



Read the full transcript from the interview with our Senior Social Worker, Emma Wakeman:

**Your experience in mental health:** I've been at St Andrew's for three and a half years and I've always worked in Neuropsychiatry. I actually did a student placement here when I was training to be a social worker and just absolutely loved it. I loved the patients and the work so I applied for a job and got it. Before St Andrew's, I worked with Mind, the Charity, and had done a lot of work in mental health so it's a real passion of mine.

**Describe the service you work in:** As a social worker, I work in neuropsychiatry, specifically the wards across brain injury. We have different wards depending on the needs of the patient. We have an admissions ward for people who are acutely unwell, often with complex needs and challenging behaviour. We also have rehabilitation wards. They are really for people whose challenging behaviour has reduced, and they want to focus on discharge and moving on and we can help them with areas of daily living, psychologically dealing with their brain injury, cognition and speech and language. It's really about them being able to move on and out of hospital. This is always the goal. No one wants to stay in hospital for long.

The service also has a dementia and Huntington's disease service. That's very similar, helping people to have the best quality of life possible. Dementia can be a debilitating disease so it's essential that we are able to support people with their activities for daily living (ADL) and provide the compassion and care that they need at the end of life.

**Challenges in your role:** The patients I work with usually have a brain injury or some kind of neurological condition. Some of the challenges are that they are not always able to tell you themselves what they think or feel, it is sometimes like their emotions betray them, because they will feel one thing and do another or they don't have insight into their condition which makes it really hard for them to accept treatment.

I think one of the big challenges is making sure that you are working in the patient's best interests, not putting your own values and judgement on their situation. Making sure that they have a voice and you're doing the best you can for them. It can also be difficult sometimes if patients don't have that insight because they will almost resist what is really good for them and that can be quite hard to deal with sometimes.

**What do you most enjoy about your role:** In social work we deal a lot with discharge and I think anyone who works here will say the best thing is to see a patient moving on, going to the next placement, going back home, returning closer to family. That's an amazing achievement when you see that.

Part of the role of social work is working with family members and I think they are often forgotten in the world of mental health. You focus on the person who has the condition, and I

love dealing with them [family], helping them, speaking with them. Because everyone is from all different walks of life and it's really interesting and I feel that we are a great support for carers and that is something I really enjoy doing.

**Describe a typical patient presentation:** Obviously, no patient is the same as another but you do see some common themes when you're working with people with brain injuries or neurological conditions. A lot of the time, you can get a lack of motivation. People can often see that as a sign of laziness, but it's actually not, it is the changes in their brain that affects how they see the world and see the tasks ahead of them.

You often see people with very impulsive natures, so they haven't got that filter that says 'stop, don't do that' as it could be dangerous to me or someone else, so that can be really difficult for them and others. And then you get people who have the ability in one area, so their speech could be perfect but they aren't able to use their hands, so that can be really distressing to them.

**What is the difference between the service your work in and a General Neuro rehabilitation ward:** Our neuropsychiatry service is very different, often people come here unfortunately from other failed placements, because we offer a very specialised service that is able to deal with challenging behaviour in a compassionate and least restrictive way.

There are years of expertise here at St Andrew's and we know what works very well and are always looking out for new resources, such as virtual reality. It's that specialism which helps people who don't flourish elsewhere.

**What are the main interventions used:** As a social worker here in a hospital we are here to make sure the patient's social needs are met. We do that in a variety of ways. That could be ensuring that they have good contact with their family members, however that looks.

It could mean ensuring that their finances are in order, so if they are entitled to benefits they get those and determining whether they are safe to spend their money. Sometimes people can be at risk of financial exploitation or they just spend their money so much that they end up with none.

It's also looking at the safety of the patients and so we oversee any safeguarding incidents to check that the right things are in place to make sure that patient is safe. Someone summed it up very well that social worker is working on behalf of the patient. You don't work with a patient as intensely as a doctor would but you work with their family, their commissioners and external people, to really make sure their journey here goes as smoothly as possible and that at the end we discharge them to the right place.

**What sets St Andrew's apart:** Well the first thing is that St Andrews have social workers. I'm 'bigging' up my own profession but it is very much needed. If you think about hospital it is very medically focussed so you need that social focus on the patients which is really important.

Also we are a point of contact for carers who can be very confused and distressed. St Andrew's often helps people from outside of area, so it is really important to have that point of contact, that support through the whole process for family and carers. We also have a carer's lead on site which I think is really important. The role of hospital social worker is not something you get everywhere.

**Interesting/fun fact about yourself:** I actually have two scars on my face. One from when I was hit by a boomerang, and the other one on my chin from a skateboarding accident. Unfortunately none of them was as an adult, both as a child, I'm not that interesting now.

**[Click here](#) for further information about our brain injury services.**