

Inclusion of Registered Social Work Services in Third-Party Health Benefit Plans

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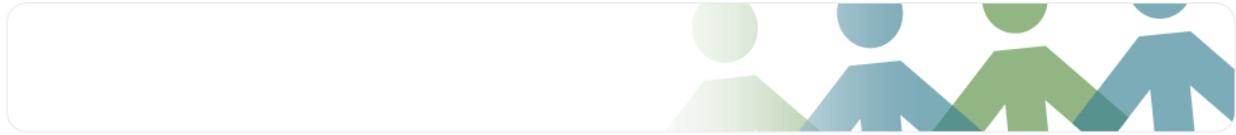


Executive Summary

Despite the fact that twenty percent of individuals in Canada will face a mental health issue at some point throughout their life (Canadian Mental Health Association, 2014), mental health services in Canada are largely underfunded (Mental Health Commission of Canada, 2012). Medicare will fund services delivered by a general practitioner, psychiatrist, psychologist, or social worker (in a hospital setting) during times of crisis. Conversely, services sought out when a consumer is not in crisis are typically not covered by Medicare and are difficult to access due to lengthy wait times (Picard, 2013). The Mental Health Commission of Canada (2012) suggests that one way of addressing the issue of lengthy wait times is to increase the accessibility of qualified service providers. Registered social workers are one possible solution to this issue through more widespread inclusion in third-party health benefit plans (TPHBPs).

In partnership with the Canadian Association of Social Workers (CASW), a Master of Social Work research team from Carleton University conducted this exploratory study to answer the following question: Registered social workers are qualified, accessible providers of counselling services. In light of this, why are registered social work (RSW) services inconsistently included in third-party health benefit plans? Semi-structured interviews were conducted with four national insurance companies, two labour unions, one business, and three key informants (two social work professors and one occupational therapist), with the aim of identifying possible barriers to inclusion.

It was found that all four insurance companies offer RSW services as a part of their extended health care benefit plans (synonymous to the researchers' use of TPHBP), either as a part of their standard provision or as an optional add-on. The services of a registered social worker are often bundled with the services of a psychologist, meaning that an employee has the choice of using the money they are allotted toward either service provider. The majority of participants stated that demand is the key to more widespread inclusion of RSW services. The public must request it of their employers, and the employers must request it of the insurance companies. In order for demand to occur, the roles and services provided by registered social workers must be clear to all parties. From this, it appears that the most significant barrier to including RSW services in TPHBPs is a lack of clarity in this regard due to the diverse range of



social work roles and services that exist within the profession. Without a clear understanding of the distinct roles and services of registered social workers within the mental health service delivery system, it is unlikely that the necessary demand will be created to support more consistent inclusion in TPHBPs.

In response to this, the researchers recommend establishing a clear definition and unified image of the social work profession. This includes carving out a unique role within the mental health service delivery system, as well as distinguishing the roles and services of a registered social worker in private practice since this is the segment of the profession most relevant to inclusion in TPHBPs. An advocacy campaign that promotes the services of registered social workers and how their services differ from those provided by a psychologist is recommended. This campaign should be targeted to the public, employers, and insurance companies in order to ultimately create demand for services.

As an exploratory study, the results of this research project include suggestions for future research. Significantly, the CASW needs to engage with businesses in order to further understand the barriers to inclusion of RSW services that exist at the employer level. Linking the study to preventative mental wellness in the workplace may be one avenue to engaging this community. Ideally, future research will also include consultation with psychologists to explore professional relationships and perceptions. The end goal is to understand how to effectively join together to address the unmet need for mental health services in Canada. Additionally, it would be worth exploring the current state of private practice across Canada, as it will be important in establishing a distinct description and image of private practice registered social workers to better prepare advocacy strategies aimed at reducing barriers to inclusion. Finally, arguably the most important future research direction is to consult with the public to better understand their knowledge and perceptions of the qualifications, roles, and services of registered social workers. This will help to inform and prepare effective strategies to promote RSW services, which is critical to creating the necessary demand for inclusion in TPHBPs.