



Certified Child Welfare Supervisor (CCWS) Application

Observation Form: COMMUNICATION SKILLS

- ❖ This form documents the CCWS-P's demonstration of competencies in the COMMUNICATION SKILLS domain. Carefully read the *CCWS Observation Directions-7-1-2022.pdf* before conducting a rated observation.
 - a. The CCWS-P completes Part 1 prior to the observation, provides the partially completed form to the individual conducting the observation, and signs Part 6 after receiving performance feedback.
 - b. The qualified professional conducting the observation/rating/follow-up performance consultation completes Parts 2 – 5, secures the signature of the CCWP in Part 6, and submits ONLY the form that documents achievement of a three-point rating or higher to their Certification Point of Contact to forward to the NCBCWP for processing.
 - c. Forms submitted for certification purposes must be typed.

Part 1: Applicant Information. Provide information exactly as it is associated with your CCWS-P credential.

Name: _____

Email Address: _____ Phone Number: _____

CCWS-P Credential Number: _____ CCWS-P Expiration Date: _____

Part 2: Observer/Rater Information. Enter requested information for the Qualified Professional who conducted the rated observation.

Observer/Rater Name: _____

Email Address: _____ Phone Number: _____

Position Title: _____ Employer: _____

Part 3: Observed Event Information. Only observe events/work activities where the CCWS-P is responsible for leading the event for a minimum of 30 consecutive observed minutes.

Date of Observation: _____ Start Time: _____ End Time: _____

Type of Observation: Face-to-Face Observation Virtual Observation (*attach agency's virtual supervision policy*)

Observed Work Activity:

<input type="checkbox"/> Case Transfer Staffing	<input type="checkbox"/> Multi-Disciplinary Team Staffing
<input type="checkbox"/> Conducting and documenting supervisory reviews	<input type="checkbox"/> Placement support/stabilization meetings with caregiver present
<input type="checkbox"/> Delivery of Foster Parent Training	<input type="checkbox"/> Present Danger Supervisor Consultation
<input type="checkbox"/> Family team conference	<input type="checkbox"/> Staff coaching or one-on-one meetings focused on improving communication skills
<input type="checkbox"/> Impending Danger Supervisor Consultation	<input type="checkbox"/> Training facilitation
<input type="checkbox"/> Legal Staffing	<input type="checkbox"/> Other setting (describe): _____

Part 4, sections A – D: COMMUNICATION SKILLS Competency Demonstration Documentation and Rating

A. Notate strengths and opportunities for improvement as demonstrated by the CCWS-P.

B. Check off each competency that was observed and discussed during the performance consultation.

COMMUNICATION SKILLS (5 competencies). The competencies in this domain reflect the supervisor’s responsibility and ability to communicate information, verbally and in writing, to others who need to be informed in a manner that is accurate, clear, concise, and well organized. This domain includes the skill and ability to tailor the communication method, the amount and level of detail, and the content of the communication to the needs of the target audience.

- Write accurate, clear, concise, and well-organized documents, reports, and presentations in order to share information with others.
- Use active listening and a tone that engages others in listening and responding in order to convey information clearly and confidently, and to ensure mutual understanding in conversations and interpersonal actions.
- Use discretion and maintain confidentiality in all interactions in order to build supportive and trusting interpersonal and team relationships.
- Use written and verbal communication to apprise managers of performance successes and barriers in order effectively manage the unit and individual employees.
- Foster open communication, integrity, and honesty in all interactions with others in order to build effective working relationships.

C. Rate the CCWS-Ps overall demonstration of COMMUNICATION SKILLS competencies.

<input type="checkbox"/> Outstanding (5 points)	The supervisor consistently demonstrates excellent verbal and written communication skills and exemplifies mastery of communication skills as evidenced by well-structured messaging that promotes clear objectives and expectations; provides sound distinct guidance; facilitates participation; encourages feedback and open discussions; and provides positive, strengths-based exchanges.
<input type="checkbox"/> Above Expectations (4 points)	The supervisor demonstrates good communication skills that exceed expectations as evidenced by the presentation of information in a well-structured format with clear content, defined objectives, and positive messaging.
<input type="checkbox"/> At Expectations (3 points)	The supervisor demonstrates adequate communication skills that meet expectations. Information is presented with relevant content in a structured manner and with an effective delivery style with clear language and fluency.
<input type="checkbox"/> Below Expectations (2 points)	The supervisor demonstrates marginal performance that is below expectations and with some noted deficiencies. This may involve presenting information with limited relevant content, lacking supportive messaging, and confusing or difficult to follow delivery.
<input type="checkbox"/> Unsatisfactory (1 point)	The supervisor fails to demonstrate acceptable communication skills as the content of exchanges consistently lack focus and clear objectives. The supervisor does not exhibit engagement or facilitation skills and does not encourage open discussions.



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D. Explain the reason for your rating, using behavioral examples. If additional coaching is necessary to achieve a 3-point or higher rating, include recommended strategies to prepare for future observations of the CCWS-P's competency as it relates to COMMUNICATION SKILLS.

Part 5: Attestations. To be completed by the qualified professional conducting the rated observation.

I have read the COMMUNICATION SKILLS domain competencies and understand how they are demonstrated on-the-job. Yes No

I conducted an eligible rated observation of the CCWS-P for a minimum of 30 minutes, and a follow-up performance consultation for a minimum of 15 minutes, as identified in Part 3 and described in Parts 4A-D. Yes No

Final Rating COMMUNICATION SKILLS Competency Demonstration:

Based on your direct observations and interactions with the CCWS-P during the observation identified in Part 3, do you have any concerns about their ability to effectively perform COMMUNICATION SKILLS competencies under standard supervision? Yes No

I consent to an audit of related agency records to verify my attestation, if requested by NCBCWP. Yes No

By my signature, I attest that the above material is true.

Qualified Professional Signature (NCBCWP accepts both manual and electronic signatures)

Date

Part 6: Verification of Observation and Performance Consult. To be completed by the CCWS-P.

I participated in the rated observation and performance consultation, focused on my demonstration of competencies in the COMMUNICATION SKILLS domain, as documented herein. The content of the observation and rating has been discussed with me in detail. My signature indicates knowledge and understanding of the contents of this form and does not necessarily imply agreement. Yes No

CCWS-P Signature (NCBCWP accepts both manual and electronic signatures)

Date