

Supervision Pragmatics - Part 1

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The following pages include a variety of forms and suggestions to help you get started in your supervisor role. The items are listed below, along with their source.

1. **Pre-supervision meeting form - (Morgan)**
(One form that may be used to guide some aspects of the initial meeting with a supervisee).
2. **Role Induction Ideas - (Morgan)**
(Some ideas for helping supervisees understand the process and roles in supervision)
3. **Preparing for Supervision - (Morgan)**
(Form to share with supervisees to guide their preparation for weekly supervision)
4. **Weekly Supervisor / Supervisee Note - (No idea)**
(Sample forms that can be used by the supervisor and supervisee in individual supervision)
5. **Live Supervision Forms - (Heath, Pilar, Morgan, Morgan)**
(Four examples of forms that may be used to organize and track live supervision).

Pre-Supervision Information Meeting

Supervisee's Name: _____ **Date:** _____

Acquaintance:

- Spend a few minutes getting acquainted (basic background, interests, etc.)
- Why were you drawn to this profession?
- What life experiences have you had that will help you be effective (think broadly)?

Supervision Role Induction:

- What it is for: (protect clients, protect profession, skill development, counselor growth, etc.)
- What it is not: (counseling by proxy, personal counseling, "skill showcase," etc.)
- What you expect of the counselor: (on-time, prepared, willingness to share both successes and failures, open to feedback, willing to look at own contribution to case dynamics, etc.)
- What you will provide: (suggestions, ideas, sounding board)
- What you will do together: (discuss each case every week, review recorded sessions, review client documentation, practice / role-play skills & new ideas, review counselor skill development, discuss counselor strengths / growth areas, encourage counselor self-care and self-growth, etc.)

What do you want to get from supervision:

Preferred style?

Preferred emphasis?

What concerns / fears / anxieties do you have about supervision & counseling?
(Supervisor shares own as well)

What do you see as your strengths and growth areas?

How might the one also be the other?

What do you believe clients need from counseling?

Do you find yourself drawn to any particular theory or approach?
(Supervisor shares own as well)

Are you aware of any self-of-therapist concerns that might impact your work?

Other Things to Potentially Discuss:

- Past supervision experiences (both good and bad—what they liked and didn't like)
- How will I know when there is an issue between us? How will we resolve it?

Supervision Role Induction Ideas

For many of your supervisees, this is their first experience with clinical supervision. You can help them make the most of the process, and prevent some confusion or other problems by helping them to understand what supervision is about, what it isn't, and how to best make use of the time you spend together.

Some things you may want to discuss with your supervisees early in the process are:

- Supervision is to help them grow and become the best clinician they can be, and so involves taking risks—trying new things, being okay and learning from mistakes. Supervision is not about criticizing their skills or their character, but helping them develop their skills and knowledge, grow as professionals, while insuring that clients are protected and helped. Supervision will involve both supporting and challenging the clinician. In triadic supervision, both supervisees are active.
- Supervisors don't expect perfect performance; supervision is a place to discuss mistakes and struggles, as well as to share successes and strengths.
- Supervisor suggestions are just that - suggestions. The supervisee needs to make the final decision about what to do (except in cases of safety or standard-of-care issues).
- Effective supervisees learn to identify and then ask for what they need in supervision, including coming prepared (having reviewed / marked sessions, and knowing what they want).
- Structure and Content of Supervision: The supervisee is responsible for the agenda, which should include at least a brief review (for progress and safety) of all the supervisee's clients. The content of weekly supervision may involve the following: Clients - new cases, Diagnosis, progress, conceptualization, multicultural / ethical concerns, safety issues, goals, treatment planning. Counselors - skills / techniques, theory development, personal issues, professionalism. Administration - client paperwork, letters, counselor evaluations, etc.
- Supervision is not counseling. Although we sometimes address personal issues of the counselor, we do this only as they relate to clinical work. If it seems that a counselor may benefit from some counseling (and this is true for most students - it doesn't mean there's something wrong with you, it just means that you're growing, and some personal work will help you be a better counselor) we will recommend and help you connect with a counselor, and/or explore other ways to work through personal patterns or concerns that may be impacting your clinical work.
- Supervision works best when counselors and supervisors can share concerns with each other about their relationship and how they are working together. (If there is a problem, talk about it).
- Confidentiality in individual, triadic, and block supervision: In general, the content of their supervision sessions is confidential unless there is a concern about harm to clients or ethical violations. What is happening in their personal lives is confidential unless they are a risk to themselves, others, or if it is / might interfere with their counseling. Triadic partners and block members should hold session content and all block discussions as confidential. Although you (supervisors) discuss supervision sessions in the supervision class, the focus is first on your development as a supervisor, and second, on facilitating counselor growth. All (instructor, other supervisors) will hold any information as confidential. You play a gatekeeping role and are obligated to report to faculty if you have concerns about a counselor's developmental progress or competence as clinicians and professionals, or any ethical concerns.

Some things to share with them about Supervisors:

- Supervisors are human too: they make mistakes, and worry about being good supervisors. They don't have all the answers, but will usually help find them.
- Supervisors want you to be successful.
- Supervisors can't read minds. Ask for what you need and want. You may not always get it, but most supervisors will try to help you get your reasonable needs and wants met.
- Supervisors have personal issues too, and sometimes they get in the way. Most of them want to know if this happens.
- Supervisors want both to give and receive feedback.
- When supervisors discuss the supervision they provide in class, it's about them, not you.

Preparing for Supervision

Your growth as a clinician is improved when you are prepared for supervision each week. Preparation includes doing, thinking and planning related to the following items, and then making decisions about what you need to focus on during your supervision:

Clinical Session Recordings

- Review your recordings and mark meaningful segments (at least 5 minutes) related to:
- What went well? (things related to past supervision challenges, suggestions, or growth what you want to share)
- Things you want help with (related to what the client does/says, things you do/say, or related to the relationship between you and your client).

New Clients

- Basic information from intake questions, reason for coming, impressions, concerns, safety issues

All Clients:

Conceptualization:

- What are the clients' concerns? Signs / Symptoms? How do you make sense of what your client is reporting and experiencing? Your process of differential diagnosis?

Goals:

- What are the treatment goals? What progress is being made on the client's goals (including your evidence)?

Approach:

- What approach are you using with the client? What are you doing in session with the client, and how is it working (think of evidence)?
- What might you like to try? How will you do it?
- What are your plans / hopes for the next session?

Relationship:

- What's the quality of your relationship like with the client (and what evidence do you have)? What might you do to improve things?

Concerns:

- Where are you stuck / confused with your client? What puzzles you about your client? What would you like to know? How could you find out?
- Discuss any real or potential safety, legal, or ethical, concerns.

Counselor

- What happens inside of you (thoughts, feelings, physiology) as you're with the client? Where do these thoughts, feelings and responses come from? How does this impact your counseling?
- Any professionalism issues?
- Where do you need to grow? What do you need to do to nurture self-growth?

Administrative

- Questions / concerns related to client documentation
- Other administrative concerns or questions

Weekly Supervisor Note

Supervisee: _____

Supervisor: _____

Date of Supervision: _____

Strengths:

Suggestions for Growth:

Any Safety Concerns:

Other Comments:

Goals for Next Week:

Clients Reviewed:

Client Initials	Discussed?			Viewed Recording?			Paper Work reviewed?		
1. _____	Y	N	N/A	Y	N	N/A	Y	N	N/A
2. _____	Y	N	N/A	Y	N	N/A	Y	N	N/A
3. _____	Y	N	N/A	Y	N	N/A	Y	N	N/A
4. _____	Y	N	N/A	Y	N	N/A	Y	N	N/A
5. _____	Y	N	N/A	Y	N	N/A	Y	N	N/A

Supervisee Signature

Date

Supervisor Signature

Date

Weekly Supervisee Note

Supervisee: _____

Supervisor: _____

Date of Supervision: _____

What I did well this week:

- 1.
- 2.
- 3.

Things I would like to / need to work on:

- 1.
- 2.
- 3.

Things I have improved or learned:

- 1.
- 2.
- 3.

Goals for next week:

Questions or concerns for supervisor:

Supervisee Signature

Date

Supervisor Signature

Date

Live Supervision Forms

Some supervisors use very specific forms to track live supervision. Develop and modify your own according to your own style, and needs, but use something to organize your feedback from live observations to your supervisees. Think also of how the form you use can be used by other students watching their peers, so that they have a formal way of providing written feedback to their colleagues.

I believe it's important to give these forms to the supervisee after the session is over.

The Live Supervision Form

_____ Date	_____ Time	_____ Room	_____ Session
Therapist: _____		Client(s): _____	
Session Objectives: 1. Follow-up on past assignments 2. 3. 4.		Other Requests of Observers:	
Therapist's Theoretical Orientation:	Skill Development Goals:	Session Themes & Hypotheses:	
Observations and comments: _____ _____ _____ _____ _____			
Messages and/or Assignments: _____ _____ _____ _____			
Summary of Observations and Comments:3. 1. _____ 2. _____ 3. _____		Next Appointment: Date: _____ Time: _____	
Recommendations for Future Sessions: 1. 2. 3.		Supervision Credit: Hours: _____ Supervisor Signature: _____	

Adapted from:

Heath, A. (1983). The live supervision form: Structure and theory for assessment in live supervision. In B. Keeney, ed., *Diagnosis and Assessment in Family Therapy*, (pp 143-154). Rockville, MD: Aspen Systems Corp.

Date: _____ Time: _____ Therapist: _____ Client: _____ Case #: _____ Session#: _____

Session Goals:	<input checked="" type="checkbox"/>	Session Themes / Quotes
1.	<input type="checkbox"/>	
2.	<input type="checkbox"/>	
3.	<input type="checkbox"/>	
Therapist's Goals for Self:	<input checked="" type="checkbox"/>	
1.	<input type="checkbox"/>	
2.	<input type="checkbox"/>	
3.	<input type="checkbox"/>	

Observations - Strength Areas	Observations - Working Edges
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Mid-Session Comments	Questions Out of Curiosity
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Possible Future Directions	Homework Assigned
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Duty-to-Warn Issues / Follow-up Issues	Next Appointment: _____
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Therapist: _____ Date: _____ Case: _____ Session #: _____

Session Goals

Therapist Goals

- 1.
- 2.
- 3.

- 1.
- 2.
- 3.

Therapist Requests:

Content / Process Observations

Case Conceptualization:

Growth Areas:

Strengths:

Follow-Up Issues:

Therapist: _____ Date: _____ Case: _____

Observer: _____

Positive Aspects:

Questions / Thoughts / Concerns: