

# Sustainable Practice: Supervision, Continuing Education, & Organizational Support

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center for urban  
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*Rebuilding lives together*

# Welcome

- Workshop agenda:
  - *Definitions/Overview*
  - *Workplace culture and priorities*
  - *Supervision*
  - *An example: Janian strategy*
  - *Discussion questions and next steps*

# Factors that Promote Sustainable Practice

- Engagement in meaningful work
  - *Not too much work*
  - *Not too much administrative work—right-sizing and optimizing bureaucracy*
- Having a good culture
  - *Effective leadership—accessible, supportive, fair, etc.*
  - *Mission focus*
  - *Learning orientation*
    - *Effective supervision*
    - *Structured educational processes*
    - *Protected time for learning and supervision*

# What is a Learning Organization?

## Education is an explicit feature of organization

- The value of education is articulated
- Educational structures and processes are maintained and monitored

*Supervision*

*Protected time and activities*

## Value of a learning orientation

- Improves quality and ongoing improvement of product/service
- Improves quality and ongoing development of employees
- Contributes to the happiness of people who value their work

# Why a Learning Organization?

## Clinical competence

- People do not learn how to practice Street Psychiatry in training
- Knowing how to do this work is essential for quality of care

## Professional satisfaction/burnout prevention

- Support
- Turnover is difficult, time-consuming, and expensive

## Creating Community

## Spreading best practices

## Creating word of mouth

# Factors that Affect Impact of Supervision

Frequency

Consistency

Duration

Supervisor fit and quality of relationship

Content of supervision

# Qualities of Effective Supervisor

Humility

Emotional intelligence

Psychological mindedness

Wide perspective—see the whole board

Effective listening

Disciplined flexibility

Modeling behavior

# Qualities of Effective Supervisee

Humility

Preparation

- Bring questions
- Bring solutions

Self awareness



## Diagnosis and Treatment are only part of supervision

- Explicit and implicit/informal role of psychiatric provider

*Agent of social control/bureaucracy*

*Team therapist*

- Explicit and implicit/informal role of team
- Defining normality and pathology
- Boundary identification and management
- Understanding political, cultural, economic environment

Clinician leadership

Protected educational time and structured activities

Culture of peer support, e.g., email case conferencing

Encouragement of conference participation

Spreading the word

Supervision

- At least one assigned supervisor
- Often two supervisors
- Expectation of regular supervision
- Ad hoc availability of supervisors

## Friday afternoons

- 30 minute staff meeting
- 2 hour Continuing Education activity
  - *CME-accredited Grand Rounds in Homeless Psychiatry*
  - *Integration meetings with Primary Care department*
  - *In-house teaching: present to each other about new medications, psychotherapies, harm reduction initiatives*
  - *Case conference, journal club, small group peer supervision*
  - *Hands-on practice: LAI administration, wound care*
  - *Quarterly offsite meetups: field trips, social events, holiday party*

## Friday afternoons

### ■ Why?

*Develop specialized knowledge to improve clinical practice*

*Peer support and supervision*

*Sense of community*

*Recruitment and retention*

*Without well-defined protected time, clinical work expands to fill all work hours*

### ■ HOW???

*Agency support*

*Making the case: financial, professional, logistical*

## Subcommittees & Departments

- Education & Clinical Subcommittees

*Opportunity for involvement in policymaking and program design*

*Ensuring policy, clinical initiatives, & educational content align with and support actual work*

- Departments (Supportive housing, mobile treatment, transitional and shelter, outreach)

*Community building with smaller groups*

*Support for the specifics of site-based work*

*Setting standards/sharing best practices for specific settings*

Social service colleagues/site staff

Conference presentations

Grand Rounds

Residents

Medical Students

Each other

# Discussion questions

1. How did you learn how to practice Street Psychiatry?
2. What are the ways you continue to learn in your job?
3. Where do you find professional community?
4. Where is there room for structured educational content/continuing education in your current work?
5. What could you teach others about this work?
6. Potential areas for advocacy

# THANKS!

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