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HOMEMAKER-HOME HEALTH AIDE
SUPERVISION

HAUGEBAK - PRIMUS

Iowa Department of Social Services

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HOMEMAKER-HOME HEALTH AIDE SUPERVISION

"A service delivery system helps a client face and cope with an environment in which he is otherwise vulnerable."

The rapid development of Homemaker-Home Health Aide Services in recent years, has resulted in greater focus on the personnel who are providing these services of mediation for a vulnerable client in that client's home.

As this focus intensifies, there is an expected emphasis on the supervision which the Homemaker-Home Health Aide receives. Supervisees reflect the assumptions, attitudes, style and behavior of the supervisor. So there is a real need for agency plans that include continuous training of supervisors.

Countless studies and discussions identify supervisor-employee relations as the basis for most agency and service delivery problems, deficiencies and failures. These relations seem critical at three points of departure: 1) responsibility for production and meeting deadlines, 2) clear, meaningful communications, 3) feelings about fair and equitable treatment.

As the focus on delivery personnel intensifies and the HHHA delivery system expands in pace with public demand and political motivation toward in-home-care programming, HHHA's need support, leadership and instructions from professionals who fully understand and implement the role of basic supervision and more especially the role of the HHHA Supervisor.

It is for all these reasons which are essential to the quality of a service delivery system, that Iowa supports a concentrated effort to train HHHA supervisors in the foundations and dynamics of general supervision; in the standards of quality delivery approved by the National Council for HHHA Services (a minimum expectation); the expanded expectations indicated by public opinion and professional experience; and the complex, unique demands therefrom inherent on HHHA Supervision.

In this material we have assumed several criteria of approach: 1) that the Homemaker-Home Health Aide is one person; 2) that the HHHA Supervisor is one person; 3) that the HHHA supervisor is a professional from social work, health or home economics disciplines; 4) that it is desirable to create an atmosphere which encourages a team effort with the relinquishment of power and direct control inherent in team work; 5) that all team members do now or will be trained to understand their individual roles but will view team work as a functional process; 6) that all team members and the agency policies are reasonably consistent in response; 7) and that the team as a unit and its individual members receive credit where credit is due for work accomplishments.

In considering standards for general supervision and Homemaker-Home Health Aide Supervision, we have relied heavily upon the bibliography credits listed in the back of this material. To these resources, we have added tools and treasures which have proven effective from our personal experience and the expertise of other Iowa Homemaker-Home Health Supervisors. We welcome comments from readers of this material.

Homemaker-Home Health Aide Supervision is a complex demanding skill and a personal learning, developing process. For us it has been the most rewarding satisfying experience of an extensive, varied professional life.

Dorothy Haugebak and Jane Primus

ATTITUDES AFFECTING SUPERVISION

A. Assumptions (The Human Side of Enterprise, McGregor)

Every managerial decision has behavioral consequences/every act rests on assumptions, theories.

Assumptions about human nature and human behavior.

Theory X.

1. The majority of people have an inherent dislike of work and will avoid it.
2. Because people dislike work and therefore try to avoid it, they must be controlled, by threats in order to help them produce.
3. Most people prefer direction and control thus escaping responsibility.
4. The average human seeks security above all and has little ambition if it involves sacrifice.

Theory Y

5. Work can be a source of satisfactions, physical and mental.
6. A committed person will exercise direction and control toward a goal.
7. Reward or punishment is not the only motivation toward organizational effort.
8. Most humans given opportunity, can and will seek and accept responsibility.
9. Human potential is minimally developed, exploited and realized.
10. Capacity to attach and solve problems is widely distributed among humans.

B. Managerial Styles (The Managerial Grid, Blake and Mouton)

All styles include the manager's personality, attitudes, and environment.

Concern for people and Concern for production grid

PEOPLE

9	1,9 Management Style	9,9 Management Style
8	Thoughtful attention to needs of people for satisfying relationship leads to comfortable, friendly work atmosphere and tempo.	Accomplishment is from committed people, a "common stake" leads to trust and respect.
7		
6		
5	5,5 Management Style	
4	Adequate performance of agency is possible through balance of work necessary, with maintaining satisfactory morale.	
3		
2		
1	1,1 Management Style	9,9 Management Style
	Exercising least effort to get work done is appropriate to sustain existant human resource	Efficiency results from arranging work situations so that human elements interfere as little as possible.
	1 2 3 4 5 6 7 8 9	
	PRODUCTION	

- 1,1 low concern for people and production
- 5,5 compromise without full concern for either
- 1,9 high concern for people regardless of production
- 9,1 high concern for production regardless of people
- 9,9 Integrated -- total concern for both -- the HIGHLY MOTIVATED SUPERVISOR dependent on acceptance of McGregor's Theory Y assumptions.

C. People and Work (Management Minded Supervision, Boyd)

The Process Of Using People to Get Work Done In 7 Responsibilities

Planning
Organizing
Motivating
Controlling

People
and
Work

Production
Quality
Costs
Methods
Morale
Training
Safety

D. Management By Objectives (The Practice of Management, Drucker)

Systematic and orderly progress through managers' and subordinates' agreement upon and commitment to firm and meaningful goals.

Identification of goals and actions
Acceptance after input by all levels
Expectations from all levels
Measurement of all levels and of results

Guidelines for Writing Objectives.

A Well formulated objective will:

1. Begin with the word "to" followed by an action verb.
2. Produce a single key result when accomplished.
3. Specify a target date for its accomplishment.
4. Specify maximum cost factors.
5. Be as specific and quantitative as possible
6. Specify only the "what" and "when"; avoid venturing into the "why" and "how."
7. Be directly related to the manager's area of responsibility and to the overall objectives of the organization.
8. Be readily understandable by anyone who will be making a contribution to its achievement.
9. Be achievable and realistic but still represent a significant challenge
10. Be consistent with the resources available.
11. Be consistent with basic organizational policies and practices.
12. Be willingly agreed to be both superior and subordinate.
13. Be in writing with a copy kept and periodically referred to by both superior and subordinate.
14. Be remembered and discussed frequently between the accountable manager and those subordinates contributing to its achievement.

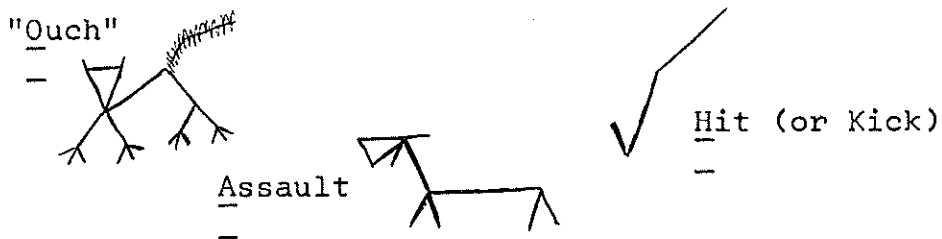
GOALS FOR SUPERVISORY PERSONNEL MIGHT INCLUDE

1. Development of new skills.
2. Change of feelings or actions about aspects of job - for instance - less pressure or discouragement, being more vocal about opinions or feelings, reaching out for advice or to share impressions.
3. Improvement in relationships.
4. New training or leadership responsibilities.
5. New relationships or roles in the community.
6. Better organization of job to accomplish more.
7. Focus on specific problems in agency.
8. Better understanding of role and goals.
9. Continued feeling of accomplishment and satisfaction.
10. To achieve recognition for a job well done.
11. Solution of personal problems which make job difficult.
12. Other.

Iowa Dept. of Social Services
H.H.H.A. Supervisors Training

BEHAVIOR MODELS AFFECTING SUPERVISION

A. Communications: responding and reacting to information, data, ideas, people; behavior that results in an exchange of meaning.



THE CHAOS SYNDROME, VICIOUS CIRCLE OR KITA (Kick in the _____)

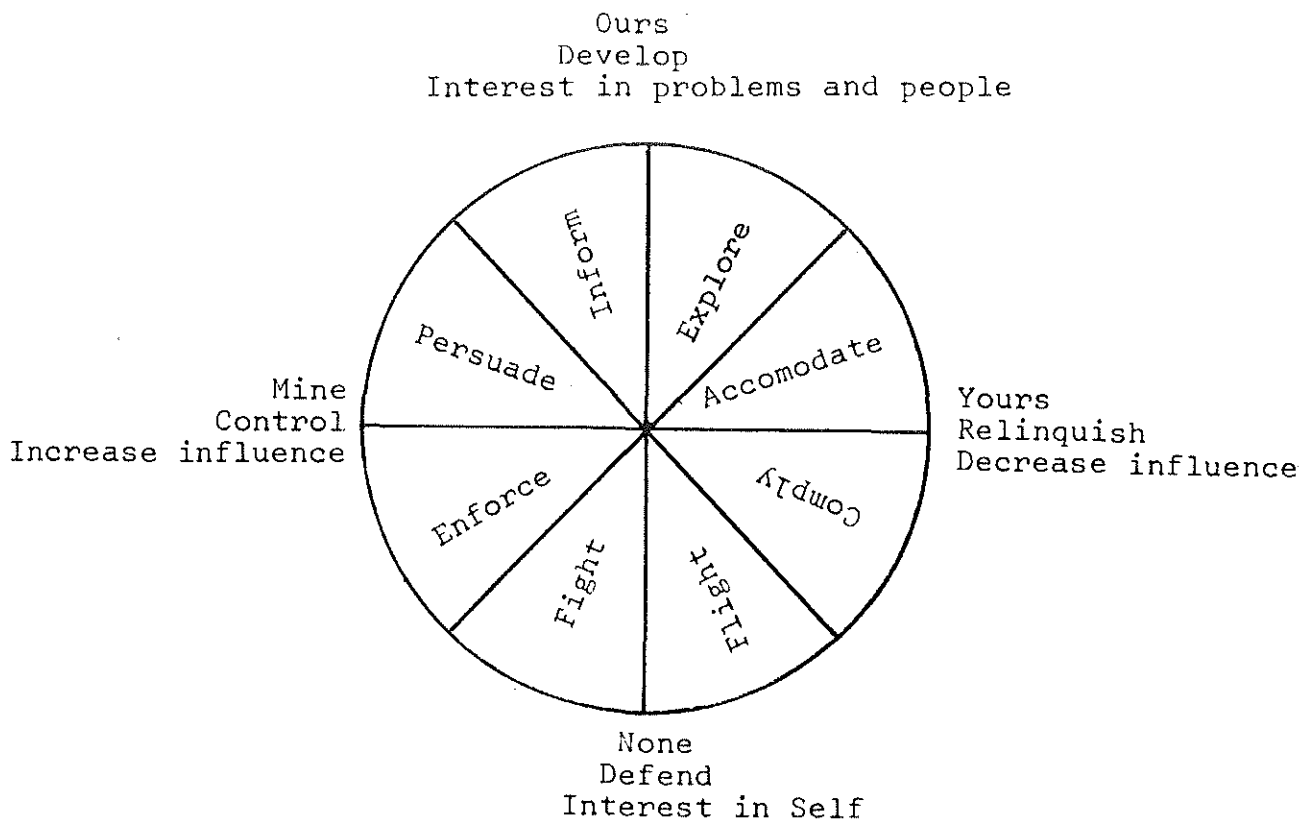
(A-Communications) Patterns of Influence

Control--"I want the most influence."
Persuade, dominate, enforce

Relinquish--"I want to give you the influence."
Accomodate, comply, submit

Defend--"I want to stay uninvolved and neither exert nor
respond to influence."
Flight, fight

Develop--"I want to use my influence and yours to solve a problem."
Inform, stimulate, explore



Iowa Dept. of Social Services
H.H.H.A. Supervisor Training

A-B-C Communication Game

I. A---expressor (What I feel)

B---listener (May use reflective responses; i.e. mirror back.
May not disagree or expand)

C---referee (Does two things: time and keep discussion
on the track)

Do exercise for 5 minutes in each of A-B-C roles.

II. A---expressor (What I think)

B---listener (May agree or qxpress opposition)

C---referee (Does two things: time and keep discussion
on the track)

Do exercise for 5 minutes in each of A-B-C roles.

TOPICS: Each person in A role may choose one for discussion
in 5 minutes.

Women's lib--positive or negative affect on family life

Legalized abortion--pro or con

Pre-marital sex--pro or con

Gas rationing---pro or con

Right to die---personal or public decision

B. Building Openess and Trust: interaction of people for information to make a decision or solve a problem.

1. Opportunity for exchange of information is responsibility of all interacting roles.
2. Opportunity for expression of opinions, feelings and attitudes is responsibility of supervisor or administrator.
3. Value judgements are repressive.(good or right or bad or wrong)
4. Alternatives and options coupled with suggested and/or probable results offer continued interaction.
5. Openness depends on mutual trust.
6. Trust involves risk.
7. Risk will be undertaken in the climate of concern and understanding for human needs, potential, values, and goals:
 - a. information will not be a weapon.
 - b. respect for equal dedication to goals is apparent.
 - c. acceptance as worthy persons is mutual.
 - d. focus is on problem and off personalities.
8. Specific techniques that can be used in climate of openness and trust:
 - a. overhead questions and responses--general--no specific target or direction--"The Jones family situation is our first team discussion today. What can we say in back-ground and reveiw?" or "We need to discuss your job. Tell me about this past week." or "Tell me more."
 - b. probing questions--more pointed, more specific. "We need to discuss your job. How did you handle the Jones family assignment this past week?" or "How effective was the chore chart?"
 - c. reflective response (question) mirrors back the feelings, attitudes or content of someone else's statement. "You say you found the chore chart crumpled and unchecked." or "I see, then you feel the Jones family is not cooperating as much as expected." or "You feel too much is expected of you."
 - d. interpretive response (question) adds something to what has been said, attempting to clarify or add information. "It seems to me you might enjoy having team discussion of the Jones family more often, getting more alternatives to try." (A defensive attitude may occur and then the technique must be moved back around the circle toward development through overhead or probing.)
 - e. Supportive response-identification or agreement or support. "That has happened to me." or "I know how you feel." (There is danger of being misinterpreted as a value judgement which says, "You're right!" and remember value judgements are repressive.)
 - f. evaluative response-may be necessary in the last and final step but is inherently including a value judgement about a person. This kind of response is effective only in a stable atmosphere of openness and trust.

C. The Problem Solving Process--the path through the maze

1. Establishing objectives
2. Defining problems
3. Collecting information
4. Developing alternatives
5. Selecting alternatives
6. Implementation
7. Reviewing, evaluating and full circle

Definitions

Goal--where you want to be at sometime in the future
(e.g. Quality Homemaker-Home-Health Aide Service)

Objectives--stepping stones to accomplishing the goal

- (e.g. 1. Efficient supervision of H.H.H.A.'s
2. Competent H.H.H.A.'s
3. A team approach to delivery of services
4. etc.)

Problems--barriers or conditions standing in the way of accomplishing objectives

- (e.g. 1. personnel assigned to supervision not trained.
2. supervisory personnel overloaded in other assignments
3. supervisory personnel required to spend half of time in travel over large geographical area
4. etc.)

Information--facts, feelings, ideas bearing on problem

- (e.g. 1. Program begun in 1975
2. supervisory personnel new to H.H.H.A. program
3. Ten supervisory personnel have former supervisory experience.
4. Thirty supervisory personnel have no former supervisory experience.
5. Supervisory personnel express frustration with work overload.
6. Supervisory personnel asking for guidance in individual conferences with management team.
7. Staff development funds are available from central office.
8. etc.)

Alternative--various activities utilizing information to attack identified problem barring progress toward objective.

- (e.g. 1. Organize workshops conducted by experienced supervisors.
2. Bring in experienced H.H.H.A. supervisors from outside.
3. etc.)

Implementation--affecting the alternative selected

(e.g. Schedule workshop and designate assignment)

Reviewing, evaluating and full circle--returning: retracing the problem-solving process back through all the steps to the objective.

- Did we effectively attack or remove the problem?
Are we making progress toward accomplishing the objective?
Is the objective defensible?
Was the problem viable?
Did we have all the information?
etc.

WIN AS MUCH AS YOU CAN TALLY SHEET

Directions: For ten successive rounds you and your partner will choose either an "X" or a "Y". The "pay-off" for each round is dependent upon the pattern of choices made in your cluster. After each choice, complete round by stating choices in cluster without discussion.

4 X's:	Lose \$1.00 each
3 X's:	Win \$1.00 each
1 Y :	Lose \$3.00 each
2 X's:	Win \$2.00 each
2 Y's:	Lose \$2.00 each
1 X :	Win \$3.00 each
3 Y's:	Lose \$1.00 each
4 Y's:	Win \$1.00 each

Strategy: You are to confer with your partner on each round and make a joint decision. Before rounds 5, 8, and 10 you will confer with the other pairs in your cluster.

Round	Strategy		Choice	\$Won	\$Lost	\$Balance	
	Time Allowed	Confer with					
1	2 min.	partner					
2	1 min.	partner					
3	1 min.	partner					
4	1 min.	partner					
5	3 min.	cluster					Bonus: pay-off x3
	1 min.	partner					
6	1 min.	partner					
7	1 min.	partner					
8	3 1 mins.	cluster partner					Bonus: pay-off x5
9	1 min.	partner					
10	3 1 mins.	cluster partner					Bonus: pay-off x10

HOMEMAKER HOME HEALTH AIDE
CHARACTERISTICS OF QUALITY STRUCTURE
IOWA DEPARTMENT OF SOCIAL SERVICES
DISTRICT V - FORT DODGE

I. Assumptions

- A. District V desires a "quality" Homemaker Health Aide Service in each of it's 6 counties (in-house units and purchased by contract.)
- B. A "quality" service is defined by the Nat'l Council of Homemaker Home Health Aide Services and other concerned, appropriate agencies and professional organizations.
- C. Criteria as defined for "quality" service can be met by each of the six counties in District V.

II. Experience

- A. Homemaker Home Health Aide Service is a direct in-home delivery of services to people.
- B. Direct in-home delivery of services is unique among social/health services.
- C. The unique value of "quality" in in-home delivered services has the following characteristics:
 1. Close, comprehensive, trained supervision of in-home care delivery personnel (Homemaker Home Health Aides).
 2. Quality para-professional H.H.H.A.'s supervised with respect for and understanding of job expectations, employee differences and with motivational objectives of esprit de corps.
 3. H.H.H.A. personnel paid at a level commensurate to the "quality" service demanded of them and supervised with full consideration of fair labor standards and career ladder options.
 4. Agency employment practice executed with intent compatible to affirmative action in employment opportunities.
 5. Planning, organizational, motivational and controlling management processes of in-home care programming focused on and involving the client (recipient).
 6. Strong, pertinent orientation training: Supervisory personnel and delivery personnel.
 7. Continuous, quality, appropriate in-service training focused on the management processes applied to comprehensive in-home care programming.

Quality HHHA Service-2
Primus

8. A team approach with a core team of client, HHHA, supervisor, social worker, plus. (eg. Public Health Nurse, etc.)
9. Comprehensive, usable record-keeping and reporting systems with full consideration of reasonable confidentiality.
10. Community support of a justified and recognized need.
11. Continuous, flexibility of attitudes, plans, approaches, renewal reviews, team composition, communications, administration and delivery (at all levels and all involved autonomous agencies and specialists.)
12. Open, honest, compassionate communications among team members.
13. Understanding of all team roles, humility and shared accountability.
14. Continuous emphasis on client need for in-home care services.

Experience Resources:

National Council Homemaker Home Health Aide Services, Inc.

Child Welfare League

H.E.W. Community Health Division

Iowa Department of Social Services Manual of Operations

Cincinnati and Cleveland, Ohio Experiences

National Health Council

Washington, D.C. Council for Homemaker Home Health Aide Services

JOB EXPECTATIONS -- HOMEMAKER HOME HEALTH AIDE

1. Fulfill home assignments issued by homemaker supervisor with an attitude of enthusiasm, acceptance, and concern.
(Philosophy, justification and reasoning)
 - respects people as people with problems (as opposed to problem people).
 - is accepted by clients, to whom she is assigned, as a trustworthy, honest, and motivated helper.
 - is willing to try assignments that are involved with more than one family member
 - accepts assignments that involve more than one social problem.
 - accepts assignments that require involved inter-agency counselling.
 - relates training to assignments.
 - accepts extra substitution assignments for other team members.
 - exhibits patience, stability, compassion, sensitivity and tenacity in relationship with clients.
 - implements ingenuity, flexibility, and independence in assignments.
 - listens and implements the messages from the client and from the team.
2. Follow the orders in the homemaker unit client file issued by the social worker within the guidelines related by the homemaker supervisor. (P., J., and R.)
 - refers to the plan of service regularly.
 - implements orders which disagree with personal philosophy.
 - clears misunderstandings, questions, or expansions with social worker or homemaker supervisor before involving client.
 - refers expansion or change requests from client to social worker.
 - requests advice, counsel or example (for overcoming barriers listed, implied or discovered) from social worker and/or homemaker supervisor.
 - listens and implements the messages from the client and from the team.
 - Calls attention of homemaker supervisor to orders which are in conflict with personal value system or conscience, requesting change of orders or reassignment without rancor.
3. Follow the orders in the homemaker unit client case file issued by the public health nurse within the guidelines related by the homemaker supervisor. (P., J., and R.)
 - refers to the plan of service and nursing orders regularly.
 - implements orders which disagree with personal philosophy.
 - clears misunderstandings, questions or expansion with social worker, homemaker supervisor and public health nurse before involving client.
 - refers expansion or change requests from client to public health nurse and social worker and homemaker supervisor.
 - requests advice, counsel, example or demonstration (for overcoming barriers listen, implied or discovered) from social worker, public health nurse or homemaker supervisor.
 - listens and implements the messages from the client and from the team.
 - calls attention of homemaker supervisor to orders which are in conflict with personal value system, requesting change of orders or reassignment without rancor.

4. Report on client assignments weekly using recommended forms and during social worker and supervisor appointed conferences.
(P., J., and R.)
alert to needs of client, especially unspoked ones.
calls attention to barriers, possible undiscovered.
discusses short-time goals which are showing evidence of attainment.
relates to the team meeting as a client advocate.
accepts role on the team with humility, flexibility, respect, honesty, and trust.
listens and contributes to team communications.
5. Prepare and submit accurate reports of work and work related topics as recommended by homemaker supervisor.
(P., J., and R.)
submits narratives, schedules, statements of hours, 40-hour time check at times designated by homemaker supervisor.
alerts homemaker supervisor to requested vacation days in time for a substitution schedule to be arranged.
protects the agency delivery of service by accepting less desirable assignment of vacation days, if necessary, to avoid several absences in conflict.
confides honest reasons for sick leave and/or enforced leave to homemaker supervisor.
submits requested reports of in-service training.
maintains knowledge and implementation of applicable sections of the Iowa Dept. of Social Services Manual of Operations and the interpretations thereof.
6. Participate and follow through with in-service training recommendations by homemaker supervisor.
(P., J., and R.)
attends assigned in-service training sessions.
applies in-service training material to problems of job and client.
participates in individual in-service training assignments.
contributes requests for needed in-service training.
approaches in-service training leaders with respect.
participates in in-service training sessions with an attitude of potential for personal growth and development.
7. Contribute to the maintenance and improvement of the Iowa Dept. of Social Services H.H.H.A. Unit through publicity, public image, policy and interpretations thereof.
(P., J., and R.)
adheres to high standards of ethics and confidentiality.
refrains from gossip.
favorably discusses job in Iowa Dept of Social Services with public and public figures.
presents a well-groomed, clean, healthy personage on the job.
refrains from activity unacceptable to the mores and values of the client, while in the usual realm of the client's life.
protects the agency and the agency personnel from verbal attack by clients.
defends the agency in attack by general public, with diplomacy.
accepts extra or unusual assignments intended to support a "Quality" H.H.H.A. program in the Iowa Dept. of Social Services.

8. Know and operate within the table of organization currently operable for the Iowa Department of Social Services Homemaker Unit.

(P., J., and R.)

keeps homemaker supervisor informed.

is interested in personal performance of job description, expectations and evaluation; not in comparison to other worker's level of performance.

recognizes the roles of all team members.

avoids circumventing the established levels of supervision and/or administration.

refrains from office gossip.

accepts other workers as making an effort to do a good job.

Iowa Department of Social Services
Employee Performance Evaluation

Employee Name Jane M. Doe		Type of Evaluation <input type="checkbox"/> Probationary <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Promotional <input type="checkbox"/> Special	Date 3-1-76
Social Security No. 222-22-2222			Work Unit Homemaker Services
Class Title Homemaker CPA-II			Work Address Black Hawk County Social Services
Rating Period From: 2-1-75 To: 2-1-76			

SECTION A - Job Expectation	SECTION B Accomplishment					
	Satisfactory	Not Satisfactory	Marginal	Generally Satisfactory	Fully Satisfactory	Outstanding
<p>Provides service and support for clients to maintain them in their own homes or strengthen family life by assisting teaching, supervising, or performing any of the following functions as a part of an assigned caseplan:</p> <ul style="list-style-type: none"> Home maintainance and management Transportation Personal Care Health Care as prescribed and supervised Childcare and Environmental enrichment Nutrition, including special diets Money Management Emotional support Acts as a client advocate within the community Works as a helping person in a non-judgmental role <p>Provides current input to caseworkers and homemaker supervisor through narrative reporting and conferences.</p> <p>Follows direction from caseworkers and homemaker supervisor as to caseplan, scheduling, and client oriented decisions.</p> <p>Adheres to the policies set by Homemaker Service in reference to training, written reports, and scheduling.</p> <p>Assists in the Social Service office as scheduled by the homemaker supervisor.</p> <p>Is a positive representative of the Iowa Department of Social Services carrying out duties and responsibilities in the client's home and within the community.</p> <p>Is aware of and adheres to State policies concerning confidentiality, punctuality, and personal health and appearance as stated in the Employees Handbook of the Iowa Department of Social Services.</p>						

CHARACTERISTICS OF THE EFFECTIVE HOMEMAKER

The effective homemaker is/or:

- H**onest - admits mistakes and is not afraid to say I don't know.
- O**rganized - demonstrates mastery of schedule, routines, procedures, and orderliness.
- M**odels - teaches by being an example.
- E**nthusiastic - takes his/her work seriously because he/she is interested in the client.
- M**otivates - causes other to want to learn. He/She transmits skills and values not previously learned in the family.
- A**ccommodating - helpful to all the clients he/she serves.
- K**nowledgeable - knows how to effectively meet needs of client.
- E**fficient - does his/her work well without wasting time.
- R**espectful - respects the values, ideas, and mores of client.
- S**erves - services performed by the homemaker are specified in the caseplan.
- E**nterprising - willing to accept differences in standards and customs and shows an interest in adjusting to these variations in living patterns.
- R**eliable - does things for the client when they are to be done.
- V**ersatile - knows many skills and techniques of home management and other functional educational services.
- I**ndispensable - essential to his/her client's well-being for a temporary period of time.
- C**ourteous - uses common courtesies at all times. He/She remains calm throughout "storms" of insult.
- E**ducator - a teacher of home management and other educational skills to his/her clients, he/she does this by demonstration, assisting family members to continue or improve standards of nutrition, housekeeping, money management, child care, and self-care, thus contributing to family stability and order.
- S**upportive - helps individual and families maintain their own homes and satisfactorily meet their personal care needs.

Iowa Department of Social Services
H.H.H.A. Supervisor Training

WHAT DO EMPLOYEES WANT MOST FROM THEIR JOBS?

Of the following 10 items (all of which are important), list in the "My Rating" column, the items in order of importance to you as an employee. In "S" column list the items you feel are in order of importance to your subordinates (the H.H.H.A.'s you supervise.)

Items	My Rating	S	E
1. Help on personal problems			
2. Interesting work			
3. High wages			
4. Job Security			
5. Personal loyalty of supervisor			
6. Tactful disciplining			
7. Full appreciation of work done			
8. Feeling of belonging			
9. Good working conditions			
10. Promotion in the agency			

Iowa Department Social Services
H.H.H.A. Supervisor Training

CAUSES OF GRIEVANCES

Hastily prepared employee performance ratings
(verbal or written reports)

Issuing orders without expressed reasons.

Poor planning

Unfair handling of overtime.

Withholding credit when due.

Blaming workers unfairly.

Ignoring complaints.

Hardboiled attitude.

"High-hat" supervision.

Lack of interest in workers.

Bawling-out workers in presence of others.

Breaking promises.

Uncomfortable working conditions.

Unequal pay for equal service.

Poor instructions that lead to mistakes.

Use of threats.

Stealing credit for worker's ideas.

Ignoring or discouraging suggestions.

Unfriendly fellow workers.

Assigning men to jobs for which they are not suited.

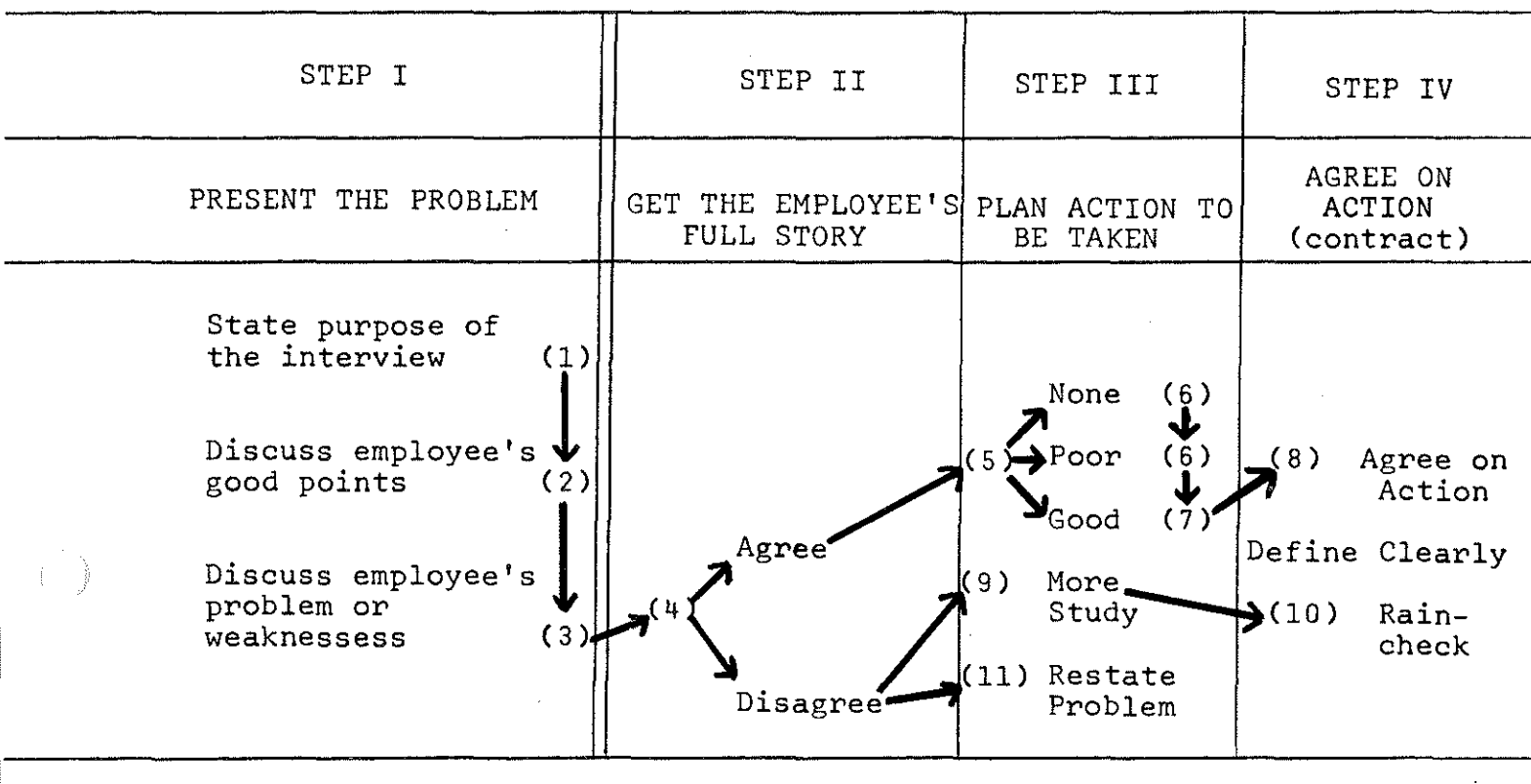
Too little work.

Favoritism or semblance of favoritism.

Two-faced attitude.

(Credit: Institute of Public Affairs, SUI, Iowa City, Ia)

THE CORRECTIVE INTERVIEW*



The phrases are numbered to correspond to the place on the chart:

- (1) I'd like to talk to you about your job-----
- (2) There are some things which you are doing well-----
- (3) It seems that you and I have a problem-----
- (4) Is this the way you see the problem-----
- (5) What do you suggest we do-----
- (6) Suppose we try-----
- (7) I'm sure you will work this out-----
- (8) We have agree to-----
- (9) I'm glad you explained that. It changes the picture---
- (10) I'll check on this and talk to you again-----
- (11) Yes, but there are these facts which need attention---

*From Dr. Viola C. Ames and Dr. Trudy Knox

Iowa Department of Social Services
H.H.H.A. Supervisors Training

HIGHLY MOTIVATED SUPERVISORS

A. Characteristics attributed by management:

1. Interpersonal competence
2. Has meaningful personal goals
3. Relates personal goals to organizational goals
4. Produces expected quantity and quality and fosters raising of expectations
5. Maintains costs reasonable to management
6. Implements personal vocational development for self and subordinates
7. Is management-minded (see Attitudes-C)
8. Exhibits leadership skills (see Attitudes-D, 9,9; Behavior-A, Develop; Behavior-B & C)
9. Possesses job knowledge

The highly motivated supervisor uses people to get work done by implementing planning, organizing, motivation, and controlling processes in the responsibilities of production, quality, costs, morale, training, methods, and safety.

B. Characteristics described by subordinates supervised:

1. Easy to talk to even under pressure.
2. Tries to see merit in my ideas even if I'm in conflict with management.
3. Tries to help employees understand agency's objectives.
4. Tries to give his people all the information they want.
5. Has consistent, high expectations of employees.
6. Tries to encourage people to develop and advance personally and reach out in new direction.
7. Takes employees mistakes in stride as long as they try to learn from them.
8. Tries to help employees correct mistakes and figure out how they can be prevented next time.
9. Gives credit where credit is due.
10. Helps employees feel like they belong and are important to the agency.
11. Listens to employees-even their personal problems and keeps the information confidential.

HOMEMAKER SERVICE SUPERVISOR

Homemaker Supervisor works independently in a separated assigned geographic area and is supervised administratively by the Family Service Specialist and the Adult Service Specialist with training and functional supervision from the State Homemaker Specialist. Is responsible for leadership and participation in activities in an assigned area, which may be one or more counties, for activities involved in progressively developing, implementing and accounting for direct services, as well as, community planning. Carries out policies developed by the Iowa Department of Social Services; maintains approved standards of service and develops training programs and guide materials. Cooperates with Division and county staff and other agencies to achieve the goals of the Homemaker and State programs; performs related duties. Represents the Homemaker Unit in planning meetings with other agencies, as needed.

Consults with Family and Adult Specialists, service workers, and professional staff of other agencies in development of comprehensive programs and contracted agreements.

Supervises the delivery of Homemaker Service to the client, evaluates the work of the Homemaker unit, reviews and compiles service and fiscal reporting.

Supervises and coordinate Homemaker Service in the home and counseling work related to the service plan for the welfare of the children and adults in the home. Supervise the Homemakers in providing in-home services to families in public assistance, non-public assistance, child welfare and social service related programs. Supervises Homemakers in stabilizing homes where one or more members are involved in complex treatment plans.

Orient Homemakers to the Social Service programs of the Iowa Department of Social Services. Provide orientation and in-service training for homemakers in conjunction with Staff Development.

Admin--Evaluates the need for Homemaker Services, accept referrals from in-take worker in each county.

Admin--Interview, screen, and employ all Homemakers in cooperation with the appointing authority and process all necessary forms according to Iowa Department of Social Services personnel practices.

Supervise billing, banking, and bookkeeping and all fiscal matters pertaining to Homemaker program.

Supervise lead Homemakers, Homemakers, and clerical staff attached to the Homemaker unit.

Attend and participate in training programs developed by Family and Adult Specialist, State Homemaker Specialist, and Staff Development

JOB DESCRIPTION OF HOMEMAKER SUPERVISOR

Jane D. Primus
Hamilton-Wright Counties

- 10% Coordination of team assessment of eligibility for service(Homemaker-Home Health Aide) - orders, assignments, reviews, evaluation visits, conferences.
- 5% Scheduling of Homemakers - continuous, substitutions and emergencies.
- 30% Counselling and supervision of Homemaker-Home Health Aides, Fair Labor Standards, personnel policies, National Council Guidelines, case files.
- 1% Interviewing, screening, employing and dismissing of Homemaker Personnel.
- 2% Records and reports - narratives, time and mileage, monthly resumes of homemaker client load, billings and collections.
- 1% Personnel files - activity reporting, evaluations, salary changes.
- 1% Expansion and improvement of in-home services - cooperation with State Consultant, pilot projects, reviews and comparison with other units.
- 24% Training of Homemakers - orientation, in-service, crisis, special needs.
- 1% Public relations, community organizations.
- 1% Utilization of community resources as related to Homemaker Services and informing of County Board of Supervisors.
- 2% Preparation and provision of supportive materials - medical charts, posters, educational and recreational material.
- 8% Coordination and cooperation of efforts - staffings, team discussions, research.
- 10% Travel - between counties, home visits, meetings, public relations and community.
- 4% Staff development and receiving supervision.

Iowa Dept. of Social Services
H.H.H.A. Supervisor Training

TWO HATS -- ONE HEAD

Case Supervision and H.H.H.A. Supervision

- I. Caseworker is responsible for formulating the total plan of care.
- II. H.H.H.A. Supervisor is responsible for helping the H.H.H.A. to implement the plan.

Case Supervision

Assessment

Service eligibility(Agency Policy)
Income Maintenance case file
Service case file
Present situation
Fee negotiation

Planning

Contract with client to try HHHA
Formal written request for service
Formal written plan for service
Plug into record and reporting system

Engagement

Set goals HHHA Service will try
to meet(with client)
Identify actions for HHHA and
for client and client family
Prepare to suggest methods of
approach and resources

Implementation

Deliver HHHA to client home on
initial visit(if social service)
Establish timetable for casework
re-enforcement and review

Evaluation

Casework extension
Signs of stress and changes
Maintain with client, understanding
of purpose of HHHA as a positive
relationship of strength, support
and progress toward a goal.
Participate in team meetings, narrative
and/or individual conferences with
HHA
Make decisions (in absence of HHHA
supervisor) on emergencies arising
in client assignment, for HHHA.

H.H.H.A. Supervision

Assessment

Suitability to HHHA Service
Feasability for HHHA Service
Availability for HHHA to
meet request

Planning

Schedule HHHA visits
Call and chair team meeting
including specialists
indicated by plan of service
Prepare HHHA for team meeting
Select HHHA best suited to
client and plan

Engagement

Solidify with HHHA,
understanding of cooperation
Discuss with HHHA, methods of
approach and resources
List with HHHA needed areas
of extra expertise or
in-service training
Ascertain training(orientation)
involvement for assignment
competence
Support HHHA in providing
methods of approach and
resources.

Implementation

Schedule initial contact visit
with HHHA and caseworker,
Medical personnel and/or
HHHA supervisor
Ascertain that initial visit
includes: introduction of
persons, clarification of
recipient and HHHA
responsibilities, schedules,
channels of communication.

Disengagement

Accept determination of the client or the team that goal is reached or that plan of action is unsatisfactory.

Return to planning and/or engagement stage as suggested by team.

Plug termination into record and reporting system if termination deemed most feasible by team.

Evaluation

Ascertain flow of information between HHHA and caseworker and other specialists involved. (Narratives)

Ascertain quality of and pertinence of narratives.

Schedule conferences with HHHA and other team individual on a regular basis.

Call and chair team meetings (core or expanded) as requested by any team member.

Schedule needed HHHA training for specific expertise.

Contact caseworker on emergencies in HHHA assignment for discussion of alternative actions.

Make decision or support decision made by HHHA on assignment for emergencies (with or without caseworker)

Maintain current HHHA client case files.

Summarize statements of services rendered.

Submit reports as required for quality program.

Financial Management

Contractual arrangements

Fee assessments

Disengagement (or Termination)

Call or chair core-team to ascertain continuance, change in plan, or termination.

Alert all team members prior to termination decision.

Conduct or request caseworker to conduct termination interview with recipient.

Conduct termination interview with HHHA.

H.H.H.A. Supervision Specifics

Personnel

Have input in the screening and hiring process (on HHHA's) including affirmative action and equal employment opportunities.

Be involved in an evaluation process focused on: personnel growth and development and delivery of quality in-home-care to clients.

Training

Exercise responsibility for comprehensive, competent, orientation training for HHHA's in preparation for assignment.

Plan and implement regular, competent, appropriate, continuous in-service training for HHHA's.

Ascertain the HHHA's knowledge of job expectations.

Community Relations

Interpretations of HHHA program to staff, allied agencies and the community, policymaking and/or funding boards.

Identify related programs needs and/or extended services.

Supportive of the HHHA

Schedule regular, supportive supervisory conferences for individual HHHA.

Provide specific motivation and opportunity for esprit de corps of HHHA's

Support opportunity for: growth and development essential to progress in a career ladder; personal advancement; promotion as appropriate; and continuing education.

Provide a climate of trust and respect for the individual HHHA which allows her to feel like a worthy, contributing member of a dedicated team providing a worthwhile service to needing people.

Expertise toward quality delivery

Sustain awareness of: community interactions and needs; client adjustments to social changes; National Council for HHHA Services efforts and recommendations.

Expand coordination of all community resources into use by HHHA Service.

Assist community leaders in establishing and maintaining needed quality allied services.

Continuously monitor and evaluate delivery of HHHA Services toward quality for needs of clients(spoken and unspoken).

Establish and implement processes which maintain community acceptance and respect for HHHA services.

INTERVIEWING TECHNIQUESThree Degrees of Listening

1. Hearing someone talk -without recognition of what is being said
2. Listening to someone talk -
 - hearing what is said
 - recognizing what is said
 - digesting what is said
3. Paying attention to someone when he talks -
 - listening - with all one's faculties
 - with one's whole personality
 - listening - with eye contact
 - with an open mind

Good Listening is not easy!

1. Effective listening takes energy -
 - involves hearing, understanding, remembering
2. Active listening means:
 - (a) refraining from talking
 - (b) accepting
 - (c) trying to understand
3. It is much harder to listen effectively than to talk.
 - (can talk without listening!)

Listening

Average person is not a good listener.

1. Feels impelled to point out other person's mistakes.
2. Wants to give advice about what "he would do."
3. Inclined to interrupt the speaker with his own thoughts on the subject.
4. Inclined to "block out" mentally following a point of disagreement.

We talk at the rate of 125 W.P.M. (average)

We think at the rate of 500 W.P.M. (average)

We must learn to utilize thinking time.

There are many kinds of oral communications that are not interviews.

USE OF QUESTIONS AND COMMENTS

1. Interview is a conversation
 - Not a questionnaire
 - Not an interrogation
2. The direct question and answer method
 - Elicits a large amount of information
 - in a short period of time.
 - But valuable information is often omitted
 - applicant gives only information requested.
3. Should have statements and comments -
 - as well as questions - to help applicant tell his story.

HOMEMAKER SERVICE PROGRESS

District V Program Specialist - Jane D. Primus

INTERVIEWING APPLICANTS FOR HOMEMAKER POSITION

- I. General Information:
 - A. On application form CW-1102 12/26/73, also use of Merit System Application yields information.
- II. References:
 - A. Telephone calls or personal discussion usually more productive than check sheet or written recommendation.
- III. Interview questions:
 - A. Listen, don't prompt.
 - B. Intend to yield evaluation of attitudes, values, ethics, and work habits, experience (numbers do not indicate importance nor order of use, but are for simple reference.)
 1. Why are you interested in being a Homemaker-Home Health Aide?
 2. What do you feel you can contribute to the _____ County HHHA unit?
 3. How many people out of the _____ people living in _____ County, do you feel need HHHA help?
 4. What does HHHA do?
 5. What kind of help do people most need?
 6. Have you discovered anyway in which you are manipulated by others?
 7. What do you do to unwind or relieve frustrations?
 8. What kinds of people or personalities do you have the most difficulty with?
 9. What was the happiest thing you can remember happening to you?
 10. How do you, or would you protect your free time (non-job time)?
 11. What is your pet peeve?
 12. How do you learn best (reading, observation, experience, etc.)?
 13. What was the saddest thing you can remember happening to you?
 14. What are some of your best qualities?
 15. How do you feel about working as a team, as opposed to working at a job assignment alone?
 16. How do you let people know you respect them even though you violently oppose what they are doing?
 17. Describe a situation in which you felt you helped a friend or relative cope with a problem.
 18. What is your favorite activity?

REQUEST FOR HOMEMAKER SERVICESerial No. 210306Program PADCaseworker Sam JonesService Code 124NAME Sigler, Sam Date Initiated 1-9-75 Soc. Sec.# 433-33-3333Address or directions to home 202 Elm, Waterloo Telephone 277-7777HOUSEHOLD: Name BirthdateFather Sam Sigler 1-1-08Mother divorcedChildren: 1. none 6. _____

2. _____ 7. _____

3. _____ 8. _____

4. _____ OTHERS: _____

5. _____

BRIEF SOCIAL OR MEDICAL HISTORY:

Had an accident several years ago that left him handicapped in legs. Last summer was in a car accident; broke foot and has been in Iowa City until recently. Lives alone. Has received alcoholic counseling in the past.

PLAN FOR SERVICE:

Visit at least three times per week. Cook meals, light cleaning, if necessary. Mostly companionship and support in dealing with handicap and alcoholism.

REASON FOR SERVICE: Family Rehab Sub for Parent Family Maint Chronic Ill X Acute Ill M & Child Care

DESCRIPTION OF HOME: (Utilities & Water & Appliances)

Lives in office with small living area in rear. Has stove,
refrigerator, heater, bathroom. No laundry facilities.

NAME & PHONE for emergency use: JANETTE BROWN, 277-5555FAMILY DOCTOR: Dr. WallsPAYMENT FOR SERVICES: Full Fee Part Fee None XREFERRED BY: Sue Smith, Public Health Nurse DATE 1-9-75

State of Iowa
 Department of Social Services
 Des Moines

PLAN FOR HOMEMAKER SERVICE

HOMEMAKER Mary Martin.....DATE 1-9-75.....
 HOME Sam Sigler.....ADDRESS 202 Elm. St., Waterloo.....
 DATE TO ENTER HOME 1-10-75.....WITH Sue Smith, Public Health Nurse
 SCHEDULE Monday - Thursday 10:45 - 12:00

.....
 CASEWORKER'S GENERAL ASSIGNMENT OF GOALS FOR SERVICE: Maintain Mr. Sigler in his home by cooking at least one meal per day (some days he may prefer to do this himself.) Light housekeeping. Active listening. Encourage him to refrain from drinking.

RESUME OF BARRIERS TO GOALS:

Sam was left handicapped after an accident a couple years ago. Last summer he was in an auto accident, due to drinking, in which he broke his foot. Before this he was seeing First Step for counselling. He lives alone and it is important that he maintain contact with someone from the community. This is for his safety and emotional well-being.

CASEWORKER'S SPECIFIC ACTION ASSIGNMENT TO HOMEMAKER:

FOOD MANAGEMENT: One good meal per day would be beneficial. May be able to add this after you have his confidence.

HOME MANAGEMENT:

Light housekeeping, probably once or twice a week.

FINANCIAL MANAGEMENT:

HUMAN RELATIONS: Active listening. Support in dealing with his handicap and his alcoholism. He may hide his feelings, often acts optimistic when he
 CHILD CARE: really is not. You will have to pick up on this.

PERSONAL CARE:

ILLNESS OR REHAB: Assistance in walking with a walker under the supervision of Public Health Nurse.

OTHER:

HOMEMAKER SUPERVISOR'S COMMENTS:

State of Iowa
Department of Social Services
Des Moines

RENEWAL OR CHANGE FOR PLAN OF HOMEMAKER SERVICES

SERIAL NO. 210306
PROGRAM PAD
SERVICE CODE 124
NAME Sam Sigler
ADDRESS 202 Elm Street, Waterloo
SERVICE HOURS NOW IN FORCE:
CASEWORKER Sam Jones
DATE 2-2-75
LAST RENEWAL DATE 1-9-75
DATE INITIATED 1-9-75
SOCIAL SECURITY NO. 433-33-3333
TELEPHONE 277-7777

Monday - Thursday 10:45-12:00

CONTINUE PRESENT PLAN OF SERVICE

OR

CHANGE OF PLAN FOR SERVICE:

Monday, Wednesday, and Friday: Laundry, light housekeeping, meals.

REASON FOR CHANGE OF PLANS:

Client is progressing slowly. Amendable to better nutrition and socialization

CHANGED REASON FOR SERVICE: FAMILY REHAB SUB FOR PARENT FAMILY MAINT
ACUTE ILL CHRONIC ILL ☒ M & CHILD CARE

EMERGENCY NAME Janette Brown TELEPHONE 277-5555

FAMILY DOCTOR Dr. Walls

PAYMENT FOR SERVICES: FULL FEE PART FEE NONE ☒

CHANGE REQUESTED BY Sue Smith APPROVED Homemaker Supervisor
and Caseworker

DATE 2-2-75 HOMEMAKER SUPERVISOR Jean Anderson

HOME HEALTH AIDE INSTRUCTION AND NOTES

Patient's Name Sam Sigler Address 202 Elm, WaterlooAide Assigned Sue Smith Date 2-2-75Work Days Monday-Friday Hours _____

(check) _____ Date _____

Nursing Procedures

Assist patient walking with walker - hold onto belt around waist at all times. Encourage patient to elevate feet for 10-15 minutes as demonstrated.

Meals - Diet:Other

Report unusual behavior such as slurred speech, unusual grogginess, etc.

Nurses Instructions:

Home Health Aides observations and comments:

Date:

Home Health Aide

Public Health Nurse

ate 1-10-75

PLAN FOR HOMEMAKER SERVICES

Homemaker: Mary Martin
Caseworker: Sam Jones

Office Number: 277-2222

PURPOSE OF HOMEMAKER SERVICE:

Maintain Mr. Sigler in his home. Provide support in dealing with handicap and alcoholism. Light housekeeping once or twice a week.

SCHEDULE OF HOURS:

Monday through Thursday, 10:45 - 12:00

SUGGESTED OR SPECIFIC PLAN TO INCLUDE ITEMS CHECKED:

ASSISTANCE IN:

- ☐ Organizing Household
- ☐ Laundry
- ☒ Cleaning House
- ☐ Grocery Shopping
- ☐ Meal Planning
- ☐ Child Care
- ☐ Cooking and Baking
- ☒ Visiting; Active Listening
and companionship
- ☒ Walking with walker, under
supervision of health nurse

TRAINING IN:

- ☐ Organizing Household
- ☐ Laundry
- ☐ Cleaning House
- ☐ Grocery Shopping
- ☐ Meal Planning
- ☐ Child Care
- ☐ Cooking and Baking
- ☐ Mending and sewing
- ☐ Family Budgeting

I have been involved in the planning for the Homemaker Services and realize that the carrying out of the plan involves working with my caseworker and the homemaker.

Sam Sigler
Client's Signature

RECORDS AND REPORTING

A. Methods of Reporting Used by the Homemaker-Health Aide Are:

1. Structured Conferences with homemaker and professional staff, caseworker, nurse and others on a one-one basis. Occasionally, homemakers may be included in meetings when all professional staff evaluate the progress of the family.
2. Narrative Reporting provides the visit to visit progress or regression of the individual or parents and children for the caseworker and nurse. It should assist the caseworker, the nurse and the homemaker director to better understand the needs of the family. If it is necessary to change the homemaker, the record is a resource for the new homemaker's information. Likewise, the recording could be of value to a new caseworker or nurse. Recently: family evicted from their home. Homemaker helped them find another house. Next day, the family had moved again.

B. What to Report?

1. The obvious:
 - Mother returns or is admitted to the hospital unexpectedly.
 - Father loses his job or doesn't go to work.
 - Children are ill or are not going to school.
 - No one is at home or no one answers the door.
 - An accident in the home.
 - Mother who sleeps an undue amount.
 - Excessive drinking.
 - A child who has temper tantrums.
 - Serious shortages of food or clothing.
 - Appearance of the home.
2. Less obvious:
 - Social life of family and friends.
 - Frequency and serious disagreements among the family members.
 - A child who stutters.
 - A hyper-active child.
 - Accomplishments of a handicapped or elderly person.
 - General health of the family.
 - How well does the family manage time and money.

C. Essentials for an Accurate Report:

1. You, the homemaker must understand why she is needed by the family.

Goals.

Short term.

Long range.
2. Your observations should be fair and unbiased as possible.
3. You must "listen."
To the response of a child and/or adult when a suggestion is made. Conversation when bathing a patient or helping a mother mend or sew.

HOMEMAKER REPORTS

1. Any deviations from the factual information.
2. Observations.
3. Requests made by clients; reasonable requests.
4. "Hearsay" information.

Assess social climate in the home.

Feelings - individuals
Attitudes

Did you observe any significant changes in the family situation?

State of Iowa
Department of Social Services
Des Moines

HOMEMAKER - HEALTH AIDE DAILY WORK SHEET

Black Hawk COUNTY

Client Sam Sigler
Date 2-5-75
Homemaker Mary Martin
Caseworker Sam Jones

HOURS	SERVICE GIVEN	REMARKS
10:45 - 12:00 March 3	Active Listening	Sam was tired looking and acted rather depressed. He didn't let any feelings out.
10:45 - 11:30 March 4	General cleaning and active listening	Sam was very repetitive about everything. His speech seemed slurred. I have reported this to Romain Adams of First Step Counselling.
10:45 - 11:00 March 5		I went to see Sam, but he was laying in bed. He didn't get up and said he didn't want me to cook or do anything
10:30 - 11:15 March 6	General cleaning, active listening, and ran errands	Sam was up and dressed. He said he felt better because he said he had been sick the day before.

State of Iowa
Department of Social Services
Des Moines

STATEMENT OF SERVICES RENDERED

Client or Family Name

Address

Indicate date and hours worked:

Date: 1 2 3 4 5 6 7

8 9 10 11 12 13 14

15 16 17 18 19 20 21

22 23 24 25 26 27 28

29 30 31 Total Hours _____

MONTH: _____

YEAR: _____

HOMEMAKER: _____

District V - Homemaker Service Program
Jane D. Primus - Program Specialist

Potential Resources for In-Service Training of Homemakers

- I. Statements of Philosophy Influencing Training Plans
 - A. Intent of in-service training is to supplement orientation training.
 - B. Client loads present different in-service training needs; (e.g.) % rural vs. % urban; % elderly vs. % families with children; % chronically ill vs. % family rehabilitation vs. % adult maintenance.
 - C. Staff members' philosophies and experiences differ.
 - D. Trainer availabilities are widely variant.
- II. General Purposes of In-Service Training
 - A. Esprit de corps.
 - B. To build respect for the H.H.H.A. position; as a para-professional, in the individual HHHA, the other team members, the clients, the general public.
 - C. Content as needed toward work-oriented problems.
 - D. To provide evaluation tools.
 - E. To provide foundation for career ladders.
 - F. To provide staff development toward career ladders.
 - G. To broaden the outlook of the HHHA beyond the job (which is frequently necessarily mundane and crisis intervention oriented).
- III. Individual Methods of Approach to In-Service Training
 - A. Reading lists related to general purposes.
 - B. Community adult education courses (Community College and/or High School).
 - C. ISU Extension Service adult programs.
 - D. Community Service agency programs.
 - E. Community involvement.
 - F. Periodicals.
 - G. TV specials and educational stations.
 - H. Suggested experiences list (see addendum).

. Multi-Individual Approaches to In-Service Training

- A. Staffings.
- B. Professional conferencing (SW, PHN, others).
- C. Community specialists.
- D. Tours -
 - Day Care centers
 - Pre-school nurseries
 - Nursing homes
 - Custodial homes
 - Specialized help centers (Mental Health, Handicapped, Sheltered Workshops, Senior Citizens, etc.)
 - Incarceration - rehabilitation centers (Jail, police station, court, training schools, hospitals.)
- E. Reports from conferences and conventions.
- F. Discussions with IDSS District Program Specialist and/or IDSS Central Office unit director.

. Multi-County Approaches to In-Service Training

- A. Presentation by staff representatives of allied service agencies.
 - 1. USEA - Food Stamps
 - 2. Social Security Administration - SSI
 - 3. Iowa Employment Security Commission - WIN
 - 4. MOW and/or congregate meals
 - 5. Manpower - CETA and PEP
 - 6. Senior Citizens and/or Area Agency on Aging
 - 7. Soldiers Relife and/or Veterans Administration
 - 8. Vocational Rehabilitation
 - 9. Red Cross, Salvation Army and/or other (United Fund or United Way recipients).
 - 10. Probation officers and/or Educational liason personnel (truant officers).
 - 11. Group homes
- B. Tours - specialized care, incarceration or rehabilitation centers (see list IV-D and expand).
- C. Speakers - specialists, panels, symposiums.

D. Films, viode-tapes.

E. Discussion sessions

F. Workshops

VI. Some Subject Matter Topic Suggestions

Mental Health

Consumer Education

Money management - budgeting, credit

Art of Human Relations

Value systems and clarifications

Therapeutic recreation for Elderly

Creative recreation for children

Changing Family Structures

Hazards in the Home

Home Management and Housekeeping

Time Management - Talent vs. energy vs. income

Resources Management (3M's - Mind, muscle, money)

Physical Therapy in the home

Child Guidance - Personality Potential and Parent Effectiveness

Personal rights: Priveledge and responsibility - Child or Adult

Energy Management - devices, climates, arrangements

Family Planning

Family Finances - taxes, home ownership, long range goals, estates

VII. Some Trainer Suggestions

ISU Extension Service Personnel

Community College Personnel - High School teachers

IDSS District Program Specialist

Special discipline personnel (doctors, lawyers, Home Economics teachers, nurses
administrators of agencies or programs)

Retired special discipline personnel

Allied Agency personnel

Service organizations and clubs (past program books sometimes indicate volunteer
personnel with talent and/or training)

BLACK HAWK COUNTY HOMEMAKER IN-SERVICE TRAINING SESSIONS

Please check all training sessions you have participated in.

<u>DATE</u>	<u>SPEAKER & TITLE</u>	<u>SUBJECT</u>	<u>LOCATION</u>
_10-23-74	Dave Natvig-Sally Cross,IA DSS Adop & Foster Care Spec.	"Working with the Retarded Child"	Area Office
_11-06-74	UNI Student Panel	"Nutrition"	Conference Rm
_11-20-74	UNI Student Panel	"Child Developmt"	Conference Rm
_12-04-74	Noni England-Exp. Nutrition Home Ec & Ext. Food Aides	"Using Supplmtl Foods"	Conference Rm
_12-18-75	Brooks Rector-BHCo Ext. Home Ec	"Simple Home Repairs"	Dinner Bell
_01-08-75	Tom O'Rourke, BHCo V.D. Spec.	"V.D. Control"	Conference Rm
_02-05-75	Homemakers Role Playing	"Attitudes & Values"	Conference Rm
_02-19-75	Marion Coney, BHCo SS Medical Supervisor	"Title 19-- Medical Coverage"	Conference Rm
_30-05-75	Pam Sheldahl, Allen Hosp SW	"I'm OK; You're OK"	Bd of Rltrs
_03-19-75	Delores Daniels, RN(VNA)	"Strokes & Heart Attks"	Sweden Hs
_04-02-75	Dorothy Haugebak, BHCo Homemaker Supervisor	"Managemt by Objectvs" & HHHA Anniversary Coffee	Conference Rm
_04-16-75	Elsie Christensen, Dir. of Public Relations	"Goodwill Industries"	Confer. Rm
_04-30-75	Dr. David Castle, Prof. Wm Penn College, Oskaloa	"Value Clarification & Communication"	District Mtg at Waverly
_05-14-75	Sue Frank, Volunteer Coord. for Court Services	"Adult Probation"	Logandale Mtg Rm
_05-28-75	Brooks Rector, BHCo Home Ec	"Clothes for Handicped"	Conf. Rm
_06-11-75	Leota Wheeler-Helen Zellhoefer & Dr. Tom McGarvy-Am Cancer Soc.	"Detecting Breast Cancer"	Bd of Rltrs
_06-25-75	Bonnie Burlage, RN-HIT Instructr	"Mtg Home Emergencs"	Conf Rm
	Florence Stone,RN-Psych Nurse	"Effective Parenting"	Bd Rltrs
RCLE DATES ATTENDED: 7-2, 7-9, 7-16, 7-23, 7-30, 8-6, 8-13, 8-20, 8-27			
_09-03-75	D. Haugebak, HHHA Supervisor	"Nutrition Studies"	Bd of Rltrs
_09-17-75	Helen Lippold, Occup. Therpst-St. Francis Hosp.	"Reality & Remotivation for the Elderly"	Dist. Mtg at St. Franc.
_09-24-75	Nancy Meridith,ISU Ext. Specialist	"Single Parent Families"	Crossroads Bank Mtg Rm

BLACK HAWK COUNTY PRE-SERVICE TRAINING EVALUATION

Session: September 9 - September 20, 1974

- A. Give your over all impression of the training:
- B. Give suggestions for improving physical set-up of training:
- C. Please comment on each of the following sessions:
 - 1. "Role of Homemaker-Health Aide" - Geneva Hawk
 - 2. "Role of the Service Worker" - Geneva Hawk
 - 3. "Ethics and Confidentiality" - Geneva Hawk
 - 4. Tour of Black Hawk County Health Center - Pat Bowsby
 - 5. "Motivating the Young Child" - Kathy Callen
 - 6. "Supplementary Security Income" - Very Meyer
 - 7. "Drugs" - Detective Sergeant Carlton Dyke
 - 8. "Alcoholism" - Jack Springer

PLEASE COMPLETE THESE STATEMENTS:

1. For In-Service Training I would like to know more about
2. It would be helpful to make changes in
3. I would like my Supervisor to
4. I am satisfied with the following area of my work:

NAME

HOMEMAKER-HOME HEALTH AIDE PROFILE

Complete at least every six months.

HHHA Name _____ Telephone _____

Address _____ Initial Employment Date _____

Last Profile Date _____ Profile Reviewer _____
(signature)

After reviewing the job expectations upon which the HHHA is being supported, we mutually feel that this employee does well in the following:

I feel this HHHA needs training in the following to help better fulfill some job expectations:

This HHHA would like someone to give support or assistance in the following:

This HHHA is satisfied with following areas of work:

Other comments:

Summary: (Based on assumptions, theories, personality, attitudes and experiences and environments of these trainers.)

The humanistic Homemaker Home Health Aide Supervisor views the H.H.H.A.'s as human beings rather than an economic or technological unit.

The humanistic supervisor is often more efficient.

People are the core of direct delivery services and no amount of "scientific supervision" will improve results without consideration of this elemental component.

The application of "scientific supervision" is necessary to the increasing volume and complexity of information: use of analytical methods, the computer, record system, and decision-making techniques.

The highly motivated supervisor, who derives and fosters personal satisfactions in the total of human components involved in direct delivery services (i.e. H.H.H.A. Services) find a path through the maze of conflict, continuous change, progressively complex influences between problem and goal.

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