

# Two health care professions social work essay



**ASSIGN  
BUSTER**

**INTRODUCTION**This report takes a glance at two health care professions that is Occupational Therapy and the Social Worker. The two professions will be compared and contrasted within their professional learning in the University, their mode of registration conditions, code of conducting their work. The Framework of their clinical governance and the conditions of continuing professional development for these two professions will be examined.

Finally , the writer will briefly discuss the parameters inside both professional practices like the professional boundaries and ethical issues. **EDUCATION**

**AND REGISTRATION**The occupational therapy and Social Work are caring professionals that aspire to render good health care services to their clients in the society. Social work is stimulating but also satisfying as the works aims to guard teenagers and adults from being hurt whatsoever their stage, race, sex or ill health. To become a qualified social work , you will need either an honours or postgraduate degree in social work. The entry requirement for social work like the Dundee university is SQA Higher ABB/BBBC, GCE A-Level AB/CCC , ILC Ordinary grade A level and IB Subsidiary Level 5 grade. The SWAP certificate in subjects that include English, literature at SCQF level 6 ABB grades plus mathematics at intermediate 2 grade C could consider. The course is a four years BA Honors program (UWS 2012). After the course conclusion, the social worker must register with the Scottish Social Services Council. The initial sum of £30 fee is demanded for registration. Whereas the occupational therapy entry requirement like in Caledonian university is BBCCCC at higher grade from the ILC , also is a four years programme (UWS 2012). To qualify as an occupational therapist, you must do 1000 hours during the course of studying under the supervision of qualified senior occupational therapists to enable to achieve all the necessary experience.

<https://assignbuster.com/two-health-care-professions-social-work-essay/>

After the course completion , a Bsc in Occupational therapy is awarded to the student which make it qualified to apply for registration to work in the NHS or any social field with the Health professions council (HCPC 2012). The occupational therapist registration fees are £400. CONTINUING PROFESSIONAL DEVELOPMENT Continuing professional development is a process whereby both professions continues to study and bring up-to-date skills during their careers so that, their abilities and understanding are up to date to work safely, rightfully and successfully (HCPC 2012 ). The Continuous Professional Development (CPD) is currently a vital factor of the regulated care and social work profession. The OT's and the social work hence their works are similar , they have a kind of framework that support the profession very well . The OT's content is more planned to keep up to date with a range of new developments in clinical practice and policy. The OT's update depends on individual level of study with the health care professions council (HCPC 2012) also proof of learning will need to be well-matched with HCPC in the case of a review. Whereas, the social work post qualifying CPD is the account of The Post Qualifying Association for Social Work in Scotland. Their framework allows the social worker in workplace registration to learn , attend courses, training and encourage continuing professional development strongly. In fact all registered social workers are to embark on 15 days of training to acknowledge the professional competence. All forms of learning, training and courses assessed both in the workplace and outside are to be used to ascertain evidence of competence. The OT's registration renewal fees cost £144 for two years and this sum can be demanded as a tax payment whereas the social work renewal fees annually is £30 consequently or else they might be removed from the register. The both professions still

<https://assignbuster.com/two-health-care-professions-social-work-essay/>

need to be updating their CPD. CODE OF CONDUCT The Code of conduct is a set of accounts that illustrate the value of professional routine and custom necessary for them to move around their usual work. The social workers code is written by the Scottish Social Services Council (SSSC) body in Scotland. This code is to make sure social workers respect their service users' freedom equally in safeguarding them. They have to understand how to uphold the public trust and self-confidence in the profession which to say , they should not overlook any unauthorized acts been misused or discrimination by their clients or colleagues instead question discrimination which also applies to the OT's in their profession too. The OT's code of conduct is written by the College of Occupational Therapists being instructed by the British Association of Occupational Therapists, the body that governs the profession throughout the United Kingdom. PRINCIPLES OF CARE PROFESSION The OT's principles are rules which cover all areas of practice. The rules put clients at center in practice, emphasizing the significance of adapting care (College of Occupational Therapists, 2000). The OT's encourages the development of problem solving skills to support clients' occupational performance, using significantly assessed evidence to back therapeutic interventions. While the social work principles ( Scottish Social Service Council September 2009) stated that all social workers must safeguard the rights and support the welfares of their clients irrespective of the people they work for. The both professions must sure their staff is well qualified for registration to be able to deliver better services and can be relied on. Both the social worker and the OT's ensure their staff are accountable for their actions whether consciously or unconsciously. The OT's and the social worker are both responsible for ascertaining the nature and

<https://assignbuster.com/two-health-care-professions-social-work-essay/>

extent of information to be shared. **THE CLINICAL GOVERNANCE** The clinical governance can be defined as the day to day regular supervision that the both professions needed to safeguard periodically for enabling , in-depth consideration on clinical practice. This procedure is to be continued throughout the person's career, whether they remain in clinical practice or move into management, research or education Bond & Holland (2001 p12). The aim of clinical governance is to improve the quality of care for both professions hence there are similar in work nature : Each one has a separate right to select their controller , Clinical control must not be enforced upon a person and there must be mutual consent and the organizations hold equal position. All the procedure must be centered and not organizations or business protested but there must agree on ground rules. The idea behind the clinical control is that all groups have a right to precise their approaches, views and worries without fear of muck. All ideas must be centered round the individual also Clinical control must be confident with the ground rules.

**PROFESSIONAL BOUNDARIES AND PARAMETERS** For safeguard and trusting association the both professions must not abuse or mishandling the status of power by overpassing boundaries. To maintain healthy entrusting practiced relationship the OT's and the social worker safeguard their own competency, honesty and reliability. The OT's comprehends their own professional competency parameters and avoid going outside the area of the limitations of their knowledge and skills. For patients whose requirements drop outside the OT's capability, help and means must be pursued and used to deliver the compulsory services, or the patient could be referred to suitable professional services The OT's supervision can include reflection, forming, co-treatment, conversations, education, order and can be delivered face-to-face through

<https://assignbuster.com/two-health-care-professions-social-work-essay/>

phone, written conformity or electronically. while the social worker can be informal or formal. The social workers can follow the work of a colleague connected to them or carry out some investigation. ETHICAL ISSUES These are principles that aid the professional conduct in all aspects of practice. While patients are centered practice is one of the most central values behind the OT's and the social worker. It is very vital to integrate into their practice , for all patients, the four values of autonomy, non-maleficence, beneficence and justice. The both professions should be able to make selections, being self determined, accountable and able to decide self-governing judgement without being forced by some others persons action ( Henry, 1995, p. 4). The OT's and the social worker should not disapprove the clients' choice in the wrong rather they must refer such case to the multi-disciplinary team who can counsel the patient in pleasing their choices. Therefore the both professions should respect the opinions of others, and value their autonomy and avoid harm to the client. Although the rule of beneficence might conflict with the autonomy of the patient, he may refuse treatments which staff might consider necessary for release but disproves the wishes of the patient. Such matter requires the value of justice to connect with the idea of fairness and equity. CONCLUSION After much facts had been collected by the writer regarding to both professions , the writer understood that the two professions has some resemblances in their manner of handling and principles. With all these facts , the writer feel it will direct care workforces how to do their work very without differing from it. Although they both have dissimilarities in the subjects of education and registration but the both professions must be graduate to start the job. The OT's entry requirement is more tough unlike the social worker where consideration can be discretion.

Within the parameters of their professions, the OT's supervision and works could be very handy also detailed. The both professions could share the same accountabilities but they are governed by different organizations. One of the most exclusive entities about these two professions is that they centered clients needs, quality care and make sure their service users get the best of them irrespective of the race, sex, religion hence giving people the best service is their motive.