

THE PERCEPTION OF THE MEDICAL STUFF ON THE ROLE OF EMERGENCY ROOM SOCIAL WORKER- AN EXPLORATORY STUDY

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ABSTRACT: *This study aims to describe the perception of the medical staff on the role of Emergency Room social worker. It is also essential that medical team members know the role, professional profile and skills of Emergency Room social worker. Also, this study can help the public, to know the role of the social worker when addressing the Emergency Room.*

Keywords: *Emergency room, social worker, medical stuff, social support, crisis intervention.*

Historical and theoretical considerations

The realization of this study was born out of a desire to clarify the role of social worker in the Emergency Room, which is very often confused with the work of medical staff. This has often been noticed in my professional work as a social worker at the Emergency Room.

In a similar study conducted by Cowles & Lefcowitz (1992) compared medical staff expectations regarding the role of the social worker in the emergency room, and it was found that his role varied from social worker to physician and nurse.

There are several roles the social worker can do in his professional career at the Emergency Room. In the literature, Sheafor & Horejsi (2008) said that a social worker had multiple roles including a broker, advocate, teacher, counselor, clinician, social change agent, and professional.

Emergency Room social workers work in a fast-past environment with a wide range of patients, including children at risk, homeless, domestic violence, drug users and alcohol patients suffering from space-time disorientation, patients who have experienced a traumatic situation up to patients with suicide attempts.

An important task for the Emergency Room social worker is to ensure that there is a directed discharge plan for patients who do not require hospitalization. Emergency Room social worker identifies patients' needs and activates the resources needed to resolve the case by creating contact with the family to support the patient or by activating the social support network.

Zimmerman & Dabelko (2007) considers that Emergency Room social workers have an important role in the discharging plan conducted through knowledge of existing community resources and social services.

According to Hobbs (2005), the tasks specific to an Emergency Room social worker within the multidisciplinary team include the relationship of communicating with the family and the patient support system in order to maintain the emotional relationship between them during the monitoring in the Emergency Room.

The study by Cole and Lefcowitz (1992) analyzed the interdisciplinary expectations of the role of Emergency Room social worker. Physicians and nurses were asked to mention their perception of the role of the Emergency Room social worker.

Concluding, the medical staff considered that the essential role of the Emergency Room social worker was to work with

patients with financial problems, informing and guiding patients and their work with families and the patients' environment.

The Emergency Room social worker is an important link alongside the physician in coordinating a traumatic death in the emergency room. In a study conducted by Kaul (2001), considers that a social worker is a good fit to fill this role because social workers are professionally trained in clinical assessment, experience working with people in crisis and are familiar with resources available for family members.

The social worker collaborates with medical staff so that the actual notification of death is clear and supportive. The physician designed as the notifier may require time to shift his or her focus from the medical crisis to the family crisis (Robinson, 1981).

The Emergency Room social worker can facilitate this process by spending a few minutes discussing with the persons present in the waiting area. The social worker accompanies the physician in the discussion with the family while the physician delivers the news of death and to provide medical answers and information. It is important that social worker will work with family on social issues and concrete needs.

Many families do not know what to do first after a loved one dies and some feel powerless and overwhelmed.

The Emergency Room social worker will provide the necessary information on the steps needed to lift the body of life in the medical unit: telephone numbers of funeral providers in the area, information and guidance on the steps required to issue the medical certificate establishing the death.

Research methodology

In conducting research, I have chosen qualitative research methods due to the exploratory nature of the study. I have developed an interview guide containing 7 quantitative questions starting with the most general and funneling to more specific personal questions.

The purpose of this study is to provide an in-depth analysis of the perception of the role of Emergency Room social worker by medical staff.

Questions in this survey were designed to gain insight into the role of social workers in the emergency room and delineate this role within the hospital setting.

The sample of the study consists of medical staff, including physicians and nurses, working at Emergency Room at Alba Iulia Hospital. A total of 10 physicians and 23 nurses attended in this study. Subjects were previously informed that participation in the study is voluntary and will in no way affect the relationship of collaboration in the future.

Conclusions

This study had similar results to the study by Cole and Lefcowitz (1992) which compared the interdisciplinary expectations of the social worker role within a hospital setting and found that there was some confusion among the role of perceived emergency room social worker between hospital social workers, nurses, and physicians. Medical staff questioned in this survey responded that other disciplines working in the emergency room may not always know the role of the emergency room social worker.

This study suggests that social workers are a valuable member of the interdisciplinary team in the emergency room, fulfilling multiple roles for the wellbeing of patients.

Five major roles of the emergency room social worker were identified in this research. The first Emergency Room social worker role identified was to evaluate the social risk factors at which patients are exposed at the time of the meeting.

Another role defined in this survey is the advocacy of the patient in order to benefit from the services appropriate to his / her needs.

Also, Emergency Room social worker intervenes urgently for any type of abuse and provides resources that are appropriate to the immediate needs of patients.

Emergency Room social worker is the liaison person between the patient families and the medical staff, having the task of ensuring their regular information on the investigation plan, consultation and treatment during their monitoring in the emergency department.

Collaboration with other specialists, physicians, nurses, and civil servants in social services plays an important role for the Emergency Room social worker in the efficiency of his professional work.

The social worker's professional activity is carried out in accordance with the status of the social worker and the social worker's Code of Ethics.

The professional practice of the Emergency Room social worker is modeled by the ethical principles of the social assistant profession. Social assistants respect

dignity, protect well-being and maximize self-determination of patients they work with. These fundamental values include a commitment to professional practice characterized by competence and integrity, and a commitment to a society that offers opportunities to all its members in a fair and non-discriminatory manner.

As a result of this exploratory study, I have found that the role of the Emergency Room social worker in the team of multidisciplinary team is largely known, even though there were sometimes doubts or hesitations to clearly delineate his status.

In this study was also an opportunity for me to get some erroneous perceptions about the social worker's work and to be able to clarify these issues.

I believe that the study has achieved its purpose to a great extent and can be a useful tool for other social workers in hospitals in Romania, so that their role can be perceived correctly by medical staff.

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