



Strategies for Keeping the Circle of Support Alive/ Quick Tips for Staff

Allyson remembers the last program year, when staff were often coming to her frustrated; blaming families for not supporting caregiver's strategies at the center, and criticizing other staff for not following through on tasks and basic center responsibilities. She spent a lot of time dealing with staff conflict and recognized that staff often shared little with parents when they arrived at days end to pick up their children. When Allyson's staff began participating in regular reflective practice in the beginning of this year, they criticized each other less and began working together more. They appeared less frustrated at the end of the day and often talked with parents about how the day went with their children.

Staff were not taking the time to brainstorm and, reflect with each other, or share ideas and explore possibilities with parents. Rena found herself at times giving concrete advice rather than asking parents questions to help them explore their own feelings and experiences. Staff began working alone with little reflection or input from others and parents did not seem to share as much as in the beginning of the year. Allyson frequently asked herself, "How do I model reflective practice when I am constantly reacting and responding to requests from my staff, my parents and our delegate agency? Well, she mused, next month will be different."

As the year moves quickly, Allyson and her staff begin to feel the challenge of balancing reflective practice, and sustaining the relationships that developed as a result of the Circle of Support with all of the other responsibilities of the EHS program.

After the first five months, canceled appointments with supervisors became more frequent and Allyson noticed a change in the practice of the staff. By midyear, reflective practice had all but ended. Allyson's missed supervision meetings with her managers caused a ripple effect throughout the program. The managers stopped meeting regularly for peer supervision and with classroom teachers and caregivers. Allyson's staff began feeling like reflective supervision was less important than attending to all of the other tasks and challenges of operating their program.



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(cont.)

Maintaining reflective supervision and practice is a common challenge of many EHS programs when other tasks and responsibilities seem to begin to take precedence. Strategies and issues to consider in order to overcome a break down in reflective practice are as follows:

- Think of reflective supervision in practice as a regular component of your EHS program. When reflective practice is considered an extra task, it will not be consistent. Sometimes it will happen, and sometimes it will not. As a regular and consistent part of your program, staff will make it a part of their regular schedule – even when all of the other responsibilities begin to feel overwhelming. This is actually a time when reflective practice is most needed.

- Build a partnership with each of the parents and families of the infants and toddlers in care. Once parents have formed a partnership with staff and experienced the circle of support in action, they will want to share their parenting experiences with staff and compare notes between home and school. When reflective practice is inconsistent, and staff are feeling overwhelmed, their ability and willingness to engage with parents could suffer.

- Understand the boundaries of reflective supervision. Reflective supervision is a way to think about yourself within the context of your work, and to consider, questions, ideas and thoughts related to your work with children and families. Therapy, on the other hand, is an opportunity for you to work on personal issues with a mental health professional.

- Get training as a way to support your ability to facilitate reflective supervision and model reflective practice in your EHS program. Think of it as a learning and growing opportunity for the whole program, and another chance to support parents, families and young children. The relationships within your program serve as a model for staff with parents, and parents and families with their own children.

