

DIVISION SCOPE OF SERVICE

Division: MIDAMERICA
Classification: LICENSED SOCIAL WORKER
Applicant Name:

<p>Licensed Social Worker: The Licensed Social Worker must have equivalent qualifications, competence and function in the same role as employed individuals performing the same or similar services at the facility.</p>
<p>Definition of Care or Service: The Licensed Social Worker collaborates with hospital's case management and assists patients and families in understanding patient conditions. They help patients and family members develop coping strategies, assess patient needs, and provide emotional and mental assessments on the patient. Scope of service may include:</p> <ul style="list-style-type: none"> • Establish and maintain a relationship of mutual respect, acceptance, and trust • Gather and interpret social, personal, environmental, and health information • Carries out social evaluations and plans interventions based on evaluation findings. • Facilitate cognitive, affective, and behavioral changes consistent with treatment goals • Identify appropriate resources and assessment instruments, , crisis intervention and supportive counseling as needed • Maintain collaborative relationships with organization personnel to support patient care. • Assists physician and other team members in understanding significant social and emotional factors related to health problems and death/dying issues. • Demonstrates Clinical and Service excellence behaviors to include code of HCA Healthcare conduct core fundamentals in daily interactions with patients, families, co-workers and physicians.
<p>Setting(s):</p> <ul style="list-style-type: none"> • Healthcare facilities including but not limited to hospitals or outpatient treatment facilities
<p>Supervision:</p> <ul style="list-style-type: none"> • Indirect supervision by the Director of Case Management
<p>Evaluator:</p> <ul style="list-style-type: none"> • Department director of Case Management or designee
<p>Tier Level: 2</p>
<p>eSAF Access Required: YES</p>
<p>Qualifications:</p> <ul style="list-style-type: none"> • Bachelor's Degree or higher in Social Work, Human Relations, Psychology, or Sociology • Current active License as a Social Worker <p>NOTE: Where education may not be defined in qualifications area of the Scope, HCA Healthcare requires the highest level of education completed (not training or courses) confirmed on your background check.</p>
<p>State Requirements:</p> <ul style="list-style-type: none"> • Current active license as a Social Worker in the State they are working
<p>Experience:</p> <ul style="list-style-type: none"> • N/A <p>Preferred Experience:</p> <ul style="list-style-type: none"> • Minimum of two years or three thousand hours of supervised clinical experience
<p>Competencies: The Licensed Social Worker will demonstrate:</p>

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- Accurate patient information review and evaluation
 - Uses at least two ways to identify patients
 - Verifies that the requested services correlates with the patient's clinical history, presentation and physician order
 - Accesses patient's medical record appropriately
- Job Specific Competencies:
 - Timely completion of discharge planning in accordance with hospital specific guidelines
 - Demonstrates ability to perform psychosocial assessments, crisis intervention and supportive counseling
- Maintains a safe environment
- Infection Prevention
 - Practices consistent hand hygiene
 - Uses personal protective equipment (PPE) when required
 - Required immunizations per Division requirements
 - Complies with Isolation precautions
 - Maintains sterile field

References:

NASW: [National Association of Social Workers \(NASW\)](#)

Difference Between Clinical and Non-Clinical Social Work: <http://www.socialworkdegree.net/what-is-the-difference-between-clinical-and-non-clinical-social-work/>

Every state Social Worker verification: <https://www.aswb.org/public/look-up-a-license/>

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Your signature confirms you will be able to comply with the Qualifications and Competencies listed within this Scope of Service and that you will confirm education via your background check.

Applicant Printed Name: _____

Signature: _____

Date: _____