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## CARING FOR THE CAREGIVER

Supervisory  
Guidebook

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# An overview of supervision in CFC:



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## Goals of supervision

Highlights the importance of supervision and the characteristics of good supervisors

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## Stress and burnout

Explains what burnout is, and offers tips for how to prevent and respond to it



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## Self-care and coping

Explains why self-care is important for FLWs and caregivers, and offers tips for managing workload

# 1. Goals of supervision

The content in this supervisory guidebook is focused on why supervision is important, the characteristics of good CFC supervisors, understanding burnout and the need for self-care, and outlines strategies for managing FLW workload and scope. It also provides a suggested structure for supervision sessions.

Supervision is central to effective and efficient CFC delivery, especially in challenging environments. It ensures that FLWs maintain high standards of counseling as it provides a structured space for reflection on challenging situations, fosters continued learning and helps prevent burnout. It also offers opportunities for collaborative problem solving around common caregiving challenges, and enhancing the overall quality of services provided within the community.

Supervision helps to ensure that barriers to delivering CFC are addressed. These barriers could be:

- within the FLW themselves;
- within their community;
- within the systems in which FLWs are delivering CFC.

This means that supervision should be closely linked to the Resources Toolkit of CFC, which provides several different tools, tips and strategies for navigating challenging situations or scenarios where something more than CFC is needed.

Most of the Resource Toolkit activities are also better completed together as a group of FLWs, rather than working in isolation.

Within CFC supervision there are four recommended processes, each with a different goal. Guidance on how to adjust these to varied settings and sectors can be found in the Adaptation Guidebook.

1. Peer groups foster a team approach to creating a more supportive, caring and positive working environment for FLWs to deal with issues such as workload, stress and coping strategies;
2. Peer-supervision provides a space for FLWs' group reflection and learning, and for specific guidance from peers on difficult cases, contributing towards increased fidelity in the delivery of CFC.
3. Individual check-in meetings with a system supervisor on a needs basis ensures that FLWs are supported with red flag cases. Supervisors support FLWs by facilitating referrals for caregivers whose needs are outside of the scope of CFC.
4. Meetings led by a system supervisor can help to improve collaboration and teamwork between service providers and FLWs, and can help to build and advocate for community resources in support of caregiving within communities.

## CFC supervisors

CFC supervisors are individuals who are linked into the routine work of the FLW, either as an individual or supporting a group of FLWs. It is helpful if they are working in the same organization, department or setting so that the supervisor has a good understanding of the systems, constraints and community that the FLW is working in.

There are two types of CFC supervisors – a **peer-supervisor** and a **systems-supervisor**. The distinguishing factor between these two is that the peer-supervisor is embedded within the community, and the systems-supervisor is embedded with the institution or service within which CFC is being delivered.

A **peer-supervisor** would be a FLW who has shown themselves to be exceptional at delivering CFC, working in proximity to other FLWs, and the who has the capacity to mentor others. These supervisors will focus on *Resources within the home* – see Training of Trainers Manual.

Depending on the context and the sector within which CFC is being integrated, the **systems-supervisor** could be the direct line manager of a team of FLWs delivering CFC, or an individual working within the same service as the FLW who has more authority to enact change within that system. These supervisors mostly deal with *Resources outside the home* – see Training of Trainers Manual.

How this is implemented and the division of supervision tasks between the peer-supervisor and the systems-supervisor might vary by country and by sector.

### Roles and responsibilities of a CFC supervisor:

- Offering regular supervision and check-in sessions;
- Helping FLWs schedule workload and manage risk of burnout;
- Offering ongoing feedback and training to improve the quality of CFC delivery;
- Helping to manage and resolve red flag scenarios;
- Helping FLWs to solve community challenges or conflicts;
- Advocating for FLWs and caregivers within community structures.

### To be successful as a supervisor you need to be:

- ✓ Good at communication, approachable and empathetic;
- ✓ Adaptable, resourceful and good at problem solving;
- ✓ Determined, confident, transparent and fair.

In turn, supervisors also need support and supervision, or they too will experience burnout and find it difficult to supervise FLWs. The content in this guidebook is relevant to all those who line-manage or supervise at any level within the CFC training system.

## 2. Stress and burnout

If FLWs take on too much work, or have too many caregivers to take care of without having support for themselves, or do not feel confident in delivering CFC, this can cause a lot of stress. If this stress continues for some time, FLWs may develop burnout.

Burnout is a stress condition that leads to severe physical, mental, and emotional exhaustion. It is much worse than being tired or fatigued after a busy day or week because burnout makes it challenging to cope with stress and handle day-to-day responsibilities. Burnout is very common in the helping professions, and this includes FLWs.

### Warning signs for burnout:



1. No time for non-work related needs and feeling detached from your life;
2. Exhaustion, headaches, stomach and sleep problems;
3. Isolation, withdrawal and feeling overwhelmed;
4. High absenteeism, self-medication and use of alcohol;
5. Irritability and angry or tearful outbursts.

### Tips for preventing burnout:



1. Exercise and eating a balanced diet;
2. Taking scheduled time off;
3. Making time for self-care;
4. Having someone you can talk to or ask for help;
5. Experiencing support in regular meetings.

### Tips for helping a FLW with burnout:



1. Acknowledge that being a FLW is stressful and tiring;
2. Communicate concerns in a non-judgmental way;
3. Offer check-in sessions to understand the source of stressors;
4. Encourage time off and nourishing activities. Discourage guilt about self-care;
5. Encourage connection to others through peer supervision.

In highly adverse settings, the scope of work can be more difficult for FLWs to manage as they may see caregivers facing a lot of challenges on a regular basis, and this can take a toll. Regular check-in sessions are advised for all FLWs and are described at the end of this manual in the 'Providing Supervision' section.

# 3. Self-care and coping

Self-care and managing workload are important for keeping FLWs emotionally well, attentive and empathetic to caregivers. There are three golden rules for self-care you should try to follow:

## Manage emotions:



- FLWs need to manage their emotions and implement self-care practices for themselves;
- If FLWs themselves are tired and feel uncared for, they can become frustrated, pushy and directive with caregivers, instead of sympathetic and supportive.

### FLWs can do this by:

- Using the Emotions Basket activity to explore and name their own emotions;
- Using the Coping Strategies card to practice breathing and relaxation exercises for emotional regulation;
- Discussing emotionally difficult cases with a peer or supervisor.

## Know your limits:



- FLWs need to know the limits of what they can offer as part of CFC;
- It is natural that FLWs may want to get involved and do more for families because they want to help, but if they do too much, it could lead to burnout.

### FLWs can do this by:

- Being clear with caregivers what their role is as a FLW, and the type of support FLWs can offer;
- Working with other FLWs to create general resources, such as caregiver support groups, or to discuss challenges to workload and scope;
- Discussing workload and scope with a supervisor.

## Check in regularly:



- FLWs need a support system to help them cope when they are supporting caregivers;
- Regular red flag check-ins and supervision is necessary to ensure that they are prepared and supported in difficult situations.

### FLWs can do this by:

- Contacting a supervisor for support and check-ins when dealing with red flag scenarios, as they can often be upsetting;
- Using supervision meetings to discuss any difficult cases to gain advice and support from peers;
- Promoting and maintaining supportive relationships within their peer groups.

## Self-care includes managing workload and scope

An important self-care step for preventing or managing burnout involves helping FLWs to plan their workload in a way that does not leave them overstretched. A FLW who starts missing supervision sessions or who says that they are too busy for supervision has probably taken on too much and needs to be monitored.

### Tips for work scheduling

1. Encourage FLWs to monitor the number of visits they do daily and weekly and to put a daily and weekly routine in place.
2. Guide them on how to allocate time for important and necessary activities – like supervision – and to be realistic about how long things might take.
3. Alert them to how tiring it might be when caregivers need a lot of support, and caution them about other physically tiring activities, like walking long distances to work.
4. Encourage FLWs to take regular breaks and not skip lunch, and to make sure that they have time for their own family routines and responsibilities.
5. Make sure FLWs feel safe in the homestead, clinics or centers where they work and that they leave homesteads or clinics on time to get home safely.

### Coping with difficult cases

Managing a red flag scenario is stressful and can weigh heavily on a FLW, especially if they remain worried for the caregiver. FLWs should not deal with red flag scenarios on their own – they should have support and assistance in making referrals and in strengthening referral networks when needed. Psychological and social red flag referrals should always trigger a supervisor-led check-in session for the FLW.



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# Providing supervision:



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## Supervision cycle

Proposed minimum standards for CFC supervision

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## CFC 5-step supervision model

Description of a group supervision model for FLWs



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## Red flag check-ins

Tips for conducting check-in sessions with FLWs

# 1. Supervision cycle

In this manual we propose a minimum standard for supervision systems. These can be adjusted with caution, dependent on context.

Supervision does not achieve its goals in large groups of people, so we suggest the ideal size of a supervision group is 8 participants and the maximum number of participants is fixed at 12.

## FLW peer-group meetings

Type of meeting	Cycle	Description
Peer groups	Fortnightly	A meeting to problem solve challenges, share resources, and organize FLW activities.
Peer-supervisor led	Monthly	Focused on improving fidelity in the delivery of CFC through case discussions and reflective learning, using a fixed 5-step structure.

## Systems-supervisor meetings

Type of meeting	Cycle	Description
Individual check-ins	Red flag driven	Scheduled as needed for a FLW who has managed a red flag situation, ensuring that FLWs receive personalized support in making and managing referrals.
Group check-ins	Quarterly	Involves group reflection and discussion around resources, referral pathways, and community engagement activities. The supervisor conducts refresher training and revises plans for the coming quarter.

The recommended supervision cycle works to build information that can strengthen community support for caregivers. Each meeting allows for lessons to be learnt from the field and each of these lessons can be shared at the next level of meeting.

In this way, ongoing community challenges can be shared in supervision or during check-in sessions, and this information can be summarized to inform quarterly activities and goals developed by the supervisor.

## Outcomes of supervision

Working within the scope of CFC, supervisors can do the following in response to common challenges:

1. Offer refresher training on aspects of CFC if supervision and check-in sessions suggest that these are presenting challenges for the group. This will ensure that the quality of CFC in integrated counseling is maintained;
2. Lead FLW community mapping exercises to identify and strengthen referral sources for common challenges, or to problem solve shared barriers in the pathway to services;
3. Lead the FLW group to establish wider community supports where they are absent or needed, through couples or family counseling or by setting up support groups;
4. Lead the development of educational messages or materials that can be used by FLWs to address common challenges. This could be as simple as providing handouts on infant feeding, or as complex as the development of a playful activity that could help to educate resistant caregivers or their families;

5. Lead FLWs in a CFC community-wide strategy to host information sharing events in neighborhoods, clinics and centers on specific challenges that have emerged during FLW work in the previous quarter. This can be as simple as leading an information sharing event on immunization at a community hall or church where FLWs are reporting low immunization in a specific community, or as complex as hosting a meeting with community leaders about harmful normative practices.

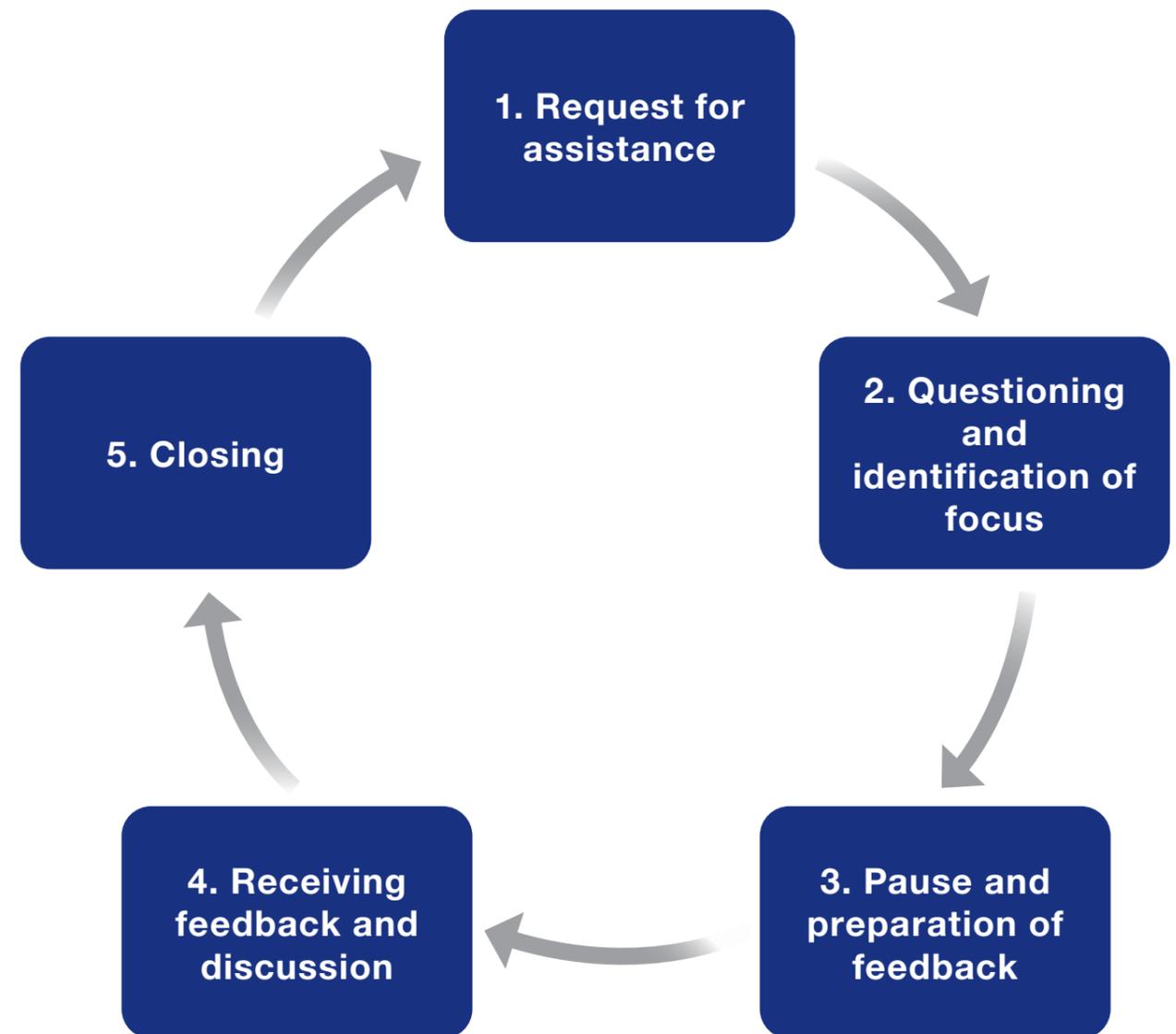


## 2. CFC 5 steps for supervision

Supervision is generally better in quality when it follows a set structure. CFC offers a simple structure for managing a FLW-led monthly group supervision session that reflects the approach taken during CFC practical training.

The CFC 5-step supervision model is adapted from Akhurst & Kelly's (2006) peer supervision model for training psychologists and counselors.<sup>1</sup>

The flow of the 5 steps is presented in the diagram, while the table over the page describes the purpose and approach taken during each of the steps.



<sup>1</sup> Akhurst, J., & Kelly, K. (2006). Peer Group Supervision as an Adjunct to Individual Supervision: Optimizing Learning Processes during Psychologists' Training. *Psychology Teaching Review*, 12(1), 3-15.

## Overview of CFC 5-step supervision model

Step	Purpose	Process	Time
1. Request for Assistance (RFA)	FLW presents a case on which they would like to request assistance.	Share basic information about the case, a summary of feelings, thoughts, plans and difficulties around the Request for assistance (RFA). It should include a specific 'ask or request' that the FLW would like assistance with.	5 min
2. Questioning period and identification of focus	Group helps to clarify RFA and the main focus of concern for the FLW.	Group can ask clarification questions about the RFA. The supervisor monitors to ensure that the group remains non-judgmental and is orientated to understanding rather than solving the problem.	5 min
3. Pause period and preparation of feedback statements	FLW leaves the room while the group discusses the RFA.	Supervisor leads discussion on the RFA so group members can express feelings, thoughts, concerns and suggestions. Together the group decides how to present feedback that is encouraging, helpful and practical.	15 min
4. Receiving feedback and response	FLW returns and receives well organized, constructive feedback.	Supervisor or group volunteer provides feedback, including offering a summary of the main issues discussed and the suggestions the group has to offer. The FLW has a chance to request further help and information and commit to next steps.	15 min
5. Closing	Shared learning.	The supervisor leads a wrap-up session, noting any issues in the RFA which might point to a need for additional training or resource activities.	5 min

## Step 1: Request for Assistance (RFA)

The RFA is similar to the case studies in the practical application of CFC. It can be presented as a personal story or as a story about a caregiver. It can be work-related or personal.

### Work-related RFA:

A case study centered on a caregiver that the FLW wants advice, guidance or feedback about.

#### Examples include:

- RFA with support and advice about a caregiver who the FLW is struggling to connect with or understand;
- RFA on how to deal with a difficult family situation or a caregiver who is facing a lot of complex challenges;
- RFA with input on what CFC tools and activities might be best for addressing a situation, or asking for input on how to schedule visits for a specific caregiver situation.

### Personal RFA:

A situation that the FLW is having difficulty coping with in their personal life, their relationships, or in response to an event.

#### Examples include:

- RFA on a personal caregiving challenge they are facing that they would like supportive and constructive feedback on how to manage;
- RFA about feelings which might interfere with their ability to counsel, including situations where a caregiver's situation reminds them of a difficult time in their own life history.

*Importantly, the RFA should not be trauma related (there has been threat of harm to a caregiver or FLW) because this is better suited to individual check-ins than a group supervision model.*

### Tips for helping FLW present an RFA

1. Encourage the FLW to prepare their RFA before the meeting. Offer some assistance so that the request is clear and focused;
2. Help the FLW to understand what important information should be included in an RFA;
3. Help the FLW to identify the feelings and thoughts they want the group to understand so they can better address the RFA;
4. Provide direction on information that could breach confidentiality, e.g. identifiers like names.



## Step 2: Questioning and identification of focus

Group members should ask clarification questions about the RFA:

**Emotional clarification questions:** ‘How do you feel about this’ or ‘What is making you most worried about this’;

**Practical clarification questions:** ‘What do you think should be done’ or ‘When did this happen’ or ‘How long have you been worrying about this’ or ‘When did the problem start’;

**AVOID** judgmental statements like ‘Why did you let this happen’ or ‘I don’t think or feel this is important’.

## Step 3: Pause period and preparation of feedback statements

In this step, the FLW who has presented to the group leaves the room for 15 minutes while you as the supervisor facilitates a discussion on the RFA. This is an opportunity for you to hear inputs, concerns and suggestions from other FLWs, and for the group to decide together what feedback may be most helpful.

This step must be managed carefully by the supervisor for two reasons:

- Firstly, if this step is managed well, it role plays for the FLW that they can bring challenges and hand over to others for input without judgement and without having to carry the burden alone. While outside the room, the FLW has a chance to reflect on how it feels to have shared the problem and what they feel about receiving input from others;

- Secondly, allowing the group to discuss the case without the FLW present means that the group can speak openly about their concerns, worries or the advice they would like to give, and take time to think carefully about how to present this feedback to the presenting FLW in a way that is helpful rather than judgmental or hurtful.

## Preparing the feedback

Following the presentation of an RFA, the supervisor helps the group prepare feedback for the presenting FLW. This feedback should cover points similar to the case study methodology sheet in practical training.

### Reflect and know

What did the RFA make people feel or think?

### Assess and plan

What are the stressors and how might the Care Plan be helpful?

### Integrate and practice

What Connect and Support tools might be useful?

### Flag and resource

What resources inside and outside the home could be activated?

### **Tips for preparing feedback**

1. Create a summary of the issues and organize them so that the FLW can gain perspective on the case;
2. Choose one person to present so that the feedback is given in a unified way and does not personalize issues;
3. Include information on what the group feels is the biggest challenge, and what has been done well by the FLW;
4. Offer clear and realistic suggestions for what more could be done and how the group can offer additional support.

### **Step 4: Receiving feedback and response**

The presenting FLW returns to the room and the supervisor (or a volunteer FLW from the group) presents a feedback summary to the presenting FLW. The presenting FLW is given an opportunity to respond, ask questions and have a group discussion about the next steps in managing their RFA situation. This might include taking some self-care support steps for a personal RFA, or trying out a new approach and bringing feedback to the next meeting in the case of a workplace RFA.

### **Tips for facilitating the provision of feedback**

1. Remind the FLW group that even though it isn't always easy when others see things differently to you, receiving feedback helps you gain perspective and you can learn from things that you don't agree with;
2. Make sure you praise the FLW for bringing the RFA to the group;

3. Observe the FLW closely while feedback is given, and respond gently to emotional cues by offering reassurance and pausing when needed;
4. Encourage the FLW to ask clarification questions and to verbalize what is helpful and what might not be helpful;
5. Link the group back to content in CFC that might not have been raised in discussions and highlight shared lessons that the group can take away from the session.

### **Step 5: Closing**

The supervisor can repeat these steps with more than one RFA per meeting, depending on the time allowed and the number of FLWs wanting to present.

Before wrapping up the RFA, the supervisor should revisit with the group whether any resource issues need group or team work to solve, and the group can negotiate resource goals to be addressed within the current quarterly period. This may be as simple as checking in on an issue at the next session or providing refresher training on an aspect of CFC, or it might be more complex, like setting up a support group in the community for a special population.

RFA feedback is not a mandate – it reflects a series of suggestions you can use or build on as a supervision tool.

# 3. Check-ins

**Group check-ins** work well when they have a set structure, like the example provided here, and when they are done regularly. All check-in sessions should start by asking how everyone on the team is feeling. If there is hesitation, use a warm-up exercise to help FLWs adjust and feel comfortable with being in a group.

**Example warm-up:** Ask all FLWs to write down the emotion they are feeling and place it in a container anonymously. Then ask each FLW to pick an emotion out the box (not their own) and describe what the person who wrote the emotion is feeling.

This is a good way to facilitate a discussion on emotions without making FLWs feel forced to disclose their own feelings to the group. Usually, once others begin to reflect your emotions for you, it is easier to speak openly because you feel understood.

## **Group check-in structure (60 min session)**

1. Establish how everyone is feeling (5 min);
2. Establish what is going well in their FLW role and offer praise (10 min);
3. Establish what has been difficult or unpleasant and offer reassurance (15 min);
4. Explore ways to cope with the difficult things and problem solve (15 min);
5. Refresh self-care habits and propose supportive group-based activities (10 min);
6. Ask each person to identify a positive impact they are making (5 min).

## **General tips for check-ins**

1. Create an environment that facilitates open communication, ensuring there is a private space to talk;
2. Make good eye contact, actively listen, be empathetic and offer reassurance that it is normal to feel worried in difficult situations;
3. Let the FLW speak through the story without interruption. Acknowledge that it must be difficult for the FLW to speak about it;
4. Summarize the main points of the story to reassure the FLW that you have been listening and to allow them to hear the story spoken by someone else. This helps bring perspective;
5. Stay calm and patient, even though aspects of the story may involve hearing about situations that are frustrating or upsetting. The FLW will need the chance to let their emotions out without worrying about upsetting others;
6. Don't be judgmental or harsh – it's easier to see things clearly when you are not stressed or after the fact. If a FLW discloses something they did incorrectly, this is not the place to be harsh or critical. Feedback on areas of improvement can be given later;
7. Encourage the FLW to share their experiences with their peers in supervision so that others can learn from the experience and can also offer ongoing support to the FLW.

