The Requirements of Clinical Social Work Practice in the Medical Field

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Abstract: Social Work covers a huge and broad social services area, where social workers plays many roles during their dealings with their customers, where the social worker work requires the ability and skill of the permanent participation of all disciplines that work with them in the ideas and methods of work, putting in front of him is always the need to develop the ability to contact members of the team work, judging from the rapid development of social work in general and medical social work in private it can be said that the positions that deal with them have become highly complex, multi-faceted which would result in the increasing need of medical social worker to a range of knowledge, expertise and skills in addition to the diversity of strategies used and that relate to the individual and the family environmental relations, in addition to supporting the relationship between the social worker and the physician team. Thus the work of social workers required by the entrances and modern models will enable them to meet the patients and their families' needs, and is the Clinical Social Work, one of modern entrances therapeutic aimed at the adoption of the social worker on the medical model in professional practice, and the current study aimed to identify the practice of clinical social work requirements in the medical field, and through a series of sub-aims, and the study is one of the analytical descriptive studies that relied on comprehensive social survey of the social workers at governmental hospitals in Jeddah, through a Questionnaire, and the study concluded set of results was the most important that there are several requirements that must be available in clinical social worker to work with (the patient - the patient's family - staff – community)..

Keywords: Requirements; Clinical Social Work; Clinical social worker; Professional practice

1. Introduction

The focus of development process in any society is the attention to the human element, which is one of the most important elements in pay it, as this element is first mover of the development process which the beneficiary basic ones in up progress, which requires the use of every human capacities in different aspects of life.

The health service aims of social and economic development aims, especially after the International Group approved the Universal Declaration of Human Rights in 1948, which was considered health a fundamental right of all individuals and peoples. Thus, the provision of advanced health services to those who need a fundamental responsibility of the governments of the process has become a must and that it provides to its citizens. If this is a health site for the whole world, it occupies in developing societies more distinctive position where confirm these societies policies on the citizen as a goal and a means (Ahmed and Batarseh, 1993, 20.22).

Health care also occupied a prominent place in the modern age, as measured by the progress of societies and the advancement of how much to offer to individual's services and health care. Interest to health care due to being as human investment for society individuals to ensure their participation in the productive process, narrated that way can development human resource in quantity and quality (hassan, 1988.40).

Social work one of the professions which have seen clear progress in this century in different practice areas, particularly the medical field in terms of social work seeks to achieve its preventive and by taking preventive measures to counter the disease. And this is done through a series of constructive programs and services with high efficiency in medical institutions (katz,. Marlin, 1992, 215).

The professional practice requires cooperation and support in the various professions from the societal and strengthening formats from the available resources in the society. Among these resources and technological methods developed, and the social work profession like other professions has tended since its creation to deal with the scientific supportive resources, to further link attempts and applied natural sciences and to achieve scientific methodology based on advanced and modern cognitive technology.. to

increase its effectiveness in professional practice (Fattouh, 1992, 254).

Medical Social Work one of the areas of social work practice and rely mainly on experience and skills and methods of medical social worker in helping the patient and his family on the one hand and help the management of the hospital and the doctor and the nursing staff on the other hand, help the society in the prevent and cure various diseases with social dimensions, in particular, the third hand (Essam, 2007, 190).

Social work profession seeking to the development of methods and techniques in practice by providing the best professional interventions that enjoyed a high level of effectiveness and efficiency at the same time, and this requirement is not new, but is one of the main requirements of the profession the first writings of the profession has focused on the importance of vigorous pursuit toward adopting all what would make a practice enjoyed a high level of legalization, (Alnagem 2013.78). Where the social workers format professional forces of Social work, who are responsible for doing their activities professional, I have developed a different inlets to take advantage of these professional powers based on defining their roles and professional activities in the areas of practice for social work, and the need for efficiency and skill factor Organizational cooperation with the client pattern in addition to doing service roles (Carol, 1976, 229,232). Which requires being a social worker in search of knowledge open to what around him from knowledge and experience can benefit, there is no room to repeat the experiences cannot confirm or deny its effectiveness., It is now dependent on the existence of evidence can be relied upon to reach a professional exercise effective. Scientific and methodological knowledge is ethical and moral and obligation to social worker skills and expertise and practice are important in the proper selection of professional evidence available and thus make decisions about appropriate interventions to clients. (Gibbs & Gambrill, 2002, 460).

And thus it becomes a concern tools profession and its technical methods of art, and work on development of the urgent requirements that could lead to maximizing the benefits of the revenues of professional intervention of social workers in the fields of professional practice, and improve the social performance of individuals, groups and families and help them to adapt to social conditions and development environments in accordance with their needs different and to achieve their compatibility and adaptation. (Sheafor, Horeijsi, 2006, 130).

The entrances therapeutic social work focused on helping the client to achieve a better understanding of himself, as well as a better understanding of relationships with others, especially his relations with relatives and friends and then choose the most effective ways to deal with those situations. The therapeutic entrances focus for individuals and their psychological and social performance, which forms the basis of the intervention process, and the role of social worker become as a helper who listens carefully to what the client says, and therefore easier to have the opportunities that being able to achieve a better understanding of the people, and their life conditions, this is done in the context of the use of strategies effective to achieve good growth and learning (Barakat 2011.4). This is emphasized by the "Helen Palmer" the importance of interest to the development of practical skills for social workers working in the social care areas so that they can cope with contemporary challenges, especially related to the scope of professional practice in their field, as well as the need for understanding of all other formats they are dealing with, as recommended the actual need to identify measures to improve the social workers skills, and work to develop their professional role palmer, 1995, 25).

2. The problem of the study

Social work covers a huge and broad social services area, where social workers play many roles during their dealings with their clients, depending on different situations that arise from contact with clients and their interaction with their environments. Clinical Social Work seeks to provide direct services to individuals, groups and families with the aim of prevention and treatment of problems that hinder their psychosocial jobs (Aldamag, 2013, 2).

And Social worker requires in his work at this field ability and skill on permanent participation for all professional disciplines that work with them, in the ideas and methods of work, putting in front of him is always the need to develop their abilities to communicate with members of the team everyone it works as reference and specialization under it, and the responsibility of the social worker contact environment and resources on the one hand and the medical team on the other hand (Goldstin, 1984, 286).

Perhaps the most important characteristic of a medical social worker from other social workers is the acquisition of expertise and knowledge in the medical field through field training in clinics and medical institutions also enjoy the many morphological and mental, psychological and professional qualities and performs many roles, including education of the patient and his family, developmental and preventive and remedial works to diagnose the disease in social terms, psychological and providing assistance to them and their families before entering the hospital, and will continue this role in helping after entering the hospital and out in what is known subsequent care,

particularly for patients at risk of relapse again (Alskoor, 2009.192). Social Worker helps individuals to increase their ability to solve problems, and keep pace with the requirements of life, and helps them get the resources they need, and facilitate interactions between individuals and people and their environments, and evaluates organizations and organizations responsible for addressing the needs of the people, and to influence social policy. (Alsokary, 2000, 503).

The nature of the social work profession as a profession with no clear boundaries, and practiced in almost every place where individuals and families need to assist the professional assistance, the social work is still in the extended phase as a result of the growing areas of professional practice in, which makes the social workers find themselves practicing the functions and roles have not been groomed by her. There is no doubt that the practice of social work is not a random practice, it controls her acting profession, which is based on the philosophy and wiped out their philosophy and values (Aldamag, 2013,4). Based on the rapid evolution of medical social work can say that the positions that deal with them have become highly complex, multi-faceted which would result in the increasing need of medical social worker to a range of knowledge, expertise and skills in addition to the diversity of strategies used and that relate to the individual, family and environmental relations, in addition to support the relationship between the social worker and the team physician.

The Clinical Social Work, one of modern entrances therapeutic aimed at the adoption of the social worker on the medical model in professional practice, but the practice of clinical social work generally require experience and skill in their application, they are a group of professional operations introduce by a professional practitioner including-but not limited to - employ a large number of skills, And employing professional ethical principles and the Charter, and the ability to minute observation, and the ability to study, diagnosis, assessment and treatment or professional intervention. And the professional practitioner experience play an important role, and experience here means qualitative and quantitative together and not only quantity that only measured by the number of years, and the diversity of this experience a big role in achieving quality in performance and practice of professional of social work Aldamag ,2013). Based on this, the current study attempts to answer the question follows: What are the main necessary requirements for the practice of clinical social work in the medical field?

3. The importance of the study

The importance of the study in determined in the following points:

1. What is medical field represented as one of the important areas of social work where he works to help the patient take full advantage of the possibilities and services of the medical institution in order to increase social performance.

2. The importance of the role of medical social worker at the hospitals for its many services related to social, psychological and economic aspects for patients and their families, as well for its information to the team at the hospital.

3. What is represented by the diversity of models and trends used by the social worker to work with the patient and his family, including help develop professional work?

4. The results of this study may be useful to medical social workers, and work to develop professional practice through the use of models and recent trends in professional practice.

4. The aims of the study

The current study aims to identify:

1. The most important requirements for professional roles necessary for clinical worker in the medical field.

2. The most important requirements for professional skills necessary for clinical worker in the medical field.

3. The most important requirements of professional principles and ethics necessary for clinical worker in the medical field.

5. Questions of the study

The study was launched to try to answer the following questions:

1- What are the necessary requirements for professional roles for clinical worker in the medical field? This question is achieved by answering some of the indicators of clinical social worker roles with both (the patient and his family - the team therapeutic - society institutions).

2- What are the necessary requirements for professional skills for clinical worker in the medical field? This question is achieved by answering some of the indicators of the professional skills of clinical social worker with both (patient and his family - the therapeutic team - society institutions).

3- What are the main requirements of professional principles and ethics necessary for for clinical worker in the medical field?

6. The study concepts:

1- Requirements:

Requirements is Defined in language as the source of the act (request), it asks as necessary to meet the needs and desires (Bablky, 1995.728), as language dictionaries indicate that the word "request" means: Try the conscience thing and take it, and claim: that calls for a human being against you has and still charged and asking him to do, and asking: any

attempted existence and took him, and requiring in: is the request again (lexicon Wajeez, 2005.601) "and asks one thing," meaning his request, however, requiring in is requested thing again with affectation (Ibn Manzor, 1988,662). As for the "Webster", it refers to the requirement that the thing that is required as an element or needs it, or is required condition (Webster's, 1991, 2557). While Lexicon "Oxford" knows that nothing requires the existence, or is a condition must be an element or is the thing that we reiterate the importance of quality and we assure him (Oxford, 1993, 732).

Also known as the qualities and characteristics and elements that collects and composed and are available together in different individuals in accordance with the conditions set and serves as determinants of formal behavior, also represents the fixed foundations in the personal formation (Salem, 2000.675).

So in this study we defined requirements as: the most important roles, skills and principles that must be available in a clinical social worker in the medical field.

2. Clinical Social Work:

We should first defined the social work which is defined as "a specialized profession relies on scientific and skill bases, especially aimed at the development and investment capacities of individuals and groups, social organizations; to strengthen social life better conform to social development goals and beliefs of faith established (Srougi, and Maher, 2009.203).

Either medical social work defined as: specialization concerned with care and auspices of the patient socially or psychologically for special situations that need this work is a work that provides works and procedures and events with a social medical feature any medical social works. And this will be through the medical social worker. (Ali et al., 2008,137).

As defined as the practice of social service in hospitals, and other health care institutions to facilitate human existence in good health, and prevention of the disease, and help patients physical illnesses and their families to solve social problems and psychological associated with the disease (Ali et al., 2008,137).

While Defined as Clinical Social Work: professional practice social worker depends on the medical model of practice in the medical model, which contains the study, diagnosis, treatment, or what has been dating him in Arabic writings operations of the individual work. The term Clinical Social Work is a new term - almost - where not only be adopted in the mid-eighties of the calendar by the US National Association of Social Workers in the United States (NASW, 1996).

Also known as the Clinical Social Work as including a wide range of psychological and social works provides individuals, families and small groups to face the problems of life, practiced in public institutions or through private practice and is interested in estimating based interaction between the biological and the psychological aspects of social and experience of the individual, where the focus practitioner clinical interest on the social context in which they occur or altered through individual and family problems, and therefore focused clinical social service intervention in the social attitude in addition to the individual position, it occurs desired by the professional relationship and change the social situation and adjust the individual relationships with other individuals who represent an important element in his life change (Baghdadi, 1990,356).

Also it is known as the planned application of methods and social work theories aimed at improving the social functioning of individuals, families and small groups and maintain it, and through the treatment of poor social functioning and mental and deficits and disabilities that include mental disorders and mental, and the base scientific social service clinical knowledge-based and theories linked to growth psychosocial and social, and theories of behavior, and psychopathology, and theories concerned with social such modalities, environmental and cultural diversities with all forms of the practice of social work in achieving the goal that the Mint for him profession and It is to promote employment and social psychological or maintain it for both individuals and families and small groups (Abdul Majid, 2006, 23.24).

3. Clinical social worker:

The term social worker refers to a homogenous group in terms of the unity of the basic educational qualification in addition to the unit belonging to the social work profession, on the other hand, the term also refers to the category of non-homogeneous in terms of professional preparation and the level of work that is practiced in the scope of one profession (Abdel Aal, 1990, 193).

Also known as a specialist who has a high level of one of the colleges and higher institutes specializing in Social Work qualified and prepared for this theoretical work, and coach practical training in general practice of social work in medical institutions methods, so that it is able to exercise his part of the medical team to this institution, whether therapeutic or preventive or construction (Shaibani 2006.6).

Also known as a professional responsible for all medical social work operations and within the health and medical institution or in the external environment in order to bring about social change and contribute with the medical team or operations qualifying in the

rehabilitation of sick and disabled people and to achieve their adaptation and social integration, and work to improve health conditions in the environment (Alnmas, 2000.43).

The worker (practitioner) is defined as a clinical: clinical practitioner is a professional who works directly with clients in hospitals or clinics or other institutions, where he is studying the problem and assess the client's position and diagnosed. The focus of treatment or help direct intervention to achieve specific objectives.

Also it is known as practitioner research has a systematic knowledge and professional knowledge of scientific theory, use it in professional practice to achieve greater efficiency to its customers (Aldamag, 1996.44).

And practitioner clinical realizes that all the data collected on the situation is nothing more than raw material sterile diagnosis does not possess any meaning only through the linkage and integration between them in an orderly fashion within the framework of the kidneys or in the integrated system is not opposed to it, as it is without this theoretical framework, the clinical will not be more than a technical or a literal (Shakir, 2002, 75).

It is intended clinical worker in this study that it is entrusted with the exercise of social work and possesses the theoretical knowledge, experience and professionalism, as well as the values and ethics of the profession to enable it to exercise professional role as a complementary manner to provide works for the patient and his family and members of the medical team.

4. Professional practice:

Known practice linguistically as Practice, training and getting used to the work of a certain (Baalbaki, 1987.714), and practice thing means treated and inexperience thing any trained him and well done and has a anchorages any with the skin and the power and the exercise of things seriously (dictionary of the Arabic language, 1993.578).

Professional practice is direct intervention directed scientific knowledge and values, which depends on the methods and skills to achieve certain goals (Barker, 1998, 289), also means the professional practice of social work is the use of specialized techniques can be training and transfer to individuals through education and training organized to equip them with the skills of practitioners to help them fulfill their social responsibilities entrusted to them (Merhi, 1996, 67).

Also known as the activities and processes used by social work through professional intervention medical social worker to describe what they do and interpretation activities that deal with the problems as

part of a strategy developed to accomplish the desired goal (Atta and Selmey, 1999.6).

It is intended professional practice in this study as a group of professional efforts of medical social worker domain based on knowledge, experience and professional skills associated with the professional practice of the operations and strategies of Clinical Social Work in the framework of values and principles.

7. The theoretical approach to the study
- Theory Role:

Role is defined as culturally specific models of behavior and binding of the individual who occupies a specific niche, as a social standard is linked to a certain social status on a particular correlation (Alsokary, 2000.451). Role theory and believes that the role of the individual is a set of actions and behaviors learned by either intentionally or accidentally through a position that includes interaction (Abdul Khalk 1999,218).

Previous concepts have focused on the importance of the role of the incumbent, where the expected behavior of the individual occupant role and the impact of this behavior in others explained. Concepts also focused on the importance of the social status of the incumbent role of social and returns to the behavior of an individual based on that position, occurs complementarity of roles If every individual in turn automatically without difficulties, and in the manner expected of it and clear the importance of integration in small groups, such as the family, where it is more integrated roles within whenever the family settled and grown and become better able to perform their functions (Alsiddiqi, 1998, 2).

Based on this, the role of theory focuses on necessary professional roles to do clinical social worker in the medical field and the consequent importance of developing a professional profile so that it could carry out his roles professional efficiently and effectively.

- Systems Theory:

system is that all composite, which consists of the sub-systems, these sub-systems are in a constant state of dynamic, so that each sub-system interacts constantly with the rest of the other sub-systems and affects them and is affected by, and ultimately leads to achieving the overall building of the goals of which consists of them (Tubbs, 1988, 236) also known as pattern as an integrated whole consists of several parts, including a mutual adoption and affected and affects every part parts other. There are lines in the balance of dynamic continuous permanent mobility both within the pattern and with the external environment surrounding it (Lalia, 1982, 84), and it is as follows: General System's theory (Malcolm, 1997, 138):

-they are dealing with the parts within the framework of colleges on the basis of mutual influence between the part and the whole.

- focuses on the concept of information available on the systems.

- concerned with dealing with the problems in the framework of the multiple dimensions and forms.

- allows the use of overlapping models to achieve the goals you want to reach.

- Spin this theory about the concepts referred to by the KANZ was (Kanz, Kahn 1987) associated with the characteristics of the open lines.

- Input: The mean import layout needs of the surrounding environment of energy, whether individuals or resources, including manufacturing processes or manufacturing activities, so as to convert what has been imported from the environment and remove them in the form of products or services needed by the community.

- Outputs: This is done through the export of their products or services to the outside community, in order to satisfy their needs or solve their problems face.

- steady-state and dynamic balance: This is done by the systems perform its role efficiently and effectively, and attention to nutrition and reverse saving part of the input that works on stability, and consistent output to the needs of the local community.

- Feedback: where is returned what has been removed from the products or services in the form of inputs for the return cycle and so on.

- parts system: system which is available in the coherence and integration between the parts that make up the pattern thread, this is done by importing energy and then converted, Exported, Maintaining a pattern by addressing the needs of the environment.

- Based on this, the Systems Theory focuses on the hospital as a system entirely consists of a group of sub-systems of (the patient and his family - the Therapeutic team - society institutions), which is interrelated with each other.

8. The literature of the study

- Previous studies:

That's what finished him several studies the results of which revealed Kennel Mary study (1992) about the importance of diversifying the cognitive skills of graduate students, as well as the study tried to find out how the professional performance of social workers and determine the cognitive and skill requirements to achieve this development, the study reviewed set of results associated with the performance development professional in providing care services to areas of professional practice of social work, where he referred to the need to identify the professional performance of the dimensions of the traffickers, and the organization of training courses

and workshops where educating practitioners requirements of knowledge, skills, education, and understand their responses about their professional performance and the desire for augmentation.

Charles study also showed (1993) over the use of the social worker to the skills of social service in the care of the family in case of illness or any member of it deficit. The study showed the methods in which they can help the social work to ease pressures on the family and is working to tack Ifaa with the crises of the disease, as well as helping the patient's family to carry out its roles towards the patient, the study showed that the skills used by the social worker related to dealing with individuals and help them, and skills related to dealing with the family, and skills related to social and administrative by organizations, and to the same results indicate Sarhan study (1995) study examined the importance of continuing professional setup social worker, and the importance of creating a desire among social workers to the weight of the knowledge and skill aspects to improve their professional performance in the areas of professional practice social work, the study aimed to identify the most important activity: professional growth of specialists and to identify the barriers to motivation of those activities conducted, and the study concluded that the desire of social workers to achieve their development knowledge and skills are weak, which affects their professional performance, and then there is a need to organize training programs and courses by organizations for social workers to achieve continuous professional growth and provide the knowledge and skill requirements to improve their professional performance.

The Rabiah study revealed (1996) trends in students of psychology at King Saud University toward the profession of clinical psychologist. The study sample consisted of (375) students were pulled at random. The researcher prepare a tool for measuring trends among respondents about the profession of psychologist clinical, The study found a range of results: found statistically significant differences between male and female students in their attitudes towards the profession of psychologist clinical differences, and these differences were in favor of the students, there are no differences significant differences between students of different school years in their attitudes towards the profession of clinical psychologist, there are no statistically significant differences between students married and unmarried students in their attitudes towards the profession of clinical psychologist differences.

As revealed Said study (2001) for the most important associated business model with the organization community in the medical field, where the study confirmed that the communication process

stronger by social workers and less on the part of the therapeutic team trend, also revealed that the most important techniques used by the social worker at the hospital variables linked to individual work, while came less roles for a way to organize society, as well as the study showed that the most important influence on the social worker to exercise work processes with the organization community variables are: communication, coordination, decision-making, problem-solving, followed by institutional variables, resources and capabilities, followed by societal variables.

The aim of the Rabiah study (2002) to identify a set of ethical principles that need to be clinical psychologist knowledge of them. These are moral principles in the patient's consent to treatment, confidentiality, and efficient professional clinical psychologist, and responsibilities of professional clinical psychologist, and the values and ideas of the clinical psychologist. The researcher presented the ethical principles taking into account the privacy of civilization Saudi society as much as possible. Also, the researcher presented the proposed code of ethics of the profession of clinical psychologist. These Charter ethical principles mentioned above have been included in addition to other dimensions related to psychological measurement, diagnosis and treatment, research and experiments. The researcher concluded the study a number of recommendations and suggestions.

As Barbara study (2002) has pointed to the importance of professional intervention Social Specialist in modifying attitudes, norms and values relating to the behavior lead to chronic disease, through its impact on the environment and culture of the patient, the study concluded that a set of results was the most important success of all roads and professional skills used by the social worker to influence patients.

Well it explained Deborah study (2002) the importance of a professional setting for social workers and so to intervene to address the social problems associated with the healthy performance and social individuals, through the integration of public health curriculum with social service platforms. The study also pointed out that the social worker has the professional skills necessary to influence the people in the area healthy and prepared in case of professional preparation enough.

The Alguenbady study (2004) was aimed to evaluate the medical and social work general and specialized hospitals and planning for the development of the State of Kuwait, where there were many areas of the practice of social work, which calls on those in charge of the profession to the need for a review of the practice from time to time, and so out of

the profession career reaction the exercise, in the sense that it derives its heritage and framework of the same practice field, and as the medical field is one of the most important areas of professional practice in the State of Kuwait, the researcher sought to conduct this study to know the reality of practice in the medical field in Kuwait, with a focus on highlighting the obstacles that prevent the activation practice, the study was based on a systematic strategy to meet the goal, has been to the calendar style used social survey approach her, as well as some tools that are consistent with that strategy, the study concluded that a set of results that show the obstacles to the practice and some planning indicators which can lead to the activation of this practice.

As Hanan and Fawzia Speight study showed (2004) effective use of the short treatment in the individual services, whatever the theoretical models, or what is known as the treatment of a single session, as well as attempting to access the perception of a proposal to increase the effectiveness of the exercise of the entrance to the short hospitalization in Saudi Arabia, it has used the researchers form to measure the effectiveness short treatment and a form to measure the effectiveness of the use of the entrance to the short treatment with patients the study found the following results: the patients do not know much about the medical and social service offices in the hospital, confirmed this study that the financial assistance is the basis for dealing social worker with patients without considering the social and cognitive assistance in addition to the lack of sophisticated entrances of practice in dealing with patients (Nawfali 2011).

The aim of the study Rabiah (2005) to identify some of the personality traits characteristic of psychiatric clinical specialist in Saudi Arabia and in the light of the variables of sex and age. To achieve this goal the researcher conducted a study on a sample of psychologist's strength of 70 individuals. It was the application of the first part of the global personal scale of Cattell and his colleagues who Ptgueninh the Saudi Environment Abdul-Rahman and Abu abaya (1998) on the respondents. The results of this study have shown a statistically significant difference between male and female workers harmony and impulsivity. The study also revealed a statistically significant differences between psychologists and specialists psychologists elderly and among psychologists and specialists psychologists young people on the familiarity factor, intelligence, fortitude and emotional, and control, and impulsivity, compliance, and adventure, and self-regulation.

Revealed Samia Hammam study (2005) from the reality of the practice of case management in the individual work in the medical field in the reality

field, identifying impediments case management in the individual work, whether related with worker or client or the institution or the environment and that affect their case management, and the findings of researcher that the impediments case management in the service of the individual is determined by the multiplicity and diversity of the client's problems as customers suffer from many of the multiple and diverse and overlapping problems which constitutes a disability for social workers in case management has obstacles to case management back to the lack of follow-up to the social worker for all that is new in the specialization and lack of knowledge civil therapeutic theories and models and also to the lack of dependence on a specific agenda to help the client (Nawfali 2011).

By offering the former previous studies, we can identify the position of the points of these studies are as follows:

1- Some previous studies tried to detect the influence of the social worker's role in the medical field through what is offered by a number of different services to the patient and his family as well as medical staff.

2- Some studies have revealed that the use of social workers to some recent models in social work. Those studies have confirmed the effectiveness of these models to work with patients and their families.

3- Many previous studies have confirmed the importance of the diversity of trends upon which the social worker in the professional medical intervention format.

4- Previous studies revealed the need for social workers to many training courses so that they can stand up to modern developments in professional practice in the medical field.

5-Some studies have revealed the ethical principles that must be adhered to by a clinical psychologist and the reflection of the professional relationship with clients.

6-Previous studies lacked the study of social workers, the requirements towards the use of clinical social work in professional practice in the medical field.

7- Researcher benefited from the results of previous Arab and foreign studies in the formulation of the problem of his research and its questions and defines the dimensions of the study designed by a researcher as well as to the strengthening of the search results scale.

- Clinical Social Work-

Clinical Social Work objectives:

The Clinical Social Work objectives are as follows (Sanhoury, 2001.244):

8-In the case of the crossbar and pain associated with certain forms in situational goals which is determined by the client in the definition of social institutions and existing possibilities to take advantage of them.

9-In the case of the typical pains associated with the personal nature itself away from the problematic position in situational goals which is determined in modifying mainly in personal forms of exercise therapy and social and psychological destruction, according to the standards codified scientific methods.

10-In the case of the psychological pain of social impairment associated with the relationship between the individual and others, the objective is determined in practice methods therapeutic groups. For example, an individual rid of depression groups antidepressant and calling for the fun and rid the individual of isolation and alienation labor groups and rid the delinquent groups exercised officer of reward and punishment and so on.

11- Practice the entrance of problem solving in societal problems that result in pathological suffering to the people of District who suffer from forms of isolation or backwardness or alienation.

General characteristics of clinical social work:

The general characteristics of clinical social work in the following Sanhoury et al., 2007.225):

- Direct therapeutic aspect of social work representation.

- Combining psychotherapy and social therapy.

- require high-level skills of practitioners.

- Goal direct change in situation.

- Do not subject to scientific argument and one, the situation is the one who determines the therapeutic entrance.

-Rely on measurement in the practice of professional intervention, whether in perception or attitude in determining treatment frameworks or in the processes of change.

- Clinical Social Work elements:

A) Clinical study:

The study defined as joint scientific aims to put both the client and the worker on the positive relationship the realities of the situation problematic in order to diagnose the problem develop a treatment plan (Ashawadfi, 2008.18), also known as the study process "as a joint operation aims to develop both the client and social worker on the relationship positive social and psychological realities in order to diagnose the problem and develop a treatment plan" (Osman, 1992.149) the study process from a clinical perspective include gathering information about the situation and study Its analyzes, in order to reach a better understanding of the client's help in identifying his problem diagnosed with the aim of planning therapeutic and advisory services necessary, with taking into account that such information is important in the process of diagnosis and access to treatment

process, i.e., to be specific for certain regions and those regions vary depending on the nature of the problem and function of the institution (Sanhouri, 2003.362).

B) Clinical diagnosis:

Florence Hollis knows the diagnosis as a "determining the nature of the problem and the factors that cause them and the trends of personal client towards it in order to develop a plan of treatment (Osman, 1982.156), and the diagnosis is defined as" the scientific calendar comprehensive specific case, and includes information and symptoms quantitative and qualitative, both are multiple ways" (Shakir, 2002.35). Diagnosis is clinical based on the results shown by the application of standards or tests to measure a specific problem, and are in accordance with the steps and scientific stages in order to reach a clear definition of the problem. the aim of the diagnostic clinical to form a clear picture of the individual or the customer, with a view to assist him build what is accessed through the diagnostic process of identifying the problem and the nature and type, size, and degree, without sufficient description of symptoms and even beyond to create a way to provide appropriate treatment and viable implementation (Yassin, 1981.105) and draw from the previous definitions, the most important characteristic of the diagnosis What comes:

1- It builds on a study conducted by the treatment.

2- It identifies the factors and causes that led to the problem is for these reasons that are related to the customer in terms of the environmental aspects and on the other hand occurs.

3-Although it is the responsibility of a specialist and is subject to the professional point of view but it is reached through the involvement of the client and the callers in the diagnostic process.

C) Clinical Treatment:

Treatment is defined as "a systematic process that set of activities and actions that aim to solve problems or to limit their effects include whether it is health, psychological or social problems" (Niazi,1421, 256). There are methods and techniques and multiple directions of the process therapeutic, influenced greatly theories and theoretical models adopted by the social worker (Osman, 1992, 259), and can be divided into intervention "therapy" to direct methods "to work with the customer" and methods of indirect methods "to work with the environment," or what call it self-therapy and ecological where each of these methods includes a set of subdivisions (Ashmawy, et al., 2008, 316).

- Clinical social worker:

Characteristics and attributes clinical worker:

List Carl Rogers explained about some of the characteristics and attributes of the clinical worker following (Yassin 1981.105):

- The desire to help others and help them.

-The clinical worker enjoys as much as a high level of foresight.

- enjoys in tolerance and respect for the views of others.

- enjoys a high level of emotional control and self.

- be on a high academic standard, and the standard of living of social intelligence.

-be able to have the flexibility, leadership, creativity and patience and good listening.

- Scientific capacity and excellent academic.

- Responsible for clinical social worker toward the client:

It refers to the code of ethics of clinical social workers from the National Association of social workers of Americans (NASW, 1996) to the responsibility of the clinical social worker toward the client as follows:

1- On the clinical social worker must be professional role towards the performance of the client sincerely, efficient and professional.

2- Must a clinical social worker does not become professional relationship with the client to the service for personal interests, personal relationship.

3- Must be clinical social worker committed to objectivity and impartiality, in the sense of impartiality of the institution or body or class or gender, or color or to the stage of age, or social condition.

4-must clinical social worker -without any exception – doesn't establish a relationship between him and the client or one of his relatives.

5- A clinical social worker to provide the customer a full and accurate information about the limits and the nature of the services that can be obtained.

6-On the social worker clinical risk assessment sites that might be exposed to the client and the rights, opportunities and obligations that must be performed to obtain services.

7- should seek clinical social worker in order to obtain advice and counseling from specialist colleagues and supervisors, when he feels that counseling is the best solution to provide the best service to the customer.

8- Must stop clinical social worker services received by the customer when they need it expire, ending the professional relationship when it is providing all possible services to the client?

9-Must withdraw clinical social worker services quickly only in certain situations and circumstances, however, he must take into deep consideration all the

constituent elements of the case, being careful to minimize the negative effects that might be exposed to as a result of that client.

10- Must clinical social worker, who is expected to end customer services or interruption, immediately notify the customer, and strive for the customer to convert to other institutions based on the remaining needs for him.

Professional preparation for clinical social worker:

Professional preparation for practicing social work is the formation of personal professional social worker and so to teach him the basics of the profession and improves their sound in the field of functional interaction trends, the importance of professional preparation of social specialists in various fields of practice for several factors (Ali, 2007.233):

-The first factor: the sensitivity of the profession and dealing with sensitive aspects in the client's life, as well as the diversity of the customers in this area as well as the problems that the client in social performance problems has their roots and solutions at all levels.

-The second factor: the complexity of contemporary life and the complexity of client problems and breadth of dealing with the problematic position became requires preparation practitioner specialist vocational high degree of ability to deal with all of the clients (client, family, customer group, the organization, the client community) will not be achieved only through the acquisition of specialist knowledge, experience and skills that will help him deal with those formats depending on the nature of the problematic situation.

-The third factor: to estimate the size and the needs and problems of the client and deal with them needs to formulate with a great foundation beyond the scope of the application of a particular method of social work profession, especially with the breadth scientific base for the profession theories, methods and skill, and therefore there is a need to set up a specialist can apply an integrated approach allows the use of many theories and entrances that explain various aspects of the situation and appropriate to intervene in proportion to the reality and circumstances of the community in which the profession practiced especially as it is difficult to rely on one entrance to face any of the problems faced by the client.

-The fourth factor: depends on how choosing the right social worker and prepared scientifically and skill on the basis of professional practice requirements for its success in work after graduation, on the grounds that the client humanitarian entities must not be a subject for experimentation or trial and error, and

thus this is good preparation can be a specialist to take the right decision and the proper disposition of the client, which does not expose the positions had a negative effect on their lives.

-The fifth factor: The social worker efficiency in the provision of professional assistance to customers with the highest level will be only through attention to vocational preparing him so that he can perform his role unfurled the prestige of the profession and become her privileged position among other professions and disciplines working in educational institutions.

9. Methodological procedures for the study

1-Type of study: This study belongs to the descriptive studies that target specific characteristics of the phenomenon or situation report laced recipe selection, and description focuses on how aspects and quantitative aspects together.

2- Methodology used: This study is based on a comprehensive social survey method since it is consistent with the type of study as it aims to analyze and interpret the current situation of social system or environmental specific and focused on the present situation and to take advantage of it in the future (Chalabi 2000.181).

3-Study techniques: questionnaire of the professional requirements for clinical social worker. Researcher has designed the questionnaire as follows:

The researcher identifying the concept of Clinical Social Work and were extracted three dimensions of the questionnaire:

-The most important roles of professional requirements for clinical social worker.

-The most important professional skills requirements for clinical social worker.

-The most important requirements of the principles and professional ethics clinical social worker.

-The two researchers formulate appropriate statements after each of the previous dimensions.

-The two researchers introduced a resolution in the initial image on a group of arbitrators (10) Arbitrators of specialists in social work, sociology, psychology, some sections of the faculties of Social Service and the faculties of Education and Arts Department of Psychology and Sociology for the purpose of access to accurate formulation of the dimensions and expressions of the questionnaire were excluded phrases that did not get the agreement (80%) of the arbitrators.

The two researchers conducted reliability and validity questionnaire through its application to (10) single from social workers, public hospitals affiliated to the Ministry of Health in Jeddah, where the test was to repeat two weeks interval was calculated correlation between the first application and the

second to determine the stability of the questionnaire where the degree of persistence came by (0.86) a moral function at 0.05.

4-Areas of study:

-The human sphere: a comprehensive inventory of all social workers working public hospitals in Jeddah and their number (77) single.

-The place sphere: the Ministry of Health in Jeddah, public hospitals, namely, (King Fahd - King Abdul Aziz - shagr- north of Jeddah).

-The time domain: The collection of data from the month of first Jamadi month to the middle of the month of Ramadan for the year 1437 AH period.

10. Field Data Analysis

A) General characteristics of the study sample

1- Qualitative characteristics of respondents: it turns out from the field study that the percentage (58.4%) of the study population, females, probably due to their keenness to attend training courses in the medical field as well as their aspirations to work to raise the level of professional practice with patients and their families while the percentage of males (41.6%).

2- Age characteristics of respondents: The study revealed that the percentage (24.7%) of the respondents in the age groups (from 30 to less than 35 years), and this may be due to characterize this stage of vigor and vitality and determination to acquire knowledge and new experiences in the field of work so that they can work efficiently and effectively in the medical field, followed by age group (35 to less than 40) (from 40 to less than 45 years) by (22.1%) each, followed by age (from 45 to less than 50 years) by (13.00%), while the stage 30 years and overcame by (10.4%).

3- Social situation of respondents: it turns out higher unmarried ratio of social workers with a rate (58.4%) Perhaps this is due to the age groups of social workers, which explains the occurrence of most of the respondents in the age of marriage, in addition to that family life helps to provide a state of stability, as reflected in the affirmative to work and customers. While the percentage was (32.5%) in the category of single, divorced and widows has accounted for 9.1%.

4- Educational characteristics of respondents: results of the study showed that the overwhelming proportion of respondents hold a Bachelor of Sociology with a rate (59.7%), while the ratio was (28.6%) of those with Bachelor of Social Work, and the recipients of graduate came by (11.7 %), and perhaps the results reveal to us how important scientific specialization to work in the medical field, in addition to graduate these disciplines be available to have a scientific base of knowledge, expertise and skills to enable them to work with patients and their families.

5- Years of experience in the medical field for the respondents: Results of the study revealed that the percentage (49.4%) of the respondents have experience in the medical field (more than nine years), then followed by (22.1%) for those with experience (less than three years), in while the percentage was (19.5%) who has experience in the medical field (from 6 to less than 9 years), either had their years of experience in the medical field (from 3 to less than 6 years) were accounted for (9.1%), and perhaps the diversity of years' experience for respondents is due to the nature of work in the medical field and the requisite ability and skill in working with patients and their families in addition to working with the medical team and the institutions of society.

6- The number of training courses in the medical field for the respondents: The results of the study showed that the percentage (45.0%) of social workers received (9 sessions over), followed by the percentage (23.4%) received (from 6 to less than 9 sessions), while recipients (from 3 to less than 6 cycles) (less than 3 cycles) was accounted for 15.1% each, and perhaps the attention of officials and medical institutions with refining the skills of social workers make them careful to inflict respondents training courses in order to find out what's new in the medical field, especially clinical work requirements.

7- Benefit from training courses in the medical field for the respondents: The results of the study on the extent of the subjects of the training courses they got where it came from the proportion of benefit (46.8%) of the respondents that they benefit from those sessions was high, and perhaps it illustrates the extent to which the training courses of Giving respondents' knowledge and experience and new skills that enable them to work in the medical field as well as to its content of such courses of topics associated with professional practice clinical in the medical field, either they benefit medium was the proportion (37.7%), while of was that they benefit low was accounted for (15.6%).

B) The professional requirements of the work of the clinical social worker:

1) With the patient and his family:

Revealed a field study on the work of the clinical social worker with the patient and family needs, where the respondents responses came at high rates and that the total weight (3101) and relative importance (89.50%), average weights (2.68), came phrases associated with the requirements of the work of the clinical social worker with the patient and his family in descending order as follows: work on providing advice to the patient and his family weighted average (2.87) and the percentage of likely (95.00), determine the social needs of the patient and his family, to identify the social problems experienced

by the patient and his family weighted average (2.81) and the percentage of likely (93.00) for each of them, keeping files on a study of patients cases weighted average (2.77) and the percentage of likely (92.00), the social status of the patient and his family, study, identify the sources of support the patient and his family weighted average (2.75) and the percentage of likely (91.00) each, to identify conditions and pressures environmental suffered by the patient and his family weighted average (2.72) and the percentage of likely (90.00) to identify the detailed history of the patient medically and socially weighted average (2.67) and the percentage of likely (89.00), enlighten the patient's illness and involvement in the therapeutic process, prepare a report on the social, psychological and economic condition of the patient and cultural and attach it to the medical file weighted average (2.64) and the percentage of likely (88.00) each, provide the patient with an average weighted medical needs (2.61) and the percentage of likely (87.00), the follow-up the patient's condition and how he benefited from the treatment plan, the implementation of activities and programs, recreational patients weighted average (2.59) and the percentage of likely (86.00), the patient is receiving the time of entry to the hospital weighted average (2.55) and the percentage of likely (85.00), examination and appropriate estimate of a pathological condition weighted average (2.42) and the percentage of likely (80.00), and perhaps those requirements illustrate the importance of familiarity with the clinical social worker a group of technicians that contribute to conduct the processes of diagnosis and treatment of clinical success with the patient and his family, in addition to being able to apply the appropriate mechanisms to assess the cases he deals with a degree of efficiency in the clinical area and tools. It was that the results were consistent with the study of Barbara (2002), which emphasized the importance of the success of all roads and professional skills used by the social worker to influence patients.

2) With the therapeutic team:

Field data on the work of the clinical social worker with the medical team requirements showed, where respondents responses came at high rates and that the total weight (in 1407) and relative importance (87.00%), average weights (2.61), and was associated with the requirements of the work of the clinical social worker with the team ferries medical descending order as follows: to provide the medical team and social information on the status of the patient, daily traffic with the therapeutic team to patients weighted average (2.81) and the percentage of likely (93.00) each, work to overcome the difficulties faced by the medical team with family patients weighted average (2.71) and the percentage of likely (90.00), highlighting the social conditions of the patient to the members of the medical team, patients weighted average (2.62) and the percentage of likely (87.00), engage with the medical team in the writing of medical reports regarding patients social aspect weighted average (2.49) and the percentage of likely (83.00), the participation of the therapeutic team in preventive work against diseases patients weighted average (2.46) and the percentage of likely (82.00), the participation of the medical team in the development of the treatment plan, patients weighted average (2.36) and the percentage of likely (78.00).

3) With the society institutions:

The field study data on the work of the clinical social worker with the institutions of society, where respondents' responses came at high rates requirements clarified and that the total weight (1221) and relative importance (88.00%), average weights (2.64), and was associated with the requirements of the work of the clinical social worker with society institutions in descending order as follows: take advantage of the civil charities weighted average (2.79) and the percentage of likely (93.00), the implementation of seminars, lectures weighted average (2.74) and the percentage of likely (91.00), the conversion to the appropriate entity to take advantage of the services offered, configure Base services coordinated in the community weighted average (2.71) and the percentage of likely (90.00), coordination with primary care centers in terms of chronic diseases weighted average (2.46) and the percentage of likely (82.00), conducting research to determine the impact of social and psychological factors on health average weighted (2.41) and the percentage of likely (80.00).

C) The skill requirements for clinical social worker: 1) With the patient and his family:

The study data field revealed the skill requirements for clinical social worker with the patient and his family, where respondents responses came at high rates and that the total weight (4605) and relative importance (91.00%), average weights (2.72), and was associated with the skill requirements for clinical social worker with patient and his family in descending order as follows: the skill in the social Survey weighted average (2.85) and the percentage of likely (95.00), identify the social problems experienced by the patient and his family, the skill of estimating patient's feelings, the skill of listening conscious of the patient, taking into account individual differences among patients and some average weighted (2.80) and the percentage of likely (93.00) for each of them, the skill in directing the right questions of the patient weighted average (2.76) and the percentage of likely (92.00), the skill of the public perception of the realities of the problems experienced by the patient and his family, the skill of conducting

various interviews with patients and their families, skill Note the different aspects of the personality of the patient, the skill of assessing environmental conditions and pressures experienced by the patient and his family, skill in writing individual reports cases of patients, skill in increasing the effectiveness of the family with the patient's role weighted average (2.75) and the percentage of likely (91.00) for each of them, the skill of an accurate diagnosis of the problems patients and their families, skilled in the use of family therapy, the skill of opening effective channels of communication with patients and their families weighted average (2.72) and the percentage of likely (90.00) for each of them, the skill to establish professional relationships with patients and their families, the skill of applying some self-treatment methods with the patient and his family weighted average (2.68) and the percentage of likely (89.00) each, skill in modifying the wrong behaviors of the patient weighted average (2.66) and the percentage of likely (88.00), skill in solving problems faced by the patient and his family weighted average (2.63) and the percentage of likely (87.00), the ability to intervene in crisis, skill application of environmental methods of treatment with the patient and his family weighted average (2.59) and the percentage of likely (86.00), the skill composition of groups of patients attending weighted average (2.42) and the percentage of likely (80.00).

2- With the therapeutic team:

The field study data showed skill requirements for clinical social worker with the therapeutic team, where respondents' responses came at high rates and that the total weight (in 1471) and relative importance (91.00%), average weights (2.72), and was associated with the requirements for clinical social worker with the therapeutic team in descending order as follows: the ability to support the relations between the members of the medical team weighted average (2.79) and the percentage of likely (93.00), to cooperate with the medical team to follow up cases of patients, the ability to determine the role of the members of the medical team weighted average (2.74) and the percentage of likely (91.00) each, the skill of effective communication with the medical team, skilled in understanding members roles in the team at the hospital, skilled in effective coordination with the medical team members weighted average (2.71) and the percentage of likely (91.00) for each of them, the skill of using the resources available through the team medical weighted average 2.68) and the percentage of likely (89.00).)

3-With the society institutions:

The study data field revealed the skill requirements for clinical social worker with the institutions of society, where respondents' responses came at high rates and that the total weight (in 1487) and relative importance (92.00%), average weights (2.76), and was associated with the requirements footwork clinical social worker with society institutions in descending order as follows: the skill of cooperation with societal resources that provide services to patients and their families weighted average (2.83) and the percentage of likely (94.00), skill coordination with primary care centers weighted average (2.79) and the percentage of likely (93.00), skill in carrying out seminars and special lectures and health awareness weighted average (2.76) and the percentage of likely (92.00), the skill to take advantage of community institutions to serve the patients and their families, the skill to take advantage of the civil charities to support the medical establishment weighted average (2.74) and the percentage of likely (91.00) each, the skill of the study of social problems associated with the pathological aspects, skill in the configuration database for coordinated services within the community weighted average (2.71) and the percentage of likely (90.00).

D) principles and professional ethics of clinical social worker:

The field study data revealed principles and professional ethics of clinical social worker, where it came from respondents' responses at high rates and that the total weight (in 1511) and relative importance (93.00%), average weights (2.80), and phrases associated with the principles and professional ethics of clinical social worker came in descending order as follows: respect for patients and their families the rights of weighted average (2.94) and the percentage of likely (98.00), the obligation to establish a good relationship with the team at the hospital, working on respect for the profession of administrative and ethical controls weighted average (2.83) and the percentage of likely (94.00) each, the full commitment discuss patient therapeutic program, to respect the values and beliefs of the cultural, social, religious and spiritual patient weighted average (2.79) and the percentage of likely (93.00) each, to provide the patient with accurate information and complete all the services available at the hospital weighted average (2.72) and the percentage of likely (90.00), interest in lifting complaints for the patient and his family to various levels in the health facility weighted average (2.68) and the percentage of likely (89.00).

11. General Results of the study:

The studies ended with a set of results were as follows:

1- The characteristics of the study population:

- Results of the study showed that the percentage (58.4%) were female, while the percentage of males (41.6%).

- Results of the study revealed that the percentage (24.7%) of the respondents in the age groups (from 30 to less than 35 years), followed by age group (35 to less than 40) (from 40 to less than 45 years) by (22.1%) each, followed by age (from 45 to less than 50 years) by 13.00%), while the stage 30 years and overcame by (10.4%).

- The results of the study, the high percentage of married social worker with a rate (58.4%), while the ratio was (32.5%) in the category of single, divorced and widows has accounted for 9.1%.

- The results showed that the overwhelming proportion of respondents hold a Bachelor of Sociology with a rate (59.7%), while the ratio was (28.6%) of those with Bachelor of Social Work, and the recipients of graduate came by (11.7%).

- The results of the study that the proportion (49.4%) of the respondents have experience in the medical field (more than nine years), followed by (22.1%) for those with experience (less than three years), while the ratio was (19.5%) for those who He has experience in the medical field (from 6 to less than 9 years old), it was either from their years of experience in the medical field (from 3 to less than 6 years) were accounted for (9.1%).

- The results showed that the percentage (45.0%) of social workers received (9 sessions over), followed by the percentage (23.4%) received (from 6 to less than 9 sessions), and the recipients (from 3 to less than 6 courses) (less than 3 cycles) was accounted for 15.1% each.

- The results of the study on the extent of the subjects of the training courses they got where it came from the proportion of benefit (46.8%) of the respondents that they benefit from those sessions was high, either they benefit medium was the proportion (37.7%), while they were low benefit It was the proportion (15.6%).

2- To answer the second question of the study: What are the most important professional roles requirements for clinical worker in the medical field?

A) Professional roles with the patient and his family:

- The results of the study on the most important professional roles crisis clinical worker with the patient and his family in the medical field as followed: working to provide advice to the patient and his family, determine the social needs of the patient and his family, to identify the social problems experienced by the patient and his family, maintaining files for study patients cases, the social status of the patient and his family, study, identify the sources of support the patient and his family, to identify conditions and environmental pressures experienced by the patient and his family, to identify the detailed history of the patient medically and socially, enlighten the patient's

illness and involvement in the therapeutic process, prepare a report on the social, psychological and economic condition of the patient and cultural and attach it to the medical file, provide the necessary medical needs of the patient, follow-up the patient's condition and how he benefited from the treatment plan, the implementation of activities and recreational programs for patients, patient reception time of entry to the hospital, screening and appropriate estimate of the pathological condition.

B) Professional roles with the therapeutic team:

- The results of the study on the most important professional roles for clinical worker with the therapeutic team in the medical field as followed: to provide the medical team with social information about the patient's condition, the daily traffic with the therapeutic team on inpatients, work to overcome the difficulties faced by the medical team with the patient's family, highlighting the social conditions of the patient to the members of the medical team, with the medical team to participate in the writing of medical reports with regard to the social aspect, the participation of the therapeutic team in preventive action against the disease, the medical team participate in the development of the treatment plan.

C) Professional roles with the society institutions:

-The results of the study on the most important professional roles for clinical worker with the society institutions followed: take advantage of the civil charities, implementation of seminars, lectures, make the switch to the appropriate entity to take advantage of the services offered, the base configuration services coordinated in society, coordination with primary care centers in terms of chronic diseases, conducting research to determine the impact of social and psychological factors on health.

3- To answer the third question of the study: What are the most important professional skills requirements for the work of clinical worker in the medical field?

A) Professional skills with the patient and his family

- The results of the study on the most important professional skills for clinical worker to work with the patient and his family in the medical field as followed: skill in social case study, identify the social problems experienced by the patient and his family, the skill of estimating patient's feelings, the skill of listening conscious of the patient, taking into account individual differences among patients, some of whom, skill in directing the right questions of the patient, the skill of the public perception of the realities of the problems experienced by the patient and his family, the skill of conducting various interviews with patients and their families, skill in Note the different

aspects of the personality of the patient, the skill of assessing environmental conditions and pressures experienced by the patient and his family, skilled in writing individual reports cases of patients, skill in increasing the effectiveness of the family with the patient role, the skill of an accurate diagnosis of the problems of the patients and their families, skilled in the use of family therapy, the skill of opening effective channels of communication with patients and their families, the skill to establish professional relationships with patients and their families, the skill of the application of some methods of treatment self with the patient and his family, skill in modifying the wrong behaviors of the patient, the skill in solving problems faced by the patient and his family, the ability to intervene in crises, skill application of environmental methods of treatment with the patient and his family, the skill composition of groups of patients attending.

B) Professional skills with the therapeutic team:

-The results of the study on the most important professional skills for the work of clinical worker with the therapeutic team in the medical field as followed: the ability to support the relations between the members of the medical team, to cooperate with the medical team to follow up cases of patients, the ability to determine the role of the members of the medical team, communication skill effective medical team, skilled in understanding the roles of members of the team at the hospital, skilled in effective coordination with members of the medical team, the skill of using the resources available through the medical team.

C) Professional skills with the community institutions:

- The results of the study on the most important professional skills for clinical worker to work with society organizations followed: the skill of cooperation with society resources that provide services to patients and their families, skill coordination with primary care centers, skilled in the implementation of seminars and lectures for health awareness, skill to take advantage of community institutions to serve patients and their families, the skill to take advantage of the civil charities to support the medical establishment, the skill of the study of the social problems associated with the pathological aspects, skill in the configuration database for coordinated services within the society.

4- To answer the fourth question for the study: What are the most important requirements of professional principles and ethics required for the work of the clinical worker in the medical field?

- The results of the study on the most important principles and professional ethics required for the work of the clinical worker in the medical field and are as follows: respect for patients and their families

rights, commitment to establishing a good relationship with the team at the hospital, working on respect for the profession of administrative and ethical controls, full commitment to discuss the patient's therapeutic program, respect values and beliefs, cultural, social, religious and spiritual patient, providing the patient with accurate information and complete all the services available at the hospital, to raise interest in the complaints of the patient and his family to various levels in the health facility.

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