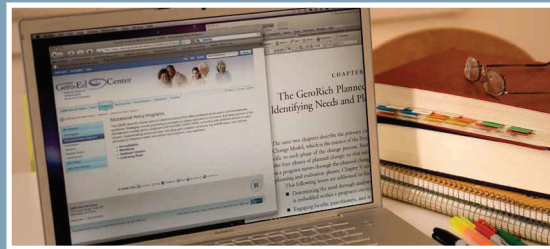
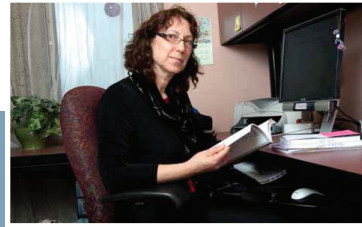


National Center for Gerontological Social Work Education (Gero-Ed Center)

PROGRAM REVIEW



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About the John A. Hartford Foundation

The John A. Hartford Foundation is a private philanthropy working to improve the health of older Americans. Based in New York City and founded in 1929 by the family owners of the A&P grocery chain, after three decades of championing research and education in geriatrics, the Foundation now pursues opportunities to put geriatrics expertise to work in all health care settings. The Gero-Ed program is consistent with Hartford's former strategy of building geriatrics academic capacity to improve the education of health professionals. Hartford's commitment to social work, which began in 1988, has resulted in 31 grants totaling \$65M.

EXECUTIVE SUMMARY

Though this report is about a single professional group within the health care and social service systems—social work education—it provides an example of the good that can be done by foundations. It describes how the John A. Hartford Foundation, through deliberate and sustained yet flexible support, was able to identify an impending workforce shortage (that of geriatric social workers) and work, along with this professional community, to meet the care coordination needs of our country's aging society. The significantly improved capacity of the field to produce gerontologically knowledgeable social workers now has a self-perpetuating momentum. It also comes just in time to meet the demands created by the federal Affordable Care Act rolling out over the next couple of years. The law's implementation will significantly increase the need for professionals trained in care coordination, as geriatric social workers are.

Hartford's Geriatric Social Work Initiative engaged key organizations' leaders in generating solutions, inspiring updated standards, training professional educators, and changing the social work education community's culture for permanent adoption.

As a result, frail older adults—now and in the future—should be better able to secure the help they need because a markedly expanded cadre of gerontological-prepared social workers are entering the workforce.

The three overall changes created by the Council on Social Work Education with Hartford support are:

- **A new norm has been established**, whereby nearly all social work professionals are expected to graduate with basic gerontological skills;
- **A critical mass of educators and social work schools have the capability to provide the needed gerontological training**, (curricula, trained faculty, standards, etc.); and
- **Ageing has been embedded in the fiber of the social work field, reaching self-perpetuating momentum.**

The report also suggests additional opportunities for greater influence.

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BACKGROUND

In 1998, the John A. Hartford Foundation was one of the few national funders with a dedicated focus on the health and health care of older adults. While many of the national foundations were addressing important problems of the day, Hartford took a proactive approach to grantmaking, setting its sights to the future and anticipating issues that might be mitigated if early interventions were devised.

Prior to the Geriatric Social Work Initiative, most of Hartford's programmatic investments had been dedicated to training doctors and nurses to meet the needs of the growing aging populations. Hartford then recognized that the complexity of the health care system, especially for frail older adults who transition across various settings of care, demanded the expertise of yet another professional group: social workers. This recognition was later affirmed in "A Blueprint for the New Millennium," published by the Council on Social Work Education in 2001: "In a profile of contemporary social workers and their roles in the profession, it was found that about 16 percent of baccalaureate social workers (BSW) and only 4 percent of masters of social work (MSW) graduates work specifically in services to the aged ... Further, a survey of members of the National Association of Social Workers (NASW) found that 62 percent of respondents, regardless of specialty, indicated that they needed aging knowledge..."¹

The program described in this review, alternatively known as Gero-Rich and Gero-Ed, was initiated in 1998 by the John A. Hartford Foundation (JAHF) with a grant to the Council on Social Work Education (CSWE). Over a 15-year period, the Foundation dedicated more than \$13 million to the Council's efforts to assist its members—primarily schools of social work around the country—to better prepare their graduates to appropriately care for older clients.

Gero-Rich/Gero-Ed is one of three major components of the Foundation's Geriatric Social Work Initiative.² The Initiative had a broader goal of improving the clinical training, didactic education, and advanced scholarship aspects of academic social work focusing on the older population. As Co-Principal Investigators, Drs. Nancy Hooyman, professor in gerontology at the University of Washington, School of Social Work, and Julia Watkins, former CSWE executive director, have been responsible for the following program. Dr. Darla Spence Coffey, CSWE's current president, now leads the effort with Dr. Hooyman.

¹CSWE, *Strengthening the Impact of Social Work to Improve the Quality of Life for Older Adults & Their Families: A Blueprint for the New Millennium*, March 2001, p. 1.

²"The aim of the Geriatric Social Work Initiative is to increase the competence of social workers to improve the care and well-being of older adults and their families." 2009 JAHF Annual Report, p. 11. For more information contact the John A. Hartford Foundation, 212-832-7788, www.jhartfound.org

“The CSWE Gero-Ed Center prepares social work faculty and students to meet the demographic realities of our aging society.”

—www.cswe.org

An outline of the major sequential conceptual steps taken by the Foundation, which led up to the Gero-Ed/Gero-Rich program, are captured in Appendix A.

THE PROGRAM

The John A. Hartford Foundation (JAHF) provided five consecutive awards, each building on the successes and lessons of the prior one, to the Council on Social Work Education (CSWE). The awards ranged from less than \$600,000 to more than \$5.2 million, with durations from two to six years. (See Appendix B for the specifics.) CSWE was and remains the acknowledged national home for social work education in the United States. Among other strengths, CSWE: 1) has direct communication with all accredited U.S. social work schools; 2) is responsible for the development of academic standards and tools to help its members meet those standards; and 3) provides outreach programs for continued improvement. It is also the sole accrediting body for social work schools. However, like many societal institutions in 1998, its programs, policies, and communications had not yet reflected the country’s changing demographics toward an increasingly older population.

“...[the number of people] aged 65 and older has been increasing as a percentage of the total U.S. population. The older population represented 8.1% of the total population in year 1950. That percentage increased to 12.8% in 2009 ... and is projected to reach 20.2% in 2050. Stated another way, one in five persons in 2050 will be aged 65 or older.”

—Congressional Research Service, The Changing Demographic Profile of the United States, March 2011

As will be detailed in this brief, CSWE has now integrated gerontology into its core mission, including establishing one of its four “centers” as a Gero-Ed Center.

Hartford’s five grants to CSWE shared a common goal: to promote the gerontological competence of all graduates from BSW and MSW social work programs nationwide. With this clear outcome guiding the program from its inception, the grants awarded built one upon the other, moving from a problem identification stage, through curricular and faculty development phases, and has concluded with what will likely be a permanent home for the continued strengthening of social workers’ expertise in meeting the needs of older adults.

The five grants can be described as follows.

- *Grant 1:* Support to CSWE for an assessment of the social work education field's preparedness for an aging society. The 2001 result was a "Blueprint for the New Millennium" to guide the field toward stronger gerontological training.
- *Grant 2:* In order to create the preferred future of a better aging-prepared social work force, CSWE addressed the shortage of faculty prepared to teach about aging. It also supported the development of curricular models and tools to support social work schools as they prepared to address the country's demographic shift. Grant 2, therefore, was to markedly increase the number of faculty in baccalaureate and masters programs with the skills to incorporate aging into their curricula (*the SAGE-SW Faculty Development Institutes*).
- *Grant 3: The Gero-Rich Curriculum Development Institutes* addressed the need for both tools and culture change within the SW schools. A plan incorporating not only content, but a deliberately applied approach to change processes, was conceived and executed.

What is particularly interesting from a funder perspective is that the program included several mutually reinforcing and deepening mechanisms that inspired, introduced, then provided the tools to embed and ensure continued positive change.

- *Grants 4 and 5* established and strengthened a *Gero-Ed Center* within CSWE—the final piece in establishing a permanent infrastructure to support SW education's continued integration of aging competence. Other Center initiatives funded increasing gerontological content in the advanced practice areas of health, mental health, and substance use; specialized gerontological structures (e.g., concentrations, minors); and experiential learning activities with older adults to recruit BSW students to aging placements and careers.

With the support of Hartford and guidance of the social work education leadership, older adults in the U.S. have a greater likelihood of getting the help they need from social workers. The program has influenced more than 300 schools of social work, introducing the importance of gerontological competencies and assisting faculty members to be more skilled providers of aging content.

What is particularly interesting from a funder perspective is that the program included several mutually reinforcing and deepening mechanisms that inspired, introduced, and then provided the tools to embed and ensure continued positive change.

WHAT DIFFERENCE HAS GERO-RICH/ GERO-ED MADE?

With the Hartford-supported Faculty Development Institutes (FDI) and Curriculum Development Institutes (CDI) led by the Council on Social Work Education:

1. **A new norm has been established**, which incorporates the expectation that professional social workers will have received gerontological education.
2. **The social work education infrastructure has been expanded** to include faculty, curricula, and standards to meet the needs of the aging society.
3. **A self-perpetuating system of expanding gerontological capacities is likely**, since a critical mass of social work education programs have been involved in the Initiative.

These are described in greater detail below. **Overall, as a result, more frail older adults across more sections of the country will be able to better understand and have access to the set of supports they will need.** Only future data collection can confirm this assertion; yet, as described below, there is considerable evidence supporting this conclusion.

1. **A NEW NORM HAS BEEN ESTABLISHED.** The Initiative changed the core expectations of social work education so that the graduates of social work schools are expected to be able to work with older adults and their families.

Concrete Outcomes:

- *Curricular standards* for geriatric content in social work education were developed and endorsed.
- One out of every 10 social work programs in the country participated in the Gero-Rich program. Models relevant to diverse types of social work baccalaureate and masters schools are available for replication.
- 143 faculty from 69 social work education programs completed CDIs.
- 95 percent of the schools with participating faculty in CDIs have infused gerontology competencies into three or more generalist courses.

2. EMERGING PRACTITIONERS EQUIPPED TO MEET THE NEEDS OF OLDER ADULTS. The Initiative helped a critical mass of faculty to be able to teach aging competencies and content in core and specialized courses.

Concrete Outcomes:

- 95 percent of CDI programs infused gerontology content into required generalist class syllabi.
- MSW graduates interested in working with older adults nearly doubled, from 37 percent to 73 percent³.
- 59 percent of participating instructors teaching required courses adopted Gero-Rich competencies.
- 83 percent of ALL students graduating from participating schools are better prepared to care for older clients (per school's self report).
- All aging curricular social work materials (more than 300) are available online through the Gero-Ed website.
- Faculty teaching techniques were refined to those that were proved to work.

3. CREATED MOMENTUM FOR SUSTAINED CARE IMPROVEMENTS.

Concrete Outcomes:

- The Council on Social Work Education (the field's accrediting body) requires that social work education programs take account of the demographic context and has communicated an expectation that social work education include gerontological competencies, embedding it into the fabric of the field.
- CSWE committed to maintaining the Gero-Ed Center as well as the Gero-Ed track at its Annual Meetings.
- 93 percent of schools sustained their Gero-Rich programs four years after the Initiative completed its funding.
- Three of four social work textbook authors increased gerontology content.
- Evidence of increased interest in gerontology with over 107,000 hits to the Gero-Ed website (since 2010) to access gerontological teaching resources

³Per CSWE faculty survey.

CASE STUDY

Debra Fromm Faria: Nurturing Gerontological Expertise

When Debra Fromm Faria began teaching undergraduate and graduate level courses in social work more than 20 years ago, she brought a passion for working with older adults that she quickly learned was shared by few of her colleagues or students.

“I always felt so alone,” she recalls. “There were maybe one or two students who wanted to work with older people. I felt isolated.”

Faria, co-director of the Center for Excellence in Gerontological Social Work and director of field education for the social work department at the College at Brockport, State University of New York, doesn't feel alone anymore. And she credits programs funded by the John A. Hartford Foundation with helping to change the culture of social work.

Faria coordinates the MSW Graduate Certificate program in Gerontological Social Work, a program that grew out of funding from a Hartford Specialized Gerontology Program grant and incorporates at its core the Hartford Partnership Program for Aging Education (HPPAE) model.

But her partnership with the Hartford Foundation dates back to one of the first Hartford Geriatric Enrichment grants, when Brockport received \$60,000 in 2002-04 to analyze curricula and set up a training program in geriatrics for faculty across three programs and two colleges (Nazareth College in Rochester, N.Y., benefitted as well.)

“What we realized is that faculty didn't have up-to-date knowledge,” Faria recalls.

Through her involvement with the Council on Social Work Education (CSWE), Faria met Nancy Hooyman, professor in gerontology at the University of Washington who has helped guide the Gero-Rich/Gero-Ed program since its inception, and other leaders in the field.

Faria and her colleagues continued to build on what the initial Gero-Rich grant started, meeting monthly for dinner and expanding their networking. “The Gero-Rich money profoundly impacted our curriculum in many ways,” Faria says.

Additional funding through HPPAE helped Brockport leverage other grants, including federal dollars, to develop a Center for Excellence in Gerontological Social Work as a subcontractor for the University of Rochester Medical Center.

And through the Center for Excellence, Faria and her colleagues were able to develop and implement the graduate certificate program and continue the standardized patient simulation for HPPAE students. This year, Faria had 14 students earn the graduate certificate in gerontological social work as part of their MSW.

Faria says one of the strengths of the Hartford Gerontological Social Work Initiative is that it focused on sustainability from the beginning.

“We developed some things with the Hartford money, but then we've continued to build on it—not only sustain it, but develop it further—through these other funding streams,” she says.

- CSWE has institutionalized gerontology statistics collection from its member schools.
- Funds for expanded gerontological training were secured from non-Hartford sources (\$997,976).

The success of the Gero-Rich/Gero-Ed programs has begun to spill over to other health professions as well. Three nursing curricular change initiatives have requested consultations with the Gero-Ed Principal Investigator, in order to emulate the gerontological curricular uptake in this profession's programs.

The Foundation also supported complementary work to ensure the growing credibility and utility of geriatric social work through support of current and future academic faculty dedicated to creating new geriatrics social work knowledge. Another component of the Initiative was dedicated to the practicum (field study) portion of social workers' student training. The administration of this field component, which was developed and expanded under the New York Academy of Medicine/Social Work Leadership Institute and known as the Hartford Partnership Program for Aging Education (HPPAE), will be moving to the CSWE. This will consolidate the leadership of both the didactic and field training components of geriatric social work education into one coherent Gero-Ed Center. Coordination across the components was supported and celebrated by Hartford from the program's initiation.

WHAT WERE THE KEY FACTORS UNDER THE FOUNDATION'S CONTROL CONTRIBUTING TO THE PROGRAM'S SUCCESS?

The Foundation and its partner grantee's leadership made deliberate and evolving decisions that support the program's success.

Anticipated Future Issues which could be Mitigated with Current Investments

- Because of its dedicated focus to the health needs of older adults, Hartford, supported by the expertise of scholars and practitioners, was able to recognize the need for gerontological health professionals who could help older adults and their families navigate the health care and social service systems.

Sustained Commitment.

- Under the leadership of its Trustees, the Foundation maintained a dedication (15 years) to the program's goals. Its support has been consistent from the Foundation's initial recognition of the issue (a workforce unprepared for its future demands) through what many would accept as the tipping point (including a critical mass of schools and faculty involved and a Gerontological Center embedded in the accrediting body's key programs and structures).

Listened and Collaborated.

- From the start, the project collaborated with the target community (social work educators). For example, it was the SW education leadership that recognized that infusing aging into core courses rather than a set of separate courses would be the only way to prepare an adequate number of social workers to meet the needs of the growing number of elderly. Hartford listened to their recommendation and supported that approach. Interestingly, after gerontology competencies were infused into required courses, the Gero-Ed Center funded a small number of programs to develop more specialized aging content. Program leaders assert that they had the infrastructure and support to do so given the success of their infusion strategies.

Partnered with the key credible organization.

- Hartford sought the organization respected by the target community, shaped the program to be congruent with CSWE's culture and practices, and provided financial support to the organization as it increasingly embraced the mission.

Allowed Flexibility.

- Hartford recognized the importance of local culture and needs rather than imposing one model of change from above. As the social work field values the variety of strengths emanating from local decision-making, the Hartford bottom-up approach to programmatic change was more easily embraced by this professional community.

Built on islands of strength.

- First round FDIIs targeted those most likely to succeed
- Selected national program leaders with passion, commitment, and professional credibility, then allowed them to lead.

Understood culture of change (not just a few elites).

- Opted for broad-base selection process of Gero-Ed centers so there were diverse examples able to be emulated by a wide array of schools. Allowed faculty to design curricular modules from the "bottom up." (Note: Unlike vectors of change in some professions, which are top-down, in social work, change happens from the ground up, implying a broad base of involvement moves the field more surely.)

Built on proven, deliberate change processes.

- Used processes intrinsic to the field (e.g., standards, competencies, faculty institutes).

- Focused early on change processes, including⁴:
 - Strategies to garner the support of key stakeholders
 - Strategies to influence structural arrangement in a program
 - Methods to institutionalize changes within a program’s organizational structure

Capitalized on the Foundation’s past experience.

- With its history of grant evaluation, Hartford was able to draw on successful efforts from other fields, such as its program targeted to medical students with the Association of American Medical Colleges.

Included sustainability planning from the start.

- Ensured the original Blueprint included plans for sustainability
- Required matching support at key points (such as the final year with participating schools, to build local financial support)
- Required that the CSWE CEO serve as co-Principal Investigator

Employed complementary tactics.

- Targeted human capital (faculty), curricula (standards), tools (technical assistance), and a permanent learning network mitigated through a tangible organizational Center

Encouraged faculty to build intersections with other curricular areas (such as health, mental health, and substance abuse) as a way to garner more support for gero-content and competencies, overcoming faculty resistance and making curricular changes sustainable

Maintained communication and collaboration among the three branches of the broader Geriatric Social Work Initiative.

- Faculty Scholars Program
- Doctoral Fellows Program
- Hartford Partnership Program for Aging Education (a gero-practicum program)

⁴Hooyman, N, Achieving Curricular and Organizational Change, Council on Social Work Education, 2006, p. 57.

HOW MIGHT THIS INITIATIVE HAVE BEEN STRENGTHENED EVEN MORE?

Despite the planning, frequent assessments, and on-going communication, like all initiatives, there are lessons that can be learned in retrospect.

- Progress toward the program’s goals might have been expedited had there been an earlier integration of the Geriatric Social Work Initiative’s complementary pieces.
- The program succeeded even though it underwent four changes in Foundation staff responsible for it, and had three principal investigators at CSWE responsible for it internally. Co-PI Nancy Hooyman was a consistent champion throughout. Perhaps her knowledge, passion, and commitment drove the movement forward.
- During the recent stock market downturn, Hartford’s financial losses decreased the amount they could disburse in the short run. The funding change, along with decisions made by the Board, meant that the plans for programs and projects would need to be altered. This included the Gero-Ed Center. The uncertainty of the situation challenged all parties. One way to mitigate this risk would have been to engage other foundations early in the Initiative in a partnership to build the gerontology social work field. Even recognizing the significant challenges of multi-foundation joint efforts, the risk of being seen as the “holder” for the geriatric work space is evident.

ADOPTION/ADAPTATION BY OTHERS

As this program demonstrates, from recognition of an issue until momentum for change has been established, large investments (typically supported by a national funder) and a long-term commitment are needed. However, once momentum is reached, there are opportunities for others to join in. For example, once CSWE established the competencies and teaching materials, regional foundations could help to make relatively quick improvements in their areas by creating incentives for local schools of social work to adopt them.

For foundations interested in propelling the progress forward, support to the National Gero-Ed Center—the leading edge of the movement—would ensure that new knowledge is created and shared.


Significant leverage, especially at the local level, can be gained by building on Hartford’s investments. Through its broader Geriatric Social Work Initiative, many locals now have strong assets from Hartford’s Faculty Scholars and Doctoral Fellow programs, as well as the program targeted to the clinical training aspects of social work education. These are in addition to the products of the Faculty Development Institutes, Curriculum Development Institutes, and other programs of the Gero-Ed

Center. Regions would see significant benefit if the strengths developed by the individual parts of the program could be more deliberately intertwined—building, once again, on islands of strength, only in this case, local rather than national.

CONCLUSION

The John A. Hartford Foundation recognized the need for an enriched training program for social workers to meet the needs of the country’s aging population at a time when few saw the problem on the horizon. In attempting to prevent waking up in the future to find an unprepared workforce, Hartford assumed sustained and successive commitments, in cooperation with those at the center of the change needed. The Foundation recognized the unique culture intrinsic to the community of social work educators and organizations. The Foundation’s efforts have gained momentum and the engine for future change now rests solidly within the social work education leadership organization (CSWE) itself.

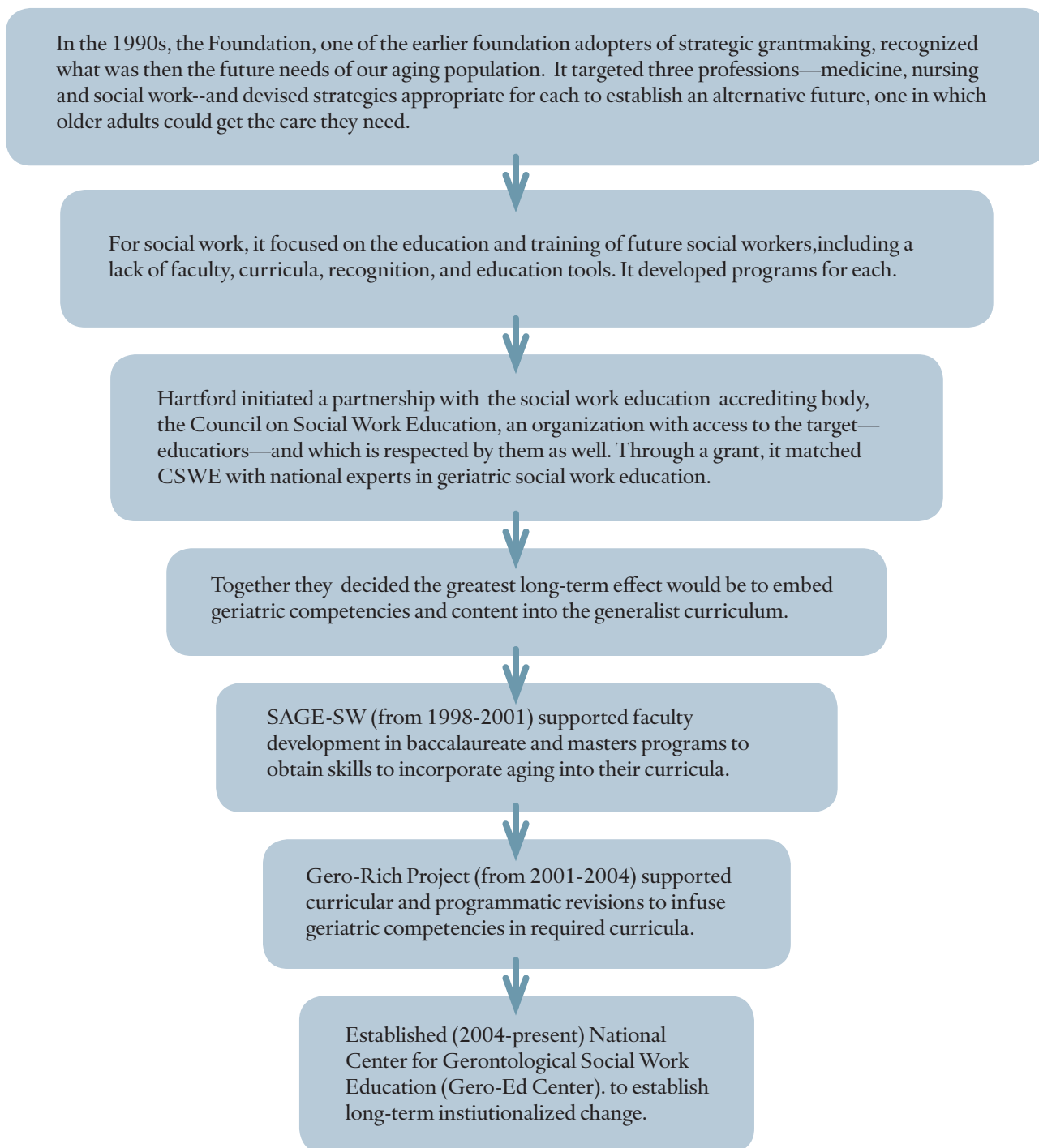
END NOTE. After an extensive strategic planning process, The John A. Hartford Foundation Board and staff have determined that it is now time to update the strategy of its mission to improve the health of older Americans. It is moving from a human capital development strategy to one more directly targeted to the environment in which these providers will practice, following “exit” grants in each program (including that at CSWE).



The John A. Hartford Foundation recognized the need for an enriched training program for social workers to meet the needs of the country's aging population at a time when few saw the problem on the horizon.

APPENDIX A

John A. Hartford Foundation Stepwise Development of the Gero-Rich/Gero-Ed Program



APPENDIX B

Selected Grant Highlights (Outputs and Outcomes)

GRANT 1 (\$574,988; 2.5 YEARS):

- Produced “*A Blueprint for the New Millennium*” in 2001, concluding, among other things, that:
 - “Social work education must adapt itself to better prepare students for practice and to meet the increasing need for social workers competent in aging.”
 - “Develop strategies and resources to strengthen the capacity of all social work education programs to provide gerontological education.”

GRANT 2 (\$1,480,692; 3 YEARS):

- To implement the recommendations above, CSWE began raising awareness, advocates, and local leaders
- Developed and delivered institutes which improved the geriatric teaching capacity of 600 faculty.

GRANT 3 (\$5,244,254; 3.5 YEARS):

- Expanded beyond individual faculty to more directly engage and invest the social work education institutions, and initiate a national-level expectation of geriatric competence.
- It employed a deliberate diffusion strategy
 - Used a ground-up approach
 - 67 social work programs received \$30K per year for two years to develop geriatric curricula for the five core courses at their school.
 - A diversity of schools was represented.
 - Schools continued program for third year with \$20 K in matching support
 - Provided technical assistance, not only on geriatric competencies and content, but on the needed processes of change

GRANT 4 (\$2,300,297; 3 YEARS):

A critical mass of gero-committed faculty, academic administrators, students, field supervisors, and other community partners with competencies to build and sustain gerontological capacity.

- 143 faculty members and 69 programs completed the three-year CDI program
- three of four targeted textbook authors increased gero-content
- 60 doctoral students attended gero-ed training

GRANT 5: (ON-GOING; \$3,416,344; 6 YEARS):

- 73 faculty members and 44 programs completed the three-year CDI program
- 81 percent of programs agree that students are better prepared to work with older adults
- 86 percent of participating programs stated that their specialized aging curriculum structure has been institutionalized in their program.
- More than 4,000 undergraduates participated in experiential activities with older adults and increased their interest in working with elders.
- 14 programs produced more than 100 gerontological teaching resources in the advanced practice areas of health, mental health, and substance use.

Author's note:

Because of my role as the founding Program Officer for Hartford's Geriatric Social Work Initiative, I recognize the potential bias in my perspective. The Initiative, however, has been in the expert hands of three subsequent program officers and three Principal Investigators who shaped the program to the success it is today. Despite my bias, I believe that this program is an example of the unique role foundations play, helping society see itself as it is and as it could be, then helping it to reach the new vision. This program can serve as encouragement and an example to those seeking to stimulate change.

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