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A Formative Evaluation of Supervision in Residential Care Programs for
Children and Youth
by

Dawne MacKay-Chiddenton

A Practicum Report
Submitted to the Faculty of Graduate Studies
in Partial Fulfilment of the Requirements
for the Degree of

Master of Social Work

Faculty of Social Work
University of Manitoba

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THE UNIVERSITY OF MANITOBA

FACULTY OF GRADUATE STUDIES
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DAWNE MACKAY-CHIDDENTON©1999

Abstract

Residential group care services for children and youth are currently viewed by many in the child welfare system as the least favorable service option in the continuum of out of home care services. This negative view is held by many child welfare practitioners despite the fact that residential group care services are often the most appropriate choice for many children and youth with troubling behaviors. One of the reasons for the persistence of this negative view is that there continues to be a lack of evidence documenting the critical components of effective residential group care services. In this study, it was theorized that the quality of staffing should be defined as one of the critical components of effective residential care service. Further, it was theorized that the quality of supervision received by care giving staff has a direct and an indirect influence on the quality of care received by clients and upon outcomes for clients. This formative evaluation project was designed as an exploratory-descriptive study to investigate the quality of supervision received by staff in two child and youth serving agencies in Winnipeg, Manitoba. A quantitative-qualitative methodology was used to measure staff satisfaction with supervision received, preferred style and type of supervision received, and predominant supervisory orientation. Kadushin's (1992) model of social work supervision which identifies three predominant and necessary functions of supervision: administrative, educative and supportive, provided the framework for the evaluation. It was theorized that residential care staff would prefer and require a supportive approach to supervision. Results indicate that staff are very satisfied with style of supervision received presently, and that they would prefer the supportive approach to supervision. When staff report job dissatisfaction, results indicate it is directly related to feelings about supervision. Supervisors appear to have a moderate concern for people and a low concern for task according to their scores on the supervisory orientation grid, a variation of Blake and Mouton's Managerial Grid. The purpose of the practicum was to use the evaluation results to recommend

practice guidelines regarding effective supervision processes in residential care services for children and youth for the participating agencies. In addition, the practicum was intended to inform provincial policy development regarding administrative standards in quality assurance reviews. Further evaluative research designed to investigate the nature of the relationship between quality of supervision and client outcomes is recommended.

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CHAPTER I

INTRODUCTION

Residential group child and youth care services are comprised of a number of different types of programs in the child and family services continuum. Each specific service within this spectrum shares the common element of caring for groups of special needs children and youth on a 24-hour per day basis (Pecora, Whitaker & Maluccio, 1992). The types of services offered in residential group care typically include residential treatment centers, group homes, crisis and shelter facilities, inpatient psychiatric services, and respite care facilities (Pecora, Whitaker & Maluccio, 1992, p. 405)

It is well known by many child and youth care and child and family service practitioners and corroborated in the literature that, in general, residential care service provision is still often viewed with some antipathy by the members of the general child welfare system (Pecora, Whitaker & Maluccio, 1992). This negative view of residential child and youth care services is challenged by the observation of practice in the field where many dedicated and committed child and youth care practitioners provide a high quality group care service. The literature indicates that there are several specific reasons for the "less than positive" view of child and youth residential care services; some of these reasons are founded on the following concerns: that there remains a system wide absence of evidence of residential care treatment effectiveness; and, that there continues to be difficulty in documenting and agreeing upon the critical components of effective residential services and ensuring their presence through quality control procedures (Pecora, Whitaker, Maluccio, 1992).

Further, these authors stress that such concerns are directly related to basic questions concerning policy and practice in residential group child and youth care service that remain unanswered (Pecora, Whitaker & Maluccio, 1992). The questions of most significance to ensuring high quality care services include the following: What are the critical ingredients in successful group care

programs and how can they be implemented, monitored and maintained; and, how should we measure success in residential child and youth care?

Purpose of Practicum

This practicum project was designed as an inquiry into such group care policy and practice questions. Specifically, it was theorized that the quality of staff supervision as perceived by child and youth care staff has a direct and critical influence upon the quality of their performance, which in turn, has a direct impact upon outcomes for children and youth in care. It was also theorized that both staff supervision and the quality of staff performance also have an indirect impact upon child and youth client outcomes in terms of their influence upon the cultivation of a positive living environment for children and youth in group care. The relevant literature indicates that these process variables are to be viewed as critical ingredients influencing success in group care programs, regardless of the specification of the treatment program. The practicum was intended to explore and investigate this theory, making the results available to inform policy and practice in child and youth group care services in Manitoba.

The implementation of this practicum project was also intended to serve as a personal, professional, learning opportunity for the MSW student. The primary learning goals of the student were to develop the knowledge and skills required to successfully conduct a process evaluation study. The implementation of this practicum project was also intended to provide the student with the opportunity to develop the skills necessary to attempt to promote the utilization of evaluation results both in practice in the field of child and youth residential care, and in the development of service delivery policy in Manitoba.

The primary objective of the practicum project then, was to evaluate staff satisfaction with supervisory performance in a sample of community based residential treatment centres in Winnipeg. These staff variables have been identified in the literature as belonging to the group of interpersonal process variables which are thought to have a critical influence upon residential group

care service effectiveness. This exploratory research was carried out as a demonstration project. The intent was to provide empirical evidence for the suggestion that it is necessary to include staff process variables in the measurement of the quality of care in residential group care. This intent relates to another relevant personal learning goal. The student's twenty years of practice experience in the field of child and youth residential care both as a front line child and youth care practitioner for eleven years, and as a supervisor, for nine years, had a significant personal and professional impact upon my ideas and observations regarding effective service delivery and the nature of the caring task. Child and youth care practice in residential care is both a tremendous opportunity and a tremendous responsibility. The front-line staff providing day to day care are in a critical position to establish the caring relationship, which holds the promise for growth, development and emotional health for these emotionally damaged children and youth. The theoretical basis of this evaluation was built upon this experience. I observed that supervisory and leadership practices in a residential care agency do, in fact, have a significant impact upon the quality of care received by children and youth, as described. Thus a significant learning objective was to investigate whether or not there is empirical validation for this observed relationship. In addition, if the empirical evidence corroborates my observations and this theory, then there is justification for the development of recommendations to the provincial government to incorporate staff process variables in the evaluation of residential care services in Manitoba.

In concert with this learning objective, the development of this practicum project was also prompted by a strong commitment to the evaluation of the quality and effectiveness of social services. Due my practice experience, a primary interest is in the evaluation of children's and family services, with a focus on the evaluation of treatment effectiveness at the agency level (Benbenishity, 1989).

Another important motivation was the consistent observation that, besides the fact that routine evaluation of treatment outcomes is rare in services for children and youth (Briar & Blythe, 1985), current program evaluation methods usually neglect to give systematic attention to the agency context in which services are delivered (Reid, 1988). Specifically, I have observed that staffing issues, including issues around supervisory and administrative practices, prevailing unit climate, and staff morale, are often inadequately addressed in program evaluation efforts, if addressed at all. In addition, although present quality assurance activities such as the collection of data on clients served, assessment of service cost, monitoring the quality and continuity of care and similar endeavors, address many very important issues in the evaluation of child and family service programs, they may often fail to address the issue of service effectiveness (Peterson & Bickman, 1988).

In almost every respect, staffing can be seen to be at the heart of all child and family services in terms of both the quality and the cost of such services (Nelson, in Yuan & Rivest, 1990) The child and youth care staff working in direct care are the very instruments of residential care service delivery, and their attitudes regarding their work will, for better or for worse, affect outcomes for the children and youth in their care (Patti, 1983). Therefore, as staff variables are one of the most, if not *the* most, important factors in attempts to account for variance in program outcome, and in distinguishing successful from unsuccessful programs in residential care services (Peterson & Bickman, 1988), it behooves us to closely examine staff variables in our program evaluations and in quality assurance review processes.

The Suche Report and Quality Assurance

The Manitoba Independent Review into Child Abuse Reporting Procedures in Children's Residential Care Facilities was established in 1991 as a result of the recommendations of an incident-specific review of Knowles Centre which investigated allegations of child abuse against staff by former residents (Suche, 1992). The terms of reference of the Independent Review included the area of personnel practices in the residential child and youth care system in Manitoba: specifically screening, training, and supervision of staff. The results of the review were incorporated as The Suche Report in 1992. The Suche Report noted that there was often a gap between the written philosophies and policies of organizations regarding professional practice and actual staff practice. The Report indicated that their observation of prevailing low staff morale and ineffective and/or poor supervision within the residential group care system was demonstrated to the team by the sometimes questionable conduct, attitudes, and practices by staff.

As a result of these conclusions, The Suche Report (1992) recommended that a basic supervisory training program should be developed, implemented, and funded. The Provincial government implemented a system wide supervisory and management competency-based training (CBT) initiative in 1994. This training initiative was developed by the Institute of Human Services and was delivered as a one shot training program. The training initiative has not been evaluated in terms of its long term effectiveness. The residential care supervisory and management training was delivered following the implementation of a system wide individual supervisory training needs assessment. The training was comprised of six curriculum modules which were developed as a result of the training needs assessment. There were 21 days of training delivered to two groups of thirty supervisors and managers. The modules included training in areas entitled for e.g., "Leadership , Administration and Support"; "Developing Productive Work Teams"; and "Supervising and Managing Group Performance". Currently, the training needs of supervisors has

reemerged as an issue that needs to be addressed in the system. This issue has been identified by program managers involved in the Residential Care Competency Based Training Curriculum Working Group, and by other supervisors and managers in the field. Presently, supervisors in the residential care system access supervisory competency based training via the child and family services CBT system. Child and youth residential care staff satisfaction with supervision has never been systematically evaluated, and there are presently no clear program standards regarding staffing and administration included in the provincial government program standards manual. The province is in the process of developing administrative program standards for both the child welfare and residential care systems. Standards regarding the process of supervision will then be evaluated by the province's quality assurance process. Presently, supervision processes are audited for information purposes only, and compliance with recommendations in the area of administration can not be enforced.

The Quality Assurance Program Residential Care review process was implemented in 1993. The stated purposes of the quality assurance reviews are to strive for the highest quality service possible by ensuring compliance with Child and Family Services Program standards; to obtain an understanding of how treatment and services are provided through discussions related to philosophy and service provision; to evaluate the level of consistency between stated philosophy and goals, and the provision of service; and to encourage ongoing self evaluation by residential care service providers. Quality assurance audits are designed to measure compliance with program standards. As mentioned previously, in the absence of administrative standards, supervision, management and training concerns can only be audited on an informal basis. The quality assurance review process includes interviews with facility Board members, agency director(s), supervisor(s), all child and youth care staff, placing agency workers, collateral contacts, all current and selected past residents, and their parents, where appropriate. In addition to the interviews, all

children's residential care files are audited, and the facility's policy manual, personnel files and administrative records are reviewed to ensure compliance with program standards. Inspection and observation activities are conducted which include attending staff and residents' meetings and observing at least four hours of an evening shift. The resulting Quality Assurance Report includes an annotative report, recommendations by the review team, and facility plans for changes pursuant to the review recommendations.

The quality assurance process does attempt to evaluate some staffing variables. The method used to measure staffing variables identified as training, supervision, and personnel practices in the quality assurance process includes interview questions asked of the director(s) and supervisor(s), and of youth care staff.

Residential care supervisors and directors are asked three questions regarding staffing variables in the quality assurance review process:

- How is staff supervision provided? Is there a formal process to monitor if this is occurring?
- What are the organization's expectations and requirements regarding training? Has in-service training been provided?
- How do you assess the training needs of staff?

Interview questions related to supervision, training and personnel practices which are asked of child and youth care staff are:

- What staff training events have you participated in?
- In what areas do you feel that you need to upgrade your skills?
- Do you receive regular supervision? (*Describe frequency, elements*).
- Do staff have input into revising policies and procedures (*How?*)
- Are annual performance appraisals completed? What does this consist of?
- How frequently are staff meetings held? What is discussed?
- How are staff issues and conflicts resolved?
- What do you view as the facility's strengths and weaknesses? What are your suggestions for improvement?

Evaluation Questions

The exploratory questions which were the focus of the evaluation research are:

1. Are child and youth care staff satisfied with the supervision they presently receive?

2. What type and frequency of supervision do child and youth care residential care staff receive presently? (i.e., the formal, conference type, or , the informal, "on the run" type);

3. What is the focus (style) of the supervision (i.e., the primary "supervision modality": focus on the educative, supportive, or, administrative functions), that child and youth care staff receive? Which "style" would they prefer, and why?

4. How do child and youth care staff and supervisors perceive the relationship between unit program effectiveness and the quality of supervision received by staff?

Utilization of Evaluation Results

The results of the evaluation intervention were reported back to the participating agencies and were incorporated into suggestions presented to the participating agencies regarding supervision processes in their agencies. The results will also be available to the Child and Family Support Branch and could be used to inform the development of administrative program standards in the area of supervision. This process of informing practice in the child and youth residential care system in Manitoba comprises the conclusion of the evaluation intervention.

It is acknowledged that while this study is primarily research oriented, it was designed as a practicum because of the intention to use the outcomes of the evaluation to inform the provincial quality assurance process and participating agency supervisory practices. The process of informing the Child

and Family Support Branch was initially planned to be quite extensive, and the Child and Family Support Branch was negotiated as a practicum setting with Branch staff at the outset of the project. This aspect of the intervention received reduced attention in the final report due to less interest by Branch staff in the final stages of the project. A major structural reorganization of roles and responsibilities at the Child and Family Support Branch occurred during the time frame of the practicum. At the time the practicum was negotiated, Erma Chapman, the agency practicum supervisor, was the Residential Care Quality Assurance Program Officer, and she is no longer responsible for this particular program area. Reorganization and the change in Dr. Chapman's responsibilities may have influenced the level of interest in the intervention results at the Branch. These changes were not anticipated at the outset of the project.

The evaluation study was carried out in two local human service organizations who operate residential group care treatment centres. Results were presented to the agencies and this presentation is intended to serve as the secondary piece of the practicum intervention in lieu of presentation to the Support Branch.

CHAPTER II

LITERATURE REVIEW

The literature selected for review in this evaluation intervention practicum project comprises the theoretical rationale for the exploratory research questions. The literature review also was used to inform the selection of the design methodology used in the evaluation research.

The relationship between organizational effectiveness and leadership is an elusive one, and has fascinated academicians, theoreticians and researchers for decades. The literature review first presents an overview of the theory of organizational effectiveness. Patti's theoretical premise of the measurement of service effectiveness in human service organizations is then discussed.

Following this, the literature on social work supervision is reviewed in some depth in terms of its history, uniqueness, form and function. Previous research into the relationship between social work supervision and various human services staff performance variables is also presented in considerable detail, as this literature also contributes to the establishment of the theoretical premise for the practicum project. Finally, the context of child and youth residential care practice, and supervision applied within that context, is briefly reviewed. The literature review is also used to establish that social work supervision models are directly applicable to supervision in the context of children and youth residential care services. This literature supports the premise that the modality of supportive supervision, as defined by Kadushin, emerges as the most effective primary supervisory focus in a model for child and youth care practice.

Finally, the literature review concludes with a brief presentation of program evaluation methods and indicators of effectiveness appropriate for use in residential child and youth group care research. This final aspect of the review is intended to validate the selection of measures and methodology approaches.

Organizational Effectiveness in the Human Services Organization

Effective leadership in managerial and supervisory roles in human service organizations is a significant predictor of successful HSO organizational performance. This is by no means a new, or radical, idea. It has long been accepted in the management and organizational development (OD) literature that leaders' traits, style and methods need to be closely studied in terms of their relative impact upon organizational effectiveness. The OD literature stresses that the pursuit of this type of research must be based upon empirical evidence that indicates exactly how certain job behaviors of leaders relate to organizational effectiveness. Further, this literature describes the primary research task in this type of exploration as the explicit delineation of the various combinations of organizational circumstances and their relationship to the personal and professional characteristics and behavior patterns that are perceived as effective leadership (Campbell, Dunnette, Lawler, & Weick, 1970).

However, it is also recognized in the literature that the effective performance of an organization is an extremely complicated matter, not based solely upon supervisory and/or managerial proficiency. Research results indicate that some, even much, of the variance in organizational performance appears to be attributable to factors other than the performance of those in leadership roles (Smith, Carson & Alexander, 1984). The OD literature suggests that both leaders and their staff are influenced by numerous factors both within and outside of the organizational environment. Some of the most important variables that have been identified in the literature, include, for example, the social forces occurring in organizational work groups, the nature of the task technology and the organizational climate (Smith, Carson & Alexander, 1984).

Organizational effectiveness is also know to be influenced by such factors as the organization's goals and objectives, its stage of development, and the degree of functional integration among staff and the various organizational units. The organization most likely to be successful has been identified in this literature

as a tightly knit, efficiently functioning system of people and activities, composed of interacting units which are linked by both capable leaders, and by an efficient communication system (Olmstead, 1973). These successful organizations have been described as "self-actualizing" organizations, or "high performance" systems (Patti, 1983).

The developmental goals which are thought to be critical in order to reach organizational self-actualization, or organizational excellence, are: building and maintaining an organizational climate that supports and facilitates the performance of all program personnel, but particularly those directly involved in service delivery; conducting regular and ongoing program evaluation; and building a capacity in the organization that allows it to deal with internal problems and to adapt to external environmental contingencies (Patti, 1983).

Excellent organizational systems, or "self-actualized" organizations, then, are known to be characterized by high levels of staff motivation and loyalty to the organization, with mutual trust and confidence being evident between staff at all levels in the organization (Olmstead, 1973). Although many of these tenets have been developed through research conducted on non-human service organizations, all of the main ideas can be successfully adapted to the study of human service organizations (HSOs).

The relevant literature indicates that the scientific assessment of organizational effectiveness (OE) is an extremely complex subject (Spray, 1976). Campbell points out that the concept is one of the most pervasive, yet least well delineated constructs in the organizational management literature; it is a theoretical construct that has no direct operational definition, but instead constitutes a model or theory of what is meant by the term OE. Further, Campbell explains that it is not possible for any research concerned with the effectiveness of organizations to avoid using OE as a construct, or to avoid operating via some form of theory. Without the use of a guiding theory it is not possible to determine which variables are identified as significant in the measurement of organizational effectiveness (1976). The explication of Patti's

theoretical premise regarding human service organizational effectiveness will serve to identify those variables that should be measured in service effectiveness (SE) research, and to specify how these variables or the selected components of effectiveness, are interrelated or are hypothesized to be interrelated (Campbell, 1976).

First, I will briefly discuss the theory of OE. The concept of organizational effectiveness can be seen to be more or less directly relevant to all the participants involved in an organization's life (Goodman & Pennings, 1977). Indeed, it could be stated that the extent to which an organization is actively involved in the evaluation of its own performance reflects a crude measure of the organization's progress in terms of optimal effectiveness. In addition, organizational effectiveness must be seen as the ultimate criterion against which managerial performance is judged. Without focused managerial attention to organizational effectiveness, the welfare of both the organization, its clients and its employees is severely threatened (Steers, Ungson & Mowday, 1985). In its most simple terms, then, organizational effectiveness is defined in the literature as the ultimate goal of most organizations, and is seen as the primary responsibility of organizational leadership and its management (Steers, 1977).

Cameron points out that the assessment of organizational performance is traditionally approached from a variety of vantage points. He also states that the major challenge of program evaluation is to identify and isolate the most significant variables in distinguishing between effective, less effective, and ineffective organizations or programs. But, says Cameron, theorists and researchers have yet to agree on the most appropriate criteria for inclusion in conducting the evaluation of organizational or program effectiveness (1980).

Campbell (1976), who was one of the first authors to compile a synthesized list of indicators of organizational effectiveness from the empirical literature, identified over thirty indicators of OE. These indicators included measures such as productivity, efficiency, profit, quality, absenteeism, turnover, satisfaction, motivation, morale, control, conflict/cohesion, managerial task skills,

managerial interpersonal skills, participation, and shared influence, which are all staff process variables. Steer's (1975) review of the various approaches to assessing organizational effectiveness (O.E.) in the literature found that one criterion: "an organization's ability to adapt to its' changing environment" was mentioned in more than half of the studies he reviewed. The "ability to adapt" criterion was followed distantly by the measures productivity, job satisfaction, profitability and the acquisition of needed resources (Steers, Ungson & Mowday, 1985).

Cameron (1980) outlined four major approaches which program evaluators typically use to define and assess organizational effectiveness. The first and most widely used approach defines effectiveness in terms of how well an organizational accomplishes its goals. A second approach, known as the system resource approach, assesses effectiveness based on the extent to which the organization can access needed resources. The third approach to organizational effectiveness focuses on how well the organization manages its internal processes; that is, whether its internal functioning is smooth, and staff relations are characterized by trust and openness. The fourth approach to the evaluation of organizational effectiveness is known as the strategic constituencies approach, which defines effectiveness as the extent to which all of the strategic constituents are at least minimally satisfied. Cameron concludes that none of these classic approaches to organizational effectiveness are appropriate for assessing the effectiveness of service organizations. What is required in the evaluation of HSO's is some criterion of relevance which serves to direct attention to a limited, manageable, and directly related number of concepts and relationships (Spray, 1976). The organizational characteristics that are consequently abstracted and grouped together as the selected indicator variables will represent what the evaluator considers most important in the assessment of organizational effectiveness in terms of human service delivery (Spray, 1976).

Service Effectiveness in the Human Services

Rino Patti (1983, 1985) stresses that the performance outcomes that social welfare administrators value must be considered central to an HSO performance model. Further Patti (1983, 1985) states that there are several dimensions of organizational performance that are particularly salient for HSOs. Patti proposes that the concept of service effectiveness must be used as the principal criterion of any evaluative model of HSO effectiveness. Patti's thesis stresses that the use of the criterion of service effectiveness as the principal guiding mission of human service organizations is to be viewed in much the same way as profit or market share is seen as the bottom-line in business organizations. The main premise of Patti's model is that service effectiveness should be the criterion measure as opposed to the other measures of organizational performance as described by Cameron (output, efficiency, resource acquisition, and the satisfaction of organizational members), as it is most congruent with the prevailing values and purposes of the human service professions. It is important to note that this is not to say that the other measures are to be ignored; no human services organization would survive for long if it pursued one evaluative criterion to the exclusion of the others (Steers, Ungson, & Mowday, 1985).

Expanding upon the idea of using service effectiveness as the principle HSO performance measure, Patti explains that the concept of service effectiveness can be seen to be concerned with three distinct outcomes of organizational performance. The first is concerned with the extent to which the agency is successful in effecting desired changes in the client system to which it provides service. The second is concerned with service quality, or the extent to which an agency is competently implementing methods and techniques thought necessary to achieve change. Lastly, service effectiveness is concerned with the extent to which consumers of services are satisfied with the quality or impact of the services received. Further, Patti states that when operationalizing measures of HSO effectiveness, it is important to consider that the choice of

measures will depend upon the type of services offered by the agency. Patti explains that in order to tie the assessment of individual agency management practice to organizational performance, we need to first define the social purpose, or primary function of the agency. This determination will influence the choice of the outcome measures.

The core of an effectiveness driven model for the evaluation of management is the examination of the relationship between managerial and supervisory practices and organizational arrangements on the one hand, and service effectiveness on the other (Patti, 1988). In human services organizational assessment, the structural variables of the organization should be examined to assess how they interact with the interpersonal processes to create the working environment (Patti, 1980). Ultimately, says Patti (1985), we should be able to prescribe what administrative and/or supervisory actions are necessary to support the delivery of service technologies at the front line in a way that maximizes service effectiveness.

The contextual analysis of supervisory practices reflect a nonlinear, system-oriented, and holistic way of viewing organizational effectiveness evaluation. In this type of evaluation we are looking for patterns of relationships among the supervisor, supervisee and the organizational context in which they operate (Hunt, 1991). Context specific evaluative research in terms of supervision processes refers to the evaluation of the operation of supervision within the organizational context. Context specific knowledge regarding supervision allows us to stress which supervision models are most appropriate given the organizational context (Hunt, 1991). We are, therefore, interested in the examination of the interplay between process and outcome.

Brendtro, Brokenleg & Van Brockern stress that, although positive individual relationships between adults and youth are the very foundation of successful programs in youth services such as group care and treatment, they are not sufficient in and of themselves (1990). Four other kinds of relationships are also crucial to the development of the reclaiming environment - these are

youth peer group relationships, staff teamwork relationships, staff relationships with parents and staff, and staff relationships with organizational leadership. These, and many other, authors stress that there is a significant body of evidence in the relevant literature to support the idea that administrative and supervisory leadership styles are of critical import in developing an effective residential child and youth care organization. Further, they state that if we have determined theoretically that these relationships are critical, we should systematically evaluate them. Staff should evaluate their relationships with colleagues and with their supervisors. Parents should evaluate the program from the vantage point of consumers (Brendtro et. al., 1990). These evaluation results can then be shared with program staff so they can use this information to help maintain or improve the interpersonal climate of the reclaiming environment. This is the intent of this formative evaluation practicum project

Supervision: Functions and Meaning

The primary function of human service supervision in the organizational context is to promote and enable the effective task performance of professional staff in providing high quality and effective services to their clients (Bunker & Wijnberg, 1988). The core of the supervisory function in the human services is the art of leadership: the ability to form and maintain goal-directed relationships with a group of staff in order to facilitate the provision of excellent service to clients. Bunker and Wijnberg (1988) identify several key social service supervisory functions which include the following: articulating and adapting the organizational unit's service model; monitoring and managing unit and organizational climate; fostering individual and team development; facilitating group cohesion by developing team-work capabilities; participating in agency planning; representing the unit and its requirements to other parts of the organizational system; coordinating work activities; clarifying goals within individual cases; promoting problem solving, and managing the unit's daily service operations (Bunker & Wijnberg, 1988). The core activity of the HSO is

the delivery of services to its client base; all other levels of the organizational system have been created in order to support and make possible the effective accomplishment of this primary task. The role of the supervisor in the HSO, then, can be seen to be fundamental to the service delivery task, as the supervisory position is in direct contact with those who are doing the HSO's most important work (Bunker & Wijnberg, 1988).

This theoretical framework pre-supposes that the supervisory role in the HSO is a critical one in terms of its significant potential to influence and enhance service effectiveness. It posits the supervisory position as one that meets the criteria defined in Likert's "linking-pin" position in an organization. A linking pin position is one which spans two or more units or levels in the organization, and, therefore, is in a critical position to determine the relative effectiveness of the organization, by being a point of information exchange within the organization (Graen, Cashman, Ginsburg, & Schienman, 1977). Bunker & Wijnberg (1988) point out that the role of the supervisor in the HSO transcends Likert's important idea of the linking pin function; the supervisory role in HSOs is more than a point of information exchange. Not only does the supervisor have direct access to the higher administrative level, she/he has active involvement in the provision of crucial information to that level regarding the competence and performance of the front line. At the same time, the supervisor is also actively involved in the provision of direct organizational support to the front line, or, to those staff doing the most important work of the organization on a day to day basis (Bunker & Wjinberg, 1988).

It has been proposed by many authors in the social work supervision literature that an examination of the structures, functions and processes of supervision can be used as an indicator or "barometer" of overall growth and/or change in the helping professions (Perlmutter, 1972; Abels, 1977; Kadushin, 1992; Middleman & Rhodes, 1985). Human services supervision relates both to the external societal context in which the work is practiced, and to the internal context of changing theory and practice (Perlmutter, 1972). To preface further

discussion regarding supervision in the human service organizational context, a brief review of the history of social work supervision is pertinent.

History of Social Work Supervision

The role of human service supervision, much as we are familiar with it in today's practice and theory, had its origin in the American charity organization society movement in the late nineteenth century (Abels, 1977; Bunker & Wijnberg, 1988; Kadushin, 1985, 1992; Middleman & Rhodes, 1985). At that time, the activities of the volunteer "friendly visitors", whose roles can be recognized as the forerunners of the roles of present day direct service workers, were overseen by "paid agents" of the charity organizations. Like present day supervisors, the paid agents were responsible to the agencies for the performance of the volunteer visitors (Kadushin, 1992).

As an indication that the process of supervision has been integral to the social work profession since its inception, Kadushin (1992) points out that the three major components of supervision, as he defines them, i.e. the administrative, educative and supportive functions, were clearly identifiable in the professional literature at the turn of the century. Also, the history of social work supervision indicates that the practice of supervision has occurred within the organizational context since the early beginnings of the profession. The establishment of education facilities to train the charity volunteer visitors in the early 1900's signified the beginnings of the close relationship between agencies and training facilities. This close relationship between agencies and training, the organizational context of social work supervision, and the fact that the social work profession, unlike the other counseling professions, supervises its workers before, during and after their educational preparation, are said to be the three of the most distinctive and unique factors of supervision in social work. These factors are also directly applicable to the process of supervision in child and youth care residential services.

During the 1920's to the early 1960's, the focus of social work supervision, as evidenced by the literature's focus at that time, mirrored the predominant type of service being delivered then: social casework (Kadushin, 1992). The practice focus of social casework has had the singularly most significant influence upon the development of traditional, clinical and dyadic supervision (Middleman & Rhodes, 1985). It is important to note that the focus on the individual case in supervision from the late nineteenth century inclusive to the first quarter of the Twentieth Century maintained a primary focus on ensuring that the charity volunteer, later, the social worker, was providing the best work possible for the client. The literature indicates that a major paradigm shift in supervision occurred in the second quarter of the Twentieth Century whereby the social worker became the focus of the supervision process. This is thought to be largely due to the influence of Freudian psychoanalytic theory. The primary focus of supervision became the educative development of the worker, and helping clients became secondary to that purpose (Harkness & Poertner, 1989). In the late 1960's and 1970's, the literature's focus began to indicate that this "quasi-therapeutic" supervision, with its primary focus on the individual worker's psychological and emotional growth and insight development, seriously conflicted with the administrative function of supervision. The main focus of the objection was upon the narrow focus on workers' interpersonal growth, the objectionable power dynamics involved in the relationship, and lastly, the supervisor's primary focus being deflected from the quality and effectiveness of the services delivered to clients. Middleman and Rhodes point out that the critics of this "worker-focused" supervision were assaulting what they call one of social work's most sacred cows (1985).

By the later 1960's, through the 1970's and 1980's, the literature indicates a growing concern with the poor administration of HSOs. Sweeping budgetary cutbacks, identification of inefficient and wasteful service delivery systems in HSOs, and the increasing concern with accountability issues suggested there was a change necessary in the focus of social work supervision. By the late

1980's the field of social work administration in general, and the practice of supervision specifically, seemed to have reached what Patti (1988) has termed a "conceptual and practice crossroads". Patti (1988) posed this issue succinctly when he asks whether social welfare administrators will continue down the road of management for survival, or whether they will make a choice to follow the second road, in a renewal of fundamental purpose. The renewal of fundamental purpose defined by Patti is a focus in supervisory and management practice upon the quality and effectiveness of the services delivered. This renewal of purpose is both timely and critical, says Patti (1988) .

Research in Social Work Supervision

There are a few studies that examine social work supervision in the context of its effect on client service effectiveness. Of the few studies that are reported in the supervision literature, the majority are based on the "counselor development model" and found in the clinical supervision literature. The counselor development role of supervision is largely used in the interdisciplinary training of counselors or psychologists. Interestingly, the clinical literature also reports that, although the need for evaluating supervision effectiveness is great, the incident of its occurrence is relatively low. The low incidence of evaluation of supervisory effectiveness exists even though the American Psychological Association requires the evaluation of counselor training and supervision in its accredited programs (Galassi & Trent, 1987). The measure of supervision effectiveness used in the counselor development model focuses primarily on process concerns. Specifically, development in the supervisor-supervisee relationship should be reflected in positive client outcomes. The measures are reported to be of limited value in the absence of a procedure to indicate that changes in the measure are in fact due to supervisory intervention (Galassi & Trent, 1987). Aggregating the results of single system designs has been proposed to further investigate this relationship, but this appears to be in a rudimentary stage of development. Certainly, the research on supervision in the

counselor development model can be seen to be pertinent to clinical social work supervision, in the sense that there is a potential to relate supervisory effectiveness to counselor development, and counselor development to counseling effectiveness, which can be directly related to client outcomes. However, it has little practical utility for program evaluation efforts with a focus on the administrative concerns of the supervisory process.

Kadushin (1985) points out that if we categorize the literature and the research findings on the characteristics associated with competent, effective supervision, two types of factors show up repeatedly. One cluster of factors relates to "getting the job done"; seeing to it that the people who are doing the job are provided with the facilities, services, information and skills to do the job well. He calls these the "task centered, instrumental consideration" of supervision. The second cluster of factors is associated with seeing to it that people who are doing the job are relatively comfortable, satisfied and happy with their work. These, he calls the "people-centered , expressive" considerations. Kadushin states that the expressive tasks "meet the need for system maintenance" (1985, p.198). This function permits the achievement of instrumental organizational goals; without adequate attention to expressive considerations, or system maintenance, organizational performance will suffer, and the HSO may fail to meets its objectives (Kadushin 1985, p.199).

Another primary purpose of the supervision role in a HSO, is to affect the climate of the organization so that the workers feel empowered, excited, and inspired about the goals of their organization (Glisson & Dureck, 1988). The power to create such a climate lies in the supervisor's ability to influence the attitudes of the staff. Glisson & Dureck conducted a study in which the research sought to identify those particular dimensions of leadership which are known to affect the attitudes of workers, which in turn are likely to promote service effectiveness. These data show that effective supervisors are those who influence supervisees to want to do their jobs by helping them feel strong and responsible, to feel that they know what needs to be done to accomplish goals,

to feel a part of a cohesive team, and to take pride in which they are doing. The authors indicate that the best overall index of effective leadership was the organizational climate. (Glisson & Dureck, 1988). Organizational climate is known to be reflected in the attitudes of the front line workers to their work.

Glisson & Dureck further indicate that human service technologies are particularly sensitive to the influences of the organizational context or climate (1988, p.64). To a great extent, front line workers derive their sense of the organizational climate in which they work from their supervisors: "In this sense, supervisors are prospective mediators of experienced climate for the majority of organizational employees" (Bunker & Wjinberg, 1985, p.62). Because the attitudes and emotions of professional human service workers are a part of the "raw material" in their interactions with clients, their attitudes toward their work can be seen to be directly related to the work outcome, and to service effectiveness.

Packard's study (1989) of supervisory styles in child protection services is significant in this research literature. Prior to this work, few research studies had linked the variables job satisfaction, staff participation in decision making, and service effectiveness. Packard indicates that previous research in fields of practice other than social work have established that these variables are strongly correlated, but causality has not been conclusively shown. The results of Packard's study demonstrated that participation in decision making correlated significantly with job satisfaction. He concluded that the idea of enhancing participation in decision making is a key one for supervisors as it relates to improved social service organizational performance. (1989, p.71)

Many authors have shown that human services staff burnout appears to be related both to job dissatisfaction and to staff dissatisfaction with supervisory style. Zischka & Fox emphasized that the following characteristics of poor supervision all strongly contribute to burnout : poor communication, lack of support and feedback, unrealistic demands, lack of variety and autonomy in job tasks, centralized decision making, and imposing perceived high pressure upon

staff (1983). A strong predictor of burnout is organizational climate. When combined with poor, autocratic, non-supportive supervisory style, the predictive ability of the climate variable is strengthened (Zischka & Fox, 1983).

Granvold (1978) cited previous research regarding the tendency of social work supervisors to score high in "consideration" and low in "structure"; Structure and Consideration are dimensions on the Leadership Opinion Questionnaire (LOQ). The LOQ is based on the theoretical premise that effective supervision requires the demonstration of high levels of both consideration and structure. Granvold's premise is that social work supervisors tend to focus their energies on the development of collaborative relationships with their workers (consideration), and support workers' objectives in the organization, perhaps at the cost of facilitating organizational objectives, or, service effectiveness, (structure). In addition, Granvold's study findings corroborated previous findings cited in the literature, and suggested that, not only did the supervisors fail to evidence both structure and consideration in their relationship with supervisees, but that their attitudes towards such responsibilities were weak. Granvold stressed that a major implication of this research is that social work supervisors need training in the exercise of leadership to facilitate the fulfillment of both organizational and worker objectives. Further, these results have implications for the educational preparedness of social work supervisors, and suggests the monitoring of practical experience in supervision. Granvold indicates that these results also suggest a re-evaluation of the current practice of selecting supervisory personnel directly from the practitioner ranks without due consideration given to educational requirements.

Glisson & Durick indicate that, because HSO employees report very low levels of job satisfaction, as compared to other types of organizations, an understanding of contributing factors to job satisfaction in HSO's is very important (1980). Further, because job satisfaction and organizational commitment appear to play key roles in the occurrence of burnout and turnover in HSOs, the prescriptive implications of understanding the etiology of

satisfaction and commitment extends beyond concerns for the well-being of employees to include the quality of services delivered, and the well-being of the clients who receive those services, or, service effectiveness (Glisson & Dureck, 1980, p.64).

Glisson and Durick identify the variables that research in this area indicates contribute to either job satisfaction or organizational commitment for HSO staff. These include three categories of variables: job characteristic variables, organizational characteristic variables and worker characteristic variables. The authors point out that previous research has tended to examine one of the three categories of predictors at a time, making simultaneous comparisons impossible. Studies have also tended to examine the effects of the predictors on either job satisfaction or commitment, making comparisons between the relative effects of each predictor on either variable impossible. Finally, very little research has been conducted in HSOs regarding the predictive abilities of these variables. These authors point out that predictors of job satisfaction include such job characteristic variables as: role ambiguity, skill variety or complexity, role conflict, task identity and task significance. They define the organizational characteristic predictors as leadership and supervision. The worker characteristics, other than age and gender, have no empirical basis for their inclusion as predictors of job satisfaction according to Glisson & Durick (1980). Predictors of organizational commitment include such worker characteristics as age and tenure (in a positive direction), and education (in a negative direction). Predictors from the characteristics of job tasks that are shown to affect organizational commitment are role conflict, task identity, the extent to which worker expectations are met by the job tasks, opportunity for optional social interaction in completing tasks, skill level of subordinates, and job scope. The extent to which the organization is seen as dependable, and the quality of its leadership, in terms of structure, consideration and punishment behavior, have emerged as the most significant predictors of organizational

commitment in this particular research. This research is reported in some depth because of its significance to the theoretical premise of this study.

Glisson & Durick's study sample was comprised of 319 workers from 47 work groups in 22 different HSOs. Data was gathered regarding characteristics of both workers and their teams. The respondents appeared to have moderate levels of commitment and very low levels of satisfaction. The results indicated that the best category of predictors for job satisfaction included the category of the characteristics of the job tasks performed by the worker. These included: role ambiguity has a significant negative effect, and skill variety has a significant positive effect. The data indicates that leadership plays a significant but smaller role than in the results of previous research, and worker characteristics had no effect. Glisson and Dureck conclude that if human service workers' attitudes are a function of organization and job task characteristics, as their findings indicate, then the success of human services systems could depend as much on the organization and administration of the services, as upon the education and skill of the line workers. Previously, they point out, social services evaluation has focused either exclusively upon the examination of the worker client interaction, in other words, the clinical focus, or exclusively upon an organizational focus, often ignoring the extent to which clients have benefited.

Supervisors carry responsibility in their role definition for implementing agency goals and objectives in the supervisory process. As stated previously, supervisors are the "linking pin" between line staff and upper management. Competent, effectiveness-driven supervision may have a lot less to do with the educative or administrative function (Kadushin, 1992) than with a commitment to the support and advocacy of line staff. The supervisor's ability to support, to motivate, and to inspire her/his staff can be hypothesized, then, to directly affect client outcome and service effectiveness.

Malka conducted a study which presented a methodological analysis of managerial behavior in HSOs in Israel (1989). The purpose of the study was to detect meaningful relationships between managerial behavior and measures of

worker job satisfaction and absenteeism. Job satisfaction was measured using the Job Description Index (JDI) and absenteeism was measured by examining personnel attendance records. Managerial behavior was measured using Likert's Management Survey Instrument (MSI). The results indicate that participative managerial behavior is significantly, negatively related to unexcused absence (r = -.51), and positively related to job satisfaction (r =.52). Decision-making, goal setting, and control, emerged as salient measures of managerial behavior related to worker job satisfaction and absenteeism (Malka, 1989).

Himle, Jayaranthe & Thyness examined the effects of different types of social support given to workers by supervisors, and the accompanying effects of psychological strain, job satisfaction, and turnover among a randomly drawn sample (N=800) of clinical social workers (1989). Psychological strain was measured by four index measures: anxiety, depression, irritation and somatic complaint measures. Job satisfaction and turnover measures are described as traditional measures in the field. Work stress was measured by measures of role ambiguity, role conflict and workload; and social support was represented in four questions tapping emotional, appraisal, instrumental and informational forms of support. The results indicate that information and instrumental support offered by supervisors reduced psychological stress, and in turn may lessen burnout and job dissatisfaction. However, the effects of work stress on job satisfaction was not buffered by any type of social support. As well, emotional and appraisal support did not buffer stress in any meaningful way – except in intent to turnover. Himle et.al. make an important suggestion in their conclusions. They suggest that worker questionnaires evaluating supervisory behavior should be used regularly by organizations to ensure that workers are given these types of supervisory support. The authors also suggest that HSOs train supervisors to be able to give such support as a matter of organizational policy (1989).

Having conducted an analysis on the available research regarding organizational climate in HSO's, and its impact on service outcome, Bunker and Wijnberg present the view that the role of the front line supervisor is a possible

critical leverage point for reducing the impact of negative climate on social workers' performance (1985). Front line staff acquire much of their sense of the workplace from both the style and the substance of their supervisor's communications and behaviors, a premise that is acknowledged consistently in the literature, and presented previously in this review. Indeed, this premise is the foundation of Likert's "linking pin" function of supervision. As mentioned previously, the modal climate found in HSO's is characterized by alienation, low morale and low performance; in sum, the HSO climate is known to be negative. The authors present a range of four alternative observable supervisory patterns which could mediate the climate of the workplace. These are passive, climate-collusive; passive, counter-climatic; active, climate-collusive; and active, counter-climatic, which is the preferable supervisory style to support the delivery of service at the front line (Bunker & Wijnberg, 1985).

Smith criticized the professional social welfare literature because the relationship between supervision and the concept of service effectiveness has not been based on relevant conceptual frameworks, or empirical evidence, but rather upon broad value statements about what the relationship should be (1986). As well, this author's states that the few research studies that have addressed the theoretical formulations of supervision as encompassing the traditional functions of teaching, administrating, supporting, and evaluating, do not advance the state of knowledge of supervision in relation to service effectiveness. Therefore, Smith concludes, there still exists a need for research that explores aspects of the traditional components of supervision and any possible relationship to identified components of service effectiveness. The research data indicated that the respondents in her research agreed that a well coordinated system of clinical supervision is the strategy most preferred for facilitating and assuring the delivery of high quality community-based mental health services. This was hardly surprising, given that the respondents were all clinical supervisors. Sixty-nine percent of the respondents thought that supervisors could develop criteria to judge the quality of services. Thirty per

cent responded that quality of care can be judged only with respect to the achievement of client outcomes after services are delivered. All respondents agreed that the qualifications for supervisors must be demanding in order to assure that high quality services are delivered.

In a study of supervisory styles in a HSO, Russel, Lankford & Grinnell (1984) applied the Managerial Grid Model by Blake and Mouton to an assessment of the supervisory styles of social work supervisors in a large state agency in Texas. The Managerial Grid is a model that was devised to measure managerial or supervisory style in a four quadrant grid, with the 1,1 quadrant representing a style that shows both low concern from people and for organizational goals. A "9,9" type of supervisory style, on the other hand, indicates a style with the highest concern for people combined with the highest concern for organizational goals. The results of the survey are rather disconcerting, to say the least. Fifty-six per cent (N=24) of the supervisors perceived themselves as possessing the 1,1 supervisory style, and 48% (N=21) of the supervisees rated their supervisors the same. The average scores of the 1,1 supervisors represents two standard deviations above the mean score of the norm, as reported in the instrument's manual. Based on this norm, it would be expected that only 2-1/2% of social work supervisors would fall in this category. These results placed these supervisors in the one percentile of organizations with such a high percentage of 1,1 supervisors. Four supervisors rated themselves as exhibiting the 9,9 supervisory style, with three of their supervisees agreeing. In order to give the reader some indication of the significance of these results, some of the characteristics of the 1,1 supervisory style as outlined by Blake and Mouton are : the 1,1 supervisor has a philosophy of management that sees employees as incompetent and not willing to work; the 1,1's philosophy is often manifested in a cynicism which may be born out of frustration due to powerlessness on having any meaningful impact upon the organization. The 1,1 supervisor tends to approach evaluation as a necessary evil, conducted only because it is required by policy. Most importantly, in an

organizational climate influenced by a 1,1 supervisory style, problems are ignored, risks are not taken, decisions are avoided, and service delivery suffers. The Managerial Grid Model by Blake and Mouton indicates that the 9,9 "team builder" style of supervision is the style most positively associated with productivity and satisfaction. The 1,1 style is commonly used as a "back-up style" supervisors retreat to when under stress. The authors stress that the most reasonable explanation for the results may lie in the speculation that the knowledge, skills and abilities necessary for successfully applying the preferred 9,9 style of supervision may be lacking due to lack of supervisory training.

Rautkis and Koeske (1994) state that social work supervision has been considered an important predictor of job satisfaction in both theoretical and empirical work for many years. Previous research in the area of staff workload, stress and burnout has identified supervision as an important source of staff support, potentially mediating stress and burnout in human service social work settings. This relationship appears to be a contingent one, the authors state, with indications that it is only under conditions of low social support and low perceived accomplishment that workload produces greater staff burnout. These authors conducted a study which examined the direct and moderating effects of supportive supervision on the relationship between workload and job satisfaction for social workers (Rautkis & Koeske, 1994). The research results indicated that all the correlation coefficients between supportive supervision and job satisfaction were significant in a positive direction, indicating the greater the perceived social support, the greater the staff job satisfaction. Importantly, however, supportive supervision's relationship to job satisfaction was moderated by work load: when workload was low or moderate, supportive supervision enhanced intrinsic satisfaction, but not when workload was high. This data contains information which has potentially important implications for both theoretical and practical investigations into the relationship between supervision, job satisfaction and, service effectiveness. Supervisors may need to advocate on behalf of workers regarding the negative impact of workload upon service

effectiveness to administrators and managers, rather than continue to attempt to provide support which may clearly be ineffective in the maintenance of morale when workload is too high. The authors conclude that this data provides empirical support for the idea that supervisors have a responsibility to represent their unit needs to the parts of the system who have the power to allocate resources. Given that a function of supervision is to monitor the climate of the unit, and the empirical evidence exists to suggest that climate impacts upon job satisfaction, and is related to service effectiveness – the supervisory task needs to focus on the circumstance of increased workload less from the context of the individual worker and more within the organizational context (Rautkis & Koeske, 1994).

Grasso has suggested that current social work organizational structures, management models, and supervisory strategies, have failed to afford the direct service practitioner with the opportunities to improve performance in any meaningful way. Further, if current management practice causes conflict for the direct service worker, it is reasonable to assume that it is also negatively impacting upon the supervisor and the practice of professional supervision within the organizational context (Grasso, 1993). This author presents an alternative approach to management which integrates the use of both quantitative and qualitative information regarding performance. The supervisory approach he describes is referred to as the "developmental approach". It is based on the problem solving method and the task-centered approach that is used in therapy with clients. Grasso states that the developmental stage model provides an organizational link between the requirements of the organization, practitioner development, and the direct service intervention systems. Thus, it provides a framework for integrating management, supervision, and treatment. He illustrates nicely how a supervisor can use the approach with supervisees with regards to self development and stresses that performance appraisal in this model incorporates principles of both qualitative and quantitative evaluations. In summary, Grasso's developmental model of social administration focuses on the

improvement of organizational performance by centering on developing each worker in the organization.

Grasso (1994) also conducted research which investigated the question of how, and if, supervisory management style and worker job satisfaction were related to service effectiveness in a large child and family services agency operating multiple residential treatment settings for youth. Grasso presents the theoretical basis for the research in terms of the differences between what is understood as the measurement of organizational performance, productivity and effectiveness in organizations using exact technologies, as opposed to the assessment of organizational functioning in human service agencies, as has been presented previously in this report. Grasso concurs with Patti's proposition that the concept of service effectiveness should be seen to be the most appropriate measure of organizational functioning within human service organizations. The methodology of the research design used in Grasso's study was a two year replicated cross sectional design. Supervisory management style was measured using Likert's Management Survey Instrument (MSI), job satisfaction was measured by the Job Description Index (JDI), and service effectiveness was measured by four program outcome measures: percentage of families completing most or all treatment goals, percentage of successful program completions, percentage of clients being placed in less restrictive settings after completion, and the average three month post-placement score. The results indicated a significant positive relationship between team supervisory management style and overall job satisfaction (1989: r=65, p<.001; 1990: r=51, p<.001). The results did not reveal a statistically significant relationship between either supervisory management style and service effectiveness, or, between unit job satisfaction and service effectiveness. The question remains "If these two variables do not relate to service effectiveness, what conditions do affect it?" (Grasso, 1990). The author suggests that a multivariate analysis strategy should be conducted in order to study service effectiveness in human service organizations. He suggests that a multivariate

analytical approach to studying service effectiveness should include a single evaluative model, data on organizational properties, staff and client characteristics, and treatment approaches employed in the organization.

Harkness and Poertner (1989) propose that the historical shift from the conceptualization of supervision as essential to facilitating quality of service in terms of a focus on client outcome, to the conceptualization of supervision as primarily educative and focused on developing or training workers, resulted in the social worker agenda for supervision by-passing client interests, or, service effectiveness. These authors point out that even though this conceptual paradigm shift has been criticized by many, it has remained the predominant view in the conceptualization of supervision, and consequently, has dominated the supervision research for over thirty years. Harkness and Poertner further point out that conceptualizing supervision as "what a supervisor does, or should do", is a tautological definition which serves to deflect research questions that ask what supervisory behaviors produce what outcomes with what workers, clients and problems. These authors reviewed the empirical literature on supervision between 1955 and 1985 to determine whether any research was organized around the development of a conceptual framework concerned with client outcome, or, service effectiveness. None of the twenty-six research studies examined met the review criteria. Harkness and Poertner concluded their review by criticizing the empirical supervision literature due to the lack of a client-focused standard of relevance. They strongly suggest that a new research agenda is needed to guide the study of social work supervision (Harkness & Poertner, 1989). They stress that the study of social work supervision should concern itself with improving client outcomes, along with an evaluative focus to applied research in which experimental and quasi-experimental designs are preferred. Theoretical inquiry should be pursued by observing and analyzing supervisory and worker behavior relative to client problems and outcome. Supervisory practices can then be compared on the basis of client outcome. When systematic and significant differences are found, supervision theory can

be advanced by examining practice in context. Intervening and environmental variables can then be identified and studied. Some of the intervening variables that might be identified may include, for example, supervisor, worker and caseload characteristics, the nature of the client problems and goals and the context of agency practice.

The following sections will firstly examine the context of residential care practice and secondly, the supervisory process within that context. The literature review will conclude with an examination of the literature pertinent to the evaluation of residential care programs.

The Context of Child and Youth Residential Care Practice

Residential group care facilities for children and youth can be found in each of the major societal resource systems - mental health, education, social welfare and justice. The occupational title given to child and youth care practitioners within each service sector reflects the function of each societal resource system; with a treatment, teaching, nurturing and control function respectively (e.g., treatment staff, educational aide, youth and child care worker, juvenile counselor (Fulcher & Ainsworth, 1985).

Historically, residential group care services were provided within these systems by way of large institutions (e.g. mental hospitals and asylums in mental health, boarding schools in education, orphanages and workhouses in social welfare and reformatories/juvenile detention in Justice (Fulcher & Ainsworth, 1985). Over the past three-four decades, a corresponding range of smaller group living situations have been developed in response to the criticism of the degrading way of life in the larger institutions (Fulcher & Ainsworth, 1985).

Out of home care services have been reconceptualized over the last twenty years or so to be part of a comprehensive coordinated system of services that support children and their families. The more recent philosophy of out of home care posits the concept that, far from seeing the system as "substitute care", the many varieties of group care should be seen as supportive care. "Out

of home care in reality can rarely take the place of home and family for the child. Rather, its most important role is to support the changes necessary to move the family as well as the child, where possible, toward reunification or life in the community" (Stuck, 1992, p.484).

The life model of both social work and child and youth care practice is a model which incorporates a competency perspective. The competency perspective conceives of individuals and families as active, purposeful and as having the potential for growth, change, and development. The literature illustrates that the foundation of the philosophy of child and youth care practice is in the actual living situation as shared and experienced by the children and youth the practitioners work with. It is through the everyday life events that occur in the shared life space of residential care that opportunities for desired change, growth and developmental are found. The child and youth care practitioner thus uses the natural opportunities provided by the daily life events within the group care program, such as the provision of food, clothing, and play opportunities, as the foci for treatment intervention to raise a child/youth's level of functioning (Ainsworth & Fulcher, 1981).

The focus of child and youth care practice, then, is the use of planned interventions which exploit the total environment of a program, using time, space, objects, events, activities and exchanges between children/youth and significant others, either with staff or peers (Ainsworth & Fulcher 1981). As noted, child and youth care practice underscores the importance of the person environment interactions which are the crux of the life model. Central to the life model is the notion of competence (Maluccio, in Ainsworth & Fulcher, 1981), which takes note of the differences in capacity, skills, motivations, and recognizes environmental impacts on individual functioning.

Ainsworth & Fulcher (1981) have conceptualized an interesting framework of group care programming that incorporates the relationship between "direct care" child and youth care practice methods and skills, and indirect practice methods and skills, which includes supervision. Their model demonstrates

nicely the critical interplay between direct care practice and indirect care (See Figure 1).

Figure 1: Child and Youth Residential Care Program

Direct Care (Work with Children) CYC Practice Methods & Skills	⇔	Indirect Care (Work for and on behalf of children) Practice, Methods & Skills
• Provision of everyday personal care (food, clothes, warmth • Formulation of individual program plans	⇔	• Environmental planning • Design implementation and evaluation of unit program
• Developmental scheduling, play and activity based	⇔	• Administration and management of budgets
	⇔	
• Activity programming, recreation and informal education		• External relations with outside system
	⇔	
• Group work		• Program leadership and team Development
• Life space counseling	⇔	
		• Selection, training, performance evaluation of child and youth care practitioners
• Unit level program planning	⇔	
	⇔	• Directing, supervising, and monitoring of Child and youth care practitioners' work and unit program achievements.

*Adapted from Figure 1.6 and Figure 1.7 (Fulcher & Ainsworth, 1985), pp. 12-13.

Maier, (in Ainsworth & Fulcher, 1985), characterizes the relationship between the provision of primary (direct) care within the secondary care context (indirect, organizational) as "inherent strain". He stresses that the ecological impact of secondary systems upon primary relationships is directly applicable to residential group care:

> The nature of primary care in any children's center is strongly colored by the employment policy and the institution's pronouncement on the worker's roles within the total scheme. Such factors operate quite independently of the worker's personal and professional qualifications or the staff members' personal commitments to daily work tasks. (Maier, 1985, p.24)

Maier argues that the child and youth care worker's professional and personal stress is reduced through organizational support and the establishment of more manageable working conditions. Further, child and youth care workers, says Maier, should be provided with support and supervision for their 'care' work, rather than for their casework or paper work, so that their ongoing relationship and involvement with the supervisor enhances rather than deters their ability to provide nurturing care for children and youth. Maier thus recommends a primary focus on what Kadushin (1992) terms "supportive" supervision for child and youth care practitioners, rather than a primary focus on "administrative" supervision. An "educative" focus in child and youth care supervision would also, according to Maier, be secondary to the "supportive" focus in supervision (Kadushin, 1992).

Hughes and Pengelly (1997) offer an alternative view of Kadushin's traditional model. These authors suggest that we conceptualize the work of supervision in terms of two "triangular interactions between three participants" (p. 41): the supervisor, the practitioner and the service user. The three critical functions of supervision are managing service delivery, facilitating practitioner's

professional development and focusing on the practitioner's work. Hughes and Pengelly point out that the supportive function is excluded from their model. They suggest that to "speak of support as in itself a function of supervision is to confuse means with ends" (Hughes & Pengelly, 1997, p. 48). They explain that the supportive attitude of supervisors, which conveys to staff that they consider their feelings and values important, is essential to effective service provision. It is essential to all three functions in the triangle: managing service delivery, facilitating practitioner's professional development and focusing on the work. They stress, however, that if support is treated as an end in itself (of supervision), then there is a danger of the focus being on the worker's needs at the expense of a focus on the worker to provide better service, and on client's needs. This is an interesting caution and one that should be considered carefully in the examination of supervisory processes in residential care.

Haydn Davies stresses that when we contemplate the direction in which child and youth residential care services should be moving, consideration must be given to the changes which, if they had been implemented in the past, might have resulted in different outcomes for those children and youth for whom residential care has failed. These past failures are largely responsible for the skepticism with which the residential service system is viewed as described in the introduction of this report. Further, he states that this is a complex task, for it not only questions the nature and quality of the incidents which have occurred during the residential experience, it also considers the complex inter-relationships which exist between the physical, emotional, psychological and organizational environmental climates within the establishment which are so influential in determining the outcome of the residential experience (1995).

The residential care setting for young people is a complex environment; it is subjected to many varied influences which, together, create the psychological, emotional, and social climate in which the young people live and the staff work (Davies, 1995). Each element of the environment must be understood and "controlled" by the child and youth care staff who are responsible for ensuring

the quality of care provided for the residents. If any aspects of the environment are left uncontrolled, they could affect the life of the young people in an unplanned, arbitrary, and possibly, harmful way. Davies indicates that two of the most important determinants of the quality of care are: firstly: the quality of the direct care (child and youth care) and indirect care (supervisors and managers) staff employed within the agency, and, secondly, the extent to which those staff are regularly and appropriately involved with the young people during the normal occurrences and activities of daily life.

Daly (1989) outlines the characteristics of an effective living environment in group care services for children and youth in out of home care. Effective, harm-free environments are the result of well integrated child and youth care systems. The staffing characteristics of these systems include the following : the support of caregivers; a dedicated and skilled staff team; appropriate child to adult ratio; good training; adequate relief time; and, responsive supervision. Staff supervision models must include mechanisms that grant decision making authority, accountability and status to the direct caregivers. Supervisors should ensure that the front line or direct caregivers be involved in decisions regarding client admission, discharge, referral and treatment. Training of caregivers should emphasize the development of direct caregiver skills. Adequate and ongoing supervision is critical to ensure that: training and skill development is implemented, (i.e., training and the transfer of learning process is implemented and monitored regularly by the supervisor). Supervisors should be involved in defining and helping maintain the standards of quality care for program evaluation and internal program audits. Supervisors also have responsibility to ensure that all incidents are investigated and each child is confidentially interviewed periodically.

Thus, the child and youth care literature indicates that well trained and well supported direct care staff are the single most effective means of ensuring the safety and appropriate treatment of children and youth in residential care settings. Organizational and administrative support for staff orientation and

training, and appropriate staff supervision, then, are also critical, and are thought to be directly related to positive treatment outcomes for the children and youth receiving service.

Further discussion of the process of supervision in child and youth residential care services follows.

Supervision in Child and Youth Residential Care Practice

Davison stresses that the need to provide individual and professional supervision for residential child and youth care practitioners extends beyond the need to ensure that they are involved in good individual treatment work and care provision with the young people they work with (1995). Supervision must also provide an opportunity for direct care staff to sort out their own feelings, tensions and internal conflicts (Davison, 1995). He stresses that child and youth care practitioners deserve to be cared about and valued both for the job that they do, as well as for being the people that they are. Also important to consider, says Davison, is the situation within residential care services, whereby the concept that child and youth care workers have of themselves as valued staff is built upon the relative perceptions they have of their salaries, conditions of employment, training, continuing education opportunities, and their involvement in policy and procedural decision making. In most cases, says Davison, these child and youth care staff do an excellent job under the most difficult conditions. Sometimes, however, due to the nature of residential work, they can become stressed, tired and insular or "burned out", and thus less responsive to the needs of the young people they are providing care for.

Because residential care with children and youth can be such a stressful and wearying occupation, all residential care staff should receive at minimum regular planned supervision for at least one to one and a half hours, in private, every two to three weeks (Davies, 1995). During supervision, staff should be empowered to express the feelings which are involved in the caring task and be helped to understand those feelings in relation to their work. Further, supervisors

should assist staff in considering the appropriateness of their responses, evaluating their actions and feelings and exploring alternative strategies where necessary. This type of supportive process should be the focus of the supervisory session in child and youth care. It is critical that supervision not be merely the opportunity for one to one case review sessions (Davies, 1995).

Although supervision is seen as primarily a one-to-one relationship designed to help child and youth care staff develop their ability to carry out their work effectively, says Davies, supervision is also the ideal vehicle for enabling staff to raise issues of concern regarding the functioning of the unit, the appropriateness of organizational policy and procedure and the behavior of co-workers. Feedback, in general terms, helps in the assessment of identified barriers/challenges including the sources of stress, workload assessment and training requirements, staffing issues and group discord. Opportunities for staff to give feedback and have that feedback validated and acknowledged contributes to good practice (Davies, 1995).

Program Evaluation and Indicators of Effectiveness in Residential Care

Gabor and Charles (1994) point out that, in the human services, programs are often developed entirely based upon professional assumptions regarding treatment approaches and service delivery. These assumptions, in and of themselves, are insufficient justification for the program's existence. These authors note that program evaluation is the framework through which the validity of the professional assumptions and the effectiveness of the programs can be tested. Although HSO program effectiveness has been questioned in the past, current demands for accountability are more focused, requiring both specific performance measures and targets; program managers are, therefore, increasingly required to document the results of their work (Newcomer, 1997).

Gabor and Charles (1994) introduce program evaluation in treatment foster care as the framework for testing the validity of professional assumptions regarding program design and effectiveness. The indicators regarding

effectiveness in treatment foster care programs can also be used in evaluating the effectiveness of residential group care programs. One category of effectiveness indicators involves examination of the program components that are indicative of the quality of care given and received in a program. Treatment foster care home effectiveness program indicators that are relevant for the evaluation residential group care effectiveness include the care practices and overall milieu of the home; the rate of staff turnover and staff performance; the provision of specialized training; consumer reaction to service received; and public response to the program.

In their discussion of program evaluation in treatment foster care, Gabor and Charles (1994) further indicate that process questions become important after the program has been operational for a while. Process indicators relate to program practices and procedures and are indirectly related to outcome (Gabor & Charles, 1994, p.171). A process evaluation involves measurement of what was actually done during the course of a program to provide service and effect change (Reid & Hanrahan, 1988). Another purpose of studying program processes is to examine the relationships between process measures and other variables (Reid & Hanrahan, 1988, p.94). Examining these relationships can provide evaluative information about which operations are relatively more effective and identify factors that can affect program operations.

Newcomer states that performance measurement in non-profit HSOs addresses these issues (1997). Performance measurement is an inclusive term that refers to the routine interval measurement of program inputs, outputs, and short, medium and long term outcomes (Newcomer, 1997). Performance measurement addresses many program concerns including adherence to the standards of quality in service delivery, program outputs, identified key performance indicators and client satisfaction with services received (Newcomer, 1997).

Program evaluation consists of the systematic assessment of the extent to which programs can demonstrate that they have achieved intended results

(Newcomer, 1997). Evaluation may focus on program inputs, operations or results

Outcome measurement in program evaluation efforts refers to the extent to which program participants are experiencing the intended outcomes of the program service; outcome measurement provides powerful and useful feedback (Plantz, Greenway & Hendricks, 1996). Outcome measurement shifts the focus from activities (process evaluation) to results; from how a program operates (process evaluation) to the good it accomplishes (Plantz, Greenway & Hendricks, 1996, p.17). Program evaluation which combines both information on program process and outcomes will address the question regarding how specific program components contribute to the outcomes achieved (Newcomer, 1997); the specific program components are often referred to in the evaluation research literature as the "black box" of the treatment process. This idea is related to the suggestion that information regarding program outcomes or client outcomes is not useful without information regarding the treatment process, or the "black box".

Evaluating the effectiveness of residential programs for children and adolescents is an extremely complex task (Lyman & Campbell, 1994). One of the most important concerns in evaluation research in the area of child and youth services is the definition and measurement of 'outcome'. Wilson and Lyman (1983), in Lyman and Campbell (1994), make six recommendations concerning the outcome evaluation of group care residential programs. They are as follows: Outcome should be conceptualized and measured as multi-dimensional and multidirectional; measures should be designed to assess both positive and negative changes in a variety of behavioral or adjustment areas. Programs should use standardized, objective outcome measures to allow for both internal and external comparability of data. There should be inclusion of follow-up measures. Measurement of consumer satisfaction should include referral agencies, families and the youth themselves. Outcome measurement should acknowledge maturation and possible non-linearity of change - it should

explicate the relationship between the different components of treatment and outcome. Finally, the cost of treatment (financial or psychosocial) should be evaluated.

A significant weakness in the literature on effectiveness of group care residential services is its failure to adequately specify components of treatment (Lyman & Campbell, 1994). The number of possibly active therapeutic variables in operation in a residential program is extremely large and researchers need to specifically define and operationalize a large number of them. A similar error is to think that the totality of the residential treatment environment is indivisible and that it is impossible to explicate sub-components of the environment (Lyman & Campbell, 1994).

Another difficulty in studying the effectiveness of group care cited by these authors is that the subject numbers available within any one program at any given time are usually quite modest and statistical data analysis requires large numbers of subjects to reach minimal standards of validity (Lyman & Campbell, 1994). These authors suggest that the answer to this dilemma is to collect data across time or across multiple service sites.

Like Lyman and Campbell, Mordock states that a major problem with the use of standardized outcomes measures in residential treatment has to do with the limits that research in residential care imply (i.e., that hypothetico-deductive approach relies on large sample, randomized designs and statistical hypotheses). Mordock reminds us that the findings in residential care research are consistently compromised by the lack of random assignment, lack of control groups, and inadequate sample size affecting statistical significance. He suggests that the identification with the hypothetico-deductive approach is a major reason why the milieu itself, or the active treatment ingredients of the milieu, have not been studied. The purpose of applied research, suggests Mordock, is to contribute knowledge to enable us to understand the nature of a problem. This is in contrast to the hypothetico-deductive approach. The purpose of evaluation research is to study the processes and outcomes of

attempted solutions to problems (Mordock, 1994). Mordock suggests that, instead of viewing the effects of residential treatment as the concrete acquisition of skills, attitudes, beliefs or adaptive behaviors, researchers need to focus on a richer, broader spectrum of research questions (1994) and utilize qualitative methods. He states, in Patton (1990), that purposive sampling is an example of the qualitative approach. Purposive sampling involves selecting information rich cases, whose analysis will illuminate the question under study.

Inductive methods of investigation rely primarily on the observational and field work methods and the in-depth interview strategy (Mordock, 1994). Observational assessment includes questionnaires, inventories, checklists, and scales and interviews. Technical assessment including surveys, and direct observational coding procedures should be used to measure transitory phenomena such as changes in client behavior and staff actions (Mordock, 1994, p.15).

Patton (1990) identifies three types of evaluation research: summative evaluation; formative evaluation; and action research. The purpose of a summative evaluation is to determine the effectiveness of human interventions. The focus is on the goals of the intervention, the desired results are judgments about effective types of interventions and the desired levels of generalization is to other interventions with similar goals. The purpose of formative evaluation, which includes process evaluation, is to improve a specific program. The focus is on the strengths and weaknesses of the specific intervention of the program. The desired results are recommendations for improvement, and the results cannot be generalized beyond the setting studies.

Summary

The literature on organizational effectiveness cited here acknowledges that effective agency performance is not solely based upon supervisory and leadership effectiveness; there appear to be many intervening variables involved, as discussed previously. However, the empirical evidence in the social work literature reviewed definitely indicates that supervisory performance has an strong influence upon staff process variables, particularly intent to turnover, job satisfaction, stress, and burnout. Effective supervisory performance emerges as an even more significant and crucial factor influencing staff performance in the child and youth care field as evidenced by the literature reviewed. Although the relationship between supervisory performance and staff performance in HSO's appears to be significant in the empirical literature, the evidence is not conclusive with regards to the relationship between staff performance variables and service effectiveness. Nonetheless, the literature reviewed is consistent regarding the significance of the theoretical relationship between supervision, staff performance, and client outcomes.

When using program evaluation methods to examine service effectiveness in residential care programs, if we are to follow Patti's suggestion, we will need to examine how the structural variables of the agency interact with the interpersonal process variables to create a positive, healthy working/living environment.. The goal is to be able to prescribe what supervisory actions are necessary to support the front line direct care givers in a way that increases the potential for maximum service effectiveness (Patti, 1985). This practicum project intends to follow Patti's suggestion in order to meet this defined goal. As Harkness and Poertner (1989) stated, supervision theory can be advanced by the examination of practice in context. Finally, as stated by Bunker and Wjinberg,(1985) the core of the supervisory function is to form and maintain positive working relationships with staff in order to facilitate the provision of excellent service to clients; it includes both the "people centered considerations" and the "task centered considerations" of supervision (Kadushin, 1992).

Residential group care service units for children and youth are known to be extremely stressful working environments. In order for child and youth care practitioners to provide the highest quality of direct care service for children and youth, they must feel supported by the leadership of the organizations and by their supervisors. As with social work supervision, child and youth care practice supervision should incorporate all three components of supervision as defined by Kadushin. In addition, however, the literature reviewed indicates that the an important focus of supervision in child and youth residential care practice should be on sustaining worker morale and helping with job related discontents, or, the "supportive" component. The literature also indicates that the administrative and educative considerations of supervision should be delivered by using the supportive considerations.

Based on this support from the literature then, the primary purpose of this evaluation project will be to evaluate staff satisfaction with supervision presently received in selected residential group care programs for children and youth. Secondary to this purpose, the results will be used to inform organizational participants, other residential care facilities, and provincial policymakers regarding the outcomes of the investigation.

CHAPTER III

EVALUATION DESIGN AND METHODOLOGY

Process Evaluation Questions

The literature review lends support for the development of the following exploratory-descriptive research questions which form the basis of the primary purpose of the evaluation intervention.

- Are child and youth care staff satisfied with the supervision they presently receive?

- What type and frequency of supervision do child and youth care residential care staff receive presently? That is, do staff receive the formal, conference type of supervision, or a more, informal, "on the run" type, and how often do they receive supervision?

- What style (focus) of supervision (i.e., the primary "supervision modality": focus on the educative, supportive, or, administrative functions), do child and youth care staff receive? What "style" would they prefer and why?

- How do child and youth care staff and supervisors perceive the relationship between unit program effectiveness and the quality of supervision received by staff?

Evaluation Design

The exploratory-descriptive research design chosen for the evaluation combines the quantitative and qualitative design methodologies. The literature indicates that the extent to which the evaluator is basing what (s)he is evaluating on a set of assumptions regarding what works in a program, the evaluator is conducting a theory-based study. In theory-based studies, the evaluator attempts to discover and capture the theory of action of the program in order to understand how the program is supposed to work and what the critical characteristics are, according to program staff, and experts in the field (King, Morris & Fitz-Gibbon, 1987). The theory which serves as the foundation of this

evaluation study is that human service supervisors are in a critical position to influence staff performance. Staff performance, in turn, has a direct impact upon service effectiveness, which in residential care services, includes both the quality of care received and outcomes for children and youth. It is also theorized that social work supervision models are directly applicable to residential care services because of the similarity of the nature of the work. Further, a supportive focus to the supervision process is critical in residential care organizations because the work environment is the living environment for children and youth, a unique feature of the residential environment when compared to other human service work environments. A supportive focus is also theorized to be the most effective approach due to the stressful nature of the work in the group care setting. The relationship between staff supervision and objective measures of service effectiveness is not being explored or inferred in this evaluation project. This evaluation study is designed only to provide in depth feedback about residential care staff satisfaction with supervision presently, and to assess whether staff feel there is a relationship between the supervision they receive and both their individual effectiveness as practitioners, and their program's effectiveness with children and youth.

Given this theory then, a process evaluation study was designed to examine the internal dynamics of the supervision process within the participating agency units.

> Process data permits judgments to be made about the extent to which the program or organization is operating the way it is supposed to be operating, revealing areas in which relationships can be improved as well as highlighting strengths of the program that should be preserved. Process descriptions are also useful in permitting people not intimately involved in a program- for example, external funders, public officials, and external agencies-to understand how a program operates (Patton, 1990, p.143).

The combination of both quantitative and qualitative methods are appropriate for use in process evaluations. Quantitative evaluation methods are concerned with maximizing the objectivity and testing the validity of what we are observing, whereas qualitative evaluation methods are more concerned with subjectively tapping the deeper meanings of the human experience (Rubin & Babbie, 1989). The quantitative and qualitative approaches to evaluation methods represent two different and competing paradigms: the quantitative approach is based on logic-positivism and is used to test hypothetical-deductive generalizations, whereas the qualitative approach is based on the idea of phenomenological inquiry which uses inductive reasoning and naturalistic, holistic approaches to understand human experiences in context-specific settings (Patton, 1990). It is not intended that the qualitative-quantitative paradigm debate be elaborated upon in this report, however the ideas around incorporating both methods and the influence of the different methodologies upon the use of theory and the choice of evaluation design will be briefly explained.

The author approached the development of the design with a theory regarding the relationship between supervision and staff performance and outcome, as just described. The exploratory nature of the design is to gather informative data about the critical aspects of this potential relationship. The quantitative instruments and data provide information regarding staff satisfaction with supervision, however this data does not explain how staff feel about the supervision they receive, nor why they may be satisfied or dissatisfied with the supervision they receive. Qualitative data collection methods were incorporated into the study design in order to capture this aspect of the exploration. The theory guided the development of the qualitative data collection interview instrument, however the resulting qualitative data analysis was approached without the imposition of further preconceived expectations. It was intended that the qualitative data would provide the depth and breadth to the quantitative data that is required in an exploratory-descriptive study, or, process evaluation.

Use of both methods also serves another purpose in this evaluation design. This purpose is triangulation. Triangulation is a method used to strengthen evaluation study designs. Triangulation involves the incorporation of several methods or data sources to study a single program (Patton, 1990). "Triangulation is a powerful solution to the problem of relying too much on any single data source or method thereby undermining the validity and credibility of finding because of the weaknesses of any single method" (Patton, 1990, p.193).

There are four types of triangulation that contribute to the verification and validation of study designs in the analysis of data. These are methods triangulation, triangulation of sources, analyst triangulation, and theory triangulation (Patton, 1990). This evaluation study is using the triangulation of the qualitative and quantitative methods to provide validation for the study design.

The quantitative aspects of the evaluation are developed through the use of a case study cross-sectional design, which has the primary function of providing descriptive data about a program during a specific period in time (Grinnell, 1981). This design is often identified with survey research which involves asking a sample of clients to respond to questions about their backgrounds, experiences and attitudes (Frankfort-Nachmias & Nachmias, 1992). Survey research yields data that are used to examine relationships between properties and dispositions in order to describe the pattern of relationships in a program (Frankfort-Nachmias & Nachmias, 1992). Cross sectional designs are used to take a "cross section" of a program and examine it carefully (Babbie, 1983).

The qualitative aspects of the design are imbedded in the interview process and in the open-ended long answer questions in the quantitative instruments. These instruments are discussed in detail next.

Operationalization of Measures

The social work supervision models developed by Kadushin (1992), Bunker and Wjinberg (1985), Munson (1983), and Middleman and Rhodes (1987) comprise the theoretical foundation upon which the operationalization of measures is based. These models were referred to in the literature review of this report. It was also explained in the literature review that social work models can be successfully applied to the context of child and youth care practice.

Staff supervision in the context of children and youth residential care services is defined as the process of the promotion and enabling of effective task performance of child and youth care staff (Bunker & Wjinberg, 1985).

The three major components, or **functions** of supervision as defined by Kadushin (1992) are: **administrative, educative and supportive**. It should be noted that Kadushin stresses that these functions of supervision are not distinct categories but are to be seen as interrelated and as a integral part of the "whole" supervision process. For the measurement purposes of this study, the components were categorized as somewhat separate functions to represent the predominant **"style"** used by a supervisor. Thus, it is acknowledged that the functions of supervision in Kadushin's model represent a holistic model of supervision. The supportive, administrative, and eductative functions are used in this study as functions representing a predominant supervisory "style".

Administrative supervision is defined as the process used by supervisors for getting the agency work done and maintaining organizational accountability (Kadushin). It involves assigning work, deploying and evaluating staff, clarifying and interpreting policies, assessing needs, and analyzing and planning client contacts and activities (Mordock, 1993). An authoritarian style of supervision is defined as an extreme style of administrative supervision with the focus on administrative accountability and delivered in an authoritarian style by the supervisor. the authoritarian style of supervision is the antithesis of supportive supervision, described below.

Educative supervision is defined as the traditional method of transmitting skills and knowledge from the trained and experienced worker to the inexperienced worker (Kadushin, 1992). It involves assisting workers to become more effective through enrichment of their skill and knowledge repertoires (Mordock, 1993).

Supportive supervision is defined as the process of sustaining worker morale, helping with job-related discontents, giving supervisees a sense of worth and belonging, and facilitating staff sense of accomplishment (Kadushin, 1992, p.19). It involves reassuring the worker of his/her worth, helping the worker to handle stress, providing encouragement, instilling enthusiasm, and allowing for considerable autonomy in accomplishing tasks (Mordock, 1993). The facilitation of a sense of accomplishment for staff is defined as the most significant component of supportive supervision.

Job satisfaction is defined as the extent to which a worker is positively affected by her/his work situation.

Agency politics is defined as the negative influence of agency politics on worker's satisfaction with supervision or job satisfaction. The idea of "agency politics" incorporates the notions of organizational culture and climate and is directly related to the work environment.

Quantitative Data Collection Instruments

Supervisees

The instrument used in the staff satisfaction with supervision survey is an adaptation of Dr. Carlton Munson's Supervision Questionnaire (1983). Permission to duplicate the questionnaires for research purposes is granted in the book in which it appears (1983). Specific permission to adapt the questionnaire for use in this evaluation project, and information regarding its original source, scoring, and prior use was solicited from the author (Munson, C., personal communication, June 30, 1999). Dr. Munson's original questionnaire was administered using a face to face interview method and includes three

questions designed to elicit staff opinions regarding researcher presented illustrations of models of supervision received. These questions were omitted from the adaptation used in this project as the supervisee questionnaire was not administered face to face, nor was this evaluation examining the Epstein and Levy supervision models (Munson, 1975, p.85). The scales "supervision content" and "supervision structure" were also omitted, as were all but one question from the clinical exposure scale, as these scales reflected a clinical focus for practitioners and supervisors. Similar types of items better suited to the front-line child and youth care practice setting were developed and explored in depth in the qualitative instrument used in this evaluation project.

The staff satisfaction with supervision self report questionnaire used in this evaluation project (Appendix C) contains 9 questions regarding demographic information, such as age, education, and the number of years experience in Part A. There is a global job satisfaction question, followed by a question about how job dissatisfaction may be related to supervision in Part B of the questionnaire.

Part C of the questionnaire, "Satisfaction with Supervision", contains 45 structured questions scored on a Thurstone scale ranging from strongly disagree to strongly agree. Questions one through nine measure staff's satisfaction with supervision in general. The concept of administrative supervision, as defined above, is measured by seven questions in two scales. An example of a question assessing the administrative focus in supervision in Part C is Question 11: "My supervisor is good at organizing work". Educative supervision, as defined above, is measured by five questions. An example of the questions designed to measure the educative function of supervision is Question 12: " My supervisor knows how to teach techniques". Supportive supervision is measured in nine questions in Part C. An example of a question assessing the supportive focus in supervision is Question 31: "My supervisor expresses appreciation when I do a good job". There are some questions designed to assess dissatisfaction with supervision that may be related to agency politics and other possible problems

with agency administration that may or not be related to supervision. There are three questions that are designed to capture general job satisfaction of staff. The last five rank ordered questions in the instrument are measured on a scale from never to frequently. Three of these questions reflect a confrontation index and measure staff's overall relationship with their supervisor in terms of conflict; and the last three questions relate to staff perceptions of overall supervisory effectiveness.

Following the rank ordered questions at the end of Part C there is a question which asks the CYC practitioner to rank their supervisor from 1 to 10, with 1 being low and 10 being high according to how good a supervisor they think (s)he is. This is followed by a corresponding practitioner effectiveness self-ranking question.

The last of the structured questions is a Yes/No format asking the respondent "Do you think that your supervisor has helped you to improve your effectiveness as a counselor?

The survey concludes with five open-ended questions related to likes and dislikes, the value of having a supervisor, perceptions of program effectiveness and the relationship of supervisor effectiveness to program effectiveness. These five open ended questions were subjected to content analysis and the results are reported in Chapter IV.

Supervisors

A quantitative instrument was used to measure a supervisor's preferred style of supervision (Appendix D). The quantitative measure "My Supervisory Style" used in this study is an adaptation of the "Working Style Preference" questionnaire and the "Supervisor Preference Checklist" developed by Middleman and Rhodes (1985).

Part A of the supervisor's questionnaire includes nine questions regarding demographics presented in exactly the same format as that used in the supervisee's questionnaire.

Job satisfaction, Part B of the supervisor's questionnaire includes a global job satisfaction question, followed by a question which asks the supervisor to rate her/himself in terms of their effectiveness as a supervisor.

Part C of the questionnaire: "How I look at my role as a supervisor" is an instrument adapted directly from the "How I look at supervision" instrument developed by Middleman and Rhodes (1985). This instrument is made up of 13 questions that asks the respondent to rank order 4 phrases in each question to complete the phrase to their satisfaction from 4 (most favored) to 1 (least favored). It is designed to capture a supervisor's propensity to "lean" towards a certain style of supervision, either administrative or supportive. The scoring of this instrument is done by adding up the answers in both columns to determine totals. The larger number appearing in the either column indicates the preference of a supervisory "style" to supervision, with the larger number indicating an emphasis on either the supportive or administrative focus. The larger number appearing in column 1 indicates a stronger supportive focus in supervision, while a greater score in column 2 indicates that a supervisor has a propensity more towards a administrative focus. By determining the greater column totals, the predominant "column type" is determined. The column 1 "type" of supervisor (supportive) works to foster a more supervisee-centered approach to supervision, whereas the column 2 "type" of supervisor (administrative) typically uses a supervisory approach that is more task focused and supervisor-centered (Middleman & Rhodes, 1985). This instrument also differentiates on a supervisor's approach to educative supervision. A greater score in column 1 indicates a supervisor who tends to approach the educative function of supervision by designing learning opportunities for staff that encourage self directed discovery on the part of the worker: it exemplifies a "learning by doing" type of philosophy, whereas a column 2 focus approaches the educative function of supervision by carefully structuring specific learning objectives, and teaching by demonstration, or role-modeling. (Middleman and Rhodes, 1985).

Part D, " My Supervisory Style" of the Supervisor's Questionnaire used in this project is also adapted from "Your Working Style" by Middleman and Rhodes (1985). This questionnaire is comprised of a series of 35 statements describing situations that supervisors often encounter. Respondents are asked to respond to each item according to the way they think they most often act: Always (A), Frequently (F), Occasionally (O), Seldom (S) or Never (N). Middleman & Rhodes' supervisory orientation grid is based on a combination of two classic managerial style inventories: Stodgill's Leadership Behavior Description Questionnaire (LBDQ) as adapted by Sergiovanni, Metzcus & Burden, (1969), and Blake and Mouton's Managerial Grid (1964). Both the LBDQ and The Managerial Grid are referred to in the literature review of this report. The individual respondent's score is plotted on the grid, depending on their scores regarding concern for people and concern for the task. The preferred style of leadership, or supervision, in the Managerial Grid is reflected in a 9,9 score as explained in Chapter 2 of this report. In the supervisory orientation matrix being used in this study design, respondent scores above 14 on the "task" axis and their scores above 10 on the "people" axis indicate a supervisor with a high regard for the organizational task as well as high concern for the people doing the organization's work, respectively. On this matrix, the preferred supervisory style is labeled "The Collaborator". It is assumed by the theory underlying the managerial grid type of instrumentation that a high regard by supervisors for both the organizational task and the people doing the work indicates a positive impact upon organizational effectiveness. The other supervisory profiles captured by this instrument are labeled in the grid in Figure 2. They include "The Adapter" which indicates a low concern for the task and a low concern for people. This type of supervisor avoids taking sides and avoids conflict; they have a tendency to try and get along in their supervisory role with minimum effort and delegate supervisory responsibilities to staff; these supervisors are more concerned for themselves then for either the work or their staff. "The Negotiator" style in the supervisory orientation grid is a middle

position with moderate concern for the task and moderate concern for people; these supervisors are firm with expectations around organizational tasks and fair with their staff; this supervisor values reasonable solutions to conflict and influences others by using diplomacy; they manage by pushing to get things done, but only to a point, they are considerate of their staff, but not "all the way". This style would be an adequate supervisory approach in terms of program effectiveness. The "Morale Builder" approach to supervision in this supervisory orientation grid indicates a supervisor who has high concern for the people but low concern for the task; this type of supervisor enjoys personal relationships with their staff, avoids being too critical, and believes in team spirit; these supervisors value harmonious relations between people and believes that the work suffers if the staff are feeling unhappy, angry or demoralized; these supervisors have a tendency to harmonize and accommodate. It might be predicted that supervisors in residential care may fall into this category which indicates a strong focus on support at the cost of the organizational task. See Figure 2 for an example of the supervisory orientation grid.

Figure 2: Supervisory Orientation Grid

PEOPLE			
15 14 13 12 11	The Morale Builder		The Collaborator
10 9 8 7 6		The Negotiator	
5 4 3 2 1	The Adapter		The Task Master
	1 2 3 4 5 6 7	8 9 10 11 12 13	14 15 16 17 18 19 20

TASK

The Supervisor's questionnaire concludes with four open ended answer questions:

1. Would you please comment on your perceptions regarding your program's effectiveness with children and youth?

2. How do you think your role as supervisor relates to your program's effectiveness?

3. Please add any additional comments you may have regarding obstacles to your ability to be the best supervisor you can be.

4. Do you have any specific training related to child and youth care practice and supervision in residential care?

These questions were content analyzed in the same format as the Supervisees' questionnaires, and results are reported in Chapter IV.

Qualitative Data Collection Instrument

The qualitative data collection instrument (Appendix E) consisted of a series of face to face structured interviews with child and youth care staff from each of the units in the sample. The structured interview format was chosen because the data were to be compared (Tutty, Rothery & Grinnell, 1996), and the qualitative component of the evaluation was designed to complement the information obtained in the quantitative survey. The interviews were intended to give depth and breadth to the information obtained by way of the survey instrument. There were eighteen standardized questions in the instrument, asking each respondent to, for example, describe the type of supervision presently received, satisfaction with this type, which type they would prefer, whether the supervisor spends enough time at the home, and, whether they receive feedback about job performance. Interviews were conducted in private; some were conducted at the units (5), with assurance from the respondents that their privacy was secure and that they had no hesitation or concerns about their freedom to speak about issues. Supervisors were not at the units at these times. These decisions were made by the supervisees and were, in each instance, related to shift responsibilities and convenience. Some interviews (2) were conducted in a neutral place off site.

Pretesting

All three instruments were pre-tested with a child and youth care staff and his supervisor at another Level III youth residential care facility. The pre-testing of instruments was completed to obtain feedback from volunteers who are representative of the individuals who will be completing the instruments. The choice of the volunteers for pretesting was based on the premise that the volunteers best used for pretesting are fellow colleagues, potential users, and/or individuals drawn from the population to be surveyed (Grinnell, 1981). The pre-testing is designed to explore whether the volunteer respondents interpret the meaning of the questions in the way they are intended, whether the instructions

are clear and easy to understand, to assess how long it takes to complete instruments, whether any aspect of the instrument suggests bias on the part of the investigator, and whether each item is measuring what it is intended to measure (Grinnell, 1981). In addition the volunteers were asked how they felt about completing the questionnaires, and about participating in the interview process (Atherton & Klemmack, 1982). This information was obtained to determine the level of interest in the study, and that they were positively impressed with the instrument and the process (Grinnell, 1981). Debriefing was done verbally with the student taking notes with a questionnaire. Upon invitation to pretest, both the staff and supervisor volunteer were very positive about participating in the pretest. During debriefing, the child and youth care staff volunteer reported that he found the questionnaire "fun" and felt positive about the interview process. There were no problems identified regarding the instructions for the questionnaire. There was a concern raised about question #45, "All in all, this agency is a pretty good place to work" regarding the use of the word "pretty". It was determined by the student researcher that the words "pretty good" are adequate descriptors when describing a place of work. The volunteer respondent felt that question # 21 "My supervisor talks a lot about theory and doesn't apply theory to real life practice" was really two questions in one. This too, was determined to be a valid question: the student researcher solicited feedback regarding this criticism from other professionals including a child and youth care instructor and a social work professor and it was agreed that there were not two separate questions in this question. The point of the question is to identify those supervisors who talk about theory and do not follow this up in terms of their actual practice. The question was therefore not altered. In addition, question # 49 and question #50 were amalgamated from: "My supervisor allows me to observe directly her/his methods of working by letting me sit in on one to one sessions"; and: "My supervisor sits in on some of my one to one sessions" to #49 "My supervisor sits in on some of my one to one sessions with kids". This change reflected the accurate critique that, unlike

clinical supervisors, most child and youth care supervisors seldom have one to one clinical sessions with kids, and that few CYC practitioners would find themselves with the opportunity to observe their supervisors in that role as a common practice. The questionnaire was completed by the volunteer CYC staff in 20 minutes and the interview was completed in 45 minutes. There were many interruptions to the interview process, and the entire pretest process took approximately two and a half hours. Nonetheless, the student was favorably surprised by the apparent brevity of the time frame.

The supervisor questionnaire "My Supervisory Style" was pre-tested with the staff's supervisor. This was done to simulate as closely as possible the actual research context. The child and youth care staff in the research project would be responding to evaluative questions about the performance of their supervisors, and it was important to pretest in the context of the individual supervisor-supervisee relationship to explore the possibility of any concerns regarding sensitive issues, improper wording, defensiveness, and any other unfavorable reactions to the process. The supervisor volunteer stated that she felt pleased to contribute to further study in the child and youth care field. There were no problems identified in completing the questionnaire. She reported that the instructions were easy to understand, straightforward and clear. There were no concerns expressed in terms of defensiveness and/or the evaluative nature of the questions. In addition, the volunteer supervisor expressed an interest in the outcomes of the study. It took approximately one hour to complete as there were interruptions, which is to be expected in residential care facilities.

When negotiating the agency involvement in the project, some time was spent discussing with each staff group where and when the questionnaires would be completed, and whether it was preferable for staff to complete the survey on their own time, or outside of work. This was due to the concern expressed by some supervisors at the outset that staff are already busy enough without the added burden of participation in the study. Most supervisors afforded staff the opportunity to complete the questionnaires while at work.

However in many instances there were probably many interruptions to the process as this is the nature of residential work.

Sampling

The sampling procedure used in the design is non-probability, purposive sampling. Non-probability sampling methods are used in social work research when probability methods are not feasible, or appropriate. Purposive sampling methods are also traditionally used in qualitative designs. Purposive, also known as judgmental, sampling is based on the assumption that the evaluator has sufficient knowledge of the research questions to allow for the selection of typical persons for inclusion in the sample (Grinnell, 1981). Given that probability sampling methods are not possible in the study and given the student's twenty years of practice in the field both as a front line staff and as a supervisor, purposive sampling is an appropriate choice. "The logic and power in purposeful sampling lies in selecting information-rich cases for study in depth" (Patton, 1990, p.169). The specific type of purposive sampling was both homogeneous, where the purpose is to choose a sample to describe in depth and, theory based, where the researcher samples people based on their potential to represent the theoretical constructs involved in the study (Patton, 1990). The quantitative instrument sample were all CYC staff employed at the treatment centres, who agreed to participate, at the two organizations during the time frame of the evaluation, which was estimated to be approximately 45 CYC staff persons, and 6 unit supervisors/program managers. In quantitative research, the chief criterion of the quality of a sample is the degree of its "representativeness" or the extent to which the characteristics of the sample are the same as those of the population from which it was selected, (Rubin & Babbie, 1989). This quality is traditionally achieved in quantitative research by assuring that the numbers of the sample afford making generalizations back to the greater sampling frame at a 95% confidence interval. Although the CYC sample to which the quantitative instrument was administered is representative

of the general CYC population, generalizing to other agency contexts is limited by the nature of the non-probability, purposive sampling procedures. However the logic of representativeness in purposive sampling will allow us to make suggestions regarding supervision processes in similar agency contexts. The sample group for the qualitative staff case study interviews was one individual per residential treatment centre unit. The sampling procedure used for the qualitative interview data collection was as purposive as possible. Representativeness is not suggested with the qualitative sample in this study. The nature of this evaluation involves a certain amount of risk in participation for both supervisees and supervisors. In that sense the sampling for the qualitative data collection was also based on convenience.

Evaluation Settings and Participant Recruitment

The evaluation project was conducted in two human service organizations who operate residential group care treatment centres in Winnipeg: Marymound Inc., (Marymound) and New Directions for Children, Youth and Families (New Directions) . These agency sites were chosen as these children, youth, and families serving organizations are relatively large and they have a reputation in the field as providing a high quality of residential care service. These agencies and their treatment program directors are also known to be actively interested in the evaluation of treatment program service effectiveness and the measurement of outcomes for clients. Given this, it was theorized that these treatment directors, as the gatekeepers for their organizations with regards to an evaluation of supervision processes may be open to the participation in the evaluation project.

Marymound

Marymound is a private, non-profit Christian agency under the sponsorship of the Roman Catholic Sisters of the Good Shepherd. According to

the program documentation, Marymound provides a continuum of holistic treatment in residential care and other services in a variety of settings and contexts for children and families in Manitoba. Program documentation indicates that the Marymound treatment approach rests on the foundation of the Good Shepherd belief that "one person is more valuable than the whole world". Marymound's residential programs' service goals are

- To provide safe therapeutic residential settings for children and young women at risk;

- To provide treatment for children and young women at risk and their families;

- To administer treatment through a team of qualified and professional human services personnel and all relevant support services; and,

- To address related treatment issues through milieu, individual, family, group therapy, and an accredited educational program.

Three of Marymound's four community based residential programs agreed to participate in this project. One program declined participation. The three programs that agreed to participate are briefly described next.

Marygrove Children's Program is a Level IV (See Appendix A for the Child and Family Support Branch definition of the leveling system in Manitoba) facility with licensed capacity for 6 female children aged 8 to 12. Shafestbury Place Group Home is a Level III facility with licensed capacity for eight young women aged 15 to 17. Dreamcatcher Children's Program is a Level IV facility with a licensed capacity for 6 female children aged 8 to 13 .

According to the individual program descriptions a full-time unit supervisor has the ultimate responsibility for each of the residential settings at Marymound. The unit supervisor ensures that safety is maintained for children and staff and that all interventions by youth care workers are appropriate in relation to the physical and emotional needs of the children. The unit supervisor is responsible directly to the coordinator of residential services. The qualifications for the position state that residential child and youth care experience is essential and related educational background in the humanities

with preference given to a degree or equivalent in youth care is preferred. The unit supervisor is responsible for: resident specific treatment, the day to day functioning of the residential unit, the creation and functioning of a nurturing, safe therapeutic milieu, and for hiring youth care staff. In consultation with the coordinator of residential services, the supervisor screens referrals according to the admission criteria of each residential program.

The major service goals for the Marymound management team are:

- To provide vision, leadership, and direction to Marymound in its interaction with and service to the broader community;

- To oversee an accountable responsible and just fiscal policy with respect to Marymound's personnel and programs;

- To ensure that all services and programs maintain a holistic perspective;

- To ensure a people-oriented service structure in program offerings with a balance between efficiency and effectiveness in delivery; and,

- To identify, develop, and offer services and resources that ensure continued growth in response to evolving community issues.

New Directions

The mission statement of New Directions states that new Directions is a private, not for profit organization providing a unique combination of human services that are responsive to the changing social, psychological, cultural, educational and vocational needs of people in their communities. The program documents indicate that the service philosophy is based on respect for the client, empowerment, and an ecological approach focused on client strengths and abilities. New Directions operates three community based treatment centres for emotionally challenged children and youth. The treatment approach used in each community treatment centre incorporates individualized goal setting with children youth and their families with a focus on group living and daily situations as a basis for change. Program documents indicate that the therapeutic

environment of each centre encourages a healthy self concept, family involvement, appropriate social relationships, and the development of life skills.

The goals of the treatment centres are:

• To meet the individual needs of children and youth;

• To promote positive family relationships;

• To build coping skills, self esteem and responsibility; and,

• To develop interpersonal and social skills.

All three New Directions community treatment centres agreed to participate in the evaluation project. Greendell Treatment Centre is a Level IV facility with a licensed capacity for 6 male clients aged 6-10. Sharp Treatment centre is a Level IV co-educational facility with a licensed capacity for 6 clients: males aged 8-11 and females aged 13-16. Chelsea Treatment Centre is a Level IV facility with a licensed capacity for 6 male clients aged 13-16.

The Program Manager of each treatment centre fulfills the role of supervisor for each program. Each treatment centres also has a "Househead" who assumes responsibility for some of the administrative duties of the supervisor role, such as the centre's statistics, overseeing maintenance requirements, arranging relief staffing, some scheduling, ongoing review of centre logs and files and, monitoring appointments. The program manager is directly responsible to the Clinical Director for the development, and some aspects of implementation, of the treatment plans for clients. The program managers are also responsible for the administration of the programs. This includes planning admissions, developing long and short term goals, discharge planning, the coordination of family treatment, arranging other professional involvement, interagency coordination, hiring and supervising of staff, administrative duties, budgets and other tasks as assigned by the clinical director.

The residential program coordinator, Marymound Inc., (Marymound) and the clinical director, New Directions for Children Youth and Families (New Directions) were approached by telephone in February 1999 to explore whether

these agencies would be interested in participating in the evaluation project. The initial responses were favorable and a letter outlining the practicum project was sent to both agency directors. After obtaining ethics approval, the student spoke with each individual unit supervisor by telephone to explain the details of the project and suggested that attendance at staff meetings at each unit would be important. The process of data collection commenced in May 1999 and was completed by July 1, 1999. The attendance at each residential treatment centres unit staff meeting was used to introduce the researcher to the staff, to discuss the ideas behind the project, and answer any questions staff may have about the project, to explain what voluntary staff participation would entail, to explain participant informed consent, confidentiality, and anonymity. Informed consent forms were left with staff at that time (Appendix B). Several follow-up phone calls to each unit ensued, and after some time, most consent forms were signed. Questionnaires with accompanying coded envelopes were then delivered to the units by the student. Staff delegates were appointed to collect the sealed coded envelopes to ensure confidentiality and anonymity. Appointments were then made to conduct interviews.

The number of staff participating in the survey was 35 of a total estimated sample group of 45 CYC staff (a response rate of 77.7%). The number of supervisors participating in the survey was 6, representing each unit in the study, (N=6). This reflects a response rate of 100%. The total number of participants in the quantitative part of the investigation was 41. Seven child and youth care staff participated in the interview process. Although there were six units participating, one unit staffing group elected to have a newer staff and a more "seasoned" staff from the same unit participate in the interviews. These staff elected to participate in this way because the team determined that there would likely be a difference in responses based on what the needs of a newer staff would be in supervision: frequency, focus, type and style, compared to a more experienced individual

Limitations

There are factors which may have affected the validity of the results of this evaluation project. Two types of limitations are presented here. One set is related to the evaluation design, and one set of limitations relates to the instrumentation used in this evaluation.

i) Design Limitations

The main shortcoming of this design is its exploratory-descriptive nature. Exploratory research seldom provides definitive answers to research questions (Babbie, 1983). Because a randomized selection process was not employed, the results of this project can not be interpreted as representative of other supervisees and supervisors in residential care services. Nor can these results be generalized to the larger population of child and youth care practitioners in Winnipeg. Given the main purpose of the questions inherent in the theoretical questions posed at the outset, it would have been preferable to conduct a more rigorous investigation utilizing probability sampling methods and identifying the entire agency population in child and youth residential services as the sampling frame. However, the response rate was predicted to be very low if utilizing this approach. Nonetheless, a more rigorous approach to the design of the project may have resulted in results that would be more attractive to the provincial policymakers.

The non-probability sampling method, although intended to be purposive in nature may be interpreted as a reliance on available subjects. This may be due to an unconscious, or somewhat conscious bias on the part of the student regarding entry into organizations. The representatives of the agencies who were approached regarding participation in the project, as explained earlier, are known to be interested in the quality of service delivery in the field. This may indicate a bias in sampling. It may have been advantageous to solicit

involvement in the project from agencies where staff morale is reputed to be low and suspected to be related to ineffective supervisory or leadership practices. This may be construed by others as somewhat unethical. In addition, this type of purposive sampling is subject to the fact that it is precisely these types of agencies that would decline participation in an investigation of this nature.

It may have been advantageous with regards to the main purpose of the exploratory nature of the questions to use more of a qualitative approach. Specifically, a case study design may have been better able to tap the nuance inherent in the residential care environment. A series of interviews conducted with mangers, supervisors and front-line staff, combined with participant observation may have yielded results that had more depth of information and contributed more to the understanding of the critical components of these environments for further research.

The limitation just described is also related to another limitation of the chosen design. This is the fact that no objective measures of program effectiveness were included in this design. This means that the results do not allow for any conclusions, or assumptions regarding the interpretation of the relationship between the provision of effective service and the supervision process.

Notwithstanding these identified design limitations, the exploratory-descriptive design chosen for the process evaluation intervention is well suited to the nature of the evaluation questions. The evaluation project will serve as an introductory level of research into this area. Further research regarding the relationship between supervision processes and the quality of service received can be explored by agencies.

ii) Instrumentation

The quantitative measures used in this design are not known to be either reliable or valid measures of either the supervisory role, or staff satisfaction with supervision which is what the instruments purport to measure. Every effort was

used to secure reliability and validity information regarding Munson's instrument, assuming that it was a well-established reliable and valid measure. Literature searches were unable to determine prior research use, although the author indicated it had been used in other research. In addition, Munson's instrument was modified by the author. At best the quantitative measures appear to be face valid measures of the operationalized concepts of Kadushin's functions of supervision.

Both the qualitative measure and the quantitative measures are subject to a variety of response biases. Particularly relevant may the fact that the student is well known to many supervisors and staff in her capacity as a child and youth care diploma program instructor at Red River College, supervising practicum students in some of the agency settings. This could have influenced the staff to respond more favourably to both the quantitative measure, and to the interview questions. In addition, staff may have wanted to respond to questions in a way that would reflect positively upon both their agencies, and their supervisors. Staff may feel a sense of loyalty to their supervisors that could preclude them responding in a negative fashion to the types of evaluative questions posed by these instruments. Staff may also have had fears, however unfounded, regarding the possibility of negative repercussions should staff respond in a way that was interpreted as unfavourable by agency management.

Notwithstanding the instrumentation limitations described, the triangulation of the methodology in the evaluation design serves to reduce the potential impact of the instruments' limitations. Every precaution was taken to limit the influence of the identified potential bias on participants' responses by the student.

The following two chapters report results from the analysis of the data collected. The last two chapters of the practicum report provides the reader with a discussion of the implications of the relevant findings, an evaluation of the project, and suggestions for supervisory processes in residential care facilities.

CHAPTER IV

RESULTS FROM QUANTITATIVE DATA COLLECTION

The quantitative data resulting from the analysis of the Supervisor Questionnaire and the Supervisee Satisfaction with Supervision Survey will be presented in two parts: Supervisors and Supervisees.

Supervisors

i) Demographics

The response rate for the Supervisor questionnaire was 100% (n=6). The mean age for supervisors in the sample is 45 years old. The range for age is 37 to 55 years. The mean number of years in child and youth care practice is 19 years, with a range of 8 to 33 years. The mean number of years at the unit that supervisors are presently supervising is 12.6 years, with a range of 7 to 18 years. The mean number of years at their agencies is 18.6 years, with a range of 8 to 33 years. The mean number of years of other related child welfare experience is 5.5 years, with a range of 0 to 28 years. There are 2 males, and 4 female supervisors. See Table 1.

Table 1: Supervisors' Demographic Characteristics (N=6)

Characteristic	Mean (Years)	Standard Deviation
Age	45.50	6.25
Years in CYC Practice	19.50	9.29
Years at present unit	12.67	4.46
Years at agency	18.67	9.29
Years other related experience	5.50	11.13

(ii) <u>Job Satisfaction and Supervisory Effectiveness</u>

The survey question "How satisfied are you with your role as a supervisor at this agency?" was scored using a response set of 1 to 5 where 1 = very dissatisfied and 5 = very satisfied. The range was 4 to 5, with a mean response category of 4.1 which indicates that supervisors are "pretty satisfied" with their roles as supervisors at their agencies.

Supervisors were asked to rank their perceived effectiveness from 1 to 10, where 1 was low, and 10 was high. Three supervisors ranked themselves as a 7, and 2 supervisors ranked themselves an 8, thus, supervisors feel they are quite effective in their roles as supervisors for their staff.

iii) <u>Role as a Supervisor</u>

As described in Chapter III, supervisors' responses were analyzed for their column totals. Supervisors who respond in what is termed "Column 1" have a tendency to exhibit more of a supportive, supervisee-directed focus in supervision, with attention to the "learning by doing" approach to the educative function. In addition, the strengths of supervisors who prefer a "Column 1" or, supportive style, include the tendency to provide supervisees with the opportunity to learn. This type of supervisor believes that supervisees are internally directed and that they prefer independence, autonomy, and a chance to control their own destinies. In the area of interpersonal relationships, these supervisors will tend to emphasize the importance of self-awareness, spontaneity and openness with their supervisees. When conflicts arise, these supervisors will prefer to approach problem solving in a well thought-out and reasoned process, combined with direct feedback to supervisees. These supervisors believe that good interpersonal relationships are the key to both the quality and quantity of service delivery. They also tend to model a sensitive, empathic approach to people and to tasks, to help others to develop and to give recognition for work that is well done (Middleman & Rhodes, 1987).

As described in Chapter III, supervisors who score high on Column 2 statements indicate that they believe that supervisees are externally directed and that they respond to forces around them and prefer guidance from the supervisor. This indicates a stronger leaning toward the administrative function, and upon the authority invested in the supervisory role. These supervisors tend to approach the educative function of supervision by carefully structuring and directing learning opportunities for their staff. Supervisors who have a Column 2 orientation will tend to emphasize structuring specific learning objectives for staff. The primary method used in supervision will be teaching by demonstration (role-modeling) followed by practice with prompting, feedback, and reinforcement. In interpersonal relationships, their approach will be task focused and supervisor centered. These supervisors believe that supervisees respond best to problem solving and resolving conflict when the situation is planned, organized, presented, and evaluated by the supervisor. The strengths of supervisors who fall in this column include thoroughness, clarity and precision. They are inclined to present information in a systematic fashion and stress planning and organization. These supervisors tend to model behavior that indicates that they are strong leaders committed to protecting the interests of the employees, and the agency (Middleman & Rhodes, 1987).

The range for supervisor responses for column 1 scores was 60 to 69, with a mean of 64.75. The range for column 2 responses was 61 to 70, with a mean of 65.25. Results reported for each individual are shown in Table 2.

Table 2: Role as a Supervisor

Gender	(Supportive focus) Column 1 Score	(Administrative focus) Column 2 Score
M	64	66
F	60	70
F	69	61
F	61	70
M	66	64
F	69	61

The first supervisor in Table 2 (male) has a higher total in column 2, which reflects a focus on the structural, administrative considerations of supervision, however the score in column 1 is also evidence of a propensity toward a supportive focus in supervision. The column totals for this supervisor suggest a balance between the approaches outlined in column 1 and column 2.

The second supervisor in Table 2 (female) has a definite and relatively strong column 2 or, administrative approach focus. The supervisor (female) in the third row of Table 2 has a larger total score in column 1 which represents the supportive as does the supervisor (female) in the last row of Table 2. The supervisor in the fourth row of Table 2 (female) has a strong administrative focus, with the higher score in column 2. The supervisor in the fifth row of Table 2 (male) is also balanced in their approach to the supervisory focus with a slightly higher score in column 1.

These results indicate that, in general, a minority of supervisors have a tendency to approach the supervisory task with a balance of the administrative and support functions, where, (as might be expected in a representative sample), others have a propensity toward either a stronger focus on the support function, or a stronger focus on the administrative function of supervision.

Part D of the questionnaire "My Supervisory Style" was scored using a response set of always = 5, frequently = 4, occasionally = 3, seldom = 2, and never = 1. The total scores for each supervisor were then plotted on the "supervisory orientation grid", which was illustrated as Figure 2 in Chapter III. As explained in Chapter III, the supervisory orientation grid is Middleman and Rhodes' (1987) adaptation of the LBDQ and the Managerial Grid.

When the supervisors' scores were plotted on the grid, (see Figure 3), 5 of 6 supervisors' scores fell into the middle box without a label between "The Adapter" and "The Morale Builder". The guidelines to the interpretation of data that Middleman and Rhodes present states that the interpretation is the best estimate of the major orientations and is not proven, nor meant to be absolute.

When scores do not fall into a labeled category, Middleman and Rhodes (1987) indicate that if the score is closer to one labeled grid than another, then the supervisor can be seen to be oriented in the same direction as the pattern described in the labeled box. If the score falls in the middle of the unlabelled box, the supervisor is likely to vary_their approach, which is influenced by the boxes surrounding it, to fit the particular configuration of people, task and context, which indicates a more situational approach to the supervisory orientation. Please see Table 3 for Supervisor's scores on the grid, and the identified section of the grid that reflects each individual's score. The explanations for the Grid Labels in Column 4 in Table 3 follow the table.

Table 3: Supervisors' Task Scores and People Scores

Gender	Task Score	People Score	Grid Label
M	4	7	The Adapter
F	5	8	The Negotiator (Blend)
F	6	11	The Morale Builder
F	2	6	The Adapter (Blend)
M	6	7	The Negotiator (Blend)
F	4	8	Blend of Morale Builder, Adapter, and Negotiator

Explanations for the labels appearing in Table 3 follow.

- The supervisors whose scores reflect the "Morale Builder" orientation to supervision show a high concern for the people with a low concern for the task. This type of supervisor enjoys personal friendships with their staff, avoids being critical of staff and tends to use personal loyalties to their advantage in the performance of the supervisory role. These supervisors tend to expect consideration from others, thinks positively, and believes in team spirit. These supervisors have a tendency to harmonize, avoid conflict and accommodate staff.

- The supervisors who exhibit "the Adapter" orientation to their supervisory style are low in concern for people and low in their concern for the task. These supervisors tend to go along with the majority, and delegates as much as possible. These supervisors tend to avoid taking sides, and avoids conflict.

- Supervisors who exhibit the Negotiator position on the grid show moderate concern with the task and moderately concern for the people; they are fair with people and firm with tasks. This type of supervisor likes reasonable solutions and compromise. They tend to concentrate on the immediate and get it out of the way. These supervisors tend to bargain and settle with others, they are strategic in managing information.

The individual supervisors' scores reported in Table 3 can also be plotted on the supervisory orientation grid, as shown in Figure 3. The range of scores was 2 to 6 for task considerations, mean = 4.5 (s.d. = 1.52). The range for people considerations was 6 to 11, with a mean = 7.83 (s.d. = 1.72). The plotting of the scores on the grid allows the reader to see the proximity to the labeled boxes and identify patterns as described on the previous page.

The supervisors who have attended Competency Based Training (CBT) are identified as B3, A2, and B2 in the grid. Supervisor B1 has no CBT, A3 has some CBT, and A1 also has some CBT.

Figure 3: Supervisory Orientation Grid: Plotted Scores
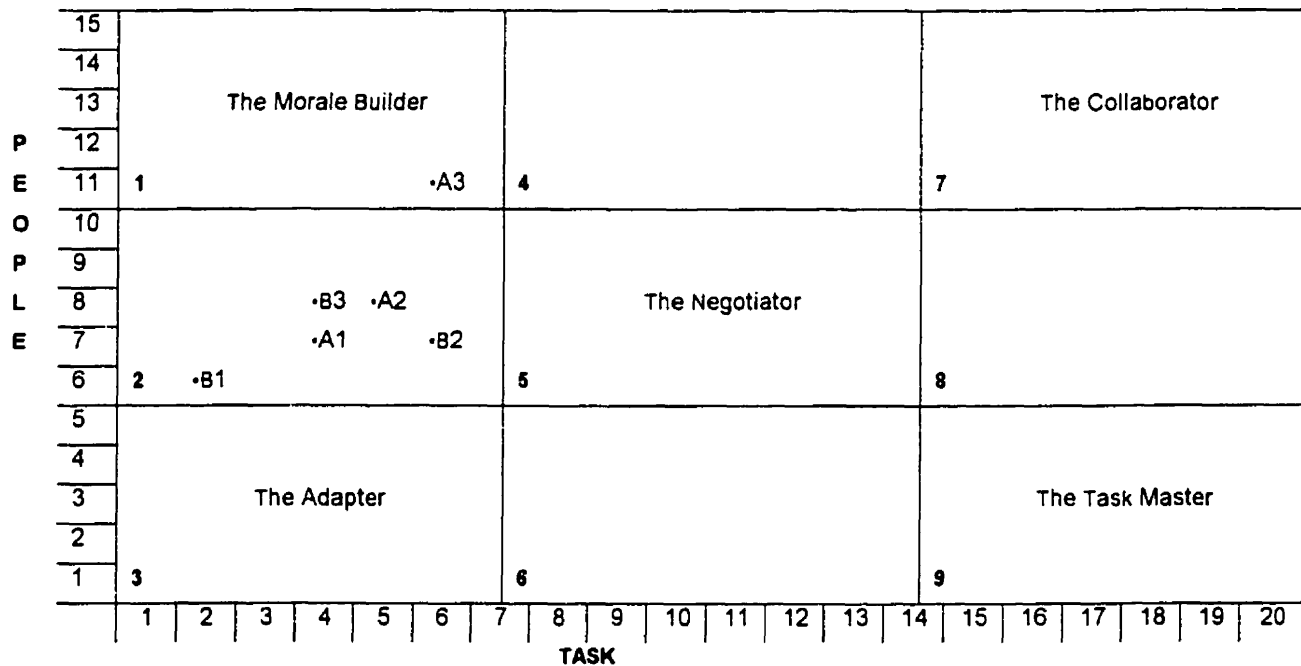
All of the supervisors except one, the Morale Builder, fall in the unlabelled middle grid between the Morale Builder and the Adapter; some are also influenced by the Negotiator approach. The unlabelled grid scores are reported as a blend of the major orientation(s) that the scores are most reflective of. The five scores, except the Morale Builder, reflect a moderate concern for people

with a low concern for the work. The scores fall somewhere between an orientation toward "The Adapter" – not much concerned for either task or people, an orientation toward "The Negotiator" - some concern for task, some concern for people, and "The Morale Builder" – high concern for people, low concern for work. This means that, except for the supervisor whose score falls into the "Morale Builder" labeled grid, whose score shows low concern for the work, with high concern for the people, all remaining five supervisors exhibit low concern for the work with a moderate concern for the people. This means their approach to supervision is relatively supportive of staff, but that their focus or supervisory attention is not too concerned with the work that needs to be done. Each individual can be seen to be a blend of the various styles that are reported in Figure 3. There is also indication that these five supervisors will tend to vary their approach according to the nature of the context of the situation: a situational approach to supervision, which may be a positive approach to the supervisory task in residential care, where the internal and external organizational environments can be relatively unpredictable. Further assessment of these supervisory role results will be presented in the context of all the evaluation results.

Supervisees

i) Demographics

As reported previously, the response rate for the survey was 77.7%. Forty percent of the responses were from one agency and sixty percent of the total respondents were from the other participating agency. There were 22 female staff in the sample (62.9%) and 13 male staff (37.1%). The age range was 25 to 52 years, with the mean age for staff is 37 years old. The mean number of years in child and youth care is 10.9 years.

The range for the number of years at their unit was less than one to 22 years, mean = 7.6 (s.d. = 5.77). Seventeen staff reported their positions as "child and youth care workers" or some variation of that job title. Fifteen staff

reported their position as "treatment worker" or some variation of that job title see Table 4.

Table 4: Supervisee Reported Job Title

Job Title	Frequency	Percent
Case Manager	1	2.9
Child, Youth Careworker	17	48.2
House Head	1	2.9
House Head	1	2.9
Treatment Worker	15	43.1
Total	35	100.0

Staff report a wide variety of education and training levels. Ten CYC have Grade twelve as their highest level of education. Nineteen staff have university education, with one having completed coursework towards a master's in child studies and two reporting B.S.W. degrees. Only six staff in the sample report having either a certificate or a diploma in child and youth care.

ii) Job Satisfaction

The question in the satisfaction with supervision survey which asked staff to evaluate how satisfied they were with their role as a child and youth care practitioner was scored using a response set of 1 = very dissatisfied to 5 = very satisfied. The mean score for supervisee job satisfaction was 3.63 (s.d. = 1.06,) which is between "satisfied" and "pretty satisfied".   Twenty percent of the supervisee respondents reported being satisfied with their jobs, 48.6% of respondents reported being pretty satisfied with their jobs, 8.6%, or three staff, were somewhat dissatisfied with their jobs and 5.7 %, or two staff, were very dissatisfied with their jobs (see Table 5).

Table 5: Supervisee Reported Job Satisfaction

Response Category	Frequency	Percent
Very dissatisfied	2	5.7
Somewhat dissatisfied	3	8.6
Satisfied	7	20.0
Pretty satisfied	17	48.6
Very satisfied	6	17.1
Total	35	100.0

Note: The mean score for frequencies shown above is 3.63 (s.d. =1.06), where 1= very dissatisfied and 5= very satisfied.

The question which asked supervisees to evaluate to what degree their job satisfaction or dissatisfaction was related to their feelings about their supervisors was scored using a response set of 1 = not related to 3 = directly related. Twenty-eight percent of the supervisees responded that their job satisfaction or dissatisfaction was not related to their feelings about their supervisors, 25.7% responded that it was somewhat related and 42.9% responded that it was directly related (see Table 6).

Table 6: Supervisee Job Satisfaction Related to Supervisor

Response Category	Frequency	Percent
Not related	10	28.6
Somewhat related	9	25.7
2.5	1	2.9
Directly related	15	42.9
Total	35	100.0

Note: The mean score for frequencies shown above is 2.15, (s.d =.847), where 1 = not related, 2 = somewhat related and 3 = directly related. One staff reported 2.5 as midway between the values 2 and 3.

iii) Satisfaction with Supervision

The "Satisfaction with Supervision" survey comprises 51 questions. The first 45 questions were scored using a response set of 1 = strongly disagree to 6 = strongly agree. Questions numbers 46 to 51 were scored using a response set of 1 = frequently to 4 = never. Some items, as described in Chapter III were reversed for scoring to reflect the positive response.

A score for supervisee overall satisfaction with supervision was determined to be between 180 to 275 for moderate to very satisfied, 90 to 180 for somewhat satisfied, and anything less than 90 was determined to be very dissatisfied with supervision. All other scores were determined by multiplying the response categories by the number of items in each scale.

The subscale that measures administrative supervision is comprised of three questions as described previously. A moderate score on this subscale is between 10 to 14. Any score below 10 indicates dissatisfaction with their supervisor's administrative focus. Staff report that they are moderately satisfied with their supervisor's administrative supervision focus. Eighty-eight percent, or 30 staff, had a score of between 10 to 14, where a score below 10 indicates poor supervisory attention to the administrative function. Two staff scored less than 10. This finding somewhat corroborates the results in the supervisory style measures which indicate all the supervisors in the sample have a low concern for the task. The mean score for administrative supervision staff satisfaction was 12.5 (s.d. = 1.65). The range was 9 to17.

An authoritarian style which is measured by questions 14 through 18 in the survey instrument indicates that a score of 25 to 30 is not authoritarian, and scores falling between 16 and 24 indicates that the supervisor sometimes uses an authoritarian style. Supervisees report that supervisors sometimes demonstrate an authoritarian style; the mean score for the subscale which measured authoritarian style of supervision was 23.64 (s.d. = 4.01). The range was 14.5 to 30.

Supervisees report that their supervisors have a good focus with regards to educative supervision. A score of between 11 to 24 indicates a moderate focus on educational supervision. Thirty-one point four percent, or 11 staff, fell in this range. The mean score for this subscale was 25.28 (s.d. = 4.57). The range for this subscale was 11 to 30.

Supervisees report receiving a moderate level of supportive supervision from their supervisors. The mean score for this subscale was 29.20 (s.d. = 4.34). The range for this subscale was 19 to 35. Forty percent of staff reported between a poor to moderate focus on supportive supervision. Five staff scored in the "poor" range and 9 staff scored in the moderate range for supportive supervision.

Staff also report that supervisors perform the facilitation of staff accomplishment function, which is indicative of supportive supervision, from satisfactorily to good. The mean score was 15.37 (s.d. = 2.65). The range for this subscale was 7 to 18.

It appears there may be some problems with agency politics interfering with staff's perception of their abilities to perform their roles successfully, but overall, this is not a major problem for staff. A score in this subscale of between 15 to 18 indicates no problems, whereas a score between 12 to 14 indicates problems that are not likely to be major ones. A score below 12 indicates problems with agency politics that may require attention. The mean score for this subscale was 14.28 (s.d. = 2.56). The range was 7 to 18. Five staff, or, fourteen percent of the sample (N = 35) scored below 10 in this subscale.

Staff also report they have a moderately good to very good relationship with their supervisor which is measured in terms of their ability or willingness to resolve conflict with their supervisors. A score less than six would indicate problems in the supervisees' ability to resolve conflict with their supervisors. The mean for this subscale was 8.98 (s.d. = 1.67). The range was 2 to 12. Only one staff in the sample reported becoming annoyed with their supervisor "frequently".

Eight staff or 22.9% reported that they became annoyed with their supervisor "sometimes".

Supervisors are rated by staff as very good in terms of their supervisory effectiveness. The range for "very good" is a score that falls between 9 to 12. The mean score for this subscale is 9.71 (s.d. = 1.27).

The total satisfaction with supervision scores indicate that staff are very satisfied with the supervision that they presently receive (Mean = 236.81, s.d. = 29.2), although three staff in the sample are only moderately satisfied with the supervision they presently receive. The range was 147.00 to 272.00. Three staff scores are below 180. Although most staff report being very satisfied with supervision received, 10, or 23.5% scored between 28-44 on the satisfaction with supervision subscale, which for the lower score is borderline dissatisfied and for the others are moderately satisfied. There does not appear to be a common denominator with these staff. Age, years of experience, gender and education were examined to determine whether these factors were related in any way to their perceptions of being less than satisfied with supervision then the majority of the supervisees in the sample. The results of this examination of the variables indicate that these staff do appear to be the older CYC staff, with an average age of 39 for this group, and half of these "borderline satisfied with supervision" staff are male. This group has between 6 years and 24 years experience which may indicate that years of experience affects staff satisfaction with supervision in certain agency contexts. The mean score results for the supervisee questionnaire item by item are shown in Appendix F.

CHAPTER V

QUALITATIVE DATA: QUESTIONNAIRE AND INTERVIEW RESULTS

Results from the qualitative data analysis are reported in two parts: responses from the supervisors and responses from supervisees. Some of the qualitative data was collected using the open ended questions in the questionnaires administered to both the supervisors and supervisees, as described in Chapter III. These questions were designed primarily to capture respondent's thoughts and attitudes regarding the relationships between practitioner effectiveness, supervisory effectiveness and program effectiveness and will be reported using these categories for each group: supervisors and supervisees. The open-ended questions in the "Staff Satisfaction with Supervision" survey were analyzed using a content analysis method. Reoccurring words and phrases reflecting styles of supervision and which represent themes were coded and categorized according to the operationalized supervision styles.

Most of the qualitative data collected is the result of the administration of the structured interview procedures with supervisees described in Chapter III. This instrument was intended to augment the quantitative data set, and to provide qualitative depth and breadth to the quantitative results. The interview solicited staff opinions regarding the key questions of the evaluation, including the following: the type of supervision they receive presently, how satisfied they are with the supervision they receive, and any suggestions supervisees may have regarding what "model" of supervision they feel would work best for child and youth practice in residential care services. The model of supervision was addressed by asking supervisees, for example, to report on how often they received regular, planned, formal, supervision sessions, and whether they preferred a particular "style" of supervision. The interview also solicited opinions regarding perceived program effectiveness and practitioner effectiveness.

The interview data was transcribed from audiotape to typed format by the student. This was to allow the student to relive the interview and become very familiar with the data (Tutty, Rothery & Grinnell, 1996). Because the interview format was structured, with closed rather than open questions, each question was first examined only looking for the actual answers to the questions. The transcripts were all produced verbatim from the audiotapes in order to allow the context of the answers to provide as much meaning as possible (Tutty, Rothery, & Grinnell, 1996). All non-verbal events such as pauses and laughs were included in the transcriptions. One audiotape was incomplete; it would seem that because the voice actuation was turned on, and the interviewee was speaking quietly, some of the content of his answers were lost. Fortunately interview notes were also taken and the handwritten notes augmented the missing data. In addition, audiotapes were reviewed immediately after the interviews, in order that the interview content would remain fresh in the interviewer's mind. All other audiotape recordings were complete with no missing data. When transcribing was completed, all the interviews were read and re-read in order to become very familiar with the entire data set (Tutty et.al, 1996).

First level coding was conducted to determine the answers to the questions. This process was completed for all questions. After this process, data were reviewed and coded for words and phrases representing themes about the "style" and type of supervision received and the staff feelings and ideas about supervision.

The results of the first stage of the qualitative interview data analysis are reported in the section entitled "Supervisee Interview Results". Results are grouped according to the categories: i) Supervision Style, and Staff Supervisory Preferences and ii) Practitioner, Supervisory and Program Effectiveness. The presentation of findings includes a narrative description of common themes, and comments of the staff regarding the type of supervision they would like to receive, and other related issues.

Questionnaire Results From Supervisors

i) <u>Program Effectiveness</u>

The answers to the questions designed to solicit supervisor's perceptions regarding their program's effectiveness all, except one, included the words "more effective", "very effective", or "excellent job" to describe the program's effectiveness. Thus, supervisors perceive their programs to be effective. The various types of program foci that supervisors reported in the context of indicators of program effectiveness included the following: a focus on permanency planning; commitment to work with families; safe and consistent environment; create an environment that empowers; encourages; constantly updating and challenging ourselves; constantly looking for new approaches, keep what works, discard what doesn't; focus on client strengths and positives; all decisions made together with the focus always on "what's in the best interest of the child'; nurturing, reparenting, rolemodelling; clients leave happier and stronger; work with families; relationships, nurture, and respect.

Four of six answers to the question asking supervisors to give their opinions about the relationship between supervisory effectiveness and program effectiveness, indicate that supervisors think there is a direct relationship between effective performance in the supervisory role and program effectiveness. Most answers to this question focused on the ways the supervisors thought they either demonstrated their role, or snould demonstrate their supervisory role, to staff in terms of "how to" influence staff in a positive way: Some examples include the following: "I provide guidance feedback, opportunities to learn"; "encouragement, challenges and insight that I have helps in this process"; "staff need guidance and affirmation..the team becomes stronger if it has good leadership"; "guides, encourages, positive reinforcement, respect staff, offer support". The words used in these answers are all descriptors related to supportive and educative supervision.

ii) <u>Supervisory Effectiveness</u>

The obstacles that were identified by supervisors regarding supervisory effectiveness included various systemic issues such as a perception of a lack of support from management, and budgetary considerations necessitating a part-time youth care role that takes time away from supervisory responsibilities. Supervisors also identified personality related issues as obstacles which included the learning styles of staff, and weaknesses inherent in the personality of the supervisor. Supervisors also report other staffing concerns and individual supervisory inexperience as barriers to their effective performance.

It was theorized that a certain amount of related training and or education would enhance effectiveness in the supervisory role. It was also intended that a need regarding specific supervisory training in residential care practice may emerge as a result of the last question regarding related training. The results indicated that one supervisor reported no specific education or training in supervisory and management skills. Three supervisors have completed the Residential Care Competency Based Training (CBT) for Supervisors, one has completed 96 hours of CBT and one is enrolled for the Fall' 99 CBT session.

Questionnaire Results From Supervisees

i) <u>Supervisory Effectiveness</u>

A number of questions were designed to solicit feedback from supervisees regarding their perceptions about the effectiveness of the supervision they presently receive. One of these questions asked the supervisee to describe the things they like and the things they dislike about their supervisor. The responses to this question were content analyzed for predominant themes. The predominant themes were identified by the number of times that the theme was assessed to be captured in the supervisee's descriptions of likes and dislikes. The predominant "likes" of supervisors reported by supervisees include that they are "caring and nurturing with kids"; that supervisors are "approachable, friendly and helpful"; that they have a sense of humour; and that

they are also "nurturing, caring, and giving to staff". Supervisees also indicate that they like their supervisor because they are patient, kind, respectful, fair, honest, and "on my side". These likes are all indicative of the supervisee's preference for a supportive supervisor.

The responses to the "likes and dislikes" question also indicate that supervisees want their supervisors to be involved in the caregiving task. Many staff said that they like it when their supervisors are caring and nurturing with the children. Supervisees also identified that they like the fact that their supervisors have many years of experience. Staff also report that they like their supervisors' ability to refocus staff, that they are professional role models for staff; they like "their wisdom", their high level of youth care skills, their "positive approach", and their hands-on approach. These responses all capture supervisees' preferences for their supervisors to perform an educative function in the supervisory role.

Supervisees also identified that they like their supervisors' flexibility regarding schedules and time-lines for reports. Staff report that they like it when supervisors appear to be organized and knowledgeable about organizational policies. Staff also reported that they like it when supervisors are democratic in their leadership style and that they provide an advocacy function for staff. These responses of supervisees can be interpreted to reflect the administrative functions of the supervisory role.

The predominant "dislikes" reported include the following: the supervisor being disorganized; the supervisor being inconsistent and giving unclear direction; and, the supervisor allowing emotions to interfere with relationships. Supervisees also report that they dislike it when their supervisors avoid conflict both with the staff and with the kids. The supervisees report that they dislike it when their supervisors do not resolve staff issues, and when they do not accept criticism from staff. Supervisees also dislike it when supervisors "won't listen" and when they "engage in gossip". These dislikes reflect rather serious concerns and may be interpreted as relating to training needs for supervisors.

Other dislikes that were reported by supervisees included those items that were interpreted as being primarily related to the administrative function of supervision. These included procrastination, unfocused staff meetings, ineffective liaison with other professionals and agencies, forgetfulness, not providing enough one to one supervision, not keeping staff informed, and "managing on a whim". Supervisees also reported that they dislike it when their supervisors are "not inspiring"; when they do not give staff enough feedback; and when they are "too lenient" with the kids. In two instances, supervisees reported that their supervisors do not spend enough time with the residents.

In order to give the reader an overall "picture" of the supervisee responses to the question related to the "likes and dislikes" of their supervisors, the responses have been categorized as to the identified predominant supervisory function and are reported in Table 7. It is acknowledged that the format of the presentation in Table 7 reflects a more quantitative interpretation of the data, however, the Table is only intended to provide the reader with a general overview of the responses.

Table 7: Supervisees' Likes of and Dislikes of Supervisors

Supervisee "Likes"	Supervisee "Dislikes"
Administrative - flexibility regarding schedules, reports (4) - knowledgeable re: policies - organized (3) - fundraising skills - democratic leader, treats staff as equals - relays fiscal information - advocacy for staff (3)	**Administrative** - disorganized (5) - procrastinates - inconsistency, unclear direction (5) - does not keep staff informed - too focused on fund raising, committee work - too focused on "rules and routines" - delegates too many supervisory responsibilities - doesn't ensure adequate shift coverage - doesn't liase effectively with agencies and other professionals - unfocused staff meetings - forgets - seems to manage "on a whim"
Educative - wisdom - high level youth care skills - many years experience (3) - ability to re-focus staff - professional role model - models commitment, integrity - caring and nurturing with kids (11) - client comes first - has good ideas, willing to try new ideas - has a positive approach - genuine interest in self-improvement - hands-on approach	**Educative** - should be more open to different options - too lenient with kids - too free with money - not enough 1-1 supervision - not inspiring - not enough feedback, critique - does not spend enough time with residents (2)
Supportive - understanding, kind - patience - respectful and values what I say - approachable, friendly, open, helpful (16) - fair (8) - sense of humor (11) - honesty (6) - nurturing, caring, giving to staff (11) - always listens (4) - considers personal situations (4) - gives praise - values what I say - "on my side"	**Supportive** - doesn't resolve staff issues (2) - unapproachable when upset – allows emotions to influence relationships (4) - does not accept criticism - avoids conflict – staff and kids (4) - engages in gossip - won't listen

Another question related to supervisee perceptions of supervisory effectiveness asked respondents to articulate what was the value of having a supervisor. The answers to this question were also content analyzed for predominant themes and then categorized according to the administrative, educative and supportive functions of supervision.

Supervisees report that the value of having a supervisor primarily relates to the administrative function of supervision including such responsibilities as the responsibility to set the tone, and give vision and direction to the team; to liase between the unit and the main office; and, to keep the team focused, consistent and "on track". The supportive considerations of the supervisory role are reported by staff as "to give support, guidance and encouragement".

These data were categorized according to the administrative, educative and supportive functions of supervision, as stated above. An overview of these data are presented in Table 8.

Table 8: Preferred Characteristics In Supervisors as Reported by Supervisees

Administrative Characteristics	Educative Characteristics	Supportive Characteristics
- someone to have the final say - to set the tone and give vision and direction to the team (15) - to liase between front line and office (8) - leadership, "the boss" - to keep team focused, consistent and on track (8) - liase with collateral professionals - to see the whole picture and put things in perspective - coordinates activities and administrative responsibilities	- a learning experience - a role model - share knowledge - to give positive criticism - guidance	- give support, guidance and encouragement (8) - advocates for staff - empowering

ii) Program Effectiveness

Supervisees' answers regarding their perceptions of program effectiveness were also content analyzed. However, due to the nature of the responses to this question, these data are reported in a more quantitative manner. Seventy-seven percent of the supervisees' answers to this question did not directly address the question of program effectiveness. Eleven supervisees suggested that "the level of experience, dedication, and the cohesiveness of the staff team" were indicators of their programs' effectiveness. Two supervisees provided responses which merely stated that the program description is based on the needs of the clients. These two responses could be interpreted as representing and having meaning as an indirect measure of program effectiveness; that is, these staff persons may be suggesting that a program which offers placement to children who meet the criteria outlined in the program description is effective on that basis alone. Also some of the supervisee responses only stressed the program focus as an indicator of program effectiveness. Thirty-two percent of the supervisees stated that their programs were effective because the staff provided unconditional love and caring to the children and youth in their care. Other responses that could be interpreted as relating to indicators regarding program effectiveness included the responses that staff are consistent and that they set and meet goals. These comments, when given as indicators of program effectiveness, are rather disconcerting in that some staff appear to perceive that the caring task, the characteristics of their work, and their program's focus, all have meaning as indicators of program effectiveness. Providing unconditional love and caring is the caregiving task; the provision of love and caring, in and of itself, is not a measure of effectiveness nor are the characteristics of a staff team, however positive. Those answers that directly addressed the issue of effectiveness are reported as the "Effectiveness Rating" in Table 9. "Program focus" is included as a separate category as many reported it as the reason for the effectiveness of the program.

Other indicators of success identified by staff are reported in the final column of Table 9.

Table 9: Supervisees' Reported Indicators of Program's Effectiveness with Children and Youth

Effectiveness Rating	Program Focus	Other Indicators
- could be more culturally sensitive (1) - too hard to measure (1) - as much as can be expected (2) - positive impact upon clients (1) - quite effective (1) - effective (3) - very effective (9) - highly effective (5) - exemplary (1)	- consistent (2) - set and meet goals - caring, nurturing relationships - unconditional love and caring (11)	- see changes quickly - do not give up - improved functioning (3) - improved quality of life - after care contact (6)

Note: The columns in this table do not indicate comparisons. Columns indicate responses by categories only.

The relationship between supervisory effectiveness and program effectiveness was interpreted by the supervisee responses that indicated a direct relationship between supervisor effectiveness and program effectiveness. Seventy-six percent of the supervisees indicated that they thought there was a direct relationship between supervisory effectiveness and program effectiveness. Some examples of supervisee responses to this question follow:

- "Residents tend to know how the structure works..this coming from the supervisor down"

- "I believe (s)he may not be aware of issues facing either population and would really be of support to both. However, effectiveness is marred by lack of knowledge and training -Perhaps this feedback to the system will be good for all managers"

- "By not being an effective supervisor, I feel morale really suffers, thus affecting treatment standards"

- "(S)he is always concerned about providing the opportunity to take workshops to provide creativity in order for our team to move forward and to be best informed in this field"

- "Good leadership is always reflected in the result's of one's labour. Our team is successful because we have a very competent leader".

- "The quality of the program is in direct correlation to the quality of the supervisor"

- "(S)he is working tirelessly to have the community, school system, and staff care for the children as best they can"

- "It has a lot of impact on staff's attitude and thus filters down the line to the residents"

- "His/her guidance is respected by all working here. Sense of humor, knowledge, and person are all part of the reason that the program is so effective."

Results From Interviews With Supervisees

i) Supervision Style and Staff Supervisory Preferences

As noted previously, there were seven supervisees interviewed in the administration of the qualitative interview schedule. Supervisees report that they receive a wide variety of types of supervision as well as a wide variation in frequency. With one exception, supervisees report being satisfied with the supervision received regardless of the frequency or style.

Only one supervisee reported receiving regular scheduled planned face to face supervision every two weeks. This supervisee reported that if a session is missed for any reason, it is rescheduled, and at minimum is received every month. In this case the supervision received is both case focused and practitioner focused with an agenda established by both the supervisor and the supervisee prior to the supervision session.

Only one other supervisee reported receiving formal conference style supervision; this supervisee also receives a more informal type when there is a

need. It was reported that efforts were made in the past to have formal supervision every two weeks, but staff scheduling interfered in this process, so the formal supervision occurs regularly every two months. Sessions lasts for one-one and one half hours and are held outside of the unit. This supervisee reports that the focus of supervision is both on clients and on the needs of the practitioner, and the supervisor has a prepared agenda; the previous agenda is also reviewed and followed up on. This supervisee also receives a formal conference style that is more performance evaluation than supervision and this occurs every six months. There is also informal, "improv" supervision sessions on a regular basis when the staff works day shifts with the supervisor.

The remaining supervisees, with one exception, report receiving variations of the informal, unscheduled, irregular supervision types of supervision. Some supervisions sessions are conducted "on the run", others are face to face, sitting down but there is no formal agenda. The focus can be on staff performance, on client cases and/or on practitioner needs. These supervision sessions are initiated by both the supervisor and the practitioner. It was pointed out that in some instances, supervisees that require regular, scheduled formal supervision receive it; some supervisors appear to respond to the needs of the individual staff in determining the type of supervision offered.

One staff person indicated that they received no regular, formal, or planned supervision. It was reported that the formal regular type of supervision was received, one half to one hour every two weeks about two years ago and this no longer occurs. The "on the run" supervision that is presently received is always case focused and individual practitioner needs are not addressed and would not be "unless it was real obvious".

All of the supervisees are satisfied with the type of supervision that they receive presently except one of the supervisees who receives no formal structured regular supervision.

Even though the preferred supervisory style reported by interviewees is the informal type they receive now, the preferred supervisory style is the more

formal structured style of supervision. Staff also say they would like to receive this type more often. One staff said that although (s)he "likes it the way it is" there are times when (s)he says (s)he needs to have formal supervision more often. "I would like to have more formal ones" "unfortunately sometimes supervisors get pulled in with their workload and we get pulled in with our work load and it doesn't happen". Some supervisees report that they would like a blend of the ongoing with the planned sit down supervision received once per month.

The staff member who reported being dissatisfied also suggested that (s)he would prefer that (s)he receive the conference style supervision regularly, one hour per week, with a focus on team building.

The formal, conference style, sit down, one to one supervision is reported to be received by staff relatively irregularly. It varies from at least once per month, as reported previously, to every two months; once a year for performance appraisal; within the last four months, five times; to never.

All of the staff, except two, reported that they think the formal, scheduled type of supervision is a good idea. The other two suggested it was not necessary for more experienced practitioners, and for teams who had been together for a long time. The reasons given for thinking that this type of supervision is a "good idea" for child and youth care staff included such things as: "it gives us a chance to discuss issues: kids, coworkers, collateral's, personal; it is "a useful way to keep issues in mind, then use supervision to reflect on them"; "to make sure the supervisor knows how the staff are feeling, that they know what personal issues may affect their work with the kids"; "good for newer staff to help them familiarize with unit: kids and staff"; and, "it allows the worker opportunity to discuss issues and shows them they are important as a person".

The purpose of the meetings with supervisors reported also varied extensively. Examples given by supervisees included discussing cases, relationships with coworkers, personal issues; to give direction, discuss "kid issues, stress relief"; discuss program related issues; performance evaluations;

to discuss things that need to get done, and bring up concerns; and, to touch base. One supervisee reported that (s)he did   not have meetings with the supervisor.

Staff were asked in the interviews to rank the "style" of supervision they would prefer: that is, to identify the primary supervisory focus; whether on the administrative function, the support function, or, the educative function. Supervisees, with only one exception, stated in the interviews that they preferred the supportive "style" to supervision. Most also report that the style they receive now is usually supportive, or a blend of the administrative focus with a supportive focus. Only one supervisee reported in the interview that they received an equal blend of the educative, supportive and administrative foci to supervision presently. The supervisee preferred style of supervision is shown in Table 10.

Table 10: Supervisee Preferred Style of Supervision

Style of Supervision Preferences		Style Received Now
High:	Supportive	Supportive
Medium:	Administrative	
Low:	Educative	
High:	Supportive	Supportive
Medium:	Educative	
Low:	Administrative	
High:	Educative	All three
Medium:	Supportive	
Low:	Administrative	
High:	Supportive	Administrative
Medium:	Administrative	
Low:	Educative	
High:	Supportive	Supportive/Administrative
Medium:	Administrative	
Low:	Educative	
High:	Supportive	Supportive
Medium:	Educative	
Low:	Administrative	
High:	Supportive	Administrative
Medium:	Educative	
Low:	Administrative	

Note: The above Table columns indicate responses from each individual respondent, respondent 1 through 7.

ii) Practitioner, Supervisory, and Program Effectiveness

Staff reported that they, by and large, feel their supervisors are already doing a great job. However, there were a few recommendations for improvement. Supervisors appear to consistently give staff regular feedback about their job performance, whether informal or formal. Of those who made suggestions regarding how supervisors could do "a better job", some examples included, that supervisors could focus less on rules and routines and more focus on feelings; that they could spend more time in the unit in the evenings; they could be more critical of staff regarding performance; that they should provide more supervision for newer staff; and, that they should keep their staff accountable with regards to the designated CYC responsibilities.

The staff interviewed all perceive that their programs offer a high quality of care for children and youth. All staff interviewed also reported that they believe that the quality of supervision they receive directly affects both the quality of care received and outcomes for children and youth. Some of the ways supervisees indicated that they believed the quality of supervision affects the quality of care included the following examples:

- "That emotionally healthy staff do better work: if the supervisor establishes a rapport that allows staff to approach them with concerns and emotional issues, then they will be addressed and not left where they may influence the way in which staff work with kids";

- "Positive supportive supervision from the supervisor filters down to the treatment to the kids"

- "The ways in which we are challenged and getting ideas about treatment approaches from our supervisor and the openness of the supervisory process helps staff to provide better care"

- The supervisor informs staff about agency policies and procedures and resident needs and treatment goals

- The supervisor translates the standards of the agency: "Clients first" , supervisor also encourages creativity, shows (s)he values staff, has good ideas about treatment;

- Role models how to be with people, gives guidance; and

- Role models a consistent approach, support staff, encourage them when they're doing a good job.

Staff reported in the interviews that they feel their supervisors should spend more time in the home when the kids are in the unit. When supervisors do shifts in the home, the staff report that they think this is a very good idea, and that they appreciate their expertise and presence during the shift. when supervisors do not do shifts in the home, supervisees report that they think that they should. "This is definitely a good idea so they can keep personally informed and be around the kids"; and, "(s)he's a great worker, very very good'.

Staff consistently report that they feel they are effective child and youth care practitioners. Some of the reasons given by staff to support their feelings in this area include:

- "Because my heart is in it, "I honestly, honestly care about these kids";

- "I enjoy the work and the challenge of therapy on the run";

- "I have a special way of working";

- "Because kids approach me more than someone else, "they're really happy to see me when I come back";

- "The kids seek me out, I have very very good relationships with all of them"; and

- " Kids are connected to me, they give me pictures".

The staff interviewed perceive the role of the supervisor in residential care settings to be a primary focus on supporting staff in order that they can provide the highest quality of care possible. Staff feel it is imperative that supervisors should spend most of their time at the unit, focused on how staff are feeling, being up to date with the kids, and staying "really in tune with the pulse of the unit'. Staff also said that the role of supervisor should be to educate staff about both tasks and processes, to be the role model, and "have the answers". One staff noted that the role of the supervisor "should incorporate the three functions discussed earlier with being supportive of staff first" but that "administration is very important". Other examples of the role of the supervisor included to be a leader, to support staff, to liase with collateral professionals, and, to encourage the team, "somebody who has the main focus;" to guide the staff and be there for the kids (advocacy), to represent the views of staff to the main office; and to be a leader and to act as a facilitator of teamwork.

All of the CYC staff interviewed agreed that there should be minimum qualifications for supervisors in residential care. All of the staff stated that supervisors should have relevant post secondary education with a minimum of five years front-line experience. Relevant post-secondary education included a either a Youth Care diploma and/or Social Work degree, or a Bachelor or

Masters in Arts in Psychology. Some staff also suggested that training in management was important.

The qualitative interview data has been compiled to give the reader an overview of the various styles of supervision presently received and staff feedback regarding satisfaction. Staff perceptions about the relationship between staff satisfaction with supervision and program effectiveness is also shown in the table. This data matrix is presented in Table 11.

Table 11: <u>Supervisee Interview Data Matrix</u>

Type of Supervision Reported	Satisfaction	Preferred Style	Style Received	Formal and Scheduled Preferred?	Relationship between Supervision and Service Effectiveness	Staff Perception of Quality of Care	Self Perceived Practitioner Effectiveness
Formal, regular planned, every 2 months. Client and CYC focused	Pretty satisfied	H: Supportive M: Administrative L: Educative	Supportive	Yes	"Affects it greatly"	High	Effective
Informal, Irregular Client and CYC focused	Very satisfied	H: Supportive M: Educative L: Administrative	Supportive	Not necessary	"Really affects it	Really good	Somewhat effective
Informal, unplanned. Client and CYC focused	Fairly satisfied	H: Educative M: Supportive L: Administrative	All three	Yes	"Directly affects it"	Fairly high	Fairly effective
Formal regular, every 2 weeks. Client and performance focused	Satisfied	H: Supportive M: Administrative L: Educative	Administrative	Yes	"Greatly affects it"	Good	Effective
Informal, irregular. CYC needs based, client, & CYC focused	Satisfied	H: Supportive M: Administrative L: Educative	Supportive/ Administrative	Not necessary for experienced staff	"Directly related"	Very high	Effective
Formal, regular. every 4 weeks min. Client & CYC focused	Very satisfied	H: Supportive M: Educative L: Administrative	Supportive	Yes	"Very substantial"	Excellent	Effective
Irregular, informal, unplanned, unfocused	Dissatisfied	H: Supportive M: Educative L: Administrative	Administrative	Yes	"Very, very, much related"	Very very good	Effective

CHAPTER VI

DISCUSSION OF FINDINGS AND IMPLICATIONS

General Results

All supervisees, except one, (6 of 7) reported in the interviews that they are satisfied with the type of supervision they receive presently. With one exception, when supervisees do not receive regular, planned supervision, they still report being satisfied with supervision. As mentioned in the interviews, one of the reasons given for this is that staff teams who have worked together for many years have developed a close working relationship within the team. The team functions to provide a mutual support network for staff. It was also suggested that more experienced staff do not require the same level of supervisory input as do newer, less experienced staff.

Two staff who reported that even though they were satisfied with the present type of supervision received, said they would prefer to have the formal sessions more regularly, and more often. The staff who reported being dissatisfied, indicated that (s)he received no supervision at all and indicated that (s)he would like to receive regular planned supervision one hour per week. All of the staff except two, (who said it might be helpful in other units), said that formal, scheduled supervision is a "good idea" for CYC staff. The reasons given for considering regular supervision a good idea were primarily focused on the supportive considerations of supervision, although administrative concerns were also suggested. The educative component was not referred to as a focus that contributes to regular, planned supervision being "a good idea" for CYC practitioners.

The staff who reported in the interview that regular planned supervision is not required in their units exemplify the tenets of the situational leadership model, which suggests that supervisors should adapt their supervisory approaches to meet the needs of their supervisees. This theory suggests that

new, inexperienced staff require more input from supervisors. This input should be educative and administrative in focus in terms of teaching the employee what they are required to know in order to perform job tasks satisfactorily. More experienced staff do not require the same intensity in supervisory input. Once the requirements of the job tasks are understood and performed satisfactorily, the situational leadership model suggests that supervisors "back off" directive functions and concentrate on providing support and encouragement to supervisees. Intensive supervision with an educative/administrative focus is known to be resented by the more experienced, capable, well-performing supervisee.

It was interesting to note that supervisees reported in the questionnaires that the value of having a supervisor relates primarily to the administrative concerns of supervision including: "the responsibility to set the tone", "give vision and direction to the team", "to keep the team focused, consistent, and on track" and, "to liase with main office" (n=31). The supportive/educative considerations of supervision identified as important by supervisees in the questionnaire responses included: "to give support, guidance and encouragement", "to share knowledge", and "be a role model", however these considerations of supervision were reported to be secondary to the administrative considerations. In the interviews, one interviewee reported that the team had tried "the team approach" or "shared decision making" in place of a designated supervisor and that this was not an effective way of managing the unit. Although 6 of 7 supervisees also reported in the interviews that supportive considerations are their preference in terms of preferred supervisory style, the value of the administrative considerations are clearly seen by supervisees to be the role of the supervisor. This finding corroborates Kadushin's (1992) suggestion that both of the administrative and educative components of supervision can be delivered using a supportive approach, which incorporates all three functions of supervision in the holistic model.

All supervisees reported that they felt they were effective child and youth care practitioners. This was the case whether or not they reported they were satisfied with the type, style and frequency of supervision they received presently. It was suggested that practitioners and programs were effective regardless of the type of supervision received. This is an interesting result which appears to contradict the theory that effective supervision contributes to effective group care practice, and, program effectiveness. A staff person who reported that they were dissatisfied with the lack of supervision received concluded, that if quality supervision were received, then the team performance and service effectiveness of the unit would be of an even higher quality. It could be that CYC practitioners perceive themselves as effective regardless of the quality of supervision received because the caring task is also highly dependent upon the skills of the individual practitioner. If practitioners perceive themselves as highly skilled, and they are in fact highly skilled, perhaps a low quality of supervision does not deter from their abilities to provide a high quality of care for the children in their unit. It is also difficult to admit to others, particularly someone in a research role, that one may not be an effective practitioner.

Most supervisees reported that they see the relationship between the quality of supervision and program effectiveness as a direct one; and most supervisees report their supervisors provide a high quality of supervision, whatever the style in which it is received. All supervisees also reported that they felt that their programs were effective when this issue was explored in the interviews.

The consequence of receiving no supervision, or of perceiving the leader as relatively ineffective, (which was reported in one instance) was concluded to be indicative of poor morale amongst the staff team, a lack of accountability amongst the staff, lack of follow through by staff regarding designated responsibilities, and inconsistencies in treatment approach. These are serious consequences that would be directly related to program effectiveness. Some concerns were also raised by staff in the interviews about the "absentee"

supervisor. Staff reported that they knew of some supervisors who appeared to spend more time at the office that at the unit. This concern caused suspicion amongst these staff, one of which commented that (s)he knew of a previous supervisor who was "never" there: "I don't know where (s)he was". Another staff commented that (s)he knew of one supervisor who was at the office all day : "What could there be to do all day?"... "I don't know what people do in that building...I don't know, I can't figure it out". This concern relates to staff morale and should be addressed openly by supervisors and administrators. Staff appear to perceive a relationship between the quantity of time supervisors spend at the unit and staff morale. This perception by staff may need to be addressed with staff teams. One of the ways this could be done is to clarify supervisory roles and responsibilities regarding administrative responsibilities with both staff and supervisors. Open discussions and agreement regarding the delineation of supervisory responsibilities and duties outside the unit could be a focus for negotiation between management, supervisors and staff teams.

A dilemma was identified in the interview process regarding supervisors spending more time in the unit when children and youth are in the home – i.e. after school, dinner hour and evening time. Virtually all the staff interviewed felt that supervisors should spend evening time at the unit to observe and interact directly with the residents. Even when it was reported that the supervisor spent enough time at the home, it was suggested that more time be spent when residents are in the home. The dilemma here relates to the delineation of roles and responsibilities for supervisors and line staff. There appears to be a strong feeling that a part of the supervisors' responsibility is to participate at some level in the care giving task, at least to have a sense of "the pulse of the home" and to establish relationships with the children and youth.

When staff were asked about the boundary issues related to role responsibilities, they identified that the supervisor's primary focus should be on supporting staff and attending to administrative duties, but they still felt a supervisory awareness of issues related to the residents was critical. This issue

may also need to be further explored with staff teams. Additional comments relating to staff perceptions about their relationships with "the office" were expressed as a "sense of distance" from the office and from senior management. In each instance where this was discussed, staff recognized that their agency was working hard to improve communication between the residential treatment centres and the office, but there was still a sense of isolation from the office and from management. CYC staff felt that perhaps senior management might visit the treatment centres on occasion. It was also stated that management concerns regarding programs and front-line staff should be relayed to unit staff by their supervisors right away. Although it was acknowledged that supervisors perform a liaison function between the residential programs and agency administration and perform this role satisfactorily in most cases, the liaison function (linking pin) of supervision does not appear to substitute for this acknowledgment from senior management. Other comments focused on ensuring adequate representation of youth care on the various agency committees and boards and the acknowledgment of the appreciation of front line CYC staff by both agency management and the provincial government staff. It was acknowledged that supervisors are known to represent front line workers' needs and wants to management, as mentioned previously, however, there seemed to be a sense that there were some differences between front-line CYC practitioners' and management's perspectives about the nature of the work. The word "conflicted" was used by two people in their comments, although the issue was not clearly identified or defined. Some staff related that there was an aspect of the supervisory role that represented the management focus on budgetary constraints, perhaps this is a part of what staff were referring to. One staff person commented that supervisors should be "people who are more focused on the most effective way of helping kids, rather than focus on the financial part of it, but..in reality in 1999 that's part of their job".

Some barriers that were identified by supervisors to their optimum job performance did include, in one instance, a perceived lack of support from

management and a focus of financial necessity requiring the supervisor to perform the youth care role, which takes away from the time available to meet with staff.

Given the supervisors' comments, it would seem that even though front line CYC staff state they would like supervisors to work one shift per week in the unit when residents are home, this expectation may interfere with a supervisor's ability to provide quality time for supervision sessions with staff. As stated previously it may be important to clarify supervisory roles and responsibilities; role ambiguity and role conflict are the two major predictors of burnout among supervisors.

As mentioned in Chapter V, other barriers identified by supervisors regarding optimum job performance were related to difficulties with their own personality style, with giving direction, and with confrontation and conflictual issues with staff. It may be advantageous to explore these issues further with supervisors as there may be a training need identified in this area.

Supervisees identified many "dislikes" regarding supervisory style and these were earlier identified in Chapter V. Some of these dislikes corroborate the sense of conflicting elements identified in the supervisee interviews and in the barriers identified by supervisors. The most significant issues were highlighted previously and include being disorganized, giving unclear direction, inconsistency in approach and direction, allowing emotions to influence relationships, and avoiding conflict between staff and between children. However it must be pointed out that all of these criticisms are more than balanced by the consistently positive feedback regarding supervisory performance that was evident throughout the qualitative investigation in this evaluation. It is hoped that any potential feedback perceived to be negative is received as it is intended - as suggestions for consideration by supervisory staff and organizational managers. Further implications for practice are discussed next. These are presented in two sections: implications that arise from the

supervisors' results, and implications that arise from the supervisees' results. The conclusions of the study and suggestions for practice follow.

Supervisors' Results

The study evaluation incorporated measures designed to solicit feedback from supervisors regarding two key exploratory questions. These were: (1) What is the focus or style of the supervision modality: educative, supportive, or administrative that CYC staff presently receive? and (2) How do CYC supervisors perceive the relationship between unit program effectiveness and the quality of supervision received by staff?

The supervisors in this sample were, on average, a very experienced group with the average number of years supervising the staff at their present unit as 13 years. However, three supervisors do not presently have any specific training related to supervision and/or management in residential child and youth care services. A related issue to supervisory training mentioned in the introduction of this report is that presently supervisors access competency based supervisory training by way of the Child and Family Service competency based training for supervisors and managers. The provincial government may be encouraged to offer residential care supervisory staff the opportunity to access residential child and youth care specific competency based training. This would require the development of trainers and adaptation of the training modules previously delivered to supervisors by the Institute of Human services, as described in the introduction of this report. Half of this group of supervisors received this competency based training when it was offered in 1991. It is probably prudent to reexamine supervisors training needs on a system wide basis and establish supervisory training as a priority within the Residential Care Competency Based Training Program. Agency supervisors who participated in this project would very likely benefit from renewing their training needs assessments and prioritizing specific supervisory training with their managers.

Supervisors reported that they perceived their programs to be quite effective in the delivery of service to children, youth and families. They indicated that their programs are focused on working with families, permanency planning, empowerment and a focus of clients strengths and abilities. These are critical service quality descriptors and if supervisors have these program goals in mind as a common vision in supervising staff, this is indeed indicative of program effectiveness.

The supervisors reported a direct relationship between their effective performance in the supervisory role and their program's effectiveness. Interestingly, Most of the descriptors used by supervisors to describe this relationship related to the supportive and educative functions of supervision. This would corroborate the findings that supervisors tend to view the administrative function of supervision as less important than the supportive considerations.

Obstacles to the effective performance of their supervisory roles were identified as a perceived lack of support from management in one instance, and, budgetary constraints that necessitate a focus on the direct care giver role rather than the supervisory role, in another. Personality issues, supervision and staff were also identified as obstacles to optimum performance of supervisors.

Supervisors report being "pretty satisfied" in general with their roles as supervisors in their respective agencies and rank themselves as about 7.5 on a scale of 1= low and 10 = high.

Interestingly, both of the male supervisors in this small sample (N=6) tend to have a relatively balanced approach in terms of the focus of supervisory function between an administrative or supportive focus. Females tend to have a greater propensity toward one style over another. On average, as well, there appears to be somewhat of a balance in focus based on the descriptions in "How I look at my role".

As mentioned in Chapter IV, all of the supervisors, except one, fell into a category on the supervisory orientation grid that indicates moderate concern for

people and low concern for the work. This raises a concern. As described in the literature review of this report, a common criticism of human service supervisors is their tendency to focus their energies on the development of harmonious relationships with workers perhaps at the cost of facilitating organizational objectives. When supervisors focus on the people considerations of supervision, it may often be at the expense of monitoring assigned tasks (Mordock, 1993). Another risk that is inherent in a predominant focus of harmonious relationships is that supervisors may then avoid calling attention to areas requiring improvement for staff when staff actually desire such information (Mordock, 1993). Although a main tenet of the theoretical premise of this evaluation project was that supervisees in residential care programs would require a greater emphasis on the supportive function of supervision, it was not intended to suggest that this be at the expense of administrative or educative concerns.

An explanation for the "low consideration of the task" result for supervisors may lie in the apparent lack of role clarity evidenced in some of the supervisors' and supervisees' responses regarding the issue of the supervisor's presence at the unit. In order to fulfill the expectation inherent in the supervisory role to function as a unit program leader, to ensure the successful completion of the organizational task, which is in the case of residential group care: quality direct care service for children and youth, the unit supervisor may require explicit role delineation and a specification of the administrative focus from agency management. As much as it is desirable and beneficial for unit supervisors to spend quality time at their units when residents are present, their roles require them to be responsible to the primary task of supervising staff, not to the task of direct care. Perhaps this result which indicates such low concern with the organizational task is related to supervisory role conflict and role ambiguity. The residential care environment is a complex environment replete with competing demands for a supervisor's immediate attention. To be successful, the supervisor must tend to the needs of the administrative task, which must include

some control over external demands for time and attention. To compound the demand from staff that supervisors be more available in the unit, supervisors in this field are generally highly skilled, empathic, and caring CYC practitioners. Residents would surely benefit from therapeutic relationships with these individuals, however, this direct care focus will certainly compromise to some extent (and perhaps to a great extent) the supervisors ability to perform their indirect care responsibilities effectively.

As described previously, virtually all of the supervisees stated that they would like to see their supervisors at the unit more often when the residents are present. Perhaps this need is related to the educative role of the supervisor. If this is the case, then supervisors may wish to explore alternative means of role modeling effective CYC practice to their staff. There are no easy answers to this dilemma, however, supervisors, managers and direct care staff need to engage in open dialogue to attempt to determine what is best suited to the needs of each individual program. Regardless of the outcome of such dialogue, supervisors need to attend to the task of organizational accountability – concern for the administrative task, and for the educative function of the supervisory role – without compromising the level of support currently offered to their staff team.

Supervisees' Results

The sample of supervisees who responded to this survey are also a relatively experienced group, with the average number of years in CYC practice being 11 years. Twenty-five of 35 staff reported post secondary education at either the university level with an undergraduate degree or at the college level with a certificate/diploma in child and youth care. If one defines directly related education in this field as Applied Child Studies, CYC diploma/certificate, or B.S.W., only 9 staff have these types of educational qualifications.

There were two measures of job satisfaction used in the survey. The results from the general question in Part B indicated that the majority of

supervisees in this survey report that they are "pretty satisfied" overall with their roles as CYC practitioners at their agencies. However, five staff or, 14.3% of the sample reported being either somewhat dissatisfied or very dissatisfied. All five of these staff report their job dissatisfaction is directly related to their feelings about their supervisors. Of the six staff that reported being very satisfied in their roles as CYC staff, five reported that their job satisfaction was directly related to their feelings about their supervisors. Of the majority of staff (n=17) who reported being pretty satisfied with their roles at the agency, only five reported this was due to their feelings about their supervisors. The additional questions related to job satisfaction results were also quite poor, with sixteen staff reporting a mean score of 13.01, (s.d.= 2.03), which is "poor". The amalgamated measure or the "global" job satisfaction results were moderate with a mean score of 16.6, which is "pretty good" for the group.

These results are somewhat contrary to the overall results which indicate that staff are very satisfied with the supervision they receive presently. A satisfaction with supervision score of between 45-54 indicates that staff are very satisfied, and the average score for the group was 45.88, (s.d.= 6.23). An overall satisfaction with supervision score of more than 200 indicates that staff are very satisfied. This group's mean score was 236.8.

One can only conclude that the poor job satisfaction reported by staff in this survey is only somewhat related to the effectiveness of the supervisor. However, these results do indicate that when either somewhat or very dissatisfied with their roles, CYC practitioners report that this dissatisfaction is directly related to their feelings about their supervisors. The results can not differentiate between an objective appraisal of supervisory effectiveness and staff "feelings" about their supervisors. This concern should be considered by supervisees, supervisors and administrators and addressed where possible. When staff report being dissatisfied with their jobs, and relate this to their feelings about their supervisors, there is reason to more fully explore the dynamics of the relationship between staff and supervisor. Supervisees may

bear some responsibility to their own lack of job satisfaction. However, another interesting result of this exploration was the repeated suggestion by CYC practitioners in the interview process that even when staff are dissatisfied with their supervisors, they do not feel this compromises their effectiveness as practitioners. Unfortunately, questions were not asked about the perceived relationship between job satisfaction, morale and self-perceived effectiveness in the interview process.

Seventy percent of the staff in the sample indicated in the questionnaire responses that they felt their supervisor's effectiveness was directly related to their program's effectiveness with children and youth.

Two staff representing their units in the interview process indicated they received regular, planned, conference style supervision every two weeks. One staff reported they received this type of supervision every two months. Even though four of the five staff who did not receive the regular, planned conference style supervision reported being satisfied with the type they receive presently, all but two staff felt that this type of formal supervision is a good idea. When staff reported that they didn't feel that regular formal supervision was necessary, they suggested it had to do with the level of experience of the staff.

Nonetheless, the literature indicates that regular and planned supervision conferences should be a minimum standard in residential group care programs. Minimum standards suggested are 1 – 1 ½ hours every 2 weeks. Organizations are encouraged to develop explicit agency expectations regarding supervision, and individual supervisors are encouraged to develop individual supervisory contracts with individual staff. The process of supervision should be seen as an opportunity and a responsibility, and validated by agency mandate; it is the responsibility of the supervisor to provide the opportunity for quality supervision, and it is the responsibility of the supervisee to take advantage of that opportunity (Garfat, 1992).

Situational leadership models suggest that the more experienced staff do not require the same level of intensity in terms of the administrative and

educative functions/foci of supervision. However, as experienced as staff may be, individual conferences can be developed based on supervisee needs and can be support focused. Time can be used to reward the high performing staff by taking them out of the unit for an hour or so for coffee and a casual chat. The program, how it is designed, how it runs, and how it should be run must be topics included in the supervisory conference (Garfat, 1992). Self, clients, colleagues, teams, agency, policies, best practice are all pieces of content that can be examined in the supervisory conference. The staff in the interview process corroborated that the planned and formal style of supervision is valuable because "it gives us a chance to discuss issues: kids, coworkers, collateral's, personal" and "even if it's just to talk about ourselves"..."it showed them they are important as a person".

The preference reported by the residential care staff in the interview process for the focus of supervision (i.e., administrative, supportive and/or educative) was clearly supportive. As mentioned previously, however, results also indicated that staff report administrative concerns as the primary role responsibilities of the supervisor. Based on the interview results, it would seem that staff receive both supportive and administrative types of supervision, but there does not appear to be a significant focus on the educative function.

The educative function is particularly important as a focus in supervision for the new worker. It can also be important for those workers who have little formal directly related education and/or training in child and youth care. An educative focus also is critical to the transfer of learning process, as CYC staff are completing their competency based training and participating in other in-service training.

The quantitative results indicate that 14.3% of staff report they are receiving a low to moderate amount of educative supervision. This may be a cause for some concern as an educative focus is essential in order to teach/train the worker "what he needs to know in order to do his job" (Kadushin, 1992, p. 135).

The results regarding supervisory attention to the administrative function which are corroborated by the supervisory style measure, as described previously, are somewhat concerning, as well. Kadushin (1992) and others stress that a focus on, for example, the supportive function of supervision, should not, or must not, be at the expense of the other two functions. If this occurs, service effectiveness will be negatively affected.

Suggestions Regarding Supervision Processes in Residential Care Programs

This investigation was exploratory in nature and thus can not be generalized to other residential care settings. However, because of the author's practice experience, the purposive sampling procedures used, and the consistency of the findings of this study, certain assumptions have been made regarding the likelihood that the exploration results can be interpreted as likely to be somewhat representative of the supervision processes occurring in other residential care settings. Given this then, there is evidence based on the results of this study, to suggest that it may be advantageous for all residential care agencies to evaluate the relationship between supervisory effectiveness and service effectiveness more closely. It is also suggested that further research regarding supervisory processes be conducted in child and youth residential care agencies; particularly regarding the finding that child and youth care practitioners consistently indicated that they think that their supervisors should be present at the unit when residents are in the unit. It is also recommended that further research in this area be carried out to more closely examine CYC staff perceptions of measures of program effectiveness; it would appear that the program effectiveness measures consistently identified by staff in this study can be interpreted as more related to meeting staff needs than direct measures of outcomes for children and youth. This interpretation of program effectiveness is

rather disconcerting and may reflect a training need for CYC staff in residential care programs.

In addition, there does appear to be some areas worth considering as suggestions for attention by both the participating agencies and other residential program services in Manitoba. The first eight suggestions are based in a significant way on the data emerging from this study. Following, further suggestions related to this author's experience and the relevant literature are introduced in suggestions nine through eleven.

It is suggested that agencies examine the following areas of supervision processes in child and youth residential care practice:

1. Residential care agencies should develop clear policies regarding the value, expectations and functions of supervision in their agencies.

2. It is suggested that the implementation of these supervision policies be evaluated on a regular basis internally and/or externally.

3. The evaluation process should include feedback from staff and relate to measures of effective service delivery.

4. Agency supervisor job descriptions should specify clearly the details of the responsibilities inherent in the role.

5. Agency managers, supervisors and staff should engage in open discussions regarding the specification and delineation of the supervisory role as opposed to the direct care role.

6. Individual supervisory-supervisee contracts should be developed with staff based on learning needs and other related goals and objectives that are clearly articulated.

7. Individual and formal supervision should occur on a regular, (once every two weeks) planned, basis with all staff. The frequency and the content of the supervisory conference could be established in the individual supervisory-supervisee contract.

8. Agencies may want to consider that some of the present supervisory responsibilities not critical to the managing of service delivery be delegated to senior CYC staff.

9. Agencies should clearly establish minimum job qualifications for the supervisor and adhere to these in their hiring practices; further, these qualifications should at least reflect the 1989 standards for a Level III child care worker suggested by the Child and Family Support Branch (See Appendix A).

10. Supervisors should also receive formal, regular, (once every two weeks) and planned, individual supervision sessions with their managers/directors.

11. Agencies and government should collaborate on the development of standards for administrative practices in residential care facilities. Further, it is recommended that the process of the development of administrative standards should, at some level, incorporate feedback from front-line caregivers.

Conclusion

The theory underlying this evaluation was that child and youth care staff are likely to require a supportive focus in supervision due to the stressful nature of the work. However, it must be stressed that the support focus must not compromise the other functions of supervision, particularly the administrative function.

As mentioned in the literature review of this report, Hughes and Pengelly's (1997) alternative view of Kadushin's traditional model is worth considering as an example of a supervisory model with a primary focus on service effectiveness. As stated previously, these authors suggest that we conceptualize the work of supervision in terms of the "three participants" (p. 41): the supervisor, the practitioner and the service user. The three critical functions of supervision according to these authors are managing service delivery,

facilitating practitioner's professional development and focusing on the practitioner's work. See Figure IV and Figure V.

As described previously in Chapter II, the supportive function is excluded from Hughes & Pengally's model of supervision for the human services. The supportive attitude of supervisors, which conveys to staff that they consider their feelings are important, is essential to effective service provision. These authors stress, however, that if support is treated as an end of supervision, in and of itself, then there is a danger of the focus being on the worker's needs at the expense of a focus on client's needs, or service effectiveness.

Given the findings of this study, as discussed at length in the previous chapter, it would seem that although residential care supervisors appear to do a very commendable job supervising direct care staff, there may be room for improvement. Improving the process of supervision based on the suggestions emerging from these findings has the potential to improve residential care services delivered to children and families. Supervisors appear to be moderately supportive of staff, which staff report they appreciate. Overall, staff are satisfied with the supervision they receive. Indeed, it is apparent that many staff very much admire their supervisors; supervisees in the interview process reported their supervisors to be talented, committed, and caring individuals. That this is the case in certainly not disputed. However the focus must be on delivering the most effective residential care service possible. This requires attention to the task of managing service delivery and to the administrative function. There was evidence in this evaluation that supervisory attention to the service task and to the administrative function may be relatively low given the results of the quantitative measures. The supportive focus envelops the facilitation of the task; it can not be a supervisory focus used at the expense of the work – care for children and youth.

Figure IV: The Participants in Supervision

Supervisor

Practitioner   Service-User
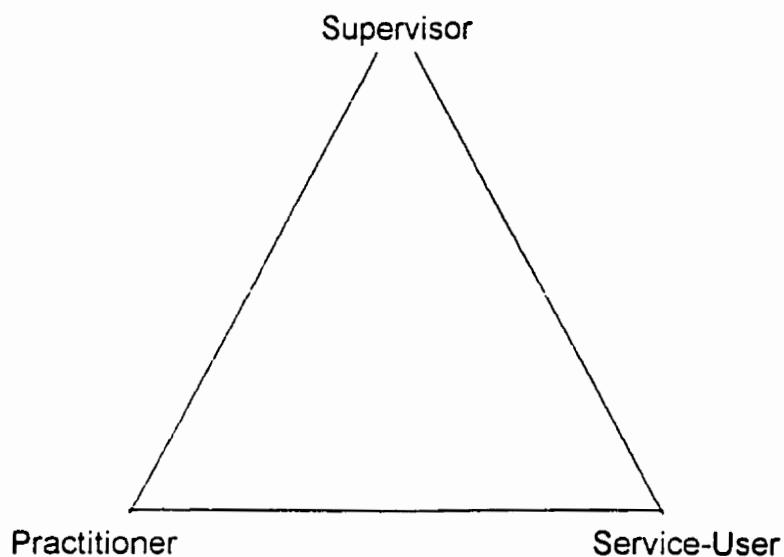
Figure V: Supervisory Functions

Managing Service Delivery

(support)

Facilitating Practitioner's   Focusing on

Professional Development   Practitioner's Work
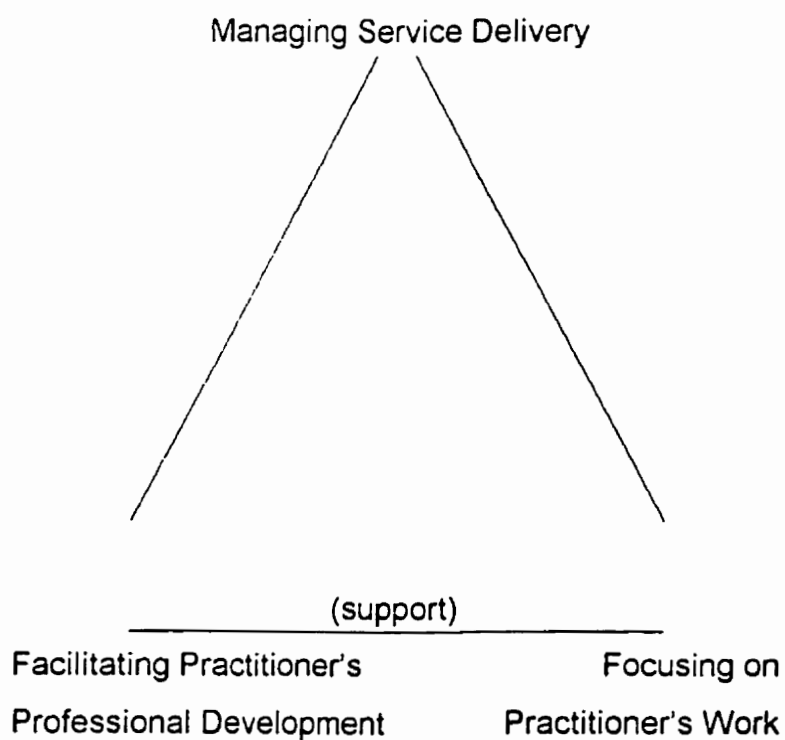
Adapted from Hughes and Pengelly (1997), Staff Supervision in a Turbulent
Environment, p. 41-42.

CHAPTER VII

EVALUATION OF PRACTICUM

Presentation of Findings to Agencies

The findings resulting from the evaluation project as described in the previous chapters were presented by the student to the representatives of the participating agencies: the clinical director of New Directions for Children, Youth, and families; and the residential programs coordinator of Marymound, Inc. This presentation occurred at the end of the evaluation study and was the secondary focus of intervention for the practicum project. The presentation format that was chosen by the student was to review the project in its entirety and provide a synopsis of the final practicum report. At the outset of the presentation, the process of informing staff participants was reviewed in some detail in order that the agency directors would have a good sense of the process that the student engaged in to assure that the evaluation was carried out in an ethical and professional manner. Following this discussion, the purpose of the evaluation, the evaluation questions, and the quantitative and qualitative instruments used in the study were very briefly reviewed. Next, the results of each aspect of the evaluation were reviewed in some detail following the same format as the presentation in this written report. The presentation concluded with a discussion of the summary of the findings of the evaluation and the suggestions emerging from the study. These suggestions were reviewed in considerable detail. The representatives were given a Presentation Report which was referred to in the presentation and they will receive a copy of the final practicum report upon its acceptance by the MSW advisory committee.

Evaluation

i) Evaluation by Agency Representatives

The agency representatives were asked to evaluate the student's performance in the conduct of a formative evaluation of the process of

supervision at their agencies. An evaluation form was developed by the student and provided to the agency representatives at the end of the presentation. The primary focus of the evaluation was to solicit feedback regarding the potential for the agencies to utilize the study results in the development of organizational policy and practice in the process of supervision at their agencies. The solicitation of evaluative feedback from the agencies was focused on the study's relevance and the potential for utilization of results because "evaluation as an applied research is committed to the principle of utility. If it is not going to have any effect on decisions, it is an exercise in futility" (Weiss, 1972, p.10). The "performance" evaluation questions were, in a broad sense, developed based on criteria that are known to have the potential to affect an evaluation's relevancy and utilization.

The responses to the evaluation questions were very positive. Both agency representatives indicated that the student approached entry into their organizations in a professional manner. In one case, the response to the question regarding the clarity of the goals: "Was the student clear about the goals of the project?" was positive. In the other, the respondent indicated that the student was somewhat clear about the goals of the evaluation project; the respondent indicated that the goals of the project needed to be changed due to the availability of information. This is in reference to the nature of the evaluation questions which originally included objective measures of service effectiveness. When the student was negotiating agency participation at the outset of the practicum, the intent was to compare measures of service effectiveness to measures of the quality of supervision received by staff. These goals were changed at the practicum proposal stage due to the enormity of the original study design. The student may not have been as clear as she should have been about these changes with the agency representatives. Both agency respondents indicated that they thought the project evaluation questions reflected issues regarding supervision that were pertinent to residential care practice. Both respondents indicated that they thought the student approached the design of

the project in the best possible manner in order to answer the evaluation questions. One indicated that this was particularly notable due to the time pressure and the anticipation of some resistance to participation by agency supervisors and staff. Both respondents indicated that the presentation of the results was informative and interesting. Both indicated that their agencies will use the results of the evaluation to influence policy and/or practice regarding supervision at their agencies; one said "most definitely", the other said that the knowledge gained will assist with direction and quality assurance. The respondents were asked to rate the student's project in terms of the usefulness of the results and recommendations overall on a five point scale from: "Very useful with strong potential for utilization" to " Not useful at all, has no potential for utilization". Both responded that it was "Very useful with strong potential for utilization" . Both indicated that the results should be made available to other child and youth serving residential care agencies and the Child and Family Support Branch. Both indicated that they would be willing to participate in presentations to other agencies.

ii) <u>Student Self-Evaluation</u>

The student self evaluation is presented in the context of the learning goals discussed in Chapter I of this report. As presented in Chapter I, the primary learning goal of the student was to develop the knowledge and skills required to successfully conduct a process evaluation study in a residential care program. In concert with this learning goal, the implementation of the practicum was intended to provide the student with the skills required to promote the utilization of the evaluation results both in agency practice and in quality assurance in residential care. The third personal learning goal was related to my extensive practice experience and the passionate belief that the caring task in child and youth care practice in residential care is both tremendously important and a tremendous responsibility. More specifically, this third learning objective was to explore whether there was theoretical and empirical justification for the

intuitive belief that staffing variables have a significant impact upon the quality of care received. This goal sets the context for the implementation of this evaluation project as a worthwhile endeavour in the first instance. This relates to the evaluation of the project's relevancy. The presentation of the student self-evaluation will first briefly address this last point as it relates to the third learning goal.

The logic underlying the choice of evaluative methodology, i.e., whether the evaluation would be summative or formative, will be briefly reviewed first. This part of the evaluation of student learning and performance serves to underscore the principle motivation for the study. The principle motivation for the study represents its relevancy both to practice and to student learning. The reasons why the student identified that a process evaluation is important in the area of child and youth residential care services were presented previously. To briefly review these reasons, as described in Chapter I, the prevailing view of residential treatment as the least desirable service option in the continuum of out of home care services for children and youth can be seen to be related to a system-wide absence of evidence regarding program effectiveness. Outcome evaluation in residential care is still in the beginning stages of development and results of outcome evaluations are relatively meaningless without the adequate specification of process. The specification of process variables is important to ensure that the idea of "treatment" is adequately defined in order to make sense of outcome. That is, the measurement of client outcome has little meaning in the absence of the specification of "what" contributed to either positive or negative outcome. Thus, the first choice the student needed to make regarding the implementation of this evaluation was between a formative (process) and a summative (outcome) methodology. The choice of a process evaluation was guided by the theory and the logic as presented. This was a significant learning experience in and of itself.

Once the choice between the evaluation approaches was made, the specification and documentation of the "critical components" of the residential

care service delivery environment was the first step in designing the process evaluation. As described in Chapter II of this report , a residential care program is a very complex environment. Conducting a process evaluation in this environment involves identifying the many variables that have the potential to influence the quality of care received by clients, and hence, theoretically, to impact treatment outcome. At the outset of this project, the intent was to explore the hypothesis that the quality of supervision received by staff influences the quality of staff performance; both of these variables were hypothesized to have a critical influence upon the social climate of a residential care unit, which was hypothesized to have the most critical influence on treatment outcome for child and youth service users. This hypothesis was too broad to operationalize successfully, and was narrowed to eliminate social climate as a variable. The next hypothesis that was developed was that the quality of supervision received influences the quality of staff performance which has a critical influence on service effectiveness defined as client outcome. This hypothesis was also too broad and carefully considered choices had to be made regarding the definition of the critical components of process. Staffing variables were hypothesized to be significant process variables. The identification of staffing variables as critical components of process was guided by practice experience and corroborated in the literature. Although it was quite disappointing to abandon the breadth of the original hypothesis, the narrowing of the exploration was a key learning experience for the student.

The results indicate that there is in fact justification to define staffing variables, specifically, the process of supervision, as significant components of process in residential care programs. There were no objective measures of service effectiveness included in this evaluation design, however, the qualitative data indicates that all of the study respondents (N=41) corroborated the view that there is in fact a direct relationship between service outcomes and the quality of supervision received by staff. Thus, the investigation indicated that there is evidence to justify inclusion of these variables in quality assurance and

program evaluation in residential care. This result therefore met one of the most significant student learning objectives.

The primary learning goal was to develop the knowledge and skills to successfully implement a process evaluation. Some of what has just been described relates to this student learning goal as well. Whether or not this learning goal was met will be further evaluated using Conner's (1984) "Model for evaluation implementation" .

Conner indicates that the first step in implementing an evaluation is learning about the program. This step includes meeting with key informants and trying to understand the underlying dynamics of the program. This step is also known as conducting an evaluability assessment of a program. This step was subsumed by the student's years of practice experience and ongoing discussions with key informants over the years. As well, most of the programs were very familiar to the student due to the ongoing contact that occurs through her role as instructor for practicum students. The student was careful to "avoid making any public judgments about the program or its personnel" (Conner, 1984, p.193).

Next, the evaluator creates the evaluation plan, noted before, above, in reference to the choices regarding hypotheses and methodologies.

The third step is to brief program staff about the evaluation. The student was meticulous about her contact with program staff in this step of implementing the evaluation. After the preliminary contact with the program directors, each supervisor was contacted by telephone and a introductory explanation of the ideas and the goals of the evaluation was presented. Arrangements were made with program supervisors to attend unit staff meetings to explain the purpose of the evaluation and its goals, to present the instruments, and to explain informed consent, confidentiality and anonymity to unit staff.

The revising and elaborating of the evaluation plan which comprises the next step in implementing an evaluation was relatively nontraditional in this study. That is, the format of this process evaluation was not related to identified

program goals, therefore feedback from program staff regarding the identification of program goals was not undertaken. However, in retrospect, feedback from key informants including the program managers, unit supervisors and staff at the beginning stages of the planning processes may have been a valuable step in the implementation of this evaluation. Feedback from the agency directors regarding this issue at the presentation of results was such that they determined that missing this step was not a concern. However, the participants were not given the opportunity to give the student evaluator their reactions, suggestions, and/or comments, except in a cursory way at the initial briefings (Conner, 1984). This may be identified as a shortcoming of the evaluation. Other issues identified by the student evaluator in the revising stage could have included the limitations of the evaluation design described at the end of Chapter III. These were not identified until after the fact once the student had an opportunity to interpret the qualitative and quantitative findings. Another limitation identified after the fact was that it may have been beneficial to structure the qualitative investigation upon the results of the quantitative exploration. However, these issues are all related to the primary learning goal. The student succeeded in learning how to conduct a process evaluation. The issues identified are all part of the learning process.

The final steps involved in the implementation of an evaluation identified by Conner relate to the student goal of learning how to promote the utilization of the study results in both the practice and the policy arena. These are initiating the evaluation plan, monitoring the evaluation, and utilizing the evaluation (1984).The student was successful in promoting the utilization of results in practice and policy at the agency level given the feedback from the agency participants. It is apparent, however, that the student's level of skill regarding the promotion of the utilization of results to influence quality assurance remains somewhat underdeveloped. This is a disappointment, however this skill development will continue to be pursued by the student as an ongoing professional goal.

Overall, this evaluation project met the student learning goals as identified at the outset of the project. The issues that may be identified as shortcomings of the student's role as evaluator are all part of the learning process. This project was a tremendous learning experience. It also validated many of the issues that I had previously identified at an intuitive level, regarding service effectiveness in residential care, as substantively significant. This validation was very rewarding in and of itself.

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Appendix A

Child and Family Support Branch Leveling System in Manitoba

and

1989 Suggested Qualifications for Child Care Staff in Residential Care

Facilities

PROCEDURES

Residential care resources include group homes and private institutions. They are defined under The Child and Family Services Act as: "a home where not less than four or more than eight children are placed by an agency for full-time care and supervision."

Residential care resources provide care and treatment for children whose needs cannot be adequately met in a natural/extended family home or in a substitute family setting.

Levels of care

In Manitoba, residential care resources are categorized through a level of care system. This system indicates the level of a child's needs and the care provided by the facility.

Level II group home:

Client characteristics - situational problems, minor behavioral, emotional, or interpersonal problems.

Children whose backgrounds are comparable to those described in Level I and suffer "situational difficulties;" but who also show behavioral, emotional, and interpersonal problems requiring placement away from home.

Examples include poor school attendance, delinquent activity (property offences), resistance to parental attempts at control. Children who are mildly retarded requiring placement are also included in Level II.

Program orientation - "family routine" directed toward living in a family.

As part of family living, houseparents plus support child care staff consciously involve all children in activities geared to enhance learning, socialization and work or activity skills, (recreational involvement with ongoing support from houseparents or child care staff).

Houseparents or child care staff provide support and facilitate resident's participation and attendance in appropriate recreation.

Level III group home:

Client characteristics - **moderate behavioral, emotional, or interpersonal problems, some situational.**

These children differ from those in levels I and II on the basis of the degree and typology of problems presented. Their behavior and personal conflicts require more tolerance, understanding, and control than could be reasonably handled in a family setting. Problems presented include mild/moderate emotional disturbance, moderate retardation, pronounced control and behavioral problems such as hostility, resistance to every day rules and regulations, and repeated delinquencies.

Program orientation - **"activity program"" directed toward socialization.**

At this level, the free time of the children is coordinated to enhance their social and interpersonal awareness. Evening activities are "outside" (visits to planetarium, travelogues) or "inside" (group meetings to discuss problem areas which are planned, discussed and meeting the identified needs of unsophisticated residents). At this level, group participation in recreation is a requirement. Resources are used under the supervision and direction of the child care staff.

Level IV group home

Client characteristics - **volatile children with high degree of behavioral, emotional, and interpersonal problems.**

These children cannot regularly handle the demands of regular school programs. They are demanding on other children and adults and consequently experience many crises in daily living and exhibit many signs of disturbance. The child resists change or treatment intervention. These children, because of their high degree of emotional disturbance, may be violent to themselves or others, and require considerable control and structure.

Program orientation - **"planned individualized program" directed toward increasing awareness, self-control.**

This level differs from Level III in that there is more planning of programs to meet individual needs. Most evenings are organized with "outside" or "inside" activities to

coordinate most of the children's free time to enhance their awareness, develop some insigh and self-control. These activities are supervised by child care staff. Most recreation takes place within the resident group. Children usually at a Level IV cannot use community resources to their fullest and require a great deal of encouragement and support.

Level V group home

Client characteristics - **severe emotional disturbance, psychiatric problems, violence, sever retardation.**

These children are frequently a danger to themselves or others due to the severity of their emotional disturbance. They are unable to handle the demands of daily living or school an require individualized treatment planning and programs, considerable control and structure.

Program orientation - **"therapeutic" directed toward interpersonal and emotional growth.**

The whole emphasis at this level is to effect improvement in the individual by consciously building insights, understanding of motivation, assisting the resident to realize the effect his/her actions and behaviors have on others, increasing his/her self-awareness, thereby achieving better personal control and communication skills.

PROCEDURES

The following position descriptions and qualifications have been accepted by the Residential Care Advisory Committee and it is the intent that all child care workers in residential care facilities adhere to them.

Child Care Worker I

General

> Facilitate positive change in clients within a therapeutic milieu.
>
> Provide care, treatment, and supervision to residents.
>
> Work as a member of a treatment team.
>
> Be directly responsible to a supervisor.
>
> Work in accordance to care facility philosophy, policies and procedures.
>
> Work within provincial guidelines.
>
> Perform routine household tasks.

Responsibilities

> **To the child:**
> Be aware of design and implement services in accordance to individual needs.
>
> Respect and encourage appropriate familial and community involvement.
>
> Maintain and develop professional objective, goal-related relationships with residents.
>
> Observe and record daily events and evaluate interventions.
>
> Establish and maintain good working relationships with external agencies and collaterals.
>
> Safeguard confidential information about the resident and their family.
>
> Protect resident's legal and human rights.
>
> Be a positive role model.
>
> Maintain the facility in an orderly manner.
>
> Perform other related duties as assigned.

> **To the organization:**
> Work in accordance with standards, policies, procedures, philosophy or the facility.
>
> Represent the organization formally and informally in a professional manner.
>
> Participate in staff meetings and staff development.
>
> Engage in regular supervision with the unit supervisor.
>
> Engage in formal evaluation sessions.
>
> Bring to the attention of the supervisor any unresolved problems.

To the profession:

Be familiar with current child care practices.

Work towards improving your own professional standing.

Abide by the Youth Care Workers' Association's Code of Ethics.

Qualifications

Personality:

Be a self-confident, assertive, and mature individual with the ability to be nurturing and demonstrating initiative and a sense of fairness.

Has an awareness of self and his/her effect on others.

Ability to establish relationships and a commitment to extend oneself in relationships.

Be open-minded and have a desire to learn.

Knowledge, abilities, and skills:

Understand relationships and treat each appropriately.

Make appropriate decisions and to process problem-solving.

Be flexible to meet different shift schedules as required.

React appropriately in crisis and under stress.

Provide a functional assessment of observed behavior.

Work effectively with interdisciplinary team and external organizations.

Deal effectively with behaviorally and emotionally disturbed people in a therapeutic environment.

Good written and verbal communication skills.

Thorough knowledge of life skills and ability to teach same.

Education:

Have a working knowledge of child development, normal and abnormal behaviors.

Minimal Grade 12 or eligible for mature student status or prior experience in the field.

Physical:

Physically capable of performing assigned duties.

Child Care Worker II

General

Includes all of the general Child Care Worker I job description and the following:

On occasion assume some of the responsibilities of the supervisor.

Responsibilities

To the child:

Includes all of the Child Care Worker I responsibilities and the following:

Be able to identify the needs of residents.
Facilitate familial and community involvement.
Advocate for residents' rights.
Be aware of therapeutic interventions.

To the organization:

Includes all of the Child Care Worker I responsibilities and the following:

Identify organizational development needs.

Qualifications

Includes the Child Care Worker I qualifications and the following:

Education:

Minimum of Grade 12 and three years residential child care experience or formal training in child care/human services.

Knowledge, abilities, and skills:

Thorough knowledge of child development.
Ability to minimize stressful situations from development.

Child Care Worker III

Includes all requirements of the Child Care Worker II and the following:

Management responsibilities

Coordinates facility resources.

Provides administration, supervision, and evaluation.

Plans and conducts staff meetings.

Supervises and evaluates staff performance.

Recommends on in-service training, hirings and terminations, staff discipline, work performance, and merit increments.

Manages funds for day-to-day activities.

Responsible to the facility's director.

Program development

Develops and evaluates the appropriateness and the impact of programs within area of responsibility.

May handle intake in facility director's absence.

Assists and develops policy and procedures.

Develop programs suitable to children's needs.

Provides orientation/supervision to new and/or relief staff.

Responsible to the facility's executive director.

Qualifications

Includes all the Child Care Worker II qualifications and the following:

University education or its equivalency, with emphasis on psychology, sociology and human behavior, or a certificate in child care with considerable directly related experience.

Executive Director

General

The executive director of a residential care facility is responsible for the overall operation of the facility. The executive director is responsible to licensing authorities and may be responsible to a board of directors.

Duties

The executive director is responsible for the following but may delegate to the appropriate staff functions for:

- Administration
- Staffing
- Program
- Facility Structure
- Residents
- Professional Development
- Community Involvement
- Advocacy

Administration

- develops budget for the organization by facility
- ensures accounts payable/receivable are monthly
- ensures the administration of benefit plan for all staff
- ensures the completion of ledgers and petty cash
- ensures correspondence is appropriately handled
- ensures annual audit is completed
- completes internal review of administration duties
- completes required statistical analysis for any internal review
- provides administration training for any staff responsible for in-house budget
- facilitates any internal staff meetings

Staffing

- develop personnel manual for all employees
- develop hiring criteria in keeping with facility philosophy, standards
- advertises vacant positions
- hires and terminates staff as required
- develops schedules for staff in keeping with needs of residents
- provides direction and support to staff as needed
- ensures yearly evaluations are conducted with each staff
- responsible to handle all staff grievances
- may negotiate with union
- develop and maintain a program manual outlining facility philosophy, policy, process

Program

- ensure program as outlined is followed via internal review/audit
- ensure program flexibility to meet needs of current residents
- develop program through a revisioning process that includes ongoing assessment/ evaluation of current techniques in intervention in light of present research in child car

Structure

- liaise with Residential Care Licensing to ensure facility meets minimum licensing requirements
- ensure facility meets normalized standards regarding furnishings, decor
- maintain upkeep of facility

Residents

- ensure children admitted to the facility receive the quality care needed
- ensure placing agency provides appropriate referral documentation including needs identification
- ensure appropriate planning for each resident
- ensure therapeutic intervention by staff

Professional development

- ensures staff have opportunities to be updated on trends, treatment, research regarding child care
- ensures staff have inservice and training opportunities
- sits on relevant committees, (Advisory Committee, MARTR, CCCTC)

Community involvement

- provides leadership and direction to community or neighborhood regarding residential care
- facilitates, fosters, and maintains positive working relationships with all organizations, public and private, that impact in any way upon the service delivery.

Advocacy

- identifies individual child's needs to appropriate others
- identifies system needs to appropriate other

Appendix B

Informed Consent Form

Residential Care Supervisors and Child and Youth Care Workers

I, _____ hereby consent to participate in a research project concerning our unit. I have been informed that the purpose of the research is to evaluate the relationship between supervision, quality of staffing and the effectiveness of our unit. I have been informed that it is intended that the project will help inform the organization and provincial policy makers and funders about effective residential programs for children and youth.

I have been informed that this practicum research project is being carried out by Dawne MacKay-Chiddenton to fulfill, in part, the requirements of a Master's degree in Social Work.

For Child and Youth Care Staff: I understand that Dawne has asked that I respond to a questionnaire designed to measure my satisfaction with the quality of supervision I receive. I also understand that I may volunteer to participate in an in-depth interview regarding my opinions about supervision, and other ideas that I may have regarding the effective functioning of my unit and residential care, in general.

For Supervisors: I understand that Dawne has asked that I respond to a questionnaire designed to measure my preferred supervisory style.

I understand that my right to privacy will be maintained at all times, and that responses to the questionnaires will be shared in aggregate form only.

I also understand that I may freely choose to not answer any questions in the questionnaire and/or interview

I have been informed that the results of Dawne's research will be compiled in a practicum report which will be available to all interested persons.

I have also been informed that I may contact Dawne at any time regarding any questions that I might have about my participation in the research.

I have also been informed that my participation in the research is strictly voluntary and that I may withdraw my consent to participate at any time, without any penalty whatsoever

I have received a copy of this Informed Consent Form

_____   _____
Date   Signature

Appendix C

Supervisee Questionnaire
"Staff Satisfaction with Supervision"

Supervision Questionnaire for Child and Youth Care Staff

Thank you very much for agreeing to participate in this research project. Your responses to this questionnaire will help to identify the type of supervision which may work best for child and youth practitioners in residential youth care settings.

It is very important that you answer all questions as honestly as you can. It is also important that you answer all questions as fully as possible. There is room for additional comments at the end. Remember that your responses to this questionnaire are entirely confidential, and that no one will be able to identify your response by the results.

A. Demographics

Please fill in the information or check the blank for each question.

1. Gender _____

2. Age _____

3. Number of years in child and youth care practice _____

4. Number of years in this unit _____

5. What is your position at this unit? _____

6. Number of years at this agency? _____

7. Number of years of other related child welfare experience _____

8. Highest level of education attained _____

9. Please list all relevant certificates and training received

_____

_____

_____

_____

_____

_____

B. Job Satisfaction

Please answer the following question by marking with an "X" the response category that <u>best describes</u> how you feel about the question.

1. How satisfied are you with your role as a child and youth care practitioner at this agency?

☐	☐	☐	☐	☐
Very Dissatisfied	Somewhat Dissatisfied	Satisfied	Pretty Satisfied	Very Satisfied

2. To what degree is your satisfaction or dissatisfaction related to your feeling about your supervisor?

☐	☐	☐
Not Related	Somewhat Related	Directly Related

C. Satisfaction with Supervisor

Please answer each of the following questions by circling the response category below each question that <u>best describes</u> how you feel about the question.

SD - Strongly disagree
D - Disagree
MD - Mildly disagree
MA - Mildly agree
A - Agree
SA - Strongly agree

1. My supervisor lets me do my work the way I think is best.

   SD   D   MD   MA   A   SA

2. I feel my supervisor has contributed to my professional growth.

   SD   D   MD   MA   A   SA

3. My supervisor respects me as a professional and treats me as such.

   SD   **D**   **MD**   **MA**   **A**   **SA**

4. I think my supervisor is fair.

   SD   **D**   **MD**   **MA**   **A**   **SA**

5. Overall, I am satisfied with my supervisory experience.

   SD   **D**   **MD**   **MA**   **A**   **SA**

6. I usually come out of staff meetings feeling good.

   SD   **D**   **MD**   **MA**   **A**   **SA**

7. I usually come out of one-to-one meetings with my supervisor feeling good.

   SD   **D**   **MD**   **MA**   **A**   **SA**

8. I do not look forward to meetings with my supervisor.

   SD   **D**   **MD**   **MA**   **A**   **SA**

9. My supervisor's evaluation of my job performance are similar to my self evaluations of my job performance.

   SD   **D**   **MD**   **MA**   **A**   **SA**

10. My supervisor knows how to set priorities.

   SD   **D**   **MD**   **MA**   **A**   **SA**

11. My supervisor is good at organizing work.

   SD   **D**   **MD**   **MA**   **A**   **SA**

12. My supervisor knows how to teach techniques.

   SD   **D**   **MD**   **MA**   **A**   **SA**

13. My supervisor emphasizes paper work while I am more interested in interacting with children, youth and families.

   SD   **D**   **MD**   **MA**   **A**   **SA**

14. My supervisor rules with an iron hand.

   SD   **D**   **MD**   **MA**   **A**   **SA**

15. My supervisor is slow to accept new ideas.

   SD   **D**   **MD**   **MA**   **A**   **SA**

16. My supervisor insists everything is done her/his way.

   SD   **D**   **MD**   **MA**   **A**   **SA**

17. My supervisor likes to give direction.

   SD   **D**   **MD**   **MA**   **A**   **SA**

18. My supervisor has a "just pay attention and listen" attitude.

   SD   **D**   **MD**   **MA**   **A**   **SA**

19. My supervisor seems to know what s/he is talking about when is comes to working with kids.

   SD   **D**   **MD**   **MA**   **A**   **SA**

20. My supervisor has the necessary knowledge to be a good child and youth care practitioner with respect to a teaching role.

   SD   **D**   **MD**   **MA**   **A**   **SA**

21. My supervisor talks a lot about theory and doesn't apply theory to real life practice.

   SD   **D**   **MD**   **MA**   **A**   **SA**

22. My supervisor assumes I know more than I do and talks over my head.

   SD   **D**   **MD**   **MA**   **A**   **SA**

23. My supervisor has helped me develop self awareness.

   SD   **D**   **MD**   **MA**   **A**   **SA**

24. My supervisor seems more interested in analyzing me than talking about cases.

   SD   **D**   **MD**   **MA**   **A**   **SA**

25. When a child is discharged unexpectedly, or if there is an incident, my supervisor is interested in what the staff did to contribute to the incident.

   SD   **D**   **MD**   **MA**   **A**   **SA**

26. My supervisor has helped me improve my effectiveness as a child and youth care practitioner.

    SD   **D**   **MD**   **MA**   **A**   **SA**

27. When I have worked with my supervisor, or we've had a meeting, I feel pretty good at the end of the shift.

    SD   **D**   **MD**   **MA**   **A**   **SA**

28. My supervisor is friendly and approachable.

    SD   **D**   **MD**   **MA**   **A**   **SA**

29. My supervisor encourages me to talk freely to him/her.

    SD   **D**   **MD**   **MA**   **A**   **SA**

30. My supervisor makes me feel comfortable and at ease when I am talking with him/her.

    SD   **D**   **MD**   **MA**   **A**   **SA**

31. My supervisor expresses appreciation when I do a good job.

    SD   **D**   **MD**   **MA**   **A**   **SA**

32. My supervisor does not always make him/her self very clear.

    SD   **D**   **MD**   **MA**   **A**   **SA**

33. My values about what makes good treatment are very different from my supervisor's.

    SD   **D**   **MD**   **MA**   **A**   **SA**

34. I often seek the advise of my co-workers rather than take the matter up with my supervisor.

   SD   **D**   **MD**   **MA**   **A**   **SA**

35. If I can avoid it, I will not attend meetings with my supervisor.

   SD   **D**   **MD**   **MA**   **A**   **SA**

36. It does not pay to confront my supervisor with an issue.

   SD   **D**   **MD**   **MA**   **A**   **SA**

37. My supervisor usually wants to discuss issues in our one-to-one sessions; s/he doesn't give me praise in our one-to-one sessions very often.

   SD   **D**   **MD**   **MA**   **A**   **SA**

38. My supervisor seems more concerned with rules and regulations than the welfare of clients.

   SD   **D**   **MD**   **MA**   **A**   **SA**

39. My supervisory experience has been of limited value due to agency politics.

   SD   **D**   **MD**   **MA**   **A**   **SA**

40. It is no use trying to do something creative or innovative in this agency because someone will always shoot down your ideas.

   SD   **D**   **MD**   **MA**   **A**   **SA**

41. Usually I am way behind in my file recordings.

   SD   **D**   **MD**   **MA**   **A**   **SA**

42. The administration of this agency show little concern for the staff here.

   SD   **D**   **MD**   **MA**   **A**   **SA**

43. This agency seems to be in a constant state of crisis and we go from one crisis to another.

   SD   **D**   **MD**   **MA**   **A**   **SA**

44. There are so many problems in the agency, I just devote my time to my clients.

   SD   **D**   **MD**   **MA**   **A**   **SA**

45. All in all this agency is a pretty good place to work.

   SD   **D**   **MD**   **MA**   **A**   **SA**

Please answer each of the following questions by circling the response category below each question that best describes how you feel about the question:

46. How often do you become annoyed with your supervisor

   Never   **Infrequently**   **Sometimes**   **Frequently**

47. How often do you become angry with your supervisor?

   Never   **Infrequently**   **Sometimes**   **Frequently**

48. How often do you confront your supervisor?

   Never   **Infrequently**   **Sometimes**   **Frequently**

49. My supervisor sits in on some of my one-to-one sessions with kids.

   Never   **Infrequently**   **Sometimes**   **Frequently**

50. My supervisor works actively with the staff and with the kids at this unit.

Never   **Infrequently**   **Sometimes**   **Frequently**

51. My supervisor has good staff meetings.

Never   **Infrequently**   **Sometimes**   **Frequently**

Please rank your supervisor from 1-10 (1 low 10 high) according to how good a supervisor you think he/she is:

_____

Please rank yourself from 1-10 (1 low 10 high) according to how good a child and youth care practitioner you think you are:

_____

Do you think that your supervisor has helped you to improve your effectiveness as a counselor?

☐ Yes
☐ No

Please complete the following sentences.

The things I like most about my supervisor are:

1._____

2._____

3._____

4._____

5._____

The things I dislike about my supervisor are:

1._____

2._____

3._____

4._____

5._____

What do you think is the value of having a supervisor?

_____

_____

_____

_____

_____

Would you please comment on your perceptions regarding your program's effectiveness with children and youth?

_____

_____

_____

_____

_____

_____

How do you think your supervisor's effectiveness affects your program's effectiveness with children and youth?

_____

_____

_____

_____

_____

Additional Comments:

_____

_____

_____

_____

_____

_____

Please place your completed questionnaire in the accompanying envelope, seal it and return it to your staff delegate.

Thank you very much for your participation in this research project. Hopefully, the information that you have shared will help to inform policy makers and enhance the quality of residential care services for children, youth, and families in Manitoba.

Adapted from the Supervision Questionnaire by Dr. Carlton Munson in An Introduction to Clinical Social Work Supervision. New York: The Haworth Press.

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Appendix D

Supervisor Questionnaire

"My Supervisory Style"

Supervisor's Questionnaire - My Supervisory Style

Thank you very much for agreeing to participate in this research project. Your responses to this questionnaire will help to identify the type of supervision which may work best for child and youth practitioners in residential youth care settings. It is very important that you answer all questions as fully as possible. There is room for additional comments at the end. Remember that your responses to this questionnaire are entirely confidential.

Please answer all questions as fully as possible, making additional comments at the end.

Part A: Demographics

Please fill in the information or check the blank for each question.

1. Gender _____

2. Age _____

3. Number of years in child and youth care practice _____

4. Number of years in this unit _____

5. Number of years at this agency? _____

6. Number of years of other related child welfare experience _____

7. Highest level of education attained _____

9. Please list all relevant certificates and training received

_____

_____

_____

_____

_____

_____

Part B: Job Satisfaction

Please answer the following question by marking with an "X" the response category that <u>best describes</u> how you feel about the question.

1. How satisfied are you with your role as a supervisor at this agency?

❏	❏	❏	❏	❏
Very Dissatisfied	Somewhat Dissatisfied	Satisfied	Pretty Satisfied	Very Satisfied

Please rank yourself from 1-10 (1 low   10 high) according to how effective you think you are as a supervisor for your staff?

_____

Part C: How I look at my role as a Supervisor

Directions: *Please think about how you presently supervise your staff.*

For each of the following 13 phrases, rank the four statements given in the order that completes the phrase to your best satisfaction. Give your most favored statement a rank of 4; your next favored, 3; your next, 2; and your least favored statement, a rank of 1. Place your numerical ranking for each statement on the line in the appropriate column to the right of the statement.

For Example:

	Column 1	Column 2
x. As a supervisor, I:		
Frequently remind my staff about organizational policies and procedures	1 (least)	
	_____	
Give my staff regular feedback regarding performance issues.		2 (next)
		_____
Make myself available to staff whenever they request my advice.		3 (next
		_____
Am supportive to staff regarding personal issues.	4 (most)	
	_____	

*Give your "Most Favored" (i.e. if you <u>completely agree</u> with the statement)a rank of <u>4</u>; "Next Favored" <u>3</u>; "Next Favored" <u>2</u> and "Least Favored" a rank of <u>1</u>.

1. **In planning for supervision, I would most likely:**

   Require process records and select critical incidents for
   discussion with supervisees   _____

   Begin with a contract specifying what we wish to
   accomplish, when and how   _____

   Pinpoint the results I expect from supervisees and
   construct a work plan that will almost run itself   _____

   Consider the areas of greatest concern to the supervisees
   and plan to deal with them regardless of what they may   _____
   be

2. **Supervisees learn best:**

   When they are free to explore with limited direction   _____

   When they are interested in what they are doing   _____

   When they have access to someone who knows what he
   or she is talking about   _____

   When they have opportunities for practice, feedback and
   repetition   _____

3. **The purpose of supervision should be:**

   To help supervisees develop competency and mastery of
   specific skills   _____

   To help supervisees get the information and resources
   required to do the job effectively   _____

   To help supervisees learn to become autonomous, self-   _____
   directed practitioners

   To help supervisees develop insight into themselves and _____
   their work with clients

4. Most of what supervisees know:

They have acquired through a systematic educational process   _____

They have learned by experience in trial-and-error fashion   _____

They have gained through a natural progression of self-discovery, rather than through some "teaching" process   _____

They have learned as a result of consciously pursuing their goals, solving problems as they go   _____

5. Decisions on what should be covered in supervision:

Are based on careful analysis of the situation beforehand   _____

Are made as the supervisory process progresses and the supervisees show their innate interests and abilities   _____

Are mutually derived by the supervisees and supervisor   _____

Are based on what supervisees now know and must know to do the work   _____

6. Good supervisors believe:

That they should gain proficiency in the methods and processes of supervision   _____

That they should assume supervisees are highly motivated and capable of directing their own learning, if they have the opportunity   _____

That they should master the field themselves and become effective "models" for supervisees   _____

That they should consider the end behaviors they are looking for and the most efficient ways of developing those behaviors in supervisees   _____

7. **As a supervisor, I am least successful in situations:**

   Where I have to criticize or go against what the
   supervisee wants   _____

   Where there is no structure and goals are unclear   _____

   Where there is no right answer   _____

   Where I have to deal with the abstract rather than the
   concrete and practical   _____

8. **In supervision, I try to focus on:**

   The particular episodes of practice, and to develop
   capacities for dealing with them   _____

   A work environment that facilitates self-discovery,
   expression, and interaction   _____

   A stimulating environment that attracts and maintains
   the commitment of supervisees while fostering their
   ongoing professional development   _____

   Identifying a variety of resources that are useful to
   supervisees in meeting client needs   _____

9. **Emotions in the supervisory process:**

   Are utilized by the skillful supervisor to help the
   supervisees develop skills in dealing with feelings   _____

   Are a distraction to be avoided   _____

   Will propel the supervisee in many directions which the
   supervisor may follow and support   _____

   Provide opportunities for focusing on problems or
   questions   _____

10. **To help supervisees improve their practice, my approach:**

Would be relatively flexible but present real challenges   _____

Would be determined by the situation   _____

Would emphasize trial and feedback   _____

Would allow freedom for the individual supervisee   _____

11. **When supervisees are uninterested in an in-service event it is probably because:**

They do not see the benefit to their job   _____

They are not ready for the topic   _____

The specialist has not adequately prepared the material   _____

The event has not been well planned   _____

12. **Supervisees are all different:**

Some will learn from me, but others may do better with   _____
another person

The best approach is to teach the basics well and put   _____
them on their own after that

With an effective presentation and discussion, most   _____
tasks can be mastered by the majority of supervisees

An experienced supervisor, properly organized, can   _____
overcome most difficulties.

13. **Supervisees seem to have the most regard for a supervisor who:**

Helps them work through a problem, regardless of how painful _____

Guides them through experiences with well-focused feedback _____

Systematically leads them in step-by-step problem-solving _____

Inspires them and indirectly influences their lives _____

COLUMN TOTALS: 1._____   2._____

Part D- My Supervisory Style

The following items present situations that supervisors often encounter. Respond to each item according to the way you think you most often act. Put the appropriate letter to the left of each number, as follows:

(A) Always;

(B) Frequently,

(O) Occasionally,

(S) Seldom; or

(N) Never

As a supervisor, I would:

___ 1. Help the workers by doing things for them

___ 2. Encourage workers to go the extra mile

___ 3. Allow them complete freedom in their work

___ 4. Encourage the workers to follow certain routines

___ 5. Permit others to use their own judgment in solving problems

___ 6. Stress making the most of oneself all the time

___ 7. Respond with help more readily when I know I am needed

___ 8. Joke with workers to get them to work harder

___ 9. Try to help the workers, even when they don't want it

___ 10. Let workers do their work the way they think best

___ 11. Be working hard to set a good example

___ 12. Be able to tolerate postponement and uncertainty

___ 13. Speak for others if they have not been effective themselves

___ 14. Expect others to keep working even when discouraged

___ 15. Allow the workers to try out their own solutions to problems, even when I know these will not work

___ 16. Settle conflicts between people

___ 17. Get swamped by details

___ 18. Present an individual's position to others if that individual is unclear

___ 19. Be reluctant to allow new workers much freedom of action

___ 20. Decide what should be done and how it should be done

___ 21. Push people toward high level functioning

___ 22. Let some people have authority which I could keep

___ 23. Think things would usually turn out as I predict

___ 24. Allow people a high degree of initiative

___ 25. Stick to the things I know how to do even when others want other things from me.

___ 26. Make exceptions to the rules for some workers

___ 27. Ask workers to work harder

___ 28. Trust workers to exercise good judgment

___ 29. Schedule the work to be done

___ 30. Not explain my actions

___ 31. Persuade others that my ideas are to their advantage

___ 32. Allow others to work at their own pace

___ 33. Urge people to keep aiming higher

___ 34. Do things without consulting the workers

___ 35. Ask the workers to follow standard rules and regulations

Would you please comment on your perceptions regarding your program's effectiveness with children and youth?

_____

_____

_____

_____

_____

How do you think your role as supervisor relate to your program's effectiveness?

_____

_____

_____

_____

_____

Please add any additional comments you may have regarding obstacles to your ability to be the best supervisor you can be. Please be as specific as possible in your comments.

_____

_____

_____

_____

_____

Do you have any specific training related to child and youth care practice and supervision in child and youth care? Please describe.

_____

_____

_____

_____

_____

Please place your completed Questionnaire in the accompanying envelope and seal it.

Thank you very much for your participation in this research project. Hopefully, the information you have shared will help to inform policy makers and enhance the quality of residential care services for children, youth, and families in Manitoba.

Appendix E

Supervisee Interview Schedule

Child & Youth Care Staff Interview

1. Please describe the type of supervision you receive now - i.e. face-to-face, sit down, conference style? On the run? Case-focused, or practitioner-focused? If more than one type, please describe.

_____
_____
_____
_____
_____
_____

2. How satisfied are you with your supervisor's style presently?

_____
_____
_____
_____
_____
_____

3. If dissatisfied, what would you suggest as your preferred supervisory style.

_____
_____
_____
_____

4. How often do you receive formal conference style, sit down, one-to-one supervision?

_____
_____
_____

5. Do you think this type of supervision is a good idea? Why?

_____

_____

_____

_____

_____

_____

6. At the present time, what is the purpose of your meetings with your supervisor?

_____

_____

_____

7. There are some theories about which type of supervision (Explain administrative, educative, supportive) would work best for child and youth care workers.

Which would you prefer? Please rank your preferences from high to medium to low.

High _____

Medium _____

Low: _____

Which type do you usually receive now?

_____

8. How do you think your supervisor could do a better job?

_____

_____

_____

_____

9. Does your supervisor give you feedback about your job performance? How often?

_____

_____

10. What quality of care do you think that your unit provides for children and youth presently?

_____

_____

_____

_____

_____

_____

11. How much do you think the quality of supervision you receive affects quality of care for the children and youth in your unit? In what ways?

_____

_____

_____

_____

_____

_____

12. How much do you think the quality of supervision you receive affects outcomes for the children and youth in your unit? In what ways?

_____

_____

_____

_____

_____

13. Does your supervisor spend enough time at the home?
    Explain.

    _____
    _____
    _____
    _____
    _____
    _____

14. Does your supervisor work shifts with you? How do you
    feel about this?

    _____
    _____
    _____
    _____

15. Do you think you are an effective child and youth care
    practitioner? Why or why not?

    _____
    _____
    _____
    _____
    _____
    _____

16. What should the role of the supervisor be in CYC practice in
    residential care settings?

    _____
    _____
    _____
    _____
    _____

17. Should there be minimum qualifications for residential care supervisors? If yes, what should these be?

_____

_____

_____

_____

18. Any additional comments?

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Appendix F

Mean Scores Staff Satisfaction with Supervision

Appendix F

Supervisee Mean Scores for Survey Items

Item	Mean	Standard Deviation
1. Supervisor lets me do my work the way I think is best	5.06	.68
2.Supervisor has contributed to professional growth	5.20	1.02
3. Supervisor respects staff as professional	5.43	.74
4. Supervisor is fair	5.29	1.07
5. Overall, satisfied	5.11	1.11
6. Feel good after staff meetings	4.77	.84
7. Feel good after one tone meetings	5.06	1.06
8. Do not look forward to meetings with supervisor	4.69	1.53
9. Performance eval. similar	4.88	.73
10. Supervisor sets priorities	4.92	1.03
11. Sup. good at organizing work	4.83	.75
12.Sup. teaches techniques	4.57	1.09
13. Sup emphasizes paperwork	4.26	1.36
14. Sup. rules w. ironhand	5.04	1.11
15 Sup slow to accept new idea	4.74	1.12
16. Sup. insists everything done their way	5.03	.98
17. sup. likes to give direction	3.63	1.31
18.Sup has a pay attention att.		
19. Sup knows how to work w. kids	5.31	1.18
20. Sup has necessary knowledge to teach	5.17	1.25
21. Talks about theory: doesn't apply it	4.94	1.11
22. Thinks I know more	5.29	.67
23. Sup. has helped develop self awareness	4.57	1.01
24. Sup. interested in analyzing me	5.29	.79
25. Sup. interested in what staff	3.54	1.42

do to contribute to incidents		
26. Sup. helps me to improve effectiveness	5.03	1.07
27. Staff feel good when meet with sup.	5.06	1.03
28. Sup. friendly/approachable	5.37	.88
29. Sup. encourages me to talk	5.40	.69
30. Sup. makes me comfortable	5.17	.92
31.Sup. expresses appreciation	5.14	1.12
32.Sup. does not make self clear	4.41	1.10
33. Values are different from Sup.	4.54	1.36
34.Seek advise from coworkers	3.57	1.36
35.Avoid meetings w. sup.	5.31	.90
36. Do not confront sup.	5.00	.97
37. Sup. doesn't give praise	4.85	1.35
38. Sup concerned with rules	5.31	.96
39. Agency politics	4.82	1.13
40. Agency not creative	4.63	1.17
41. Staff behind in paperwork	4.62	1.26
42. Admin. shows little concern for staff	4.00	1.11
43. Agency in state of crisis constantly	4.63	.73
44. Many problems in agency	4.329	1.131
45. Agency good place to work	4.97	.86
46. Annoyed with sup?	2.929	.768
47. Angry with sup?	3.34	.80
48. Confront sup?	2.71	.67
49. Sup. sits in on sessions/	2.31	.93
50. Sup works with kids & staff	3.71	.52
51. Rank supervisor 1-10	8.18	1.6
52. Rank self	7.6	.934