What do Social Workers in Primary Care do?

The Primary care social work service is a generic service provided to all age groups at community level. We work as part of a multidisciplinary team, which includes public health nurse, occupational therapist, physiotherapist, speech and language therapist, psychology & GP’s. We receive referrals from our primary care colleagues, GP’s, hospitals, specialist services and self referrals.

We provide short term intervention to individuals, families, couples and groups. For example, we can provide advice and support on the following:

- Advocate on behalf of our clients for service provision and resources
- Empower our clients to make choices and bring about change in their lives
- Carer support
- Emotional support to our clients and their families
- Advise clients of appropriate services and onward referral to other agencies such as housing, counselling, addiction and domestic violence services,
- Explore with clients their wishes in terms of their future care planning needs

The two case studies below demonstrate a day in the life of a Primary Care Social Worker.

Case Study 1: For the purpose of this case study we have renamed the client Margaret.

The public health nurse (PHN) referred Margaret to social work as she had concerns for Margaret’s deteriorating health. Margaret was diagnosed with Alzheimer’s disease and she had limited support during the day as her main carer worked. The social worker met with Margaret’s daughter who was her main carer to explore current concerns. The social worker then carried out a joint home visit with the PHN to assess Margaret’s needs and her home environment. Margaret’s cognitive impairment was at an advanced stage. The social worker identified with the PHN risks associated with Margaret being left unsupervised such as wandering, personal safety issues, falls risk and the unsafe use of electrical equipment. The role of the social worker in this case was to assess risk, identify with the family an appropriate support plan (family meeting) and to explore long term planning needs. The social worker advocated for service provision in terms of home support, respite and an increase in day service provision.

Case Study 2: For the purpose of this case study we have renamed the client Alan.

On the advice of his GP, Alan attended a monthly social work clinic as he was feeling anxious and stressed and had developed a phobia in relation to crossing over bridges and walking along busy roads. Alan was provided with information on cognitive behavioural therapy (CBT) and he agreed to self educate and contact social worker if he decided it was something he would be able to engage in to bring about change in his life. Alan made contact again and agreed to attend six weekly sessions after which progress will be reviewed to assess change and consideration will be given to the benefit of offering further sessions to maintain and imbed change behaviours. To date, Alan has attended four sessions and he is actively engaging in CBT and is using agreed actions plans to test his thoughts / beliefs and is developing strategies to overcome his problems.