SUPERVISION INTERVENTIONS
INITIAL CRITERIA FOR CHOOSING SUPERVISION INTERVENTIONS

- The developmental level of the supervisee
- Theoretical orientation of the supervisee and supervisor
- The setting in which supervision is occurring
- The role of the supervisee in that setting
- The purpose of supervision
- Professional standards
Consider:

- What are the needs of the supervisee?
- What is the goal of supervision today?
- Over what period will supervision occur?
- Is this method consistent with my style and orientation?
- How can I become more skilled in this approach?
- What are the limits of my areas of expertise in providing supervision?
- How will I evaluate the effectiveness of the method?
PHASES OF THE RELATIONSHIP DETERMINE METHODS

- Novice clinicians require an approach that is supportive, structured and allows close monitoring.
- Middle phase supervisee becomes more actively involved and confident and require methods that are flexible.
- Terminating supervisees require methods that empower.
QUESTION

What supervision method were used in your own supervision experience?
Which were most comfortable for you?
Least?
METHODS, FORMS, AND TECHNIQUES OF SUPERVISION

- Verbal Exchange
  - Self-report/Case Consultation
- Direct Observation
  - Co-therapy
  - Live Observation
  - Audiotape
  - Videotape
- Other Methods
  - Computer assisted technologies
  - Modeling and demonstration
  - Role-playing
  - Coaching
  - Homework
  - Written material
INDIVIDUAL SUPERVISION

- Does NOT allow the supervisee to gain from the knowledge and input of others (as in group supervision)
- Does NOT allow the supervisor to observe parallel processing as a key to how the supervisee might interact with clients
- Most effective in conjunction with group supervision methods
SELF- REPORT/CASE CONSULTATION

- Supervisee describes his or her clinical activities
- Explains case conceptualization
- Other supporting data may or may not be required (case notes, recordings, etc.)
- Can include discussions about:
  - Client’s purpose for seeking therapy, diagnostic formulations, therapy techniques used, relationship issues, ethical, legal and multicultural issues
- Best used to gather supervisee’s perceptions of counseling because it is based on the memory of the events
SELF-REPORT/CASE CONSULTATION

- Effectiveness depends largely on supervisee’s ability to be accurate and straightforward
- NOT recommended as the sole method, especially with students and novice counselors
- Most effective when used with other methods
DIRECT OBSERVATION METHODS

- Co-therapy
- Observation
- Videos

- Protects the client, the supervisee, and supervisor
- Used in conjunction with self-report will give supervisor a more accurate reflection of supervisee’s work and skill level
CO-THERAPY

- Supervisor and supervisee work together as co-therapist for an individual or group
- Important to discuss roles first
- Sometimes it is difficult for the supervisor to allow the supervisee to struggle and learn
- Client may discount supervisee in favor of the supervisor which may hurt training experience
  - Triangulation
- Provides an arena for the supervisor to model and demonstrate
- Affords a firsthand view of supervisee skills
- May provide most accurate information about supervisee
LIVE OBSERVATION

- Supervisor or team directly observes supervisee through a one way mirror or on a video monitor
- Focus on the session and supervisee skills
- Written permission from the client is necessary
- May happen every session or only occasionally
- Used in conjunction with case consultation
LIVE OBSERVATION

- Supervisor can remain silent or interrupt either with or without the client present
  - Built in breaks
  - Take over session
  - Be aware of triangulation issues: welfare of the client, dignity of the supervisee

- One-way mirror
  - Client and supervisee cannot see supervisor, but both are aware of his/her presence
  - Supervisee has access to audio
  - “bug in the ear”
  - Buzzer, telephone, pre-arranged breaks, or code word
LIVE OBSERVATION

- **Videotaping**
  - Supervisee tapes one or more sessions with a client or group to be used in supervision sessions
  - Tape can be stopped and replayed as necessary
  - Particularly useful with novice counselors
  - Role playing can be utilized
  - Supervisee can observe his/her progress over time
  - Technology issues (poor quality) can be a disadvantage
  - IPR Sessions

*Therapy training tapes at various skill levels to be used during supervision are another way to use video technology*
LIVE OBSERVATION

- Audiotaping
  - Lacks the use of video because supervisor cannot observe body language and other nonverbals
  - Technological limitations are similar to videotaping
  - Used during supervision sessions in the same way as videotaped material

- Audio and Video
  - Client permission/consent is necessary and confidentiality standards apply
LIVE OBSERVATION VIA WEBCAM

- Useful in distance learning
- Very little research
- ACA Ethical Standards for Internet On-line Counseling
COMPUTER ASSISTED TECHNOLOGIES

- VOIP (Skype), email, IM,
- Consider the ethical ramifications even though the codes may not specifically address this form of supervision
- Supervisory relationship should be established face to face
- Clients must be informed of the nature and potential hazards and give their consent
- Client identity should be protected
- Assess and evaluate the effectiveness of this type of supervision
ROLE PLAY AND ROLE REVERSAL

- Used in individual or group
- Role reversal facilitates the development of empathy in the supervisee
- Allows the supervisee to view the issues from the supervisory role
MODELING AND DEMONSTRATION

- Teaching supervisee through supervisor behavior
- Modeling
  - Ethical decision making
  - Case conceptualization
  - Problem solving
  - Applying interventions
  - Attitudes, beliefs, and behaviors
  - Constant throughout supervision
- Demonstration
  - Intake sessions, managing an angry client
  - One of many ways rather than the only way
  - Empowerment is key
COACHING

- Function less as an authority and more of a personal advisor focusing on the agenda of the supervisee
- Similar to Person-Centered - supervisees are encouraged to examine the issue and arrive at their own conclusions

Better for experienced trainees and peer supervision rather than novices
- Aimed at developing supervisee autonomy and self-direction

“What do you want from me?” “What do you need to learn?” “How can we best accomplish that learning?”
METHODS USING WRITTEN INFORMATION

- Process notes
  - Outline supervisees conceptualization including Dx, goals, objectives, treatment strategies

- Progress notes
  - More factual
  - What actually took place

- Logs, notes, journaling, verbatim transcriptions

- Can be used in conjunction with any other methods
METHODS BASED ON PSYCHOTHERAPY THEORIES

- Psychodynamic
  - Pay attention to parallel process
  - Understand resistance and conflict
  - Patience, trust in the process

- Person-Centered
  - Less didactic
  - Genuineness, empathy, understanding, and warmth
  - Theory of process

- Cognitive Behavioral and Behavioral
  - Systematic method and structure
  - Mental practice, modeling, cognitive restructuring
  - Emphasis on improving skills and reduce anxiety
METHODS TO ADDRESS NON-THERAPY RELATED ISSUES

- **Homework**
  - Readings, viewing tapes,
  - Clinical, ethical, legal, etc. topics
  - Saves time so supervision can focus on supervisee needs

- **Verbal Exchange/Coaching**
  - Professional goals
  - Preparation for licensing
  - Agency bureaucracy
  - Coping with burnout
  - Personal development
  - Conflict
  - Working with other helping professionals
REFERENCES


