The Supervisor’s Manual

Reinforcing better case management through enhanced standards.

version 1.1

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Case Coordination/Conferencing ............................18

Case Coordination ......................................................18

Case Conferencing......................................................18

Case Conferencing with Homeless Solutions

Staff................................................................................19

Training ..........................................................................20

Corrective Action ..........................................................21

Documenting Performance Problems/

Discipline ........................................................................24

In Conclusion: .............................................................26

APPENDIX

Performance Types and Targets: .........................30

Front Door ......................................................................32

Pathways to Supportive Housing............................34

Permanent Supportive Housing .............................36

CoC System....................................................................38
1. INTRODUCTION

In June 2006, the Homeless Solutions Leadership team adopted the Homeless Solutions Community 10-Year Plan: A Blueprint for Ending Chronic Homelessness. In order to succeed in ending chronic homelessness and reducing overall homelessness, quality housing focused case management must be provided at every program. In 2012, a dedicated group of homeless providers, and community representatives came together to create a guide for minimum case management standards. With the leadership of Katherine Rowell, Professor of Sociology at Sinclair Community College, staff from Daybreak, Homefull, Red Cross, YWCA, the Honorable Judge Walter Rice, and Nancy Schiffer, the case management manual was created. In September 2013, a manual “Case Management: Guidelines, Roles, and Responsibilities for Housing Focused Case Management and Collaboration with Community Providers,” was presented to providers establishing minimum housing focused case management standards. In order to provide quality housing focused case management, effective case management supervision is key.

Effective housing focused case management is essential to helping people in a housing crisis achieve and maintain stable permanent housing. Housing focused case managers provide a blend of assessment and coordination of services. They possess in-depth knowledge of community resources and housing, mixed with genuine empathy and respect for families and individuals seeking their assistance. It is the responsibility of the Supervisor to provide the necessary tools needed to empower staff to provide housing focused services.
The Supervisor’s Manual is not a reference or guide on how a supervisor should thoroughly and completely manage and direct case managers, but rather a minimum standard for agencies.

This guide is not meant to replace agency policies and procedures; it is a guide for supervisors to reference and aid with their responsibilities as they direct and oversee case management activities and provide housing focused case management. Effective supervision is essential to maintaining high quality client focused housing case management.

2. SUPERVISION

A. ROLE OF A SUPERVISOR

A supervisor is an agency administrative staff member who has the authority to direct, coordinate, enhance, and evaluate the job performance of staff whose work he or she is held accountable. The supervisor’s ultimate objective is to assist case managers in delivering housing focused case management to clients while providing the best possible service, both quantitatively and qualitatively, in accordance with agency policies and procedures (Kadushin & Harkness, 2002). In implementing this responsibility, the supervisor performs administrative, educative and supportive functions in interaction with staff to establish a positive relationship.

Three Roles of a Supervisor:

As a supervisor, you will need to perform an Administrative, Educative, and Supportive role.
The supervisor has an **Administrative** role to ensure correct, effective and appropriate implementation of agency policies and procedures. A supervisor assists case managers in daily client interaction; assists with developing case plans; assesses clients who are not making progress; and the day to day functions of a case manager. Responsibilities include:

- **Evaluate work performance.**
- **Monitor client progress and process towards housing focused case management and meeting case goals and objectives.**
- **Establish time management.**
- **Review client charts for quality case notes, case plans, and required documentation.**
- **Provide regular space for staff to reflect upon the content and process of their work and provide feedback.**
- **Advocate for clients within their own system (partners in programs) as well as with outside systems (other homeless providers/outside vendors).**
- **Ensure quality of work.**
- **Monitor overall program outcomes established for the program based on HMIS documentation.**

The supervisor provides **Education** and information and focuses on staff development and training needed to perform their jobs more effectively and develop professionally. Responsibilities include:

- **Orient new workers/mentoring.**
- **Assess the learning needs and preferred learning style of staff.**
- **Build on the existing knowledge and skill base of the workers.**
- **Develop learning plans with staff and monitor implementation.**
- **Promote independence.**
- **Conduct individual and group supervision.**
- **Support and facilitate professional development.**
- **Develop understanding and skills within the work place and receive information and another perspective concerning one’s work.**
- **Plan and utilize their personal and professional resources.**
• Educate about intra agency resources and community resources and how to access them.
• Be pro-active rather than re-active.

Ethical responsibility is another form of education to enhance the quality of supervision and ethical decisions. Reasons why ethical education should occur in supervision are:

• To ensure staff is familiar with dual relationship boundary issues, documentation, consultation, referral, and termination of services.
• To discuss the steps that staff should take if they encounter a difficult ethical decision- and when and how to seek supervision.
• To ensure that staff are acquainted with ethics- related regulations, guidelines, laws, agency policies, state and federal laws governing the release of confidential information, agency policy concerning informed consent and the client’s right to inspect his/her records, and licensing regulations concerning reporting ethical misconduct by colleagues.

The supervisor provides a Supportive role and focuses on improvement of morale and job satisfaction. Responsibilities include:

• Provide a positive work environment.
• Help staff manage tension and handle conflict.
• Promote cultural and self- awareness.
• Convey an understanding of the challenges faced by staff.
• Support the worker’s process in ethical decision-making.
• Validate the worker’s attempts to use new skills.
• Ensure that one worker is not left to carry unnecessary difficulties and problems alone.

B. ASSIGNING CASE LOADS
Assigning caseloads is an important and complicated part of supervision. Balancing caseloads can provide staff with opportunities to see more immediate success as well as grapple with more complicated
needs. Caseloads should be reviewed weekly to make sure that one person is not overwhelmed with case load size. Though case load assignment should be made following agency policy, ways to look at case load assignment can include:

- Matching clients to staff with specific expertise while recognizing each staff member’s need for professional development.
- Balancing between new arrivals and longer term clients. Typically the first three months of case management is the most intensive.
- Balancing caseloads between the more complicated conditions and clients with lower needs or who are connected to treatment and support.
- Distributing clients equally among staff based on new arrivals, level of need of the client, etc.

C. TIPS FOR BEING A GOOD SUPERVISOR

From better productivity to higher morale, it is in everyone’s best interest for their supervisor to be a good one. If you’re willing to make an honest assessment of your own strengths and weaknesses, you will be better equipped to do the same for your staff. Ten things you can do to be a better supervisor are:

1) **Make Expectations Clear.** Make sure staff knows exactly what you want from them on every project.

2) **Make Expectations Reasonable.** Give reasonable expectations. Don’t give people tasks that are doomed to fail. Do not blame staff for things that are not reasonable or out of their control.

3) **Correct Mistakes.** When someone makes a mistake, let them know. This gives them an opportunity to correct it rather than making the same mistake again. Correcting mistakes does not mean you are being a bully. Rather, it means you’re giving them a chance to succeed and improve skills and knowledge.

4) **Communicate.** When you’re in a position of authority that allows you to see the big picture, it can be easy to forget that not everyone has the benefit of your bird’s eye view. Communicate frequently with staff about future plans, projects and goals. Make sure to com-
municate both the positive and the negative. Too often, supervisors get caught up in criticizing rather than praising, so avoid this common mistake.

5) **Criticize Constructively.** Criticism can be beneficial to a person’s job performance, but not if they feel like they’re being torn down as a human being. Rather than questioning a person’s dedication or competence, give specific instructions about what they can do differently. Lead by example—recognize and encourage finding alternative ways to achieve the objective.

6) **Offer Meaningful Praise.** One of the most important things a supervisor does is offer praise when someone does something right. Aim to praise everyone at least twice as often as you criticize them. Even staff that are slacking off or not performing well can benefit from regular praise. When people feel good about themselves they tend to do a better job.

7) **Accept Criticism.** The most critical difference between a good supervisor and a great supervisor is that a great supervisor is willing to accept constructive criticism. Ask your staff what you could do better as a supervisor, and be willing to listen to their concerns.

8) **Don’t Engage in Office Gossip.** Every office has its own politics, with in groups, out groups, and cliques. Don’t get embroiled in these cliques. Treat each staff person equally, and don’t judge performance based upon how much you or someone else likes a particular staff member.

9) **Don’t Be a Pushover.** It’s true that some of the worst supervisors are just blatantly mean, but being a pushover can be equally problematic. If you are afraid of confrontation, your staff doesn’t have a chance to get meaningful feedback and improve their jobs. Work to straddle the line between being a pushover and a bully, and instead be assertive but kind. Your staff will be grateful for your combination of assertiveness and friendliness.

10) **Treat Employees Like People.** You should not be overly involved in your employee’s personal lives in most cases, but that doesn’t mean it’s not a good idea to invest in them as people.
Make small talk and convey a sense of genuine care for them as people. Remembering birthdays, offering condolences when someone dies, and creating a team environment can lead to a substantially better working environment.

Encouragement is a necessary part of supervision.

~Thomas J. Watson

**D. CLINICAL SUPERVISION**

Because not all agencies have clinical supervisors, it is important to know the difference in skill sets that a Clinical Supervisor provides. It is recommended that agencies contract for Clinical Supervision if this is not available to the organization.

A clinical supervisor is licensed to independently provide services. The goal of clinical supervision is to continuously improve quality client care. Supervision by a trained and qualified clinical supervisor helps staff understand and respond more effectively to all types of clinical situations and prevent clinical crisis from escalating. It specifically addresses assessment and diagnosis, crisis management, treatment strategies, and discharge planning. Clinical supervision aids in addressing unique needs of each client. It provides a mechanism to ensure that clinical directives are followed and facilitates the implementation and improvement of evidence-based models.

The Supervisor and Clinical Supervisor work as a team to determine appropriate housing focused case management. While the Supervisor provides appropriate support needed to maintain policies and procedures and work with staff on housing focused case management; Clinical Supervision is a reflective process and includes elements of professional support, quality, and development.
Specific ways a Clinical Supervisor can assist case management in housing focused model are:

- Verify disability to enable a client to be added to the Permanent Supportive Housing (PSH) wait list.
- Perform diagnostic assessments.
- Determine when a level of care change is necessary based on behaviors of clients.
- Conduct training on Evidence Based Practice and other clinical topics.
- Provide guidance on engaging and serving hard to serve clients.
- Assist staff when a client is decompensating and may need additional clinical care.
- Provide therapy.
- Walk staff through crisis.
- Assure staff availability 24/7.

3. CHART REVIEW AND DOCUMENTATION

A major function of a supervisor is review of charts/client record and documentation. Documentation is an important tool that verifies services provided for or on behalf of a client. Charts/client records are important because they can:

- Be legally requested
- Be client requested
- Assist in continuity of care
- Be evidence of services for funding

Some agencies have electronic files ONLY. For agencies who only use electronic version, the information in this section should still be available for review. Agencies should have a cross walk to assist staff and funders on where to locate required information. When the term chart
review is used in this section, it also applies to electronic review of information.

Charts should be organized to easily find required documents. Each section should have the newest information on top. Having an organized chart will facilitate responding to a crisis, and ensure all immediate issues are addressed. Having a chart order will assist staff in organizing work as well as make it easy to find documentation when needed.

Chart reviews should occur monthly with charts pulled from each case manager every month. Funding and program requirements dictate minimum standard for chart review. For every chart that does not meet agency requirements, another chart should be reviewed. This will allow the supervisor to see if it is a onetime error, or a consistent issue with the staff person. Chart reviews should be documented by the supervisor, reviewed with the case manager, and then corrections provided, if necessary, with signed verification from staff. Chart reviews should be readily available when needed for annual performance. Every chart should contain:

- Case notes
- Case plans
- Releases of Information
- Program Rules and Responsibility
- Front Door Assessment
- Verification of homelessness or at risk of homelessness
- Services and assistance received
- Referrals made to other providers/programs with verification that the referral was achieved or not achieved.
- Housing Inspections if applicable
- Client ID and child documentation- or proof of request if applicable
- Verification of income if applicable
- Lease if applicable
- Other assessments such as mental health, AoD, etc. if applicable
A. DOCUMENTING CHART REVIEW
At a minimum, there must be verification of chart review. Ways to verify chart reviews could include:

- Review and sign off on case plans
- Review case notes and sign off
- Have a chart review form for each case manager with a supervisor and case manager signature.

For agencies that are electronic version only, documenting chart review should follow agency standards with evidence that electronic records are being reviewed.

B. CASE NOTES
Case notes document services provided to the client or on behalf of the client. The rule being, if it isn’t written in a case note, it didn’t happen. Content of case notes should reflect the client’s case plan and content should match billable time. Case notes should be written at a minimum within 48 hours of the appointment or advocacy. If there is a Major Unusual Incident (MUI) case notes should be written within 24 hours of the incident. (In the event of a MUI, it is suggested that the supervisor inform agency CEO.) Case notes should:

- Be objective, not suggestive, and be professional, not personal.
- Not contain slang or logos.
- Be written in black or blue ink (not red, purple, etc.). If electronic version, standard font should be used.
- Summarize what the case manager did and observed; what the client did/said; and next steps.
- Document final exit destination of client with verification if applicable i.e. lease.
- Document all contact and time spent with or on behalf of the client and date of service. Note: No Show’s for appointments should be written, with action steps the case manager took to reach the client.
• Assess progress in goals identified.
• Be legible and spelling correct.
• Have the name of the person served.
• Signature, name, and credentials if applicable, of the person writing the case note.

C. COMPREHENSIVE CASE PLANS
Case plans should reflect the client’s goals. At the first case management appointment, the Front Door Assessment should be reviewed with the client. It will allow staff to confirm information given, or discover new information. This will allow for the case manager to establish goals and change them when they are completed or abandoned. At a minimum, case plans should be updated and/or reviewed **every 30 days**. For programs with a shorter length of stay, case plans should be updated more frequently or updated per specific agency policy. Progress towards goals should be seen in case notes. If there is no progress seen, the client should be reviewed in individual or group supervision.

As reviewed in the Case Management Manual, case plans should be developed using the SMARTS approach. A supervisor can utilize SMARTS to review case plans and goals based on the following:

• **Specific**- Is the case plan specific to what the person wants?
• **Measurable**- Is the case plan measurable?
• **Achievable**- Can the goal be achieved?
• **Realistic**- Is the goal realistic to be achieved?
• **Time Framed**- Is there a specific timeframe for completion of goals?
Strength-based - Are the clients strengths and resources used to develop the plan?

4. SUPERVISION

In-depth discussion of clients in programs, whether group or individual supervision, is the single most important function of a supervisor. During this process, the supervisor works with staff in exercising decision making skills, evaluating work performance, promoting staff development, developing staff knowledge of resources, problem solving for specific client issues, and providing encouragement to staff. The varied levels of staff’s expertise will require different roles at different times.

A. INDIVIDUAL SUPERVISION

Frequency and duration of individual supervision should reflect the needs of the case manager, but at a minimum should occur monthly with seasoned staff. For staff that are working with difficult clients or are new to the agency, individual supervision should occur more frequently based on case manager need. Being consistent with Individual Supervision helps demonstrate reliability to your staff and keeps the supervisor aware of staff’s cases and case load size. Consistent supervision prevents “mini-supervisions” throughout the week.

How to be consistent:

- Supervision should occur on the same day and at the same time monthly. When possible, avoid later afternoon sessions, particularly Fridays.
- Supervision should only be cancelled under extreme circumstances. When cancelled, it should be promptly rescheduled, ideally prior to the originally scheduled time.
- Notify the front desk that there should be no interruptions and place a PLEASE DO NOT DISTURB sign on your door, so when the door closes for supervision, you have reduced the likelihood of any disruptions.
- Do not answer the phone or respond to emails during supervision.
• Be sure to send a clear message to staff that supervision is non-negotiable.
• Have consistent structure for supervision. This way staff always knows what to expect from supervision and it helps to stay on task.

Preparing for Individual Supervision
• Read over notes from the last session and consider what this supervision may focus on.
• Complete new chart reviews before meeting with the case manager.
• Review the Front Door Assessment for barriers at entry at program, case notes, and case plans for client progress to determine if the household is on track for housing stability.
• Review staff case-loads, case load size, and stages of clients on the case load to make sure case loads are distributed evenly among staff.
• Review program log books, eviction notices, and Major Unusual Incident (MUI) to discuss clients in crisis. Examples of MUI’s are theft, weapons, suicidal/homicidal ideation, threatening staff, etc. Follow your agency policy rules and regulations.
• Have staff bring charts of the two hardest to serve clients to review.
• Be organized. Maintain a file or notes for each worker where you can write a running narrative during supervision. Keep chart reviews in a binder to follow up on chart corrections.

If the case manager does not meet agency standards, steps should be taken to improve performance. See Section 7. If performance does not improve, supervisors should follow agency policies and procedures for corrective actions.

B. GROUP SUPERVISION
Group supervision meetings are a way for employees to receive information with everyone hearing the same message. It is an opportunity to provide group education and/or professional development, address
team performance, new agency policies and procedures and discussion of hard to serve clients. Discussing clients in a meeting provides the opportunity for a case manager to present in a group and allows staff to provide feedback and suggestions on hard to serve clients. It provides staff the chance to be exposed to a variety of cases, interventions, and approaches to problem solving.

As client issues arise in individual supervision or staff are struggling with a client, suggest the case manager bring the case to group supervision. To prepare, the case manager should bring the chart and be ready to present the client to the team. The case manager should be prepared to explain the case, safety factors affecting the case, and current problems the worker needs assistance with. This will allow the team to respond to the workers presentation and offer ideas.

Note: To be consistent with Group Supervision, it is best to schedule the same day and time, and should occur at a minimum quarterly based on the needs of your staff and agency.

C. SUPERVISOR- CLIENT CONTACT

There are times when a supervisor will have client contact based on information obtained from either individual or group supervision. Having client contact can assist the case manager in better serving the client and provide needed assistance to overcome barriers.

Reasons why a supervisor may participate in or observe a client/case manager meeting would include, but are not limited to:

- Assisting the case manager with a client who is noncompliant with program rules.
- Assisting the case manager in concerns with health or safety of the client- such as homicidal or suicidal ideation.
- Participating in case conferences.
- Discussing client grievance.
- Observing of case management session to assist in future
case planning or training.

At the end of the meeting, the supervisor should verbally summarize what was discussed and agreed upon with the client. The supervisor should review and explain with staff the outcome of the meeting. The case manager should summarize, in writing, this information in the clients chart.

5. CASE COORDINATION/CONFERENCING

A. CASE COORDINATION
Part of being a supervisor is training staff to case coordinate services with other providers. Case coordination includes regular communication, information sharing, and collaboration. It occurs regularly when multiple agencies are serving the client. Coordination activities may include directly arranging access to services, reducing barriers to obtain services, establishing linkages, and other activities recorded in case notes. The case manager should always document this information in case notes.

B. CASE CONFERENCING
Though case coordination is often all that is needed, there are times when a case conference is necessary in order to better serve the client. Case conferencing is a formal, planned, and structured event separate from regular contacts with other agencies serving a client. Case conferences should be held face to face or by phone. Case conferences usually include multiple internal (supervisor and case manager) and external providers, and if possible and appropriate, the client and family members/close supports.

The goal of case conferencing is to provide holistic, coordinated, and integrated services across providers, and to reduce duplication. Case conferences can be used to identify or clarify issues regarding client needs and goals; to review activities including progress and barriers to-
wards goals; to map roles and responsibilities; to resolve conflicts or strategize solutions; and to adjust current case plans. Case conferences can clarify issues and resolve and encourage participation by multiple agencies to recognize everyone’s role in the process.

Case conferences should be documented in client case notes and include providers who attended, who is providing what task, and the final outcome of the meeting.

C. CASE CONFERENCING WITH HOMELESS SOLUTIONS STAFF

Case conferencing with Montgomery County staff should not replace individual communication from one agency to another. Case Coordination and/or Case Conferencing a client should typically occur before case conferencing with County staff. Reaching out to providers who have a history with the client may provide insight to issues that are occurring i.e. an anniversary of mother’s death, etc. that may be causing problems potentially leading to eviction or program exit.

Case conferences with Homeless Solutions Staff should be scheduled as needed. Homeless Solutions staff, referring agency staff and receiving agency staff will participate in these meetings via telephone or in person as schedules allow. Case conferences will be held when:

- Two providers reject the same client
- Providers reject 4 referrals in a row
- Involuntary termination (see below)
- Partner agencies cannot reach a mutual decision regarding termination of program

In cases where the client poses an immediate threat to others, the provider will seek emergency removal as needed to ensure safety. In cases where the client will not be returning to the program, the Homeless Solutions staff and Front Door Assessor should be notified of the removal within 24 hours and the case will be referred for case conferencing.

Case conferences will assess the housing planning (placement options) for clients with the most difficult/challenging barriers and the accuracy
of the assessment process in making appropriate referrals. Case conferences include the referring agency, receiving agency, and Montgomery County staff.

**Reminder**: Programs must exercise judgment and examine all extenuating circumstances in determining when violations warrant termination so the program terminates participants in only the most severe cases.

### 6. Training

Case managers need training in order to increase knowledge, provide effective housing focused case management, and achieve positive program outcomes. With new HEARTH (Homeless Emergency Assistance and Rapid Transition to Housing) regulations and declining levels of Local and Continuum of Care funding, training staff to be productive, efficient housing focused case managers is essential. Funders, both private foundations and government organizations, are starting to insist more and more on the use of evidence-based practices in social services work fields. As a result, it is becoming increasingly important for anyone working in social services to have a solid understanding of evidence-based practice models.

Agencies should strongly encourage staff to attend trainings. Staff trainings can occur on-site at staff or team meetings, off-site community trainings, conferences, or webinars. When new skills are being developed, it is important that the supervisor monitor the skills to see adherence to the model.

**Evidence-based practice training** refers to the use of interventions, strategies, and supports that have research documenting their effectiveness. Practices that are evidence-based are ones that have been demonstrated as effective within multiple research studies that
document similar outcomes. It is a process in which the practitioner combines well-researched interventions with clinical experiences and ethics to guide and inform the delivery of treatment and services. Examples of Evidence-Based Practice are:

- Motivational Interviewing
- Trauma Informed Care
- Harm Reduction
- CTI- Critical Time Intervention
- Housing First

**Other Training** refers to topics that affect the population served as well as ethical standards and codes of conduct of staff. Examples of other trainings:

- Fair Housing
- Mental Health
- Alcohol or Drug
- Accessing Benefits and Entitlements
- Tenant Rights and Responsibilities
- Professional Ethics
- Cultural Competency

Homeless Solutions Staff will notify agencies on trainings that are provided in the community including Homeless Solutions Trainings, ADAMHS trainings, Homeless Agency Trainings, etc.

### 7.CORRECTIVE ACTION

This section is for general information. It is not legal advice and does not replace policies and procedures set up by individual agencies. Agencies should have policies and procedures covering discipline that has been read by, understood, and agreed to by the employee at the time of hire. It is important that employees know what actions would
be cause for discipline.
Training, coaching, and mentoring will help when staff is falling short of meeting the goals. Positive reinforcement will foster an environment of performance improvements.

Clear expectation, appropriate supervision and feedback on a day-to-day basis are the best ways to avoid the necessity of implementing a discipline process. However, when problems with behavior or performance occur, discipline is necessary. Most staff want to do a good job. Supervisors can help staff succeed on the job by:

- Providing a thorough orientation for new staff.
- Establishing clear expectations for behavior and performances.
- Providing training, coaching, and mentoring.
- Providing feedback through appropriate supervision.
- Implementing a good performance management process.

Unfortunately, efforts to correct poor performance will not always provoke staff to make the changes necessary to improve. When poor performance continues, supervisors must intervene to change the behavior by applying progressive discipline. Progressive discipline is the application of disciplinary actions that increase in severity as the poor behavior continues.

- Be sure to seek out advice of your supervisor for suggestions when dealing with situations that require disciplinary action.
- Be sure to refer to agency specific policies regarding discipline.
- Don’t ever write a note or email when dealing with performance issues or progressive discipline. Talk directly to the worker.
- Don’t discuss the worker’s performance with co-workers or other team members.
- Don’t ever say anything about the worker that you would not say directly to them.

In general, the sequence of progressive discipline is:
Verbal Reprimand:

- Direct, one-on-one meeting to discuss problem behavior
- It is private and confidential
- Should be noted in the employee’s personnel record
- Sometimes, a second reprimand will be necessary
- Clearly identifies the problem or issue with the employee’s behavior
- Gives the employee the opportunity to respond and/or explain contributing factors
- Provides the employee with clear instruction on how to improve and outlines any support you can give the employee to make the required changes
- Ensures the employee understands the standard that is expected
  
  Explains the consequences of not correcting the behavior

Written Reprimand:

- Is Private and confidential
- Written document
- Specifically describes the problem and employee’s performance
- Lists previous verbal warning
- States desired change in behavior
- Explains consequences of any further incidents
- Gives the employee the opportunity to respond and/or explain contributing factors
- Provides the employee with clear instruction on how to improve and outline any support you can give the employee to make the required changes

When a written reprimand is required, the employee should be asked to sign a copy of the written warning to confirm that he/she has received, read, discussed and understood the warning. If the employee refused to sign, make a note that the employee refused to sign.

Give the employee a copy of the written warning and place a copy of the written warning and the employee’s confirmation of receipt in the
employee’s personnel file.

**Termination:**

- *It is private and confidential*
- *Misconduct-prior warnings not necessary, if behavior is severe*
- *Unsatisfactory work performance- requires prior warning*

At the termination stage, the supervisor should meet with the employee to inform the employee that his or her employment with the agency has been terminated for cause. The supervisor should have a witness present at the meeting. A letter confirming the termination of employment should be given to the employee.

Britain, C (2005). Supervisory training: Putting the pieces together, Unit 1. Denver, CO; Butler Institute for Families, Graduate School of Social Work, University of Denver; HR.council.ca; Keeping the Right People HR Toolkit

**A. DOCUMENTING PERFORMANCE PROBLEMS/DISCIPLINE**

**Documentation**

It is important to keep a written record of performance concerns. Documentation is necessary to help accomplish the following:

- *Focus on observable, verifiable facts in an objective manner.*
- *Identify a possible pattern of behavior.*
- *Determine when to address concerns with the employee*
- *Help the employee to recognize both the problem and its severity by presenting the work performance decline in a factual, non-judgmental manner*
- *Stay focused on job performance*

**Suggested guidelines for documenting performance concerns:**

- *Be specific regarding the date, time and place of unsatisfactory job performance*
- *Provide actual observations, not your opinion or conclusion*
- *Include examples of satisfactory and excellent work, as well as what is below par*
• Keep records confidential and update them on a regular basis—daily, weekly or monthly
• Focus on performance (not on personal problems)
• Provide factual information that shows the employee’s job performance over a period of time
• Be objective, fair and consistent

Documentation Checklist
When preparing your documentation, it may be helpful to review the following checklist to ensure completeness and accuracy. Select those elements that apply.

☐ Did you record the documentation promptly, while your memory was still fresh?

☐ Have you indicated the date, time and location of the incident(s) documented?

☐ Did you record the action taken or the behavior exhibited?

☐ Did you indicate the person(s) or work products involved?

☐ Have you listed the specific performance standards violated?

☐ Have you indicated specific rules or regulations violated?

☐ Did you record the consequences of the action or behavior or the employee’s overall work performance and/or the effect on the operation of the work group?

☐ Have you been objective, recording observations and not impressions?

☐ Did you indicate the employee’s reaction to your efforts to improve his or her performance?
8. IN CONCLUSION:

This supervisor manual is intended to provide agencies with minimum standards for supervision needed to assist case managers in delivering housing focused case management. It also provides understanding of minimum program performance, standards, and outcomes expected for all agencies throughout the continuum. This manual is not meant to replace agency policies and procedures, and should be used as a learning tool and minimum standard to help supervisors in the challenges of daily supervision.

Without the dedication of providers and the hard work of supervisors and front line staff, none of this would be possible. We applaud all of the hard work that is being done, and hope this tool will assist in the overall goal of ending chronic homelessness and reducing overall homelessness in Montgomery County.
Special thanks to the following individuals who spent countless hours assisting in creating this Supervisor Manual:

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References Used in Creating this Manual


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HOMELESS SOLUTIONS POLICY BOARD

APPENDIX

PROGRAM PERFORMANCE TARGETS FOR MONTGOMERY COUNTY, OHIO
**Background**

To have the greatest impact for households served by organizations in the homeless system, it is important to define and monitor program performance. With this information, strategic decisions can be made about funding of programs and capacity development. Program performance is an important element in all funding for the homeless system. One of the funding conditions adopted by the Homeless Solutions Policy Board at the end of the 2013-2014 funding review process was that, by the end of 2013, system targets for each program type would be developed and adopted. Once the system targets had been established, starting with the 2014-2015 funding cycle, all programs would be funded and evaluated on the system targets for their program type not on outcomes proposed by each program.

**Development**

Programs have been grouped by program type to aid in performance evaluation and analysis of cost effectiveness. The primary expectation for each program type varies because of the type of clients served and their role in the homeless system.
TYPES AND TARGETS:

Front Door

Programs that provide case management at the gateway shelters (except the YWCA domestic violence shelter) and in the PATH street outreach program. The primary goal for households served by these programs is to exit to permanent housing or other program in the homeless system.

**Front Door Providers** consist of Gettysburg Gateway for Men, St. Vincent DePaul Apple Street, Daybreak, YWCA, and MVHO PATH outreach program. Destination also includes exits to

- Transitional Housing,
- Safe Haven
- Foster Care
- Treatment

*Income measures are calculated for all adults who exited during the reporting period.*
## Front Door Benchmark

<table>
<thead>
<tr>
<th><strong>Reduction in Homelessness</strong></th>
<th><strong>Measure</strong></th>
<th><strong>HUD Benchmark</strong></th>
<th><strong>2015 Target</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Length of Homeless–Days</strong></td>
<td></td>
<td></td>
<td>51 days</td>
</tr>
<tr>
<td><strong>Return to Shelter Rate</strong></td>
<td></td>
<td></td>
<td>33%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Sustainable Housing</strong></th>
<th><strong>Measure</strong></th>
<th><strong>HUD Benchmark</strong></th>
<th><strong>2015 Target</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Destination to PH</strong></td>
<td></td>
<td></td>
<td>59%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Income</strong></th>
<th><strong>Measure</strong></th>
<th><strong>HUD Benchmark</strong></th>
<th><strong>2015 Target</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cash income at exit</strong></td>
<td></td>
<td></td>
<td>59%</td>
</tr>
<tr>
<td><strong>Employment Income at Exit</strong></td>
<td></td>
<td>20%</td>
<td>23%</td>
</tr>
<tr>
<td><strong>Non-Cash Benefits at Exit</strong></td>
<td></td>
<td></td>
<td>86%</td>
</tr>
</tbody>
</table>
Pathways to Housing

Programs that provide time limited assistance to households who, based on their FDA, are expected to be able to exit the homeless system and live stably on their own. The programs include programmatic shelter, transitional housing, and rapid rehousing. The primary goal for households served in these programs is to exit to permanent housing with income, particularly income from employment.

*Pathway Providers* consist of

- Holt Street HCHV
- Homefull Family Living Center
- Samaritan Clinic Respite Care
- VA Domiciliary
- ESG Rapid Rehousing
- ODOD Housing Stability Program
- Daybreak Milestones
- DePaul Center
- YWCA Homeshare
- Linda Vista
- Mercy Manor
- Daybreak Opportunity House
- St. Vincent Supportive Housing
- Homefull CoC Rapid Rehousing
- VOA VA TH Per Diem
- St. Vincent SSVF
- VOA SSVF
Pathways to Housing Benchmark

<table>
<thead>
<tr>
<th>Reduction in Homelessness</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of Homeless- Days</td>
<td></td>
<td>193 days</td>
</tr>
<tr>
<td>Return to Shelter Rate</td>
<td></td>
<td>13%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sustainable Housing</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Destination to PH</td>
<td>65%</td>
<td>81%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Income</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash income at exit</td>
<td></td>
<td>73%</td>
</tr>
<tr>
<td>Employment Income at Exit</td>
<td>20%</td>
<td>50%</td>
</tr>
<tr>
<td>Non-Cash Benefits at Exit</td>
<td></td>
<td>87%</td>
</tr>
</tbody>
</table>
Permanent Supportive Housing

Programs that provide permanent affordable housing with supportive services to households with a disability and a history of homelessness. The primary goal for households served in these program is stable housing, and when the household is able to move on, exit to other permanent housing.

*Permanent Supportive Housing Providers* consist of

- DePaul Center PSH
- Housing First Belvo
- Housing First Cobblegate
- Housing First Tangy
- Housing First Imperial
- HUD VASH
- Iowa Avenue SRO
- McKinney I and II
- MVHO Leasing
- PLACES Move On Housing
- Ohio Commons
- Homefull Family Living Center
- St. Vincent Kettering Commons
- Shelter+Care SRA
- Shelter+Care TRA
- River Commons II
- Homefull Fisher Square Family PSH
- Westcliff
- YWCA SRO
## Permanent Supportive Housing Benchmark

<table>
<thead>
<tr>
<th>Reduction in Homelessness</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return to Shelter Rate</td>
<td></td>
<td>15%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sustainable Housing</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Destination to PH</td>
<td></td>
<td>62%</td>
</tr>
<tr>
<td>Housing Stability</td>
<td>80%</td>
<td>95%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Income</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash income at exit</td>
<td></td>
<td>84%</td>
</tr>
<tr>
<td>Employment Income at Exit</td>
<td></td>
<td>93%</td>
</tr>
<tr>
<td>Non-Cash Benefits at Exit</td>
<td></td>
<td>87%</td>
</tr>
</tbody>
</table>
CoC System Targets

When programs are reviewed for continued funding, system benchmarks are compared to actual outcomes in each program. In order to work with staff on achieving these outcomes, it is beneficial for supervisors to run monthly outcome reports in HMIS. It is recommended that supervisors read funding contracts to ensure that not only are they meeting system bench targets, but to see prior year’s outcomes.

Program performance is an important element in funding. When funding recommendations are being determined, an HMIS report is run for each program (with the exception of the YWCA Domestic Violence Shelter) to determine if the program outcomes are on track to meet performance targets. Supervisors should run a monthly HMIS report to monitor target outcomes. With regular review of program outcomes, supervisors can work with staff to continue to improve target measures. Supervisors should know program outcomes and requirements for their program. See your agency administrator or CEO for information.
## CoC System Targets Benchmarks

### Reduction in Homelessness

<table>
<thead>
<tr>
<th>Measure</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of Homeless- Days</td>
<td>30</td>
<td>TBD</td>
</tr>
<tr>
<td>Return to Shelter Rate</td>
<td></td>
<td>28%</td>
</tr>
<tr>
<td>Homeless Households- Annual</td>
<td></td>
<td>2,881</td>
</tr>
<tr>
<td>Chronic Households - PIT</td>
<td>0 by 2015</td>
<td>16 chronic</td>
</tr>
<tr>
<td>Homeless Veterans - PIT</td>
<td>0 by 2015</td>
<td>46 vets</td>
</tr>
</tbody>
</table>

### Sustainable Housing

<table>
<thead>
<tr>
<th>Measure</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Destination to PH</td>
<td></td>
<td>52%</td>
</tr>
</tbody>
</table>

### Income

<table>
<thead>
<tr>
<th>Measure</th>
<th>HUD Benchmark</th>
<th>Local Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash income at exit</td>
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<td>65%</td>
</tr>
<tr>
<td>Employment Income at Exit</td>
<td>20%</td>
<td>34%</td>
</tr>
<tr>
<td>Non-Cash Benefits at Exit</td>
<td></td>
<td>86%</td>
</tr>
</tbody>
</table>
HOMELESS SOLUTIONS POLICY BOARD

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451 West Third Street
Dayton, Ohio
45422

Phone: (937) 225-4695
Fax: (937) 496-7714
http://www.mcohoio.org/services/fcfc/homeless_solutions.html