

Scope of Social Work Profession in Medical Setting

Arul Paul*

Ph.D Research Scholar, Department of Social work, Bishop Heber College

Dr. Carter Prem Raj

Assistant Professor, Department of Social Work, Bishop Heber College

1. Introduction

Social Work in today's world has established itself as a significant full-fledged professional at par with any other profession. As the world is becoming materialistic; the devoid of the human sentiments and with emotions, diseases and illness with people are largely growing more and more self-centred. It is understood a sick and happy child cannot learn, and cannot produce. Good health is very important both to the nation and an individual. Health is a state of complete physical, mental and social well being and not merely an absence of disease or infirmity. It is the yardstick of measuring an individual's progress and development. Among other factors, social factors create a predisposition to disease, directly cause disease, transmit the cause of disease and influence the course of disease. Therefore the medical social workers help the patients from the moment they enter the hospital, up to the adjustment with the past normal life. The main aim of the medical social worker is to help us with the prevention of disease and rehabilitation treatment plan. The scope of social workers is widely bigger in nature but simultaneously lots of difficulties and challenges they have been facing in the field of health. The curriculum of the social work was carefully developed to attain the needs of the society.

This Paper examines the methodology of appointment of Social Worker, challenges, roles in the hospitals (scope of Practice in hospital social work), department where the social workers enhance their services.

1.1 What is Medical Social Work all about:

The Medical Social Work is the application and adoption of methods and philosophy of social work in the field of health and medical care. Medical social work makes selected and extended views of those aspects of social work knowledge and methods which are particularly relevant to helping persons who have health and medical problems.

1.2 The Eligibility Criteria for Medical Social Worker:

Social work is a tertiary qualified profession (followed by Doctors, Nurses and other para medical profession) recognized by nationally and internationally. The academic qualification that are accredited by the Universities are a Bachelors degree of social work (3 years) and the duration of Master in Social Work is 2 years. A Correspondence in MSW offers a bit less of practical training as compared to the class room programme. Some Universities provide final year integrated course in social work which leads to BSW and MSW. The Curriculum for medical social work is carefully designed in such a manner which provides beginning level professional social work education to equip skills, knowledge, ethics and values that any individual can be applied across the diverse range of practice in social work field settings and methods of social work practice and includes an extensive period of field education.

1.3 History

Western: In Britain and Ireland the MSW were originally called as hospital almoners or lady almoners. In the year 1960's the profession was officially renamed as medical social worker. In 1895 Mary Stewart was appointed as a first lady almoner in royal free hospital at London for a three month trial period.

In the year 1964, the Institute of Almoners in Britain was renamed as the Institute of Medical Social Workers. This Institute was one of the founder organizations of the British Association of Social Workers which was formed in 1970. Ella Webb, Paediatrician, in Ireland was appointed almoner to work in her dispensary (Adelaide Hospital) for taking care of sick children in Dublin. Wintred Alcock was the first almoner appointed by Webb in 1918. Professional Social Workers like Garnet Pelton, Ida Cannon and Dr. Richard Clarke Cabot were appointed as hospital social workers by Massachusetts General Hospital in United States.

In 1912, Cannon started a Social Work training programme for medical social workers. The important role was carried out by the medical social workers were, data collection, case management, follow-up, care coordination, health education, financial assessment and discounting patient medical fees. In China (Beijing) the medical social worker was started in the year 1921 by Ida Pruitt. The social workers have been trained for carrying out case work, adoption services and recuperation services.

1.4 India

In 1936 Dr. Clifford Manshardt, an American Missionary was started a formal training social work programme in India through Dorabji Tata Graduate School of Social Work. In 1946, the first medical social worker was appointed in J.J. Hospital, Bombay. From 1960's onwards the scope of medical social workers have been increased in India. Today almost majority of the teaching institution (Arts and Science) and Medical University have been conducted a P.G social work degree course.

1.5 Job Description :

1. Case work
2. Group work
3. Psycho social education
4. Liaison officer between patient and family and the Medical team
5. Helping the patient and the family to use community resources
6. Counseling the patient and family
7. Working with disability
8. Working with Death and Dying
9. Discharge
10. After care
11. Administrative work

1.6 Department where they can work in Medical Settings:

Medical Social Workers are employed in wide range of hospital settings which including public and private sectors but not limited to

1. Emergency care department
2. Intensive care which includes neonatal
3. Paediatrics
4. OBGY
5. Cancer
6. Neurology
7. Renal Department
8. Cardiac
9. Burns ward
10. Geriatric Services ward
11. STD
12. Mental health department
13. Transplantation
14. Drug and alcohol services ward
15. Palliative care unit.

1.7 Scope of practice in Medical Setting:

Assessment:

1. A complete psychosocial assessments of patients who have come for medical treatment at General Hospital including families, carers and significant others.
2. Do risk assessment and comprehensive interventions for children who have been sexually abused and neglect, family violence, suicide and rape.

1.8 Counseling and therapeutic interventions

1. The counseling, and therapeutic interventions aimed at helping sick persons in the hospitals, their family members and carers adjust to hospital admission.
2. The interventions also been address adjustment to diagnosis trauma, possible role changes, emotional and social responses to disease and its related treatment.
3. Medical social workers also been provides grief, loss and bereavement supportive counseling to strengthen the emotional capacity of patients and others.
4. Helping the patients/family members in participating the comprehensive intervention in relation to chronic health condition and brings mediation conflict resolution.
5. Conduct periodical group work and support programme including psycho-education.
6. Provides supports to sick and vulnerable patients in crisis to navigate and communicate their needs and wishes within the hospital system.
7. Acute services provided to emergency crisis care department due to traumas which resulting in sudden

traumatic injury or death or natural disasters.

1.9 Advocacy

1. Advocacy on behalf of the emergency patients to health care providers for quality care for terminally ill persons. Advocating for change on an organizational and system level.

1.10 Case Management and Multidisciplinary Work:

1. Social workers do referrals to other services based on the needs of the patients.
2. Social workers should ensuring communication and understanding about post-hospital care treatment among patients/family and health care team members.
3. Provide education to hospital staff members on patient psychosocial context and needs.
4. Collaboration and promoting communication among health care team members, and coordinating in patient discharge, continuity of care planning.
5. Responsibility in series of statutory functions relevant to local legislative requirement.

1.11 Resource education and practical assistance:

1. Social workers should mobilize resources and support in accessing information and financial assistance to the poor and needy patients.
2. Educate the patients and family members on the levels of health care, roles of health care team, and also assisting patients and their families in communicating with members of health care teams in understanding medical information and advance care planning.

1.12 Policy, program design and research:

1. Supporting and guiding the implementation of patients centred models of care at hospitals or health care institutions.
2. Preparing, developing policy, design and evaluation of programs for the upliftment of patients life.
3. Engaging in research and publishing peer reviewed journals.

1.13 Administrative functions:

1. The clerical aspects such as maintaining records, registers, and relevant patients records, organizing and planning day to day activities of the department, supervision and consultation with the staff as well as the volunteers and maintaining effective liaison.
2. Involved in the planning and implementation of the department programmes for patients care and for the staff development.

1.14 Career Opportunities:

The Scope of Medical Social Work is so in its nature. In earlier all government hospitals appointed the medical social worker and psychiatric social worker as separate entity and the job allocation for them is also entirely different. In the year 1974 the Government of Tamil Nadu has brought the two separate cards into a single umbrella called as Social Welfare Officer. Other than the hospitals the scope is very limited for Medical social workers. In aboard the scope of social workers is at large, the only condition is the concern person has to do a 6 months diploma course in the field of social work (any specialization), and register into the international social work and earn money.

1.15 The following are career opportunities in Hospital:

Medical Social Worker

Psychiatric Social Worker

Social service officer

Liaison Officer, Public relation officer.

Social Welfare Officer

Field Officer (data collection of various health projects) – on Contract basis.

Research Officer

Regional Programme Consultant.

ICTC Counsellor for HIV/AIDS Projects.

Care Coordinator in ART centres.

1.16 Basic Salary for those who are working in Hospital Sectors.

Qualified social workers have been appointed to various state run hospitals by Directorate of Medical Education through professional employment exchange department which is located in all districts in Tamil Nadu.

1. The basic qualification is MSW or M.A Social Work with Medical and Psychiatric social work as a

special branch. The social workers otherwise called as social welfare officer in hospital are drawn Rs.9300 – Rs 34800 (pay band 2).

2. Research Officer who possessed Ph.D in social work are drawn Rs. 15600 – 39100. (pay band 1).
3. The social workers who have been appointed on contract basis are drawn Rs 15,000/- to 30,000/- as a consolidated pay.

1.17 Social Workers contribution at hospital level:

1. Developing culturally appropriate modes of service delivery.
2. As long as interventions that admit the full range of biopsychosocial impacts of illness and hospitalisation.
3. Reducing health service demand by identifying and removing barriers that may be limiting effective engagement with services, and enhance comprehensive psychosocial assessments and intervention including linkages and referrals to community based services.
4. Social workers role in preventing readmission through rigorous discharge planning followed by addressing psychosocial determinants of ill persons and enhance the strong supportive familial and community networks, for the betterment of patients.
5. Leadership when working in multidisciplinary team.
6. Carry out comprehensive and culturally appropriate psychosocial assessments that deeply inform the decision making of other professional and the multidisciplinary health team.
7. As long as professional development for other health professionals on psychosocial issues relevant to recovery and contributing to future planning in health service by innovative social work practices, programmes and research activities.

1.18 Challenges

Medical Social Workers often have a large case-loads and have to meet tight deadlines to arrange for necessary services. They have often confronted highly complex cases involving patients with multiple psycho-social issues all of which require intervention and result in delays in discharge. The medical social workers who assess the patients and experienced one or many of the following problems such as homeless, multiple chronic medical and psychiatric issues, lack of stable employment, previous incarceration, substance abuse and orphan. Sometimes the patients needs money for transport, buying clothes, absence of care takers are the yet another problems that lead to delays in discharge. The medical social workers are in a position of having to carve out roles and make obvious on how they can assist the team in a unique way. If they cannot show that they can do certain things, then its authority will be challenged. Majority of social workers reported that inadequate salary was a major work related stress and many time the superintendent and dean of the hospital, head of the department failed to recognize their work.

2. Conclusion

The Medical Social Workers proposed a unique and valuable involvement in providing appropriate and targeted fruitful medical services to the patients/families, in order to meet the complex psychosocial needs in hospitals. The social workers who are working in hospital setting are carve in provide direct services aiming that to minimise the impacts of illness, disease and hospitalization and enhanced the family support. For a successful career in social work, every medical social workers must updated their professional skills, knowledge and values.

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