

Supervisor Forum

Topic: Family Support Specialist Engagement and Retention

Date:10.27-28.20

Cap/MH Attendance (4.27.21 AM): Schenectady, Herkimer/Oneida, Allegany/Cattaraugus, Dutchess, Madison, Delaware, Rockland, Broome, Sullivan, Corona, Albany, Columbia
NYC Attendance (4.27.21 PM): Morris Heights, Dutchess, Ulster, Parkchester, Brookdale, Central Harlem, Jamaica, Sunset Park, Westchester, Franklin, Bushwick
CW Attendance (4.28.21 AM): Oswego, Ontario/Yates, Steuben, Schenectady, Tioga, Chemung, Cortland, Jefferson, Wayne, Broome, Orange, Buffalo
The list includes multiple participants from some sites.

PCANY facilitators/notetakers: Ellen Butowsky and James Porter

What has been working?

- The Service Plan (SP) keeps us focused on risk factors and following through with addressing them
- The supervisor updating the SP document during supervision as they discuss the family
- Managing the SP is too much for one person – it needs to be a collaborative effort. Involving the FSS each step of the way so that they understand each part of the process and feel a sense of “ownership” of the SP
- Use of the SP can generate excitement and confidence for FSSs because they have a clear plan for how to address risk factors
- Supervisor starts the SP and enters the risk factors
- FRS starts the SP and enters the risk factors and protective factors
- At our program, the FSS both writes the HV Log and updates the Service Plan at the same time. The result is that we’re both on the same page during supervision.
- Using computer technology (Zoom shared screen, multiple monitors, etc.) to facilitate the collaboration and make toggling between documents easier.
- Having the form as part of the MIS makes working with the SP easy, and brings it front and center

Challenges

- If I wait to update all of the SP’s myself once a month, it’s a very tedious process (not working).
- Finding a sense of flow with the SP process and truly integrating the SP into supervision discussions
- Knowing how little or how much to include when documenting implementation
- How to document instances where the home visitor establishes a plan during the visit before a plan has been established within the SP
- Concern about adding to home visitor’s workload by requiring that they update the SP
- Staff see the SP as a “report card” on their work as an FSS

Ideas moving forward

- There is no MIS report to track when the Service Plan is discussed or updated, but supervisors can use the “Supervision Cases Discussed” report (under Accreditation on the reports list, the 3rd page), which tracks in-depth discussions, which is typically when SP discussions occur.
- Supervisors have the leeway to document updates to the SP in whatever manner best supports the work with families.
- Have FSS be involved in documenting. Use a “how about we try this for a month” approach to address possible resistance
- While recognizing that the FGP (family’s plan) is different from the SP (program’s plan), find ways to assure family has input into the items the program is attending to from the SP

Where more support/information is needed:

- Suggestion: automatically migrate risk factors from the Parent Survey to the Service Plan
- Suggestion: make the Parent Survey and the Service Plan into one document or tab to integrate these documents/processes and to avoid toggling back and forth between the two
- Suggestion: make the Home Visit Log “speak to” the Service Plan, in the same way that the Service Referrals automatically take you to that form in the MIS.
- Suggestion: assure that all guidance about the SP aligns (training materials, forms, MIS, OCFS site visit tools)