Supervision: Roles Responsibilities and Methods

Defining Supervision

Several definitions for supervision follow:

- Loganbill, Hardy, and Delworth (1982) understand supervision as "an intensive, interpersonally, focused one-to-one relationship in which one person is designated to facilitate the development of therapeutic competence in the other person" (p.4).
- Hart (1982) suggests supervision is "an ongoing educational process in which
 one person in the role of supervisor helps another person in the role of
 supervisee acquire appropriate professional behavior through an examination of
 the trainee's professional activities" (p.12).
- Bernard and Goodyear (2004) define supervision as "an intervention provided by a more senior member of a profession to a more junior member or members of that same profession. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s), monitoring the quality of professional services offered to the clients that she, he, or they see, and serving as a gatekeeper for those who are to enter the particular profession" (p.8).

The Role of the Supervisor

What is the role of the supervisor? Just as in many questions in the counseling field, there is no simple answer to that question. Different theorists will give different answers. I believe the best answer to that question is that the role depends upon the needs of the supervisee in working with a given client. The role of the supervisor should be one of flexibility in order to meet the training needs in a particular situation. The supervisor should assess the skill level and abilities of the supervisee and utilize methods that provide the optimal level of challenge and support (Corey, & Callanan, 2003). Supervision involves assessing the current abilities and skill level and determining what methods would be most effective in assisting the supervisee to move to the next level. It is important to note that counselor development is not a consistent and even process. Supervisees will fluctuate in their skill level dependent upon the type of client with which they are working. Challenging clients may result in

a regression on the part of the supervisee. At times the supervisor may have to be more directive and involved. As the supervisee grows and develops, the relationship should transition to a more collegial and egalitarian consulting partnership.

There are similarities between supervision, teaching, counseling, and mental health consultation. However, each has distinctive qualities. The following chart helps to delineate some of these distinctions.

Supervision versus Teaching Counseling, and Consultation

	Similarities	Differences
Teaching	 Both have the purpose of imparting new skills and knowledge Both have evaluative and gatekeeping functions 	 Whereas teaching is driven by a set of curriculum or protocol, supervision is driven by the needs of the particular supervisee and his or her clients
Counseling	Both can address recipients' problematic behaviors, thoughts, or feelings	 Any therapeutic work with a supervisee must by only to increase their effectiveness with clients Supervision is evaluative, whereas counseling is not Clients often have greater choice of therapists than supervisees have of supervisors
Consultation	Both are concerned with helping the recipient work more effectively professionally; for more advanced trainees, the two functions may become indistinguishable	 Consultation is a relationship between equals, whereas supervision is hierarchical Consultation can be a one-time event, whereas supervision occurs across time Consultation is more usually freely sought by recipients than is supervision Supervision is evaluative, whereas consultation is not

(Table reproduced from Bernard & Goodyear, 2004, p. 9)

Supervisor Role	Beginning Supervisee	Intermediate-Level Supervisee	Advanced-Level Supervisee
	Teacher / Monitor	Evaluator / Challenger	Colleague / Consultant
	Dependent	Conflictual	Autonomous
	Goals set by supervisor	Mutual goal setting	Goals set by supervisee

METHODS USED IN SUPERVISION

- Because verbal exchange methods rely exclusively on the supervisee's self-report, the use of this method alone is no longer acceptable, especially with students and novice therapists
- Supervisors are strongly encouraged to ensure that supervisees have adequate skills by observing their clinical work

METHODS USED IN SUPERVISION

Case Consultation

- The case consultation method involves a discussion of the supervisee's cases, and it is the most common supervision method
- The supervisee may be able to conceptualize well, but his or her actual performance may be another matter
- In addition, the supervisee's perception of what is going on may not accurately depict the reality of the situation
- It can be very effective when used with other methods

Cotherapy

- Sometimes supervisors can take over and do therapy the way they think it should be done, not allowing the supervisee to struggle and learn in the process
- The client may discount the supervisee in favor of the supervisor as the therapist, which can have a negative effect on the supervisee's training experience
- Cotherapy cuts through the "talking about" therapy problems and can provide an exciting in the moment training experience

Live Observation

- The supervisor or observing team directly observes a supervisee in action either by sitting in on a session or through a one-way mirror or on a video monitor
- Using a one-way mirror is an effective way to observe the work of the supervisee directly and to intervene as the work of the supervisee is in progress
- It does require the physical set-up of the two rooms, the one-way mirror, and the audio equipment
- The permission and the cooperation of the client(s) is also required in the process

- The supervisee arranges to video record one or more sessions with the client or group and views them in supervisory sessions
- Video recording is useful and can be preferred over live supervision for several reasons
 - Crucial segments of the interaction can be played as many times as needed to review the interaction
 - Role playing of alternate methods can be conducted with the supervisee and supervisor
- Recording sessions at various stages of therapy provides a comparison of the supervisee's progress as a therapist
- The major drawback to video recording is the possibility of technical complications

INTERPERSONAL PROCESS RECALL

- In this method, supervisees are video recorded while seeing a client and then shown the recording immediately following the interaction
- When the recording is reviewed right way, supervisees are able to recall thoughts and feelings they experience during the therapy session in detail, but for various reasons, did not express
- The primary task of the supervisor is to assist the supervisee in investigating his or her own internal processes, including motives, thoughts, and feelings
- Supervisors might ask the following questions during an IPR session:
 - What were your thoughts, feelings, and reactions?
 - o Did you want to express them at any time?
 - What would you like to have said at this point?
 - What was it like for you in your role as a therapist?
 - What thoughts were you having about the other person at this time?
 - o Did you have any ideas about what you wanted to do with that?
 - Were there any pictures, images, or memories flashing through your mind then?
 - o How do you imagine the client was reacting to you?
 - Oid you sense that the client had any expectations of you at that point?
 - What did you want to hear from the client?
 - What message did you want to give to the client?
 - What prevented you from doing so?

AUDIO RECORDING

- Although audio recording is not as useful as video recording because it lacks the information provided by observing body language and facial expressions, these methods share many of the same advantages and disadvantages
- If live observation or video recording is not possible, audio recording is a viable alternative

TECHNOLOGY-ASSISTED TECHNIQUES

- Some of the more common computer-assisted techniques and online supervision include live supervision using the "bug-in-the-eye," email, chat rooms, instant messaging, live supervision through videoconferencing, and desktop videoconferencing
- Emerging technologies in supervision also present new ethical challenges for supervisors to consider
- Internet security and privacy in general cannot be guaranteed
- Clients must be informed if supervision of their therapist is occurring online, and they must give consent to such practices

RECOMMENDATIONS FOR SUPERVISORS CONSIDERING THE USE OF ONLINE SUPERVISION

- Consider the ethical ramifications of online supervision even though the codes may not specifically address this form of supervision
 - TN rules supervision is "regular documented face-to-face or live video conferencing (with prior board approval based on hardship)"
- The supervisory relationship should be established face-to-face before online supervision is begun
- Clients must be informed of the nature and potential hazards of the use of online supervision and give their full, written consent
- The supervisor and supervisee should be very careful about disclosing identifying client information in online supervision sessions
- The supervisor and supervisee are encouraged to evaluate the use of the online supervision

ROLE PLAY AND ROLE REVERSAL

- Role playing, which involves acting out a variety of scenarios with the supervisor and supervisee acting as the therapist and client, can be a very effective supervision approach when used in conjunction with other methods described in this section
- Role reversal is a kind of role play in which the supervise plays the role of the client while the supervisor plays the role of the therapist

MODELING AND DEMONSTRATION

- Modeling is teaching the supervisee by means of observing the supervisor's behavior, showing how the supervisor would go about various professional tasks from ethical decision making to formulation and applying clinical methods
- Remember that as a supervisor your actions often speak louder than your words

COACHING

- Coaching is a new supervision method that was originally developed in management supervision as executive coaching and has been developed into the specialty of life coaching
- Asking the right question is often more important than having the right answer
- Coaching is similar to person-centered supervision: the job of the supervisor is to actively listen to supervisees to help them discover for themselves what they need to learn
- Sample guestions that a supervisor-coaches might ask of their supervisees
 - What is it that you would like to get out of supervision?
 - What will you need to know and be able to do to be a competent professional?
 - o Bottom line. What do you need from me right now?
 - What do you think you will have to do to solve this problem?
 - o How do you want to tell me about your successes?

HOMEWORK

 The use of homework can expedite supervisees' learning because it reduces the need to spend time during supervision sessions covering basic concepts that could easily be learned outside of supervision and increases the time available in supervision to discuss cases in greater depth

METHODS USING WRITTEN INFORMATION

 Written information from the supervisee may also include logs, notes, journaling verbatim transcriptions of sessions, process recording, case review forms, handouts, journal articles, and other reading assignments

NONLINEAR METHODS

- The use of artwork
 - For example, the supervisor might draw on a pad of paper a representation of what he or she is hearing the supervisee saying
 - The supervisor could ask the supervisee to draw a visual representation of a dilemma the supervisee is experiencing in clinical work
- Sand Tray
 - A box with sand in it, and the supervisee's task is to arrange a number of figures and items provided
 - Some examples of questions that might be explored in the supervisory session when using the sand tray:
 - What would the relationship between you and the client look like in the sand?
 - What happened in that session?
 - Describe the session in the sand.
 - If you wished for change in that and tray depiction, what might you do?

WHAT SUPERVISORS SAY TO SUPERVISEES

- Notice that, in most cases, the focus of the statements and questions are on the thoughts, feelings, and actions of the supervisee rather than suggesting what the supervisee should do
- Some questions and statements focus on the content of supervision:
 - What would you like to accomplish during the course of our supervision together?
 - Let's talk about the topics and issues you might bring to supervision to discuss.

- What ground rules do we need to establish how will we work together in a way that will help make our supervisory sessions a safe place for you?
- Some questions and statements focus on the content of supervision:
 - How can we work together to help you become a more confident and competent clinician?
 - Where can you go to seek out more information on those topics?
 - What experiences have you had in your lifetime with other cultures?
 - What do you need to learn about multicultural issues in dealing with your clients?
 - How do the gender differences in this case affect your work with the client?
 - What do the legal, ethical, and professional standards indicate regarding this issue?
- Some questions and statements focus on the content of supervision:
 - Let's talk about how we will handle the evaluation portion of your supervision.
 - How could it be most useful for you?
 - Where are you headed with this client?
 - What are your goals for the client?
 - What are the client's goals?
 - O How do you feel about the work you did with this client?
 - How did the client affect you?
 - o Can you give me three different approaches for addressing this issue?
 - o How would you like to go about resolving this?
 - What are the options?
 - Which option best serves the goals of the client?

OTHER QUESTIONS AND STATEMENTS FOCUS ON THE SUPERVISEE'S SELF-REFLECTION IN A WAY THAT BALANCES CHALLENGE AND SUPPORT:

- What can I do as your supervisor to help you be open to hearing my feedback?
- I struggled with this when I was at the beginning stage of training as a clinician, and this is what I learned.
- Can you practice the words you will use to convey your concerns?
- What was this supervision session like for you? Was it helpful?
- What were you thinking or feeling when we were discussing this case?
- Can you help me understand the direction you were taking at this moment with the client?
- Talk out loud about your decision in choosing that particular approach.
- If you were to have a second chance at that session, what might you have done differently?

- What did you think was going on in session? With the client? About how you thought the client was perceiving you?
- In what way does our relationship parallel your relationships with clients?
- How do you react to your clients?
- Which clients lead to countertransference issues for you?
- Which of your values come into play in your therapy work?

SUGGESTIONS FOR PRACTICAL APPLICATION FOR METHODS

- Ask open-ended questions of supervisees to facilitate discussion
- Include some direct observation of the supervisee in action with clients during supervision. You want to "oversee" what the supervisee is doing, not just "overhear" what the supervisee is telling you
- Adapt your supervision methods to fit the learning style of supervisees. Invite them to give feedback regarding how those methods are working for them
- A major task of supervision is to help the supervisee conceptualize what is going on with the client (or other situation) and how to proceed. This is often difficult for supervisees who may want the supervisor to simply provide answers to their questions
- Remember that supervision is a collaborative process; supervision methods are most effective when applied in that spirit
- Because of their primary training as therapists, many supervisors focus more on the therapy with clients than on the learning and development of the supervisee
- Be supportive, facilitative, and structured with inexperienced clinicians, be sensitive to the fact that supervisees are most likely anxious about their skills and abilities and want to perform well for their supervisor
- Challenge supervisees to explore thoughts, feelings, and reactions to clients and to supervision. As they develop into more experienced clinicians, allow them to take the lead in supervisory sessions and provide their own self-supervision as you work toward empowering them
- Model responsibility by keeping to your scheduled supervision appointments and sticking to the primary tasks of the supervision. Supervisors sometimes let topics drift into less relevant, but more interesting, discussions in supervision
- Maintain a healthy perspective on your role as a supervisor. Learn from your supervisees and your supervisory experiences. Don't feel as though you must have all the answers for your supervisees
- Some clients may not welcome supervisory methods such as video/audio recording or live supervision. Be sensitive to the client's needs and desires in this regard
- Have fun with your supervisory experiences while maintaining proper professional boundaries