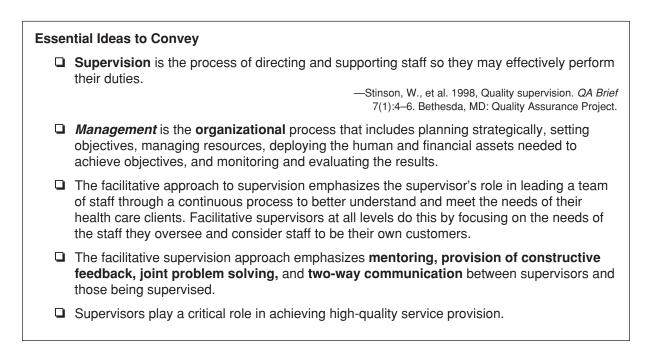
Module 3

A New Approach to Supervision



Session 3

A New Approach to Supervision

Objectives

By the end of this session, the participants will be able to:

- Assess their own supervisory style
- Define the facilitative approach to supervision
- Explain the benefits of facilitative supervision

Materials

- Facilitative Supervision Handbook
- Participant Handout 3.1: Self-Assessment Checklist
- Flipchart 3A: Guiding Principles for Quality Improvement
- PowerPoint presentation, Module 3

Advance Preparation

- 1. Make enough copies of Participant Handout 3.1 for distribution to all participants.
- 2. Prepare the following flipchart:

Flipchart 3A **Guiding Principles for Quality Improvement** □ A client-oriented mindset Staff involvement and ownership □ Focus on processes and systems Cost-consciousness and efficiency ☐ Continuous learning, development, and capacity building Ongoing quality improvement

Session Time

30 minutes	Training ActivitiesTime
	A. Assessing your own supervisory style 20 min.
	B. A new approach to supervision

Session 3 Detailed Steps

Activity A: Assessing Your Own Supervisory Style: Self-Assessment (20 minutes)

- 1. Present the learning objectives for this session.
- 2. Ask the participants to define "supervision" and "management." Invite them to give examples from their work. Emphasize that the supervisors and manager can be the same person.

Trainers' Resource

Supervision is the process of directing and supporting staff so they may effectively perform their duties.

Management is the **organizational** process that includes planning strategically, setting objectives, managing resources, deploying the human and financial assets needed to achieve objectives, and monitoring and evaluating results.

- 3. Remind the participants of the goal of the course and explain to them that supervisors play a crucial role in facilitating a good performance by the staff and enabling staff to provide quality services. Several factors influence how well staff perform. Tell the participants that during the next activity, they will assess their own style as supervisors.
- 4. Distribute Participant Handout 3.1. Ask for a volunteer to read the introduction to the checklist. Say that they should be as honest as possible with themselves. Tell them that trainers will not collect the responses. This exercise is to allow the participants to see in which areas they may need reinforcement. Allow 15 minutes to complete it.
- 5. Ask the participants if anybody would like to comment on the content of the self-assessment and to share their thoughts with the group. Ask whether any of the statements surprised them and, if yes, ask them to explain why.
- 6. Explain that all of the actions described in the questionnaire represent a variety of behaviors and tasks involved in the supervision of staff. Read some of the statements and explain how that behavior might affect staff's performance.
- 7. Announce that if the participants answered "no" to two or more of the questions, they may be ready to try a different approach to supervision.

Activity B: A New Approach to Supervision: Discussion/Presentation (10 minutes)

- 1. Tell the participants that you will discuss an approach that called a facilitative approach to supervision.
- 2. Ask the participants whether any of the following can describe their work situation. Do any of the situations sound familiar to them?

- * You face the same problems at many of the sites you supervise.
- * The problems keep recurring.
- * The sites are not meeting their objectives and you do not know how to help them.
- * You are overwhelmed by the number and complexity of the problems to be solved.
- * You are tired of listening to complaints about the lack of support from the headquarters or regional organization.
- * Too many people depend on you to solve their problems for them.
- * You do not get enough cooperation at the site or at higher levels.
- * You do not have enough time to devote to the staff and their issues.
- * You cannot provide all of the resources that staff need.
- * You feel exhausted and demoralized.
- 3. Ask the participants whether they think that other supervisors whom they supervise are also experiencing difficulties similar to those described above. If so, the reason could be the way in which they are approaching supervision.
- 4. Ask the participants to explain the meaning of the word "facilitate." (Facilitate means to make something/a process easier. Give an example of facilitating the training.)
- 5. Start the PowerPoint presentation for Module 3. Reveal slides 2–3 and explain the facilitative approach to supervision. Emphasize the idea that facilitative supervisors consider staff as clients, focus in their work on staff needs, and help staff to improve their performance and the quality of services they offer, to meet better clients' needs.
- 6. Reveal Slide 4 and comment on the characteristics of facilitative supervisors, explaining them one by one. Before commenting on bullet 7, ask the participants to explain the word "mentor" and invite them to offer examples.
- 7. Show slides 5–7 to present the roles of facilitative supervisors and to explain how supervisors benefit from the use of the facilitative approach to supervision.



- 8. Reveal Flipchart 3A, which shows the guiding principles for quality improvement that facilitative supervisors follow. Explain that one of the roles of facilitative supervisors is to lead staff in quality improvement activities. The principles presented on the flipchart should be applied in that process. Explain the statements, using information from the Participant Handbook, pp. 13–14.
- 9. Tell the participants that what was presented is only an introduction to the facilitative approach to supervision. During the course, the participants will discuss what knowledge and skills supervisors need to become facilitative supervisors and the supervisor's roles in ensuring the fundamentals of care and quality services. Tell them that the impact of facilitative supervision on staff performance and on the quality improvement process is much stronger than that of traditional supervision.

Session 3

Participant Handout 3.1: Self-Assessment Checklist

Assess you own supervisory style. Do you need to change your approach?

This self-assessment is anonymous. It is NOT a test. It is a tool for self-improvement, asking you to reflect on how you perform your supervisory tasks. Carefully read each question and respond honestly regarding your current performance. The purpose of this instrument is to help you identify areas in which you need to strengthen your supervisory capability.

Please take a few minutes to answer "Yes" or "No" to the questions below. Count the total score for each column.

Statement	Yes	No
Job Expectations		
I always discuss work expectations with each staff member I supervise.		
2. I discuss job description(s) periodically with the staff members I supervise.		
3. I always ensure that health staff have access to current reference books, norms, guidelines, and regulations in all areas and procedures of services offered.		
4. I always encourage and help the staff I supervise to do self-assessment and to develop an action plan to improve their performance and the quality of services.		
Performance Feedback		
5. I always provide staff with constructive feedback on their performance in a timely manner, focus on solutions to problems, and offer help (but not in front of others, to ensure staff do not lose face).		
6. I believe in empowerment rather than criticism.		
7. I work with the staff to ensure that they have ways to receive feedback from clients and the community.		
I always practice active listening and other communication skills when supervising and providing feedback.		
Motivation		
I often ask staff what motivates them and what does not, and I use this information to motivate staff effectively.		
10. I always recognize good staff performance by telling them personally and in front of their colleagues that they have done well.		
11. I always make the effort to ensure that there is a transparent and fair system of motivation and incentives.		
12. I always treat staff at all levels with respect, and I encourage staff to treat each other respectfully.		

Statement	Yes	No
Physical Environment and Tools		
13. I always make sure that the staff I supervise have the necessary equipment and supplies to do their job (including supplies for infection prevention) and to meet clients' and community needs and provide quality services.		
14. I always make sure that staff have the educational aids and informational materials they need to provide clients with information and to conduct counseling and educational activities.		
15. I make sure that the staff I supervise have adequate working conditions.		
Knowledge and Skills		
16. I work with staff to assess periodically sites' and individuals' learning needs and the areas in which staff need to improve their knowledge and skills.		
17. I always provide staff with the information they need to perform their jobs well.		
18. I provide or arrange the training that staff need, using training needs assessment results, to provide high-quality services.		
19. I provide on-the-job training/coaching, when appropriate.		
20. I always provide opportunities for the staff to practice new skills.		
Organizational Support		
21. I see myself as part of the staff team.		
22. I visit the sites under my jurisdiction frequently or I monitor service delivery at my site frequently.		
23. I regularly observe the day-to-day operations of the clinic.		
24. My primary objective is to improve the quality of services, not to collect data.		
25. I communicate regularly with staff about what is going on in the organization (such as policy changes, vision, goals, statistical data, and current and expected results for the institution).		
26. I speak to all levels of staff during my visits or when I monitor service delivery at my site.		
27. I create a relationship based on trust and openness so that staff feel free to discuss any problems they encounter.		
28. I ensure that staff have tools to continuously assess the quality of services and their performance, and I always encourage and help staff to identify their own solutions to the problems they encounter.		
29. I always try to create partnerships between staff and outside resources to help improve service quality.		
30. I always serve as liaison between a site and the larger system.		
31. I supervise clinical as well as administrative tasks, such as data collection, analysis, and use for decision making.		
32. I always try to find and bring in external resources when existing internal resources cannot solve the problem.		
33. I have a plan for my supervisory activities.		
Total		

Participant Resource

Guiding Principles for Quality Improvement

A client-oriented mindset: The clients who come to the facility are considered as external clients. The staff are internal clients to each other. Each supervisor is the client of his or her supervisor. Facilitative supervisors focus on the needs and expectations of both external and internal clients. Clients have rights to quality services, and staff have needs for materials and other support necessary to delivering quality services. The facilitative supervisor keeps these rights and needs in mind when assessing quality, involving staff to identify problems and seek solutions.

Staff involvement and ownership: Facilitative supervisors involve staff in the quality improvement process and try to foster a spirit of ownership and teamwork by emphasizing the importance and contribution of everyone to better quality of services, including involvement in decision making.

Focus on processes and systems: Facilitative supervisors emphasize the importance of improving processes and systems rather than focusing on individual mistakes. The facilitative approach to supervision recognizes that more than 75% of problems are due to overly complex or faulty processes or systems—not to the people who try to implement these processes or systems.

Cost-consciousness and efficiency: If something is not done correctly the first time, it has to be fixed and repeated. Poor quality is costly, both financially and in terms of the health of individuals and the community. In addition, it may have other costly results. Poor quality is wasteful, and good quality saves money.

> "When processes are made better, total costs usually fall." —Berwick, D. M, Godfrey, A. B., & Roessner, J. 1990. Curing health care: New strategies for quality improvement. San Francisco: Jossey-Bass.

Continuous learning, development, and capacity-building: Facilitative supervisors pay close attention to staff development and capacity-building. They transfer the knowledge and skills needed to implement the quality improvement and performance improvement processes. Facilitative supervisors ensure opportunities for staff for training, refresher training, and training in new processes and procedures. They enable staff to identify learning needs and assist staff in developing a plan on how to address those needs. Facilitative supervisors organize the transfer of knowledge and skills acquired by staff to other staff members and ensure the application of newly acquired skills by trained staff.

Ongoing quality improvement: Facilitative off-site supervisors visit sites systematically to foster the quality improvement process. They teach staff how to use different quality improvement tools and encourage staff to use them periodically. Facilitative off-site supervisors transfer the quality improvement tools to on-site supervisors. Changes in quality of services are regularly monitored and evaluated, while problem areas are constantly identified and improved.

Source: EngenderHealth. 2001. Facilitative supervision handbook. New York.