

Module 2

Making the Transition to Supervisor



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Center for Innovative Training in Vocational Rehabilitation (CIT-VR)

Developing innovative methods to train VR personnel in their work at State Vocational Rehabilitation agencies to deliver services to improve employment outcomes for individuals with disabilities.

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Today's Presenter

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Presenter Background in Clinical Supervision

- 35 years as Rehabilitation Counselor Educator
- Clinical supervision research for past 30 years
 - Nationwide survey of graduate training practices
 - Instrument validation on CS
 - Description of CS models
 - Analysis of graduate training practices
 - Effectiveness of CS training in SVR
- CS significant part of teaching assignments
- Conducted CS training across United States for 10 different State VR agencies
- Awarded Mary Switzer Distinguished Research Fellow
 - 1996 Use of Adventure-based counseling for people with disabilities
 - 2003 Mixed methods study to investigate CS practices within State VR
 - 2011 Evaluate a training program to enhance CS within State VR



Brief Review of Module I

- Define what is meant by clinical supervision and how it complements administrative supervision
- Examine basic principles of CS and how it is practiced in State VR
- Contrast effective and ineffective CS behaviors and its impact on VR counselors
- Review several common (and mostly ineffective) roles supervisors use when providing CS

Recap of Supervision Roles

Consultant

Serve as a resource to the counselor to problem solve and conceptualize while, at the same time, facilitate counselor autonomy. Provide alternatives to case conceptualization and maintain on-going assessment of counselor skill level.

Counselor (Mentor)

Address intra/interpersonal reality of the counselor within supervisory relationship and client-counselor relationship and help in developing professional identity.

Teacher

Determine counselor needs and strengths, promote self-awareness and transmit knowledge to promote professional growth.



Some Questions to Ponder About Your CS Role(s)?



1. How consistent is your role with that of the supervisor(s) who supervised you when you were a VR counselor?
2. Do you gravitate to one or more roles?
3. Does this role change as a function of who you are supervising and, if so, what contributes to how you interact?

Learning Goals for Module 2

- ✓ Examine the four transition phases involved from starting as a new counselor to becoming an effective clinical supervisor.
- ✓ Examine the importance of having a model for conducting clinical supervision and how it is operationalized
- ✓ Review the Integrated Developmental Model (Stoltenberg & McNeill, 2010) and how it can be a useful framework for providing supervision from both supervisor and counselor perspectives.

Transforming
from a VR
Counselor to a
VR Supervisor



Phase I: Initial Transition

Indicator: IDK what IDK

- Looking for structure as to the “right way to do things”
- Rely on older supervisors
- Supervision characterized by:
 - Individual supervision (primarily)
 - Reactive
 - Greater comfort with administrative than clinical aspects
 - Client rather than counselor-focused
 - Consultant role with problem-solver focus
 - Tendency for dualistic thinking
 - “Buddy-oriented” with new counselors; “Laissez-faire” with experienced counselors



“If I were you I’d spend most of my time trying to be someone else.”

Phase 2: Starting to Figure it Out

Indicator: “Good” counselor not same as supervisor

- Less anxiety about supervisory role
- Realizes need for training
- Continues to use peer supervision
- Shifting from reactive to proactive
- Supervision format characterized by:
 - Individual supervision (primarily)
 - Client rather than counselor-focused
 - Consultant role primarily; teacher role emerging (especially with new counselors)
 - “Buddy-oriented” with new counselors; “Laissez-faire” with experienced counselors





Suggestions for New Supervisors

1. Learn administrative policies and procedures first.
2. Do not make any changes in policies or procedures for at least 60 days.
3. Take time to learn about your counselors – career goals, interests, perceived strengths, area needing improvement.
4. Obtain training in CS.
5. Find a mentor who can help you with developing CS (seek supervision of your supervision).

Phase 3: Settling In

Indicator: Recognizes value of supervision and its impact on counselor development

- Meets regularly with counselors (more proactive)
- Benefitted from formal/informal supervision training
- Supervision format characterized by:
 - Individual and group supervision
 - Counselor-focused supervision
 - Integrates counselor, consultant and teacher roles



Phase 4: Mastery

Indicator: Knowledge of competencies and areas needing improvement

- Realizes supervision is an on-going developmental process that one continues to arrive at
- Has clear skill set in dealing with host of counselor concerns
- Integrates counselor, consultant, teacher roles depending on counselor needs
- Supervision characterized by:
 - Individual and group supervision formats
 - Counselor-focused supervision
 - Integrates counselor, consultant and teacher roles
 - Supportive Developmental Model used



Reflection Questions



Think about the relationships that you have with each of your counselors and how you approach supervision with each person.

- In what ways is this relationship the same or different?
- What accounts for these differences?

Supervisory Relationship (Working Alliance)

Determined by supervision goals, tasks and relationship between supervisor and counselor as defined by these three questions:

1. What are we going to do?
2. How are we going to accomplish it?
3. How well do we get along?

(Bordin, 1983)



“Nothing is
as Practical
as a Good
Theory”



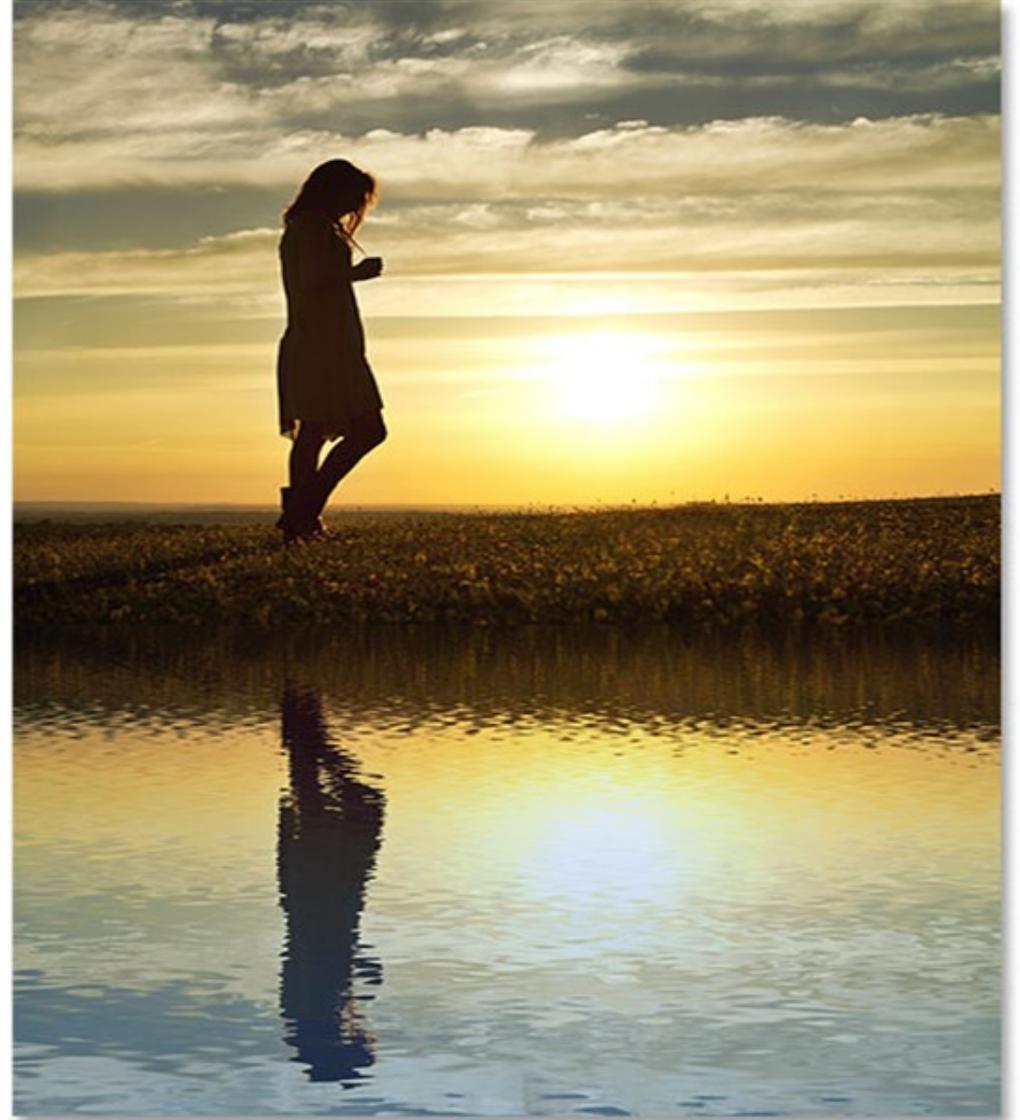
Importance of Having a Supervision Model (Theory)

- How do you facilitate change in counselors?
- What does the model say about what aspects you focus on during supervision?
 - Provides direction on where we are going and how to get there
- What aspects are important to focus on with regards to:
 - Client-counselor relationship
 - Counselor-supervisor relationship

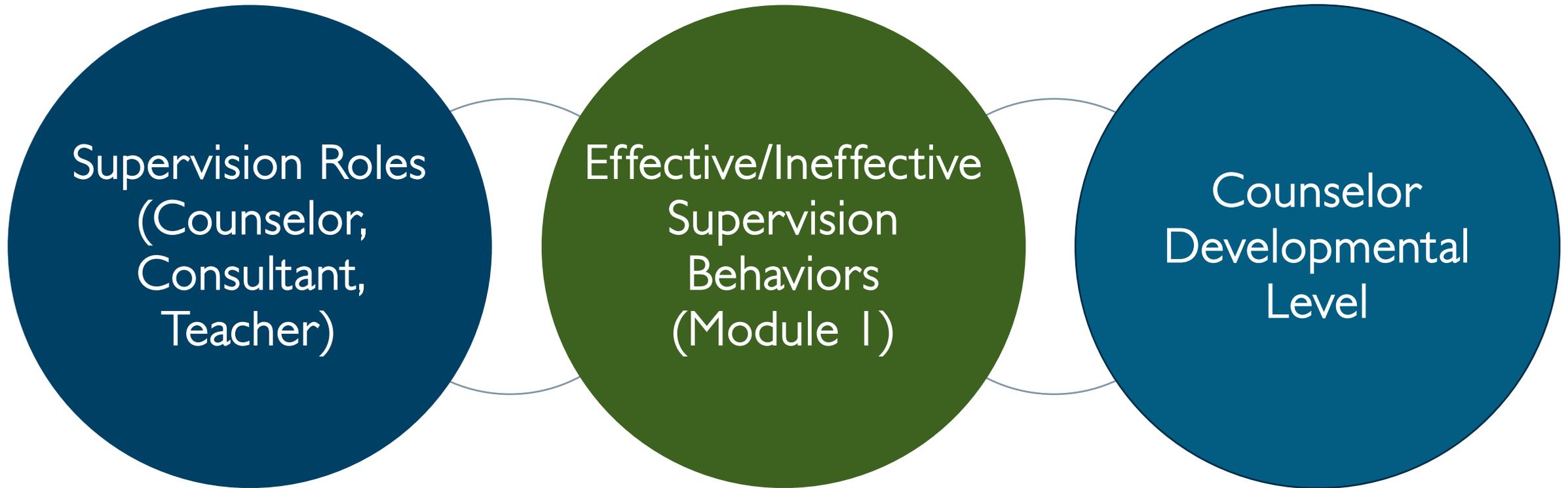


Reflection Question

Thinking back to your own supervision, how do you think your development as a counselor would have changed had your supervisor had used a specific model of supervision?



Supervisory Relationship Influences



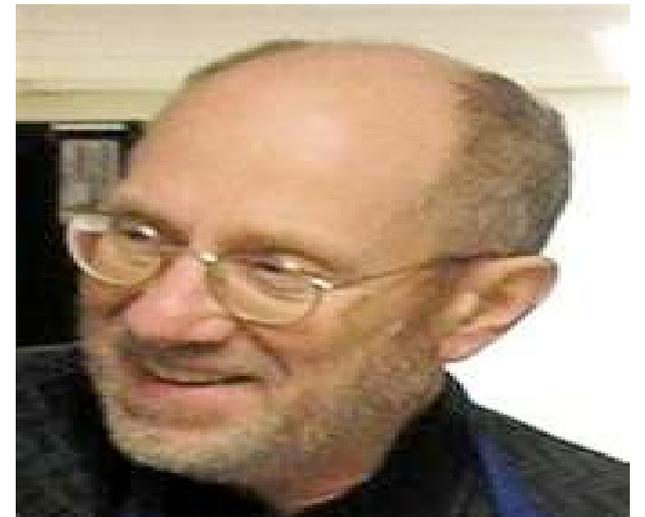


Integrated Developmental Model

(Stoltenberg & McNeill, 2010)

- As supervisors go through a series of developmental stages, so too, do counselors.
- Stoltenberg & McNeill conceptualized that counselors go through
 - Four developmental levels (Level I to Level 3i)
 - Within each level there are three aspects to consider
 - Self/other awareness
 - Motivation
 - Autonomy
 - Provides a framework in how supervisees can better understand themselves and clients they work with

Counselor Development Process



Counselor Developmental Levels and Associated Tasks

Levels

- **Level I:** New counselor high anxiety about performance; motivation high but limited awareness
- **Level II:** Gaining experience motivation and autonomy fluctuates; some confidence about skills
- **Level III:** Experienced counselors seeking continual improvement
- **Level 3i:** Integrated or “master” counselors

Tasks

- **Self-other Awareness:** Supervisee has awareness client world and own awareness within this relationship
- **Motivation:** Degree supervisee is invested in counseling training
- **Autonomy:** Degree of independence the supervisee expresses

Level I:

Characterized by:

- Limited experience and knowledge; undeveloped counseling theory; uncomfortable in counselor role
- High motivation, prefers direct instruction and structure
- Requires strong oversight and skill shaping and positive feedback
- Watch out for supervisee striving for independence than is warranted



Supervisory Process of “Brand New” Counselors (< 6 months)

Supervisor

- Structure supervisory session
- Assume primary responsibility and encourage counselor
- Assess counselor skill level through **direct observation**
- Educate regarding:
 - Counseling skills
 - Documentation
 - Ethics, liability
 - Client assessment

Counselor

- Seek and accept direction
- Discuss perceived strengths/weaknesses
- Set supervision goals with supervisor
- Review policies and procedures for safe and ethical practice

Level 2:

Characterized by:

- Focus shifts more to the client, deeper understanding of client's experience
- Less satisfied with “simple” answers/solutions
- Greater confidence and desire for autonomy
- Motivation fluctuates; starting to understand limitations (Realizes “I can't fix others.”)
- Formation of counseling approach
- Most challenging for supervisor – requires flexibility



Supervisory Process of Counselors Gaining Experience

Supervisor

- Support supervisor through conceptual thinking
- Avoid advice-giving or answer-providing
- May need to provide direct intervention for maintaining client welfare
- “Trial and tribulation” stage – caution against providing less supervision

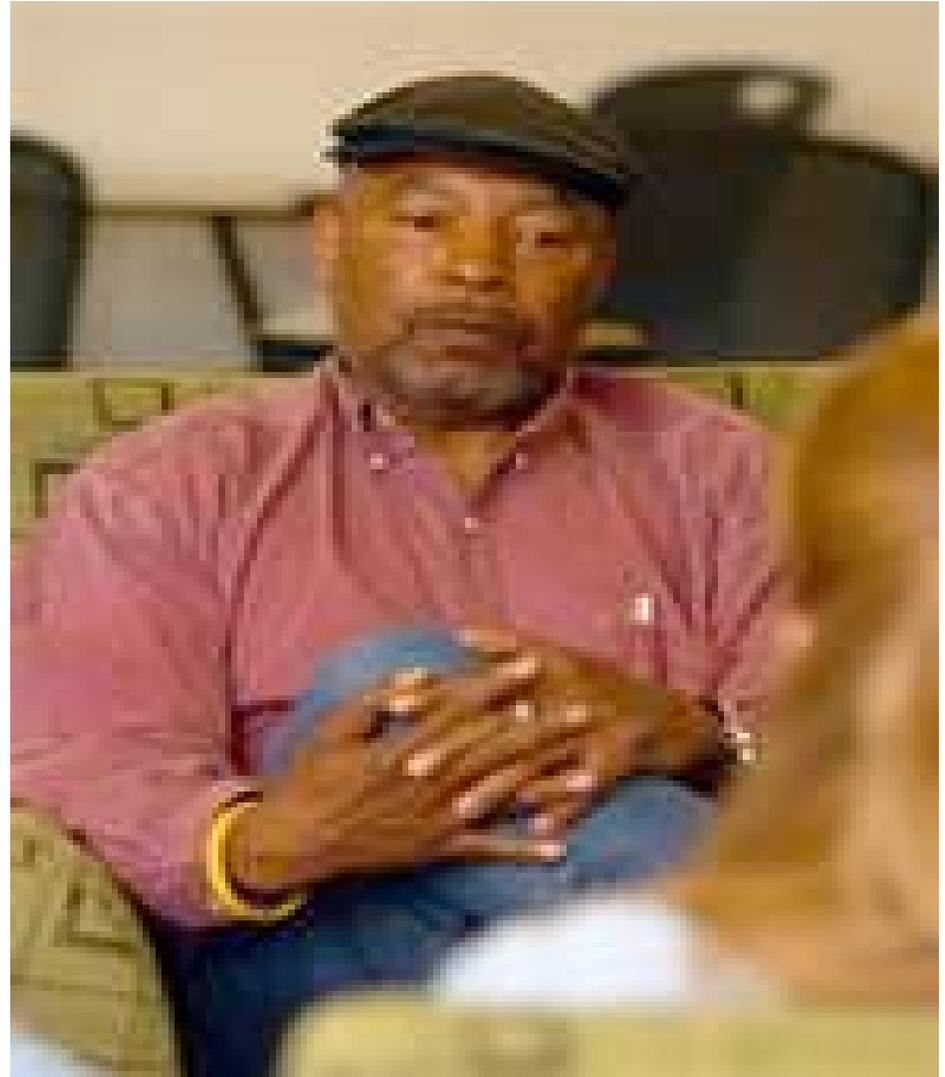
Counselor

- Willing to take risks within boundaries of supervisory relationship
- Question and hypothesize using counseling theory as a framework
- Discuss wants and expectations of supervision
- Recognize anxiety part of process

Level 3:

Characterized by:

- Consistent theoretical orientation
- Reflective about competencies and improvement areas
- Greater awareness and confidence in dealing with unfamiliar situations
- Motivated for continued professional development
- Greater desire for autonomy



Supervisory Process of Experienced Counselors

Supervisor

- Facilitate discussion of options
- Create opportunities for counselor to struggle with decisions
- Greater use of consultant role
 - Provide resources
 - “What if” scenarios
 - Devil’s advocate
 - Problem-solve and practice
- Support autonomy; Positive confrontation to challenge optimal practice
- Continue to document supervision activities

Counselor

- Has some doubts about effectiveness without being immobilizing; feels like a “real counselor”
- Consult with supervisor for direction
- Remains focused on client but can step back to examine their role/input in helping relationship
- Come to supervision prepared and initiate topic for discussion
- Provide feedback to supervisor on how process is/not meeting need

Supervising “Disengaged” Counselors

- Be willing to recognize and “honor” resistance.
- “Resistance is an expression of ambivalence about change and not a personality defect of the counselor.”
- Giving up as a supervisor is not an option!

Possible Intervention Avenues

- Consumer satisfaction ratings
- Competitive closures
- Slow case movement
- Triadic supervision

(Corey et al., 2010; Herbert 2004a)

Level 3i Integrative:

Characterized by:

- Proficient across multiple domains and modalities; Seeks growth in other counseling theories
- Mastery of counseling approach(es); well-developed conceptualizing on how to help
- Intrinsically motivated to continually improve as a counselor



Supervising Integrative Counselor

- Not simply a function of experience; in fact, few reach "3i"
- Independent but no need to prove competence
- Supervision characterized by consultant role
- Movement towards becoming a supervisor

Intervention Avenues for the 3i to Become a Supervisor

- Triadic supervision
- Group supervision co-leader/leader

Conceptual Model: Counselor Level and Supervisor Role

	Consultant	Counselor	Teacher
New Counselor (Level I)			
Experienced Counselor (Levels II and III)			
Integrative Counselor (Level 3i)			

Supervision Domains to Explore

Domain	Description
Intervention Skills	Counselor's confidence and ability to implement therapeutic change
Assessment Techniques	Counselor ability to use the variety of available assessment information and, when needed, to deduce when other evaluations are required.
Interpersonal Assessment	Counselor ability to use one's self when conceptualizing interpersonal dynamics.
Client Conceptualization	Counselor ability to conceptualize clients in terms of contextual life circumstances and relevant background.

Supervision Domains to Explore (continued)

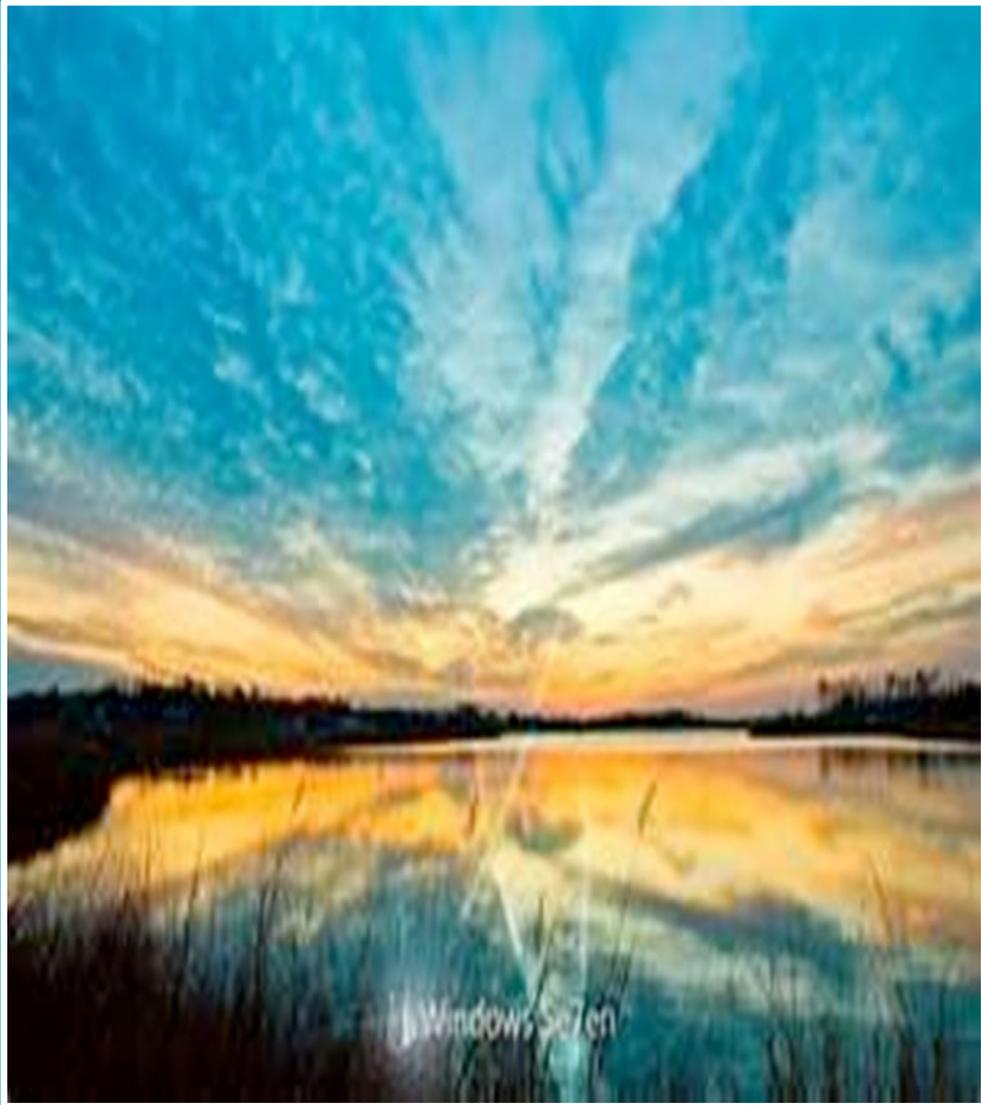
Domain	Description
Individual Differences	Counselor ability to recognize individual aspects including cultural characteristics, gender, disability, socio-economic, spirituality, sexual orientation and other unique aspects.
Theoretical Orientation	Counselor understanding of what helping (counseling) model is being used and demonstrates consistency of model in practice.
Treatment Plans and Goals	Counselor organizes work with clients in terms of goal-setting, intervention planning and treatment progression.
Professional Ethics	Counselor follows ethical principles consistent with appropriate code (CRCC) or other applicable codes and practices.

Final Comments



- Supervision is all about relationship – requires commitment and investment
- Must have a counseling and supervision model that serves as a compass
 - “Why am I doing the things that I am doing?”
 - “You can not teach someone else if you can not explain why you do what you do!”
- Take care of yourself – “Walk the talk” of self-care

End of Module 2: Reflection Questions



- What information did you (re)learn that was important to your work as a VR supervisor?
- How does knowing this information impact how you might provide supervision in the future?

Suggested Learning Activities



- Reflect on your own process from becoming a counselor to working as a supervisor and consider the following questions:
 - What were important developmental steps that helped you progress as a counselor?
 - How does your own journey as a counselor help you as a CS?
 - How will you address initial resistance from counselors who may question the value of CS? If there are other supervisors in your unit who provide CS, what helpful advice can they provide?
- Purchase and read a textbook on clinical supervision. If you want to learn more about the IDM, you may want to start with Stoltenberg and McNeill textbook.



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Thank You!



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