Clinical Supervision

Best Practices in Clinical
Supervision - Part 2 of 2

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Mental Health and Substance Use Recovery Conference 2020

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A Division of the Department of Health & Human Services

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Objectives

- Define Clinical Supervision
- Learn the goals of Supervision
- Identify competencies and qualities for Supervisors
- Roles of Clinical Supervisors
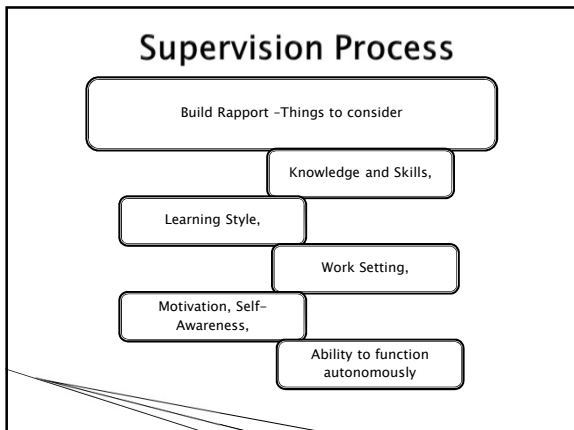- Identify the principles of Supervision

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Supervision Process

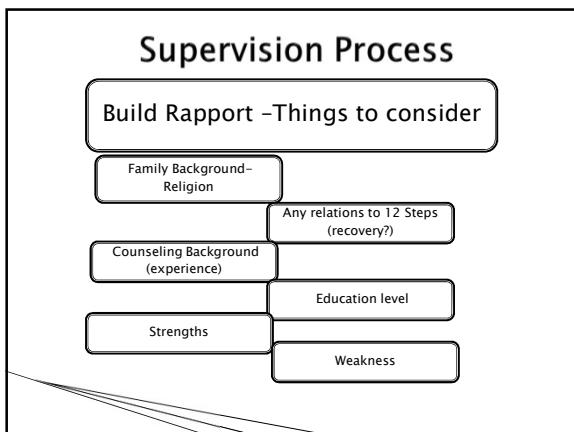First tasks in clinical supervision is establish a contract.

Expectations from both parties

Outline the requirements of supervision in the contract.

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Supervision Process

Build Rapport –Things to consider

Knowledge and Skills,

Learning Style,

Work Setting,

Motivation, Self–Awareness,

Ability to function autonomously

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Supervision Process

Build Rapport –Things to consider

Family Background–Religion

Any relations to 12 Steps (recovery?)

Counseling Background (experience)

Education level

Strengths

Weakness

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Developing Goals

Mutually developed goals:
‣ Enhances the relationship

‣ Offers the supervisee a plan for professional development

‣ Provides direction for professional growth

‣ Helps document strengths and weakness

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Developing Goals

Effective goals should be:

▸ "SMART" specific, measurable, attainable, realistic and time related

▸ Each goal should include action steps to reach targeted goal

▸ Specific procedures should be documented to evaluate the outcome

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Individual Development Plans (IDP)

Most effective way to document progress of supervisees goal attainment (required)

▸ Mutually developed document that list goals, objectives, and benchmarks.

▸ Utilized as primary framework for organizing and managing the supervisee knowledge and skill base.

▸ Effective when the Supervisee is involved in maintaining accountability for his or her own progress

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Models and Theories

Approach (axiomatic)

Method (procedural)

Technique (Implementational)

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Psychotherapy-based Model

- Supervisory concern with supervisee's personal issues that may influence how they provide counseling often becomes a primary focus.
- Views Supervision as a continuation of the supervisee's own analysis.
- The Supervisee experiences may resemble therapy to a degree that personal issues may be interfering with client care.
- Presumes that parallels exist between counseling and supervision such that dynamics of one relationship(supervisee-client) are also experienced in other relationship(supervisee-supervisor)

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Person-centered Supervision

- Originated with Carl Rodgers who was one of the first to combine didactic training with electronically recorded interviews and transcripts in supervision.
- Emphasizes teaching of skills through a therapeutic experience.
- Focus is on personal growth and self-exploration with strong emphasis on the relationship with the supervisor.
- Emphasis on helping the supervisee grow in self-understanding and self-efficacy
- Difficult to distinguish supervision from therapy

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Cognitive-behavior Supervision

- Emphasizes challenging cognitions and misperceptions of the supervisee with the goal of learning therapeutic behavior.
- Primary goal is to ensure quality care of clients by enhancing the professional functioning of the supervisee.
- Teach appropriate therapeutic behavior while extinguishing inappropriate behaviors
- Assist the supervisee in developing, applying, and refining new skills
- Skills are defined in behavior terms and employ adult learning theory

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Developmental Approach

- A multi-dimensional approach the acknowledges the significance of understanding each supervises level of professional growth.

- Recognizes developmental stages a supervisee moves through in their professional development.

- Multi-stage developmental model of supervision, suggest four stages of counselor growth:

- Each developmental level is determined by assessing the supervisee on eight specific domains of clinical activity

- (intervention skills, assessment techniques, interpersonal assessment, client conceptualization, individual differences, theoretical orientation, treatment plans and goals, and professional ethics).

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Developmental Approach

- Professional growth is an ongoing process

- The goal is to move the supervisee from one stage to the next

- Fosters growth for the supervisee toward independent functioning

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Discrimination Model
(process model)

- Primary intent is to assist supervisors in discriminating among choices they have in approaches with their supervisees

- Developed primarily to assist novice supervisors and includes:

- Three supervisor roles (Teacher, Counselor, or Consultant)

- Three focus areas (Intervention, Conceptualization, and Personalization)

- DM is seen as a tool to use along psychotherapy- based and or developmental models

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Eclectic Approach

- Most Supervisors adhere to principles and processes from more than one theory.

- Most Supervisors find approaches that fit with their own personal style of supervision while maintaining flexibility to meet the needs of each supervisee.

- Clinical supervision require contextual flexibility in order to best address a mix of distinctive factors relevant to each supervisory relationship and each unique supervisee.

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Observation

- To have an accurate picture of the counselor frequent observation over a period of time is essential

- Live observation is reinforced by a recorded session the supervisor and supervisee can review together.

- Traditionally indirect observation, case notes, process recordings, and verbatims were recommended.

- Direct observation has become cornerstone of blended model of supervision.

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Individual Supervision

Traditionally the primary modality for clinical supervision, individual, face to face supervision is the most widely used format in the counseling profession.

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Individual Supervision

- Case Consultation: Case Presentation where the supervisee may be asked to organize a case by using an agreed upon format

- Information about the client progress, interventions made, dynamics of the therapeutic relationship, the supervisees prognosis, and his or her conceptualization of the case

- A crucial task of the supervisee is to effectively conceptualize a case so that appropriate treatment goals are developed, and therapeutic actions taken

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Process Notes

- Supervisee documents client information however can be distorted or biased.

- May have difficulty articulating their thoughts in writing witch can be an obstacle rather than tool.

- The supervisor can review the supervisee ability to conceptualize client information by reviewing process notes

- Opportunity for the supervisor to consider the content of the note as the supervisees account of the therapeutic process.

- Can provide relevant material to discuss in clinical supervision which can lead to new insight

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Videotape Supervision

- Videotape supervision is easy, accessible, and relatively inexpensive

- Complex tool, powerful and dynamic

- Clear goals must be set to determine why, when, and how VTS will be conducted

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Videotape Supervision

‣ Interactions processes recorded on the tape should be contextualized.

‣ Tape Segments should be selected for review because they provide teaching moments, not pretexts for scoring critical points.

‣ The Supervisor should provide gradual feedback not a litany of judgements.

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Group Supervision

‣ One of the most influential aspects of professional growth for counselors is interaction with other members of the clinical team.

‣ Vicarious learning occurs from peers while discussing their conceptualizations and interventions with clients.

‣ The supervisor is responsible for the group dynamics and should set the stage.

‣ Group supervision will follow the same processes that occur in therapy groups and thus will progress through typical stages of group development.

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Advantages of Group Supervision

1. Members are exposed to a variety of roles and styles

2. Feelings of inadequacy and anxiety are universalized

3. Members receive input on cases and techniques

4. Affective responses are elevated thus provoking more excitement

5. Interpretations are challenged and redirected with alternatives

6. Lasting professional friendships are formed through mutual support

7. Interventions and demonstrations by the supervisor are directed at the entire group.

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Peer Supervision

‣ Efficient means of providing feedback to counselors.

‣ Small groups two to six people, with counselors engaged in individual and/or small group supervision of one another, using techniques and methods of observation used by supervisor.

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Peer Supervision

‣ Not to substitute for a supervisor but a way to supplement an overworked supervisor.

‣ To make peer supervision effective structure the training with clear, measurable learning objectives.

‣ Peer supervision assumes some degree of equality among participants, who can function as colleagues, and best done by experience counselors.

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Fostering Motivation

‣ Clinical Supervisors have indirect influence on each supervisee's intrinsic motivation

‣ Clinical supervisors should utilize motivational interviewing approach to provide motivation to their supervisee's

‣ An atmosphere of high trust and openness will be a great benefit in developing an effective supervisory relationship.

‣ Potential for increased confidence and professional growth for supervisee's

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Technology –Based Supervision

The innovative uses of technology allow less intrusive means of observation, enable supervisee's in remote areas to receive supervision.
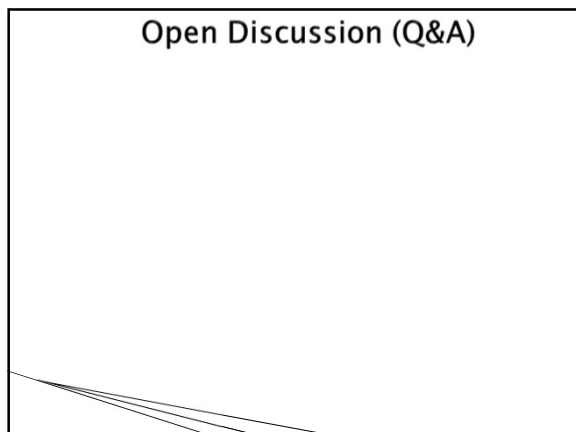
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Key Benefits of Tech Supervision

1. Increased access to quality supervision
2. Enhances cultural humility
3. Strengthens professional identity
4. Supports program integration
5. Shepherds in a new era of technology
6. Promotes fidelity to evidence based practices

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Legal and Ethical issues of Tech Supervision

1. Privacy personnel and policy (**establishment of privacy policies and privacy training of personnel)**
2. Limitations on the use of confidential information **(coverage and limits to disclosures of PHI)**
3. Clients rights **(such as rights to view a provider's privacy policy, to review one's own PHI, and rights to questions and complaints about their PHI)**
4. Security procedures **(establish procedures for the security of electronic PHI)**
5. Preemption **(HIPAA can only be preempted by any state law is more stringent)**

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Open Discussion (Q&A)

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