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# CASE CLINIC

Facilitation guidelines



# CASE CLINIC FACILITATION GUIDELINES

Case Clinics is a format that guide a group of peers through a process in which a **case giver** presents a case, and a group of 4-6 peers help as **consultants**.

The priority is the professional development of ALL participants through **collective thinking and reflecting**. It's more about learning how to dig into a situation than an exercise of brainstorming for "innovative solutions"

## 3 KEY POINTS TO KEEP IN MIND

### 1. KEEP A SAFE SPACE

→ Explicit the rules from the start :

- We are here to reflect together on "case giver name" situation, explore the problem so that we can come up with a better understanding to "case giver name" and ourselves and come up with new perspectives and adequate solutions.
- We are committed to listen deeply, with care and delay judgment.
- We give examples, not advices, even less prescriptions.
- Everything that is said during this session stays here.
- The comfort of each one of us is very important, please don't hesitate to express yourself anytime you start feeling uncomfortable with anything.

→ Don't hesitate to check on all participants comfort from time to time: Are you comfortable ? Is there anything you'd like to clarify at this point?

### 2. TAKE TIME TO CLARIFY THE PROBLEM

→ Help consultants take the needed time to fully understand the situation, during step n°2 and 3 don't hesitate to ask questions yourself to the case presenter if you feel the questions are too superficial:

- Who are the people involved, what do we know about them?
- How does the case presenter feel about them?
- What interactions do they have? Why?
- What is it that makes the case presenter uncomfortable about the situation?
- Why is it important?

Clarifying the problem is a key step in the process, even more than spending time coming up with either "ready made" or crazy solution that won't actually help. Time in step n°2 (Clarification) should be at least equal or superior to that of step n°4 (Discussion).

### **3. RELY ON THE CASE CLINIC FRAMEWORK**

→ Make sure you and/or the group don't transform an element of the problem into the problem.

- Example: The discussion gets personal with the case presenter saying something like "The person I work with on that project is not trustworthy". Make sure you don't start focusing on that person, instead try to drive the group back on the original problem with questions like "ok, thank you for sharing that, can you tell us what is the question you are asking yourself about this situation? Toward which outcome would you like to get to? What is prevent it you from take action toward that outcome?"

→ Do not allow consultants to act as "experts" or "psychotherapists".

- Do not allow the group to orientate or influence the objective of the case giver (step n°3: Consulting contract).
- Invite participants to share their experience more than their knowledge or ideas. "Your situation reminds me of that time when...." Instead of "I think you should ..."

→ Keep a good track of time to allow a proper closure with the opportunity for the case giver to give their feedback on the process. If any, take time of step 4.