



BC ASSOCIATION of
SOCIAL WORKERS

402 - 1755 West Broadway
Vancouver BC V6J 4S5
Tel: 604 730 9111 | 1 800 665 4747
bcasw@bcasw.org

The Role of the Social Worker in Primary Care

The BC Social Workers Act states that “social work means the assessment, diagnosis, treatment and evaluation of individual, interpersonal and societal issues through the use of social work knowledge, skills, interventions and strategies, to assist individuals, couples, families, groups, organizations and communities to achieve optimum psychological and social functioning.”

Without limiting the generality of the foregoing, social work includes the following:

- a) The provision of assessment, diagnostic, treatment, counselling and evaluation services within a relationship between a social worker and client;
- b) The development, promotion, management, administration, delivery and evaluation of human service programs, including that done in collaboration with other professionals;
- c) The provision of advocacy services;

Other social work roles, defined by the BC College of Social Worker’s scope of practice, include professional supervision, consultation services, the development and evaluation of social policies, promotion of social change, research, education, and any other activities recognized by the College.

<http://www.bccollegeofsocialworkers.ca/registrants/scope-of-practice/>

Social Workers use their skills in multiple and diverse settings. On Primary Health Care Teams, social workers assess patient’s social determinants of health to increase attachment to health care teams, coordinate resources and services, and improve accessibility to health care services. Examples of the services provided by social workers on primary health care teams include:

- meeting with patients before and after provider appointments to assist with referrals, mental health assessments, family counselling and crisis intervention. By allowing providers to focus their appointments on targeted medical priorities, social workers create space within the provider patient panel;
- meeting with patients in the community or in the office to assess health/mental health and social needs, develop and follow up on care plans with the interdisciplinary team. Referrals are made by agencies, health authority, and community members;
- strengthening existing link with primary care provider. Social workers work with patients on a multiple level to assess and remediate nuanced needs. The social worker can attend appointments with patients and providers, supporting the relationship;
- assessing patient and family situations for abuse, neglect, and self-neglect. Social workers are familiar with Adult Guardianship and other legislation governing patient capabilities and rights around finances, health care decisions, and consent to enter long-term care;

- registered clinical social workers (RCSWs) can diagnose mental health disorders using the DSM-5. Mild to moderate mental health conditions can be treated by the RCSW who will initiate referrals to community services as required;
- the provision of counselling to individuals, families, and groups by RCSWs and RSWs. They support caregivers, complete psychosocial assessments, and reduce relationship stress/conflict;
- providing culturally-safe and trauma-sensitive consultation to team members, in the context of a strong anti-oppressive approach to practice. This assists patients with complex needs to access and participate in services; and
- the social worker's flexibility in their role means that they can meet with patients as often and as long as necessary. Appointments can be in the home or in the office.

Working to maximize the efficacy of the primary care team the social worker:

- provides care to patients in a holistic, patient-centred, person-in-environment framework that includes caregivers, social supports, and family. Interventions include family counselling and mediation, comprehensive treatment plans that recognise trauma and abuse, and capacity to support patients to meet their own goals of care;
- is able to act immediately in a patient crisis. They can intervene in the home, office, or community to ensure patient safety;
- coordinates treatment plans with the interdisciplinary team and other agencies;
- creates and facilitates groups that meet support and information needs for chronically ill patients and caregivers;
- assesses home environment and support network strengths;
- makes referrals to community resources with follow-up ensuring that the resource is accessed, connection made, and outcome evaluated and communicated to the primary care team; and
- facilitates the creation of resources and/or advocacy in the community.

For more information please contact the BC Association Social Workers at bcasw@bcasw.org