Supporting Best Practice in Home Visiting through Reflective Supervision

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2014 Home Visiting Conference

Richmond, Virginia
October, 2014
Goals of Supervision

• **Administrative Supervision:** Quality assurance and fidelity to agency policies

• **Reflective Supervision:** Professional growth of staff and best outcomes for clients

• **Blended Model:** Both goals sets of goals addressed in one supervisory relationship
Reflective Functioning

Reflective Functioning: the capacity to understand that one’s own or another’s behaviors are linked meaningfully to underlying mental states, to feelings, wishes, thoughts, and desires.

Complexity of Reflective Issues in Home Visiting: the home visitor working on behalf of the child and her family is challenged to take into account the differing mental/emotional perspectives of the infant or toddler, the parent, other significant caregivers, other professionals, as well as her own internal perspectives.
What are the Aims of Reflective Supervision?

In reflective supervision, the supervisor

• Supports supervisee’s personal responses and awareness of self in her work

• Works to help supervisee understand the perspectives of others and develop empathy for the child and family

• Helps the supervisee deepen her knowledge of child and family development, sharpen her critical thinking skills, and learn new intervention strategies
Reflective Supervision: Core Elements

• **Regularity:** time frames are clear, established, respected, and protected.

• **Collaboration:** supervisor and supervisee mutually respect each other, agree to work together, to set goals together, to ask questions, and discuss successes and failures.

• **Reflection:** a time, place, and relationship in which to think deeply about one’s clients or children in one’s care, and one’s work and self.
We always have multiple clients—infant or young child, mother, father, other caregivers, yet our primary “client” is the relationship between child and caregivers.

“When we attend to the baby, but not the parent, we can convey to the parent that she is not worthy of our attention.” Robert Weigand, Michigan Association for Infant Mental Health Conference Plenary Session, Ann Arbor, May 17, 2011.

Corollary to Weigand: When we attend to the parent, but not the baby, we can convey to the parent that the baby is not worthy of her attention. Doug Davies, Kansas, June 21, 2012.

Why is Time to Reflect Important?

Because There is a Lot to Sort Out

• “The home visitor experiences such a barrage of cognitive, affective, and interpersonal stimuli that she can consciously process a small fraction of the information perceived in real time.” (Barry Wright, 2008).

• Especially in work with “high risk” families subject to many psychosocial stressors, the worker’s responses may reflect a welter of disturbing perceptions and emotions that are hard to contain and sort out, and that may reverberate uncomfortably with aspects of her own psychology and sense of self.

• Families may unconsciously induct the worker into the family system, drawing her into roles and scripts—such as the ineffectual or critical parent—that feel “normal” to the client but are disturbing to the worker.

• Work with challenged families may affect the worker’s sense of efficacy as a professional—it is common, via parallel process, for workers to experience a sense of helplessness or hopelessness that mirrors the family’s seemingly intractable problems or absence of hope.
Understanding Personal Reactions

Reflective Supervision encourages understanding of one’s own reactions as potential pathway for doing more effective work, e.g.

– Frustrations and negative feelings about clients
– Boundary issues
– Reflexive reactions
– Issues of identification with clients
– Realistic expectations about clients & what can be accomplished
“Every practitioner has had uniquely painful experiences, and each tends to keep some things hidden. How much a given supervisee...lets a supervisor see depends greatly on her sense of being partnered, her sense of safety in the supervisory relationship...Her supervisor’s empathy and clarifications boost her ability to accept, even make use of, that which had previously felt unacceptable.” --Rebecca Shamoon Shanok
Common Mismatches in Home Visiting Practice: Topics in Supervision? 1

- Parent wants a relationship with home visitor, but is unable to focus on goals of the work
- Home visitor feels she’s “just slogging along,” without clear evidence of progress
- Home visiting program has a specific mission, but family’s multiple risks impede work on specific goals
- The developing worker-parent relationship is the conduit of change, but what to do when the parent’s capacity for relationship is impaired?
Common Mismatches in Home Visiting Practice: Topics in Supervision?

- The overlay of stressors and risk factors (e.g. domestic violence, substance abuse, community violence, poverty) blunts the focus of the work.
- The tension between responding to the “crisis of the week” and concentrating on the program’s goals and curricula.
- Tensions in negotiating and maintaining boundaries.
- Assessment of physical risk to home visitors vs. maintaining engagement with family.
- “Walking into a crisis:” A challenge to quick assessment of risk to family members and self.
Discussion Questions

What elements of this brief presentation on home visiting issues speak to your experience as a supervisor?

What elements of concern or common issues would you add, based on your experience?
Doug’s Personal Statement

For me, an essential goal of reflective supervision is to help a worker disentangle herself from the “messiness” of a case, first by joining her in exploring the emotional aspects of the messiness, and then by working to co-create shared, more objective understandings that may allow her to re-enter the work with clearer eyes, a sense of realism, and a tentative plan.
“A Relationship for Learning and Professional Growth”

“The growth of reflective skill is best accomplished in a *supervisory* relationship that invites…intentional exploration of what one sees, hears, and does, as well as one’s emotional response to the work and personal history that is awakened by the work.”

Jeree Pawl: On the Supervisory Relationship

- “Supervision exists to provide a respectful, understanding, and thoughtful atmosphere where exchanges of information, thoughts, and feelings about...one’s work can occur.”

- “The relationship between supervisor and supervisee sets a major tone that reverberates throughout the system...The practitioner’s experience in supervision directly affects the interactions he has with the child and family.”

- Pawl’s “platinum rule” for supervisors: “Do unto others as you would have others do unto others.”

(Pawl, 1995)
On Being Listened to By The Supervisor

“So often, what is shareable is bearable.”

(Heffron & Murch, 2010, p. 54)

The supervisor’s support helps the supervisee “tolerate the ambiguity of complex situations.”

(Heffron & Murch, 2010, p. 56)

“This sense of being heard and felt assists the supervisee in regulating her…feelings.”

(Heffron, 2005, p. 125).

“With this calmer window into the world of the mind…providers can better use their internal life as a bridge linking themselves to others and as an instrument of growth.”

(Siegel & Shamoon-Shanok, 2010, p. 10).
Potential Benefits to Supervisee

- A chance to step back from the immediate experience to sort through thoughts and feelings about what one is observing and doing with children and families.
- A chance to learn how to frame informed questions that will often lead to greater understanding and more useful interventions.
- A chance to analyze possible meanings of clients’ behavior, circumstances, and potentials, and to develop fresh perspectives and new ideas about intervening.
- Promotes greater self- and professional awareness and improves practice.
- Experiences, within a safe relationship, a chance to reflect on one’s personal feelings in working with families: strong feelings aroused by children’s behavior, identification with children’s difficulties, “reflexive reactions.”
Potential Benefits to Programs

- Strengthens individual and team skills of teachers that translate into better ability to work with infants/young children and their caregivers

- Improves practitioner ability to manage situations leading to compassion fatigue or burnout

- Increases job satisfaction leading to job retention and overall stability in the program
“Wondering About Relationship: Reflective Supervision at a Transition in Treatment”
Douglas Davies & Vickie Novell

- How would you characterize the relationship between clinician and supervisor?

- The process of reflective supervision often alternates between a focus on understanding the clinical material and understanding the supervisee’s reflective responses to it. How is this theme played out in this session?

- Reflect on the parallel process of things that seem “unspoken” -- by the clinician and by the mother. What did the supervisor do to highlight this issue?

- The supervisee brings up a very common clinical issue—how directly to express an important concern when one feels uncertain about the strength of the therapeutic relationship. How do the supervisee and supervisor work together on this issue in this case?

- If you were the supervisor, what issues or questions would you keep in mind during subsequent supervision sessions—not just about the case, but also about the supervisee and your own supervisory style?
Personal Responses to Video Supervision

• **For Supervisors:** Did the video prompt reflections on your own supervisory style and practice?

• **For Supervisees:** Did the video prompt any reflections on the ways you use supervision or your needs as a supervisee?
Video Resources for Training

• Reflective Supervision Video Training Series, Part I. Michigan Association for Infant Mental Health.
  (Four live and unrehearsed supervision sessions with professionals who work in mental health agencies)
  Available from: www.mi-aimh.org

• Finding the Words, Finding the Ways: Exploring Reflective Supervision and Facilitation. Mary Claire Heffron & Trudi Murch. California Center for Infant-Family and Early Childhood Mental Health
  (Four role play vignettes with workers in different early childhood disciplines with their regular supervisors).
  Available from: www.cacenter-ecmh.org
The following slides discuss aspects of home visiting and the process and structure of reflective supervision sessions that I don’t have time to discuss in this brief session.
The Core of Home Visiting

– This view recognizes that all human development occurs win and through relationships-patterns over time

– Just as everyday patterns of parent/child interaction are most powerful influences on infant and child development
  ▪ Parent-home visitor relationship can be central to promoting parent development and enhancing parents’ relationships with their child
Core of the Home Visiting Relationship

The parent home visitor relationship involves mutuality. Each influences the other at every moment and in important ways over time.

Ex. Irritable baby-parents feelings of competency- affects their ability to provide calm care.

Infant feels the tension, irritability increases. Cycle continues.
The home visitor is less of a teacher

- In traditional home visiting the Home Visitor is more:
  - Empathic listener
  - Consultant
  - Resource
  - Guide
  - Advocate and
  - Partner
  
  - Example: sleep. Instead of telling the parent how to handle, learn about the infant’s sleep pattern first, only then share development info. and possible strategies.
  - Together there is joint problem solving rather than traditional teaching
  - Parents are the experts, active participants
  - They are the final decision
Home Visitors work on two levels

They are engaged with the parents and are aware of interactions - our own response and feelings

• This helps us work with people different than us
• During initial visit encourage parents to express expectations for child and talk about priorities regarding behavior and skills.
• Ask parents how they’d like to use the time together.
Issues in Home Visiting

» Establishing boundaries
  • Easy for boundaries to blur, especially in the home
  • Working in home adds to the ambiguity
  • Talking about personal problems preoccupies
  • Approaches-
    • Rescue- violates basic principle of empowering
    • Listen empathically. Help them solve their problems. Refer.
    • Can be therapeutic w/o being a therapist
    • Follow their lead as when to sit, etc.
  • Home Visitor role is ambiguous- issues of privacy and opening up to others
  • HV makes clear statements of purposes and expectations and invitation for parent to share can help parents gain confidence
“Often...material is presented as a kind of tangled ball with multiple skeins twisted and interwoven. Over time, the supervisor helps the supervisee sort out the strands by considering both those in the foreground, or the most obvious strands, and those that are lodged at the center of the ball. At times, the supervisor links together pieces of the story that have been presented and raises possibilities with the intervener.”

(Heffron, 2005, p.117)
Process: Telling the Story and Focusing on the Details

“While the supervisee is relating the details, he is also constructing the story of the event and perhaps becoming aware of his own attitudes and reactions for the first time. This detailed recounting also helps the supervisor to see or hear things the supervisee may have missed.” (Atchley, Hall, Martinez, & Gilkerson, 2009, p. 84, In A practical guide to reflective supervision).
“It is very helpful [for the supervisor] to wonder with the supervisee about each person’s perspective. ‘I wonder how the mother feels about her baby’s new ability to walk and climb?’ ‘And what’s it like for her toddler to have this new freedom?’ ‘And how does this new capacity change the way they see and relate to each other?’ As the supervisee develops greater understanding of the key dynamics, hypotheses can be generated in an open, tentative, exploratory way. The supervisee is helped to reflect on her own position and to keep trying on the perspectives of others.” (Atchley, Hall, Martinez, & Gilkerson, 2009, p. 85)
Process: Considering Next Steps

- “Practitioners come to supervision with problems to solve, uncertainties to clarify, and issues that are affecting their day-to-day work.”

- Often the last part of an RS session is devoted to thinking about next steps: “This not only gives the practitioner direction, but also helps her contain and organize what she has learned about herself during the session.”

- Supervisor’s question: “In the time we have left, given all you have shared and observed, [let’s think about] how you might approach your next home visit.” “As with formulating hypotheses, this is a collaborative process. [The supervisor’s] greater experience may be a resource at this stage.”

(Atchley, Hall, Martinez, & Gilkerson, 2009, p. 85)
WHAT IS REFLECTIVE SUPERVISION?

• Collaboration relationship for professional growth that improves program quality and strengthens home visiting.

• It builds the capacity of:
  – Individual staff
  – Relationships
  – Organizations
The Key to Reflective Supervision

Being respectful and non-judgmental
Having genuine interest and empathy for the supervisee’s experience