Introduction

As you go through this tool, please think about your knowledge, skills, and experience in each area. You should complete the tool for the first time 6-months after starting your new position, then update it again at 12-months. There is no expectation that you will be an expert or have extensive experience in all of the areas even after a year in the position, but it is helpful for us, for you, and for your Program Manager to understand how competent you feel, where you gained knowledge/skills, and where you still need support. For example, as a new Supervisor you will likely need experience, training, and support to develop supervision plans. The goal is to provide you with the support you need to become a knowledgeable and skilled member of the Healthy Families New York team.

Please answer the following before you proceed:

Supervisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Started in Role: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Manager Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To date, I have participated in the following activities:

\_\_\_ Orientation with my Supervisor

\_\_\_ Supervisor CORE: Date (MM/YY) \_\_\_\_\_/\_\_\_\_\_

\_\_\_ FSS CORE: Date (MM/YY) \_\_\_\_\_/\_\_\_\_\_

\_\_\_ FRS CORE: Date (MM/YY) \_\_\_\_\_/\_\_\_\_\_

\_\_\_ Supervisor CORE post-training call: Date (MM/YY) \_\_\_\_\_/\_\_\_\_\_

\_\_\_ Supervisor Forum(s) (facilitated by PCANY)

\_\_\_ Shadowing of another Supervisor

\_\_\_ QA Observation(s) (by direct supervisor) Date(s):

\_\_\_ QA Observation (by PCANY)

| Competency | How competent do you feel in this area? | What activities, experiences, and/or resources have been the MOST helpful to you in developing this competency? | What support do you need to become more competent in this area? | Comments/Planning (specific training, shadowing, other resources available). *Complete with Program Manager input* |
| --- | --- | --- | --- | --- |
| HFA Practices | | | | |
| I understand all HFA policies and best practice standards. | \_\_\_ No experience with this  \_\_\_ I understand them a bit  \_\_\_ I understand them pretty well  \_\_\_ I fully understand them  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://www.healthyfamiliesnewyork.org/Staff/policies.htm)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I am able to document all activities in an appropriate and timely manner as per HFA and HFNY policies. | \_\_\_ No experience with this  \_\_\_ I am not able to do this yet  \_\_\_ I am able to do this with support  \_\_\_ I am able to do this on my own  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/tolresources)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I support the FRS/FSS in utilizing screening and/or assessment tools to better understand the strengths and needs of families and provide appropriate resources and referrals. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://www.healthyfamiliesnewyork.org/Staff/reporting.htm)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| Child Abuse Neglect and Reporting | | | | |
| I understand the process and procedures around reporting suspected cases of child neglect and maltreatment | \_\_\_ No experience with this  \_\_\_ I understand them a bit  \_\_\_ I understand them pretty well  \_\_\_ I fully understand them  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/selfpacedtrainings) (Child Abuse & Neglect)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I support home visitors in generating reports of suspected cases of child neglect and maltreatment | \_\_\_ No experience with this  \_\_\_ I am not able to do this yet  \_\_\_ I am able to do this with support  \_\_\_ I am able to do this on my own  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/selfpacedtrainings) (Child Abuse & Neglect)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| Infant and Child Health and Development | | | | |
| I help the FRS/FSS access appropriate information, resources, and referrals to give to pregnant individuals to help them have a positive and healthy pregnancy. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/selfpacedtrainings) (Prenatal Training)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I support the FRS/FSS to consistently apply the principles of Infant Mental Health to their work with families. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://www.nysaimh.org/what-is-imh/)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I help the FSS/FRS provide appropriate information, support, resources, activities, and referrals to families to support them in providing what their infant/child needs to be safe, healthy, and developmentally on track. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://www.healthyfamiliesnewyork.org/Staff/outreach.htm)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date:\_\_\_/\_\_\_/\_\_\_  Date:\_\_\_/\_\_\_/\_\_\_ |
| I support the FSS/FRS engagement with family members in activities that encourage positive brain, physical, and social-emotional development and builds families’ knowledge and understanding of the importance of these activities. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/tolresources) (Curriculum Delivery)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| Family Functioning and Community Supports | | | | |
| I help the FSS/FRS provide appropriate information, support, resources, and referrals to families to help them be safe, healthy, and provide a stable and nurturing environment for their child. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task  \_\_\_ N/A | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/tolresources) (Family Engagement)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I keep myself current on the variety of community supports available through informal and formal engagement with providers and assist the FRS/FSS in building their knowledge of these community supports. | \_\_\_ No experience with this  \_\_\_ I have no knowledge at this time  \_\_\_ I am developing my knowledge  \_\_\_ I am knowledgeable about this topic | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| Professional Practice and Process | | | | |
| I present and maintain appropriate professional boundaries with colleagues, Program Managers, home visitors, and families. | \_\_\_ No experience with this  \_\_\_ I have no knowledge at this time  \_\_\_ I am developing my knowledge  \_\_\_ I have integrated this skill into my practice | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/tolresources) (Boundaries)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I consistently express cultural humility in my interactions with colleagues, Program Managers, home visitors, and families. | \_\_\_ No experience with this  \_\_\_ I have no knowledge at this time  \_\_\_ I am developing my knowledge  \_\_\_ I have integrated this skill into my practice | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/tolresources) (Cultural Humility)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I consistently use self-care strategies to maintain my own physical, emotional, and mental health. | \_\_\_ No experience with this  \_\_\_ I have no knowledge at this time  \_\_\_ I am developing my knowledge  \_\_\_ I have integrated this skill into my practice | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/selfpacedtrainings) (Self-Care Retreat)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| Relationship-Based Supervision | | | | |
| I establish a comfortable, trusting relationship with the FSS/FRS in order to support and empower them, and increase their confidence. | \_\_\_ No experience with this  \_\_\_ I have no knowledge at this time  \_\_\_ I am developing my knowledge  \_\_\_ I have integrated this skill into my practice | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/supprofessionalboundaries)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| Planning for Supervision | | | | |
| I create an appropriate plan for supervision to effectively explore and discuss the FRS/FSS’s current performance and address professional development needs. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/supervisionprep)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| I review appropriate documentation (e.g., QA activities, logs, MIS reports) when planning for supervision. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task | another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/supervisionprep)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| Reflective Practice and Parallel Process | | | | |
| I effectively allow the FRS/FSS to reflect on their work and utilize the parallel process to support family-centered, strengths-based, and culturally-humble interactions with families. | \_\_\_ No experience with this  \_\_\_ I understand this task  \_\_\_ I have integrated this task into my work  \_\_\_ I feel proficient in this task | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/staffengagement)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |
| Supervision Topics | | | | |
| I partner with the FRS/FSS to understand the initial assessment; create, implement, and update a Service Plan; support the development and ongoing review of the Family Goal plan; through addressing ongoing family strengths, needs, and safety concerns during supervision. | \_\_\_ No experience with this  \_\_\_ I have no knowledge at this time  \_\_\_ I am developing my knowledge  \_\_\_ I have integrated this skill into my practice | \_\_\_Supervisor CORE or another formal training  \_\_\_Transfer of Learning or HFNY website  \_\_\_I talked to someone about this (either within your program or someone else)  \_\_\_Shadowing  \_\_\_Supervision on this topic  \_\_\_Supervisor Forum  \_\_\_Other: | Need a starting point? Click [here](https://tol397.wixsite.com/transferoflearning/supervisionprep)  \_\_\_More training  \_\_\_More resources  \_\_\_More conversations with my Supervisor  \_\_\_More chances to practice with support  \_\_\_More chances to talk with other Supervisors  \_\_\_I’m not sure  \_\_\_Other: | Date: \_\_\_/\_\_\_/\_\_\_  Date: \_\_\_/\_\_\_/\_\_\_ |

Date Tool Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Once you have completed this document, please email it to Erin Berical at [eberical@albany.edu](mailto:eberical@albany.edu).