



## Field Observation

### Definition

A field observation is a direct observation by the Supervisor of IHT staff outside of the office in order to directly assess their practice skills. Direct observation ensures that supervisors are not relying solely on staff self-reports or case documentation to understand a staff's practice skills and knowledge. It also ensures that supervisors understand the circumstances in which staff undertake their work. Field observations can be of either one staff (clinician or T/TS) or both as a team.

Field observation is "participant observation." The supervisor is not invisible and the supervisor's presence might influence the behavior of other people. The supervisor should act in such a way as to minimize that impact. As the supervisor becomes more experienced in field observation their ability to enter the system with minimal impact should grow, as should their ability to observe how they own the impact on their behavior of others in the room.

Field observations can occur in a variety of venues outside the office. Priority should be given to observation of interactions with children and with families. Field observations might also be conducted of meetings with other helping professionals and/ or community partners.

### Purpose

Field observation allows supervisors to:

- Assess their staff's skills and attitudes in working with families.
- Assess the degree to which staff practice is consistent with case documentation and self-reports.
- Assess progress on skill development plans.
- Understand the nature and challenges of the work and the working environment.
- Join with supervisees around the experience (positive and negative aspects) of practicing in a home environment.

## Outcomes

Consistent and meaningful field observations should lead to:

- Better informed supervisory knowledge and interventions.
- Increased translation of IHT Practice Profile content into practice.
- Improved staff practice skills.

## Frequency

Supervisors should conduct regular field observations. The frequency should be informed by staff self-assessment of their knowledge and skill. Observations should occur at least once per time period in a family's home and once with stakeholders (e.g., care coordination activities). Supervisors work with staff to determine frequency and specific interactions to be observed. Initially, field observation is likely to be anxiety provoking for staff and perhaps for supervisors. Frequent practice of field observation is important to ensure that the practice of field observation itself becomes skilled, efficient and manageable both for supervisees and supervisors.

## Preparation

- The supervisor and clinician or TTS worker should jointly identify the family session that they will observe. It should be informed by the focus of the ISD Plan as well as other clearly stated reasons for selection.
- The clinician or TTS worker shares with the supervisor the agenda for the family session.
- Supervisor and staff review the process and identify any issues that require particular attention by the supervisor.
- Supervisor should review the case record prior to the observation
- The clinician or TTS worker is responsible for explaining the purpose of the field observation to the family prior to the appointment that their supervisor will observe.
- Determine how long the observation will last, i.e., will the supervisor observe the clinician for the entire session with the family, or for part of a session. A minimum of 1 hour is required for a meaningful observation.
- Discuss how the supervisor's presence may alter the dynamics of the session and how to deal with situations that might inappropriately tempt, or appropriately prompt the supervisor to step out of the observer role. On the one hand, the family might perceive the supervisor as more powerful than the supervisee, and ask the supervisor for advice. This is a temptation the supervisor should have a plan to

evade, for example by referring the parent back to the supervisee. On the other hand, the supervisor might observe something unobserved by the supervisee that truly and urgently requires intervention. In such a situation, the plan should allow the supervisor signal the supervisee about needing to confer.

### Preparing a Family for a Field Observation

- The clinician or TTS should explain to the family they have invited their supervisor to observe the family session in order to receive feedback about their work. The purpose of the observation is to help the supervisor better understand the strengths and areas of growth for the staff person.
- The observation is NOT because the staff person (or the family) has done anything wrong.
- The observation is not of the family, the family's strengths and areas of growth or need. It IS related to promoting quality care and professional development for the staff person.
- Let the family know that they can decline to have the supervisor conduct the observation if they choose. Assure the family that participating or choosing not to participate will not affect their eligibility or continued receipt of services.
- The location should be determined in consultation with the family.
- The supervisor really will be a "fly on the wall" and is not there to "jump-in" or intervene in the session. If the family has concerns or issues that they would like the supervisor to address, then they can be schedule a conversation with the supervisor for another time.

### Conducting a Field Observation

- The supervisor should act in a way that minimizes their impact on their staff's interaction with the family.
- The purpose of the field observation is to *observe*; it is not to *model* practice skills. Behavioral rehearsals are designed to provide opportunities to model, examine, and teach practice skills.
- The only reason for a supervisor to "jump in" to an active role in family session is if they determine that there is risk of imminent harm.
- When tempted to "jump in", remember that there are good reasons not to.
- Remember that the purpose of the observation is to guide the staff's professional development so that, over time, the quality of care improves.

## Debriefing a Field Observation

- The supervisor should debrief with their staff within 48 hours of the field observation.
- Supervisors should allow clinician or TTS worker to reflect on their practice first, prior to providing feedback. The supervisor can aid their staff's reflection by asking thought-provoking and reflective questions, such as:
  - What did you notice? How did it feel to you?
  - What did you like about what you did?
  - If you could have a do over, what might you do differently?
  - How will you use this going forward?
- Supervisors should also ask their staff for feedback about the field observation process itself in order to understand the impact of being observed as well as to improve the supervisor's observation practice.
- Clinicians / TTS staff might want to check in with the family to see if they have any questions or concerns about the observation.
- The supervisor and staff should determine how the field observation is used to inform or update the ISD Plan.

## Providing Feedback

The goal of providing feedback is to help the clinician / TTS worker continue to build their IHT knowledge and skills. The tone, style, and content of your feedback are all key elements to ensuring that it is productive. The observer's stance should be one of interest and curiosity, not one of being an expert.

### ➤ Affirming, direct, and realistic

State what you believe was done well, and say what you mean in plain language. Direct your comments towards areas of focus that are actionable. Keep your comments within the scope of what the person actually can do.

### ➤ Non-judgmental

Offer your own professional perspective. Focus on insights aimed at helping your colleague improve their knowledge, skill, and ability. Avoid providing evaluative feedback that focuses on rating or ranking their practice, e.g., "I'd give you 4 on that."

### ➤ Specific

Base your comments on concrete, observable behavior. Provide particulars so that the person has enough information to pinpoint the areas you are referencing. Give examples as

needed to clarify your observations. “You have a nice rapport with the family” doesn’t indicate what specific behavior was observed to suggest the rapport is nice.

➤ **Timely**

Time your comments appropriately. To be effective, feedback must be well-timed. Assess if the person is in a place both physically and emotionally where they can receive feedback.

➤ **Individualized**

Treat each person’s work independently and avoid comparisons. Don’t say “You did that so much better than so-and-so.” Provide opportunities for the person to ask for clarification to fully understand the feedback.

## **Receiving Feedback**

It is important to be prepared to receive feedback. Focus on both the person giving the feedback and on the information provided.

- Clarify what kind of feedback will be most helpful. The feedback from others is for your benefit, and specifying your needs will result in more specific and actionable steps.
- Concentrate fully on what is being said. Focus on what the person wants you to know, not on what you would like to hear. Take notes on the feedback for reference later when you consider adjustments to your practice.
- Notice your reactions while the feedback is presented. Push through any adverse thoughts and feelings and continue to take in the specifics of what is being provided. Remain open to perspectives that differ from your own.