





**Welcome to Module 5. This module is designed especially for senior caseworkers, supervisors, managers and human resources professionals. It provides the tools and insights needed to effectively support Protection Case Management staff, offering strategies to address the risks and challenges they encounter while prioritising their well-being and professional growth.**

**In this chapter, you will find answers to the following questions:**

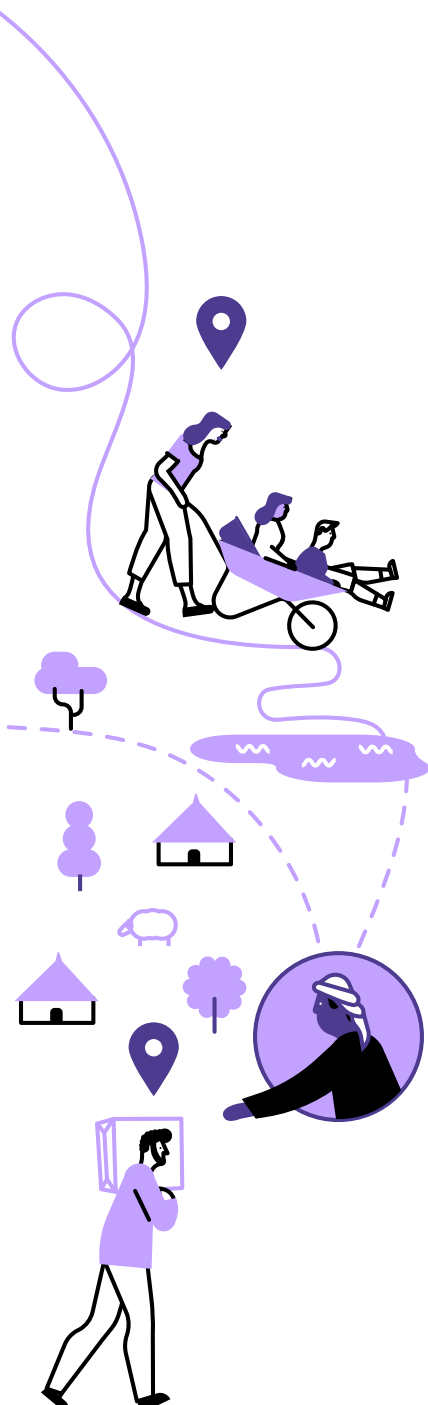
- **How can I ensure staff care throughout the implementation cycle?**  
Providing core action to keep staff safe and healthy, as well as detailing the differing approaches to take for staff care through the entire Protection Case Management implementation cycle.
- **How should I approach team professional development and supervision plans?!**  
Defining the elements of successful supervision, offering practical advice on implementing structured supervision systems that promote team development, knowledge exchange, and emotional support through regular debriefing sessions.

# How can I ensure staff care throughout the implementation cycle?

Providing Protection Case Management services can be demanding, especially on the psychological well-being of caseworkers, staff and volunteers. Organisations have both a legal and moral obligation to safeguard and promote the welfare, mental health and psychosocial well-being of their employees. It is their responsibility to take reasonable steps to mitigate foreseeable risks to both the physical and psychological health and safety of staff.

Caseworkers and Protection Case Management team members often encounter stories, information and images involving conflict, suffering, loss, abuse, violence and torture on a regular basis. Many team members come from the same communities as their service users, which may also be affected by conflict and crisis. This puts them at heightened risk for vicarious trauma, as they might be personally impacted by the same events (e.g. loss of property, loved ones) or know individuals who have suffered, while facing personal risks themselves.

Hopefully your protection teams have done some thinking around staff care and training previously as part of duty of care. This module introduces supervision as a core method of supporting Protection Case Management staff. Supervision in social work and case management is a structured process in which a more experienced professional provides guidance, support and oversight to caseworkers. It aims

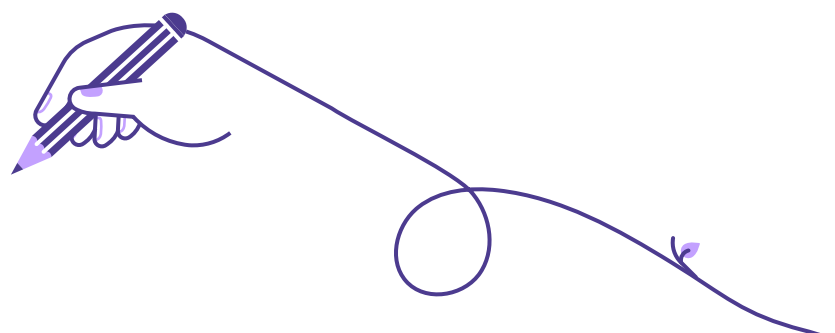


to ensure that practitioners deliver high-quality services while maintaining ethical standards,<sup>2</sup> developing their skills, and managing their emotional well-being. Supervision helps staff reflect on their practice, enhance their decision-making, and improve outcomes for clients by providing a safe space for feedback, learning and professional growth. It also serves as a way to monitor performance and ensure accountability in service delivery.

Table 1 provides core actions to keep staff safe and healthy when setting up and monitoring Protection Case Management services.

**Table 1: Actions and suggested steps and resources to ensure care for Protection Case Management Teams**

Core actions to care for Protection Case Management teams	Suggested steps and resources
<ul style="list-style-type: none"> <li><input type="checkbox"/> Establish policies and concrete organisational mechanisms to protect and promote the mental health and psychological well-being of caseworkers and other staff delivering Protection Case Management services. This may include clear policies for professional development and clear staff care policies, as well as providing care resources, such as benefits and compensation for professional support and time off.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Gather resources and support by talking to your HR Department.</li> <li><input type="checkbox"/> Seek advice from other case management/agencies.</li> <li><input type="checkbox"/> Talk to frontline staff about their practices.</li> <li><input type="checkbox"/> Document supervision sessions to identify opportunities for beneficial institutional change.</li> </ul>



## Core actions to care for Protection Case Management teams

## Suggested steps and resources

Ensure protection and gender analysis informs all aspects of operations, including recruitment practices. Actively seek to hire women and individuals from marginalised groups, as their perspectives are essential for tailoring Protection Case Management services. Employing staff from the affected population is invaluable for culturally responsive and gender-sensitive support.

Include support teams in any protection analysis, seeking their recommendations.

[Click here for guidance offering several recommendations on adopting conflict-sensitive recruitment and staff support practices from Lebanon.](#)

Cite potential work-related stressors in recruitment postings; discuss them with candidates during the recruitment process to assess their suitability for the post.

Contact your HR department to discuss introducing this standard across all job descriptions, not only Protection Case Management vacancies.

Provide staff with information on the support services available during onboarding induction, including MHPSS services (e.g. peer-to-peer support systems, self-care resources) and how to access support.

MHPSS skills you develop in your Protection Case Management training will provide information relevant to your staff and team as well.

Supervision is an opportunity for support. See advice on staff care, below.

Define working hours, monitor overtime and provide for rest and recuperation for both national and international workers. For example, ensure that staff have sufficient paid time off and promote an expectation that workers take sufficient breaks during the working day.

Talk to your HR department to ensure this is included in orientation and inform staff if there are any changes.

Make recommendations to your HR department based on feedback from your team.

## Core actions to care for Protection Case Management teams

## Suggested steps and resources

Assess and monitor work that causes potential stressors and risks to mental health. Take action to address, mitigate or eliminate these risks.

You have a shared duty of care along with your HR department and senior management, consult with them as required.

Support your teams to help them look after their own mental health and psychosocial well-being, including ensuring teams have access to mental health care.

Train teams on self-care and basic psychosocial support skills to help them to look after their own mental health and psychosocial well-being, as well as interacting with each other in a supportive way ([see MHPSS MSP activity 3.2](#)).

Train all staff, including managers, supervisors, caseworkers and supporting staff on their role in monitoring and mitigating work-related stressors, as well as how to respond to workers who are experiencing distress or have experienced/witnessed extremely distressing events.

Use basic psychosocial support skills.

Guide staff members or volunteers through reporting protocols.

Connect them with available supports ([see MHPSS MSP activity 2.1](#)).

Develop an explicit protocol for reporting on and responding to highly adverse/distressing events, which should include offering basic psychosocial support immediately after the event ([see MHPSS MSP activity 3.2](#)).

Adapt guidance in [Annex 4.5: Working with Clients in Severe Distress, Self-harm and Suicidal Ideation](#) in consultation with your local MHPSS working group/local mental health actors.

Provide a forum for caseworkers, staff and volunteers to ask questions, express concerns about risks to themselves and their colleagues and share ideas for improvement.

Supervision is great for this, see below.

Opportunities to debrief outside the organisation is also useful. This can be external supervision or peer groups of staff working in similar fields.

## Core actions to care for Protection Case Management teams

## Suggested steps and resources

- Prevent and mitigate the effects of stress, provide easy, equitable and affordable access to culturally appropriate emotional support for all staff. [Strategies and guidance can be found here.](#)
- Ensure your budgets or medical insurance packages have a provision for mental health care.
- Discuss regularly with your team how to support each other and what the organisation can do to provide support.
- Consider inserting self-care practices at other moments in your team's day.

## Establishing professional boundaries

The onboarding period should place emphasis on developing a strong understanding of a caseworker's roles and responsibilities. This will enable staff to make independent decisions within their role boundaries, maintain clear service boundaries, and effectively communicate these limits to service users and community members. Encourage staff to openly share their experiences, especially with new team members, on how they maintain a healthy work-life balance. These conversations can help foster a supportive environment. Some key areas to discuss as a team include:

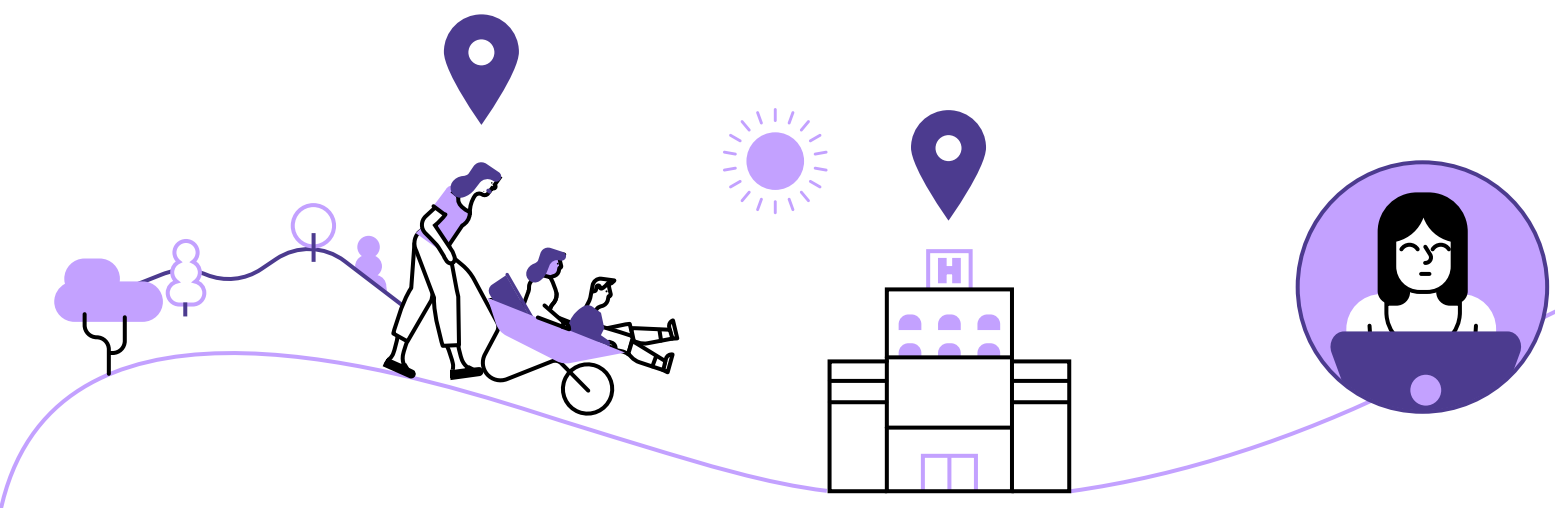
- **Understanding boundaries for physical affection:** Explore what is comfortable and professional for each person.
- **Social media and personal information:** Set clear guidelines for online interactions and the sharing of personal details, including contact information.

- **Managing hospitality offers:** Develop strategies for responding to offers of hospitality during home or site visits while maintaining professional boundaries.
- **Establishing working hours:** Clearly define work hours and fairly distribute any on-call responsibilities to avoid burnout.
- **Seeking support:** Recognise when it's time to seek guidance or help from a supervisor.
- **Engagement after case closure:** Clarify appropriate boundaries and steps to take once a case has been closed.

By addressing these aspects alongside other common challenges, there is a potential to positively influence cultural and social practices. Here are the key questions for you and your staff to reflect on:

- Could this action or behaviour affect my or a service user's safety or well-being, either immediately or in the future?
- Does this action or behaviour have the potential to undermine a service user's coping strategies and create dependency?
- Will this action or behaviour limit the level of control that either the participant or I have in the participant-caseworker relationship?

Encouraging thoughtful consideration of these questions helps ensure safe, supportive, and empowering interactions with service users.





# Creating a collaborative supportive professional space

Creating a space where caseworkers can communicate freely, both in supervision sessions and within a supportive, collaborative professional culture, will enhance your team's well-being and the effectiveness of your supervision, thereby benefiting your programme. Discuss within your teams what strategies they would see as helpful in creating an openly communicative environment. Examples of this have previously included:

- Planning social events
- Celebrating and sharing caseworker and service users' successes
- Celebrating personal milestones in team members' lives like birthdays, graduations or promotions
- Investing in beautifying the workspace with art, plants, a private corner, or social area
- Developing a team motto and turning it into a poster or a team t-shirt
- Conducting a "rose-bud-thorn"<sup>3</sup> exercise on the last day of the week

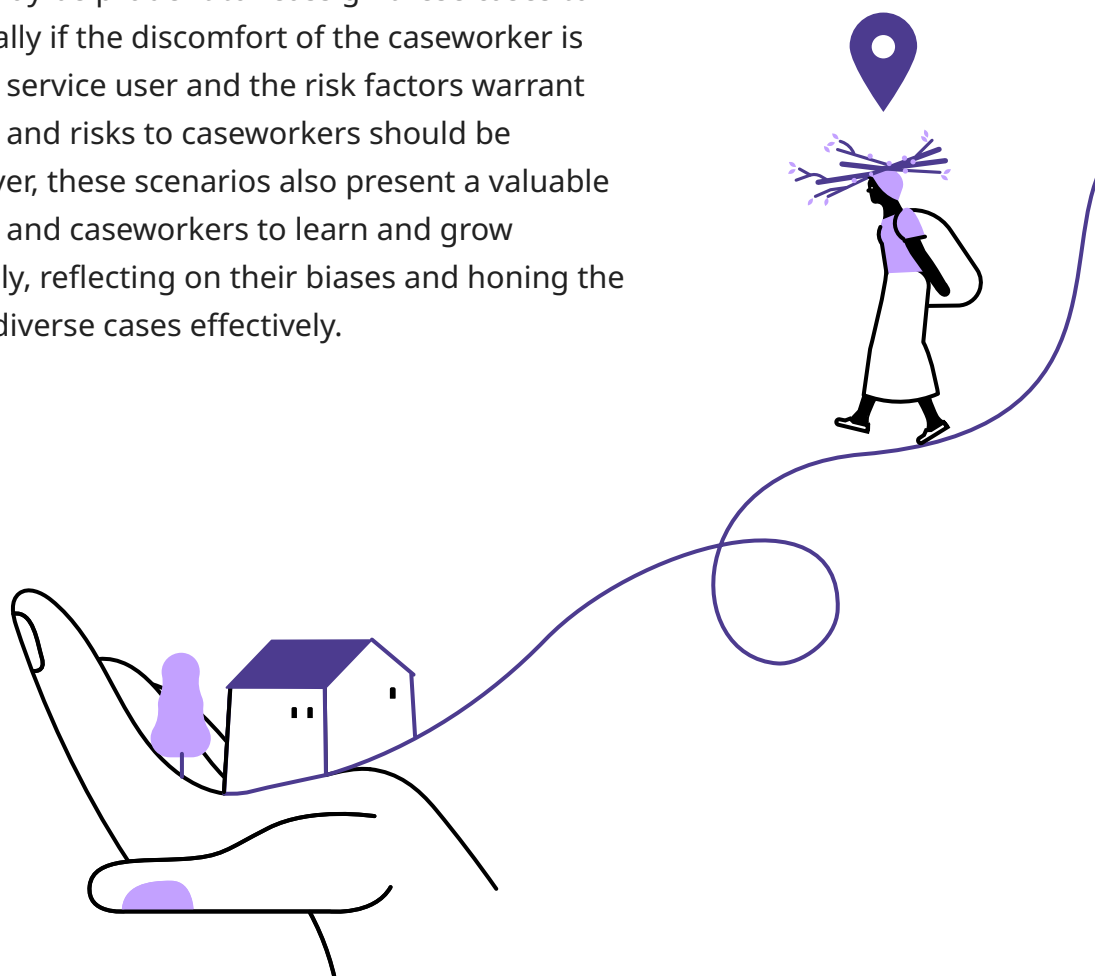
Ensure there is allocation in the budget to invest in creating a supportive workspace. Build strong collaboration across sections and include other teams, strengthening Protection Case Management work.

## Case allocation

As noted in the Protection Case Management standards in [Module 3](#), best practice dictates that caseworkers should not have more than 25 cases allocated to them at any one time. This standard should be reviewed and adapted, and potentially decreased, based on local nuances and the severity of the cases. As a supervisor or senior staff

member, you may have a role in allocating cases and ensuring your staff's wellbeing. Based on your staff's experience and the service user's profile and support needs, you may consider allocating fewer cases. Established programmes have reported allocating experienced caseworkers a maximum of five service users at a time due to the high risk involved. Other programmes have opted not to allocate high risk cases and reduce caseloads for new caseworkers as they develop their skills and understanding of Protection Case Management. Caseworkers managing a large caseload of clients exhibiting symptoms of severe distress may also benefit from a reduced caseload. This adjustment can help to ensure that the MHPSS needs of the service users are adequately met while also prioritising the well-being of caseworkers.

Caseworkers may experience discomfort with supporting certain cases. For example, a caseworker might prefer working with individuals of a specific age, gender, race, ethnicity or religion; or they may hesitate to engage with individuals from groups associated with negative past experiences. This tendency is known as bias - it is a natural aspect of human behaviour that everyone possesses. When managing such situations, it's important for the caseworker and supervisor to discuss a way forward together. It may be prudent to reassign these cases to another caseworker, especially if the discomfort of the caseworker is significant or impacting the service user and the risk factors warrant it. Both risk to service users and risks to caseworkers should be carefully considered. However, these scenarios also present a valuable opportunity for supervisors and caseworkers to learn and grow professionally and personally, reflecting on their biases and honing the skills necessary to address diverse cases effectively.



All volunteers, caseworkers, and supervisors should be trained to recognise their own biases and prejudices, challenge them, speak up against microaggressions, and handle situations respectfully with service users, colleagues and supervisors.

## Staff care after a critical incident

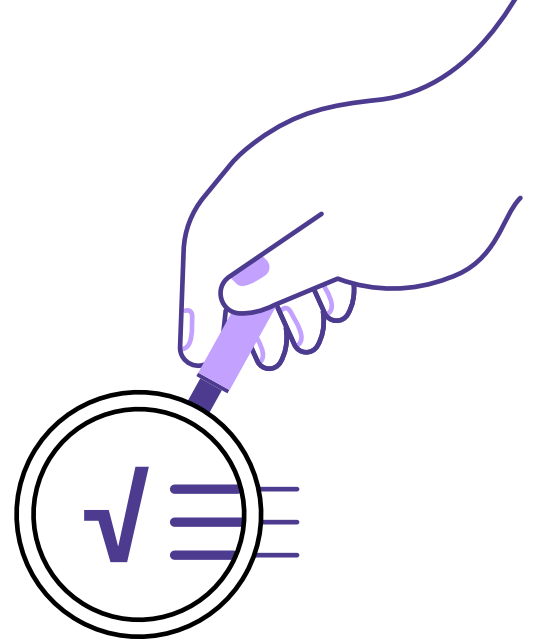
Critical events are sudden, violent occurrences that threaten or claim lives. In a Protection Case Management context, caseworkers in the past have faced critical incidents such as the death of a service user, violent encounters with community members associated with a participant, and detention or threats from authorities due to association with marginalised under threat communities or caseloads, amongst others.

In [Module 4](#), you will have learnt or reviewed how to anticipate and develop mitigation and response plans for critical incidents. To guide your response to a critical incident if it occurs, several resources are available. [This resource from UNHCR](#) provides a particularly detailed brief on how to recognise a critical event (page 14) and respond (page 32). Additionally, your organisation may already have support in place for staff in response to such an incident or guidance that your Protection Case Management team would benefit from being aware of prior to implementation.

### **A note on the role of human resources in staff care<sup>4</sup>**

Workforce mental health, psychosocial well-being and staff care is the responsibility of management, human resources departments and occupational health departments (where they exist). The human resources department in your organisation plays an essential role in creating a supportive and healthy work environment, fostering staff wellbeing, satisfaction and productivity. While protection teams, particularly supervisors and caseworkers, may offer useful insights on workforce well-being strategies and the suitability of support services and organisational plans, it is crucial that these responsibilities remain primarily with management and HR departments.

# How should I approach team professional development and supervision plans?



Ensure that your team's professional development and supervision plans are systematically integrated into broader programme or project plans. Revise and update these plans as regularly as you revise your protection analysis and intake criteria to make sure that training plans reflect the evolving needs of individuals prioritised for Protection Case Management services. For example, if your analysis identifies high mental health needs among the prioritised population, this may prompt you and your programme to ensure consistent and ongoing MHPSS training and technical support for your implementing team members. You should also revise these plans based on trends observed during supervision sessions, such as identified areas for team-wide development, trends in your current caseload or feedback from service users.

Whilst the focus of this module is on targeting caseworkers and supervisors, do not forget to ensure that support staff and senior management staff often require some level of training or other support to understand Protection Case Management processes. This can support them to promote and contribute to quality Protection Case Management programming in their roles. In addition to team plans, supervisors are responsible for developing a supervision plan for each

caseworker based on their capacity assessment and their changing needs. This plan should detail each supervision activity, including its frequency and scheduled dates. Organisations who have a human resources-led individual development plan process may opt to merge these two processes.

## Training

Protection team members must complete adequate training for their role. For caseworkers, the five-day Protection Case Management training is a minimum standard prior to registering cases. When recruiting an individual staff member into an existing team without immediate planned training, consider having the new caseworker shadow a more experienced colleague until their training can be arranged. During this period, it's beneficial for them to study this guidance and other relevant resources ([such as these](#)) as a temporary measure until the next training opportunity becomes available.

After two to three months of field experience, caseworkers often benefit from a refresher Protection Case Management training. This can be adapted to address the challenges and concerns in a learning forum, building upon the foundations and experiences already developed. Whilst Protection Case Management training should be a priority, ensuring caseworkers are made available to attend other training relevant to their role/caseloads is encouraged, such as the below:

- [How to support survivors of gender-based violence when a GBV actor is not available in your area](#)
- [MHPSS for caseworkers](#)
- [Wellbeing and Resilience for Frontline Staff and Managers](#)
- [Inclusive Humanitarian Action](#)

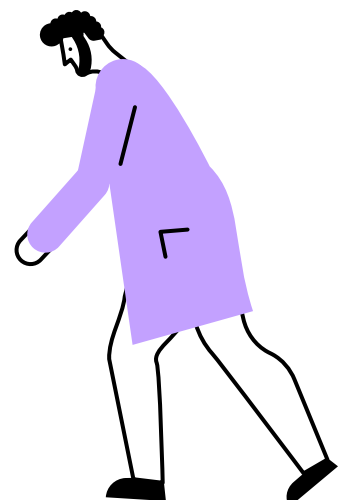
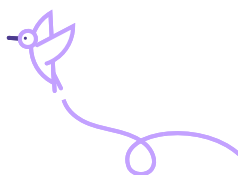
If your team is implementing Protection Case Management, ensure service users have some emergency coverage while the team is engaged in training.

Similarly, Protection Case Management supervisors and managers must develop their capacity to protect and support the mental health of those being supervised, understanding when and how to provide support. Supervisors should receive a five day training in supervision and coaching, [like this one developed by the Alliance for Child Protection in Humanitarian Action](#). Another strong resource for ongoing learning and capacity building of supervisors and capacity officers supporting teams providing MHPSS services is the [Integrated Model for Supervision](#).

## Roles and strategies of individual and group supervision in programme quality and staff care<sup>5</sup>

All Protection Case Management teams should have at least one case supervisor responsible for ensuring that staff are trained and prepared for their roles. To facilitate this role, case supervisors should:

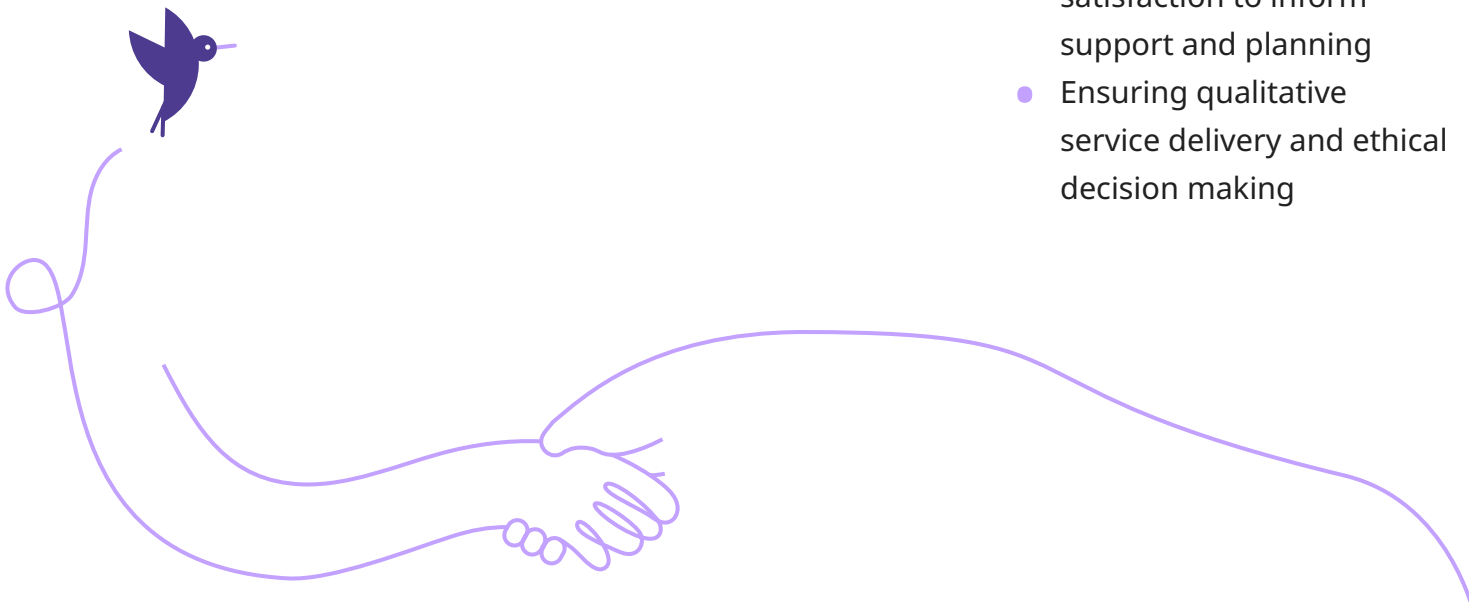
- Regularly monitor caseworker and officer practices
- Provide support to ensure services are delivered in line with best practices
- Oversee no more than five to six caseworkers
- Be available for consultation in emergency situations
- Provide regular case supervision to caseworkers
- Develop and nurture impactful supervision practices through regular and structured sessions



The relationship built and maintained through these sessions is key to effective supervision. Supervisors may be dedicated solely to the supervision role or have additional responsibilities, depending on your staffing structure and the assigned duties within that structure. For more information, [see Module 3: Staffing](#).

**Table 2: Required functions of supervision within Protection Case Management**

Functions	Purpose	Includes
<b>Accountability and administrative</b>	To ensure competent, accountable practice of staff	<ul style="list-style-type: none"> <li>● Planning and assigning work</li> <li>● Coordinating with other actors</li> <li>● Documentation and reporting</li> <li>● Material and logistical support</li> <li>● Reinforcing programme protocols and ethical standards</li> <li>● Monitoring and evaluation e.g. using information on case profiles, workload and participant satisfaction to inform support and planning</li> <li>● Ensuring qualitative service delivery and ethical decision making</li> </ul>



Functions	Purpose	Includes
<b>Educational and professional development</b>	To ensure staff are continually building knowledge and skills	<ul style="list-style-type: none"> <li>● Assessing competencies</li> <li>● Collaborating on personal learning plans</li> <li>● Promoting reflective practices</li> <li>● Reinforcing guiding principles</li> </ul>
<b>Supportive</b>	To ensure the emotional and psychological wellbeing of teams	<ul style="list-style-type: none"> <li>● Creating a safe space for reflection</li> <li>● Promoting self-care and a work life balance</li> <li>● Having empathy and normalising feelings</li> <li>● Reinforcing realistic expectations and healthy boundaries</li> <li>● Offering recognition and encouragement</li> <li>● Sharing available resources and information</li> </ul>

Supervision is important because it enhances service users' safety - supporting caseworkers to reduce errors, minimise neglect, offer a safer environment and provide quality Protection Case Management services.

Coaching is at the heart of supervision. It is an attitude that places the caseworker as the driver of their own development. The supervisor's role as coach is to use specific practices to help the caseworker recognise their strengths and challenges and assist them to set realistic goals towards achievement. Coaching also helps the caseworker to *reflect* upon his or her work and role.



**Table 3: Overview of supervisor and caseworker roles in meetings**

Supervisor role	Caseworker role
Prepares for supervision sessions in advance, including anticipating issues, creating an agenda, etc.	Comes prepared and actively participates in the supervision sessions to support reflective learning
Develops a safe space for the caseworker(s) to speak about their work in their own way.	Identifies practice issues which they need help in, and what supervision practice is useful to them
Gives useful, insightful feedback and supports the caseworker(s) to explore and clarify their thinking	Is open to feedback and seeks clarification if needed, proactively engaging to seek solutions
Share information, knowledge and skills appropriately	Develops a level of trust in supervision to share their work issues, wellness or personal issues/concerns/bias that impacts working with service users
Challenges practises that are considered unethical or risky, as well as personal and professional blind spots	Uses supervision to identify learning and development needs
Manages the time and structure of individual sessions and meetings	Uses individual sessions and meetings to review and reflect on current workload
Reviews and updates capacity building plan(s) during individual sessions and, when appropriate, during meetings	Identifies what supervision practice is useful to them/their colleagues
Ensures everyone is given space to participate in meetings	Supports the other caseworkers and respects confidentiality

# Key supervision strategies

The effectiveness of supervision in Protection Case Management can be enhanced by implementing these key strategies for effective supervision:

## 1. Regular and consistent supervision

- Schedule supervision meetings once a week
- Set a consistent meeting time to allow both the caseworker and supervisor to prepare and set expectations
- Provide ad-hoc support, when necessary, but ensure it does not replace regular supervision meetings

## 2. Collaborative supervision

- Encourage staff to come to supervision meetings with an agenda, identifying the cases they want to discuss, specific questions and topical areas of technical support:
  - Give the caseworker the space to talk first before asking questions
  - When conducting group activities, provide an environment for discussion so that caseworkers can learn from one another
  - Problem-solve with the caseworkers, allowing them to lead the process before providing solutions
  - Discuss caseworkers' personal reactions to their work, including personal issues or biases that could impact their relationships with service users

## 3. Opportunities for learning and professional growth

- Use supervision sessions to support caseworkers' learning and professional development:
  - Give the caseworker the space to talk first before asking questions
  - Provide concrete feedback on what the caseworker did well
  - Ask the caseworker to reflect on what they think could have been done differently or better and provide your feedback





- Offer opportunities for role-play to practise suggestions and demonstrate accurate techniques
- Emphasise the importance of showing what they did or said to the service user, not what they think they should have done, explaining this is the best way for them to learn and for you to provide support

#### 4. Creating a safe environment

- Ensure supervision meetings feel like a safe space for caseworkers:
  - Caseworkers should feel comfortable and supported
  - They should be able to make mistakes without judgement
  - They should receive constructive feedback, not criticism
  - Use a private space
- Keep supervision meetings separate from any HR activities, such as performance monitoring meetings

#### Before you begin supervision

Supervision within Protection Case Management may be a new experience for your staff, especially if they do not have a background in social work, psychology or health, where this type of supervision is a common practice. Take the time to explain supervision to staff and be patient as they become comfortable with the process. Supportive actions to get off to a good start with supervision might include:

- An orientation session on what is supervision - HR should partner with you and attend to highlight the delineation between their practices and this one
- Scheduling a supervision session ahead of time with your caseworkers so they can prepare for it, including sharing any forms you will be collaborating on
- Holding a supervision session in a comfortable location away from the office to emphasise the distinction between this process and a performance review
- Beginning each supervision session with a briefing on the objective of the session, make time for the staff member to ask questions

# Supervision approaches to support program quality and staff care

## Individual supervision meetings

Individual supervision meetings with caseworkers are one of the best ways a supervisor can provide support to caseworkers and monitor the quality of their work. These meetings are regularly scheduled one-on-one sessions between the supervisor and caseworker that can address all three core functions of supervision. For more information, go to [Record Form 1: Individual Supervision Meeting](#).

### Frequency/duration

- Depending on the schedule of the team, individual supervision meetings can be held for an hour once a week or as frequently as the team decides is useful.
- There may be times when an urgent case discussion is required to address concerns or roadblocks in the care of high-risk service users. This is different from a structured individual supervision session, but ensures that caseworkers know they do not need to wait for their individual supervision sessions to raise urgent issues.

### Guidance

**Preparation:** Both supervisors and caseworkers are responsible for preparing ahead of the meeting, depending on the week's activities and any other topics discussed in previous meetings or within a capacity building plan. This preparation can include:

- Specific cases to discuss
- Questions from the caseworker
- Feedback or guidance from the supervisor
- Supervisors should create an environment of openness where caseworkers are encouraged to reflect honestly.

## Supervision components

- **Administrative:** The supervisor should discuss any administrative or logistical challenges and update and review the total caseload. If these updates are extensive, they might be set aside for a programmatic meeting outside of the supervision space.
- **Development:** The supervisor should review any skills, knowledge or learning that the caseworker or supervisor has identified as a priority. Supervisors should refer to [Supervision Form 1: Caseworker Capacity Assessment](#).
- **Supportive:** The supervisor should use this time to check in with how the caseworker is feeling in their practice and managing their stress levels generally. The supervisor should explore and review self-care strategies or additional support services if needed.
- **Feedback on Supervision Practices:** Supervisor can provide constructive and positive feedback based on whatever supervision practices have been completed that week (e.g. observation visit, case files reviewed, shadowing visit)
- **Case Discussion:** The supervisor should review a challenging case with the caseworker - as outlined in [Supervision Form 5: Case Discussion](#).

## Group supervision meetings

Group supervision meetings are regularly scheduled gatherings between the supervisor and the team. These group meetings can address the functions of supervision, but should not be used as a replacement for individual supervision. They are useful for promoting learning exchanges between caseworkers, as well as providing technical support on common challenges the supervisor has identified across caseworkers. For more information, go to [Record Form 2: Group Session Meeting](#).

## Frequency/duration

- Group supervision meetings should be held once every 1 to 2 weeks at the same time for a minimum of 1 hour, depending on the context and needs.

- It is recommended that the supervisor organises an extended meeting once a month for at least one hour, focusing on skill development or staff care and well-being.
- Regardless of the frequency of meetings, they should be held consistently and according to a schedule (e.g. the first Tuesday of every month) so that caseworkers and supervisors can set aside time in their schedule.

## Guidance

**Preparation:** Supervisors are responsible for regularly scheduling and organising meetings with their teams. Caseworkers are expected to undertake necessary preparation and participate fully in the meeting. The supervisor should facilitate collaborative discussions between team members and encourage caseworkers to offer suggestions and facilitate the discussion.

## Supervision components

- **Case discussion:** The supervisor assigns a caseworker to discuss an interesting or challenging case from which other staff can learn. Case presentations can follow the agenda outlined in the case discussion activity form ([see Supervision Form 5: Case Discussion](#)).
- **Topical sessions:** The supervisor should either choose the topic in advance, based on the technical support identified as a priority, or ask the caseworkers to identify topics for which technical support is desired.
- **Teach back:** The supervisor can identify a caseworker with a particular strength or who has been successful with a new strategy to lead the group session and “teach” their colleagues. The supervisor must inform the caseworker in question of their plan for the group session.
- **Guest speaker:** The supervisor may invite technical experts to share information on a specific protection issue or a skill to be developed within the team. Supervisors can also request a presentation to be made by a representative from a community service (e.g. legal, police, medical or mental health professional, registration, etc.).



## Capacity assessment

A capacity assessment is a supervision practice used to examine a newly recruited caseworker's attitudes, knowledge and skills. It outlines areas where further development and support may be needed to perform effectively in the role. These are minimum competency standards for all caseworkers providing Protection Case Management services. It is important that caseworkers do not feel evaluated or punished if they do not demonstrate accurate knowledge and skills. Instead, we want them to understand that the questions and the role-plays included in the skills part of the assessment form are to support the caseworker's skills development. For more information, go to [Supervision Form 1: Caseworker Capacity Assessment](#).

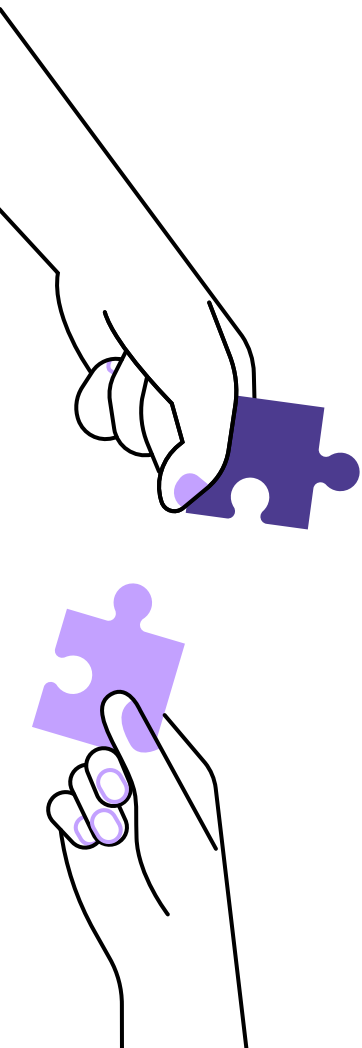
For additional assessment tools and e-learning resources for trainers and supervisors to improve the quality of their team's MHPSS skills, please visit the platform [the EQUIP platform](#), hosted by WHO and UNICEF. EQUIP is for trainers and supervisors to improve the quality of their team's psychosocial and mental health helping skills. For onboarding and consultation support, Protection Case Management teams should contact the EQUIP helpdesk at: [EQUIP-helpdesk@unicef.org](mailto:EQUIP-helpdesk@unicef.org).

### Frequency/Duration

- The capacity assessment should be conducted immediately after the caseworker is recruited.
- It should be reassessed in three to six-month intervals, depending on organisational capacity, staff ratios and needs.

### Guidance

- The assessment is used upon recruiting a new caseworker and should continue at regular intervals.
- Supervisors can use this form during initial individual supervision sessions to understand caseworkers' strengths and areas for development.



- Ideally, administer the assessment before caseworkers start working directly with service users at risk.
- The assessment outcomes should inform the capacity building and development actions that supervisors provide in both individual and group supervision sessions.

## Shadowing

This is a useful and effective practice to show new or inexperienced caseworkers how to engage with service users by modelling best practice. During a shadowing visit, the caseworker acts as a neutral observer to learn and develop by reflecting on interactions between the senior caseworker/supervisor and the participant. Reflections and discussions of shadowing sessions should occur in individual supervision sessions. For more information, go to [Supervision Form 3: Shadowing](#).

### Frequency/duration

- Five to ten shadowing visits should occur during a caseworker's first month of employment.

### Guidance

- Shadowing sessions can be implemented during all stages of the Protection Case Management process.
- Whilst particularly useful for new caseworkers, it can benefit all caseworkers regardless of experience level.
- Supervisors should determine which cases should be observed according to the caseworker's capacity building plan.
- Always consider the confidentiality and safety of the participant as a priority. Consider the service user's current vulnerability, safety and wellbeing according to the "do no harm" principle.
- It is essential that informed consent is sought from the participant prior to the meeting and the purpose is clearly communicated.
- Invite only one caseworker to shadow a session to avoid overwhelming the participant.



## Observation

This is a supervision practice used to assess a caseworker's application of Protection Case Management competencies during a face-to-face interaction with a participant. During the observation, a caseworker conducts a meeting with the service provider. The supervisor is a neutral observer during this contact unless it is essential to intervene i.e. due to a Protection Case Management principle being significantly violated or if the caseworker explicitly asks for support or feedback. The goal of the exercise is for a supervisor to observe participant/caseworker interactions in order to support the caseworker's development in applying Protection Case Management best practices. For more information, go to [Supervision Form 2: Session Observation](#).

### Frequency/duration

Observations should occur regularly, around once every two weeks with new caseworkers, and around once every two months for more experienced caseworkers.

- Caseworkers and supervisors should determine together which cases to observe according to the service user's vulnerability, safety and well-being.

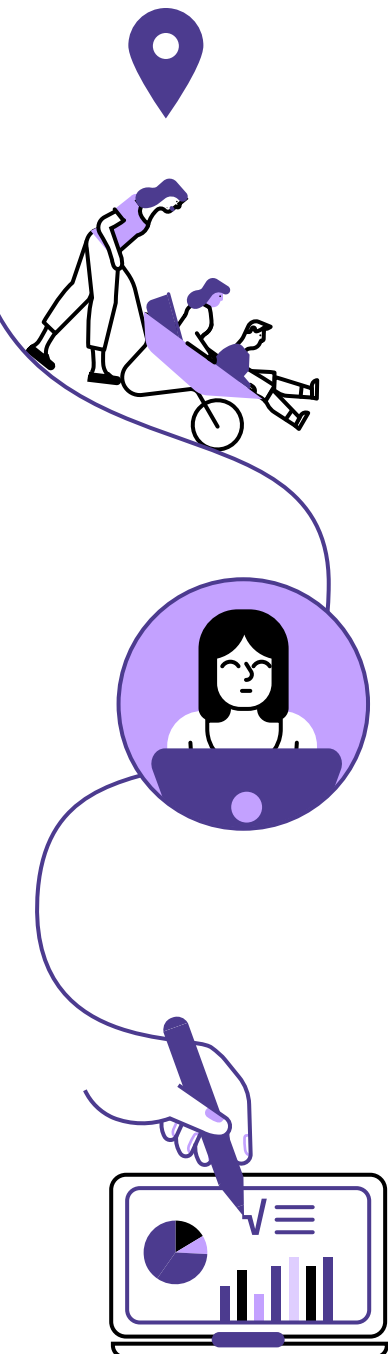
Supervisors should reassure caseworkers to not feel they are being evaluated or will be punished if they do not demonstrate accurate knowledge and skills. It is essential to obtain the service user's permission beforehand, explaining it is to support the caseworker's learning and that all information disclosed will remain confidential.

### Protection Case Management file check<sup>6</sup>

Supervisors should also review case files on a regular basis, focusing on active cases to make sure that services are consistent and meeting the quality markers outlined in the local standard operating procedures, documented case details are relevant, clear and to standard, and supervisors identify areas of development and support beneficial for caseworkers. For more information, go to [Supervision Form 4: Case File Checklist Tool](#).

### Frequency/duration

- A supervisor should review three to five files per a month for **each** caseworker.



## Guidance

- Supervisors should select some cases (can be open or closed) randomly for an independent review. Provide feedback to the caseworker in individual supervision sessions and follow-up on progress during subsequent supervision sessions.
- Address trends within the case files, such as common record-keeping mistakes or misunderstandings during group supervision sessions. Discuss and provide guidance to improve practices.
- Supervisors can use a checklist to independently review multiple files in a short period of time.

## Case discussion

A case discussion is a supervision practice to support a caseworker process and analyse a case, explore potential options and determine ways forward. Case discussions can be used as a learning opportunity to reflect on how guiding principles were applied and how difficult situations were managed through a collaborative dialogue. For more information, go to [Supervision Form 5: Case Discussion](#).

## Frequency/duration

- Cases should be reviewed frequently, based on a caseworker's needs and in accordance with organisation standards.

## Guidance

- Case discussions can take place in an individual supervision session or group supervision session.
- To start, the caseworker presents the background, concerns and status of the case. Following the presentation, open a discussion, including questions, brainstorming options and agreements on next steps.
- To maintain confidentiality, the discussion should occur in a private space without using identifying information, adhering to the 'need to know' principle. No details related to the case should be discussed externally.

# Supervision Forms

**Supervision Form 1:** [Caseworker Capacity Assessment](#)

**Supervision Form 2:** [Session Observation](#)

**Supervision Form 3:** [Shadowing](#)

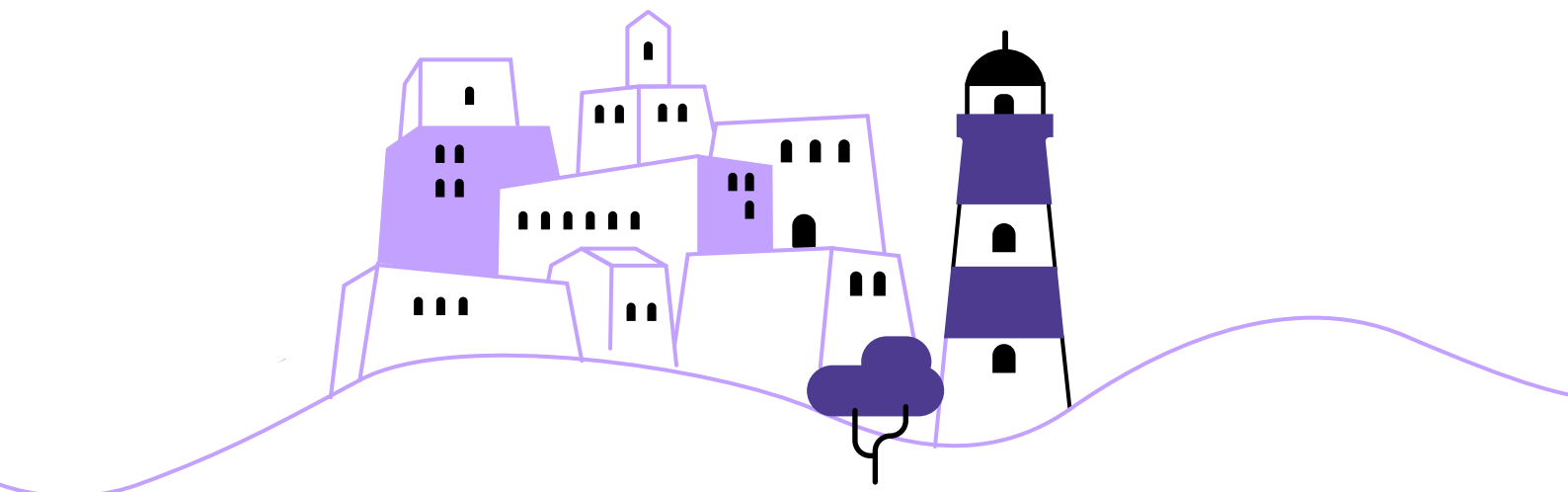
**Supervision Form 4:** [Case File Checklist Tool](#)

**Supervision Form 5:** [Case Discussion](#)

# Record Forms

**Record Form 1:** [Individual Supervision Meeting](#)

**Record Form 2:** [Group Session Meeting](#)



# Endnotes

1 This entire section draws heavily from The Alliance for Child Protection in Humanitarian Action, Case Management Task Force, Child Protection Case Management Supervision and Coaching Training Package, 2018.

2 See, for example: International Federation of Social Workers (2018) Statement of Ethical Principles. <https://www.ifsw.org/global-social-work-statement-of-ethical-principles/>

3 Each team member identifies their rose, bud or thorn of the week. A rose is a highlight, success, small win or something positive that happened. A thorn is a challenging experience or something requiring more support. A bud is a new idea that blossomed or a new learning opportunity.

4 Key consideration: Staff responsible for providing MHPSS to people affected by humanitarian emergencies should not also be responsible for workforce well-being - MHPSS MSP

5 All the Supervision content in this guidance here draws heavily from The Alliance for Child Protection in Humanitarian Action, Case Management Task Force, Child Protection Case Management Supervision and Coaching Training Package, 2018.

6 This is different to spot checks that supervisors, information management or other staff (as assigned in your staffing structure) should conduct on your data protection. For this guidance, please see Module 3.