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“The process of examining, with someone else, the thoughts, feelings, and reactions evoked in the course of working closely with young children and their families”
-Eggbeer, Mann, and Seibel, 2008

Why is reflective supervision important?

Home visiting is different than any other type of job. Immediately upon employment, home visitors are in a position where families are looking to them as a model for parenting and family care. The behavior of home visitors, at all times, reflects on their individual program and on home visiting as a whole. Mechanics, secretaries, sales associates... have tasks or duties to perform and then leave their jobs behind at the end of the day. Although a home visitor may be off the clock, in the eyes of the community he or she is still the person who serves families, and the expectation must be that he or she will model the importance of that at all times.

The ability to offer support, information, and guidance to families is directly related to the relationship that is built. Relationships are built on acceptance of differences, respect, trust, and confidentiality. These qualities of relationship are built by providing families with undivided attention, listening respectfully to what is said in words, voice, and body language. Home visitors

must live up to the expectations of that relationship, on the clock or off – wherever they are and whatever they are doing. When home visitors accept the family where they are, they can recognize the strengths of the family. As families are made aware of their strengths, they are able to use them to make positive changes in their lives.

Confidentiality is vital to the success of home visiting. Families trust their home visitors with very personal and private information. If that trust is broken the reputation of the entire program is damaged, and may be destroyed. Because the work of home visiting is done in the homes of families and includes a strong value of confidentiality, home visitors can find themselves feeling isolated and on their own. The support of their program and supervisor is essential in helping home visitors work through personal concerns and issues that arise in work with families, and manage the fast pace and unexpected occurrences that come with the job. The supervisory experience nurtures the home visitor so that he or she may nurture the mother, who can then nurture her child.

As home visitors gain experience and knowledge, their ability to help families make positive changes in their lives also increases. The process of home visiting is a personal growth experience for the visitors as well as for the families they serve. Home visiting is a never-ending learning process, providing home visitors with knowledge and skills, and providing an opportunity for them to appreciate their own personal growth and experiences. With the proper support, home visitors will use that growth and experience to the benefit of the families they serve.

Because of this important work carried out by home visitors, the Statement of Work with the Department of Health and Human Resources, Bureau for Public Health, Office of Maternal, Child and Family Health (OMCFH) includes the requirement that reflective supervision be provided within the home visiting program.

In addition, research supports the positive impact that reflective supervision makes within programs and with staff members, which includes helping staff prepare to better serve high risk families, building professional competence, reducing caregiver fatigue, reducing staff turnover, and creating a staff-centered organizational infrastructure.

What is reflective supervision?

The federal Maternal, Infant, and Early Childhood Home Visitation (MIECHV) Program understands and supports the practice of reflective supervision. MIECHV has defined reflective supervision as: Reflective supervision is a distinctive form of competency-based professional devel-

opment that is provided to multidisciplinary early childhood home visitors who are working to support very young children’s primary caregiving relationships. Reflective supervision is a practice, which acknowledges that very young children have unique developmental and relational needs and that all early learning occurs in the context of relationships. Reflective supervision is distinct from administrative supervision and clinical supervision. Reflective supervision supports professional and personal development of home visitors by attending to the emotional content of their work and how reactions to the content affect their work. In reflective supervision, there is often greater emphasis on the supervisor’s ability to listen and wait, allowing the supervisee to discover solutions, concepts and perceptions on his or her own without interruption from the supervisor (MIECHV Formula Funding Grant, 2015).

Reflective supervision is a “parallel process”. By thinking about the experiences of the child and family, as well as exploring as their own experiences, all relationships will be strengthened and new strategies can be developed.

Within West Virginia, reflective supervision is an important tool for all those working and connecting with children and families. Reflective supervision is a process that supervisors use for guiding staff to “think about, understand, and put into perspective the information shared by families, the emotions experienced from that sharing, and the feelings generated from their own life experiences” (Reflective Supervision: A Tool for Relationship-Based EHS Services, pg. 1). Reflective supervision is a “parallel process”. By thinking about the experiences of the child and family, as well as exploring their own experiences, all relationships will be strengthened and new strategies can be developed. “The process is one of wondering together about what history, feelings, and expectations each person might bring to the event. If new understandings or strategies are found, they are found through mutual exploration (Reflective Supervision: A Tool for Relationship-Based EHS Services, pg. 1).” During reflective supervision, the supervisor does not provide solutions to any problems. Through the respectful space created in the process, the staff member and supervisor mutually explore alternative solutions together.

Reflective supervision is...	because in work with expectant families and infant and toddlers and their families, you:
Reflective. Reflective supervision allows staff to take a step back from the work and examine it differently.	Work at a fast pace.
Collaborative. Reflective supervision is a time for supervisors and supervisees to consider the work together, share ideas, and think about possible next steps.	Might feel isolated.
Regular. Reflective supervision is a predictable time when staff and supervisors can meet to consider the work.	Never know what to expect.
Relationship-based. Reflective supervision offers a secure, consistent relationship in which staff can experience the trust, support, and respect they offer the families they serve.	Develop relationships with children and families that form the basis of your work with them.
Focused on professional growth. Reflective supervision supports staff—and supervisors!—in building skills important to their individual work.	Support children and families in building new skills.
Strengths-based. Reflective supervision helps staff identify their unique strengths and supports staff in applying their skills to the challenges of the work.	Identify and build on strengths of children and families.
Safe. Reflective supervision provides a secure environment where staff can discuss the real challenges of their work and their own vulnerabilities in a way that supports growth.	Build an atmosphere of confidentiality, mutual trust, and respect.
Individualized. Reflective supervision is based in learning about each unique staff member and their own vulnerabilities in a way that supports growth.	Individualize your services to each child and family.
Characterized by active listening. Reflective supervisors listen intently to staff, paying attention to spoken language and unspoken cues.	Give children and families your undivided attention, “listening” to what they tell you with their words, their voices, and their body language.

Reprinted from the Early Head Start National Resource Center

What kind of program climate best supports reflective supervision?

To successfully implement and maintain practices of reflective supervision, there must be open communication within the organization. Without that level of connection between individuals, it is impossible to form the deeper bond required for reflective supervision. In addition to communication, members of the organization should have a common commitment to their purpose as a group (Heller, 2009).

Relationships are critical to the implementation and success of reflective supervision. The organization must value relationships and recognize their centrality to the work. Bertachhi describes this through the term “relationship-based organizations” (1996). Relationship-based organizations are characterized by a “mutuality of shared goals, a commitment to evolving growth and change, a commitment to reflecting on one’s work, respect for individuals, sensitivity to context, open communication, and standards for staff” (Bertachhi, 1996.) By embracing these concepts and making them the foundation of everything the organization does, employees will experience positive growth and change, which will positively impact the families they serve.

How do you develop effective relationships with individual staff members?

To develop an effective relationship with staff members, supervisors should find ways to convey to them the messages of safety, consistency, dependability, respect, confidentiality, and honesty within their interactions (Weatherston & Barron, 2009). The supervisor is responsible for creating a routine by meeting with the staff member at a regular time in a place that allows him or her to focus completely and not be interrupted or distracted (Weatherston & Barron, 2009). The routine and focused attention establish a relationship of trust by communicating its importance.



The supervisor and staff member bring all past experiences and current theories to the relationship. To fully participate in the process and make reflective supervision a success, the staff member should approach it with an open mind and willingness to discuss the various aspects of his or her work. The staff member should also be open to feedback from the supervisor and to making connections between his or her own experience and those of the children and families served (Weatherston & Barron, 2009).

What makes reflective supervision different?

Many supervisors of infant and family programs are required to provide administrative and/or clinical supervision, while reflective supervision may be optional. Put another way, reflective supervision often includes administrative elements and is always clinical, while administrative and clinical supervision are not always reflective.

Administrative supervision relates to the oversight of federal, state, and agency regulations, program policies, rules, and procedures. Supervision that is primarily administrative will be driven to achieve the following objectives:

- Hire
- Train/educate
- Oversee paperwork
- Write reports
- Explain rules and policies
- Coordinate
- Monitor productivity
- Evaluate

Clinical supervision, while case-focused, does not necessarily consider what the staff member brings to the intervention, nor does it necessarily encourage the exploration of emotion as it relates to work with an infant/toddler and family. Supervision that is primarily clinical will most likely include many or all of the administrative objectives that are listed above as well as the following objectives:

- Review casework
- Discuss the diagnostic impressions and diagnosis
- Discuss strategies related to the intervention
- Review the intervention or treatment plan
- Review and evaluate clinical progress
- Give guidance/advice
- Teach

Reflective supervision is distinct, due to the shared exploration of the parallel process. That is, attention to all of the relationships is important, including the ones between staff member and supervisor, between staff member and parent, and between parent and infant/toddler. It is critical to understand how each of these relationships affects the others. Of additional importance,

reflective supervision relates to professional and personal development within one's discipline by attending to the emotional content of the work and how reactions to the content affect the work. Finally, there is often greater emphasis on the supervisor's ability to listen and wait, allowing the staff member to discover solutions, concepts and perceptions on his or her own, without interruption from the supervisor.

The primary objectives of the reflective supervision include the following:

- form a trusting relationship between supervisor and staff member
- establish consistent and predictable meetings and times
- ask questions that encourage details about the infant, parent, and emerging relationship
- listen
- remain emotionally present
- teach/guide
- nurture/support
- apply the integration of emotion and reason
- foster the reflective process to be internalized by the supervisee
- explore the parallel process and allow time for personal reflection
- attend to how reactions to the content affect the process

How are professional boundaries maintained?

It is important to maintain professional boundaries when working with families; however, it can be difficult to establish boundaries within these relationships. The very nature of the work, visiting within the family's home and working together on the care of the child, promotes the development of very close relationships among staff and families. Often times, staff members are from the very community that they are serving.

The very nature of the work, visiting within the family's home and working together on the care of the child, promotes the development of very close relationships.

How does the home visitor maintain professional boundaries? Supervisors should ensure that all staff know and understand agency policy related to professional boundaries. This can be achieved through training on professional boundaries, policies/codes of conduct, and reflective supervision.

How do supervisors maintain professional boundaries? Some boundary concerns are:

- unclear definitions of roles (for example, the idea that a supervisor or home visitor will be expected to take on the role of a mental health professional)

- allowing your own emotions to interfere with your ability to provide reflective supervision
- inability to separate personal from professional relationships
- moving between the administrative and reflective roles

It is important for supervisors to understand they may also need reflective supervision in order to process and manage their own thoughts and feelings. “Exploring her own effectiveness in her job within a reflective relationship is the best training a supervisor can have for providing reflective supervision (Supervision: A Tool for Relationship-Based EHS Services, page 12).

Documentation, observation, and conversation are useful tools to evaluate when professional boundaries have been crossed.

What are best practice guidelines for the reflective supervisor?

- Agree on a regular time and place to meet
- Arrive on time and remain open, curious, and emotionally available
- Protect against interruptions, for example, turn off phone, close door
- Set the agenda together with the supervisee before you begin
- Respect each supervisee’s pace/readiness to learn
- Ally with supervisee’s strengths, offering reassurance and praise, as appropriate
- Observe and listen carefully
- Strengthen supervisee’s observation and listening skills
- Suspend harsh or critical judgment
- Invite the sharing of details about a particular situation, infant, toddler, parent, their competencies, behaviors, interactions, strengths, concerns
- Listen for the emotional experiences that the supervisee is describing when discussing the case or response to the work, for example, anger, impatience, sorrow, confusion, etc.
- Respond with appropriate empathy
- Invite supervisee to talk about feelings awakened in the presence of an infant or very young child and parents
- Wonder about, name, and respond to those feelings with appropriate empathy
- Encourage exploration of thoughts and feelings that the supervisee has about the experience of supervision as well as how that experience might influence his or her work with infants and young children and their families
- Maintain a shared balance of attention on infant/toddler, parent/caregiver, and supervisee
- Reflect on supervision session in preparation for the next meeting
- Encourage exploration of thoughts and feelings that the supervisee has about the work with very young children and families as well as about one’s response(s) to the work, as the

supervisee appears ready or able

- Remain available if there is a crisis or concern that needs immediate attention

What are best practice guidelines for the reflective supervisee?

- Agree with the supervisor on a regular time and place to meet
- Arrive on time and remain open and emotionally available
- Come prepared to share the details of a particular situation, home visit, assessment, experience, or dilemma
- Ask questions that allow you to think more deeply about yourself, and your work with very young children and families
- Be aware of the feelings that you have in response to your work and in the presence of an infant or very young child or parents
- When you are able, share those feelings with your supervisor
- Explore the relationship of your feelings to the work you are doing
- Allow your supervisor to support you
- Remain curious
- Suspend critical or harsh judgment of yourself and others
- Reflect on supervision session to enhance professional practice and personal growth

What kinds of questions can be used to facilitate reflective supervision?

Supervisors should ask open-ended questions, modeling questions that the staff member could also use with families. Instead of asking questions that have a “right or wrong” answer, the supervisor invites the staff member to explore experiences or interactions. Samples of phrases include:

- Tell me what happened...
- How did you feel when...
- What was the baby doing while this happened...
- What did you say? What would you like to say?
- What could you do differently, if anything...
- It sounds like you were...
- I wonder...
- What do you think was successful?

Why is reflective supervision needed among supervisors and program leaders?

In order for supervisors and program leaders to be effective and continually practice their own skills, it is important for supervisors to receive reflective supervision as well. “The power of the

parallel process is that supervisors are then better able to provide this kind of support to their staff members, who in turn can implement these reflective practices in their own work with families” (Heffron and Murch, 2010).

It can be a challenge for supervisors and program leaders to receive reflective supervision within their own program or organization. Sometimes it may be necessary to seek these reflective supervision experiences outside of the organization. Colleagues in similar situations from other agencies may be asked to provide reflective supervision sessions. If reflective supervision is sought from outside of the agency, clear parameters should be determined in advance. Permission should be sought from managers within both programs. It is also a good idea to consider a contract to protect against possible conflicts of interest, violations of confidentiality, and boundary issues.

How do you begin to implement reflective supervision?

There are several elements to consider when implementing reflective supervision including program support, staff support, implementation, method of delivery, supervisor support, and continuity.

Program Support: Is your program ready to implement reflective supervision?

- Does the agency support the implementation of reflective supervision?
- Are resources available to support reflective supervision?
- Is there trust between agency administrators and program leaders?
- Who will take the lead in implementing and maintaining the quality of the reflective supervision?

Staff Support: Does the staff know what to expect?

- Has information been provided through articles, DVD presentations, or conversations
- Is there trust between program leaders and staff?

Implementation: What needs to be included in the implementation plan?

- Will a committee oversee the implementation?
- Who will receive reflective supervision?
- How will the roll out look?
- How will different individuals respond? (Who will welcome it, who will be more cautious, who might object)
- How can everyone’s view be heard?

- What kind of support will be needed for those who are cautious?

Method of Delivery: What will the supervision look like?

- What will the length and frequency of the individual sessions look like?
- Where will the sessions take place?

Supervisor Support: How will the supervisors be supported?

- Will additional training and resources be needed?
- Who will provide reflective supervision to the supervisor?

Continuity: What method will be used to determine how the reflective supervision is going?

- How will feedback from staff occur? (See survey in appendix)
- How will the feedback be received (during staff meetings, anonymous surveys, etc.)
- What will the program do with the feedback?

Is there a format you can follow during reflective supervision sessions?

There are several key elements that should be included in each reflective supervision session, which together create a clear and respectful space in which the reflective supervision can take place. These elements are:

- Preparation
- Initial greeting
- Setting the agenda
- Telling the story/information gathering
- Understanding perspectives/hypothesis building
- Identification of next steps
- Closing/confirming the next meeting
- Post supervision reflection

In reflective supervision training, program leaders will receive information on these elements.

What are some tools and strategies to avoid common pitfalls when practicing reflective supervision?

Scheduling and Protecting Time – Reflective supervision does require a time commitment from supervisors and staff members. It is best to find a time that is suitable for both the staff member and the supervisor and to create a standing appointment time for each meeting.

Skills and Training – Experience will help you become more comfortable with reflective supervision. Workshops are offered on a regular basis as part of various meetings and conferences. In addition, there are several self-study resources available and experienced individuals who may provide coaching and skill-building opportunities.

Maintaining Professional Boundaries - It is easier to establish boundaries at the beginning of the relationship. It would be helpful for programs to have a written policy that clarifies expectations of maintaining professional boundaries.

Conflict with Other Supervisory Responsibilities – Many worry that it can be challenging to engage in reflective practice with someone that they may have to assert authority over later. However, many staff members report that using reflective supervision increases staff satisfaction, which leads to less turnover because staff feel supported in solving problems before the problem escalates.

Can you hire someone from outside of the program to provide reflective supervision?

A reflective supervisor may be hired/contracted from outside the agency or program.

How does reflective supervision tie in with the West Virginia Infant/Toddler Mental Health Endorsement?

Infants and toddlers learn best when within supportive, nurturing environments. When we as professionals know how to promote healthy social emotional development, we can then help families promote healthy social emotional development. The West Virginia Infant/Toddler Mental Health Association is working to promote the recognition and better understanding of mental health issues for infants and toddlers through the development and implementation of a voluntary endorsement system. Through a nationally recognized set of Early Childhood Mental Health Competencies, those working with and for children will use a shared framework, which focuses on relationship practices and gives a platform to address the social emotional needs of all children. As part of the competencies, professionals can pursue the Infant Mental Health Endorsement, which guides professional growth and recognizes the development of professionals who work with or on behalf of infants, toddlers, and families. A key component of the endorsement is reflective supervision, particularly around the skill areas of contemplation, self-awareness, curiosity, professional/personal development, and emotional response.

The competency areas and endorsement criteria are designed to assist professionals across all disciplines in developing the knowledge and skills needed to promote healthy social emotional

development. This is a multi-disciplinary approach to include: home visitors, educators, social workers, counselors, psychologists, child care providers, therapists, administrators, physicians, nurses, policy makers, training providers, and child welfare workers.

There are eight competency areas of knowledge, skills, and reflective practices found to be important for those individuals who work with or on behalf of infants, toddlers, and their families. These competency areas include: Theoretical Foundations; Law, Regulation, and Agency Policy; Systems Expertise; Direct Service Skills; Working with Others; Communicating; Thinking; and Reflecting.

There are four endorsement levels, each one equally important to the role that professionals play in supporting infants, toddlers, and families.

For more information on the West Virginia Infant/Toddler Mental Health Endorsement, please visit www.nurturingwvbabies.com.



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Appendix

REFLECTIVE SUPERVISION COACHING

Reflective Supervision Coach _____

Reflective Supervisee _____

Date	Telephone or Visit	Topics	Next Steps



Ethics, Attitudes, and Home Visiting

Similarities between friendship and home visiting:

- Informal
- Friendly
- Empathetic
- Trusting
- Genuine
- Refreshing
- Personality-driven
- Supportive
- Courteous
- Considerate

Differences between friendship and home visiting:

- Home visiting is goal directed.
- Home visiting is for the participant.
- Outreach worker is conscious of working to establish a relationship.
- Big value differences may exist.
- Outreach workers listen to problems without sharing their own.
- Relationship is not reciprocal.
- Confidentiality is essential and required by law in home visiting.
- Outreach worker is conscious of the use of time.
- Home visiting requires record-keeping and recording of information.
- Outreach workers have controlled behavior – no display of shock at what is seen and heard during home visits.
- Home visiting requires reliability – outreach workers must be on time.
- Home visiting includes a contract with each family.
- Home visiting requires no judgment about what families “should” do.

Families have these rights:

- Self-determination – they have their own time limits
- Confidentiality
- To be viewed and respected as individuals

Reflective Strategies

- Problem Talk – asking open-ended questions when presented with a problem. Who, what, where, when, and how. Avoid asking why because it implies blame.
- Wondering Curiosity – “I wonder...” or “I’m curious about...” Useful when exploring how a situation is affecting self or others.
- Solution-focused Questions – Open-ended questions that explore feelings/experiences and “assume” the person has the “answer” for next steps.
- Mirroring – Clarifying perceptions of what was heard to separate emotion from content.
- Empathy and Containment – Containing own feelings while listening and exploring what others might be experiencing.
- Accentuate the Positive – When you want to see more of a behavior or action.
- Reframing – Clarifying what might really be happening in response to an emotional statement.
- Feel Felt Found – “I understand why you might feel that way. I have certainly felt like that before. I’ve found that ____ worked for me. What do you think about trying that?” Can also use examples of what has worked for others.
- Normalizing – “I think that’s a normal response.” Useful when someone states or demonstrates a belief or behavior related to a situation.
- Attunement and Mindfulness – Awareness of home visitor’s needs and experience with situation being discussed.
- Slowing Down – Sitting quietly, using non-verbal cues to let the home visitor know you are listening and that you care. When the time is right, asking questions to explore the situation.
- Sorting and Selecting – Listening to the home visitor and sorting out what is best to pick out and discuss now and what should wait until another time.
- Perspective Taking – Encouraging the home visitor to imagine what it’s like for the mom, dad, baby, etc. that is being discussed.
- Gentle Inquiry – Asking questions like, “I wonder what could be some other possibilities...”
- Professional use of Self – Acknowledging how “self” impacts and is impacted by the work. Using self-disclosure in strategic ways.
- Negative Capability – Sitting quietly while the home visitor considers something or thinks about how best to express herself. Comfortable silence.

Supervisory Roles

Mentoring and teaching

- Assessing knowledge/skill base
- Plan for professional development
- Connect with resources

Providing a secure base

- Safe place to explore feelings and regain calmness
- Reflect on reactions and try out different solutions
- Share responsibility for the work

Maintaining standards, quality, and safety

- HFA standards
- Requirements from funders
- Monitor and model professional behavior and ethics
- Physical and psychological safety, self-care plans

Facilitating communication in the community and within the team

- Strong collaborations are vital
- Open and clear communication
- Promote a culture of respect and curiosity

Providing program leadership

- Communicate needs and experiences of the team to PC
- Assist the team in understanding the “big picture”
- QA/CQI
- Represent the program on community level

Creating and maintaining an environment of reflection

- A “holding environment”
- Respectful interactions among peers
- Structure – roles, lines of authority, policies, job descriptions
- Resources to do the work (GGK supplies, etc.)
- Mentoring
- Personal and team acknowledgment/recognition
- Link back to children/families and purpose of program

Mountain State Healthy Families
Supervision – Home Visitor

Home visitor: _____ Date: _____

Discussion Topics:	Content/Notes:
<ul style="list-style-type: none">___ Documentation___ Curriculum/Goals___ Parent/child interaction___ Assessments/Tools___ Service level change___ Transition planning___ Medical (i.e. immunizations)___ Concerns___ Successes___ Referrals and follow-up___ Training___ Boundaries___ Safety___ Caseloads___ Other:	<p>Home Visits/Families:</p> <p>Reflective Conversations:</p> <p>Other:</p> <p>Follow-Up Plans:</p>

Mountain State Healthy Families FSW Supervision Log

FSW: _____

Date of Supervision: _____ Start Time: _____ Stop Time: _____ Supervisor: _____

Interventions/Services:

Family:

Home visit documentation Family Goal Plan Tools (ex. ASQ, HOME) Referrals & Follow-up PSI

Transition planning Curriculum Plan for future visits Level change Other

Family:

Home visit documentation Family Goal Plan Tools (ex. ASQ, HOME) Referrals & Follow-up PSI

Transition planning Curriculum Plan for future visits Level change Other

Family:

Home visit documentation Family Goal Plan Tools (ex. ASQ, HOME) Referrals & Follow-up PSI

Transition planning Curriculum Plan for future visits Level change Other

Reflective Supervision (comfort level with topics/parents, triggers, impacts):

Reflection – Impact, self-care, self-awareness

Cultural considerations

Burnout prevention

Other

Administrative:

Data/forms

File maintenance

Quality assurance

Training

Other

Cabell-Wayne Healthy Families America/New STEPS
Supervision Log – HFA (FSW)

FSW: _____ **Supervisor:** _____

Date:	Time:
Weekly Totals: _____ Home Visits _____ Community Resource Referrals	IDP Progress/Development:
Knowledge Areas Discussed: _____ Positive parenting _____ Prenatal and infant development _____ Child development _____ Child health, safety, nutrition _____ Adult learning styles _____ Attachment and bonding _____ Community resources _____ Curriculum _____ Culture of service population _____ Effective learning environments _____ Pregnancy expectations/issues _____ Other:	
Skills/Abilities Discussed: _____ Observation of home visit _____ Documentation _____ Child abuse/neglect signs and reporting _____ Home visit completion rate _____ Family retention rate _____ Developmental delays – signs and referrals _____ ASQ administration and/or timeliness _____ HV planning/preparation _____ IFSP development/using to guide services _____ Advocacy _____ Group activity planning/facilitation _____ Other:	Other Discussions/Notes:
Professionalism Areas Discussed: _____ Coworker relationships _____ Boundaries _____ Ethics _____ Safety _____ Time management _____ Meeting/supervision participation _____ Adherence to policies/procedures _____ Confidentiality _____ File maintenance _____ Professional development _____ Accreditation _____ Community relationships _____ Other:	

Questions That Encourage Problem Solving

1. Questions that raise alternatives	<p>What are the possibilities? If you had your choice, what would you do? What are the possible solutions? What if you do....and what if you don't?</p>
2. Questions that encourage evaluation	<p>How do you feel about it? What do you think is best? What are some other ways of looking at this?</p>
3. Questions that encourage looking at the local picture	<p>What led up to this? What have you tried so far? What do you make of all this? When does this usually happen?</p>
4. Questions that lead to clarification	<p>In what way does this make sense to you? What seems to confuse you about this? Can you explain what you mean by that?</p>
5. Questions that encourage description	<p>What was it like? Tell me about it. What happened?</p>
6. Questions that encourage exploration	<p>Why do you suppose people do things like that? How could a person handle a problem like that? If you had your choice, what would you prefer to do?</p>
7. Questions to identify issues	<p>What seems to be the trouble? In what ways does this bother you? What do you consider the most troublesome part?</p>
8. Questions that encourage the use of information	<p>What information do you need before you decide? What do you know about it now? How do you suppose you can find out more about it?</p>
9. Questions that encourage planning	<p>What do you see as the first thing you have to do? What are you going to do about it? Where do you go from here? What are your next steps? Where do you think this will lead? If this doesn't work, then what are you going to do? What are some other options available to you?</p>



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Hiring Staff with Reflective Capacity

What is reflective capacity?

Reflective capacity is defined as the capacity to exercise introspection and the willingness to learn more about the fundamental nature, purpose and essence of how we, as humans, experience this world and how our own world-view is impacted by that experience.

Why is it important to hire staff with reflective capacity?

Working with overburdened families can at times be quite stressful. Home visitors are exposed to a wide array of challenging situations and behaviors that may (1) Trigger an emotional reaction to a parent's behavior based upon the home visitor's own childhood or other past experiences, and (2) Be in conflict with the home visitor's own value system. The capacity to give oneself empathy and contain judgment and reaction is critical to maintaining healthy relationships with families. Staff who feel comfortable sharing their feelings and experiences with a supervisor are more likely to respond in sensitive ways and less likely to project their own uncomfortable feelings onto the family. Self-reflective staff are able to identify and own what they are feeling without blaming the families. The willingness to reflect and participate fully in supervision reduces burn-out and allows a safe place for feelings to be validated and processed. This process supports the ability to move from our own survival strategies, through our limbic response and to the cortex to be able to grow the capacity to imagine what the parent is experiencing while feeling empathy for that experience. Staff with reflective capacity retain families longer and make for a more collaborative work environment. Additionally, their way of thoughtfully responding through "being" instead of reacting is how we would like parents to "be" with their children.

Staff who have reflective capacity:

- Has an interest in and ability to see things from multiple points of view.
- Takes an "ecological" perspective (i.e., explores a situation broadly). For example, looks beyond the parent-child relationship to look at the child's developmental status and its contribution to the situation; is interested in what other resources the family brings to the situation, wonders what has been tried before, etc.
- Has knowledge of infants, toddlers and attachment. Is able to pay attention to the infant or toddler and the importance of their relationship to the adults who care for them.
- Is self aware: clear about what own values, triggers, etc. are, aware about how these influence their perception and interpretation, and aware of how they impact others.
- Has a balanced and realistic view of relationships including both positive and negative aspects (including one's own relationship with families and others).
- Is comfortable thinking and talking about relationships and personal feelings that arise in relation to those relationships.
- Consistently considers another person's feelings, wants, needs, state(s) of mind, etc. and takes these into account in their responses.
- Has generally a positive approach to other people and the world.

- Assumes relationships can survive negative feelings and attempts to communicate about them rather than withdrawing or rejecting.
- Takes responsibility for their own contributions/reactions/responses to difficult situations.
- Can tolerate ambiguity – does not have to have a solution right away, but can sit with “not knowing” and spend time figuring out what the actual primary problem /issue is before considering options to move forward.
- Understands that others cannot “make” them feel a certain way, rather that the interaction has evoked or triggered an emotional response based upon one own’s past experiences.
- Knows what they need to bring themselves back into balance after a stressful incident or time (*how do they self-regulate?*). What do they do for self-care?

What to look for on resumes and interactions with interviewers and other staff when evaluating staff for reflective capacity:

In evaluating the applicant’s behaviors highlighted below, please keep in mind the role of anxiety of the applicant (your own contributions, reactions, responses), and anchor to the sense of the candidate’s connection to another human).

- Is their job experience a succession of short-term positions?
- In their job interview, are they successful in connecting with you?
- How do they relate to front-office staff or staff they meet incidentally as part of the hiring process?
- How well do they pick up on non-verbal cues you or others during the interview (it might be useful for you to set some non-verbal cues)
- How promptly do they return phone messages, emails, etc.?
- When you are having conversations with them rather than “questions-and-answers,” are they reciprocal? Do they consider, respond, and connect with you?
- Are they comfortable sharing how they are feeling, i.e. nervous, excited?
- How do you *feel* in their presence?



Sample interview questions: We want thoughtful responses from candidates, so it is wise to let them know that they can take their time in responding.

Think of a family that you have had a substantial relationship in the past. I am going to ask you some questions about that family member and your relationship.

- What is the family member's first name?
- Approximately how long were you in a relationship with this person?
- Describe your relationship with this person.
- Think of five adjectives that you would use to describe this person. This might take some time. Once you have identified these five adjectives, I am going to ask you why you chose them.
- I'd like you to think of a time when this person was upset. What was going on inside this person when he or she was upset? What was he or she feeling?
- How did you respond when this person was upset?
- How did it affect you on the inside when this person was upset (*look for tolerance of strong affect, what he or she does when a parent gets really sad or angry*)?
- Why did you choose this person to talk about?
- How would this individual describe you (name 5 adjectives this person would use to describe you)

- Outside of work, what experiences in your life have helped you be ready for this kind of work?
- What kinds of things do you do to nurture yourself, reduce stress and maintain a balanced life?
- What do you think it is like to be your supervisor? What do you need to work on?

- What relationship in your life is the best model in a general sense for how you would like to approach relationships with families and why (is there a demonstration of good listening skills, good relationship building skills (can say what a collaborative healthy relationship looks like)?)

- Think of a specific difficulty you have had with a colleague or supervisor. Please describe what you think was going on in that situation (*specifically, look for ability to see the other person's point of view in a meaningful way as well as describe the breach and what he or she did to repair it*). and how did you resolve it?

- Describe a time when you found yourself in a challenging situation and how did you handle it (*look for awareness of the importance of professional boundaries*)?

- Present sample scenarios. Look for interest in exploring multiple perspectives, do they suggest looking for the meaning behind the behavior ("what could cause a parent to behave this way?"), are they curious about the situation and seek out additional information, or do they rush to judgment?
 - Scenario sample: You have been working with a family for 4 months who appears to have a flat affect and whom you have never seen smile. Her responses to questions are usually *yes* or *no* answers with no further clarification. On several visits, you thought she might have been crying, but when asked, she tells you *no*. You have had

visits at various times during the day, and her 4-month old baby has never been awake. She has told you that little Ana is a good baby and a good sleeper.

- Ask the applicant, “What do you find yourself thinking about in response to the vignette (what are you thinking might be going on with mom)?” What could be happening for the baby? Are there any thoughts about feelings that come up for the applicant?) We would hope for a response that represents the following perspectives (the applicant’s, the parent’s, the baby’s). Plus, we would also want to sense some curiosity and places the applicant want more information.

The responses should be evaluated on several scales:

1. How rich and elaborate are the descriptions of other people?
Unclear or vague descriptions Detailed and vivid descriptions
1 2 3 4 5
2. How much does the interviewee seem emotionally connected to the people they are talking about?
Distant/unconnected Quite emotionally connected
1 2 3 4 5
3. How much does the interviewee seem coherent in what they are talking about?
Rambling, confusing, contradictory Clear and coherent
1 2 3 4 5
4. How much does the interviewee seem to feel positively about other individuals?
Consistently negative Consistently positive
1 2 3 4 5
5. How much does the interviewee communicate a sense of interest in and understanding of other people’s internal emotional world?
Acts as if others don’t Acts in ways that take
Have separate ideas/feelings into account other’s feelings
1 2 3 4 5

Potential questions to ask when interviewing references to evaluate reflective capacity:

- Compared to your other staff, how was this person at handling differing viewpoints between themselves and others?
- How would you describe this person's general mood?
- Compared to your other staff, how able are they to be reflective about the job they are doing and how they could do it better?
- How would this person show frustration?
- If this person worked with a range of families/individuals, did this person seem to work better with a certain type of family/individual? If yes, why?
- Compared to your other staff, how successful was this staff at responding to frustrated or upset people? What specific skills did you see?
- What do you think was the hardest part of the day-to-day aspect of doing their job for this person? Why?
- Over time, how did this person's relationships with co-workers change?
- Was this person a worker who would feel comfortable coming to you for support or advice? If yes, can you give an example?
- Describe how this person would react if you offered a suggestion that they had not asked for.

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