Activity 5: Practice # 4 Conduct Effective Case Consultations/Case Conferences

Purpose: To provide participants with useful tools and techniques to conduct an effective case consultation/case conference.

Time: 11 hours, 30 minutes (690 minutes)

Objectives: Through this activity, the supervisor will:
- Distinguish between Conventional and Family Centered Supervision.
- Describe the role of the supervisor in planning, scheduling, and participating in case consultations using the case conference format.
- Describe the structure of a case conference.
- Through role play, apply consultation/conference principles and techniques.

Materials: (change below as needed)
- Participant Workbook
- Flip chart and markers
- Projector
- PowerPoint file
- DVD - Supervisory Case Conference
- DVD player
- Handout materials for Card Sort Activity (5 sets of heading and 5 sets of the cards)

<table>
<thead>
<tr>
<th>Sequence: (of topics/exercises)</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family-Centered Supervision</td>
<td>35 minutes</td>
</tr>
<tr>
<td>Card Sort Exercise and Lecture</td>
<td>60 minutes</td>
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<tr>
<td>Am I Family-Centered or Conventional?</td>
<td>95 minutes</td>
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<tr>
<td>Case consultation Overview</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Building Self Awareness</td>
<td>120 minutes</td>
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<tr>
<td>Case Consultation: Individual or Group</td>
<td>20 minutes</td>
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<tr>
<td>The Structure of the Case Conference</td>
<td>160 minutes</td>
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<tr>
<td>Case Consultation/Conference Exercise</td>
<td>70 minutes</td>
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<tr>
<td>Video: Supervisory Case Conference (Optional)</td>
<td>45 minutes</td>
</tr>
<tr>
<td>Reflective Case Consultation- The Team Approach</td>
<td>15 minutes</td>
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<tr>
<td>Team consultation Exercise</td>
<td>60 minutes</td>
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</tbody>
</table>
## Activity 5: Practice # 4 Conduct Effective Case Consultations/Case Conferences (690 minutes)

<table>
<thead>
<tr>
<th>Method</th>
<th>Script</th>
<th>Tips/Notes</th>
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<tbody>
<tr>
<td><strong>PowerPoint Slide:</strong></td>
<td><img src="#" alt="Casework Management" /></td>
<td><img src="#" alt="Conduct Effective Case Consultations/Case Conferences" /></td>
</tr>
</tbody>
</table>

### Family - Centered Supervision Overview (35 minutes)

**Say:**

In this section our primary focus will be on the goals and structure of the case conference. We will distinguish the case conference (a format) from case consultation (the process) and help you identify your roles and responsibilities in each.

---

**PowerPoint Slide:**

![Conduct Effective Case Consultations/Case Conferences](#)
<table>
<thead>
<tr>
<th>Purpose:</th>
<th>To provide participants with useful tools and techniques to conduct an effective case consultation/case conference.</th>
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<td>Through this activity, the supervisor will:</td>
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<td></td>
<td>• Through role play, apply consultation/conference principles and techniques.</td>
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</table>

**Say:**

We will start our discussion with Family-centered supervision and DCF’s Case Practice Model.

DCF’s Case Practice Model dictates that we conduct our day to day business based upon a family-centered practice model. Therefore, as supervisors we must base our supervision of the work being done on this principle. But what is “Family-centered practice” and what is your role as supervisor?

Family-centered practice can be defined as a process where families are seen as partners, where gathering information relies on mutual trust and respect and where developing service plans is based on the best thinking and expertise of the family and the worker.

**Say:**

Unlike conventional practice it does not assume that (1) families are the problem and (2) professionals are the only one who can keep children safe.

“Family-centered practice” has been characterized as being synonymous with family preservation or child reunification, it is neither. It also has been
mistakenly defined as the “outcome.” Therefore, if there is a re-occurrence of child abuse or if there is a death of a child “family-centered practice” is blamed.

**Say:**


North Carolina using Berg & Kelly’s ideas developed six principles of partnership intended to guide and inspire workers interaction with family members: (1) everyone desires respect, (2) everyone needs to be heard, (3) everyone has strengths, (4) judgments can wait, (5) partners share power, and (6) partnership is a process.

**Do:**

Instruct participants to turn to and read “A Foundation of Family-Centered Practice,” page ____ of the Learner Guide.

- Ask them to read “Consistent and Quality Supervision,” page ____ of the Learner Guide.
- Briefly discuss participant’s views.
- Allow 10 minutes for discussion.

**Learner Guide:**

Appendix A: A Foundation of Family-Centered Practice

Appendix B: Consistent and Quality Supervision

10 minutes

**Do:**

Instruct participants to:

Turn to "Six Principles of Partnership ", p.____ of the Learner Guide

- Individually consider the two questions below.
- You have 5 minutes.
- Allow 10 minutes for discussion.
- Chart and post responses to questions.

**Group Exercise:**

Allow participants 5 minutes to answer the two questions below. Allow 10 minutes for discussion.

If you agree that cultural influencers impact how we “see others”

15 minutes
### How would you apply the six principles developed by North Carolina to your work with your workers?  
### How would you encourage their use with co-workers, families?

#### Debrief:
Debrief by soliciting responses from 5 to 6 participants.  
What were some of your ideas?

#### Say:
Conventional Supervision in our culture is problem-oriented not family oriented. A Conventional Supervisor:
- Is a person with superior knowledge and skills who oversees the work of lesser-skilled individuals;
- Is responsible for the volume and quality of production;
- Is ready to spot and prevent errors;
- Is a problem fixer and damage controller;
- Evaluates and develops an employee based upon deficits identified by the supervisor;
- Must develop a plan of action for addressing employee deficiencies and ensure that the employee carries out this plan effectively.

### Card Sort Exercise (60 minutes)

Our next activity, a “sort game” compares Conventional Supervision with Family Centered Supervision.

**Trainer’s Note:** In this exercise participants are being asked to determine (prior to a comprehensive discussion) the goal(s) of conventional and family-centered supervision and conventional and family-centered practices.

The purpose is to determine if participants can differential between the goals of conventional and family-centered supervision and the practices associated with them.

60 minutes includes lecture time.
**Exercise Card Sort**

**Task:**
- Determine whether a statement is a Goal or Practice
- Determine whether the goal is Family-Centered or Conventional Supervision
- Determine whether the practice is Family-Centered or Conventional
- Place each card under the appropriate heading:
  - Goal(s) of Conventional Supervision
  - Goal(s) of Family-Centered Supervision
  - Conventional Supervisory Practice
  - Family-Centered Supervisory Practice

**Do:**
Conventional Supervision vs. Family-Centered Supervision Card Sort Exercise
- Prepare 5 sets of cards prior to class.
- Distribute one set of cards to each group.
- Instruct each group to sort their cards and place them under the appropriate heading:
  - Goal(s) of Conventional Supervision
  - Goal(s) of Family-Centered Supervision
  - Conventional Supervisory Practice
  - Family-Centered Supervisory Practice
- Instruct groups to select a recorder/reporter.
- Allow 15 minutes for this exercise.
- Reconvene group after 10 minutes.
- Display correct answers.
- Facilitate discussion.

**Group Activity:**

**Handout:**

**Trainers:** answers to each Card Sort Question are in bold print and can be found in Appendix C. Prior to class you should ensure that you have enough cards for your groups. Each group is to get a complete set of cards. A single set consist of 21 cards and 4 Headings.

**To keep track of the right answer put the letter associated with the statement on the lower right hand corner of your cards.**

**Learner Guide:**
Clarify the concepts using the information below.

The **goal** of **Conventional Supervision** is to:
- Produce frontline staff that focuses on assisting families to comply with agency-directed plans to keep children safe.
### Conventional Supervisory practice:
- Does not include the family in planning;
- Focus is on caseloads and responding to tasks;
- Supervision is only in the office;
- Performance evaluations are formal and comments and plans are similar from worker to worker;
- Interaction with workers is situational and primarily focused on problem cases or crisis intervention;
- Supervisors are the source of knowledge;
- Interaction with unit members is hierarchical;
- Developmental opportunities for supervisors are passed up because “there is no time;”
- Suggests that workers are solely responsible for child safety, forcing them to make key decisions with little or not input from other professionals or from the families themselves.

### The goals of Family-Centered Supervision are threefold:
- To facilitate the development of competent frontline staff that will make good decisions and empower families to make good decisions to keep children safe.
- To identify competency and build skills through observation, interactive supervision, and continuous strength based feedback to improve outcomes for families;
- To create a climate of mutual respect, empathy, genuineness, and trust between workers and families.

### Family-Centered Supervision
- Focus is on families and finding realistic solutions that result in good outcomes;
- Emphasizes the importance of partnering with families and affirming progress and successes;
- Supervisors make home visits with staff to model, observe, and provide the support.
and feedback to develop skills;
- Supervisors guide workers on cases;
- Regular, scheduled case consultation is used to foster skill development;
- Supervisors look for peer learning opportunities;
- Interaction is team-focused and collaborative;
- Workers are encouraged to take the lead in peer learning;
- Evaluation is on-going, constant and mutual;
- Joint planning is used to build worker skills.

**Ask:** Why is Family-Centered Supervision important?  
Possible answers:
- It helps supervisors demonstrate leadership;  
- It promotes modeling;  
- It helps create a climate of mutual respect  
- It promotes good communication  
- It promotes cultural sensitivity;  
- It is the main component of DCF’s case practice model.

**Key Points:**

- Family-centered supervisors focus on families and seek to find realistic solutions that bring about good outcomes. They emphasize partnering with families and affirm progress and successes.
- Family-centered supervisors possess and demonstrate specialized knowledge and skills needed to engage families; assess strengths and needs and include them (through the use of child and family team meetings) in the planning process.
### Key Points:

- Family-centered supervisors understand that listening is the **key to good communication** so they spend a great deal of time listening to others. Even when workers or others have input about items that cannot be changed (due to laws, standards, and policies), supervisors acknowledge this input and seek solutions whenever possible. They communicate their priorities and expectations clearly and respectfully.

### Learner Guide:

- **In the role of Advisors** family-centered supervisors continuously seek opportunities to explain, demonstrate, and support workers as they develop new skills. They urge workers to apply what they learn in training to their work with families.
- **In the role of Collaborator** - Interaction is team-focused and collaborative, providing for workers to take the lead roles in peer learning, to develop unique expertise, and to become “model” practitioners.
- **In the role of Evaluator** - Evaluation is ongoing, constant, and mutual. The worker and the supervisor jointly plan how to build worker strengths.
- **In the role of Learner** - Family-centered supervisors make time to attend training to keep the best practices and ensure they have the skills and knowledge to successfully mentor staff. They are open to learning from families, other professionals, and the people they supervise.
- **In the roles of Teacher, Coach and Mentor** - Supervisors guide workers casework and encouraging them to look to each family’s experience as a source of knowledge. Regular scheduled case consultation is used to enhance worker’s skills. They also look for peer learning opportunities.

### Trainers:

The roles listed here have different names according to the author but are similar to the one discussed earlier (supporter, educator, administrator, etc. in Module 1). Explain to students that they do not have to adopt one model over the other as both are equally effective if used.
In the role of an **Enabler** – one who supplies the means, knowledge, etc.
- In the role of an **Overseer** – one who keeps watch over and directs the work of others
- In the role of an **Expert** - one who has a high degree of knowledge or skill in a particular area
- In the role of a **Problem Solver** – one who considers multiple alternatives when seeking a solution to a problem

**Trainer** these traits in of themselves are not bad but they are not family centered. **But please do not tell students this at this time.** Relay this information in the next exercise.

**Summarize:**

We have identified seven roles that a family-centered supervisor assumes - advisor, collaborator, evaluator, learner, teacher, coach and mentor.

**Ask:**

Can you think of others?

**Say:**

You will now be given an opportunity for reflection. When completing the next exercise I want you to think about your style of supervision.

**Exercise: Am I Family-Centered or Conventional? (95 minutes)**

**Say:**

This exercise will identify where you spend most of your time. In Part 1 you will determine whether you are a conventional or family-centered supervisor. In Part 2 as a group you will discover trends, similarities and formulate goals to help you attain your preferred goal.

**Part 1 Individual Exercise**

- Ask participants to answer the questions in both Part 1 and Part 2
- Refer them to page____ of the Learner Guide, titled Family-Centered Supervision - Supervisory Roles to record individual answers
- Allow 10 minutes

**Learner Guide:**

- Roles are: Advisor, Collaborator, Evaluator, Learner, Teacher, Coach, Mentor, Enabler,
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<tr>
<td>3.</td>
<td>In what role would I like to spend more of my time? Why?</td>
<td>Problem-Solver, Expert and Overseer.</td>
</tr>
<tr>
<td>4.</td>
<td>In what role would I like to spend less time? Why?</td>
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<tr>
<td>5.</td>
<td>In which of the roles am I more effective? Least effective?</td>
<td></td>
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<tr>
<td>6.</td>
<td>What prevents me from spending time in the role I prefer?</td>
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<tr>
<td>7.</td>
<td>What strategies can I use to increase my effectiveness?</td>
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<tr>
<td>8.</td>
<td>What strategies can I use to increase time in my preferred role/area?</td>
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**Part 2**  
**Group Exercise**

- Instruct large group to form groups of 4 to 5
- Distribute newsprint
- Ask each group to compile and record the information obtained from part 1.
- Allow 20 minutes for small group discussion and compilation of answers
- Process as a large group exercise
- Allow 20 minutes for large group discussion

**Do:**

**Group Exercise:**

Then

- Ask each groups to answer the following questions

Were there commonalities in strategies? Were there differences?  
Were there trends or patterns?  
Where did most want to spend their time?  
Where did most spend their time?  
What strategies did most say they would use to attain their preferred goal?

- Allow 10 to 12 minutes for small group discussion.
- Allow 15 minutes for large group discussion.
### Discussion
- Allow 15 minutes for large group discussion

### Say:
- Determine your motivation for staying in a particular area;
- Ask yourself, if self-imposed barriers are keeping you from performing at your best? If so, remove them;
- Determine what needs to be changed to become more effective and do it;
- Determine if your lack of confidence in your workers' ability to perform at a level you have identified, and then reevaluate your expectations. Are they realistic, attainable, or are they too high, or too low?
- If you do not possess the necessary knowledge in a problematic area educate yourself;

### Ask:
- Are you failing to grow your workers because you fear competition from them?
- Are you overworked because you fail to delegate minor tasks to competent workers?

### Ask:
- Are you the only one who can do it right? If you answered yes to one or more of these questions perhaps you are a conventional supervisor rather than family – centered supervisor.

### Key Points:
- Conventional supervisors tend to spend more time doing things they like or know how to do and less time doing things that are unfamiliar and more difficult;
- Conventional supervisors may find it difficult to share power with others;
- Conventional supervisors feel they have more knowledge and skills than subordinates;
- Conventional supervisors understand that they are responsible for preventing errors;
- Conventional supervisors understand if a mistake happens, he or she must fix it;
- Conventional supervisors understand it

The key points for this exercise are to the left.
<table>
<thead>
<tr>
<th><strong>Take less time to direct than to listen;</strong></th>
<th><strong>Then review the points regarding the Family – Centered Supervisor</strong></th>
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<tbody>
<tr>
<td><strong>Ask if there are questions or concerns. Address all.</strong></td>
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</table>

**Family-Centered Supervisors**
- Family centered supervisors understand that it is more effective to first identify the problem then implement services;
- Family-centered supervisors understand that working collaboratively with workers grows them and ultimately reduces their dependence;
- Family-centered supervisors understand that evaluation is an intricate part of supervision and should be jointly planned with workers;
- Family-centered supervisors understand that learning is life long and continuously seek to use best practice;
- Family-centered supervisors use case consultation to coach, learn, teach, mentor, collaborate, advise and evaluate.

**Say:**

**Learner Guide:**

**Key Points:**
- Applying the family-centered approach to child welfare does not change the fact that supervisors are bound by legal and policy mandates. They are still responsible for ensuring the safety, permanency, and well-being of children. However, this approach views the family and community agencies as partners who equally share the responsibility of keeping children safe.

**Transitional Statement:**
- The family-centered approach allows supervisors to keep their fingers on the pulse of a case, while allowing the worker to grow professionally. It allows the family and community to partner with the Division in determining how to secure the safety, permanency, and well-being of children.

**Ask if there are questions or concerns. Then move to our next topic which is case consultation. Though DYFS uses the term case conferencing when referring to case consultation we will use both. For our**
purposes we will view case consultation as the process and case conference as the format for conducting the consultation.

**PowerPoint Slide:**

- Our next section is an overview of case consultation. Most states use the term case consultation to describe the supervisory process of gathering casework information from worker. The format for the case consultation is the case conference. Because DYFS uses the term case conferencing when referring to case consultation we will use both terms. So, for our discussions we will define case consultation as the process and case conference as the format.

### Case Consultation Overview (10 minutes)

**Ask:**

Previously, we identified two important roles of supervision - the “growing” of workers and ensuring the safety of children. How do you as a supervisor determine the needs of your workers? How do you assess whether growth has, or is taking place? How do you determine whether or not progress is being made on a case? Who has this information and how do you as the supervisor get it?

**Answers to look for:**

By asking the worker, reading contact sheets, etc., through case consultation in the case conference.

**Say:**

If you answered through case consultation with the worker you are on target. Case consultation utilizing a case conference format is an important requirement of your job. In fact, DYFS feels so strongly about case consultation it has policy that dictates when and how often a case consultation/case conference should occur. It further dictates that you not only consult with your workers but that you consult with your CWS regularly on high risk cases.

Case consultations can take two forms, individual (one-on-one) or group (peer, team). The most common is the individual. We will discuss both in more detail later.

Explain that case consultation is synonymous to the DYFS term “case conference.” The process where by a supervisor gathers case information from a worker is case consultation; the forum in which it is gather is the case conference.
**Say:**

- In Module 1, we discussed Stephen Covey’s time management model.
- Case consultation is of high importance.
- Effective case consultation occurs when matters are not urgent...when there is no crisis at hand.
- This one-on-one conversation usually involves the caseworker describing the major issues surrounding a case or situation.
- It should occur on an on-going basis. It may also occur when problems or needs surface.

**Say:**

- It provides the supervisor with an opportunity to assess the workers actions, responses, and decisions in providing services to clients.
- It provides an opportunity for the worker and supervisor to formulate and reevaluate on-going goals.
- It provides an opportunity for supervisors to assess worker strengths and needs for improvements.
- It provides a platform for the worker and supervisor to discuss and mutually agree upon improvement strategies.
- It also provides an opportunity for the family-centered supervisor to move seamlessly through the roles of advisor, collaborator, evaluator, learner, teacher, coach, and/or mentor.

**Key Points:**

Through case consultation you assure the permanency, safety, and well-being of children in your unit. To accomplish this your focus and that of your workers should be on:

- Rapport and/or the helping relationship between the worker and the client family;
- The workers’ ability to engage the client;
- Risk and safety assessment and the associated decisions or plans;
- Comprehensive family assessment and development of the case plan;
- Essential casework activities to assist the family in changing;
- Client progress review and evaluation;
- Casework decision-making skills.

**Building Self Awareness (120 minutes)**

**Say:**

Through case consultation you build a worker’s self awareness. Focusing on a worker’s self awareness is important for a number of reasons:

- Since a worker’s personality and behaviors are significant determinants of what happens in the worker-client interaction, the worker’s feeling, attitudes, and behavior need to be examined.
- Helping a worker develop a greater sense of self-awareness helps them act in a more deliberate, disciplined, and consciously directed manner when helping a client.

**Say:**

- Self awareness helps the worker deal more effectively with issues that can affect him or her personally. Workers are often confronted with emotionally charged issues and circumstances that they might not be able to handle easily. A worker’s values and beliefs may affect the way he or she reacts to, interacts with, and/or feels about a client. Workers may experience stress and resistance from clients who express hostility or seem unmotivated to change or who will not accept case plans that haven’t been mutually agreed upon or discussed prior to being presented for signing.
- Lastly, due to unresolved personal issues, internal conflicts, a client’s circumstance or behavior may strike a nerve with some workers.

**Say:**

With this in mind let’s look at how we can build self awareness.

- When developing staff self-awareness,
the focus must stay on the worker’s work and professional growth rather than his/her worth and personal growth. The following are areas of focus for building self-awareness

### Building Self-Awareness

- Counter transference
- Personal qualities or characteristics
- Diversity Issues
- Boundaries

### Ask:

- When you heard about unresolved issues and internal conflicts in workers, what type of case comes to mind first? Why?

### Answer:

- Sexual abuse cases; Domestic violence; Substance abuse and use cases. Because sexual abuse, domestic violence and substance abuse don’t just happen to other people some workers may have experienced one or more in their family of origin. Transference or counter-transference can take place without the awareness of the worker.

### Note:

Supervisors should be concerned about building self-awareness in staff as it relates to professional activities.

- What can you as a supervisor do to help the worker with unresolved issues and internal conflicts? **Answer:** Build self awareness.

### Learner Guide:

1. **Counter-transference.** Like all people supervisors and workers have history, issues that are not fully resolved, and unconscious desires or motivations. Traumatic experience and other personal issues can be triggered through a transfer of feelings brought on by

### See Appendix E Building Self Awareness for an explanation of the four terms to the left.
Key Point:

**Counter-transference** narrowly defined is a reaction to issues that have been generated by one’s own internal conflict or problems. These “issues” may involve others such as a worker, client, or both. These “issues” interfere with one’s ability to maintain neutrality - not taking sides or acting on opinions. A broader definition of counter-transference means any emotional reaction on one’s part to issues regardless of any personal conflict which may or may not be invoked. Counter-transference can be a potential landmine if one is not aware of or in touch with one’s own “hot buttons” as it is the conscious and unconscious feelings, associations, thoughts, fantasies, and preconceived notions connected with a particular person.

Say:

**Counter-transference** though a therapeutic phenomenon common to psychotherapy, also occurs in social work. Counter-transference is the opposite of transference. In **transference** a person in therapy begins to transfer feelings (whether positive or negative) to the therapist. In counter-transference the therapist begins to transfer his own unconscious feelings to the client. How does this apply to social work? Have you found that some workers have preconceived ideas or reactions when working with a particular client/family? Do preconceived ideas or reactions come to your mind when working with a particular worker or a certain type of case? If your worker is like other workers, and if you are like other supervisors, they do. These preconceived notions may be due to counter-transference.

A simpler definition of counter-transference comes from Otto Fenichel who defines it as “misunderstanding the present in terms of the past.”

Donald N. Bersoff, Ethical Conflicts in Psychology, Webcc@homestudycr edit.com

Say:

Workers and supervisors bring to the job preconceived notions learned from their family of origin, peers and from society in general. Some of these notions are
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<th>Say:</th>
<th>based on facts others are based on our values, beliefs, biases, prejudices, likes and dislikes.</th>
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It is important that we ensure that we do not develop "blocking" behavior such as hostility, silence or preventing unwanted ideals or feelings from surfacing because we are unable to deal with them because of unresolved issues from out past.

- Examples
  Not believing a client when she says she is not using her money to purchase drugs or alcohol and that she has given up drinking because one of your parents was an alcoholic and continually lied about these things.
  Failing to discuss issues regarding separation and loss with a child or with a family because as a child you experienced loss when you were sent to live with a relative.

| Key Point: | Failing to hold case consultations with a particular worker and/or feeling discomfort when you do, because he or she reminds you of a person from your past, triggering both positive and negative feelings. |

Triple checking the work of some workers because in the past you’ve worked with people of the same culture, race, religion, and ethnicity who took short cuts and those workers could not be trusted to do the right thing.

- Allowing certain workers more autonomy because they belong to a group that by virtue of their race, religion, ethnicity, and your past experience, are more "trustworthy."

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<tr>
<th>Ask:</th>
<th>What can be done? Dealing with counter-transference requires reflection, discussion, and practice.</th>
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<tr>
<th>Say:</th>
<th>Supervisor to worker - The supervisory technique of coaching is often effective in dealing with issues of counter-transference.</th>
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</table>

Caution: Sups should never become therapist for workers. They should however, suggest counseling or employee assistance programs, if
Supervisory Practices in Child Welfare  
Module 3: Casework Management  

**Instructor’s Guide**

<table>
<thead>
<tr>
<th>Supervisor – Supervisors need to be aware of the impact of their own personal experience and how it may affect their interactions with the workers they supervise and the clients they service.</th>
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- **Ask yourself** what response is triggered in you when working with a sexually abused child or a battered woman? Is a sense of loss issue triggered? A sense of pain? A sense of powerlessness? Is there an issue of abandonment? What other unresolved issues from childhood still remain?

- Do you react positively or negatively towards workers who differ in age, color, race, gender, weight, and values system, etc. from you, without understanding why? Could your response be based on childhood biases and belief systems? To avoid losing objectivity it is essential that supervisors continually address the issue of counter-transference.

**Key points:**

<table>
<thead>
<tr>
<th>There are three steps that supervisors can utilize when dealing with their own issues of counter-transference:</th>
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<tr>
<td>Identify unresolved past issues,</td>
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<tr>
<td>Determine what the transferred issues are,</td>
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<tr>
<td>Identify feelings that are being induced or created within.</td>
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In doing so you can use your feelings, associations, thoughts, and fantasies in a positive manner, and avoid being drained or suffering from burn-out.

**Say:**

- Counter-transference can be put to positive use by acknowledging the anger aroused by the unresolved past issues.
- To prevent worker burn-out vary the type of cases you assign to workers. Workers who continually carry the same kind of cases may suffer from burn-out quicker than those workers who have an array of cases.

**Ask:**

2. **Personal Qualities or Characteristics**  
Ask the group the question to the left.
### Learner Guide:

What are some of the personal qualities and characteristics a good social worker should possess?

### PowerPoint Slide:

#### Social workers should possess and utilize...
- The core conditions of empathy, genuineness and respect
- Good communication and listening skills
- Good decision-making skills
- Good assessment skills

#### Social workers should be...
- Trustworthy
- Honest
- Knowledgeable
- Patient with and attentive to families
- Culturally aware
- Articulate and observant
- A change agent

#### Social Workers
- Use authority appropriately
- Embrace agency values and beliefs
- Instill trust
- Demonstrate competency

### Possible answers should include but are not limited to the following:

Social workers should:
- possess and utilize the core conditions of empathy, genuineness and respect
- possess and utilize good communication and listening skills
- be trustworthy and honest
- be knowledgeable

- be patient with and attentive to families
- possess good communication skills
- be culturally aware
- possess the ability to separate relevant information from fluff
- be articulate and observant
• possess and utilize good decision-making skills
• use authority appropriately
• be a change agent
• possess and utilize good assessment skills
• embrace agency values and beliefs

**Ask:**

Based on our discussion and your experience, what top three qualities/skills do supervisors need?

**Learner Guide:**

Hopefully someone will identify communication, decision making and cultural awareness. If they don’t please do.

**PowerPoint Slide:**

Qualities/skills needed by Supervisors

- Communication Skills
- Ability to Make Decisions
- Cultural Awareness

**Say:**

- **Communication skills** are important for establishing and maintaining a relationship with a client. Effective oral and written skills are among the most critical elements of a good casework relationship between worker, client; worker and supervisor.

- **Ability to Make Decisions.** Supervisors are responsible for day-to-day decisions such as:
  - identifying staff that possess appropriate knowledge, experience and skills necessary to make routine decisions without supervisory oversight;
  - What should be delegated and to whom;
  - Who to accompany to the field and how

**Key Points:**

Communication skills

Highlight: communication, cultural awareness, and decision-making skills as three important qualities a supervisor needs.

If students should raise the issues of cultural competency, tell them we will discuss it as a separate topic later.

Decision-making skills are important. More time has been allocated for this topic later in the program.
### Key Points:

Some decisions require supervisors and workers to apply legal and policy standards when selecting alternatives. Below is a partial list:

- Is this a case we should serve?
- Is change necessary?
- How should the family be served?

- When do we end involvement?
- Supervisors and workers must make distinctions between what is policy and what is practice when making decisions.

### Key Points:

**Cultural awareness.** For supervisors and workers to work effectively with others and to promote change, there should be an understanding that culture is not limited to race, but includes religion, ethnicity, gender, disability, marital status, economic status, sex orientation, etc.

- Experience has shown that service provision is more effective when service providers are culturally aware.
- Cultural awareness does not happen overnight but it can be achieved.
- Supervisors need to make cultural awareness a priority.

### Say:

We have looked at what we feel are some of the qualities and characteristics social workers should possess. Let’s see what a professional organization such as The National Association of Social Work (NASW) says on the subject.

- The Code of Ethics authored by the National Association of Social Work has

<table>
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<th>Code of Ethics, NASW</th>
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<tr>
<td><a href="http://www.socialworkers.org">www.socialworkers.org</a></td>
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</table>
established how social workers should behave professionally.

**Say:**
- The core values of the profession of social work according to NASW are:
  - Service
  - Social Justice
  - Dignity and Worth of the Person
  - Importance of Human Relationships
    - Integrity
    - Competence

Ask for comments. Do they agree with this list?

**Learner Guide:**
- NASW Code of Ethics offers a set of values, principles, and standards to guide decision making and conduct when ethical issues arise. Though they do not provide a set of rules that prescribe how social workers should act in all situations they provide a guideline for professional aspiration and by which actions can be judged.

Trainers "NASW’s Code of Ethics", Appendix _____ of your instructional guide.
Refer participants to “NASW Code of Ethics p.____ of their Learner Guide.

**Say:**
NASW’s Ethical Principles are:
- **Value:** Service
  - **Ethical Principle:** Social workers’ primary goal is to help people in need and to address social problems.

If we do not provide services either directly or indirectly, what is the extent of our involvement with the family?

**Say:**
- **Value:** Social justice
  - **Ethical Principle:** Social workers challenge social injustice.

If social workers do not challenge injustice for the client families we serve, who will? What are some of the social injustices your workers champion on behalf of their client families?

**Say:**
- **Value:** Dignity and Worth of the Person
  - **Ethical Principle:** Social workers respect the inherent dignity and worth of the person.

Do you know anyone who does not want to be or does not deserve to be treated with dignity

Highlight: Integrity, Dignity and worth of the person, and competence.
and respect?

- **Value**: Importance of Human Relationships.
- **Ethical Principle**: Social workers recognize the central importance of human relationships.

Abraham Maslow described in his Hierarchy of needs the human desire to affiliate. Why do you think people join gangs, sororities, fraternities, self-help groups, and why our client families seem to know each other?

**Say:**

- **Value**: Integrity
- **Ethical Principle**: Social workers behave in a trustworthy manner.

Without trust how can we motivate our client families to embrace change?

- **Value**: Competence
- **Ethical Principle**: Social workers practice within their areas of competence and develop and enhance their professional expertise.

If you or your worker is failing to acknowledge the impact and value of competence how can you reach these ethical principles?

**Ask:**

- Why is integrity important?
- Why is recognizing dignity and worth important?
- Why is competence important?
- How does a social worker show that he/she is competent?

**Solicit answer from participants. Add value.**

**Say:**

3. **Diversity Issues**

When we think of diversity we often think of race, religion, economics status, or gender. But as we learned in Module 2 diversity is much, much more. Diversity issues run the gambit from race to culture and everything in between. For supervisor understanding diversity is extremely
important. They need to understand that as society becomes more diverse, so does the workplace. Supervisors must be aware of their interactions with a diverse workforce.

### Diversity Issues

Diversity issues may exist between:
- Workers and clients
- Agency and the community
- Supervisor and worker
- Workers and co-workers

They must be aware of diversity issues that may exist between workers and their co-workers, between the agency and the community, between the supervisor and the worker, and lastly, between the client and the worker.

Supervisors and workers should consider questions similar to the ones listed below when working with client families from different cultures:

### Questions to Consider...

- How do we effectively work with clients whose life experiences differ from our own? i.e. disability
- Is the resistance we are getting the result of past experiences with “government”?
- Is the family suspicious of our offers of help due to a negative past encounter with service providers?
- Are we viewing the family’s plight through the lens of our own experience? How does the family view it?
- What are the strengths in this family?
- How can we use what we know about this family to engage them more effectively? Do we need to learn more?
- Are our intervention strategies specific to this family’s culture?
<table>
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<th>with service providers?</th>
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<td>Are we viewing this family’s plight through the lens of our own experience?</td>
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<td>How can we use what we know about this family’s culture to engage them more effectively?</td>
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<tr>
<td>Are our intervention strategies specific to this family’s culture?</td>
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<tr>
<td>Do we know all we need to know about this family’s culture, or do we need to learn more?</td>
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<th>Learner Guide:</th>
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<tr>
<td>Working with families that are different from us in beliefs, values, and culture represent many challenges you as supervisor will face as you work in a more diverse world.</td>
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<tr>
<td>To effectively work with our clients, our workers, our co-workers, and our community partners we have to understand, respect and value them as human beings.</td>
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<td>Just as it is difficult for a caseworker to avoid communicating values to a client it is equally difficult for the supervisor. A supervisor’s tone and nonverbal behavior give workers indicators of the supervisor’s perspective or feelings. Supervisors need to assess whether their values are interfering with their objectivity.</td>
</tr>
<tr>
<td>Therefore supervisors should:</td>
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<tr>
<td>- Recognize the source of discomfort with differences such as race, ethnicity, culture, socioeconomic status, religion, gender, disabilities, sexual orientation</td>
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<tr>
<td>- Demonstrate respect for the needs of diverse populations</td>
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<tr>
<td>- Select intervention strategies that are appropriate for specific cultures</td>
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</table>
### Considerations

- Recognize the source of discomfort with differences such as race, ethnicity, culture, socioeconomic status, religion, gender, and sexual orientation;
- Demonstrate respect for the needs of diverse populations;
- Select intervention strategies that are appropriate for specific cultures.

### Key Points:

- Be aware of stereotypes and preconceived notions that you may hold.
- Be aware of possible differences you make when investigating, assessing, or servicing children and families of different cultures.
- Be aware of how one’s own racial and cultural heritage affects one’s perception of assessment, planning, and intervention with clients/workers.
- Be mindful of stereotypes and preconceived notions that they may hold.
- Be able to demonstrate respect for the needs of diverse populations in selecting intervention strategies that are appropriate for specific cultures.

### It should be remembered that:

- Many families of abused or neglected children distrust the social service system.

- Respect is the key to establishing a trusting and effective helping relationship.
- Workers who feel that they are not respected will not be able to show respect.
- In order to effectively work with our clients, co-workers, and our community partners we have to understand, respect, and value them as human beings.
**Key Points:**

- An effective helping relationship will not be established unless respect is communicated by the worker to the client. A worker may not be able to show respect, if he/she feels disrespected by the supervisor or feels that the supervisor does not respect the family.

- Respect also means using culturally competent practice, which entails:

**PowerPoint Slide**

- Cultural awareness. Understanding and identifying the critical cultural values important to children, the family and the caseworker.
- Knowledge acquisition. Understanding how cultural values function as strengths in children and their families.

**Learner Guide:**

- Cultural awareness. Understanding and identifying the critical cultural values important to children, the family and the caseworker.
- Knowledge acquisition. Understanding how cultural values function as strengths in children and their families.

**PowerPoint Slide**

- Skill development. Matching services that support the identified cultural values and then incorporating them into appropriate interventions.
- Inductive learning. Seeking solutions that consider indigenous interventions as well as match cultural values to Western interventions.

Supervisors should encourage cultural sensitivity by encouraging workers to:
### Encourage Cultural Sensitivity

- Consider the family’s cultural identity and perception of the dominant culture;
- Inquire about the family’s experience with mainstream institutions, including CPS and other service providers in their community;
- Assure clarity regarding language and meaning in verbal and nonverbal communication;

### Key Points:

- Understand the family’s cultural values, principles of child development, child care norms, and parenting strategies;
- Gain clarity regarding the family’s perception of the responsibilities of adults and children in the extended family and community network;
- Determine the family’s perception of the impact of child abuse and neglect;
- Assess each risk factor with consideration of characteristics of the cultural or ethnic group.

- Consider the child’s and family’s perception of their response to acute and chronic stressors;
- Explain why a culturally accepted behavior in the family’s homeland may be illegal here.

### Directions for using the scenario below:
Exercise Building Self-Awareness

- Read the scenario in your Learner’s Guide
- Determine how you would guide your worker based solely on the information provided in the scenario
- Record your strategies in the space provided in your book.

PowerPoint Slide:

1. Solicit responses from the large group using the scenario below.

Learner Guide:

For example how would you guide your worker based on this scenario:

The local daycare center called to report possible child abuse. Staff reported that a 4 year old Vietnamese child has reddish/purple, linear bruising on her chest and upper back. Daycare staff said the child had been out for the past 2 days with a cold. When asked about the marks, child said, “Mommy did it.” The daycare center’s reaction was one of disgust and disbelief that a parent could possibly do such a thing to her young child.

Trainer’s note: The marks on the child were the result of the Vietnamese folk healing practice of “coining”. It is conducted to alleviate congestion and fever. Skin on the chest and back is massaged with oil and then rubbed or stroked with the edge of a coin. The rubbing creates warmth to loosen up the congestion and can also create linear bruises.

Learner Guide:

A supervisor who does not understand his/her own culture or the cultural context in which his/her workers live, may find it difficult to work together effectively.

PowerPoint Slide

4. Boundaries
According to the American Heritage Dictionary of the English Language, boundary is defined as something that indicates a border or limit. In
**Learner Guide:**

social work, boundaries are flexible and constantly shifting.

In today’s discussion of boundaries we are going to look across all spectrums – personal boundaries, professional boundaries, and casework boundaries.

<table>
<thead>
<tr>
<th>Say:</th>
<th>Setting boundaries seems simplistic and in and of itself, it is. The struggle is where to draw the boundary line. Since most of us work in the community where we reside, there is a strong possibility that our personal and professional lives may collide with that of our workers and/or client families. The temptation to behave in ways that extend the worker/client or supervisor/client relationship and create multiple roles-known as dual relationship-is around many corners.</th>
<th>Dual relationship defined.</th>
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<tr>
<td>Say:</td>
<td>Dual relationships can be said to occur any time a social worker has a relationship with a client other than the role of the professional. These might include social, business, and other kinds of professional relationships. Among the many actions that may be said to cross the boundary into a dual relationships or set the stage for boundary encroachments are: accepting a gift from a client, benefiting financially through association with a client, and/or socializing with the client-which might involve anything from having a cup of coffee to becoming sexually involved.</td>
<td>Dual relationships</td>
</tr>
<tr>
<td>Say:</td>
<td>Some boundary crossings may be unavoidable, inevitable, or even acceptable. A client may worship at the same church or synagogue and may have a social relationship in that setting that may be very constructive. According to Frederic Reamer, PhD, professor in graduate program of the School of Social Work, Rhode Island College this is not inherently unethical but may require careful management and boundary</td>
<td>Boundary crossing</td>
</tr>
</tbody>
</table>
Other examples include bumping into a client at a market or at a 12 step self help program.

**Ask:** So, does this definition apply to non-professional relationships between supervisors and workers?

**Key Points:**

- Some boundaries are very clear: there is to be no sexual contact with clients, workers should not handle cases that involve family members or friends, socializing with clients is prohibited, clients are not to be asked for money in return for services, supervisors are not to be emotionally involved with their workers, the workplace is to be free of sexual harassment, are a few that are clear.

**Say:**

- Boundaries that are not as clear include those constituting dual relationships and supervisor/worker disclosure. How much is too much? In an effort to be seen as more down to earth or human, self-disclosure may be used excessively. In the worker/client relationship excessive disclosure shifts the focus of the work from the client’s problem to the worker’s. Supervisors sharing their weekend or past exploits with their supervisees can undermine their authority, ruin their relationship with the workers and alter the level of trust and/or respect that the supervisee has for the supervisor.

- Another example of a blurring boundary is when the supervisor discusses his/her workers with other supervisors. Discussions with other supervisors regarding workers should be limited to a “need to know basis” and should in most instances be work related. Issues that involve worker or other staff safety should be discussed with the LO Manager or his/her designee. A worker’s personal problems/issues should not be shared without the worker’s consent.

- Workers and/or supervisors becoming
emotionally involved with clients in an attempt to deal with issues in their own lives.

- For example, the worker who’s just divorced or separated and is lonely. He may spend excessive amounts of time with clients because he needs to be needed or may share too much information because he needs to talk.

- Personal Benefits- accepting or bartering services with a client.
- Altruism- becoming altruistic (when we make ourselves so available because we care so much), are examples of boundary blurring in casework.

**Do:**  
Ask the group if they have other examples.  
Ask if the are questions or lingering concerns?

**Identifying Boundaries Exercise**

**PowerPoint Slide:**

**Part 1**

**Directions:**

- This is a two part exercise.
- Individually you are to answer seven questions.
- You will have 5 minutes
- After 5 minutes I will call time and you will be asked to form groups.

You may begin.

1. What type(s) of boundaries exist between you and your workers?
2. Who established the boundary lines?
3. Are the boundary lines the result of a mutual agreement between you and your worker?
4. Were they established by the agency, or the
5. Are they based on practice, or policy, or neither?
6. Are they written or unwritten?
7. What is the penalty to you or the worker if either of you exceed the established boundary?

**Do:**

**Part 2**

**Directions:**
Form groups of five (5)
As a group compile your answers to the questions in part 1
As a group answer question #8 listed below.

8. What questions should you consider when establishing boundaries?

Allow 15 minutes for small group discussion.
Allow 20 minutes for large group discussion.

**PowerPoint Slide:**

When Establishing Boundaries Consider...

- What situations warrant immediate intervention?
- What role do I play when I intervene?
- Is this a situation where "growth" can occur?
- When in my relationship with my workers do I discuss setting boundaries?
- Is this a situation that involves issues of safety or risk?
- Is my action or inaction within the guidelines of policy and/or good social work practice?

**Ask:**

What are some of the questions you should consider when establishing boundaries?

**Possible answers**

- What situations warrant immediate intervention? (Case decision-making)
- What role do I play when I intervene (advisor, coach, supporter, expert, or overseer)? (Staff decision-making)
- Is this a situation where "growth" can occur? (Staff decision-making)
- Is this a situation that involves issues of safety or risk? (Casework decision making)
- When in my relationship with my workers do I discuss setting boundaries? (Professional decision-making)
- Is this a situation that warrants personal disclosure? (Personal decision-making)
- How well do I know the
worker/client/problem?

- Will my relationship with the worker suffer if I intervene? If I do not intervene?
- Will either my job or my worker’s job be jeopardized if I act or fail to act?
- Will the client suffer?
- Is my action or inaction within the guideline of policy and/or good social work practice?

**Debrief:**

**Ask:**

What did you learn from this exercise? How can a new supervisor benefit from having received this information?

Debrief by asking the questions to the left. Charting replies is optional.

**Group Exercise:**

- Supervisors as well as workers must take full responsibility for establishing limits in a relationship with clients and/or other workers. A worker may fail to establish clear boundaries with a client thereby creating dependency rather than promoting self sufficiency. Supervisors often find themselves in the same position. As a new supervisor it is difficult to avoid jumping in quickly or offering advice when a worker is struggling with an issue or a problem. Jumping in too quickly does not afford the worker ample opportunity to grow. Intervening is much easier than allowing the worker to cultivate his/her problem-solving skills.

**Key Points:**

- The reverse of this is failing to act. Supervisors must intervene when failing to do so would be harmful to the worker, other workers, client, agency and or community. Further, supervisors have the added responsibility of evaluating and maintaining established boundaries.
- Remember boundary issues can arise when one tries to set limits on relationships.

**Say:**

- We have touched on a number of areas that may seem to some more appropriate to psychology than to social work. However, both disciplines deal with self-awareness and in most
cases are looking for some type of change. Because our role is not that of a therapist when dealing with our own issues as well as our workers issues I offer one word of caution.

**Key Points**
- Supervisors should be concerned with building self-awareness in staff only as it relates to professional activities.
- Only as the worker’s personal behavior, feelings, and attitudes create some difficulty in the performance of tasks do they become the focus of concern in supervision.

**Say:**
- Supervisors should be concerned with building self-awareness in staff only as it relates to professional activities. Only as the worker’s personal behavior, feelings, and attitudes create some difficulty in the performance of tasks do they become the focus of concern in supervision.
- If your worker’s behavior concerns you, you may refer them to EAS (Employees Advisory Service- 200 Woolverton Avenue, Trenton NJ building 20). Phone number 1-866-327-9133; Eas@dop.state.nj.us

**PowerPoint Slide:**

Individual and Group Case Consultation (20 minutes)

**PowerPoint Slide:**

Case consultation can take two forms: Individual
(one-on-one) supervision or Group (Peer, team) supervision. We will look at Individual supervision first.

**Say:**

- **Individual supervision** is the most common. An individual meeting between the supervisor and the worker is essentially a dyadic process that requires structure, consistency, and a sense of safety for the caseworker in order to be successful.
- It should be a regularly scheduled meeting (e.g., 1 hour per week at 2:00 pm on Tuesday) and conducted in a place that ensures privacy and protection from interruptions.
- A safe and accepting atmosphere must be created so that workers will meaningfully participate.

**Say:**

Individual case consultations should have a structured format for presentation and discussion of cases, they should:
- Describe briefly why the family is known to DYFS.
- Identify safety issues that need to be immediately addressed.
- Outline what the family wants, what DYFS wants, and how the differences can be reconciled.
- Determine the inner resiliency, strengths, or resources in the family that will provide the foundation for change.
- Examine the success of previous contacts with the family. What was accomplished? What still needs to be accomplished? What has the worker contributed to the results? What has the family contributed to the results?

**Say:**

- Identify the purpose of the next contact. Examine how it ties into where the family is in the intervention process.
- Assess the worker's relationship with each family member. Define what each family member needs to assure participation in the change process and achieve the necessary goals to assure greater permanence, safety and well-being for the
children.

- Describe the specific strategies that will help family members accomplish their goals.
- Discuss the services that the family says have been the most helpful.

**Determine the level of risk within the family.**
- Identify the risks, the strengths, or protective factors within the family, and how the agency will know when the risk has been reduced.

**Say:**

- Establish what needs to happen in the family for the agency to return the child (if applicable) and what needs to happen in the family to close the case.
- Identify the signs of success for the family.

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<th><strong>Key Points</strong></th>
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<td>Case consultations should…</td>
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<tr>
<td>- Be goal driven, planned and regularly scheduled</td>
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| - Be held when participants’ energy levels are high (if possible)
| - Be free from interruptions |

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<tr>
<td>Case consultations should…</td>
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<tr>
<td>- Be open to discussions of different alternatives when problem-solving, discussing issues and concerns</td>
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<tr>
<td>- Allow for mistakes</td>
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<tr>
<td>- Encourage participants to express opinions, make suggestions, and share ideas</td>
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<td>- Support and encourage</td>
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<tr>
<th><strong>In Individual Case Consultation</strong></th>
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<tbody>
<tr>
<td>The supervisor should…</td>
</tr>
<tr>
<td>- Be open to different alternatives when problem-solving, and/or discussing issues and concerns</td>
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<tr>
<td>- Allow for mistakes</td>
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<tr>
<td>- Encourage participants to express opinions, make suggestions, and share ideas</td>
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<td>- Support and encourage</td>
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<tr>
<td>- Use as an opportunity to teach, coach, mentor, etc.</td>
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### Key Points:

The following guidelines are important. Case conferences should:

- Be goal driven, planned, and regularly scheduled.
- Be held when participants’ energy levels are high (if possible).
- Be free from interruptions.
- Be open to discussions of different alternatives when problems-solving, discussing issues and concerns.
- Allow for mistakes.
- Encourage participants to express opinions, make suggestions, and share ideas.
- Support and encourage.
- Serve as an opportunity to teach, coach, mentor, etc.

Trainees the guidelines to the left should be followed for all consultations but will not be possible for the drive-bys or drop-in consultations.

### In Individual Case Consultation

**The supervisor should**

- Focus on the casework relationship (including any direct interaction, intervention, or involvement between the caseworker and the children and families).
- Involve the supervisory practices of review, evaluation, feedback, guidance, direction and coaching.
- Maximize the use of time.
- Encourage the sharing of expertise.
- Encourage the worker to ask questions, identify needs, express concerns, and learn from you.

**Say:** Managing each step, and the time spent in each area will increase productivity resulting in better decisions and outcomes for families.

**Say:** Group supervision brings the unit together, and is economical in terms of the supervisor's time.
<table>
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<tr>
<th>Ask:</th>
<th>What do you think are some of the advantages, disadvantages of using group (Peer, team) supervision? Possible answers</th>
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<td>Advantages:</td>
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<td>- Unit members learn about each other and the differences in their thought processes and work habits;</td>
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<td></td>
<td>- Unit members learn of the availability of a broader array of methods/resources for handling cases;</td>
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<td>- It helps free time for the supervisor;</td>
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<td></td>
<td>- Unit members become familiar with cases in the unit, allowing them to cover for each other if the need should arise;</td>
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<td>- Supervisor can observe staff interactions;</td>
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<td></td>
<td>- Unit members can work collectively to formulate solutions to difficult negotiable case matters;</td>
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<td>- Unit members develop a sense of teamwork and team ownership;</td>
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<td></td>
<td>- Workers rely more on each other for solutions.</td>
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<tr>
<td></td>
<td>Disadvantages:</td>
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<tr>
<td></td>
<td>- Solutions come from the group not the supervisor,</td>
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<td></td>
<td>- Unit members may rely less on supervisors for solutions,</td>
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<td></td>
<td>- Unit members may began to rely too heavily on team management rather than individual management of cases,</td>
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<tr>
<td></td>
<td>- Work schedules may poise scheduling issues or problems for the team,</td>
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<tr>
<td></td>
<td>- Dominant unit member may exert too much influence on team decisions.</td>
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<tr>
<td></td>
<td>Supervisors require training and experience in group processes to be effective in facilitating these sessions.</td>
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</tbody>
</table>

Supervisors who have not become family-centered supervisors may feel the points to the left.
### Say:
For group supervision to be effective supervisors must:

- Do more than focus on the content of cases and issues raised by individual caseworkers.
- Create a safe and accepting atmosphere so that caseworkers will meaningfully participate in the group processes.
- Create a structure for presentation and discussion of cases.

Case consultations usually occur during a case conference. Our next section deals with the structure of a case conference.

### The Structure of the Case Conference (160 minutes)

#### PowerPoint Slide:
In this section our discussion will center on the structure (format) of a case conference. We have designed a model that we feel reflects the steps that if taken will be productive for you and your staff. Using a model should be helpful in keeping you and your workers focused. A structure model should serve as a road map to move you seamlessly from preparation to evaluation. As discussed earlier case consultation is the process and case conference is the format where the case consultation takes place. We will now look at that structure.

### Preparation

#### Say:
Preparation is a critical component to structuring a successful case conference.
This slide represents a model for the case conference process.

**Say:** Structurally the case conference is made up of four parts: The preparation, the beginning, the middle, and the end.

Let’s begin our discussion with the preparation

- Preparation should begin long before the conference is held. Proper planning in the preparation stage will make for a more effective conference.

**Say:** Preparation: Supervisor and Worker

Prior to the conference mutually agree upon the following:

- The purpose of each conference;
- How often you will consult, thus establishing the frequency and schedule of conferences;
- Location and time of the conference;
- The length of the conference, establish a start and end time;
What each will bring to the conference, i.e. court orders, contact sheets, etc

Say:

- What each will be responsible for during the conference (i.e. note taking, time keeping, etc.);
- Names and number of cases to be discussed;
- What will be discussed, such as
  - Statement of problem
  - Worker’s observations of the client/situation
  - A summary of the results of any intervention used or services delivered
  - Reason(s) for sharing this information at this time (if other than a regularly schedule conference)
- Decide on the format for the discussion
  - What will be discussed first
  - What the discussion should cover, etc.
  - What documentation if needed
- Other issues or concerns.

Preparation:
The Supervisor

- List information that is missing or needs clarification
- Assess the skill level of each unit member and schedule accordingly
- Prepare a strategy that will help the worker evaluate whether or not there has been movement in the case

PowerPoint Slide:
### Key Points:

**Preparation: Supervisor**
- Select a quiet environment.
- Block the time allotted to avoid interruptions.
- Solicit coverage for your staff during the conference period if needed.
- Ask switchboard to hold all but emergency calls which are to be sent to the covering supervisor.
- Familiarize yourself with the case(s) (review contacts, NJ Spirit, court order, etc.)
- List information you feel is missing or needs clarification.
- Assess the skills level of each unit member and schedule accordingly (the more experienced, capable worker should be able to consult on more cases than the novice worker and require fewer consultations).
- Prepare a strategy that will help the worker evaluate whether or not there has been movement in the case.
- Send a reminder of the date and purpose to the worker at least five days before and an agenda (if applicable) at least a day or two before the conference.
- Review other notes that are relevant to the case.
- Consult with resources you may need to provide assistance, help you prepare, etc.
**Preparation for the worker:**
- Pull cases that are to be discussed and update them.
- Collect requested information and review it.
- Review family strengths and areas in need of improvement.
- Prepare to discuss potential safety issues and concerns.
- Prepare to defend recommendations and form strategies to move cases if they are stalled.
- Identify areas that you need supervisory input or other resources.

Can you think of additional preparation tips for the worker?

**Ask if there are any questions?**

**Solicit answers to the question to the left.**

**Transition**
Now that we are properly prepared, let’s turn our attention to the remaining areas of the case conference, the beginning, the middle and the end.

**Structure of the Case Conference**

**Say:**
Let’s beginning our discussion looking at the beginning of a case conference.
**The Beginning:**

- Discuss the mutually agreed upon purpose of the consultation (establish boundaries regarding what will and will not be discussed).
- Ask the worker to shut off their cell phone if this has not been done. Be sure to shut off your cell if you have not done so!
- Encourage a dialogue.
- Help reduce worker anxiety by keeping the focus on what needs to be done rather than why it was not done.
- Create a safe environment that allows the worker to express feelings without fear.
- Avoid bombarding the worker with multiple questions. Allow the worker time to contemplate an answer before asking the next question.
- Explore worker concerns.
- Establish rapport with the worker before moving to the next phase “the middle.”
The Middle:
- The middle phase of the conference is when teaching and learning take place.
- Your role includes teaching, directing, supporting, mentoring, collaborating, etc.
- In this process you also become a learner. Through observation and discussion you gain knowledge about your worker’s personality, his/her likes and dislikes, his/her prejudices and preferences, his/her strengths and weaknesses, etc. This phase is where most of your time will be spent. During this phase your focus should be on two main areas: Case Management and Educational supervision.

1. Case Management

Say:
- In case management the focus is on what is going on in the case.
  - Once it is decided which cases to
review, supervisors need to review as much information about the case(s) as possible. This should include information on the family, the work done to date, the services in place, etc. To make an informed evaluation about the case progress and some of the challenges facing the worker.

**PowerPoint Slide:**

- Remember to ask questions such as:
  - Where were we?
  - Where are we?
  - Where are we going?
  - Are planned outcomes being achieved?
  - Are the appropriate services in place? Services should be individualized and should be used to get the family where they need to go.
  - Are there remaining issues of safety?

**Say:**

- Is the family integrally involved in the casework process?
- Does the family view the intervention and provision of service as a success?
- Are they pleased with the services they are receiving, and have these services made a difference in the quality of their lives?
- Are decisions being made in a timely manner?
- Have the goals of the case been achieved?
- Is the case moving towards closure?
- Is necessary documentation in place?
- Is the case moving smoothly through the system or are there barriers that still exist?

*Services should be the vehicle used to get us to where we are going. They should be individualized and appropriate for our goals.*
2. Educational Supervision

In educational supervision the focus is on educating the worker. A by-product of this is the education of the supervisor.

- As we discussed and learned earlier in Module people learn in different ways, and no one learning style is better than another. However, three highly recognized styles are:

Add value. Also say no one learning style is better than another.

- Visual Learners:
  - Learn primarily through the written word, pictures, charts, graphs, and/or anything you can take in visually;
  - They tend to be readers who diligently take down every word.

- Auditory Learners:
  - Learn primarily through listening;
  - They focus their ears and attention on your words, being careful to everything you say;
  - They like to talk rather than write and relish the opportunity to discuss what they've heard.
### Auditory Learners-
- Learn primarily through listening;
- They focus their ears and attention on your words, listening carefully to everything you say;
- They like to talk rather than write and relish the opportunity to discuss what they’ve heard.

### Kinesthetic Learner-
- Learn better by doing;
- They learn best by practicing what they are learning;
- They want to have their hands on the keyboard, hammer, or the test tube because they think in terms of physical action.

Supervisors can use the education process to check for cultural competency in their workers. Cultural competence is defined as an ongoing process by which individuals and systems respond respectfully and effectively to people of all cultures, languages, classes, races, sexes, ethnic backgrounds, religions, sexual orientations, abilities and other diversity factors “in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each”. (NASW 2001)

**Transition:**
Another thing you may want to learn and evaluate about your workers is their culture competence.

**Learner Guide:**
According to Terry Cross creator of the Cross Model of Cultural Competence, 1988 offers both an institutional and individual framework to help gauge progress on various diversity initiatives. It describes cultural competency as movement along a continuum that is based on the premise of respect and appreciation of individuals and cultural differences.
<table>
<thead>
<tr>
<th>The Cross Model consist of six stages:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cross Model of Cultural Competence</strong></td>
</tr>
<tr>
<td>1. Cultural Destructiveness</td>
</tr>
<tr>
<td>2. Cultural Incapacity</td>
</tr>
<tr>
<td>3. Cultural Blindness</td>
</tr>
<tr>
<td>4. Cultural Pre-Competence</td>
</tr>
<tr>
<td>5. Basic Cultural Competence</td>
</tr>
<tr>
<td>6. Advanced Cultural Competence</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Say: 1. Cultural Destructiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the most negative end of the continuum. Individuals in this phase:</td>
</tr>
<tr>
<td>a. view culture as a problem;</td>
</tr>
<tr>
<td>b. believe that if culture or population can be suppressed or destroyed, people will be better off;</td>
</tr>
<tr>
<td>c. believe that people should be more like the “mainstream” and</td>
</tr>
<tr>
<td>d. assume that one culture is superior and should eradicate “lesser” cultures.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Say: 2. Cultural Incapacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individuals in this phase:</td>
</tr>
<tr>
<td>a. lack cultural awareness and skills</td>
</tr>
<tr>
<td>b. may have been brought up in a homogeneous society, been taught to behave in certain ways, and never questioned what they are taught;</td>
</tr>
<tr>
<td>c. believe in the racial superiority of a dominant group and assume a paternalistic posture toward others; and</td>
</tr>
<tr>
<td>d. maintains stereotypes.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Say: 3. Cultural Blindness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individuals in this phase:</td>
</tr>
<tr>
<td>a. see others in terms of their own culture and claim that all people are exactly alike;</td>
</tr>
<tr>
<td>b. believe that culture makes no difference (“we are all the same”) and</td>
</tr>
<tr>
<td>c. believe that all people should be treated in the same way regardless of race, etc.</td>
</tr>
</tbody>
</table>
### 4. Cultural Pre-Competence

Individuals in this phase:
- a. recognize that there are cultural differences and start to educate themselves and others concerning these differences;
- b. realize their shortcomings in interacting within a diverse environment; but
- c. may become complacent in their efforts.

### 5. Basic Cultural Competence

Individuals in this phase:
- a. accepts, appreciate, and accommodate cultural differences;
- b. value diversity and accept and respect differences;
- c. accept the influence of their own culture in relation to other cultures;
- d. understand and manage the dynamics of difference when cultures intersect; and
- e. are willing to examine components of cross-cultural interactions (communication, problem solving, etc.)

### 6. Advanced Cultural Competence

Individual at this phase:
- a. move beyond accepting, appreciating, and accommodating cultural difference and begin actively to educate less informed individuals about cultural differences; and
- b. seeks out knowledge about diverse cultures, develop skills to interact in diverse environments, and become allies with and feel comfortable interacting with others in multicultural settings.

---

**Formal & Informal System**

Supervisors educate workers through both a formal and informal teaching system. While unit meetings, case consultations/case conferences, peer supervision and training courses comprise the formal system for educating workers. How we see and handle our role as supervisor, how we behave on and off the job, what we choose to share with staffs (disclosure), how we respond to crises and requests from other staff, how we handle stress, as well as how we interact with others serve as an informal teaching system.
**Say:** Because supervisors are viewed as role models, teachers, mentors, and coaches it serves us well to remember that workers will value their clients to the same degree that they feel they are valued by their supervisor and or their job. So to be highly effective supervisors we must be aware of the image that we project. This isn’t always easy when we first become a supervisor but it is a goal that we should strive to achieve.

Learning styles are important both to the formal and informal teaching system. Both systems offer benefits and challenges to new supervisors.

---

**PowerPoint Slide:**

**Benefits of a Formal System**

- Promotes transfer of learning
- Promotes self-awareness, self-understanding and emotional growth
- Highlights the client/worker relationship
- Highlights how the worker relates to his/her unit members, supervisor and other staff

---

**PowerPoint Slide:**

- Communicates agency and supervisory expectations of what work is to be done
- Identifies tasks and what measurements will be used to result
- Provides an opportunity for worker/supervisor feedback and discussion
- Helps clarify what has occurred, what needs to occur and by when

---

**Say:** Some benefits of using a formal system to educate workers are:

- Promotes transfer of learning- workers should be able to identify and formulate solutions for the same or similar problems when and if they occur in the future.
- Promotes self – awareness, self understanding and emotional growth – through feedback workers are made aware of the strengths and weaknesses. They are provided support and encouragement designed for them to grow professionally.

**Say:**

- Highlights the client/worker relationship as well as how the worker relates to his/her unit members, supervisor, and other staff.
- Communicates agency and supervisory expectations of what work is to be done, in
what timeframe and by whom. Identifies tasks and what measurements will be used to measure and evaluate results.

- Provides an opportunity for worker/supervisor feedback and discussion.
- Helps to clarify what has occurred, what needs to occur and by when.

**Ask:** What are some challenges to formal system?  
Possible answers
- Time consuming
- May not have time to implement
- Requires the supervisor to know what workers are receiving in training

**Say:** The **informal system** for educating workers can be a catch 22 for new supervisors. While it allows new supervisors to showcase their casework knowledge, it often highlights the new supervisor’s lack of comfort in his/her new role, level of maturity, skill level in handling conflicts between workers and self conflict with peers, negotiation skills, and the list goes on and on.

- In the informal system modeling is the key. Workers often focus in on both the good and bad habits of their supervisor.
- If a worker sees a supervisor acting inappropriately with other workers or peers, they will act inappropriately with their clients and/or other unit members.
- If they see their supervisor coming in late, berating staff, discussing their weekend, cursing or displaying other non-professional behavior they will act accordingly.
- If supervisor tell workers that they do not agree with a change management is
proposing it will be difficult for them to get their workers to embrace the change.

- For those supervisors who understand that they are role models for their staff the informal system of educating is a plus.
- For those supervisors who have not made a smooth and successful transition from doer to coach, teacher, supporter, or who have not formed new support systems with new peers or who do not understand their role model status or the impact of the informal teaching this system may appear insurmountable.

**Ask:**

What are some benefits of the informal system?

Possible answers

- Increases supervisor’s circle of influence.
- Promotes collaboration with peers.
- Identifies areas where the supervisor needs to educate herself.
- Promotes growth.
- Requires consideration before one takes action.
- Requires allegiance to management

**PowerPoint Slide:**

<table>
<thead>
<tr>
<th>Benefits of an Informal System</th>
</tr>
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<tbody>
<tr>
<td>Increases supervisor’s circle of influence</td>
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</tbody>
</table>

**Challenges of an Informal System**

- Showcases immaturity
- Missteps can be mirrored back by workers
- Viewed as “one of them” (management), not “one of us” (workers)
- What you say may come back to haunt you
- Negative behavior or actions may be adopted by workers
- Unfair behavior may impact the supervisory/worker relationship
Ask:

What are some challenges of the informal systems?

Possible answers

- Showcases immaturity.
- Missteps can be mirrored back by workers.
- Viewed as “one of them” (meaning management) not “one of us” (meaning workers).
- What you say may come back to haunt you.
- Negative behavior or actions maybe adopted by workers.
- Unsightly behavior may impact the supervisory worker relationship.

PowerPoint Slide:

- Individual Consultation/Conference
  - Setting the stage for future meetings

PowerPoint Slide:

- The End Phase
  - The focus is on...
    - The next steps
    - What has been accomplished
    - What still needs to be accomplished
    - Identifying tasks
    - Actions to take back to the family
    - Establishing timeframes

Learner Guide:

The End:
The focus of the end of the case consultation is to summarizing the content.

- At the end of the conference workers should be aware of “the next step”.
- The course of action to take back to the family.
- There should be clarity regarding what has been accomplished in the case. What still needs to be accomplished. Timeframes should be established and tasks should be
identified.

- For the supervisor the end of the consultation/conference should be a time of reflection.

**Do:**

- Ask yourself did I:
- Use a standardized process and criteria during the consultation?
- Focus attention on the decision-making process of the worker – what guides their thinking?

**Do:**

- Seek to reduce the influence of irrelevant information?
- Keep the focus on the facts as they pertain to safety, risk, permanency and well-being?
- Discern what I did not know?
- Balance contradictory information and seek rationale?
- Consider alternative explanations?
- Promote a transfer of learning so that solutions to similar problems can be determined without supervisory input when applicable?
- Did the worker gain some degree of self-reliance when seeking solutions to common problems or problems that do not involve or require supervisory input or safety issues?

**Do:**

- Promote self-awareness, self-understanding and emotional growth?
- Establish a relationship with my worker and model behaviors that I want the worker to use when interacting with families?
- Focus on how the worker does the work and his/her relationship with the client family?

---

**PowerPoint Slide:**

*Feedback should be…*
- Specific
- Prompt as possible
- Descriptive rather than judgmental
- Focus on behavior rather than the person
- Open to discussion, agreement
- A sharing of ideas rather than the giving of advice
- Option exploration

---

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In the supportive role the supervisor listens and provides honest feedback.

Feedback should be:
- Specific
- Prompt as possible
- Descriptive rather than judgmental
- Focus on behavior rather than the person
- Open to discussion, agreement
- A sharing of ideas rather than the giving of advice
- Option exploration

**Summary of key points:**
- Case consultation via the case conference is a mandated process for supervisors.
- It should be regularly scheduled and planned.
- The case conference consists of a beginning, middle, and end.
- All parties must participate in the preparation of the meeting.
- Case management and educational supervision are two main focus of a case consultation/case conference.
- It has mutually agreed upon objectives.
- It helps determine where we have been, where we want to go, and how we will get there.
- Both supervisor and worker must prepare for the consultation.
- Through dialogue and questions, supervisors guide workers, challenge actions and assumptions and stimulate thought.

Ask: Are there any questions before we move to our application exercise?

Answer all questions, offer clarification.
### Application Exercise

#### Part 1
- In your group, select an eight (8) digit number where no number is higher than three (3) nor lower than one (1).
- Record the number in the space provided in your Learner’s Guide.

#### Case Consultation/Case Conference Application Exercise (70 minutes)

Now let’s apply what you have learned. This is a multi-part exercise. In Part 1 you create a worker. In Part 2 you plan a case consultation with a worker using information from our discussion. In Part 3 using a role play format you implement your plan.

### Part 1
**Directions:**
- Form groups of 3-4
- As a group, create an eight (8) digit number where none of the digits are higher than the number three (3); Zeros are not allowed!
- Write your number down on scrap paper large enough for all to see.
- Transfer the numbers to the boxes in the Learner Guide.

- As a group using our discussions plan a case consultation/case conference with a worker.
- If your group would like a 9th digit can be added allowing for an additional work “trait”.

### Part 2:
- Review the Case Consultation Grid
- Seven (7) boxes list worker traits and the 8th box a case name
- Each number selected represents a different trait
- Record the worker’s traits in the space provided

Turn to Case Consultation Grid, p._____ of your Learner Guide.

**Participant’s task**

Instruct the group that a 9th digit can be added for an additional trait.

Trainers provide the following as an example of an 8 digit number 21332123 where none of the digits are higher than the number 3.

Participants plan a conference, and then they implement it using a role play format.
### Learner Guide:

- Use page ___ to record the steps you will take to plan a case consultation.
- Determine how you will engage, teach, coach, support the worker you designed earlier.
- Determine what strategy you will employ based on the level of worker experience.
- Record the worker’s traits and case in the space provided.

### Trainer’s task: Explain the grid

- The case consultation grid consists of eight (8) horizontal boxes (letters A-H).
  - Box A is Experience
  - Under box one there are 3 vertical boxes denoting levels of experience
    - Experience worker 3 years +
    - New worker less than a year
    - ROTJ (retired on the job)

### Type of Learner

- Box B
  - Visual
  - Auditory
  - Kinesthetic

### Communication Skills

- Box C
  - Shares too much information making it hard to discern what is relevant and what is not.
  - Shares too little information and leaves out important facts and observations.
  - Shares the right amount of relevant information.

### Self-Awareness

- Box D
  - Has no awareness of the impact of his/her behavior on others.
  - Regularly examines his/her own behavior to understand how others may perceive it.
  - Is somewhat aware of how his/her behavior affects others, but doesn’t care.

### Boundaries

- Box E
  - Treats you like a peer. Gets too informal with families.
<table>
<thead>
<tr>
<th>Learner Guide:</th>
<th>Key Point:</th>
<th>PowerPoint Slide:</th>
</tr>
</thead>
</table>
| ▪ Is unsure how to relate to you. Holds back. Is cold and impersonal with families. ▪ Frequently disrespects your authority as a supervisor. Disregards feelings of families. | The numbers you created represents different worker traits. Review the traits of the worker created. Plan a case consultation/case conference with this worker using the information from our discussion. | Part 3:  
- Plan a case consultation/case conference. Record your steps  
- Determine how you will engage, teach, coach and support the worker  
- Determine what strategy you will employ based on the level of worker experience |
| Relationship with Unit members | | Case consultation grid |
| Box F Relationship with other unit members ▪ Never helps others. Works for self. ▪ Helps others but only the ones that he/she personally likes. ▪ Helps others as a means of avoiding his/her own work. Own work suffers. | | |
| Relationship with Unit members | | |
| Box G Cultural Competency ▪ Culturally blind ▪ Culturally aware ▪ Culturally competent | | |
| Cultural Competency | | |
| Box H Case Name ▪ Randolph ▪ Sandoval ▪ Kelly | | |
| Case Name | | |
| Learner Guide: | | |
| Select a group member to play each of the following roles: ▪ Supervisor – consults with worker ▪ Worker – consults with supervisor | | |
| Learner Guide: | | |

### Learner Guide:

**Case Scenarios:**

**Explain**
- There are three case scenarios: The Randolph family, Sandoval family and the Kelly family
  - Do not focus on whether or not this case is complete;
  - Do not add additional information;
- Cases are props and are not the main focus of this exercise.
- The main focus of the exercise is for you to apply the concepts we’ve discussed and learned.

### Say:

**Tasks:** Design a case consultation/conference

- Plan a case consultation/case conference
- List what you will do (your steps) from Preparation to the End.
- Determine how you will engage, teach, coach, support the worker you designed earlier.
- Determine what strategy you will employ based on the level of experience of the worker.

### Debrief:

- Were you able to follow your plan? Why, or why not?
- How comfortable were you in designing and implementing a case consultation/case conference?
- How helpful will this process be to you back on the job?
- How many of you began in the middle talking about the case?

### Transition:

We have planned and executed a case consultation/case conference. Some case consultations are better than others. Even consultations that appear to offer little information can be useful. How? We will see in our next exercise the “Supervisory Case Conference”.

---

**Observers:** utilizing an observation sheet evaluates the consultation

**Coach:** provides assistance to the supervisor if needed.

A coach is utilized when there are four (4) members in a group.

**Trainers:** Rotate the case scenarios to allow each participant to conduct a consultation.
Our next activity is a video of a Supervisory Case conference.

**Video: Supervisory Case Conference (45 minutes) Optional**

We are about to see a video of a supervisory conference. The video has a number of drawbacks which will become apparent when you see it. I ask that you not focus on the flaws but look beyond them.

The video is of a supervisory consultation with a worker who has returned from the home of a new client. The video is divided into three main sections and is around 15 minutes in duration.

**Case overview (Do not provided this information before processing the activity)!**

The case was referred by the local hospital who alleged that drugs were being used in the home. Because of this there was concern as to whether or not the mother would be able to care for the infant.

Although the hospital mentioned on one child there were three children in the home when the worker arrived, an infant, a four year old, and an 8 year old.

There was also a "menacing" looking man in the apartment when the worker arrived.

We will discuss each section.

If you choose to use it explain the following.

Explain that this is a dated video that does not depict a “good” supervisory conference. Though the information is not ideal it still offers valuable learning if they can look beyond the obvious drawbacks such as age of video, clothing, etc.

Show each section, then discuss. The Supervisory Case Conference Observation sheet will help structure our discussion.

Turn to Case Consultation Video Observation Sheet, p.____ of your Learner Guide. At the end of the video answer the questions listed there.

**Act I: Opening**

Debrief:
Ask:
What did the supervisor learn about this case?
Likely answers:
Nothing, a few facts, mostly worker opinions (“messy”, terrible”, “creepy man”) flowing out of upset emotions.

Play video Stop it at the end of each of the 3 “Acts.”
<table>
<thead>
<tr>
<th>Ask:</th>
<th>Act II: Getting the Facts</th>
<th>Show Act 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>What did the supervisor learn about the worker?</td>
<td>What techniques did the supervisor use to draw out the facts of the case?</td>
<td>In act 2 the focus is on getting the facts.</td>
</tr>
<tr>
<td>What do you feel the supervisor learned about herself?</td>
<td>Answer:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Somewhat Guided, Open Question</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“How did the mo. respond when you said that?”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Clarification and guiding question)s</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Note: Remind participants that we discussed techniques in communicating for results.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>What did the supervisor do well?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Answer:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Getting worker to move from general opinions to factual observations (i.e. asking the worker, “How do you know she was an addict”?</td>
<td></td>
</tr>
<tr>
<td>Say:</td>
<td>What needed improvement?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Did the supervisor display listening skills?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Where were they in the model?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Answer:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“Did you ask her about that?” Clarification for important details and slightly guiding</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“What did you say then?” – Asked at a critical point of assessment (i.e., re: the causative factor of neglect allegation)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>“Do we know who he (the man) is?” “What about the 8 year old?”</td>
<td></td>
</tr>
<tr>
<td>Key Points:</td>
<td>We want the workers to paint a picture that is relevant and to-the-point. This is all we have to help guide a solid decision for the case.</td>
<td></td>
</tr>
</tbody>
</table>
**Do:**

Now direct the group to take notes on how the Supervisor guides the worker to move from describing the facts to getting at critical issues and next steps.

---

### Act 3: Identifying the Critical Issues

**Ask:**

What are the critical issues of this case?

**Possible Answers:**

- Safety of the children (ages – an infant, toddler and 8 yr. old)
- Worker’s perception of her safety
- Parentage of the children
- Pending medical needs of the child(ren)
- Parent child relationship
- Whether or not drugs are present

What critical questions did the supervisor ask or should have asked?

- “Did you address your concerns about the baby with the mother?”
- “What did the mother say regarding her care of the baby?”
- “What type of care are the other children receiving?”
- “Are they at risk?”
- Did you observe the diaper rash?
- What did it look like?
- Does it require medical attention?
- “Did mother express any concerns or request services?”
- “What are the positives in this home?”
- “What about the mother/child interaction?”
  - Are the children afraid of mother?

---

### Key Points:

“4 year old in diapers – is this unusual or a cultural bias?”

---

**Show:** Act 3

---

**How let’s plan our next step with the worker.**

What are some of the questions the supervisor should ask when planning the next step?

**Possible answers:**

- “How did you leave thing with the mother?”
- Do you know the identity of the man who was in the home? What is his relationship with the family? Mother?
- Why were you afraid?

---

**To know where supervisor & worker need to go next. To possibly teach worker how to conclude an interview.**

---

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### What are the primary problems in this family?"

What are your concerns

### Of the problems that we have identified which one is the most critical for us to deal with?

“What are the most serious problems affecting the care of and risk to the children?

### Determine if there is a crack problem.

Take the child to the doctor to determine if there is a diaper rash problem. If there is a problem, how serious is it?

Plan worker safety with the worker.

Interview the 8 year old and determine his relationship with the family.

Determine the mother’s relationship with her children.

### Tell the group that the video stops before the supervisor plans the actual next steps with the worker.

#### Key Points:

Debrief this conference

What did you learn from this conference?

**Possible answers**

- Conferences should be planned.
- Workers do not always share all that they know.
- Knowing your worker strengths and weaknesses can help you evaluate whether the worker is omitting information.

Where were they in the model?

What is the overall point of the exercise?

**Possible answer**

- What appears to be little information can be quite informative if the supervisor takes a moment to analyze it.
- Varying questioning techniques can be productive.
- Supervisors must be to able to draw out
relevant information.
- Supervisors must be able to engage, teach, coach, and support workers.

What did the supervisor do well?
What needs improvement?

Ask: Are there any questions before we move to our application exercise?

Reflective Case Consultation – The Team Approach (15 min)

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<tr>
<td>Reflective Case Consultation The Team Approach</td>
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- Team consultation has a number of benefits.
- Team members learn each others’ thinking and working styles
- Team members increase their resources and broaden the methods they use with families;
- Team members learn about each other’s caseloads;
- Teamwork is developed among unit members.
  - It is often used to enhance the one-on-one consultation by offering a wider variety of teaching-learning experiences.

Contributions and responses from team members should be relevant to the focus of what is discussed and contribute to more effective professional practice.

Learner Guide: In the workbook is a model (courtesy of L3P Associates) on conducting a team consultation. This model was developed in concert with Insoo Kim Berg.
- Prior to the actual consultation case

Trainers can read and expand on the benefits of team consultation.

Trainers should review the steps in the model.

These tips should be mentioned.
| material should be carefully selected and prepared.  
| - It should be in line with clearly defined objectives for the group meeting. | Trainers may want to put this info on a flipchart to refer to |

**PowerPoint Slide:**

**Exercise**

**Team Consultation**

**Directions:**
- Workers sit in a circle with the presenter in the middle.
- The worker is to present the information and is not allowed to answer questions.
- He/she leaves the circle as soon as he/she finishes the presentation.
- The presenter is not to participate in the musing.

**Do:**

<table>
<thead>
<tr>
<th>Setup:</th>
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<tbody>
<tr>
<td>- Team sits in a circle with the presenter/worker in the center.</td>
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<tr>
<td>- The presenter/worker presents the case information.</td>
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<tr>
<td>- He/She is not allowed to answer questions from the team. But he/she can ask two questions or present two issues that he/she wants the team to muse.</td>
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<tr>
<td>- He/she leaves the circle as soon as he/she finishes the presentation.</td>
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</tr>
<tr>
<td>Trainers the presenter must sit close enough to hear the discussion but is not to participate in it.</td>
<td></td>
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</tbody>
</table>

**Say:**

**Procedure for presentation by the Worker**

The Worker/Presenter:
- Presents a case to the group, describing why the family is involved in the system.
- Describes the family’s strengths and weaknesses.
- Describes the needs and struggles of the family.
- List services that are in place.
- Does not participate in the musing.
- Presents all relevant information he/she wishes to share before the “musing” begins.
- Does not respond or reply to questions or inquiries from the group.

**Procedure to Request for Feedback:**

**Say:**

- The presenter/worker presents questions/
### Problems/Issues

- The team assumes that the presenter/worker has presented all relevant information concerning the family during the presentation.
- The team discusses the issues and determines intervention strategies the presenter/worker can use to move the family forward, or offer areas of insight the presenter may have overlooked.

### Key Points:

- The team does not question the presenter about past efforts.
- The team does not seek validation from the presenter/worker and the presenter/worker does not participate in the team musing.

### Procedure for Response by the Presenter/Worker:

- The presenter/worker re-enters the circle when the team completes its musing.
- The presenter/worker explains how he/she plans to use the information provided by the team during the reflective case consultation.
- The presenter/worker does not share with the team what was accurate and what was not during their musing...just what he/she has learned.

### Team Consultation Group Exercise (60 minutes)

**Skills Practice:**

- Practice the Reflective Case Consultation method

**Ask participants to:**

- Form teams of 5 or 6
- Select a participant who will present the information about a family from their unit’s caseload.
- Follow the procedures outlined above and described in their guides.

**Explain**
| **Presenters have 7 minutes to present;** |  |
| **Presenters poses two questions/problems/issues that the team to “muse”;** |  |
| **Team members have 20 minutes to muse.** |  |
| **The presenter cannot answer questions and should sit out of sight of the team (If possible).** |  |
| **When the team is ready the presenter returns and describes what he/she has learned.** |  |

**Debrief:**

Debrief the exercise

- How did you feel as the presenter?
- How did you feel as a team member?
- Is this something that would be useful to use with your unit?
- Is this something you would be comfortable using with your unit?

**Transition Statement:**

Our next section deal with Critical thinking and Decision making.
Appendix A: A Foundation for Family-Centered Practice

- Families know more about their situation than anyone.
- Families can formulate their own goals and build their solutions.
- Families tend to maintain solutions they create.
- Families are doing the best they can in difficult situations.
- Family strengths can be enhanced; change can happen.
- Families are our partners and need our support.
- Families can enhance and improve the well-being of the children, with assistance and support.
- Safety solutions will be found in partnerships among parents, workers, supervisors, and other community partners.
- Families have a right to be supported in their efforts to improve their children’s well-being.
- Most children can be protected by their parents.
- Child protection must also focus on family protection.

*Source: Berg & Kelly, 2000*
Appendix B: Consistent and Quality Supervision

We all come from backgrounds and cultural influences that create for us “presumed truths” that are part of the fabric of our everyday life and become almost invisible. They are difficult to question, they shape our identity, and influence our attitudes and behaviors. In our lives, we are subjected to multiple and often conflicting cultural influencers. However, over time, certain influencers become dominant and take up more space in our personal culture. These influencers are often prescriptive, and include specifications about how people “should be.” They reflect the prevailing social and political structures and tend to support them. Through this process, these influencers shape our sense of who we are and who we “should” be. When cultural influencers become a framework for making sense of our lives, those experiences that do not fit become invisible. This process has marginalizing effects on some individuals and families. Their own knowledge is obscured and their life is interpreted through the lens of dominant cultural influencers. When this occurs, the family’s perceptions, experience and expertise is ignored or seen as “less than.” In conducting an assessment these “presumed truths” play an all-important role in guiding the discourse between the client worker and the family and our challenge ability/willingness to accept new and different perspectives. The challenge of conducting a family centered assessment is to lay down these “truths” and to hear the family from their own set of cultural influencers. The role of consistent and quality supervision cannot be overstated as a means of managing these cultural influencers. If workers are not provided a means in which to reflect upon and correct the way in which these influencers are impacting the work with families, they will most likely fail to validate that which is different from their experiences. The potential is great that families’ strengths and expertise will be ignored and invalidated-leading to a lack of buy-in and trust in the process.
Building the skills of the supervisors of the child welfare agency is paramount to enacting a strong family-centered assessment model. Supervision is critical to sustaining the quality of planning for service delivery and ongoing decision-making. Supervision provides an opportunity for quiet and thoughtful reflection of case progress. The ability to provide quality supervision is a well-developed and honed skill, requiring a supervisor to have the willingness to challenge staff about their assumptions, values, and decisions. It also requires time and consistency-moving from crisis-centered supervision, where only the “hot issues” receive the attention of the supervisor, to an approach where staff members are expected to enter into a weekly supervisory session prepared to discuss the progress families are making in goal achievement. The goal of supervision is twofold 1) to develop the social work skills of the supervisee and 2) to ensure that the makeup of the assessment and implementation of the service plan provide optimal chance for success in goal achievement for every family.
Appendix C: Card Sort Exercise

Goal(s) of Conventional –

Letter A

Produce competent frontline staff that focuses on assisting families to comply with agency-directed plans to keep children safe.

Goal(s) of Family-Centered Supervision

Letters B, C, and D.

Facilitate development of competent frontline staff who will make good decisions and empower families to make good decisions to keep children safe.

Identify competence and build skills through observation, interactive supervision, and continuous strengths-based feedback to improve outcomes for families.

Create a climate of mutual respect, empathy, genuineness, and trust between workers and families.

Conventional Supervisory Practice

Letters E, F, G, H, I, J, and K.

The focus is on caseloads and responding to tasks within time frames.

Supervision only in the office.

Supervisors are the source of knowledge. Interaction with workers is situational and primarily focused on problems cases or crisis intervention.

Interaction with unit members is hierarchical.

Evaluation is formal, occurs once a year, and is supervisor-directed. The comments and plans look similar from worker to worker.

Practice development opportunities for supervisors are passed up because “there is no time.”

Supervision suggests that workers are solely responsible for child safety, which places them in the position of making key decisions with little to no input from other professionals or from the families themselves.
Family-Centered Supervisory Practice


The focus is on families and finding realistic solutions that result in good outcomes.

Supervisors emphasize the importance of partnering with families and affirm progress and successes.

Supervisors make home visits with staff to model, observe, and provide the support and feedback that develops skills.

Supervisors guide workers on cases, encouraging them to look to each family’s experience as a source of knowledge.

Regular, scheduled case consultation is used to foster skill development.

Supervisors also look for peer learning opportunities.

Interaction is team-focused and collaborative, providing opportunities for workers to take lead roles in peer learning, develop unique expertise, and become “model” practitioners.

Evaluation is ongoing, constant, and mutual. The supervisor is a discoverer of individual competencies and strengths in workers. The worker and supervisor jointly plan how to build worker strengths.

Staying abreast with best practices is a priority so supervisors can more successfully mentor staff.

Supervisors help workers engage families as well as formal and informal community partners because “keeping children safe is everybody’s business.”
Appendix D-1

Family-Centered Supervision - Supervisory Roles

Am I Family-Centered or Conventional?

Part 1 (Cont’d.): Individual Tally Sheet

Directions: Use the tally sheet below to record your individual tally.

1. Select and check the role you currently spend most time, least time in when interacting with your workers, i.e. Advisor.
2. Check the item that best describes where you want to spend more time, less time.
3. Check the role where you are more effective, less effective.

<table>
<thead>
<tr>
<th>Roles</th>
<th>Spend Most Time</th>
<th>Spend Least Time</th>
<th>Want to Spend More Time</th>
<th>Want to Spend Less Time</th>
<th>More Effective</th>
<th>Less Effective</th>
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<td>Advisor</td>
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<td>Collaborator</td>
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<td>Evaluator</td>
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<td>Teacher, Coach, Mentor</td>
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<td>Enabler</td>
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<td>Problem Solver</td>
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Family-Centered Supervision – Supervisory Roles

**Individual Tally Sheet**

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Appendix D-2

Am I Family-Centered or Conventional?

Part 2: Group Tally Sheet

Directions: Use the tally sheet below to record the group tally score.
1. Total the tally marks per item for your group utilizing the individual tally sheets.
2. Place the tally number in the appropriate item box.
3. Answer the questions below.
4. Select a recorder/reporter.

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<thead>
<tr>
<th>Roles</th>
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Questions:
- Were there commonalities in strategies? Were there differences?
- Were there trends or patterns?
- Where did most want to spend their time?
- Where did most spend their time?
- What strategies did most say they would use to attain their preferred goal?
Appendix E: Building Self-Awareness

1. **Counter-transference:** Traumatic experience and other personal issues or feelings spurred by interaction with certain clients. Workers like clients have a history, and may carry not fully resolved issues and feelings.

   Transference is a phenomenon in psychology characterized by unconscious redirection of feelings for one person to another. These feelings and desires may have been retained from childhood are now being directed toward a new object or person. It is common for people to transfer feelings from their parents to their partners or to their children. For instance, one could mistrust somebody who resembles an ex-spouse in manners, voice, or external appearance; or be overly compliant to someone who resembles a childhood friend.

   Transference is often manifested as an erotic attraction towards a therapist, but can be seen in many other forms such as rage, hatred, mistrust, parentification, extreme dependence, or even placing the therapist in a god like guru status. Although transference was first identified in therapeutic settings with clients it can also be found in other disciplines.

   Social workers run the risk of assessing and servicing clients based on a positive or failed past intervention with a client. You may hear workers say “you cannot trust a drug addict they are all the same.” If a worker had an alcoholic parent, significant other who was unavailable emotionally or who lied, then that worker might see all substance users and abusers as liars.

   Supervisory response to countertransference: To educate staff regarding the dynamics of countertransference. Dealing with it requires reflection, discussion, and practice.

   - Technique to use coaching.
   - Refer to EAS if coaching is not effective.

2. **Personal qualities or characteristics:** Sometimes the personal qualities or characteristic of a worker get in the way of their working effective with clients.

   Example: Abruptness, directness, telling a client exactly what he or she thinks often with diplomacy.

   Supervisory response to personal qualities or characteristics: Guide worker in asking himself/herself “What as I doing that is creating these negative reactions?”
This should only be done after several complaints about this style of interaction.

Appendix E: Building Self-Awareness

- Possible technique mentoring, coaching, evaluating.

3. **Boundaries:** Relationship boundaries must be established and adhered to by workers when working with clients.

Example 1: Workers often “parent the parent” jumping in quickly, solving the problems and dispensing advice. A better solution is to help the client develop his or her own problem-solving skills.

Example 2: Excess use of self-disclosure, resulting in a shift from the client’s problem to the worker’s own situation.

Supervisory response to boundaries: Avoid creating dependency in your workers. Allow them the opportunities to solve problems sifting through various alternatives with limited guidance when appropriate.

- Possible technique to use collaborating

4. **Diversity Issues:** It is difficult not to communicate values to clients. A worker’s tone and non-verbal behavior indicates his/her perspective and feelings to clients.

Supervisory response to diversity issues: Helping workers assess whether their values are interfering with their objective. Help workers:

- Recognize their source of discomfort with differences between them and their clients i.e. race, ethnicity, culture, socioeconomics status, religion, gender, and sexual orientation;
- Be conscious of how their own racial and cultural heritage affects their perception of assessment, planning, and intervention with clients;
- Be aware of stereotypes and preconceived notions they may hold towards diverse client populations;
- Understand how these factors influence the way they and the client function in the world;
- Be able to demonstrate respect for the needs of diverse populations in selecting intervention strategies that are appropriate for specific cultures.
Appendix F

Purpose of the NASW Code of Ethics

Professional ethics are at the core of social work. The profession has an obligation to articulate its basic values, ethical principles, and ethical standards. The *NASW Code of Ethics* sets forth these values, principles, and standards to guide social workers' conduct. The *Code* is relevant to all social workers and social work students, regardless of their professional functions, the settings in which they work, or the populations they serve.

The *NASW Code of Ethics* serves six purposes:

1. The *Code* identifies core values on which social work's mission is based.
2. The *Code* summarizes broad ethical principles that reflect the profession's core values and establishes a set of specific ethical standards that should be used to guide social work practice.
3. The *Code* is designed to help social workers identify relevant considerations when professional obligations conflict or ethical uncertainties arise.
4. The *Code* provides ethical standards to which the general public can hold the social work profession accountable.
5. The *Code* socializes practitioners new to the field to social work's mission, values, ethical principles, and ethical standards.
6. The *Code* articulates standards that the social work profession itself can use to assess whether social workers have engaged in unethical conduct. NASW has formal procedures to adjudicate ethics complaints filed against its members.* In subscribing to this *Code*, social workers are required to cooperate in its implementation, participate in NASW adjudication proceedings, and abide by any NASW disciplinary rulings or sanctions based on it.
Appendix G

Ethical Principles

The following broad ethical principles are based on social work's core values of service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence. These principles set forth ideals to which all social workers should aspire.

Value: Service

Ethical Principle: Social workers' primary goal is to help people in need and to address social problems.

Social workers elevate service to others above self-interest. Social workers draw on their knowledge, values, and skills to help people in need and to address social problems. Social workers are encouraged to volunteer some portion of their professional skills with no expectation of significant financial return (pro bono service).

Value: Social Justice

Ethical Principle: Social workers challenge social injustice.

Social workers pursue social change, particularly with and on behalf of vulnerable and oppressed individuals and groups of people. Social workers' social change efforts are focused primarily on issues of poverty, unemployment, discrimination, and other forms of social injustice. These activities seek to promote sensitivity to and knowledge about oppression and cultural and ethnic diversity. Social workers strive to ensure access to needed information, services, and resources; equality of opportunity; and meaningful participation in decision making for all people.

Value: Dignity and Worth of the Person

Ethical Principle: Social workers respect the inherent dignity and worth of the person.

Social workers treat each person in a caring and respectful fashion, mindful of individual differences and cultural and ethnic diversity. Social workers promote clients’ socially responsible self-determination. Social workers seek to enhance clients' capacity and opportunity to change and to address their own needs. Social workers are cognizant of their dual responsibility to clients and to the broader society. They seek to resolve conflicts between clients' interests and the broader society’s interests in a socially responsible manner consistent with the values, ethical principles, and ethical standards of the profession.
Value: Importance of Human Relationships

Ethical Principle: Social workers recognize the central importance of human relationships.

Social workers understand that relationships between and among people are an important vehicle for change. Social workers engage people as partners in the helping process. Social workers seek to strengthen relationships among people in a purposeful effort to promote, restore, maintain, and enhance the well-being of individuals, families, social groups, organizations, and communities.

Value: Integrity

Ethical Principle: Social workers behave in a trustworthy manner.

Social workers are continually aware of the profession's mission, values, ethical principles, and ethical standards and practice in a manner consistent with them. Social workers act honestly and responsibly and promote ethical practices on the part of the organizations with which they are affiliated.

Value: Competence

Ethical Principle: Social workers practice within their areas of competence and develop and enhance their professional expertise.

Social workers continually strive to increase their professional knowledge and skills and to apply them in practice. Social workers should aspire to contribute to the knowledge base of the profession.
Appendix H

Ethical Standards

The following ethical standards are relevant to the professional activities of all social workers.

1. Social Workers' Ethical Responsibilities to Clients

Commitment to Clients

Social workers' primary responsibility is to promote the well-being of clients. In general, clients' interests are primary. However, social workers' responsibility to the larger society or specific legal obligations may on limited occasions supersede the loyalty owed clients, and clients should be so advised. (Examples include when a social worker is required by law to report that a client has abused a child or has threatened to harm self or others.)

Self-Determination

Social workers respect and promote the right of clients to self-determination and assist clients in their efforts to identify and clarify their goals. Social workers may limit clients' right to self-determination when, in the social workers' professional judgment, clients' actions or potential actions pose a serious, foreseeable, and imminent risk to themselves or others.

Informed Consent

(a) Social workers should provide services to clients only in the context of a professional relationship based, when appropriate, on valid informed consent.

(b) In instances when clients are not literate or have difficulty understanding the primary language used in the practice setting, social workers should take steps to ensure clients' comprehension.

(c) In instances when clients lack the capacity to provide informed consent, social workers should protect clients' interests by seeking permission from an appropriate third party, informing clients consistent with the clients' level of understanding.

(d) In instances when clients are receiving services involuntarily, social workers should provide information about the nature and extent of services and about the extent of clients' right to refuse service.

(e) Social workers who provide services via electronic media (such as computer, telephone, radio, and television) should inform recipients of the limitations and risks associated with such services.
(f) Social workers should obtain clients’ informed consent before audio taping or videotaping clients or permitting observation of services to clients by a third party.

**Competence**

(a) Social workers should provide services and represent themselves as competent only within the boundaries of their education, training, license, certification, consultation received, supervised experience, or other relevant professional experience.

**Cultural Competence and Social Diversity**

(a) Social workers should understand culture and its function in human behavior and society, recognizing the strengths that exist in all cultures.

(b) Social workers should have a knowledge base of their clients' cultures and be able to demonstrate competence in the provision of services that are sensitive to clients' cultures and to differences among people and cultural groups.

(c) Social workers should obtain education about and seek to understand the nature of social diversity and oppression with respect to race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, religion, and mental or physical disability.

**Conflicts of Interest**

(a) Social workers should be alert to and avoid conflicts of interest that interfere with the exercise of professional discretion and impartial judgment.

(b) Social workers should not take unfair advantage of any professional relationship or exploit others to further their personal, religious, political, or business interests.

(c) Social workers should not engage in dual or multiple relationships with clients or former clients in which there are risks of exploitation or potential harm to the client. (Dual or multiple relationships occur when social workers relate to clients in more than one relationship, whether professional, social, or business. Dual or multiple relationships can occur simultaneously or consecutively.)

**Privacy and Confidentiality**

(a) Social workers should respect clients' right to privacy. Social workers should not solicit private information from clients unless it is essential to providing services or conducting social work evaluation or research. Once private information is shared, standards of confidentiality apply.

(b) Social workers may disclose confidential information when appropriate with valid consent from a client or a person legally authorized to consent on behalf of a client.
(c) Social workers should protect the confidentiality of all information obtained in the course of professional service, except for compelling professional reasons.

(d) Social workers should inform clients, to the extent possible, about the disclosure of confidential information and the potential consequences, when feasible before the disclosure is made. This applies whether social workers disclose confidential information on the basis of a legal requirement or client consent.

(e) Social workers should discuss with clients and other interested parties the nature of confidentiality and limitations of clients' right to confidentiality. Social workers should review with clients circumstances where confidential information may be requested and where disclosure of confidential information may be legally required. This discussion should occur as soon as possible in the social worker-client relationship and as needed throughout the course of the relationship.

(f) Social workers should not discuss confidential information in any setting unless privacy can be ensured. Social workers should not discuss confidential information in public or semipublic areas such as hallways, waiting rooms, elevators, and restaurants.

(g) Social workers should protect the confidentiality of clients' written and electronic records and other sensitive information. Social workers should take reasonable steps to ensure that clients' records are stored in a secure location and that clients' records are not available to others who are not authorized to have access.

**Access to Records**

(a) Social workers should provide clients with reasonable access to records concerning the clients.

(b) When providing clients with access to their records, social workers should take steps to protect the confidentiality of other individuals identified or discussed in such records.

**Sexual Relationships**

(a) Social workers should under no circumstances engage in sexual activities or sexual contact with current clients, whether such contact is consensual or forced.

(b) Social workers should not engage in sexual activities or sexual contact with clients' relatives or other individuals with whom clients maintain a close personal relationship when there is a risk of exploitation or potential harm to the client. Sexual activity or sexual contact with clients' relatives or other individuals with whom clients maintain a personal relationship has the potential to be harmful to the client and may make it difficult for the social worker and client to maintain appropriate professional boundaries. Social workers--not their clients, their clients' relatives, or other individuals with whom the client maintains a personal relationship--assume the full burden for setting clear, appropriate, and culturally sensitive boundaries.
(c) Social workers should not engage in sexual activities or sexual contact with former clients because of the potential for harm to the client. If social workers engage in conduct contrary to this prohibition or claim that an exception to this prohibition is warranted because of extraordinary circumstances, it is social workers—not their clients—who assume the full burden of demonstrating that the former client has not been exploited, coerced, or manipulated, intentionally or unintentionally.

Physical Contact

Social workers should not engage in physical contact with clients when there is a possibility of psychological harm to the client as a result of the contact (such as cradling or caressing clients). Social workers who engage in appropriate physical contact with clients are responsible for setting clear, appropriate, and culturally sensitive boundaries that govern such physical contact.

Sexual Harassment

Social workers should not sexually harass clients. Sexual harassment includes sexual advances, sexual solicitation, requests for sexual favors, and other verbal or physical conduct of a sexual nature.

Derogatory Language

Social workers should not use derogatory language in their written or verbal communications to or about clients. Social workers should use accurate and respectful language in all communications to and about clients.

Payment for Services

(a) Social workers should avoid accepting goods or services from clients as payment for professional services.

(b) Social workers should not solicit a private fee or other remuneration for providing services to clients who are entitled to such available services through the social workers’ employer or agency.

Clients Who Lack Decision-Making Capacity

When social workers act on behalf of clients who lack the capacity to make informed decisions, social workers should take reasonable steps to safeguard the interests and rights of those clients.

Interruption of Services
Social workers should make reasonable efforts to ensure continuity of services in the event that services are interrupted by factors such as unavailability, relocation, illness, disability, or death.

**Termination of Services**

(a) Social workers should terminate services to clients and professional relationships with them when such services and relationships are no longer required or no longer serve the clients' needs or interests.

(b) Social workers should take reasonable steps to avoid abandoning clients who are still in need of services.

### 2. Social Workers' Ethical Responsibilities to Colleagues

**Respect**

(a) Social workers should treat colleagues with respect and should represent accurately and fairly the qualifications, views, and obligations of colleagues.

(b) Social workers should avoid unwarranted negative criticism of colleagues in communications with clients or with other professionals. Unwarranted negative criticism may include demeaning comments that refer to colleagues' level of competence or to individuals' attributes such as race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, religion, and mental or physical disability.

**Confidentiality**

Social workers should respect confidential information shared by colleagues in the course of their professional relationships and transactions. Social workers should ensure that such colleagues understand social workers' obligation to respect confidentiality and any exceptions related to it.

**Interdisciplinary Collaboration**

**Disputes Involving Colleagues**

(a) Social workers should not take advantage of a dispute between a colleague and an employer to obtain a position or otherwise advance the social workers' own interests.

(b) Social workers should not exploit clients in disputes with colleagues or engage clients in any inappropriate discussion of conflicts between social workers and their colleagues.
Consultation

(a) Social workers should seek the advice and counsel of colleagues whenever such consultation is in the best interests of clients.

(b) Social workers should keep themselves informed about colleagues' areas of expertise and competencies. Social workers should seek consultation only from colleagues who have demonstrated knowledge, expertise, and competence related to the subject of the consultation.

(c) When consulting with colleagues about clients, social workers should disclose the least amount of information necessary to achieve the purposes of the consultation.

Referral for Services

(a) Social workers should refer clients to other professionals when the other professionals' specialized knowledge or expertise is needed to serve clients fully or when social workers believe that they are not being effective or making reasonable progress with clients and that additional service is required.

(b) Social workers who refer clients to other professionals should take appropriate steps to facilitate an orderly transfer of responsibility. Social workers who refer clients to other professionals should disclose, with clients' consent, all pertinent information to the new service providers.

(c) Social workers are prohibited from giving or receiving payment for a referral when no professional service is provided by the referring social worker.

Sexual Relationships

(a) Social workers who function as supervisors or educators should not engage in sexual activities or contact with supervisees, students, trainees, or other colleagues over whom they exercise professional authority.

(b) Social workers should avoid engaging in sexual relationships with colleagues when there is potential for a conflict of interest. Social workers who become involved in, or anticipate becoming involved in, a sexual relationship with a colleague have a duty to transfer professional responsibilities, when necessary, to avoid a conflict of interest.

Sexual Harassment

Social workers should not sexually harass supervisees, students, trainees, or colleagues. Sexual harassment includes sexual advances, sexual solicitation, requests for sexual favors, and other verbal or physical conduct of a sexual nature.

Impairment of Colleagues
(a) Social workers who have direct knowledge of a social work colleague's impairment that is due to personal problems, psychosocial distress, substance abuse, or mental health difficulties and that interferes with practice effectiveness should consult with that colleague when feasible and assist the colleague in taking remedial action.

(b) Social workers who believe that a social work colleague's impairment interferes with practice effectiveness and that the colleague has not taken adequate steps to address the impairment should take action through appropriate channels established by employers, agencies, NASW, licensing and regulatory bodies, and other professional organizations.

**Incompetence of Colleagues**

(a) Social workers who have direct knowledge of a social work colleague's incompetence should consult with that colleague when feasible and assist the colleague in taking remedial action.

(b) Social workers who believe that a social work colleague is incompetent and has not taken adequate steps to address the incompetence should take action through appropriate channels established by employers, agencies, NASW, licensing and regulatory bodies, and other professional organizations.

**Unethical Conduct of Colleagues**

(a) Social workers should take adequate measures to discourage, prevent, expose, and correct the unethical conduct of colleagues.

(b) Social workers should be knowledgeable about established policies and procedures for handling concerns about colleagues' unethical behavior. Social workers should be familiar with national, state, and local procedures for handling ethics complaints. These include policies and procedures created by NASW, licensing and regulatory bodies, employers, agencies, and other professional organizations.

**3. Social Workers' Ethical Responsibilities in Practice Settings**

**Supervision and Consultation**

(a) Social workers who provide supervision or consultation should have the necessary knowledge and skill to supervise or consult appropriately and should do so only within their areas of knowledge and competence.

(b) Social workers who provide supervision or consultation are responsible for setting clear, appropriate, and culturally sensitive boundaries.
(c) Social workers should not engage in any dual or multiple relationships with supervisees in which there is a risk of exploitation of or potential harm to the supervisee.

(d) Social workers who provide supervision should evaluate supervisees' performance in a manner that is fair and respectful.

**Education and Training**

(a) Social workers who function as educators, field instructors for students, or trainers should provide instruction only within their areas of knowledge and competence and should provide instruction based on the most current information and knowledge available in the profession.

**Performance Evaluation**

Social workers who have responsibility for evaluating the performance of others should fulfill such responsibility in a fair and considerate manner and on the basis of clearly stated criteria.

**Client Records**

(a) Social workers should take reasonable steps to ensure that documentation in records is accurate and reflects the services provided.

(b) Social workers should include sufficient and timely documentation in records to facilitate the delivery of services and to ensure continuity of services provided to clients in the future.

**Billing**

**Client Transfer**

**Administration**

(a) Social work administrators should advocate within and outside their agencies for adequate resources to meet clients' needs.

**Continuing Education and Staff Development**

Social work administrators and supervisors should take reasonable steps to provide or arrange for continuing education and staff development for all staff for whom they are responsible. Continuing education and staff development should address current knowledge and emerging developments related to social work practice and ethics.

**Commitments to Employers**
(a) Social workers should act to prevent and eliminate discrimination in the employing organization's work assignments and in its employment policies and practices.

(b) Social workers should be diligent stewards of the resources of their employing organizations, wisely conserving funds where appropriate and never misappropriating funds or using them for unintended purposes.

Labor-Management Disputes

4. Social Workers' Ethical Responsibilities as Professionals

Competence

(a) Social workers should accept responsibility or employment only on the basis of existing competence or the intention to acquire the necessary competence.

(b) Social workers should strive to become and remain proficient in professional practice and the performance of professional functions. Social workers should critically examine and keep current with emerging knowledge relevant to social work. Social workers should routinely review the professional literature and participate in continuing education relevant to social work practice and social work ethics.

(c) Social workers should base practice on recognized knowledge, including empirically based knowledge, relevant to social work and social work ethics.

Discrimination

Social workers should not practice, condone, facilitate, or collaborate with any form of discrimination on the basis of race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, religion, or mental or physical disability.

Private Conduct

Social workers should not permit their private conduct to interfere with their ability to fulfill their professional responsibilities.

Dishonesty, Fraud, and Deception

Social workers should not participate in, condone, or be associated with dishonesty, fraud, or deception.

Impairment

(a) Social workers should not allow their own personal problems, psychosocial distress, legal problems, substance abuse, or mental health difficulties to interfere with their
professional judgment and performance or to jeopardize the best interests of people for whom they have a professional responsibility.

(b) Social workers whose personal problems, psychosocial distress, legal problems, substance abuse, or mental health difficulties interfere with their professional judgment and performance should immediately seek consultation and take appropriate remedial action by seeking professional help, making adjustments in workload, terminating practice, or taking any other steps necessary to protect clients and others.

**Misrepresentation**

(a) Social workers should make clear distinctions between statements made and actions engaged in as a private individual and as a representative of the social work profession, a professional social work organization, or the social worker’s employing agency.

**Solicitations**

(a) Social workers should not engage in uninvited solicitation of potential clients who, because of their circumstances, are vulnerable to undue influence, manipulation, or coercion.

(b) Social workers should not engage in solicitation of testimonial endorsements (including solicitation of consent to use a client's prior statement as a testimonial endorsement) from current clients or from other people who, because of their particular circumstances, are vulnerable to undue influence.

**Acknowledging Credit**

(a) Social workers should take responsibility and credit, including authorship credit, only for work they have actually performed and to which they have contributed.

(b) Social workers should honestly acknowledge the work of and the contributions made by others.

5. **Social Workers' Ethical Responsibilities to the Social Work Profession**

**Integrity of the Profession**

(a) Social workers should work toward the maintenance and promotion of high standards of practice.
(b) Social workers should uphold and advance the values, ethics, knowledge, and mission of the profession. Social workers should protect, enhance, and improve the integrity of the profession through appropriate study and research, active discussion, and responsible criticism of the profession.

(c) Social workers should contribute to the knowledge base of social work and share with colleagues their knowledge related to practice, research, and ethics. Social workers should seek to contribute to the profession's literature and to share their knowledge at professional meetings and conferences.

**Evaluation and Research**

(a) Social workers should monitor and evaluate policies, the implementation of programs, and practice interventions.

(b) Social workers should promote and facilitate evaluation and research to contribute to the development of knowledge.

(c) Social workers should critically examine and keep current with emerging knowledge relevant to social work and fully use evaluation and research evidence in their professional practice.

**6. Social Workers' Ethical Responsibilities to the Broader Society**

**Social Welfare**

Social workers should promote the general welfare of society, from local to global levels, and the development of people, their communities, and their environments. Social workers should advocate for living conditions conducive to the fulfillment of basic human needs and should promote social, economic, political, and cultural values and institutions that are compatible with the realization of social justice.

**Public Participation**

**Public Emergencies**

**Social and Political Action**
Appendix J

Directions:

The focus of the exercise is to plan a case consultation/case conference utilizing the concepts that have discussed and learned. Consider the following case merely as a prop:

- Do not focus on whether or not this case is complete;
- Do not add additional information.

Tasks:

- Plan a case consultation/case conference
- Determine how you will engage, teach, coach, support the worker you designed earlier.
- Determine what strategy you will employ based on the level of experience of the worker.
- Determine what will occur in each stage (preparation, beginning, middle, and end) utilizing the model discussed.
- Record the steps you used.

Jamal Randolph Case

Jamal, age 8, is reported by his teacher, who suspects he is being sexually abused. She says that just after participating in an abuse prevention program, Jamal revealed that Uncle Wayne molested him. Jamal lives with his grandmother and her son Wayne. Grandmother is immobilized by the allegation; she says that she just can’t believe it, but if it happened she thinks it’s due to Wayne’s run of hard luck with jobs and drugs. Wayne denies the allegation. Grandma says she can’t keep Wayne out of his own house, but that she will have Jamal sleep in her room.
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- Record the steps you used.

The Sandoval Case

The Sandoval family came to your unit because of lack of supervision of their three young children, ages 7, 3, and 2. Mr. and Mrs. Sandoval were leaving the children alone while one parent left for work before the other returned home (from about 7:00 to 9:30 p.m.) One evening, the oldest child awoke, became frightened, and called 911.

The parents are Spanish speaking and have multiple needs. They are fearful of your intervention. Through the use of an interpreter, the parents shared that they recently moved here from Mexico. The family is feeling isolated since Ms. Sandoval’s mother moved back to Mexico. The family is religious but has not found a church. They are concerned about how their 7 year old son is doing in school.

There is a neighborhood resource center in the neighborhood where the Sandoval family resides.
Appendix J

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Tasks:

- Plan a case consultation/case conference
- Determine how you will engage, teach, coach, support the worker you designed earlier.
- Determine what strategy you will employ based on the level of experience of the worker.
- Determine what will occur in each stage (preparation, beginning, middle, and end) utilizing the model discussed.
- Record the steps you used.

The Kelly Case

Your worker plans to visit the home of Maria Kelly. Ms. Kelly is the mother of four children. Ms. Kelly is bilingual in French and English, and her language of preference at home is French with her children.

The worker has learned the following facts from the intake worker: Antonio Kelly has been known to come to school hungry. As a result of hunger he steals from other children. His immunizations are behind, and he is absent from school several days a week. There is concern that Antonio’s siblings are also coming to school hungry. Drugs are also reportedly used in the home.

Ms. Kelly’s brother lived in the basement which housed a makeshift methamphetamine lab.
Six Principles of Partnership

North Carolina using Berg & Kelly’s ideas developed six principles of partnership intended to guide and inspire workers interaction with family members:

1. Everyone desires respect,
2. Everyone needs to be heard,
3. Everyone has strengths,
4. Judgments can wait,
5. Partners share power,
6. Partnership is a process.

- How would you apply the six principles developed by North Carolina to your work with your workers?

- How would you encourage their use with co-workers, client families?
