

Scientific Journal of Applied Social and Clinical Science

THE PERFORMANCE OF THE SOCIAL WORKER IN THE OUTPATIENT AREA OF A HIGH COMPLEXITY HOSPITAL IN SOUTH BRAZIL

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<http://lattes.cnpq.br/7752643416075467>

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Abstract: A social worker is a professional who seeks improving the quality of life of users, through access to benefits, social rights and services of the Intersectoral Network. When we think about this professional activity in the hospital area, we have a scenario that often involves illness, as an aggravating factor in the situation of social vulnerability.

INTRODUCTION

The role of the Social Worker in outpatient areas in a highly complex hospital located in Rio Grande do Sul.

One of the areas is the general outpatient clinic that serves all ages and different specialties that provide specialized care (pediatrics, neurology, pulmonology, endocrinology, nutrology, psychiatry...) that is, people who need health monitoring in Tertiary Care, where specialized attention is required for a given diagnosis/situation.

The main actions range from the welcome, respond to and monitor/direct Social Service demands.

Some actions that challenge professional performance include providing assistance and guidance in situations requiring links with the services of the intersectoral network (Social Assistance Reference Center, (Specialized Social Assistance Reference Center, Basic Health Unit, Guardianship Council), Public Defender...); monitoring patients and families who present situations of social vulnerability; discussion of cases with the Social Service team and the multidisciplinary team made up of doctors, nurses, psychologists, among others;

In social assessments, the need for social support for a given patient is identified or not.

In everyday professional life, countless demands arise that require continuous improvement, situations in which social services are activated involve patients assessed by psychiatry who are at risk of suicide - which,

according to the World Health Organization (2000), is a complex problem for which there is no single cause or reason. It results from a complex interaction of biological, genetic, psychological, social, cultural and environmental factors. It is difficult to explain why some people decide to commit suicide, while others in similar or worse situations do not. However, most suicides can be prevented. (WHO, 2000)

Such situations handled by the Social Service in the hospital's outpatient area occur in accordance with the institutional protocol involving review of medical records, extensive discussion of the case with the assistant team and psychiatry on-call, locating a family member and organizing the patient's travel to a psychiatric emergency. The articulations aim to guarantee the protection of patients who are in a vulnerable situation.

Another demand is related to the active search for outpatient patients and access to the social support/assistance network to locate a family member - the Social Service is activated by the specialties with a view to carrying out an active search for patients and/or family members in order to continue the health monitoring, especially when it comes to children, adolescents or the elderly.

Home visits usually occur in cases where it is identified that a better understanding of the patient's social context is necessary, which may be impacting adherence to treatment/health monitoring.

Visits to Network institutions aim to improve case discussions.

There is a constant need to ongoing education for contractors, from multidisciplinary teams, on the importance of a broader view of health.

Outpatient Social Service provides "emergency care" for urgent or non-urgent situations with varied, simple and complex demands.

Due to the outpatient routine, we have a large number of patients and family members treated and who return to their homes, therefore it was decided to deal with situations when they arrive at the service.

Failure in the flow of outpatient activities is identified when referrals occur via consultations or emails from fellow social workers who work in other sectors of the hospital. The flow can be improved in order to deal with all situations referred to the Social Service - general outpatient clinic.

According to Costa (2000), the insertion of social workers in health services is mediated by the social recognition of the profession and by a set of needs that are defined and redefined based on the historical conditions under which public health developed in Brazil.

We identified as expressions of the social issue that reflect on the health of many patients and their families, demands regarding the living conditions of patients that become worse with illness, such as unemployment, underemployment, violence, lack of housing and abandonment of treatment.

The Social Service professional must use, according to Vasconcelos (1993), reflective practice, which allows users to analyze and unravel the situations experienced through critical reflection stimulated by the social worker, so that the user can capture, to the extent of possible, the movement of social reality and, consequently, participate, consciously, in the process of transformation of this reality as a historical being.

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