An Approach to Developing Social Work Practice Competencies in Mental Health Setting.

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Social Work

Social workers have been involved in the health care field since the turn of the 20th century. Social workers have prospered, gaining recognition through the provision of specialized services in multiple health care arenas such as in the area of mental health, palliative care, rehabilitation, and geriatric services.
Social Work

- Mental Health social workers are vital members of the multidisciplinary team.
- Psychiatric illness, in particular, often reverberates through a patient’s life, complicating and straining one’s relationships, job situation, and quality of life.
Social Work

- Mental social workers strive to help patients cope with these overlapping aspects of their lives while they heal, using a combination of individual counselling, group and family therapy, and connection to hospital and community resources.
Social work practice competencies

Professional social work supervision is ‘a process by which one worker is given responsibility by the organisation to work with another worker(s) in order to meet certain organisational, professional and personal objectives, which together promote the best outcomes for service users’ (Morrison 2005 p32).
Social work practice competencies

- Use of supervisory process provides for guidance and direction of inexperienced workers and for continuing growth of the experienced.

- Both in academic study and practice, social work provides supervision by qualified, professional personnel to help the worker continue to grow professionally and acquire increased understanding and skill.
Social work practice competencies

- Supervisor helps the worker do a better job and increase his or her understanding and skills in working with people.

- This process is particularly important because social workers themselves are the tools in helping troubled persons, and they need to grow professionally, keeping abreast of new knowledge and skills.
The New Zealand Association of Social Workers outline helpful headings for the purposes of supervision

- to ensure the worker is clear about roles and responsibilities
- to encourage the worker to meet the professions objectives
- to encourage quality of service to clients
- to encourage professional development and provide personal support
- to assist in identifying and managing stress
- to consider the resources the worker is available to do their job and discuss issues arising where they are inadequate
- to provide a positive environment within which social work practice can be discussed and reviewed.
Clinical supervision is an essential element in the professional development of advanced practice psychiatric social work. In the area of mental health no Social Worker can work with entire autonomy and professional supervision is the key process for balancing professional autonomy with responsibility to the client, professional ethics and standards along with accountability to the agency and society at large.
Clinical supervision was found beneficial for mental health and psychiatric health care professionals in terms of their job satisfaction and levels of stress. The findings seem to demonstrate that efficient clinical supervision is related to lower burnout, and inefficient supervision to increasing job dissatisfaction. (Hyrkas, 2005)
Competency of Supervisor in Clinical Practice

Functions

1. Supportive

The support function of supervision is concerned with helping the supervisee deal with job-related stress, and with developing attitudes and feelings conductive to maximum job performance. It helps sustain work morale, gives the supervisee a sense of professional self-worth, and a feeling of belonging in the agency. Providing support is very essential as it prevents Burn-Out in counselling and clinical practice.
Competency of Supervisor in Clinical Practice
Functions

- **Supportive**
- Being supportive also helps particularly when there are differences of opinion related to a particular case. As a member of the multidisciplinary team where generally the psychiatrists heads the team because of his qualifications he may dominate the supervisee and disagree with the supervisee’s opinion.
Competency of Supervisor in Clinical Practice
Functions

2. **Supervisee’s workload monitored**

In a hospital the supervisee is expected to see several referral cases as well as the cases in the ward. Sometimes due to excessive workload the supervisee may tend to superficially deal with cases without going in depth of the case. Importance should be given to all the cases.
Competency of Supervisor in Clinical Practice

Functions

Review supervisee’s written work.

○ Writing a good case work report is a skill that comes with practice over years. If the case report is not written properly it can be misinterpreted by the multidisciplinary team. Example: The supervisee had written in her report that the client appears depressed without realizing that major depression is a disease and not a term that is loosely used sometimes.
Competency of Supervisor in Clinical Practice

Functions

- Review supervisee’s written work.
- Correct terminology need to be used and confidentiality maintained. Several matters related to the client need not be written as it violates the rights of the client. In one instance the supervisee had written “client is a sex worker.” As it is general practice for the nurses to read the case history the nurse started gossiping about this client and one of the ward boys approached the client and wanted to seek her services after discharge. This was very embarrassing for the client. She wanted an immediate discharge from the ward.
Competency of Supervisor in Clinical Practice

Functions

- **4. Intervention and outcomes discussed**
- At times the client may feel very uncomfortable speaking in the presence of more than two therapists therefore one way mirrors may be used for training the supervisee.
- The supervisor should monitor the work of the supervisee in terms of case outcomes. In clinical social work practice if every client’s case is discussed before discharge it helps to make plans for follow up sessions.
5. **Moral and ethical issues.**
In order to prevent the supervisee getting emotionally involved with the client it is essential that supervisor discusses moral issues. Example: A male supervisee was found to make unnecessary home visits to a female client particularly in the absence of her husband. The client was suffering from bipolar mood disorder and in the manic phase of her illness the client proposed to divorce her husband and marry the supervisee. After recovery the client regretted for proposing to the supervisee and was remorseful.
Practice Competency Framework in mental health.

- A bachelor’s degree is required for most direct-service social work positions, but some positions and settings require a master’s degree. Clinical social workers must have a master’s degree.
Problems with fresh SW graduates

- Poor listening skills.
- Asking irrelevant questions to the client.
- Tendency to be too superficial in handling the case.
- Getting emotionally involved.
- Making direct remarks to the client.
- Using directive counselling.
- Making fun of the patient.
- Gossiping about the patient with the ward boys and nurses.
Problems with fresh SW graduates

- Not maintaining a proper record or poorly writing a report. Using inappropriate medical terms while recording.
- Sharing information about the client with the police or insurance company (attempt suicide)
- Sharing information with non psychiatry colleagues.
- Getting too inquisitive with forensic cases.
- Fearing to interview violent patient.
Post qualifications

- It is important that social workers with BSW attain MSW as post qualifications provide important learning and development opportunities for social workers to develop advanced practice skills. In addition they could develop policies for their organization and shared their learning with students to embed good practice within their organizations.
Competencies we expect in graduating social workers to have in mental health.

- The social work graduate should have a thorough knowledge on the core values of social work which include social justice, dignity and worth of the person, importance of human relationships, integrity and competence.

- This constellation of core values reflects what is unique to the social work profession.

- Core values, and the principles that flow from them, must be balanced within the context and complexity of the human experience.
Good Practice

- Basic assumption about people and their cultural practices influence professional practice. While practicing, Social workers should practice “value assumption on individual worth and capacity”. The value of worth suggests that the individual has the ability to guide his own actions and the potentials for determining goals.
Good Practice

The relatives of a child with schizophrenia wanted an discharge from the hospital as they wanted to consult the faith healer. The Psychiatrist refused discharge. The social worker intervened and helped discharge. The social worker told the child’s relatives that they can seek the help of the faith healer but at the same time they should continue the medication prescribed by the Psychiatrist and come for follow up. Not only the relatives were happy but also the Psychiatrist.
Good Practice

In mental health settings the social work should practice the principle of client’s self-determination. This is important as this allows the client to make his own decisions related to his behavior (e.g., quitting smoking/alcohol, or even terminating a pregnancy). The social worker remains neutral, but may share ideas, feelings, and experiences along with expressing concerns and empathy. If the social worker makes decisions on behalf of the client this could weaken the client’s problem-solving capacity. In addition, the client may become dependent on the social worker.
Good Practice

- The Mental health social worker should never get emotionally involved with the client to avoid counter transference as this will impair the therapeutic goal. Eg. Many clients with sexual and marriage problems tend to get emotionally involved with the social worker during crisis. Home visits should be done with caution and only if necessary. In my experience there were cases where social workers have been sexually assaulted by psychiatry patients.
Good Practice

- Mental health social worker should maintain professional boundaries while working in multidisciplinary team. He should also not practice nonprofessional social work example. Giving money from his own pocket to support the clients medication or food.

- In spite of all the positives of social work practice there are many hindrance why people do not like to take up this profession as a health social worker.

- Poor salary
- Negative attitude of Psychiatrist and Psychologists towards Psychiatric social work. Tendency to blame social workers for their own limitations.
- A motivated patients – such as not motivated to stop drinking.
- Poor support from government. Lack of funding.

- Lack of appreciation by caregivers due to poor prognosis among psychiatric patients and frequent relapse as seen in schizophrenia.
- Occupational hazards – being beaten up or assaulted by psychiatric patients.
- Aging patients
10 Golden Rules For good Social Work Practice

- Practice social work with kindness, ethics and honesty.
- Upgrade professional knowledge and clinical social work skills
- Maintain good record of clients.
- Maintain good communication with clients and their relatives.
- Maintain social work client confidentiality.
- Allow second opinions and referrals to colleagues.
- Don’t over charge clients.
- Avoid publicity, self-promotion and abuse of position.
- Maintain good work relationship with colleagues.
- Be a partner in preventing mental illness.
Conclusion

Social work practice competencies in the area of mental health depends on social workers education background, skills in handling cases and the most important of all the role of the supervisor’s support in guiding the worker to tackle difficult practice and organizational issues and find potential solutions to complex mental health problems.
Thank you