

# Supervision

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Rehabilitation and Mental Health Counseling Program

University of South Florida

## RMHC's Mission

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The mission of Rehabilitation and Mental Health Counseling Program is to promote quality behavioral health care for all, particularly people with disabilities, and to help the state and nation meet their human service and workforce needs in the area of rehabilitation and mental health counseling through teaching, research and service. The program prepares students with a solid grounding to become Certified Rehabilitation Counselors (CRC) and Licensed Mental Health Counselors (LMHC)

# Field Work

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- A large part of the RMHC program is the field work component. Field placement experiences are where students attend a field course on campus as well as spend time at a partnered agency to gain real-world experience working with clients. Field work is an invaluable opportunity for students to put theory into practice.

# Field Placement Requirements

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Students in the M.A. program spend a total of 1000 hours in the field.

- A. 200 hours in practicum I (40 hours must be face-to-face client contact).
- B. 200 hours in Practicum II (40 hours must be face-to-face client contact).
- C. 600 hours in internship (240 hours must be face-to-face-client contact).

# Intern Tracking Paperwork

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- Over the span of the semester, the site supervisor is responsible for the following paperwork:
  1. Signing the Counseling Supervision Contract.
  2. Initialing the student's weekly hours on their Weekly Activity Log.
  3. Completing a Mid-term and Final Evaluation for the interning student.

# CACREP Supervision Requirements

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Students are required to have one hour of individual clinical supervision at their field placement site each week. This can be performed by a staff member with the following credentials: LMHC, LCSW, LMFT, or Licensed Psychologist. Supervisors must be on-site while students complete their hours each week.

# CACREP Supervision Standards

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- Site supervisors have:
  - (1) a minimum of a master's degree, preferably in counseling, or a related profession
  - (2) relevant certifications and/or licenses.
  - (3) a minimum of two years of pertinent professional experience in the specialty area in which the student is enrolled.
  - (4) knowledge of the program's expectations, requirements, and evaluation procedures for students.
  - (5) relevant training in counseling supervision.

# Defining Supervision

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“Supervision is 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 and hierarchical
- 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 (Bernard & Goodyear, 2014, p. 7).”

# Purpose of Supervision

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- To foster the supervisee's professional development through a supportive and educational format.
- To ensure client welfare.

# Stages of Supervisee Development: Integrated Developmental Model of Supervision

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**Level 1** supervisees are generally entry-level students who are high in motivation, yet high in anxiety and fearful of evaluation. **(Practicum 1)**

**Level 2** supervisees are at mid-level and experience fluctuating confidence and motivation, often linking their own mood to success with clients. **(Practicum 2)**

**Level 3** supervisees are essentially secure, stable in motivation, have accurate empathy tempered by objectivity, and use therapeutic self in intervention. **(Internship)**

Smith, K.L. (2009). A Brief Summary of Supervision Models. Retrieved from: [https://www.gallaudet.edu/documents/Department-of-Counseling/COU\\_SupervisionModels\\_Rev.pdf](https://www.gallaudet.edu/documents/Department-of-Counseling/COU_SupervisionModels_Rev.pdf)

# The Supervisory Relationship

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- Three person system: Client, Supervisee, and the Supervisor.
- Working alliance is a way to frame the supervision. Key ingredients include: Agreement on goals, agreement on tasks, and bonds.
- At the beginning of the supervisory relationship it is critical to discuss the roles of each party. A supervision contract is recommended for full transparency which USF provides. This can reduce anxiety from both the supervisor and supervisee.

# Helpful Supervisor Characteristics

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- Good clinical skills/knowledge.
- Accepting supervisory climate.
- A desire to train a supervisee.
- Matching the supervisee's level of development.
- Providing constructive feedback.
- Being empathetic
- Being flexible and available.
- Possessing good relationship skills.
- Clinical experience.

# Organizing Supervision

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- The supervisor must plan ahead and have a framework for how they will conduct supervision.
- Consider the following:
  1. Timing – frequency and duration of the supervision?
  2. Learning structure – co-therapy, assigned readings, listening to and/or watching counseling sessions, role plays etc.?
  3. Supervision structure – individual, group, combined?
  4. Agency conformity – specifics related to agency policies ie. dress code, rules, record-keeping.
  5. Special conditions – anything else that is important for the supervisee to understand.

# Supervision Interventions

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- Self report
- Process notes
- Audiotape
- Videotape
- Live observation

# Providing Effective Feedback

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- Be specific.
- Acknowledge strengths.
- Discuss the knowledge, skills, attitudes that require attention.
- Frame competence with a developmental orientation.
- Invite supervisee reflection.
- Discuss learning strategies to move forward. Make sure these are clear and concrete.

# Helpful Question to Ask your Supervisee When Reviewing their Clinical Work

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1. How did that make you feel during session?
2. What would you have liked to have said to your client in that moment?
3. What's happening here?
4. If you had more time, where would you have liked to have gone?
5. What was going through your mind at the time?
6. Were you able to say it the way you wanted?
7. Did you want to say anything else?
8. What other intervention may have been helpful?
9. What were you hoping to hear?
10. What did you really want to say to your client in this moment? And what held you back?

Bernard, J. M., & Goodyear, R. K. (2009). *Fundamentals of clinical supervision (4th ed.)*. Needham Heights, MA: Allyn & Bacon.

# When Issues Arise?

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- Intervene early.
- Discuss with the supervisee and the faculty instructor.
- In conjunction with the supervisee and the faculty instructor, develop a specific plan to improve.
- RMHC wants to work with you to intervene early and help the student be successful in their field placement.

# References

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- Baird, B. N., (2002). *The Internship, Practicum, and Field Placement Handbook: A guide for the Helping Profession (3<sup>rd</sup> ed.)*. Upper Saddle River, NJ: Prentice Hall.
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