

Instrument 7 : Home Visitor Survey for Supervisees of Repeated Measures Supervisors

NOTE to OMB: Supervisees of the supervisors participating in the repeated measures sample will complete this questionnaire one time after their supervisor has completed the reflective supervision measure multiple times (Instrument 3). The items below are example items from existing measures that may be asked of participants. We plan to pilot test some instruments with fewer than 10 participants and will make minor revisions to language as needed to improve clarity and accessibility.

Introduction and Informed Consent for Web-Based Testing of Reflective Supervision Measure

Hello, and welcome to our online measure testing! As a reminder, the [Supporting and Strengthening the Home Visiting Workforce \(SAS-HV\)](#) project is developing a measure of reflective supervision.

In this study, we are asking you, as a home visitor, to provide information about your and the reflective supervision you receive.

You have been asked to participate in this research project because your supervisor is participating in the project and completing a questionnaire about the techniques and practices they use during reflective supervision sessions with you.

Your participation in this study is voluntary and there are minimal risks to participating, specifically a breach in the privacy of your information. We will do our best to keep your information private. To protect your privacy, your individual responses will not be attributed to you in any discussion of results or official reporting; they will only be presented as a group. We will not share information with your supervisor or with anyone at your home visiting program.

Completing this survey and submitting it to us means that you consent to participate in and have your answers used as data in the project. The survey will take about 30 minutes to complete. To thank you for your time, all participants will receive a \$35 electronic gift card immediately after the survey provided by TangoCard. You will have the option to choose either a Mastercard cash card or a gift card to Amazon, Target, or Walmart. Gift cards will be provided electronically over email unless you select the option to receive a physical gift card via regular mail.

If you need any assistance or experience any technical problems with the survey, please contact us at sashv@jbassoc.com. If you have any questions about the research study, contact the lead investigator, Allison West, at awest25@jhu.edu. This study has been approved by the Johns Hopkins School of Public Health Institutional Review Board.

This questionnaire includes questions about you, your home visiting program, and your experience with reflective supervision in the home visiting context.

First, we would like to gather some information about you.

1. What is your primary role with regard to reflective supervision? Select one. *[Respondents that only select provide reflective supervision (option b) will be notified that they are not eligible for study participation and will not be asked additional questions].*

- a. Receive reflective supervision
 - b. Provide reflective supervision
 - c. Receive and provide reflective supervision
- 2. What types of supervision do you receive? Select all that apply. *[Respondents that only select group supervision (options b and d) will be notified that they are not eligible for study participation and will not be asked additional questions].*
 - a. In-person, individual
 - b. In-person, group
 - c. Virtual, individual
 - d. Virtual, group
- 3. How often do you receive in-person, individual supervision?
 - a. Weekly
 - b. Bi-weekly
 - c. Monthly
 - d. Quarterly
- 4. How often do you receive virtual, individual supervision?
 - a. Weekly
 - b. Bi-weekly
 - c. Monthly
 - d. Quarterly
- 5. First name:
- 6. Last name:
- 7. Email:
- 8. Can we contact you in the future for additional opportunities for study participation?
 - a. Yes
 - b. No
- 9. How do you identify your race or ethnicity? Select all that apply.
 - a. American Indian or Alaska Native
 - b. Asian
 - c. Black or African American
 - d. Latino or Hispanic
 - e. Native Hawaiian or Pacific Islander
 - f. White
 - g. A race and/or ethnicity not listed here (*In the text box below, please enter the race and/or ethnicity that is not listed here*) [text box]
 - h. Prefer not to answer
- 10. What is your primary language?
 - a. English
 - b. Spanish
 - c. Chinese
 - d. Filipino
 - e. Vietnamese
 - f. French
 - g. Arabic
 - h. Korean
 - i. A language not listed here (*In the text box below, please enter the language that is not listed here*) [text box]
 - j. Prefer not to answer

11. What is the highest level of education or degree you have completed?
- High school diploma or equivalent
 - Postsecondary vocational/technical training program
 - Some college, no degree
 - Associate's degree
 - Bachelor's degree
 - Graduate degree
12. What field of study is your highest level of education or degree in?
- Nursing
 - Social work
 - Education, early education, or special education
 - Psychology
 - Child development or human development
 - Public health
 - Business administration and management or finance and accounting
 - Humanities and liberal arts
 - Other social science (e.g., sociology, family science)
13. How much experience do you have **providing** home visiting services?
- Less than 1 year
 - 1-2 years
 - 3-5 years
 - 6-10 years
 - More than 10 years
14. How many families are currently on your caseload?
- Less than 2 families
 - 3 to 5 families
 - More than 5 families

Next, we would like to gather some information about home visiting programs you are associated with and the families you work with.

15. How do the majority of the families you work with identify their race and ethnicity? Select all that apply.
- American Indian Alaska Native
 - Asian
 - Black or African American
 - Latino or Hispanic
 - Native Hawaiian Pacific Islander
 - White
 - A race and/or ethnicity not listed here (*In the text box below, please enter the race and/or ethnicity that is not listed here*) [text box]
16. What are the primary languages of the majority of the families you work with? Select all that apply.
- English
 - Spanish
 - Chinese
 - Filipino

- e. Vietnamese
- f. French
- g. Arabic
- h. Korean
- i. A language not listed here (*In the text box below, please enter the language that is not listed here*) [text box]

Supervisory Styles Inventory (SSI)

Instructions: Indicate your perception of the style of your supervisor in your supervision sessions on each of the following descriptors. When nominating a response “Not very” to “Very”, please mark AT LEAST five qualities as “Average” or below.

		1 Not very	2	3	4 Average	5	6	7 Very
1.	Goal-oriented	1	2	3	4	5	6	7
2.	Perceptive	1	2	3	4	5	6	7
3.	Concrete	1	2	3	4	5	6	7
4.	Explicit	1	2	3	4	5	6	7
5.	Committed	1	2	3	4	5	6	7
6.	Practical	1	2	3	4	5	6	7
7.	Intuitive	1	2	3	4	5	6	7
8.	Reflective	1	2	3	4	5	6	7
9.	Structured	1	2	3	4	5	6	7
10.	Evaluative	1	2	3	4	5	6	7
11.	Friendly	1	2	3	4	5	6	7
12.	Flexible	1	2	3	4	5	6	7
13.	Prescriptive	1	2	3	4	5	6	7
14.	Didactic	1	2	3	4	5	6	7
15.	Thorough	1	2	3	4	5	6	7
16.	Focused	1	2	3	4	5	6	7
17.	Creative	1	2	3	4	5	6	7
18.	Supportive	1	2	3	4	5	6	7
19.	Open	1	2	3	4	5	6	7
20.	Resourceful	1	2	3	4	5	6	7
21.	Invested	1	2	3	4	5	6	7
22.	Therapeutic	1	2	3	4	5	6	7
23.	Positive	1	2	3	4	5	6	7
24.	Trusting	1	2	3	4	5	6	7
25.	Warm	1	2	3	4	5	6	7

Reflective Supervision Rating Scale (Ash, 2010)

	0 Rarely	1 Sometimes	2 Almost Always
<i>My Supervisor:</i>			
...shows me how to integrate emotion and reason into case analysis.	0	1	2
...has improved my ability to be reflective.	0	1	2
...explores my thoughts and feelings about the supervisory process itself.	0	1	2
...and I set the agenda for supervision.	0	1	2
...thinks with me about how to improve my observation and listening skills.	0	1	2
...encourages me to talk about emotions I have felt while consulting and working with families.	0	1	2
...and I have formed a trusting relationship.	0	1	2
...is engaged throughout the entire session.	0	1	2
...is both a teacher and a guide.	0	1	2
...makes me feel nurtured, safe and supported during supervision	0	1	2
...allows me time to come to my own solutions during supervision	0	1	2
...listens carefully for the emotional experiences that I am expressing.	0	1	2
...and I have established a consistent supervision schedule.	0	1	2
...questions encourage details about my practice to be shared and explored within the supervision session.	0	1	2
...is engaged throughout the entire session.	0	1	2
...listens carefully for the emotional experiences that I am expressing.	0	1	2
...encourages me to talk about emotions I have felt while consulting and working with families.	0	1	2
...keeps families' and children's unique experiences in mind during supervision.	0	1	2
...wants to know how I feel about my consultation or practice experiences.	0	1	2
...helps me explore cultural considerations in my work.	0	1	2

The Short Supervisory Relationship Questionnaire (S-SRQ)

The following statements describe some of the ways a person may feel about his/her supervisor.

To what extent do you agree or disagree with each of the following statements about your relationship with your supervisor? Please tick the column which matches your opinion most closely.

		Disagree	Slightly Disagree	Neither Agree nor Disagree	Slightly Agree	Agree	Strongly Agree
SAFE BASE SUBSCALE							
1.	My supervisor was approachable						
2.	My supervisor was respectful of my views and ideas						
3.	My supervisor gave me feedback in a way that felt safe						
4.	My supervisor was enthusiastic about supervising me						
5.	I felt able to openly discuss my concerns with my supervisor						
6.	My supervisor was non-judgmental in supervision						
7.	My supervisor was open-minded in supervision						
8.	My supervisor gave me positive feedback on my performance						
9.	My supervisor had a collaborative approach in supervision						
REFLECTIVE EDUCATION SUBSCALE							
10.	My supervisor encouraged me to reflect on my practice						
11.	My supervisor paid attention to my unspoken feelings and anxieties						
12.	My supervisor drew flexibility from a number of theoretical models						
13.	My supervisor paid close attention to the process of supervision						
14.	My supervisor helped me identify my own learning/training needs						
STRUCTURE SUBSCALE							
15.	Supervision sessions were focused						
16.	Supervision sessions were structured						
17.	My supervision sessions were disorganized						
18.	My supervisor made sure that our supervision sessions were kept free from interruptions						
Scoring Key: Items 1-16 and item 18 scored 1 (Strongly Disagree) to 7 (Strongly Agree): Item 17 scored 7 (Strongly Disagree) to 1 (Strongly Agree)							

Supervisory Satisfaction Questionnaire (Ladany, Hill, Corbett, & Nutt 1996)

Please answer all of the questions below.

Circle Your Answers:

1. How would you rate the quality of supervision you have received?	4 Excellent	3 Good	2 Fair	1 Poor
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2. Did you get the kind of supervision you wanted?	1 No, definitely not	2 No, not really	3 Yes, generally	4 Yes, definitely
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3. To what extent has this supervision fit your needs?	4 Almost all of my needs have been met	3 Most of my needs have been met	2 Only a few of my needs have been met	1 None of my needs have been met
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4. If a friend were in need of supervision, would you recommend this supervisor to him or her?	1 No, definitely not	2 No, I don't think so	3 Yes, I think so	4 Yes, definitely
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5. How satisfied are you with the amount of supervision you have received?	1 Quite dissatisfied	2 Indifferent or mildly dissatisfied	3 Mostly satisfied	4 Very satisfied
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6. Has the supervision you received helped you to deal more effectively in your role as a counselor or therapist?	4 Yes, definitely	3 Yes, generally	2 No, not really	1 No, definitely not
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7. In an overall, general sense, how satisfied are you with the supervision you have received?	4 Very satisfied	3 Mostly satisfied	2 Indifferent or mildly dissatisfied	1 Quite dissatisfied
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8. If you were to seek supervision again, would you come back to this supervisor?	1 No, definitely not	2 No, I don't think so	3 Yes, I think so	4 Yes, definitely
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