



# SUPERVISION AND CTI

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CENTER FOR THE ADVANCEMENT OF CRITICAL TIME INTERVENTION

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## WHAT IS SUPERVISION LIKE NOW?

- Are you meeting regularly, if not what is the obstacle?
- How is your supervision structured?

# THE SUPERVISION MEETING

## Key Principles for CTI Supervision:

- CTI- Team or Group is essential, individual recommended if possible
- In CTI, the goal is to review the caseload in depth:
- Suggested Every Week: Review New Cases, Address Crises, Ensure clients are being transitioned through the phases.
- Capture important information about resources\*\*\*

# PURPOSE

TO TRACK CLIENTS, SUPPORT WORKERS IN MAKING TOUGH DECISIONS

CREATE A SUPPORTIVE SUPERVISORY GROUP

SHARE RESOURCES; INNOVATE/BRAINSTORM TOGETHER

ENSURE FIDELITY

PREPARE FOR A FIDELITY REVIEW

# HOW TO PREPARE FOR SUPERVISION

- Case manager decides which clients to discuss- gives form to Supervisor 2-3 days in advance (use Team Supervision Form...see next section on documents)
- Suggest clients to Supervisor- Supervisor chooses 6-8 clients from turned in forms (spread out across workers) and let's worker's know who will be discussed
- Worker prepares 3-minute overview of case and presents
- Case managers provide each other feedback on cases with Supervisor's guidance



# SUPERVISION DOCUMENTATION



# CTI Team Supervision Form



Present

Absent

Today's Date:

Month

Day

Year

### Instructions:

1. This form is filled out every week during the team supervision meeting to document in-depth discussions about the highest priority Veterans (use reasons listed below as a guide).
2. Before the meeting, the CTI Worker fills in the names of Veterans with highest priority, based on past week's fieldwork and any change to Veteran status and records explanation and one reason code.
3. The supervisor places a ✓ mark in the far right column next to each Veteran who has been discussed.
4. If the entire caseload is discussed during supervision, fill out the CTI Caseload Review form.

		Explain why it is important to discuss this Veteran at today's meeting.	
		Record the reason code in the box	

TEAM  
SUPERVISION  
FORM:  
[LINK TO FORM](#)

# CTI Phase-Date Tracking Form

For CTI Workers and Supervisors\*



Program Name:				Supervisor Name:			
CTI Worker	Veteran Name	Date Enrolled in GPD-CM Grant	Phase 1 Start Date Date of Move In	Phase 2 Start Date Planned / Actual	Phase 3 Start Date Planned / Actual	Date Closed Planned / Actual	Date of Supervisory Review
EXAMPLE J.Jones	EXAMPLE Mr. Smith	EXAMPLE 4/10/20	EXAMPLE 5/8/20	7/15/20	9/15/20	11/15/20	4/13, 4/21, 4/28, 5/5, 5/9, 6/2, 6/9, 6/16, etc.
				7/17/20	9/10/20	11/5/20	

[CTI Phase-Date Tracking Form Link](#)



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\* There is a no drop policy for CTI clients, except for these reasons: refused, lost, long-term institutionalization, died.

**Refused:** This is when a client doesn't want to continue receiving CTI. Participation is voluntary, but be sure to distinguish a true refusal from a temporary change of mind (e.g., due to relapse of symptoms).

**Lost:** This can only be determined at the end of the 9-month period because people often reappear. Record date found out.

**Move State:** This is when a client moves out of state. Estimate date this happened, not date worker found out.

**Long Inst:** This is when a client has long institutionalization. Estimate date this happened, not date worker found out.

# CTI Caseload Review Form



CTI Workers Present

CTI Workers Absent

Date of Meeting:

Month

Day

Year

## Instructions:

1. This form is filled out by the CTI supervisor every two weeks during his/her meeting with CTI workers to quickly go over all active CTI Veterans.
2. Before the meeting, the supervisor lists all the currently active Veterans.
3. The supervisor places a ✓ mark in the far right column next to each Veteran who has been discussed.
4. If meeting discussion does not cover all active Veterans, the supervisor may finish collecting information by phone to fill out this form within the two-week period (e.g., if not enough time or a worker couldn't attend).

Veteran's Name	CTI Worker's Name	Place ✓ mark in box after Veteran is discussed
		<input type="checkbox"/>

[Case Load Review Form Link](#)

## SUPERVISEE SCENARIOS: DISCUSSION

Mark tells you that there is really no point in "ending" CTI with his client, Joe because he never connected to anyone but him. He feels he should continue to be the main source of support for Joe, because it's hard for Joe to trust anyone else.

Melinda reveals that she hasn't been in touch with her client, Eve, in two months, because she won't answer the door and doesn't respond to phone calls. She would like to terminate her case early.

Yvette's client, James, is in Phase Three, but he has relapsed and lost his job. Yvette worries that he will be evicted and wants to push him back to Phase I or II so she has time to avert a crisis.

When you ask your supervisees to bring their documentation to a session, it seems apparent they aren't using the forms. When you inquire about it- they respond that CTI training was great, but its really no different than what they were doing before, so the old forms should be fine.

# THE “TUNING IN” EXERCISE FOR SUPERVISION

## PURPOSE:

To help supervisee develop skills in listening, empathy, rapport building

Can be done in individual or group supervision

Helps supervisees that are having a hard time making a connection to particular clients

## Phase 2: Todd

Todd is a veteran with symptoms of PTSD from his time in combat. For years, he safely used marijuana to cope with his symptoms, but recently starting using opiates, leading to his first overdose at the beginning of CTI. He has housing through the HUD VASH program. You and he have decided that mental health care is the primary focus area for his Phase 2, with the goal of attending therapy at the VA. His second focus area is Income, with the goal of increasing his income. He is a skilled mechanic but has been unable to work due to his PTSD symptoms and increased substance use. Prior to this meeting in month 2, he has been a no-show for the second time for his VA therapy appointment.

# FIRST- ANTICIPATORY EMPATHY.... PUT YOURSELF IN TODD'S SHOES

Which Focus Area and goal are we working on here?



What are the barriers?



What might motivate Todd to overcome them?



What strategies might you use to make the goal more realistic and achievable?

## Phase 2 Group Activity: Tuning in to Todd

You have exchanged greetings and beginning small talk.

Step into Todd's shoes. Going line by line, what is Todd thinking and feeling (behind the words that he is saying). If you were him, how do you imagine he interprets what you are saying? Does your focus plan need adjusting? How would you adjust it?

**You:** Hey, so what happened that you missed another appointment?

**Todd:** I don't know. I get ready to go and I just can't do it.

**You:** Well, I'm worried that if you don't go, you will use again and end up in at the hospital

**Todd:** I've been before, it didn't help. What's the point?

# SUPERVISOR ROLE IN CULTIVATING RESOURCES

Raising Awareness in the Community about what CTI is... NOT long term Case Management, and not mental health care

Creating higher level partnerships with key organizations, such as job training organizations, mental health providers, community colleges, other state agencies

Securing "Buy In" from Senior Staff around reduced caseloads, qualifications of new hires (use cost effectiveness research)

Measure your progress; fidelity and effectiveness



Importance of making key stakeholders aware of deficits in the community

Example: Childcare for working parents in Connecticut; problems in the referral system

Consider yourself the conduit for information "up the chain" that your supervisees bring

- This creates pressure- funders don't want their money going to waste-
- It empowers the front line worker, who often feels they cannot make a difference and have very little power.

ADVOCACY



WRAP UP  
AND Q & A