

# How Healthcare Can Work with Social Work for the Elderly?

**Hospital Authority Convention 2015**

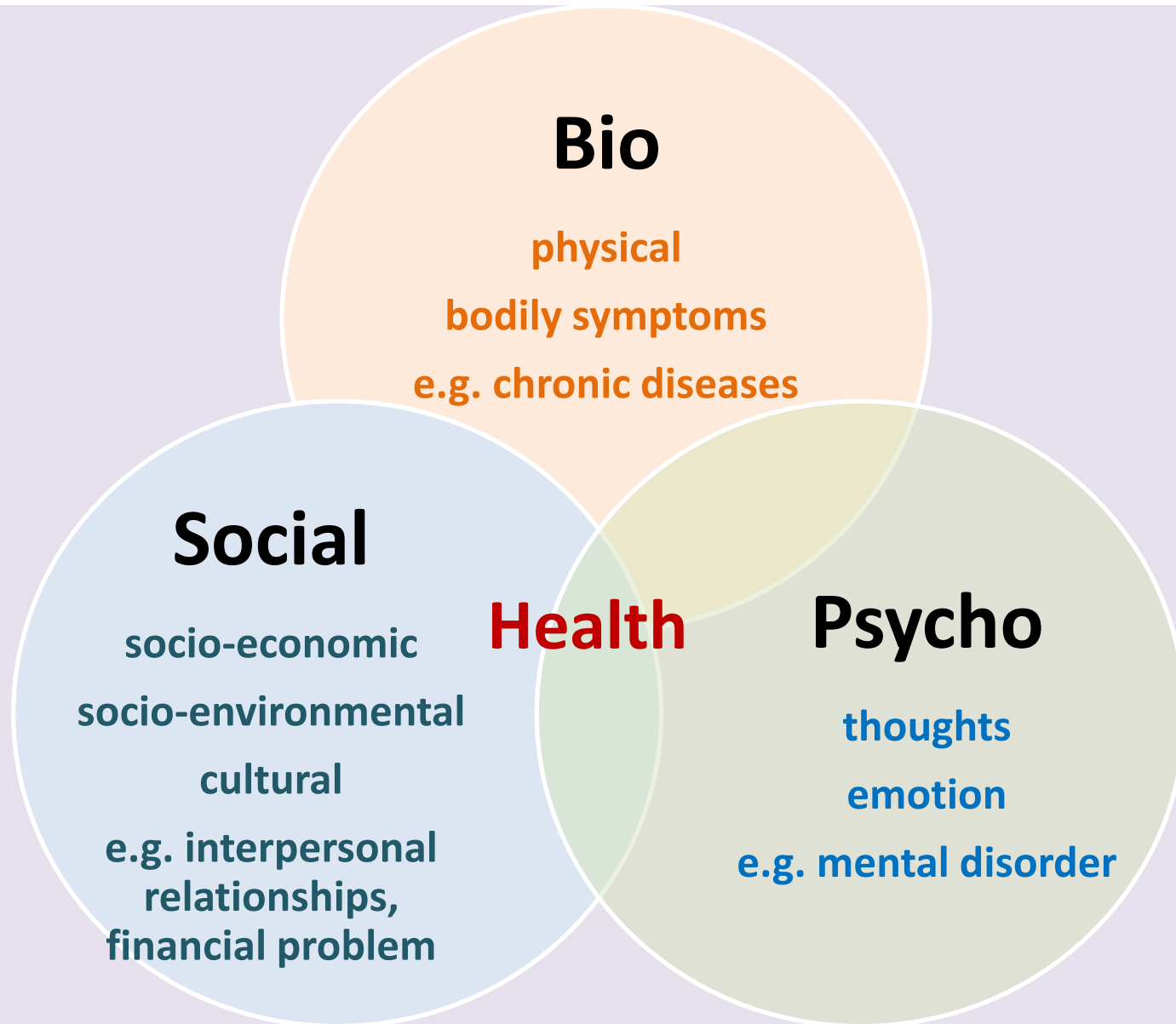
**Ernest CHUI Wing-tak RSW, PhD, EdD**

**Associate Professor**

**Department of Social Work & Social Administration**

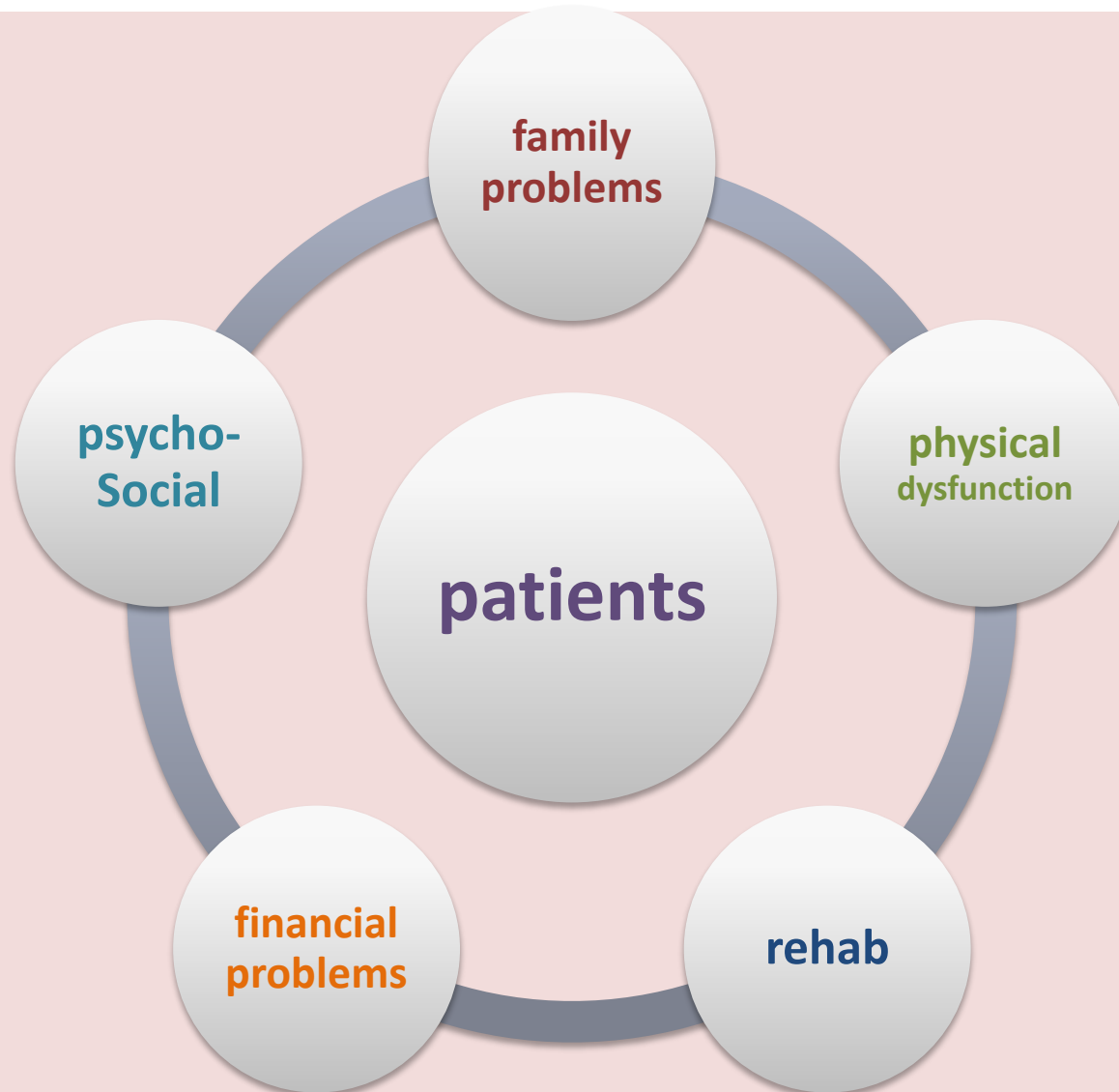
**The University of Hong Kong**

# Holistic health ~ Bio-Psycho-Social



# patients' / clients' problems

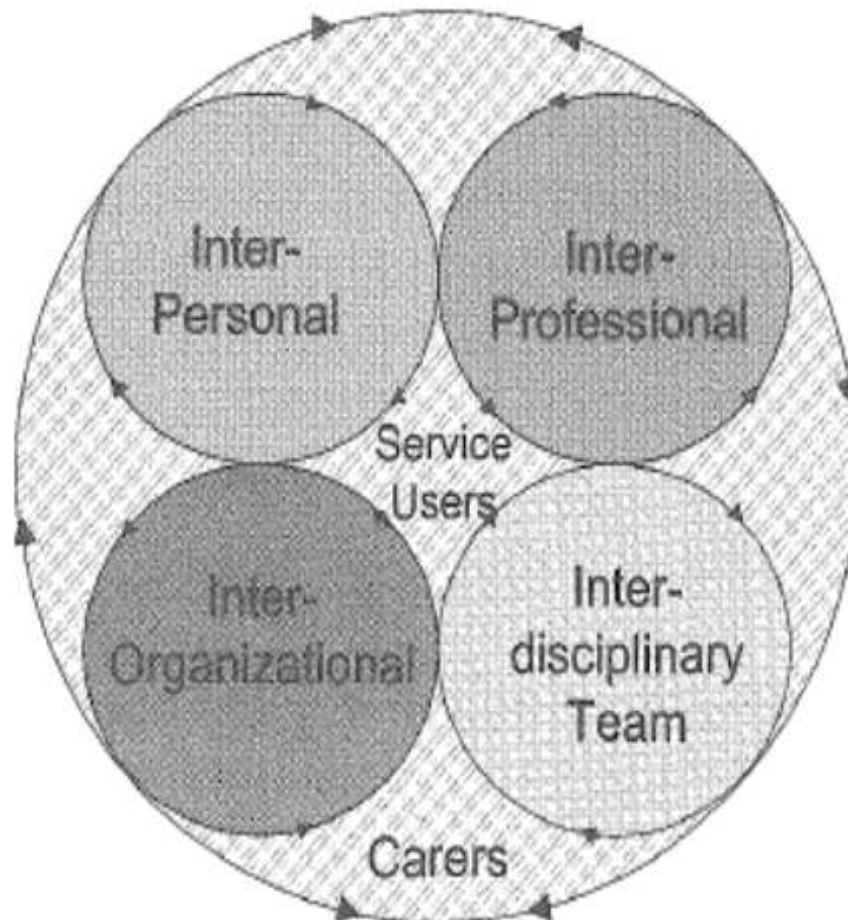
## holistic appraisal



# Inter-professional collaboration

(Wittington 2003, Crawford 2012)

spheres of collaboration and interaction



# Inter-discipline / professional collaboration (Wittington 2003; Crawford 2012)

## **4 domains of collaboration**

- 1. inter-personal**
- 2. inter-agency**
- 3. inter-professional**
- 4. inter-disciplinary**

## **4 forms of collaborative relationship**

- 1. informal networking;**
- 2. formal networking**
- 3. inter-agency  
collaboration**
- 4. multi-disciplinary  
teamwork**

# social work professionals

– in various service settings ~ to elderly (in HK)

- 1) **centre-based** elderly services e.g. DECC / NEC / SC ...
  - information / education
  - early identification, referral
- 2) **home & community services** (e.g. EHCCS, IHCCS, D/E)
  - support – e.g. post-discharge (IDSP)
- 3) **residential care** – RCHE, NH
- 4) **medical social worker** – elderly cases
- 5) **rehabilitation** settings – elderly cases
- 6) **family service centres** - IFSC

耆康會 祥芳念慈護理安老院  
S R G E KWAN FONG NIM CHEE HOME FOR THE ELDERLY



Extracted from: [http://www.heephong.org/webprod/cht/files/center/81/IMG\\_4573.jpg](http://www.heephong.org/webprod/cht/files/center/81/IMG_4573.jpg)



# 長者地區中心 District Elderly Community Centre







# Healthcare professionals + social workers



**Medical  
professionals**  
doctors  
nurses



**Allied Health  
professionals**  
occupational  
therapist  
physiotherapist  
speech therapist



**Social  
workers**

# collaboration ... illustrations



mass  
program

case conference



referral

knowledge  
exchange



# A case illustration

- an elderly patient resisted taking prescribed medicine, even with doctor's and nurse's advice;
- medical social work (msw) interviewed the patient...
- msw invited family members to visit the patient .....
- the elderly was glad and then agreed to take the medicine.

# *gerontological imagination* (Ferraro 2007)

- heterogeneity amongst older people
- life span / life course perspective, not a 'static', 'yes' or 'no' issue
- aging process = multifaceted → need multi-disciplinary, holistic approach
- vs. ageism, cumulative disadvantage (over life span) that result from institutional but not individual causes/fault

# *Gerontological Competence*

## **some key elements** (Rosen, Zlotnik & Singer, 2003)

- assess one's own values and biases regarding aging, death and dying;
- accept, respect, and recognize the right and need of older adults to make their own choices and decisions about their lives within the context of the law and safety concerns;
- understand normal physical, psychological, and social changes in later life;
- address cultural, spiritual, and ethnic needs and beliefs of older adults and family members;
- understand the influence of aging on family dynamics;
- identify ethical and professional boundary issues that commonly arise in work with older adults and their caregivers, such as client self-determination, end-of-life decisions, family conflicts, and guardianship

# 4-whole (holistic)care (China)

## “四全照顾”

**全人** ( 躯体、心理、社会及精神 )

whole-person (physical, psychological, social, spiritual)

**全家** ( 家属情绪和精神需要 )

Whole-family (include family members)

**全队** ( 社工、医生、护士和志愿者 )

Whole-team (multi-discipline)

**全程** ( 生前到死亡 ) 角度阐述临终关怀

Whole-life (end-of-life)

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**Thank you**