

**Combined Supervisor Forum Notes**  
**Returning to In Home Visits: Opportunities and Challenges**  
**July 21-22, 2021**

Mid-Hudson/Cap: Rockland-1, Dutchess-3, Oneida-1, Clinton-1, Schenectady-4, Buffalo- 2, Madison-1, Sullivan-1, Delaware-1

NYC: Parkchester-2, Staten Island-1, Central Harlem-1, Morris Heights-2, Westchester-2, Bushwick-3, CAMBA-1, Brookdale-5, Ulster-1, Washington Heights-1

CW: Niagara – 4, Wayne – 1, Steuben/Livingston – 4, Tioga/Chenango – 2, Broome – 1, Chemung – 2, Buffalo – 1, Ontario/Yates – 1, Oswego – 3, Schenectady – 1, Monroe – 1, Jefferson – 1

**Total: 56 participants**

All sites reported that they are doing at least some in-person visits. No one is still virtual-only.

**Helping Staff with the Transition:**

- Multiple sites - reinforced the importance of consistent supportive supervision right now and allowing space for staff to talk about how they are feeling with the transition. Creating a “safe space” is more important than ever for staff to be able to voice things they feel worried or scared about.
- CAMBA- doing lots of “wondering” and staying curious during supervision to encourage discussions and making room for sharing of real feelings.
- Madison- developed a survey that they use with staff and families to assess comfort (Ellen will share with all programs)
- Westchester- Concerns about increase in community violence, once only at night, now during the day. The issues programs dealt with pre-pandemic have not gone away and in some cases have escalated. The idea of meeting in a park where there may have been a shooting is not acceptable to staff or families. They are using MI, like Scaling Tools, to assess staff comfort. This leads to good solution focused discussions including brainstorming various places to meet outside of the home.
- Oswego – Dept of Heath has PPE and safety protocols to share with families to help them be more comfortable. Basing in-person interaction on staff and family comfort level. They have a continuous conversation with staff and allow them opportunities to voice their concerns, help them troubleshoot scenarios. Staff’s main concern has been the different conditions in participant’s homes and not knowing what safety measures families are taking.
- Monroe – Lots of communicating and updating going on. Have changed the term “staff meeting” to “peer meeting” and this small change seems to have had a positive impact and brought the team closer together. Are allowing space at supervisions for staff to talk

about their feelings around safety. There have also been concerns about an uptick in community violence. Home visits are based on staff and family comfort levels and have sometimes been taken place in neutral sites such as parks, libraries, and the agency's community room.

- Question about unvaccinated staff. One agency allows unvaccinated staff to do home visits but must wear masks. Another requires all staff wear masks for home visits regardless of vaccination status.

### **Other challenges?**

- Central Harlem- It's really hard to engage virtually when wearing a mask. This is something to keep in mind if staff are required to be in the office and doing virtual visits if agency protocol requires them to wear masks at work.
- Wayne – Staff having to relearn the routines of “normal” like how to do mileage and how to allow enough time in schedule for travel. Newer staff never learned these routines in the first place.
- Steuben- time management is a struggle. May have been able to do 5 virtual HVs in a day and can now only do 3 due to travel time.
- Schenectady- being sure to model for staff how they as supervisors handle uncertainty (with humility), remembering that grief is a huge part of this pandemic. Noted that there is grief around the loss of life and also the loss of things as they were before (annual picnic not happening, etc.)

### **Opportunities/Silver Linings:**

- Multiple sites- hoping that virtual work stays on the table as they've found it's a really useful tool for other conditions that impact being able to do in person visits (i.e., weather conditions, health of families and staff).
- Dutchess- this has brought out our reflective strengths, has helped us to increase our flexibility in our work, highlights our resilience
- Jefferson – knowing that virtual visits work in general – were able to still do visits when a family had to recently quarantine.
- Oswego – Families found it therapeutic to still have someone there, albeit virtually, for them during the pandemic.

### **What about new staff hired during the pandemic?**

- Multiple sites- group discussions/team meetings help them feel connected to co-workers they've never met in person. The reflective nature of the meetings can help set the tone for how we want them to be with families.

- Buffalo- Figuring out how to train people who are “hands-on” learners has been a challenge. In the past, would have taken them out to a home, now families are less open to extra people coming on a visit.
- Chemung – have had discussions about really noticing parent’s body language now that visits are in-person again, focusing on interpersonal connection. Needs to assist some staff in strategies to cope with others who are in the home during home visits. This is a challenge those who have never done in person visits have not had to deal with before.
- Jefferson shared that they are having to talk to staff about dealing with all of the distractions that happen during an in-person home visit and are preparing staff to deal with extra talking, staying neutral, and focusing on the child. Almost have to bring expectations down on how much can be accomplished during a home visit.

### **What about helping staff through transition emotionally?**

- Multiple sites- remembering that everyone is different, some are eager to “get back out there,” some are reluctant, and that there are a lot of opinions among staff on how to stay safe. Supervisors can help ensure that evidence-based information from a trusted source is what is disseminated among staff and families.
- Niagara –Have a group text to help everyone stay connected.

### **What’s been really helpful in prepping staff for this?**

- Wayne, Bushwick – Need to prepare yourself as a supervisor, check yourself and where you are at with the transition first before you can help team with their transition. Need to learn from what is working.

### **Prepping families?**

- Multiple sites- some families have agreed to home visits only if they can be the first or only home visit the FSS does that day.
- Parkchester- doing lots of outside group activities as they find this helps with decompression for both families and staff alike who have been cooped up during the pandemic.
- Niagara- making sure staff has PPE to give to families to help calm their resistance
- Jefferson is taking baby steps with resistant families. Maybe doing a 15 minute visit on the porch then the rest of the visit virtually to ease into it. Let everyone know that it is ok to be nervous.
- Brookdale- using safety protocols developed by CDC and approved by their agency.
- Chemung raised the question of it being ok now for families to decide on an in person visit based on the pandemic, but that may not always be their true reason for not wanting in-person visits (e.g., convenience).

**How have programs let families know their safety and other protocols?**

- Schenectady- drafted one letter that went out to all families so that they all hear the same information about the program's safety protocols.
- Clinton- created a fun video of the program's safety protocols that was sent to all families. (Ellen will share with everyone.)
- Multiple sites- it seems most sites are having home visits speak one on one with families about this.

**What's it like with families who have never had in-person visits in the past?**

- Bushwick- doing curbside pick-up as a way to ease into in home visits. It's a little face to face but not "too much all at once." This also lets families who have never met you in person "know that you are 'real.'"
- Schenectady – Some resistance, you have to take baby steps
- Oswego – Offer stress relief activities or other curriculum to help them engage and feel more comfortable
- Clinton- in light of outdoor visits, has provided a "summer bag" that includes sunscreen (Ellen will share photo of contents of this bag).

**Supporting staff and families?**

- Morris Heights- importance of maintaining professional boundaries, reclaiming some of what might have looked different during the pandemic.
- Niagara – Encouraging staff to remind families we go from home to home and want to keep everyone safe.
- Wayne – "Speak life into it [the in person visits]." Be excited to meet the family in person. Bought 8 x 8 mats that can be sanitized for outdoor visits on the ground. Parents can sit at one side and FSS on the other with baby in the middle. (Diane will get purchasing info to Ellen to share.)

**Good ideas you heard today that will help you approach transition?**

From Rockland- monthly parent group activities, talk less and listen more! Doing a "Wheel Game" where they spin and participants win little gifts at the end. Sending out a "self-care" basket for families.

From Dutchess- virtual reading groups facilitated by FSSs (1 in Spanish) have been a great way to keep families connected who are not yet receiving in home visits.

From Brookdale- Use working toward in-home visits as an FGP goal for families.

From Monroe – Calling staff meetings a “Peer Meeting” instead

From Wayne – “Speak Life” into the Visit, being exciting, taking little steps

From Morris Heights- limit news intake, listen only to enough to be informed, this helps with staying focused on what we’re in the homes to do.

Various sites liked the idea of sending one letter (Schenectady idea) or a video (Clinton idea) out to all participant families so they all hear the same information about your program’s safety protocols and procedures.

### **Further info needed?**

Multiple sites- need continued transparency and information from Central Administration on pandemic protocols and requirements.

Chemung wondered if we knew when HFNY’s “pandemic designation” might end.

Oswego had questions about discharges, Lisa will contact for more info.

Tioga wondered if others had seen higher rate in turnover. Might be another forum topic 😊

Group was reminded about Central Administration document that has been updated, “Considerations for Resuming In-Person Home Visits:”

<https://www.healthyfamiliesnewyork.org/Staff/Documents/Considerationsforresumingihv032021.pdf>

And the location of the notes from all of the supervisor forums:

<https://www.healthyfamiliesnewyork.org/Staff/SupervisorForums.htm>