Interviewing a Social Work Candidate Questions and Suggested Responses

Selecting the best candidate for any position is important - time spent prior to hire may save time wasted on an improper hire. Asking the right questions to identify candidates' knowledge and skill sets is key. The questions in this document target specific areas in which a qualified social worker must demonstrate expertise. The bulleted points provide parameters for suitable answers.

An often overlooked part of the interview process is assessment of writing skills. The social work task force recommends that in addition to the verbal interview each candidate be asked to demonstrate observation and documentation skills.

Place the candidate in a common area where several residents can be observed. Instruct the candidate to observe the residents and then write a sample medical record entry describing the resident and situation. Or, an alternate suggestion is to ask the person to write a sample record entry based on a real situation he/she handled from another setting (make certain privacy is upheld). Evaluate the written responses for clarity of thoughts, knowledge of pertinent issues, completeness, legal defensibility and grammar/legibility.

QUESTION	APPROPRIATE ANSWERS
You have 5 computer assessments due, 3 new admissions, 2 discharges and care plans today. How do you prioritize your day? What is your understanding of a	 Organize day into related activities to increase efficiency Do all related tasks at once, i.e. gather all charts to complete MDS assessments at one time Determine what time the residents will be discharging and ensure all services are arranged to facilitate a safe d/c plan (all this should have already been arranged prior to the day of d/c but now it's just making sure it all falls into place) Since care plans are at scheduled times, all other activities must take place around those Save the new admissions for the end of the day unless intervention is needed sooner Remain focused on the task at hand Minimize interruptions Grievance reports are written whenever an issue/complaint cannot
what is your understanding of a grievance policy? How do you know when to write a grievance report? How do you describe risk management?	 Onevance reports are written whenever an issue/complaint cannot be immediately resolved (and sometimes then as well) Important to understand the facility policy and follow it exactly Usually, the social worker is responsible for maintaining the grievance log and reporting issues/trends at the quality meeting Risk management is anything related to reducing the possibility of loss or injury; it requires excellent communication and teamwork as well as ongoing training, especially in areas of customer service Look for evidence that the candidate has critical thinking skills
Describe the components of a care plan for a resident with depression.	 The Problem Statement needs to be resident specific and describe HOW depression impacts his/her quality of life The goal should: 1) offer positive value to the resident, 2) improve his/her life somehow, 3) be measurable and realistic & 4) address causal factors and not symptoms such as tearfulness or combativeness The approaches or interventions describe what the staff will do to assist the resident in achieving the goal, i.e. provide 1:1 visits

	weekly by the social worker to discuss feelings r/t cause of
	depression and resident strengths, facilitate a date night with
	husband, refer to a psychiatrist, etc.
What are the components of a	• Focus on resident strengths throughout the entire interview and
comprehensive biopsychosocial	assessment process
assessment?	• Identifying information (ethnicity, spirituality, appearance,
	payer source, etc.)
	• Reason for admission and presenting problems, prior living
	arrangements and level of assistance needed with ADLs and IADLs
	 Advance directives and need for advance care planning History of physical and/or psychosocial problems
	 Mental health and psychological treatment
	 Personal and family history
	 Support system
	 Education and employment history
	 Interests/hobbies
	 History of substance abuse
	Cognitive functioning
	Discharge plan, if appropriate
	Impression and assessment
How do you prepare to interview a	• Comprehensive chart review to identify: (not going in "cold")
new resident/patient?	 Advance directives
*	 Responsible parties
	 Diagnoses and impact on mood/behavior
	 Discharge planning issues or placement issues if for long
	term care
	 Issues from the hospital such as mood or behavior
	challenges
	 Review of nursing assessments, especially fall, pain and
	elopement risks – ensure care plans are started
	 Identify areas that the social worker can contribute to an
	interdisciplinary approach to care plans
	 Therapy evaluations to get information on the prior level of
	functioning and goals
How do you explain code status to a	• First ask if they have questions regarding advance directives or
resident and/or family member?	code status
	• Ask them to explain their understanding of the choice, either full code or do not resuscitate (DNR)
	Ensure accuracy of understanding
	 If education is needed, explain full code in the same way that any
	other treatment or procedure is explained which includes discussion
	of risks (broken ribs, punctured lungs, probably decreased quality
	of life). Inform that Full Code includes many procedures, i.e.
	intubation, cardiac compression, artificial ventilation, etc.,
	Take the orange card to the meeting as a visual aid
	• If education is needed for DNR, explain that comfort care is
	- If education is needed for DIVIC, explain that connot call is

	always provided, i.e. oxygen, pain management
	• If code status is changed, must communicate with the charge
	nurse to get appropriate orders and follow facility procedures
Describe your experience with care	• Review the actual care plan during the conference
plan conferences.	• Invite participation from resident/family/responsible party
	• Facilitate an efficient and productive conference
Do you facilitate the meetings?	• Facilitate conference calls if family/responsible party unable to
	attend, schedule conferences at bedside if resident is unable to get
How do you keep them on track?	out of bed
	• Keep group focused – if conference turns into a "complaint
What information do you report on?	session" schedule a separate meeting with necessary staff
	• Social worker reports on: mood, behaviors, room changes,
	roommate changes, how resident is adapting to facility life or if
	admitted for a rehab stay, the discharge plan, advance directives,
	emergency contact and relationship
What is your experience in discharge	• Referrals to community resources – must demonstrate knowledge
planning?	of most common resources, i.e. home health, medical equipment,
	Title 19, Meals-on-Wheels, mental health services
	• Discharge planning starts with the pre-admission process
	• Comprehensive documentation of all activities related to
	discharge planning, including name and time of any phone calls,
	meetings or interactions
	• Communication with interdisciplinary team, resident and family
	• Coordination of home health and equipment to coincide on day of
	discharge or earlier if training is necessary on a new piece of
	equipment, i.e. 4-wheeled walker, glucometer, etc.
How do you give report to a health	• Be prepared with updates from all disciplines (nursing, rehab,
plan case manager?	dietary)
	Focus on progress to justify skilled stay
	• Keep conversation short and focused on patient issues
	• Keep case manager updated on all discharge planning
	barriers/challenges
A modiant a la it I for I I it's	• If not sure how to answer a question, get someone to help
A patient admitted for rehabilitation	• Assess reason(s) why resident is declining therapy, i.e.
has declined therapy for two days.	depression, confusion, pain
What is the role of the social worker?	Identify possible interventions to facilitate participation Evaluation insurance hereafts and skilled stay requirements
	• Explain insurance benefits and skilled stay requirements
	• Involve family if appropriate • Consider writing a care plan for "refusal of care"
	• Consider writing a care plan for "refusal of care"
	• Communicate with staff at PPS or stand-up meeting
Two no own at a man and a different	• Interviewee must demonstrate knowledge of regident rights on t
Two roommates are not getting along.	• Interviewee must demonstrate knowledge of resident rights and
What do you do?	roommate regulations
	• Talk to both residents, individually and possibly together
	• Help them generate creative solutions
	• If a solution is not possible and a room change is necessary, the
	resident that initiated the "complaint" is the one who must make the

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	room change
	• Document in both residents' medical records all interventions
	attempted as well as the outcomes
	Make sure families are kept informed as appropriate
What is the role of the social worker	• Be familiar with the Federal regulations for pain management in
with pain management?	F309 Quality of Life
	• Assessment using tools like the "faces" scale, the "number scale
	1-10" or scales for advanced dementia
	• Assessment by asking about: aggravating and alleviating factors,
	impact of pain, meaning of pain, and most importantly, the
	resident's goals for pain management
	• Education regarding: misconceptions related to pain, challenges to
	achieve adequate pain management, the relation of pain to
	behaviors/mood, definitions of tolerance, addiction and dependence
	• Identification of non-drug interventions and techniques to relieve
	anxiety (guided imagery, visualization, muscle relaxation)
A resident's daughter comes into	Invite her to sit down
your office in tears. Her mother is	• Shut the door to ensure privacy,
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quite ill and probably won't make it	• Put phone on Do Not Disturb
through the week. What do you do?	• Start where the daughter is $-$ if she needs to cry, let her cry; if she
	needs to talk, let her talk (about topics she feels necessary)
	• Encourage her to share her feelings, concern, worries
	• Do not offer false hope or meaningless comments like "I'm sure
	things will be just fine" or "At least she won't be suffering."
	• If she is receptive, talk about ways staff focuses on her mom's
	comfort
	• Determine if any action is necessary
	• Ask if there is anything else she would like staff to do
	• In some circumstances, suicide assessment might be necessary
A resident is admitted to your facility	• Start with very general discussion and ask her what she knows
with advanced cancer. How do you	about her medical condition or why she is in the facility
approach her on this topic?	• Determine if she needs more information or to have information
	repeated and then facilitate getting the information to her
	• Involve other members of the IDT as necessary, i.e. physician,
	nurse
	Use active listening techniques
	• Initiate or update the care plan with social work interventions
	such as 1:1 visits to allow resident to share feelings r/t diagnosis
	and prognosis
Tell me about your communication	Communication is vital to a successful facility
skills.	• Must be comfortable speaking up in a group, being assertive even
	if the group does not agree with the content, i.e. room change
How do you employ them in the	conflicts, patient discharge decisions
interdisciplinary team?	Ability to listen to other peoples' points-of-view and use
What personality traits do you have	reflective statements, i.e. "What I hear you saying is" or "It's
	important to you that"
that help you communicate	1 2
effectively?	Ability to remain professional, mediate disagreements

What is one of the most challenging	• Interviewee must be able to describe a complicated situation and
situations you have dealt with?	demonstrate skill and critical thinking in achieving resolution
	• Listen for terms like: residents rights, assessment, documentation,
How did it resolve?	involvement of the IDT, family meetings, physicians orders,
	advance directives, ombudsman and care plans
What did you learn from it?	• The candidate should demonstrate ability to incorporate learned
······································	knowledge into daily practice and possibly modify current practices
	based on such experience
	 Important traits include flexibility, self-confidence (not ego)
What any your strongths?	• Interviewee should be able to express how strengths and
What are your strengths?	1 0
W I O	weaknesses impact his/her performance in the work setting
Weaknesses?	• How does the interviewee adjust or compensate for weaknesses?
What is something you have failed	Must demonstrate ability to learn from mistakes and to use the
at?	knowledge positively
	Assess ability to identify when it is time to ask for help, to utilize
What did you learn?	other resources
Are you using this knowledge now?	
How?	
What areas would you like more	• Ability and willingness to be honest about areas that need work or
education?	that the person wants to become more proficient
	• Of concern would be the interviewee who does not feel additional
	education is necessary
What do you do to prevent burnout?	Hobbies/interests
what do you do to prevent burnour.	Family, friends, social supports
	Leave work at work
	Know limits
	Maintain a sense-of-humor
	Talk to supervisor if feeling stressed or overwhelmed
	Exercise and eat a balanced diet
	Get enough sleep
What would you do if you were	Speak to supervisor
feeling overwhelmed?	Communicate regarding unfinished tasks
	Develop action plan to address unfinished areas
	Ask for help!
What makes you competent to do this	Someone who exudes confidence but not arrogance
job?	Someone comfortable jumping into new environments but also
	willing to ask for help
	Skills – be specific
	Training – be specific
	Experience – be specific
	Personality, personal goals, passion – describe
Why do you want to work here?	Assess for sincerity
	Did interviewee do research on the facility prior to the interview,
	i.e. number of beds, clientele, rating on nursing home compare?