**Emotional Competency**

**Instructions for use:** Please read through this form and complete the first (Colour blocked) section only. You will need to have access to this sheet during the training, so please bring either a printed copy or your electronic device to access.

This form has been designed to have a dual purpose, so as well as being used during the training, there are questions and examples included that can assist in case supervision in the work place.

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| **How are you feeling about attending module 3?**  What is contributing to the way you are feeling?  How may you communicating the way you are feeling?  How do you think this will make other people feel? |
| **In your work place, what signals do you give that it is OK for people to talk about their emotions in case discussions?**  What more could you do to help people feel able to talk about their emotions? |
| **What questions could you use to explore what might explain particular feelings in case work?**  For example, if a practitioner tells you they feel frustrated it can be helpful to explore why they feel like this. What is the parent doing or not doing, saying or not saying that has led to the worker’s sense of frustration? Could it be something about the parent’s characteristics or an expectation the worker has of the parent based on theory, research or previous experience that is leading to their frustration? Have there been times when the worker felt more or less frustrated? If so, what was different about those times? How might the parent be experiencing the worker’s frustration? |
| **How will you ensure that thought is given to how other people are feeling and why?**  This could be children, parents, colleagues etc.  Understanding how other people are feeling will not only help understand why they are behaving in certain ways but may also help the practitioner to feel differently about them too. For example, if the practitioner is feeling annoyed with the child for not meeting with him or her, how might they feel different if they considered the child might be hiding because they are scared that things they say might lead to them being removed from the family home? |
| **How do you integrate these emotional reflections into case work decision making and analysis?**  Even exploring where different emotional responses might be coming from and reflecting on how other people may be feeling is not going far enough. Just as our emotions influence our behaviour, they also influence our thinking and our decision-making. When practitioners say they are feeling frustrated by the child’s parents, these emotional responses cannot be put to one side or dealt with separately from the works assessment and recommendations for the case. Feeling frustrated with a parent will influence how the worker views the family and in turn what decisions they think need to be made.  Equally, if the worker feels very comfortable with the family and happy with what the parent is telling them, this will also influence the practitioner’s assessment and decision-making. There is nothing unprofessional about feeling frustrated, annoyed, disappointed or indeed happy, excited or pleased with a parent, child or other professionals – rather, it is inevitable that practitioners will experience these and many other emotions in the course of their work.  One way of integrating emotions into your discussions about assessments and decision-making is to consider the directionality of the relationship between the worker’s emotional response and the behaviour, person or situation they are considering. For example, is the practitioner frustrated because s/he does not believe the mother’s account of her substance misuse or does the worker doubt the mother’s account because s/he is already feeling frustrated for some other reason?  Similarly, it can be helpful to consider whether it is this specific behaviour, person or situation that is causing the practitioner to feel a certain way or whether the practitioner’s previous experiences (personally or professionally) are influencing how they see things. For example, the practitioner might have worked on a particularly difficult case in which a parent concealed serious and harmful substance misuse for a long time. This could have made the practitioner feel embarrassed, worried for the child’s safety and doubtful of their own professional expertise. In turn, this may have conditioned the practitioner to doubt all accounts of reduced substance misuse in future. Unpicking these kinds of relationships must be at the heart of any meaningful integration of emotions into your discussions of assessments and decision-making |
| **Consider- it may be advisable at times to delay making a decision, where this is possible and safe to do so, in order to allow time to process particularly strong emotional reactions** |