responsiveness), impacting the ability to appropriately evaluate program differentiation. **Conclusions:** This intervention did not have strong fidelity per Dane & Schneider (1998) criteria. Opportunities for improvement were identified for subsequent SWI placements.

## Introduction

Social Work Intern Goals
Develop confidence around being a professional social worker
Practice engagement skills and clear communication with patients to assess patient satisfaction
Identify and provide appropriate resources and referrals to clients
Understand general dentistry/treatments offered within the dental school and how state and federal policies affect services to patients
Appropriately document patient interactions/complains within a medical database
Utilize supervision as a resource to discuss social work practice and patient experiences
Address patient scheduling, translation, insurance, and transportation needs
Assist the dental team with obtaining medical clearance and coordination of care between specialty providers
Answer simple patient questions, connect patient to dental professionals as needed for more medically complex questions, improve patient health literacy

Phase I:  
Sept. 2021

- Onboarding of social work intern
- Training provided (Smiles for Life, HIPAA, Waste Management, Script)
- Social work intern cell phone not enabled

Phase II:  
Oct. - Dec. 2021

- Cell phone enabled week of 10/8/21
- Patient Log Created (Version #1)

Phase III:  
Jan. 2022

- Patient Log Modified (Version #2)
- Script for communicating with outreach patients updated to improve tracking of outcomes

Phase IV:  
Feb. 2022

- Patient Log Modified (Version #3) -
- Review of reports of patients with outstanding treatment

Phase V:  
Mar. 2022

- Separate log created for community outreach patients and NYU patients (Version #4)
- Social work intern intake assessment developed

Phase VI:  
Apr. 2022

- Post-internship interview conducted

## Methods

Call Log Criteria			
Patient Sex	Date of Interaction	Referral Source	Mode of Referral (i.e., NYU, Outreach Site)
Dental Home	Language Spoken/Translation Needed	Mode of Contact (i.e., phone, text, email)	Number of Call Attempts and Length of Call/Voicemail Left
Reason for Interaction (i.e., multiple failed appointments, complex needs, caries identified during outreach visits, etc.)	Barriers to Care (i.e., behavior, transportation, finances, language, health literacy, competing priorities)	Discussion held with parent	To-Do List and Follow-Up Dates

### Social Work Intern Semi-Structured Exit Interview

- Describe your overall experience working at NYUCD Pediatric Dental Clinic.
- Describe the training provided during the beginning of the internship. Was this adequate? Why or why not? (adherence, quality of delivery)
- Were the faculty, dental residents, and/or outreach team readily available to answer any questions you may have had regarding your internship?
- Do you believe the quality of the work during this internship aligned with your advisors' planned delivery? (adherence)
- What other tasks, besides the ones assigned, do you think a social worker can do in the field of pediatric dentistry?
- How would you improve or modify the internship?
- How would you rate your skill acquisition? (*listed in SWI Goals*)
- As this was a pilot program, is there anything you think would be helpful for someone coming into this role in the future to know?

## Results

Fidelity of the Intervention (Dane and Schneider, 1998)		NYU Application	
Criteria	Description	Evaluation	Results and Analysis
Adherence	The extent to which specified program components were delivered as prescribed in program manuals	Quantitative and qualitative self-report of onboarding and scheduling, communication with stakeholders, the intervention timeline, analysis of the log maintained by the SWI and outreach team, and the semi-structured exit interview	<ul style="list-style-type: none"> <li>- Training and onboarding were delivered as planned, except for a delay in setting up a secure cell phone line</li> <li>- Patients identified as having caries on outreach were consistently referred to the SWI; however, communicating via text, restricted conversations</li> <li>- Referrals from the UG and PG clinics were low</li> </ul>
Exposure	An index that may include any of the following: (a) the number of sessions implemented; (b) the length of each session; (c) the frequency with which program techniques were implemented		<ul style="list-style-type: none"> <li>- Over 200 patients seen on outreaches were contacted by the SWI, mostly via text message, between September 7, 2021 and March 11, 2022</li> <li>- A total of 34 patients from the PG or UG clinic were contacted between September 7, 2021 and March 30, 2022</li> <li>- Total number of referrals were less than expected by advisors</li> </ul>
Quality of Delivery	A measure of qualitative aspects of program delivery that are not directly related to the implementation of prescribed content, such as implementer enthusiasm, leader preparedness, global estimates of session effectiveness, and leader attitudes toward program	Onboarding and scheduling, evaluations with the social work intern and dental advisors, self-report, semi-structured exit interview	<ul style="list-style-type: none"> <li>- The SWI felt that training was adequate, but recommended to reduce redundancy for onboarding of future interns</li> <li>- Quality of delivery was moderately met with time as leader preparedness improved</li> <li>- SWI was adequately able to complete care coordination after intervention, but fell short of probing further into barriers to care, social determinants of health, and home care practices</li> <li>- Although referral rates were low, the intervention was effective at improving scheduling</li> </ul>
Participant Responsiveness	A measure of participant response to program sessions, which may include indicators such as levels of participation and enthusiasm	The log maintained by the SWI, provider satisfaction surveys and self-report by the dental advisor	<ul style="list-style-type: none"> <li>- Levels of participation did not meet intervention expectations as referrals were low</li> <li>- Provider satisfaction was collected and reported in "Resident, Faculty, and Staff Satisfaction with a Social Work Intern Intervention" by Mukti Prema, DDS</li> </ul>
Program Differentiation	A manipulation check that is performed to safeguard against the diffusion of treatments, that is, to ensure that the subjects in each experimental condition received only planned intervention	Self-report by the dental and social work advisors and the outreach team at NYUCD	<ul style="list-style-type: none"> <li>- Unable to appropriately evaluate program differentiation as number of referrals were low</li> <li>- Patients at school based settings had access to school-based social workers</li> </ul>