Agency Supervision and Administration: Dual Roles with Complexities and Opportunities

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Introduction and Background

Learning Objectives

1. Participants will understand a Relational-Cultural framework for agency supervision.

2. Participants will be exposed to a profile of a contemporary health care agency which demonstrates contemporary agency issues for supervisors.

3. Participants will understand the complexities and dilemmas encountered when clinical supervisors have administrative responsibilities.

4. Participants will learn "real life" strategies for balancing the ethical dilemmas, complexities, and issues faced in contemporary agencies.

Opening Discussion

What is the current state of your agency?

How is supervision occurring in your agency?

Is clinical supervision available in your agency?

Agency Trends

1. Increased focus on measurement of outcomes.

2. Increased focus on staff accountability.

3. Increased regulation.

4. Focus on short term.

5. Decreased focus on client.

6. Decreased focus on staff development.

7. Decreased focus on relational components of providing care.

8. Increased fiscal pressure.

9. Clinical supervision occurring outside of agency.

10. Staff turnover?
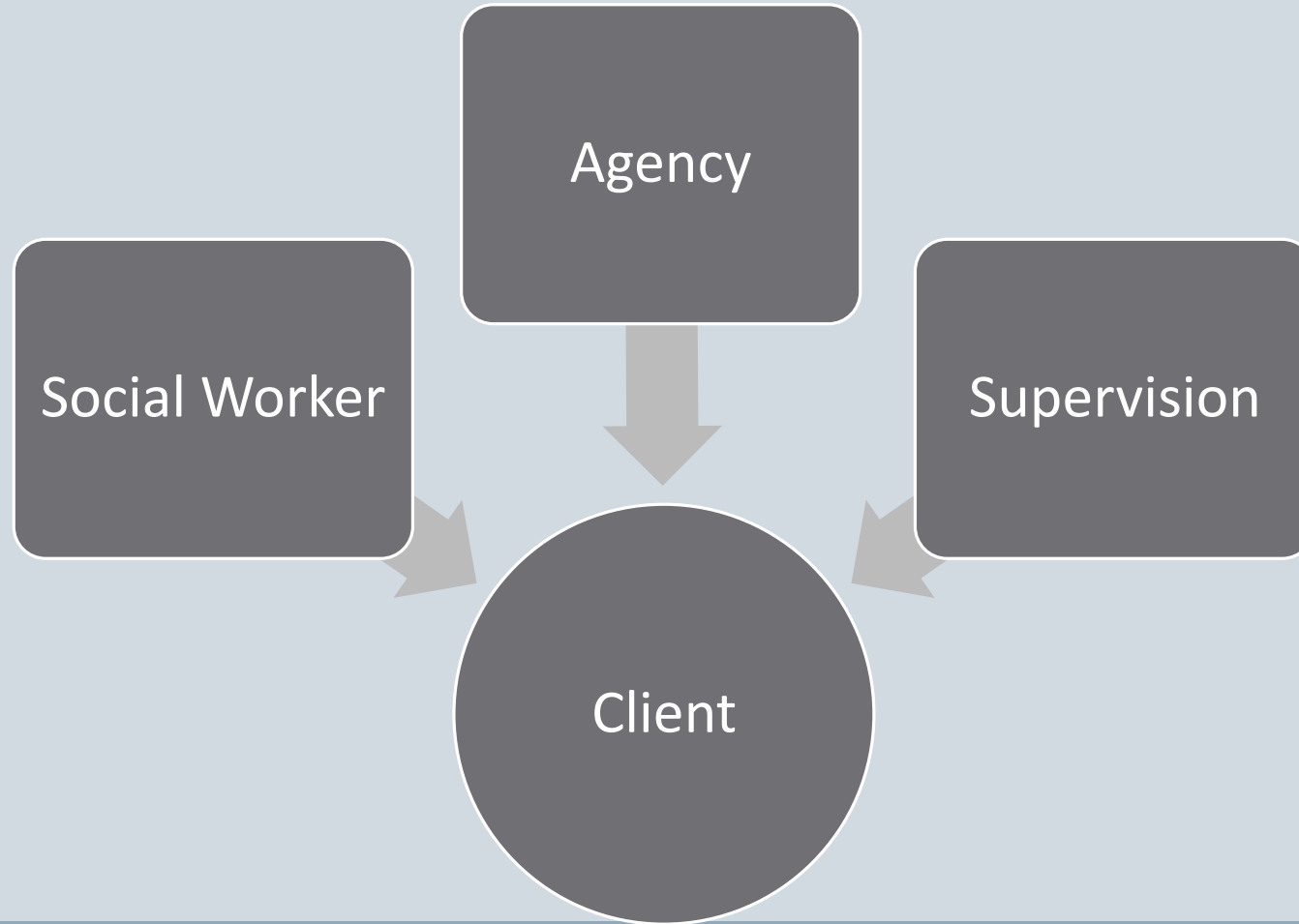
What Does Supervision in Agencies Look Like?

Client	Supervisor
Agency	Supervisee

Contemporary Supervision in Agencies
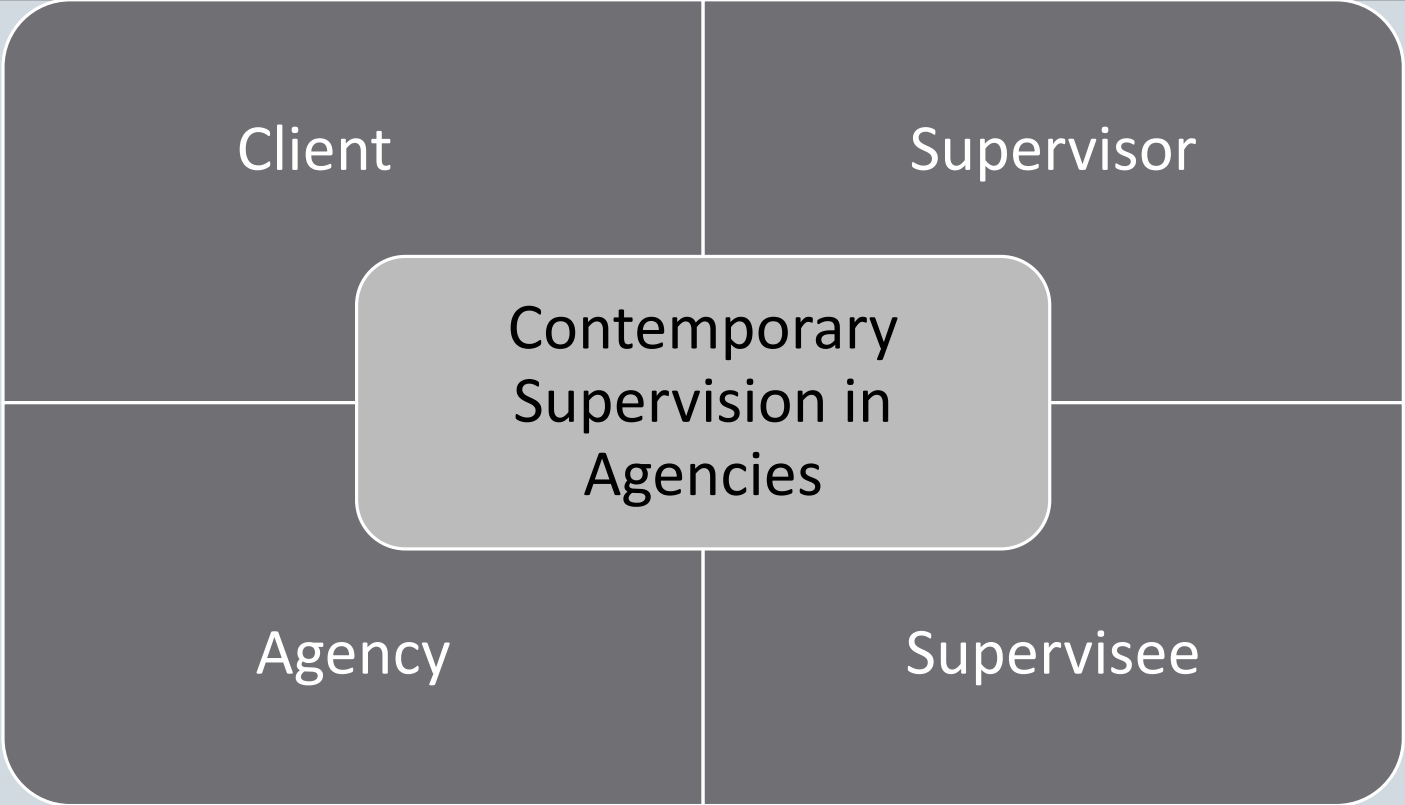
Holloway and Brager (1989)

Agency Social Work

Traditional Paradigm

Contemporary Paradigm?

Functions of Agency Supervision

Typical Administrative Supervision Tasks

1. Task supervision.

2. Communication and implementation of agency policy.

3. Measurement of outcomes and results.

4. Reporting.

5. Evaluation of supervisees.

Supervision Literature

What Do Supervisees Want?

Supervisors are prized who

(a) are available

(b) are knowledgeable about tasks and skills and can relate these techniques to theory

(c) hold practice perspectives and expectations about service delivery similar to the supervisee's

(d) provide support and encourage professional growth

(e) delegate responsibility to supervisees who can do the task

(f) serve as a professional role model, and

(g) communicate in a mutual and interactive supervisory style.

 (Bogo and McNight, 2006, p. 59).

The Voice of the Client

The Intersection of Administration and Supervision

Where does supervision get complicated?

Intersection of Supervision and Administration

1. Implementation of agency requirements
   ◦ May involve ethical conflicts
   ◦ May not be/feel in best interest of clients

2. Evaluation of staff

3. Complexity of clients
   ◦ Makes prioritizing even more difficult
   ◦ Real solutions will take more time than agencies may allow
   ◦ Real solutions will take more resources than agencies may allow

4. Supervisors as middle managers

5. Complexity of team dynamics

Why Do We Need to Figure This Out?

Good Supervision + **Good Practice** = **Better Outcomes for Client, Staff and Agency**

Making the Case

1. Agency staff is increasingly diverse.

2. Patients/clients are diverse.

3. Funding and funding alignment incentivize relationship building.

4. Parallel process is alive and well.

Relational Cultural Theory

Jean Baker Miller, in *Toward a New Psychology of Women* (1976), identifies five good things that come from connected, growth-producing relationships:

1. A sense of zest that comes from connecting with another person;

2. The ability and motivation to take action in the relationship, as well as in other situations;

3. Increased knowledge of oneself and the other person;

4. An increased sense of worth; and

5. A desire for more connections beyond the particular one.

Are the "Five Good Things" in Supervision?

Relational Cultural Theory

Attempting to work relationally in a "non-relational world" can lead to experiencing the opposite of Jean Baker Miller's proposed "five good things" when working in a "culture of disconnection". (Hartling and Sparks 2008, 169-170):

1. Diminished energy for the work we are doing,

2. Feeling disempowered or stifled in our ability to take action on behalf of our clients, ourselves or others,

3. Less clarity and more confusion about others and ourselves

4. Diminished sense of worth and

5. A desire to withdraw from or defend against relationships in these settings (2008, 169-170).

A Focused Experiment

1. Started with social work department group supervision in a community health setting.

2. Relational-Cultural Theory series was established, with assigned readings and RCT topics.

3. Over time other theoretical approaches were added to support RCT work (attachment theory, sanctuary model).

4. Social workers had opportunities to earn CEUS over a two year period. Most earned 15-30 CEUs.

5. RCT approach and language became central to how services were provided.

6. Trainings were then offered to interdisciplinary team members around Relational-Cultural Theory and Trauma theory. Nurses and social workers received CEUs.

7. Trainings were well-received and highly rated, but more importantly, the application of learning could be seen in work with clients.

Opportunities

Relational-Cultural Supervision in agencies can result in the following positive outcomes:

1. Better outcomes for clients

2. Staff satisfaction

3. Supervisor satisfaction

4. Mutual growth

5. Positive changes in agency.

Sanctuary Model

The Sanctuary Model® represents a theory-based, trauma-informed, trauma-responsive, evidence-supported, whole culture approach that has a clear and structured methodology for creating or changing an organizational culture. (Sandra Bloom). http://sanctuaryweb.com/Home.aspx

Administrative and Clinical Supervision

Administrative and clinical supervision should also include:

1. Evidence Based Practice Solutions

2. Theory education and development

3. Communications of agency practice

4. Assessment of client experience

5. Communication of client experience to leadership

6. Communication of staff experience to leadership

7. Policy development

8. Articulating issues of race, power and privilege.

Relational-Cultural Supervision

- High level of self awareness
- RCT expertise.
- Ability to manage through disconnection, with supervisees and with others in agency.
- Ability to work with a wide variety of work styles, approaches to practice, and personality types.
- Energy, endurance, agency/system management, issues/politic management.
- Sensitivity to cultural differences and styles.
- Self-disclosure and use of self may be different.
- Advisement and relational mentoring includes features beyond work with clients.

A Relational-Cultural Approach to Agency Practice and Supervision

1. Conceptual shift from thinking about relational activities as unimportant to relational activities and behaviors seen as the core of an agency's strength.

2. Appreciate the value of "good conflict", which suggests that growth occurs in the experiences of working through disconnection (Jean Baker Miller, 1976, Jordan and Romney, 2005).

3. Value of modeling positive relationships in the therapeutic dyad, which can be applied to organizational dynamics.

and…..

A Relational-Cultural Approach to Agency Practice and Supervision, cont

4. Observe and support relational patterns (Empathetic competence, Emotional competence, Authenticity, Fluid experience- ability to "move easily from expert to non-expert", Vulnerability, etc. .Fletcher, 1999)

5. Maintain ongoing awareness of organizational power dynamics and their paternalistic patterns, an openness for all levels of staff to be influenced and affected by one another.

6. Awareness and integration of understanding of concepts related to diversity, privilege and power, and commitment to reducing stratification and a "power with" model.
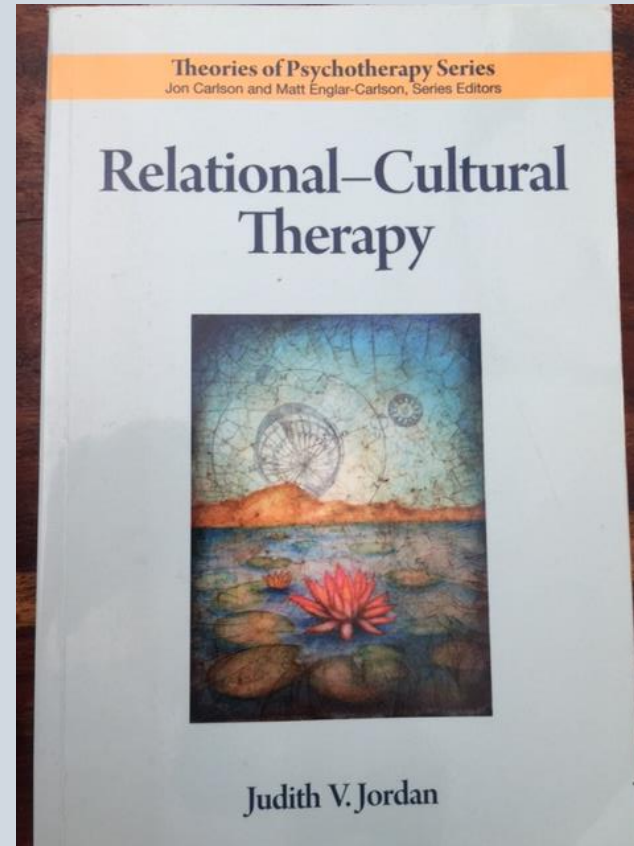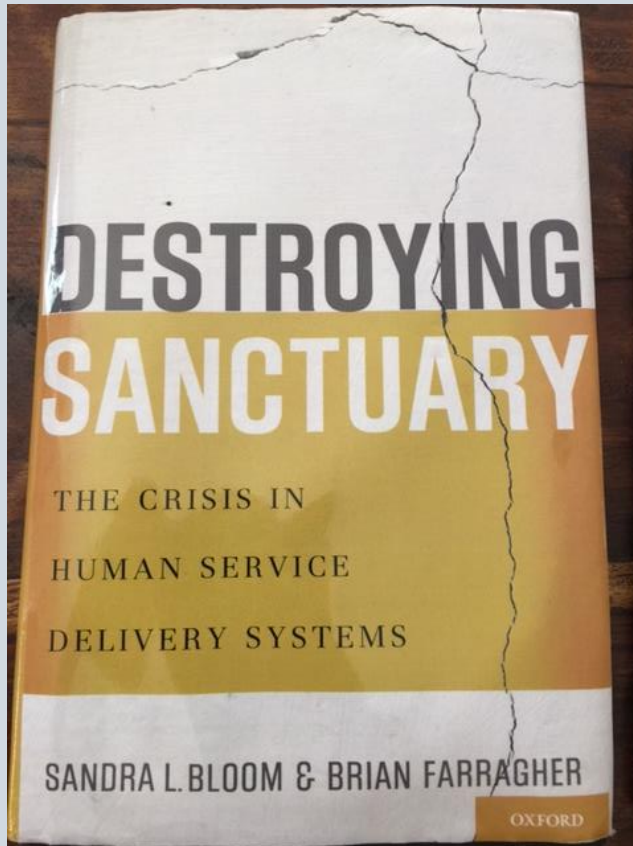
Recommendations and Strategies

1. Walk the walk.
2. Take (strong) students.
3. Learn to measure results
4. Articulate findings
5. Work across with aisle. Find opportunities to work with primary care, nursing, etc.
6. Hire well.
7. Supervise well.
8. Learn together.
9. Focus on relational work.
10. Measure relational work.
11. Develop staff you want to hire.

Recommended Resources

Questions/Comments

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