

Physical Presence

Consistent Availability & Professional Modeling

Intensives Library · Professional Standards & Accountability

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Part 1 · Overview

Physical Presence

The physical presence of a supervisor communicates safety, commitment, and organizational stability. When leaders are consistently available — visible in the milieu, accessible to staff, and professionally modeled in their conduct — they create the environmental conditions for clinical excellence. This intensive builds consistent, strategic supervisory availability.

Learning Slides

Physical availability strategies, milieu presence, and professional modeling frameworks.

Mind Map

Visual mapping of presence patterns and strategic availability planning.

Self-Assessment

Evaluate your physical presence consistency, accessibility, and professional modeling.

Worksheet

Structured exercises for planning and improving strategic supervisory physical presence.

Presence Dimensions

Consistent physical availability

Milieu presence and visibility

Accessibility to staff needs

Professional conduct modeling

Strategic location and timing

Environmental stability creation

Part 2 · Slides

Physical Presence & Professional Modeling

Building Supervisory Excellence

INTRODUCTION

Physical Presence & Professional Modeling

Building Supervisory Excellence

Physical presence consistency and professional modeling are the bedrock of effective supervision. They create the conditions necessary for natural learning, real-time guidance, and trust.

Reliable availability in the treatment setting

Enabling spontaneous consultations

Modeling professional standards

Setting the tone for program culture

Supporting immediate operational needs

CORE CONCEPT

Physical Presence Consistency

More Than Just Showing Up

Effective clinical supervision cannot be achieved through sporadic engagement. Consistent on-campus presence enables teachable moments that form the heart of clinical development.

Predictable availability

Strategic positioning

Being accessible for crisis support

Contributing to program stability

Prioritizing high-stress periods

VULNERABILITIES

Presence Challenges

The Impact of Absence

When supervisors are unpredictable or absent, staff delay decisions, feel unsupported during crises, and miss opportunities for real-time learning.

Unpredictable availability

Gaps in supervision during critical times

Barriers to spontaneous interaction

Missing informal teaching opportunities

Increased staff anxiety

CORE CONCEPT

Accessibility Optimization

Strategic Positioning

Optimizing accessibility means physically and logistically positioning yourself to maximize staff interaction while maintaining efficiency.

Office location facilitates interaction

Multiple pathways for access

Balancing open door with focused work

Clear protocols for urgent needs

Welcoming environmental design

CORE CONCEPT

Crisis Response Availability

Leadership Under Pressure

Crisis situations are critical tests of presence. Immediate accessibility during emergencies provides essential support and powerful modeling.

Immediate physical presence

Calm, effective leadership modeling

Real-time guidance

Post-crisis debriefing

Building staff confidence

CORE CONCEPT

Teachable Moment Recognition

seizing the Opportunity

Presence allows you to observe and respond to natural learning opportunities that arise during routine operations—often more powerful than formal training.

- Observing clinical interactions
- Immediate recognition of learning needs
- Real-time feedback
- Modeling clinical thinking
- Reinforcing effective practices

SYSTEM DEVELOPMENT

Building a Presence System

From Habit to System

Creating robust presence requires systematic approaches: architecture design, communication protocols, and professional development integration.

- Designing schedule for accessibility
- Clear availability communication
- Crisis response protocols
- Integrating presence into training
- Sustainability planning

CONCLUSION

The Foundation of Excellence

Transforming Supervision

Excellence in physical presence transforms supervision from periodic meetings to ongoing, integrated support. It creates the trust and modeling that enable all other supervisory success.

- Integrated support woven into daily work
- Collaborative partnerships
- Continuous professional development
- Enhanced program quality
- Improved client outcomes

Part 3 · Mind Map

Presence & Punctuality Map

Map your specific practices and examples

Presence Consistency

Reliable availability patterns.

Daily scheduleOn-campus hoursPredictability

Add example...

Add example...

Accessibility Optimization

Strategic positioning and openness.

Office locationOpen door timesBarriers removed

Add example...

Crisis Response

Availability during emergencies.

Emergency protocolsNotification systemsSupport presence

Add example...

Teachable Moments

Observing and responding to learning.

Clinical observationReal-time feedbackModeling

Add example...

Punctuality Excellence

Time management modeling.

Meeting arrivalSchedule reliabilityPreparation

Add example...

Part 4 · Assessment

Physical Presence & Professional Modeling

Self-Assessment

Part 1: Vulnerabilities

Questions 1-35

1. I arrive at work after my supervisees have already begun their clinical activities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

2. Staff members cannot predict when I will be available for consultation or support.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

3. I spend significant portions of my workday away from the treatment setting.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

4. My physical absence during critical program operations creates gaps in supervision.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

5. Staff members postpone important decisions because they cannot locate me.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

6. Supervisees struggle to find me when immediate guidance is needed.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

7. I create physical or logistical barriers that limit staff access to consultation.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

8. My office location or work patterns make spontaneous interaction difficult.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

9. Staff members avoid seeking guidance because they're uncertain about my availability.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

10. I miss opportunities for informal teaching because I'm not consistently present.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

11. I'm unavailable during clinical emergencies or high-stress situations.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

12. Staff members handle crisis situations without adequate supervisory presence.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

13. My absence during critical moments leaves clinical staff feeling unsupported.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

14. I learn about significant clinical events after they've been resolved.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

15. Crisis situations escalate because immediate supervisory consultation isn't available.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

16. I miss opportunities to provide real-time guidance on clinical situations.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

17. Important learning opportunities pass unnoticed because I'm not present to observe them.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

18. Staff members develop clinical approaches without benefit of supervisory input.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

19. My absence prevents natural modeling of effective clinical decision-making.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

20. Supervisees repeat mistakes that could have been prevented through present guidance.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

21. I arrive late to scheduled meetings, supervision sessions, or program activities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

22. My tardiness creates delays in program operations or staff schedules.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

23. I cancel or reschedule appointments frequently due to poor time management.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

24. My unpredictable arrival time disrupts program flow and staff planning.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

25. I fail to demonstrate the punctuality standards I expect from clinical staff.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

26. My schedule appears chaotic or disorganized to supervisees and colleagues.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

27. I struggle to balance multiple responsibilities within available time frames.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

28. My time management creates stress or confusion for staff members.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

29. I demonstrate poor preparation for scheduled supervisory activities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

30. My approach to time management contradicts the professional standards I promote.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

31. I hold staff to higher attendance standards than I maintain myself.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

32. My behavior regarding time and presence sends mixed messages to supervisees.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

33. I fail to model the professional commitment I expect from my team.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

34. My inconsistent presence undermines my credibility when addressing staff performance.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

35. Staff members receive conflicting messages about the importance of reliable attendance.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

Part 2: Strengths

Questions 36-70

36. I maintain consistent, predictable on-campus availability during all program operations.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

37. My reliable presence creates natural opportunities for staff guidance and support.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

38. Staff members can count on finding me when immediate consultation is needed.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

39. I prioritize physical presence during high-stress periods and critical operations.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

40. My consistent availability contributes significantly to overall program stability.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

41. I position myself physically and logistically to maximize accessibility to staff.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

42. My office location and work patterns facilitate spontaneous staff interactions.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

43. I create multiple pathways for staff to access immediate guidance when needed.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

44. Staff members feel comfortable approaching me for both routine and urgent consultations.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

45. I balance accessibility with other supervisory responsibilities effectively.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

46. I remain physically present and available during clinical emergencies.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

47. My immediate availability during crises provides essential support to clinical staff.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

48. I use my presence during high-stress situations to model effective crisis management.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

49. Staff members feel more confident handling difficult situations when I'm present.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

50. My crisis availability enables real-time guidance that improves clinical outcomes.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

51. I position myself to observe and respond to natural learning opportunities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

52. My consistent presence allows for immediate feedback on clinical decisions.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

53. I use spontaneous interactions to reinforce important clinical concepts.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

54. Staff members benefit from real-time modeling of effective clinical approaches.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

55. My presence enables progressive skill development through natural observation.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

56. I arrive early or precisely on time for all scheduled activities and meetings.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

57. My punctuality demonstrates respect for others' time and program operations.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

58. I maintain reliable attendance that supports efficient program functioning.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

59. My time management serves as a positive example for all staff members.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

60. I consistently model the punctuality standards I expect from my team.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

61. I organize my schedule to maximize supervisory effectiveness and availability.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

62. My time management supports both planned activities and spontaneous needs.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

63. I demonstrate effective preparation and organization in all supervisory activities.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

64. My approach to time management reduces stress and increases efficiency for everyone.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

65. I balance multiple responsibilities while maintaining quality in each area.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

66. I demonstrate the same professional commitment I expect from clinical staff.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

67. My behavior regarding time and presence reinforces program values consistently.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

68. I model professional standards that staff members can emulate and respect.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

69. My approach to attendance and presence builds credibility and trust with supervisees.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

70. I create organizational culture through consistent demonstration of professional excellence.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Never · Always

Scoring guide

Physical Presence and Professional Modeling

High Vulnerability: Significant presence/punctuality challenges. Immediate attention needed.

Moderate Vulnerability: Notable areas for improvement limiting effectiveness.

Mild Vulnerability: Good presence but opportunities for strengthening reliability.

Low Vulnerability: Reliable availability and time management. Continue monitoring.

Strong Presence: Robust capabilities supporting staff development and excellence.

Developing Presence: Established practices with room for growth in impact.

Basic Presence: Beginning to implement practices but need development.

Limited Presence: Insufficient foundation for effective clinical supervision.

Strong Foundation (>1.5): Capabilities substantially outweigh vulnerabilities.

Healthy Balance (1.26-1.5): Good foundational support for supervision.

Moderate Balance (1.0-1.25): Capabilities slightly outweigh vulnerabilities.

High Risk (<1.0): Vulnerabilities outweigh capabilities. Requires attention.

Part 5 · Worksheet

Presence & Punctuality Worksheet

Profile Understanding

Which aspect represents your greatest strength?

What specific challenges have you noticed?

What situations compromise your presence most?

Strategy Development

How does understanding presence as a skill change your approach?

Strategies for maintaining consistency:

Balancing availability with sustainability:

Action Planning

Priority Area 1

Specific Capability

E.g., Crisis Response Availability

Measurable Goal

Action Steps

Timeline

Accountability

Priority Area 2**Specific Capability**

Measurable Goal

Action Steps

Timeline

Accountability
