

Day Two

Part One: Self as Supervisor



TOPICS

Rethinking Supervision

Building Resilience

Culminating Project Introduction
with Leadership

••••• Day Two •••••

Part One: Self as Supervisor

Section	Time	Materials	Activities
Day 2 Introduction	15 minutes	<ul style="list-style-type: none"> ▪ PPT 2.1-2.2 	<ul style="list-style-type: none"> ▪ Ice-breaker: Making Connections
Rethinking Supervision	2 hours & 30 minutes	<ul style="list-style-type: none"> ▪ PPT 2.3-2.18 ▪ Flipchart ▪ Markers 	<ul style="list-style-type: none"> ▪ Chairs ▪ Use of Self in Casework ▪ Alexander Case Scenario ▪ Ask More Questions!
Building Resilience	2 hours	<ul style="list-style-type: none"> ▪ PPT 2.19-2.34 ▪ Flipchart ▪ Markers ▪ Silly String 	<ul style="list-style-type: none"> ▪ Recognizing Your Resilience ▪ Trauma Discussion ▪ Alexander Case Scenario ▪ Resilience Assessment
Culminating Project Introduction with Leadership	1.5 hours	<ul style="list-style-type: none"> ▪ PPT 2.35-2.37 ▪ Guest Speakers: Local Leadership Reflective of Class 	<ul style="list-style-type: none"> ▪ Culminating Project Workshop ▪ Culminating Project Homework
Wrap-up	15 minutes	<ul style="list-style-type: none"> ▪ PPT 2.38 ▪ Evaluations 	<ul style="list-style-type: none"> ▪ Complete Evaluations

Day Two Introduction

Materials

PPT 2.1–2.2



10 Minutes

Presentation – Welcome Back

- ▶ Welcome back to training, I hope you are well rested from our full day of training and are ready to start on day two.
- ▶ Before we begin today, let's do a brief activity.



Activity – Making Connections

INTRODUCE the Activity

- ▶ Yesterday you took the Myers-Briggs Type Indicator and learned a lot about yourself and others. I would like for you to spend a moment thinking about your MBTI profile.

PURPOSE of Activity

- *Get ready for the day of training.*
- *Reinforce the concept of personality types.*
- *Connect yesterday's topic with today's topic.*

DIRECTIONS for Activity

- **Ask** each person to jot on scratch paper the answer to the following question:

Ask:

- ? **What is one insight you have had about the MBTI experience as it relates to your job as supervisor?**

- **After** just a couple of minutes for note-making, ask the participants share their insights with their small group. Then ask for volunteers to share with the large group.

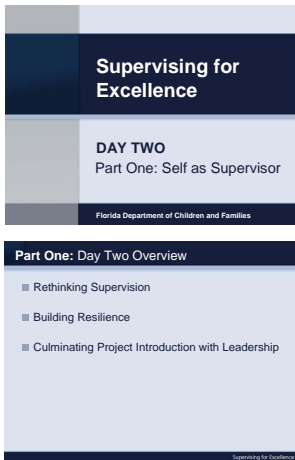


Summarize

- ▶ On Day 1, part of our discussion was focused on the importance of relationships—and how understanding ourselves through the MBTI helps us better relate with those we supervise. Today's **entire focus** is on supervisory relationships.



PowerPoint Presentation—Day Two Overview (SLIDES 2.1–2.2)



SLIDE 2.1

PowerPoint Title Slide: Supervising for Excellence—Day Two: Part One: Self as Supervisor

SLIDE 2.2

PowerPoint Slide: Part One—Day Two Overview

Today's topics include:

- ▶ **Rethinking Supervision** during which we will
 - ▶ Explore the **connection** between **supervision** and **positive outcomes** for children and their families.
 - ▶ Discuss the **relationship** between the **case manager or investigator's ability to engage** in a working and positive relationship with a family and a **positive outcome** with that family.
- ▶ **Building Resilience** during which we will
 - ▶ **Define resilience** and identify resilience capacity.
 - ▶ Identify the effects of case manager or investigator **exposure to trauma** in the lives of clients.
 - ▶ Understand the affects of **compassion fatigue** and unresolved work-related grief on resilience.
 - ▶ Develop and apply **strategies that promote and enhance resilience**, including self-care actions.
- ▶ We will end the day, by further discussing our **Culminating Project** and hearing what local leadership has to say.



Transition

- ▶ Let's begin the topic of Rethinking Supervision by holding a discussion about what defines a good supervisor.

Rethinking Supervision

Materials

PPT 2.3-2.18
Flipchart
Markers
Silly String



2 Hours
30 Minutes

Recommended Reading

Presentation – Part Two Introduction

- ▶ During Rethinking Supervision we will be further exploring the connection between supervision and positive family outcomes and
- ▶ Discussing your role in helping the case manager or investigator engage in a working and positive relationship with a family so that positive outcomes are achieved.

Training Aid for Rethinking Supervision, located in the appendix.

Handbook of Clinical Social Work Supervision, by Carlton Munson.

Supervision in Social Work, by Alfred Kadushin.

Supervision and Consultation in the Encyclopedia of Social Work, by Lawrence Shulman.



Discussion – Characteristics of an Excellent Supervisor

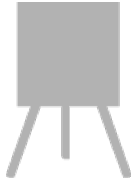
PURPOSE of Discussion:

- *To identify characteristics of an excellent supervisor.*
 - *To introduce the concept of Rethinking Supervision by relating past experiences to new concepts.*
- ▶ Think of someone you consider to be an excellent supervisor.

Ask:

- ? **Who is that person?**
- ? **What is it about that person that makes him/her a good supervisor?**
- ? **How would that person describe the characteristics of a good supervisor?**

SAMPLE RESPONSES (list on flipchart): *An alternative to simply listing the responses on a flipchart for the initial discussion is to organize them into three columns (task supervision, case supervision and coaching/teaching). DO NOT PUT THE LABELS ON UNTIL YOU COMPLETE POWERPOINT SLIDE 2.3).*



- ❖ Strong leader
- ❖ Intelligent
- ❖ Knows the job well
- ❖ Available
- ❖ Fair
- ❖ Flexible
- ❖ Communicates clear expectations
- ❖ Supportive
- ❖ Approachable
- ❖ Took an interest in me
- ❖ Nurturing
- ❖ Shows they care
- ❖ Sense of Humor
- ❖ Good listener
- ❖ Honest
- ❖ Open Communicator
- ❖ Stands by their staff
- ❖ Keeps their word
- ❖ Is willing to do anything they ask of their staff
- ❖ Respectful
- ❖ Good role model

▶ Think of someone you consider to be an excellent supervisor.

Ask:

? **Is it possible that someone I consider to be my best supervisor might be your worst nightmare?**

▪ *To those who answer affirmatively:*

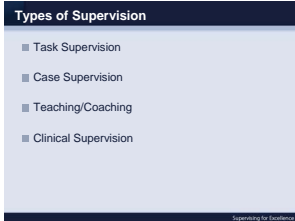
? **What qualities did that person have that would cause you to feel that way?**

▪ **Allow** for some discussion.



SUMMARIZE:

- ▶ While there might be some common characteristics of good supervisors, there is no uniform profile.
- ▶ People have different needs for supervision at different points in their lives and careers.
- ▶ Supervisors who know their staff and form respectful working relationships with them are likely to be successful.
- ▶ While, as reflected by our MBTI profiles, we all have basic personality styles and preferences, good supervision means being able to adapt our styles to meet the needs of individual team members.



PowerPoint Presentation—Types of Supervision and Clinical Supervision (SLIDES 2.3-2.6)

SLIDE 2.3

PowerPoint Slide: Types of Supervision

- ▶ There are several underlying foundations of effective supervision. These include:
 - ▶ **Task supervision:** How to do the **work within the agency** context, rules, policies, timeframes, sense of accountability, community partners, lawyers, reports, judges, etc..
 - ▶ **Case supervision:**
 - ▶ Understanding the **uniqueness of the individual or family**, presenting issues, strengths, concerns.
 - ▶ Ensuring **adherence to federal child welfare standards** of safety, permanency, and well-being.
 - ▶ **Interfacing** with the mission of the agency, resources available, goals of the work, and given all of this, learning how to work within the agency's policies and procedures.
 - ▶ **Teaching/Coaching:** There is a teaching/coaching function embedded in all of the approaches to supervision.
 - ▶ **Clinical:** the Clinical, or process focused aspect of supervision is where consideration of who the staff member and supervisor are—their experiences, history, values, and mission—**inform the way they practice together and independently**. Clinical supervision focuses on the interaction between the person and the work, and facilitate self awareness and reflection as a way of constantly evolving and improving practice.



SUMMARIZE (*OPTIONAL*):

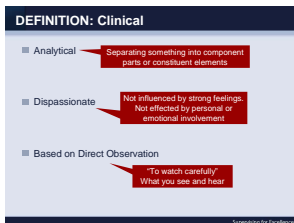
- ▶ First, let's return for a moment to our list of supervisor characteristics.
- ▶ You will see that I have placed them in three columns. Let's give these columns some headings.

DIRECTIONS:

Use the labels, Task Supervision, Case Supervision, and Teaching/Coaching on each of the three columns.

SUMMARIZE:

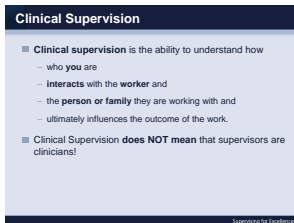
- ▶ In thinking together about rethinking supervision, and integrating the clinical aspect, we can see how supervision enriches not only tasks in the casework process but also the effectiveness of achieving outcomes with families.



SLIDE 2.4

PowerPoint Slide 2.4: DEFINITION: Clinical

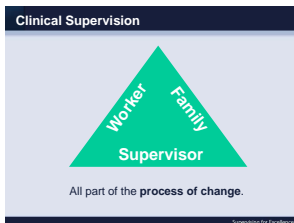
- **Instruct** participants to take a couple of minutes to identify ways that supervisors use discussion of the case and ongoing supervision to achieve the goals of clinical supervision.
- **Solicit** several volunteers to offer their suggestions, and conduct a group discussion.
- **Introduce** the concept of clinical supervision as used within the context of this curriculum:
 - ▶ **Clinical Supervision:** The ability to understand how who I am interacts with the person or family that I am working with and influences the outcome of the work.
 - ▶ Focusing on the interaction between the supervisor and the case manager or investigator and the case manager or investigator and the client, make the following points:
 - ▶ Research in child welfare practice indicates that positive or negative outcomes are related to **the relationship between** the family and the case manager or investigator and not the particular model associated with the work.
 - ▶ A clinical perspective uses **techniques borrowed from the clinical realm** to promote the **ability to be anticipatory and proactive**. It allows us to see the history of the other person and the influence this history has on the present.
 - ▶ A clinical perspective **creates a link** between the goals, the process to meet the goals and the thinking that informs the process of the work.
 - ▶ How we think and what we think always comes out in **how we interact with others**.



SLIDE 2.5

PowerPoint Slide: Clinical Supervision

- ▶ Clinical supervision gets its name from applying some of the most central elements of clinical work, or therapeutic approaches to **helping individuals and families achieve change**.
- ▶ More importantly, our use of this term reflects the supervisor's understanding of **relational dynamics** between themselves, the case manager or investigator, and the clients they serve.
- ▶ Clinical supervision does not mean conducting therapy in the supervisory role, but rather **building on processes and techniques**, such as using questions to promote self-awareness and self-reflection within supervision, to improve practice.



SLIDE 2.6

PowerPoint Slide: Clinical Supervision

- ▶ With clinical supervision, there is interrelatedness: a sense of shared responsibility for the outcomes for a family and the recognition that the case manager, the supervisor and the family are **part of a process of change** rather than entities that impose change on others.

Ask:

- ? **Where does the supervisor enter this triangle?**
 - *Elicit responses such as the following and discuss briefly:*
 - ❖ The supervisor is only one of the three sides of the triangle, each equally important.
 - ❖ The supervisor is at the base of the triangle, illustrating his support of the case manager/client relationship.

Say:

- ▶ The relationship between the supervisor and the case manager or investigator will in many ways be **mirrored** by the case manager or investigator's relationship with clients.
- ▶ When a **supervisor understands herself/himself** and is able to use clinical techniques to help staff do the same, clients are the ultimate beneficiaries.
- ▶ By facilitating **positive, therapeutic relationships** with their staff, supervisors can assist the staff in facilitating helping relationships with client.



Activity – Chairs

INTRODUCE the Activity

- ▶ We are going to spend time looking at the flow of information between the supervisor, the case manager or investigator and the family.
- ▶ In the process we are going to discuss what it looks like when things work and identify problems encountered in the process.

PURPOSE of Activity

- *To illustrate the flow of information between the supervisor, case manager or investigator and family.*
- *To identify problems encountered in the process.*
- *To help put in context why clinical supervision is an important method for addressing these problems and in achieving positive outcomes for families.*

DIRECTIONS for Activity

When volunteers are taking their chairs, the center chair will need to be repositioned so the supervisor is hidden from family.

- **Place** three chairs in a row in the front of the room. Set them so that the chairs on either end of the row are both facing the center chair.
- **Recruit** supervisor.
 - **Place** the supervisor in the left chair.
- **Recruit** case manager or investigator.
 - **Place** the case manager or investigator in the center chair.
- **Recruit** family/parent.
 - **Place** the family/parent in the right chair.

Ask the Supervisor:

- ? **What do you see of the family at this point?**
 - **Elicit** responses:
 - ❖ I can't see them: I can only see the case manager or investigator.

Ask the Family/Parent:

? **What do you see of the agency at this point?**

▪ **Elicit** responses:

- ❖ I can't see them: I can only see the case manager or investigator.

ENGAGE the Audience:

Say:

- ▶ To be effective in child welfare work, the case manager or investigator needs the supervisor's wisdom and support to work the case.
- **Draw** a line with silly string between supervisor and case manager or investigator.

Say:

- ▶ Although the supervisor may or may not be in the room with the family, the purpose of supervision is to help staff internalize the policies, practices, and values of the agency so that their performance reflects the intention and mission of the agency.
- ▶ This line (*between supervisor and case manager or investigator*) represents effective flow of information between supervisor and case manager or investigator.

Ask:

? **What is at play when the flow of information and the roles of case manager or investigator and supervisor are effectively present?**

▪ **Elicit** responses:

- ❖ Expectations are clear.
- ❖ Both parties are honest with one another.
- ❖ Both parties have something to offer one another (mutuality).

Say:

- ▶ The case manager or investigator role is to represent the agency to the family and to represent the family to the agency.
- **Draw** a line with silly string between case manager or investigator and family/parent.

Ask:

? **What could go wrong here (*pointing to the supervisor*)?**

- **Elicit responses:**
 - ❖ Unavailable.
 - ❖ Unqualified.
 - ❖ Lack knowledge.
 - ❖ Focused on her/his personal point of view or knowledge without assisting the case manager or investigator in professional development and understanding the agency.
 - ❖ The supervisor can be biased in managing the work.

Ask:

? **What could go wrong here (*pointing to the line between the supervisor and the case manager or investigator*)?**

- **Elicit responses:**
 - ❖ They may not like each other.
 - ❖ They may have communication difficulties linked to their styles (MBTI) and personal values.
 - ❖ The supervisor may micromanage or neglect the needs of the case manager or investigator.
 - ❖ The case manager or investigator may feign competence and refrain from confiding in the supervisor or seeking direction.

Ask:

? **What could go wrong here (*pointing to the case manager or investigator*)?**

▪ ***Elicit responses:***

- ❖ Biases and personal issues that both draw him/her to the work and also make her/him ineffective at the work.
- ❖ Not be able to convey genuineness, respect, honesty, or competence to the family.
- ❖ Not invested in her/his job.
- ❖ Compassion fatigue or burn out and decrease in effectiveness in the position.

Ask:

? **What could go wrong here (*pointing to the line between the case manager or investigator and the family/parent*)?**

▪ ***Elicit responses:***

- ❖ Case manager or investigator and family may get off to a bad start.
- ❖ The case manager or investigator may overuse authority and squelch family candor or investment in working together.
- ❖ The case manager or investigator may represent another in a long line of Child Welfare/Human Services interveners and the family may be burnt out of 'getting help'.
- ❖ The case manager or investigator may be taken in by the family or discount the family.

Ask:

? **What could go wrong here (pointing to family/parent)?**

- **Elicit responses:**
 - ❖ May resist the case manager or investigator because they don't want to change.
 - ❖ May be so ambivalent about their situation that they cannot use what the case manager or investigator offers to make positive changes.
 - ❖ May manipulate the case manager or investigator and the system out of desperation to avoid change or to avoid losing children.



SUMMARIZE

- ▶ When the flow of information and the roles of case manager or investigator, supervisor and family are effectively present, we are better able to make positive strides, but there are many things that can break down along the way.
- ▶ Clinical supervision can offset these risks and we are going to talk a little about that now.

Ask:

? How do you think clinical supervision can offset these risks:

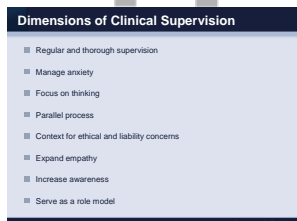
- **Elicit responses:**
 - ❖ Foster family-centered practice.
 - ❖ Help case manager or investigator build quality practice skills.
 - ❖ Provide on-going supervision...not just in moment of crisis.
 - ❖ Understanding its importance and effectively using the concept of parallel process to promote quality practice.
 - ❖ Encourage growth and development.
 - ❖ Increase awareness.
 - ❖ Focus thinking.
 - ❖ Serve as a role model.
 - ❖ Help manage anxiety.
 - ❖ Promote ethics, safety and an understanding of liability issues.
- **Direct the volunteers to sit in their own seats for the next part of the training.**



PowerPoint Presentation – Clinical Supervision (SLIDES 2.7– 2.14)

SLIDE 2.7

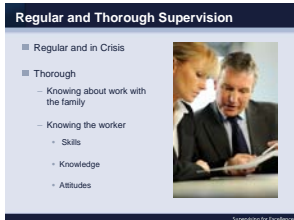
PowerPoint Slide: Dimensions of Clinical Supervision



► Use of clinical techniques in supervision has multiple benefits and dimensions including offsetting the many risks we can encounter with ourselves, staff and families along the way. The dimensions of clinical supervision include:

- **Regular and thorough supervision** – Supervision needs to be continuous and the supervisor must have a thorough knowledge about the work and case manager or investigator.
- **Helping staff manage anxiety** – This work is difficult, and case manager or investigator anxiety is often a bi-product. But when people are anxious they lose their wisdom.
- **Focus on thinking** – What people think about, what their assumptions are, and the ideas that people hold about other people often influence what they do.
- **Parallel process** – Parallel process references the process by which there is a **ripple effect in supervision**; the supervisor models behaviors to the case manager or investigator, intended or unintended, which in turn are re-enacted in the case manager or investigator’s approach with families. The parallel process can be unintentional when the supervisor’s model of how to assert or use authority becomes the way that the case manager or investigator conveys authority to the family, or intentional when the supervisor both acts and directs the case manager or investigator in effective use of authority with a mind to impacting how case manager or investigators approach families.
- **Hold a context for ethical and liability concerns** – Identify ethical issues and issues related to safety and liability. A primary ethical concern often centers on dual relationships.
- **Expand empathy** – How do we help case manager or investigators understand the life of someone else? The more we understand and the less judgment we bring – the more empathy available.

- ▶ **Increase awareness** – How do we help case manager or investigators increase awareness of their feelings and bias on their work?
- ▶ **Serve as a role model** - Your team will learn about the work by watching what you do, not what you say ought to be done.
- ▶ Let's take a closer look at each of these before coming back to our chairs activity.



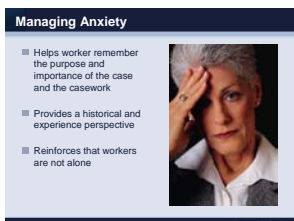
SLIDE 2.8

PowerPoint Slide: Regular and Thorough Supervision

- ▶ Supervision needs to be **conducted regularly** with each staff member— as well as available **on-demand** in an immediate crisis moment.
- ▶ Supervision needs to include **knowledge about the work with each family**.
- ▶ Supervision needs to help each case manager or investigator **develop skills, knowledge and effective attitudes** relating to his/her role.

Ask:

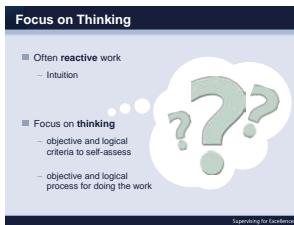
- ? **How can you develop the case manager or investigator through use of case conferencing and qualitative mentoring?**
 - *Elicit responses and discuss briefly.*
- ▶ There are **many dimensions that allow the supervisor to know about her/his staff performance**, including using every family to help them learn, not just the crisis family or the family where the case manager or investigator knows he or she struggles.



SLIDE 2.9

PowerPoint Slide: Managing Anxiety

- ▶ The **supervisory function is critical** to assist case manager or investigators in managing their anxiety.
 - ▶ This helps with the potential for isolation and high anxiety for case manager or investigators.
- ▶ In addition, supervisors **provide a historical and experience** perspective when individual case manager or investigators are overwhelmed with anxiety, sadness, anger, or fear.
- ▶ Effective supervision reinforces that case manager or investigators are **not alone** and that they can use policy and procedure to make difficult decisions with their supervisor.
- ▶ We will be going into this deeper during the next section on resiliency.



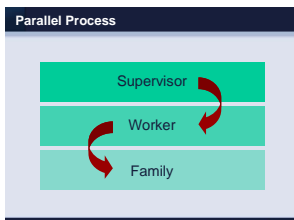
SLIDE 2.10

PowerPoint Slide: Focus on Thinking

- ▶ Child Welfare can be reactive work.
- ▶ As discussed when we worked with the MBTI, all of us need to use “**Intuition**” as well as “**Sensing.**” Focusing on thinking means being able to draw upon objective and big picture information and to then integrate a thinking, or logical and policy based approach along with the values of the agency and field of child welfare.
- ▶ **Focusing on thinking** also integrates a focus on outcomes with day-to-day work; focus on thinking is the conscious use of all four functions to effectively serve families.
- ▶ Supervisors can **help staff focus on thinking** and on using objective and logical criteria to self-assess.
 - ▶ This assists staff in internalizing a more **objective and logical process** for doing the work.

Ask:

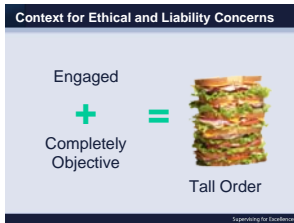
- ? **Can anyone give me an example of how you helped a case manager or investigator focus on thinking when he came into supervision with a gut reaction to a case?**
 - *Elicit responses and discuss briefly.*



SLIDE 2.11

PowerPoint Slide: Parallel Process

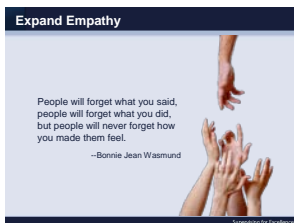
- ▶ The ways that supervisors respond to case manager or investigators, models and parallels how case manager or investigators perceive that authority is supposed to be used in the child welfare context.
- ▶ Therefore, thinking about parallel process and the ways in which the supervisor/case manager or investigator relationship is experientially teaching the case manager or investigator effective use of authority, **allows the supervisor to consciously use her/his style to guide case manager or investigators for practice in the field.**
- ▶ So, if you want to family-centered approach to be used in the field, use it with your case manager or investigator.



SLIDE 2.12

PowerPoint Slide: Context for Ethical and Liability Concerns

- ▶ Again, for case manager or investigators to remain engaged and yet completely objective in their interactions with families is a tall order.
- ▶ Recognizing that supervision is a place to discuss and raise ethical and liability issues is both a necessity and relief for staff.
- ▶ Helping staff apply a generic code of ethics and all of the policies and practices of the agency is the way that supervisors teach case manager or investigators how to 'be' in the work.



SLIDE 2.13

PowerPoint Slide: Expand Empathy


- ▶ It is important to recognize that often staff manage the painful nature of the work by **detaching** from the work and from families.
- ▶ We will discuss this tendency further in our 'building resilience' section, but the supervisor must help the case manager or investigator reconcile his/her role while understanding the viewpoint, needs, and desires of the family so that effective assessment and planning can take place.

Ask:

- ? **Can anyone give me an example of how you helped expand a case manager or investigator's empathy?**
 - *Elicit responses and discuss briefly.*

Increase Awareness

- Attending to the individual.
- Stressing the critical role that the worker plays on every case.
- Helping staff see how their personal situation, values, views, and style impacts their work.



Supervising for Excellence

SLIDE 2.14

PowerPoint Slide: Increase Awareness

- ▶ Attending to the individual in supervision is a must.
- ▶ The case manager or investigator plays a critical role in each case he/she handles.
- ▶ So...Helping staff identify how their personal situation, values, views, and style impacts the work is critical to insuring that families have a full chance to make the needed changes in their lives.

Ask:

- ? **Can anyone give me an example of how case manager or investigators personal situation, values, views and style impacted a case? How did you help them?**
 - *Elicit responses and discuss briefly.*



SUMMARIZE:

- ▶ Clinical supervision is a multi-dimensional model of supervision that allows us to model the behaviors we want to see in the field and empowers us to fully know the case manager or investigator and his/her needs so he/she can meet the family's needs.
- ▶ Let us go back to the chairs activity to bring this all together.



Activity – Chairs, Continued

DIRECTIONS for Activity

- *Direct the volunteers to have a seat again.*

Ask:

- ? **Now that we have discussed clinical supervision in a little more depth, how would you like to rearrange the three players so that we can improve the process of change for the family and the effectiveness of both supervisor and case manager or investigator?**
 - *Elicit responses.*
 - ❖ Using the original idea of a triangle, shift the seats so that the supervisor and family can see each other.



MAIN IDEA: Two Ways To “See”

Bring the family
viewpoint to
supervision

- ▶ There are two ways that we craft an effective use of the roles in child welfare:
 - ▶ Bringing the family viewpoint into supervision.
 - ▶ Asking questions such as ‘What would the J family say about the question I just asked you?’ and ‘How do you think the family sees you and sees the agency now?’
 - ▶ Emphasizes that the family view and voice are important considerations in the work we do in Child Welfare.

Bring the supervisor
to the family

- ▶ Going into the field with staff when it is not an ‘emergency or conflict’.
 - ▶ Note that in a national study of multiple workplaces and business, research found that often managers are not accurate assessors about how their employees are viewed by consumers.
 - ▶ Periodically going out to see how staff interact and perform can improve the coaching experience within supervision.

Ask:

- ? **Can you think of a case manager or investigator you would like to “rethink” your supervision with?**

Say:

- ▶ Keep this person in mind as we work through the rest of the ‘Self as Supervisor’ activities.



Activity – Use of Self in Casework

INTRODUCE the Activity

- ▶ Now we are going to do an activity involving the use of self in casework.
- ▶ The use of self refers to the process of being aware of experiences, thoughts, and biases and how this affects the communication and relationship with a client.
- ▶ A supervisor can help a case manager or investigator become more conscious of their involvement in the outcome of a case, which is a key dimension of clinical supervision.
- ▶ Let's begin.

PURPOSE of Activity

- *Allow the participant to see how he/she reacts to a case versus how another participant reacts—an awareness of self.*
- *Help the participants understand the concept of parallel process and its impact on families.*

DIRECTIONS for Activity



- **Refer** participants to PG pages 2.5-2.8: **Alexander Case Scenario**.
- **Allow** the participants 5 minutes to read this document. Ask them to jot down their initial reactions and thoughts about the case.
- **Instruct** the participants to join with a partner and share their impressions about the case.
Ask:
 - ? **How were your opinions similar?**
 - ? **How were they different?**
 - ? **How would your impressions about this family influence your approach with the family?**
- **Discuss** as a class and ask for examples of partners who saw this case differently and ask what influence this might have on their work with the family.



SUMMARIZE:

- ▶ Our histories and experiences influence how we interact with those we supervise and in turn the clients.
- ▶ Staff, supervisors, and families all bring “who they are” into the triangle of work. When any of the three parties fails to see the other realistically or without bias, the supervisory function can assist with regaining equilibrium and working towards outcomes.
- ▶ Experience of authority, values, roles and stereotypes can erode effective practice, however when the supervisor and case manager or investigator engage in reflective clinical process, these biases and predispositions can be moderated so that families are well served.
- ▶ As supervisors, we need to be aware of this **parallel process** and help case manager or investigators gain the insight to consciously disrupt it so that they can see the family in a way that will help the family make the changes necessary in their lives.



MAIN IDEA: Clinical Supervision promotes Family-centered practice and quality practice.

Clinical Supervision
Done Well =
Family Centered
Practice
Quality Practice

- ▶ Clinical supervision is your route to quality practice and fully integrating family-centered practice in your work unit because when you are a clinical supervisor you treat your team with:
 - ▶ Honesty.
 - ▶ Dignity.
 - ▶ Respect.
 - ▶ Inclusion.
 - ▶ Value.
- ▶ You hear them and work carefully to guide them and in turn they are more inclined and better equipped to do the same with their families.



SUMMARIZE:

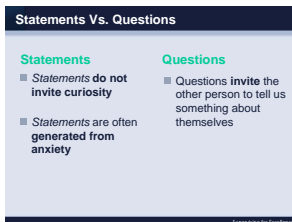
- ▶ Clinical supervision is a powerful method for guiding your work.
- ▶ Let us now look briefly at asking questions. This topic will be explored more deeply during **Part Two** when we spend time on **Qualitative Mentoring**, but in order to successfully rethink supervision, the way you go holding discussions throughout your day is a key to becoming a successful Clinical Supervisor.



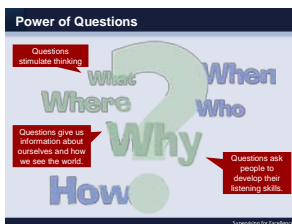
PowerPoint Presentation—Power of Questions (SLIDES 2.15-2.16)

SLIDE 2.15

PowerPoint Slide: Statements Vs. Questions



- ▶ Often we make statements where questions are more appropriate.
- ▶ **Statements do not invite curiosity.** Statements are often generated from anxiety and come from a place of judgment. Quality practice does not encourage the use of statements because they do not allow us to fully involve the family in decisions that impact their lives—lives which they are pretty familiar with—which of course, is a primary goal of family-centered practice. Likewise, by way of parallel practice, using statements with your investigators and case managers also leads to a shut down in communication.
- ▶ **Questions on the other hand invite the other person to tell us something about themselves.** Let's look at the power of questions.



SLIDE 2.16

PowerPoint Slide: Power of Questions

- ▶ When we ask questions, we are asking the **who, what, why, how, where** and **when** of a situation. We are probing. We are involving.
 - ▶ Questions **stimulate thinking**.
 - ▶ Questions **give us information** about ourselves and how we see the world.
 - ▶ Questions ask people to develop their **listening skills**.
- ▶ These are all things we want our team to do with families, so we should be doing them with our staff.



Activity – Ask More Questions!

INTRODUCE the Activity

- ▶ We have looked at the importance of asking questions versus making statement and how this impacts positive outcomes for children and their families.
- ▶ Now let's practice asking some questions!
- ▶ Remember think: who, what, why, how, where and when.

PURPOSE of Activity

- *Provide the opportunity for participants to see, through experience, the importance of questions versus statements.*
- *Allow participants practice at asking questions.*

DIRECTIONS for Activity



- *Refer participants once again to PG pages 2.5-2.8: **Alexander Case Scenario.***
- *Instruct participants to work with the same partner to discuss the case.*
 - *The supervisor whose last name comes first in the alphabet will be the supervisor. The other person will be the case manager or investigator who has read the case information.*
 - *The supervisor will present/review the case only by asking questions. No directives can be made. Questions only!*
 - *Remember, the person doing most of the talking should be the case manager or investigator.*
- *Allow 5 minutes and then switch roles.*
- *Debrief the activity.*

Ask:

? **As a supervisor, what was it like only being able to ask questions?**

- *Elicit responses.*
- ❖ Informative.

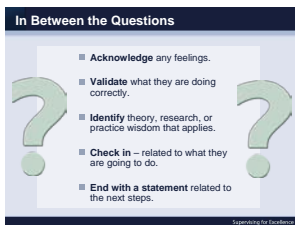
Ask:

? **As a case manager or investigator, what was it like only being asked questions?**

- *Elicit responses.*
- ❖ Empowering
- ❖ Made me think more.



PowerPoint Presentation—In Between the Questions and Casework Activities (SLIDES 2.17-2.18)



SLIDE 2.17

PowerPoint Slide: In Between the Questions

- ▶ Questioning cannot be done in isolation, you must also:
 - ▶ **Acknowledge** any feelings.
 - ▶ **Validate** what they are doing correctly.
 - ▶ **Identify** theory, research, or practice wisdom that applies.
 - ▶ **Check in**—related to what they are going to do.
 - ▶ **End with a statement** related to the next steps.

MAIN IDEA:

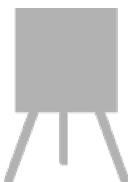
- ▶ Clinical supervision builds staff skills and knowledge and has a tremendous impact on their attitudes.

Ask:

? **What are some other types of casework activities where clinical supervision would be needed?**

SAMPLE RESPONSES (list on flipchart):

- ❖ See Slide 2.18 for some examples.



Clinical Supervision
Builds Casework
Skills, Knowledge and
Positive Attitudes

Statements Vs. Questions	
<p>Statements</p> <ul style="list-style-type: none"> Statements do not invite curiosity Statements are often generated from anxiety 	<p>Questions</p> <ul style="list-style-type: none"> Questions invite the other person to tell us something about themselves

SLIDE 2.18

PowerPoint Slide: Case manager or investigator Activities

- ▶ In review, your use of clinical supervision will have a positive effect on:
 - ▶ The ability of your case manager or investigator to engage the client.
 - ▶ The rapport or the helping relationship between your case manager or investigator and their client.
 - ▶ Risk and safety assessments and the associated decisions and plans.
 - ▶ The development of a case plan with the family.
 - ▶ Casework decision-making.
 - ▶ Casework activities designed to facilitate change.
 - ▶ The review and evaluation of client progress.



SUMMARIZE:

- ▶ Rethinking supervision and becoming an effective clinical supervisor takes time and practice, but as you make this transition it will
 - ▶ Help you grow
 - ▶ Help your staff grow
 - ▶ Create positive outcomes for children and their families.



- **Refer participants to PG page 2.8: *Resources for Clinical Supervision* for more resources on this subject.**



Transition



- ▶ As a clinical supervisor, you will be more in tune with the needs of your team, your clients and yourself. One of these needs is resiliency. From the supervisor, to the case manager or investigator, to the family, you are all under a great deal of emotional stress. The next section talks about how to identify the impact of emotional difficulties you face and strategies you can use to help develop resiliency.

Building Resilience

Materials

PPT 2.19-2.34

Flipchart

Markers



2 Hours

Recommended Reading

Presentation – Building Resilience

- ▶ During this section, we are going to explore how the exposure to the trauma in the lives of our clients effects staff.
- ▶ We will talk about some strategies we can use to help our staff enhance their resilience.

Training Aid for Building Resiliency, located in the appendix.

Managing Secondary Trauma, by Mark Horowitz.

Trainer’s Note: This session deals with vicarious traumatization, compassion fatigue, professional stress and burnout. These can be sensitive topics, and might trigger emotional responses within the group of trainees. Should a participant become upset or begin to inappropriately disclose their experiences, the facilitator must be prepared to sensitively move the discussion back to generalities. If a participant appears to need to discuss his/her personal history, the trainer might suggest that the conversation be continued during a break or after class.

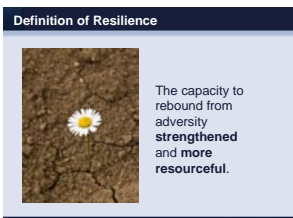
Ask:

- ? **What is your definition of resilience? Please jot your answer on scratch paper. Allow several minutes.**

- ***Elicit:*** After a few minutes elicit responses and discuss briefly.



PowerPoint Presentation – What is Resilience? (SLIDE 2.19)



SLIDE 2.19

PowerPoint Slide: Definition of Resilience

- ▶ Resilience is the capacity to rebound from adversity **strengthened** and **more resourceful**.

- ***Tie this definition to those of participants.***



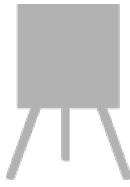
Discussion – Characteristics of Resilience

PURPOSE of Discussion:

- *To brainstorm characteristics of resilience*

Ask:

- ? **What are some characteristics of resiliency?**



SAMPLE RESPONSES (list on flipchart):

- ❖ Hopefulness.
- ❖ Ability to see positives in a situation.
- ❖ Self-care.
- ❖ Flexibility.
- ❖ Strong support system.
- ❖ Ability to express feelings.
- ❖ Self-confidence.
- ❖ Ability to empathize.



Resilience

from the supervisor
to the case manager or
investigator

THEN

from the case
manager or
investigator
to the family.

MAIN IDEA: A System of Resiliency


- ▶ We often think of resilience in terms of the ability of our client families to manage stress and hardship. It is important that supervisors support their staff members in **promoting resilience in the children and families they serve.**
- ▶ The **ability to support client resilience** is impacted by a case manager or investigator's **own resiliency capacity.** Likewise, a supervisor must be resilient in order to help staff build and maintain resilience.
- ▶ In this section, our primary focus is on our vulnerability as helping professionals who are exposed to stress and trauma on a daily basis.



PowerPoint Presentation – Vulnerability Factors (SLIDE 2.20–2.21)

Professional Vulnerability Factors

- Caseload size
- Client Behavior
- Competency is Challenged
- Expectations and Liability are high
- Public Opinion
- Organizational Structure and Policies



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SLIDE 2.20

PowerPoint Slide: Professional Vulnerability Factors

- ▶ Some professional factors that might impact a child welfare professional include:
 - ▶ Caseload size
 - ▶ Client behavior
 - ▶ Competency is challenged
 - ▶ Expectations and liability are high
 - ▶ Public opinion
 - ▶ Organizational structure and policies

Ask:

- ? ***What are some other professional factors that might impact a child welfare professional in terms of vulnerability?***
 - ***Elicit: Elicit responses and discuss briefly.***

Personal Vulnerability Factors



- Past history of trauma and/or abuse - We can re-experience our history
- Our coping style
- Current life situation - divorce, death of a parent, birth of a child

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SLIDE 2.21

PowerPoint Slide: Personal Vulnerability Factors

- ▶ Some personal factors that might impact a child welfare professional include:
 - ▶ **Past history of trauma and/or abuse** - We can re-experience our history.
 - ▶ Our **coping style**.
 - ▶ **Current life situation** - divorce, death of a parent, birth of a child.

Ask:

- ? ***What are some other professional factors that might impact a child welfare professional in terms of vulnerability?***
 - ***Elicit: Elicit responses and discuss briefly***



Activity – Recognizing Your Resilience

INTRODUCE the Activity

- ▶ We are going to hold a brief discussion about coping styles and then explore our own personal and professional triumphs in resiliency.

PURPOSE of Activity

- *To identify that we all have times when we are resilient and times when we are not and each one of us comes with a bag of tricks for dealing with the difficult times in our lives.*

Ask:

- ? **Why do some people seem extremely resilient, while others seem very vulnerable?**

SAMPLE RESPONSES:

- ❖ We each have our personal coping style. Develop Rituals – ways to disconnect.
- ❖ We are all more vulnerable at some points in our lives and more resilient at other points.
- ❖ We work in a high-stress profession—an occupation subject to vulnerability.



- *Refer participants to PG page 2.9: **Recognizing Your Resilience.***
- **Instruct** participants to take a few moments to recall a challenging time in their life (professionally or personally) in which they were able to demonstrate each of the characteristics and describe that time.
- **Allow** 10 minute for this activity.

- *Ask for volunteers to share in single sentences how, in face of a challenge time they met it with resilience.*
 - ❖ *I stayed positive when this happened...by doing this...*
 - ❖ *I stayed focused when this happened...by doing this...*
 - ❖ *I stayed flexible when this happened...by doing this...*
 - ❖ *I stayed organized when this happened...by doing this...*
 - ❖ *I was proactive when this happened...by doing this...*



SUMMARIZE:

- ▶ If we think back on our professional and personal lives, we realize that we have had experience when we have met crisis with resilience.
- ▶ Let us now turn to some of the reasons our profession is so vulnerable and why we need coping strategies.



PowerPoint Presentation – Impact of Trauma (SLIDES 2.22–2.26)



SLIDE 2.22

PowerPoint Slide: Impact of Trauma

- ▶ Since the 1980s, those in the helping professions have been acknowledged for dealing with the impact of trauma. We are going to talk about the exposure to traumatic events and how supervisors can effectively help themselves and staff members as we work together in a field that intentionally addresses trauma each and every day. First, let's explore the impact of trauma on the person.
 - ▶ **Primary Traumatic Stress:** The individual is subjected to, witnesses, or is directly involved in a traumatic situation.
 - ▶ **Secondary Traumatic Stress:** The individual is impacted by the impact of another person's experience of the primary trauma.
 - ▶ **Vicarious Traumatization:** The individual is impacted and changed by hearing of others' experience of trauma, which can be a cumulative response to working with trauma.
 - ▶ **Burn Out:** Exhaustion and fundamental inability to be present or function due to a mix of personal, organizational, and (in our field) trauma related responses experiences.
- ▶ Understanding the potential for burnout increases the

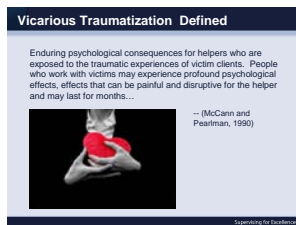
supervisor's sense of urgency in both **proactively managing exposure** to trauma **and the impact** of vicarious traumatization, and in assisting the organization in supporting and sustaining staff.



SLIDE 2.23

PowerPoint Slide: Seven Areas of Functioning Impacted by Trauma

- ▶ The group that Pearlman and McCann, researchers on the impact of trauma, identified seven areas of functioning that can be negatively impacted by trauma. These seven areas are:
 - ▶ The individual's personal frame of reference about self and others in the world.
 - ▶ Safety.
 - ▶ Dependency and trust.
 - ▶ Power.
 - ▶ Self-esteem.
 - ▶ Independence.
 - ▶ Intimacy.



SLIDE 2.24

PowerPoint Slide: Vicarious Traumatization

Define Vicarious Traumatization and make the points below:


- ▶ **Compassion fatigue** – giving too much of self.
- ▶ **Draining** of emotions and empathy.
- ▶ **Need to be recharged** – through our family/loved ones.
- ▶ **Burnout** (often systemic through OT/comp time in too many cases/overwhelming.

Ask:

- ? **What are your reactions to this definition?**
- ? **Does the concept resonate with you?**
 - *Elicit responses and discuss briefly.*

Vicarious Traumatization

- Often experienced by workers who work with traumatized individuals
- Overlaps with burnout — work situation that is stressful, demanding and/or unrewarding
- Form of counter-transference — induced by exposure



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SLIDE 2.25

PowerPoint Slide: Vicarious Traumatization

- ▶ Vicarious Traumatization
 - ▶ Is often experienced by staff who **work with traumatized individuals**.
 - ▶ **Overlaps with burnout** — in a work situation that is stressful, demanding and/or unrewarding.
 - ▶ Is a form of **counter-transference** — induced by exposure.

Common Stimuli

- Witnessing the effects of violence, abuse and/or severe neglect
- Providing treatment to victims who suffer from post-traumatic syndrome
- After effects are disturbing —we see what it does
- Treatment process which requires engagement exposes us to trauma



Supervising for Excellence

SLIDE 2.26

PowerPoint Slide: Vicarious Traumatization

- ▶ Common Stimuli include:
 - ▶ **Witnessing** the effects of violence, abuse and /or severe neglect
 - ▶ **Providing treatment** to victims who suffer from post-traumatic syndrome
 - ▶ **The after effects**—which are disturbing—we see what it does.
 - ▶ **Treatment process**—which requires engagement and exposes us to trauma



Discussion – Trauma in Our Clients' Lives

- ▶ We have all chosen a profession that by its very nature is filled with sadness, anxiety, fear and distress. Our client's lives are often in great turmoil.
- ▶ We have all found ways to deal with this trauma. During this discussion, we will further explore the actions we take personally and with our staff to build resiliency and take care of ourselves.

PURPOSE of Discussion

- *To explore common examples of direct and indirect trauma in child welfare work, their effects on child welfare professional and methods of self-care and building resiliency.*
- *To share our own experiences with self-care and resiliency in the face of client trauma.*



- **Refer** participants to PG pages 2.10-2.11: **Child Welfare Professionals' Exposure to Trauma.**
- **Instruct** participants to read the information.
- **Allow** 10 minute to read the information.

Ask:

- ? **How have you personally dealt with the exposure of the trauma in clients' lives?**
- ? **What kind of self-care actions do you take?**
- ? **What are some ways you help your staff build resiliency?**
 - **Elicit** responses and discuss briefly.



SUMMARIZE:

- ▶ Thank you for sharing some of your own coping strategies for helping our staff and ourselves deal with the exposure to trauma in clients' lives.
- ▶ Let us now turn to a specific example.



Activity – Alexander Case Scenario

INTRODUCE the Activity

- ▶ We are going to revisit the Alexander Case Scenario again to see how it might affect a case manager or investigator.

PURPOSE of Activity

- *To discuss the traumatic effects of a particular case example.*

DIRECTIONS for Activity



- **Refer** participants to PG pages 2.5-2.8: **Alexander Case Scenario.**

Ask:

? **What are some ways this case would have some traumatic effects on the staff?**

- *Allow three minutes for the table to discuss these effects.*
- *Elicit responses and discuss briefly.*



Discussion – Overexposure

PURPOSE of Discussion

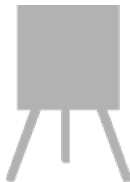
- *To discuss and identify signs of overexposure.*

Ask:

? **Have any of you experienced overexposure yourselves or dealt with overexposure in your role as a supervisor?**

? **Can you give me some specific examples of some of the signs of overexposure to trauma, such as “irritability”?**

SAMPLE RESPONSES (list on flipchart):



- ❖ Irritability
- ❖ Fear
- ❖ Loss of confidence
- ❖ Difficulty holding empathy
- ❖ Feeling powerless
- ❖ Reactive
- ❖ Difficult to hold joy
- ❖ Disruption in intimacy and sexual relationships
- ❖ Increase drug and/or alcohol use
- ❖ Use of labels when describing clients

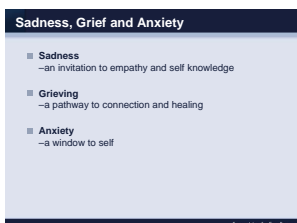


SUMMARIZE

- ▶ **Overexposure** is another common issue in child welfare. We are constantly dealing with difficult and heart-breaking situations. The experiences are coming in—into our brains and into our hearts. And we often do not have the time or internal resources to help them find their way out.
- ▶ Overexposure can cause fear, loss of confidence, depression and a wide variety of other problems we just talked about.
- ▶ Let's talk for a moment about sadness, grief and anxiety.



PowerPoint Presentation – Sadness, Grief and Anxiety (SLIDES 2.27–2.29)



SLIDE 2.27

PowerPoint Slide: Sadness, Grief and Anxiety

- ▶ Overexposure taps into our sadness, grief, and anxiety
- ▶ It is important to recognize sadness and allowing grieving as part of the resiliency process.

Ask:

? ***What do you know about your way of grieving?***

- *Elicit responses and discuss briefly.*

Ask:

? ***How might we recognize grief in those we supervise?***

- *Elicit responses and discuss briefly.*



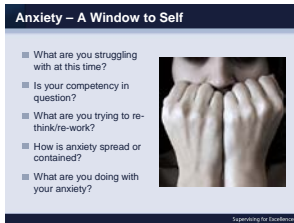
SLIDE 2.28

PowerPoint Slide: Sadness – An invitation to Empathy and Self-Knowledge

- ▶ When do you feel sad about work?
- ▶ What do you tell yourself the sadness is about?
- ▶ What do you do with sadness?
- ▶ What do you learn about your staff, your clients, or yourself

when you are sad?

- ▶ Who would you like to talk to when you're sad?
 - **Elicit** responses to the questions from the slide and discuss briefly.



SLIDE 2.29

PowerPoint Slide: Anxiety – A Window to Self

- ▶ What are you struggling with at this time?
- ▶ Is your competency in question?
- ▶ What are you trying to re-think/re-work?
- ▶ How is anxiety spread or contained?
- ▶ What are you doing with your anxiety?

Ask:

- ? **How do you know when someone is anxious?**
- ? **Do you know someone at work who has been displaying anxiety?**

- **Elicit** responses to the questions from the slide and discuss briefly.



SUMMARIZE

- ▶ In the child welfare profession, we are often overexposed and deal with a great deal of sadness, grief and anxiety. But we also see a tremendous resilience in ourselves, our clients and our co-case manager or investigators every day.
- ▶ How can we tap into our own resilience and build a resilient workplace? Part of building a resilient workplace is accepting that people are at different places on a continuum. You must also promote an understanding of others' ways of dealing with the trauma of the job.
- ▶ Effective supervision includes understanding resilience and promoting it in the workplace.
- ▶ Let's go a little deeper into resilience strategies now.



Discussion – Resilience

PURPOSE of Discussion

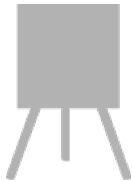
- *To identify strategies for resilience*
 - ▶ Recall a time when you admired resilience in someone who was able to move forward while confronted with overwhelming barriers or stressful events in their lives.

Ask:

- ? **What was it that struck you as unique about that person?**
- ? **How do you think he or she was able to cope?**

- ***Discuss** this as a class, or allow small groups or dyads to discuss it first and then share as a class.*

SAMPLE RESPONSES (list on flipchart):



- | | |
|---------------------|----------------------------|
| ❖ Positive attitude | ❖ Competent |
| ❖ Support system | ❖ Empathetic |
| ❖ Good communicator | ❖ Calm in face of problems |
| ❖ Accepts change | ❖ Goal-oriented |
| ❖ Proactive | ❖ Takes care of self |
| ❖ Perspective | ❖ Optimistic |
| ❖ Accepting | ❖ Self-disciplined |
| ❖ Exercises | ❖ Healthy self-image |



Activity – Resilience Assessment

INTRODUCE the Activity

- ▶ We're going to continue this section with a **resilience assessment**—which will allow you to identify your strengths and weaknesses in the area of resilience
- ▶ Please be completely honest. No one else is going to see this assessment. An honest assessment of their strengths and weaknesses will help you know what areas you need to work on to build your resiliency.
- ▶ There are two copies of this assessment so that you can use it with your team.

PURPOSE of Activity

- *Provide participants the opportunity to identify their strengths and weaknesses in the area of resilience.*
- *Allow participants the opportunity connect the Supervising for Excellence curriculum to their particular needs.*

DIRECTIONS for Activity



- **Refer** participants to PG pages 2.12-2.13: **How Resilient Are You?**
- **Inform** the participants that each of these statements is a characteristic of resilience. 4 or 5 on a characteristic, is good indication of a strong resilient trait. 1, 2 or 3 indicate a weaker characteristic.
- **Allow** the participants 10-15 minutes to complete the assessment.

Say:

- ▶ These are good indicators of resilience. Let's talk about a few of the characteristics. For example:

Ask:

- ? **How does solving problems logically make you more resilient?**

- *Elicit responses and discuss briefly.*

Ask:

- ? **How does curiosity make you more resilient?**

- *Elicit responses and discuss briefly.*



SUMMARIZE

- ▶ As we have seen, there are characteristics that can help you become a more resilient person.
- ▶ Now let's look at what we as supervisors can do to build capacity for resiliency for ourselves and our staff?



PowerPoint Presentation –Resiliency Philosophy, Self Care Actions and Supervision Strategies (SLIDES 2.30–2.34)

Resiliency Philosophy

- Look for **meaning** in ordinary things
- **Detach** yourself from expectations
- **Pay attention**, don't think too much and stay light on your feet
- Be **positive** and **hopeful**
- Don't take anything **personally**

Supervising for Excellence

SLIDE 2.30

PowerPoint Slide: Resiliency Philosophy

- ▶ Look for **meaning** in ordinary things.
- ▶ **Detach** yourself from expectations.
- ▶ **Pay attention**, don't think too much and stay light on your feet.
- ▶ Be **positive** and **hopeful**.
- ▶ **Don't take anything personally**.

Self-Care Actions

- Identify **support person** within the workplace with whom you can make daily contact
- Cultivate a **mentoring** relationship
- Develop **rituals** to open and close your interactions with clients and your work
- **Celebrate your life**, what you have, and where you are headed

Supervising for Excellence

SLIDE 2.31

PowerPoint Slide: Self-Care Actions

- ▶ Building resilience requires us to **take actions to take care of ourselves**. Some self care actions include:
 - ▶ Identifying a **support person** within the workplace with whom you can make daily contact.
 - ▶ Cultivating a **mentoring** relationship.
 - ▶ Developing **rituals** to open and close your interactions with clients and your work.
 - ▶ **Celebrating your life**—what you have, and where you are headed.

Self-Care Actions

- Write and post **self-affirmations** on competency, your wisdom, and your creativity
- Take **time to recover** from loss through conversations, moments away from your desk, and reminders to reflect on self and the work
- Engage in **normal and healthy activities** outside of work

Supervising for Excellence

SLIDE 2.32

PowerPoint Slide: Self-Care Actions

- ▶ More self care actions include:
 - ▶ Writing and posting **self-affirmations** on competency, your wisdom, and your creativity.
 - ▶ Taking **time to recover** from loss through conversations, moments away from your desk, and reminders to reflect on self and the work.
 - ▶ Engaging in **normal and healthy activities** outside of work.

Ask:

? ***Does anyone have any additional self-care actions they would like to share with the group?***

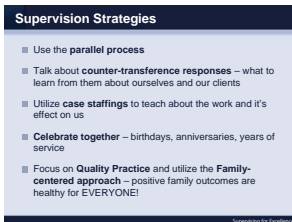
- ***Elicit responses and discuss briefly.***



SLIDE 2.33

PowerPoint Slide: Supervision Strategies

- ▶ In order to build capacity in our unit, some strategies a supervisor can use to build resiliency include:
 - ▶ **Identifying stressful encounters** – give voice to the experience.
 - ▶ Assessing **reactive statements and positions**, ask questions about these statements and emotional responses.
 - ▶ Using **group supervision** to reduce isolation.
 - ▶ **Debriefing encounters** that generate anxiety.
 - ▶ **Encouraging people to take time** – their vacations, lunch, and to take time off when they have put in long days.



SLIDE 2.34

PowerPoint Slide: Supervision Strategies

- ▶ More strategies include:
 - ▶ Using the **parallel process**.
 - ▶ Talking about **counter-transference responses** – what to learn from them about ourselves and our clients.
 - ▶ Utilizing **case staffings to teach** about the work and its effect on us.
 - ▶ **Celebrating together** – birthdays, anniversaries, years of service.
 - ▶ And most importantly, **focusing on Quality Practice and utilize the Family-centered approach** – positive family outcomes are healthy for EVERYONE!

Ask:

? ***Does anyone have any additional supervision strategies they would like to share with the group?***

- *Elicit responses and discuss briefly.*



SUMMARIZE

- ▶ We are all under a great deal of pressure in this field, using the parallel process to model coping strategies and providing your staff with the tools they need to help themselves through difficult times will help you build a healthy and strong team who can weather tough situations.
- ▶ Now let's look one more time to the Alexander Case Scenario.



Activity – Alexander Case Scenario

INTRODUCE the Activity

- ▶ We are going to revise the Alexander Case Scenario again to see how we can help the team build resilience.

PURPOSE of Activity

- *To discuss the resiliency building techniques for a particular case example.*

DIRECTIONS for Activity



- ***Refer participants to PG pages 2.5-2.8: Alexander Case Scenario.***
- ***Return to flip chart record of the effects of trauma on this family.***

Ask:

? **How can you, as a supervisor, address these issues and build resilience in your team?**

- *Elicit responses and list of flipchart—save flipchart page for a later activity.*



Transition

- ▶ We have talked today about your role as a clinical supervisor and how building resiliency helps to build a stronger team, thus creating more opportunities for positive outcomes for children and their families.
- ▶ Maybe we have touched on something today that has inspired you to address some needed change in your unit. Maybe that change has provided you with an inspiration for your project.
- ▶ So, let us now turn to your culminating projects.

Culminating Project—Introduction

Materials
PPT 2.35-2.37

Guest Speakers
Local Leadership
Reflective of Class



1 Hour

30 Minutes

Presentation – Culminating Project— Introduction

- ▶ Over the course of this curriculum, each of you will be expected to complete a culminating project.
- ▶ While we will have some time in class to work through your questions and issues, this project is to be completed mainly as a “homework” assignment.
- ▶ Let us take some time to look at the purpose of the project and its requirements.



PowerPoint Presentation – Culminating Project (SLIDES 2.35-2.37)

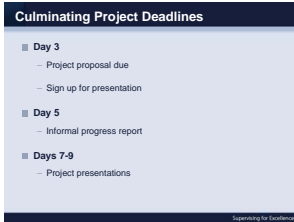
Choosing a Culminating Project

- Use the skills you have, but present a challenge and require you to learn something new
- Consistent with your current duties as a supervisor
- A challenge you are currently facing or an issue your unit needs addressed
- Skills and knowledge from *Supervising for Excellence*
- Consult with your supervisor
- Ideas from local leadership

SLIDE 2.35

PowerPoint Slide: Choosing a Culminating Project

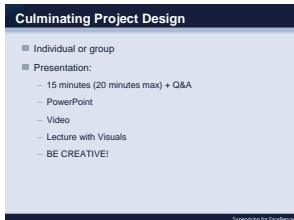
- ▶ The projects should be selected to allow you to use supervisory skills you already have, yet should present a challenge and require you to learn something new.
- ▶ The projects should align with your current duties so that you and your unit may benefit from the results.
- ▶ You should choose a project that reflects a challenge you are dealing with or that your unit needs to address.
- ▶ You should apply the principles you are learning throughout the program. This project is an integral part of the SFE curriculum as it facilitates the transfer of learning from the classroom to the job.
- ▶ You should consult with your supervisor to come up with a project topic.
- ▶ Local leadership is here today to talk about some of the unique needs in our area in order to help you come up with a project topic.



SLIDE 2.36

PowerPoint Slide: Culminating Project Deadlines

- ▶ You must choose your project by the end of Day 3 and turn in your project proposal. The Who, What, Why? Of the project.
- ▶ You will sign up for your presentation time slot on Day 3.
- ▶ You will informally report on the progress of your report on Day 5.
- ▶ Project presentations will begin on Day 7 of training and will continue through the final day of training.



SLIDE 2.37

PowerPoint Slide: Culminating Project Design

- ▶ The project can be individual or in a group preferably no larger than three.
- ▶ The presentation should be:
 - ▶ 15 minutes (20 minutes max) + Q&A
 - ▶ PowerPoint
 - ▶ Video
 - ▶ Lecture with Visuals
 - ▶ BE CREATIVE!



Presentation – Local Leadership

- ▶ As you to start thinking of creative project ideas that would utilize information you are learning in this training and address a challenge you are currently facing, a key to the success of this project is for you to bring your leadership on board—including your supervisor.
- ▶ In order to help you decide what to select and to assist you in seeing the big picture of where the Department is headed and identify critical needs locally, I have invited several guest speakers here today to talk to you.

INTRODUCE the Guest Facilitators

- ▶ I would like to introduce guest speakers (e.g. Circuit Administrator, Regional Director, Community Based Care Agency Senior Leadership Representative, Sherriff's Office Leadership).
- **Introduce** and provide a little background information on each.
- ▶ Thank you all for coming. Let's start by asking _____ to talk about the things that are happening in _____.



Activity – Project Planning Workshop

INTRODUCE the Activity

- ▶ After hearing what leadership has to say, let's spend some time in class working through our project ideas.

PURPOSE of Activity

- To give the participants the opportunity to spend time either individually or with their group to work through their project idea.
- To allow time for the trainer to talk with participants about their projects.

DIRECTIONS for Activity



- **Refer** participants to *Participant's Guide* pages 2.14-2.19: **Culminating Project Worksheet, Proposal, Rubric and Examples.**
- **Instruct** participants to spend some time thinking about their projects and working through the project proposal. After 20 minutes of independent work or group work, have each person/group share their project idea with their table and get feedback.
- **Visit** each group to hear their ideas and to provide feedback.
- **Allow** the participants 30 minutes for this activity.



SUMMARIZE

- ▶ We have heard some very compelling information from our local leadership and have spent some time working through our project ideas. These projects should be very exciting and I cannot wait to see your presentations during week three.



Homework – Project Planning



- *Refer participants again to Participant's Guide pages 2.14-2.19: **Culminating Project Fact Sheet, Worksheet, Proposal, Rubric Examples and Progress Report***
- *Allow the participants two minutes to read these documents.*
- *Ask if they have any questions and provide answers.*

DIRECTIONS for Homework

- *Instruct participants to spend some time before the next class thinking about their possible project and to complete their project proposal to turn in on Day 3.*

Ask:

? **Are there any questions?**

- *Elicit questions and answer.*



Transition

Let us wrap the day up now.

Wrap-Up

Materials
PPT 2.38



15 Minutes

Presentation – Wrap-Up

- **Process the work day with the participants.**

Ask:

- ? **What did you learn from today’s session?**
- ? **How will you integrate these new skills into your workday?**
- ? **What did you experience today that would not be useful to you as a supervisor?**



Summarize

SLIDE 2.38

PowerPoint Slide: Thank you for participating.



- ▶ We have learned a great deal today about how we think about supervision and strategies for developing resiliency. We have also been able to spend some time hearing from local leadership and working on our culminating projects. We will continue tomorrow with Part One: Self as Supervisor.
- ▶ Thanks for your input and participation and I will see you _____ (*date, time, and location of the next day of training*).

Evaluations

- If evaluations are being used they should be distributed and completed at this time.