The Emerging Role of Social Work in Primary Health Care: A Survey of Social Workers in Ontario Family Health Teams

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BACKGROUND

Social work can respond to a broad range of clinical needs that emerge in primary health care (PHC). Despite expansion of social work into PHC, few studies have examined the integration of social work into this expanding area of the health care system.

METHODOLOGY

Online Survey
August - November 2015

Sample Population
184 Family Health Teams in Ontario, Canada
415 FTE Social Workers invited to complete survey

Analyses
Descriptive statistics were computed for 19 questions. Thematic content analysis was conducted on qualitative data arising from open-ended responses.

SAMPLING

N = 128 (31% response rate)

Respondent Demographics
83% of respondents have obtained a Masters of Social Work (MSW) degree
73% of respondents work full-time (>36 hours/week for one employer)
63% of respondents have been practicing social work for more than 11 years

STUDY OBJECTIVES

To gain an understanding of social work's role in an interprofessional PHC context.
To understand the barriers and facilitators of integrating social work into Ontario Family Health Teams (FHTs)

SOCIAL WORK FREQUENT PRACTICE AREAS

- Documentation
- Counseling or Therapy
- Psychosocial Assessment
- Referral to Community Services
- Coordination with Other Healthcare Professionals
- Colleagues about Psychosocial Issues
- Case Management
- Community Organization Activities

NUMBER OF YEARS WORKED IN CURRENT POSITION AT THE FAMILY HEALTH TEAM

LIMITATIONS/FUTURE DIRECTIONS

Sample is not representative of all social workers in Family Health Teams due to low response rate
Further research is required to understand social work's role in other interprofessional primary health care models

MAIN FINDINGS

Accessibility
76% of respondents indicated that they did provide social work service for urgent situations

Role
76% of respondents reported that they were able to work within their full scope of practice

Role
Time restrictions due to long waitlists, lack of resources, organizational policies, inadequate training, compassion fatigue, and poor leadership were seen as barriers that prevented social workers from utilizing their full scope of practice.

INTEGRATION OF SOCIAL WORK

Barriers
Medical Model Environment: Our medical model has a limited understanding of psychosocial and mental health issues making it difficult to practice social work
Confusion About Social Work Role: Colleagues limited understanding of the social work role leading to variable practice expectations
Organizational and Systemic Barriers: Increased feelings of isolation, decreased opportunities for collaboration and lack of connectedness to other FHT members due to co-location

Facilitators and Recommendations to Improve Integration
Education and Competencies: Many respondents felt that additional education, specialized training and accessing supervision would further enhance their capacity to support patients with complex needs
Collaborative Engagement: Respondents emphasized the importance of educating their health care team about their role on the team and contributions to patient care
Organizational Structures: Respondents reported the importance of having an organizational culture with strong leadership that encouraged collaboration, respected integration and embedded social work in organizational decision making

REFERENCES


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