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| Section 1: Personal information   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **1.1** Employer: |  | | | |  |  | **1.2** Title: | |  | | |  | Name of the Organization/ Ministry /Department/Institution you are presently working for | | | |  |  |  | | Work title/ name of position | | | **1.3** Location: |  | | | | | | | |  | | |  | Town/City | | | | | | | | Province/State | | | **1.4** Your age: | under 25  26-35  36-45  46-55  56-65  66 and over | | | | | **1.5** Your Gender: | | Female  Male | |  | | | **1.6** Highest level of education / academic qualification (select one) **🖉** | |  |  |  | | | | | | |   University Degree (BA, MA, PhD) relevant to the social service workforce (minimum 3 years training at university)  University Degree (BA, MA, PhD) unrelated to the social service workforce (minimum 3 years training university)  Diploma or certificate program relevant to the social service workforce (minimum 1 year training at university)  Diploma or certificate program unrelated to the social service workforce (minimum 1 year training at university)  Short-term training relevant to the social service workforce (less than 1 year)  Short-term training unrelated to the social service workforce (less than 1 year)  No relevant training  **1.7** What year did you complete your highest level of education? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Section 2: General information  **2.1** Please describe the main area of your work**:** (🖉 add job functions as outlined in national definition of SSW)  function one  function two  function three  function tour  function five  **2.2** Do you have job a description that includes your supervisory duties?  Yes |  No If No, please explain **2.3** Does the work you do correspond with your job description?  Yes |  No If No, please explain **2.4** What are the 3 biggest challenges you are facing in your everyday job?  ☐ low salaries ☐ lack of training and professional knowledge  ☐ high workload ☐ poor supervision and support system  ☐ low motivation ☐ limited resources to work with  ☐ low authority ☐ ineffective interagency collaboration  ☐ lack of clarity in roles/performance expectations ☐ poor work conditions/facilities  ☐ lack of career advancement opportunities ☐ weak information management, records, data management  ☐ other If Other, please explain **2.5** How long have you been employed in your current position?  less than 1 year  1 – 2 years  3 - 4 years  5 - 9 years  10 years or more  **2.6** How long have you been employed in the field of social services?  less than 1 year  1 – 2 years  3 - 4 years  5 – 9 years  10 years or more  **Please note if you strongly agree, agree, neither agree or disagree, disagree or strongly disagree with the following statements:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | Strongly Agree | Agree | Neither Agree or Disagree | Disagree | Strongly Disagree | | **2.7** I am satisfied with my pay |  |  |  |  |  | | **2.8** I have the proper supplies and equipment to do my job |  |  |  |  |  | | **2.9** I feel that I am making a positive impact in people’s lives through this job |  |  |  |  |  | | **2.10** There are adequate measures in place to ensure the safety and security of everyone in my workplace |  |  |  |  |  | |  |
| Section 3: Supervision |  |
| **3.1** Do you have an immediate supervisor?  Yes |  No  **3.2** How often do you meet with your supervisor one on one?  Weekly  Monthly  3-4 times a year  less often  never  **3.3** How many staff do you supervise? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **3.4** Please think about your role as a supervisor and check the appropriate box for each question   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **In my role as a supervisor, I ….** | Strongly Agree | Agree | Neither Agree or Disagree | Disagree | Strongly Disagree | | a. Set clear job performance expectations for workers I supervise |  |  |  |  |  | | b. Provide them with constructive feedback on their work skills |  |  |  |  |  | | c. Help them with decision making in difficult situations |  |  |  |  |  | | d. Help them to learn best practices |  |  |  |  |  | | e. Discuss ethical aspects of the work |  |  |  |  |  | | f. Discuss their sense of personal safety and comfort in their role |  |  |  |  |  | | g. Discuss self care and stress management tips |  |  |  |  |  | | h. Discuss their professional development and career goals |  |  |  |  |  | | i. Help identify new training opportunities |  |  |  |  |  | | j. Discuss administrative issues |  |  |  |  |  |   **3.5** How often do you hold group supervision or structured peer support sessions?  Weekly  Monthly  3-4 times a year  less often  never  **3.6** Do you consider the existing supervision system effective for meeting your needs?  Yes |  No Please provide any additional feedback or recommendations related to supervision Section 4: Training  **Please note if you strongly agree, agree, neither agree or disagree, disagree or strongly disagree with the following statements:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | Strongly Agree | Agree | Neither Agree or Disagree | Disagree | Strongly Disagree | | **4.1** The training I have is adequate to successfully do my job |  |  |  |  |  | | **4.2** My organization encourages my participation in training |  |  |  |  |  | | **4.3** Trainings are geographically accessible for me |  |  |  |  |  | |  |  |  |  |  |  | | **4.4** Trainings are financially accessible for me |  |  |  |  |  | | **4.5** I have enough access to training to help me in my career path |  |  |  |  |  | | **4.6**  Before I started this job, I had an orientation that helped me learn about my organization and role |  |  |  |  |  |  Please provide any additional feedback or recommendations related to training **🖉** *(the following questions are here as an example but should be adapted to fit the roles and functions of those completing the survey.)*   * 1. Do you feel competent in your knowledge of theoretical models of supervision?   Very competent  Competent  Somewhat competent  Not at all  Does not apply to my work   * 1. Do you feel competent in your ability to establish and articulate measurable outcomes for learning and performance of supervisees?   Very competent  Competent  Somewhat competent  Not at all  Does not apply to my work   * 1. Do you feel competent in your knowledge of providing feedback on job performance to supervisees?   Very competent  Competent  Somewhat competent  Not at all  Does not apply to my work   * 1. Do you feel competent in your knowledge of social work ethics?   Very competent  Competent  Somewhat competent  Not at all  Does not apply to my work   * 1. Do you feel competent in your knowledge of the stages of stress, burnout, and compassion fatigue and how to communicate with supervisees about these issues?   Very competent  Competent  Somewhat competent  Not at all  Does not apply to my work   * 1. Do you feel competent in your ability to manage conflict and disagreement?   Very competent  Competent  Somewhat competent  Not at all  Does not apply to my work   * 1. Do you feel competent in your knowledge of up-to-date evidence-based practices in your area of work?   Very competent  Competent  Somewhat competent  Not at all  Does not apply to my work  Section 5: Professional Association  **5.1** Are you a member of a professional association?  Yes |  No If yes, please provide the name of the association **5.2** How long have you been a member of your professional association?  less than 1 year  1 – 2 years  3 - 4 years  5 years or more  **5.3** Do you receive any support from the professional association?  Yes |  No If yes, please explain **5.4** Do you feel you benefit professionally by being a member of the association?  Yes |  No If yes, please explain **5.5** Did the professional association require you to sign a code of ethics?  Yes |  No If yes, please explain   END OF SURVEY |  |