



# Using the Secondary Traumatic Stress Core Competencies in Trauma-Informed Supervision

## Introduction

As the topic of secondary traumatic stress (STS) emerges, two facts are becoming clear to program leaders:

- Quality supervision is an important support that organizations can provide to staff members at risk of developing secondary traumatic stress, and
- The field hasn't defined what comprises "quality supervision" in the context of secondary trauma support. The STS Supervisory Competencies is a tool that individuals and organizations can use as a benchmark of the competencies needed to provide effective STS supervision, and is also a map to resources that can help address gaps in those competencies.

## How to Use the STS Supervisor Competency Tool

- 1** The competencies identified in this tool are intended to apply to all organizations in which services are provided to persons who have experienced trauma. These competencies are relevant to any supervisor providing formal support to workers who are exposed to secondary trauma. The supervisors may be licensed clinicians, or may be case workers or peer providers; and may be providing formal organizational supervision, or peer supervision.
- 2** The competencies tool is intended to be a developmental assessment for supervisors. There is no assumption that the supervisor will possess all of these competencies. Rather, this aid is intended to identify areas of need, and to guide the user to resources to strengthen those areas of competency.
- 3** This tool can be used by an individual supervisor, but has greater power as part of an organizational effort. Individuals who wish to use the tool to self-audit their areas of knowledge and skills can use the results to locate resources and increase knowledge and skills. Organizations that serve trauma exposed clients are encouraged to use this tool to guide all their supervisors in a self-evaluation of these competencies, and to identify resources, and develop training priorities based on the links provided within the tool.



## Secondary Trauma Stress (STS)—Core Competencies for Supervisors

- 1 Knowledge of the signs, symptoms, and risk factors of STS and its impact on employees; Knowledge of agency support options, referral process for employee assistance, or external support resources for supervisees who are experiencing symptoms of STS.

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- 2 Knowledge and capacity to self-assess, monitor, and address the supervisor's personal STS.

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- 3 Knowledge of how to encourage employees in sharing the emotional experience of doing trauma work in a safe and supportive manner.

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- 4 Skills to assist the employee in emotional re-regulation after difficult encounters; capacity to assess the effectiveness of intervention, monitor progress and make appropriate referrals, if necessary.

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- 5 Knowledge of basic *Psychological First Aid* (PFA) or other supportive approaches to assist staff after an emergency or crisis event.

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- 6 Ability to both model—and coach supervisees in—using a trauma lens to guide case conceptualization and service delivery.

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- 7 Knowledge of resiliency factors and ability to structure resilience-building into individual and group supervisory activities.

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- 8 Ability to distinguish between expected changes in supervisee perspectives and cognitive distortions related to indirect trauma exposure.

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- 9 Ability to use appropriate self-disclosure in supervisory sessions to enhance the supervisees ability to recognize, acknowledge, and respond to the impact of indirect trauma.

**COMPETENCY****OPERATIONAL DEFINITION****1**

**Knowledge of the signs, symptoms, and risk factors of STS and its impact on employees;**

**Knowledge of agency support options, referral process for employee assistance, or external support resources for supervisees who are experiencing symptoms of STS.**

*The Supervisor is able to do the following:*

- Recognize the signs of STS in their supervisees.
- Address observed STS with symptomatic employees in a supportive manner that normalizes their responses, promotes resiliency, and is supportive of the supervisee and does not pathologize, demean, or threaten the supervisee.
- Delineate what the STS-informed services and support options are available from the organization.
- Facilitate the referral process for accessing available, quality services for symptomatic employees.
- Identify other resources that provide STS prevention or intervention services and is able to assist the employee into accessing those resources.
- Encourage the consistent use of organizational supports for the mitigation/prevention of STS symptoms as a normalized part of doing this work.
- Act as an advocate within the organization for STS supports, training, or other needed adjustments needed by supervisees indicated by supervisory monitoring of STS symptoms in supervisees.
- Differentiate STS, PTSD, and burnout symptoms, and describe the differential varying responses to each condition.
- Identify how race, historical trauma, implicit bias, and/or culture impacts the way STS manifests at the individual and organizational levels.

**2**

**Knowledge and capacity to self-assess, reflective capacity to monitor, and address the supervisor's own personal STS.**

*The Supervisor is able to do the following:*

- Recognize the effect of race, historical trauma, implicit bias, culture and/or other trauma exposure upon themselves him/herself and describe how it may manifest in the supervisory process.
- Self-assess for signs and symptoms of secondary traumatic stress that is affecting their his/her own functioning on a regular basis.
- Define a plan for regular reflection to identify and self-assess secondary traumatic stress.
- Address secondary traumatic stress signs and symptoms of STS when they arise in their own lives.
- Willingly seek support from peers or own supervisor.



**COMPETENCY**

**OPERATIONAL DEFINITION**

3

Knowledge of how to encourage employees in sharing the emotional experience of doing trauma work in a safe and supportive manner.

*The Supervisor is able to do the following:*

- Employ skills to enhance psychological safety of supervisees during supervision.
- Describe common emotional responses to trauma work.
- Skillfully employ reflective listening as part of supervisory practice.
- Identify and utilize supervisees’ strengths in order to use data to increase supervisee self-awareness, competence, and resilience.
- Describe common emotional responses to trauma work and integrate these into discussions with supervisees.
- Normalize common emotional responses to trauma work during supervision.
- Provide emotional support to supervisees, and how to determine what method may be most helpful to supervisees.

4

Knowledge of skills to assist the employee in emotional re-regulation after difficult encounters; capacity to assess the effectiveness of intervention, monitor progress and make appropriate referrals, if necessary.

*The Supervisor is able to do the following:*

- **Educate** supervisees
  - Define self-regulation;
  - Teach self-regulation skills;
  - Normalize emotional responses to difficult situations.
- **Assess** supervisees
  - Evaluate the immediate current well-being of the supervisee;
  - Identify negative self-appraisals, cognitive distortions and ineffective coping behaviors that the supervisee may be demonstrating;
  - Observe—continuously and over time—the emotional response of the supervisee over time to assess recovery and the potential need for added supports or referrals.
- **Coach and support** supervisees
  - Assist with self-regulation, including cognitive skills (e.g., thinking about a situation differently), and behavioral recovery (e.g., distraction, self-soothing, and physical relaxation and redirection of energy).
  - Communicate concern and support.
  - Support the supervisee toward the development of skills for managing intense affect, and to prompt supervisees to utilize these strategies when needed.
  - Provide concrete suggestions regarding emotional regulation strategies, and emphasizes their importance by allowing supervisees the time needed to implement their chosen strategies.

**COMPETENCY****OPERATIONAL DEFINITION****5**

**Knowledge of basic Psychological First Aid (PFA) or other supportive approaches to assist staff after an emergency or crisis event.**

*The Supervisor is able to do the following:*

- Assure the psychological, physical, and emotional safety of staff following an emergency or crisis event incident, including a discussion of physical and psychological and emotional safety.
- Know the eight Core Actions of PFA approach.
- Recognize the different ways staff may respond to an emergency or crisis event.
- Invite questions from staff in a manner that supports individuals' need for emotional safety and by respecting individuals' choice to share or not share as they see fit.
- Provide accurate information regarding secondary traumatic stress, signs to self-monitor the signs and symptoms, and strategies to enhance coping.
- Inquire about the immediate needs of staff following an event.
- Assist supervisees in the development of an action plan to address identified needs.
- Facilitate access to up-to-date information regarding on resources available to staff who have experienced direct/indirect trauma exposure, including EAP information, insurance empaneled providers, and specific recommendations related to referral sources familiar with secondary traumatic stress.

**6**

**Ability to both model and coach supervisees in using a trauma lens to guide case conceptualization and service delivery.**

*The Supervisor is able to do the following:*

- Educate supervisees regarding how trauma may alter functioning of a trauma-exposed client.
- Assure that the supervisee has formulated the role of trauma in the clinical presentation.
- Redirect the supervisee from focusing on what is wrong with a trauma-exposed client (i.e., diagnosis and symptoms) to what happened in the client's life (i.e., consideration of how behaviors/symptoms may make sense when the client's trauma exposure is assessed.)
- Guide supervisees to a recognition of a client's trauma history and symptoms in a way that explains what the client may be experiencing and serves to guide service delivery.
- Redirect supervisees when they drift into attitudes/beliefs about clients that are inconsistent with the trauma-focused "lens."



**COMPETENCY**

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- Educate supervisees about key trauma concepts, support them in incorporating these concepts into a trauma-informed case formulation, and in guiding the supervisee when they drift into an approach inconsistent with the trauma lens.
- Promote fidelity to trauma-responsive, and evidence-supported/based models in daily practice.
- Encourage supervisee to bring forth multiple perspectives of the presenting problem(s), priorities, focus, and goals of treatment by encouraging supervisee’s active engagement of the client, the client’s significant others/family, and extended supports in the assessment, intervention planning, and ongoing service delivery process.

**7**

**Knowledge of resiliency factors and ability to structure resilience-building into individual and group supervisory activities.**

*The Supervisor is able to do the following:*

- Facilitate the supervisee’s experience of a developing sense of mastery of the management of trauma-related issues with clients.
- Identify and develop supervisee’s strengths and help supervisee him or her apply those strengths to job-related activities.
- Connect the individual to his or her team to guard against isolation and to develop a sense of shared ownership of difficult circumstances.
- Support the development of compassion satisfaction in the supervisee via the following:

Assisting with the analysis of supervisee perceptions regarding complex case situations, and to supporting acceptance of situations that cannot be changed.

Assisting the supervisee to reframe situations to allow for the recognition of partial successes.

Assisting the supervisee to adopt a positive view of him or herself and their skill level.

Encouraging the supervisee to notice, acknowledge, and savor positive moments with clients.

Reinforcing the benefits of engaging in pleasurable activities at work and off hours.

**COMPETENCY****OPERATIONAL DEFINITION****8**

**Ability to distinguish between expected changes in supervisee perspectives and cognitive distortions related to indirect trauma exposure.**

*The Supervisor is able to do the following:*

- Recognize when changes in a supervisee's perspectives occur.
- Successfully engage supervisee in discussion of observed changes and obtain supervisee's his or her perspectives thoughts regarding these changed views.
- Normalize that changes in worldview (e.g., bad things do happen to innocent children) that will naturally occur during trauma work.
- Assist supervisee by challenging unhelpful cognitive distortions about self, work, or the world; (e.g., thinking "This is useless", "The world is unsafe", "I'm the only one", or displaying hypervigilance).
- Provide support towards replacing cognitive distortions with more accurate assessments.

**9**

**Ability to use appropriate self-disclosure in supervisory sessions to enhance the supervisees ability to recognize, acknowledge, and respond to the impact of indirect trauma.**

*The Supervisor is able to do the following:*

- Normalize STS responses through timely use of self-disclosure related to their his or her own experiences dealing with trauma work.
- Employ self-disclosure as a tool to help supervisees recognize, acknowledge, and respond to the impact of indirect trauma.
- Willingly disclose when asked directly by a supervisee, thereby avoiding a posture of withholding, and facilitating emotional relatedness and equality in the relationship.
- Monitor their his or her own motivation and intentions as a critical factor in weighing the ethical force of self-disclosure, particularly whether the goal of such disclosure is primarily for the supervisee's benefit.



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