

# MODELS OF SUPERVISION

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- Which models of supervision have been utilized in your supervisory experiences?
- Is there a model of supervision from which you operate (or intend to operate)?
- What might be the benefits of operating from a model of supervision?

Small Group Discussion

# MODELS OF SUPERVISION



- Two broad categories
  - Models based on psychotherapy theories
  - Models designed specifically for supervision
- Developmental models
- Integrated models

# CLINICAL SUPERVISION FUNCTIONS AND RESPONSIBILITIES

- Two broad functions
  - Supporting supervisee's professional development
  - Ensuring client welfare
- Supervision vs. Teaching
  - Both impart new skills and knowledge (and oversee/evaluate)
  - Supervision is highly individualized
- Supervision vs. Therapy
  - Both address behaviors, thoughts, feelings and functioning of participant
  - Evaluate element in supervision, and any therapeutic work with supervisee is limited to focus of increasing effectiveness with clients
- Supervision vs. Consultation
  - Both help recipient become more effective
  - Supervisory relationships are evaluative

# MODELS OF SUPERVISION SCAVENGER HUNT

- Psychodynamic Approach
- Feminist Model
- Cognitive-Behavioral Supervision
- Person-Centered Supervision
- Systemic Supervision
- Integrated Development Model – IDM (Stoltenberg, McNeill, and Delworth)
- Discrimination Model (Bernard, Bernard and Goodyear)
- Systems Approach (Holloway)
- Develop a two-minute elevator pitch of the model you are assigned (overview)
- Identify/share one resource for the group related to this model
- Determine who in your group will share the overview

# THERAPY BASED MODELS

- Psychodynamic Approach to Supervision
  - Patient-centered (didactic, low conflict)
  - Supervisee-centered (experiential, potential for stress)
  - Supervisory-matrix-centered (dynamic)

# THE THERAPY BASED MODELS

- Person-Centered Supervision
  - Similar tenets of person-centered therapy
  - Supervisee has the resources to effectively develop as a counselor
  - Collaborator vs. Expert
  - Relies heavily on the supervisory relationship to facilitate learning and growth
- Systemic Supervision
  - Focuses on similarities between family systems and supervisory systems
  - Collaboratively set clear, meaningful, effective goals

# THE THERAPY BASED MODELS

- Feminist Model of Supervision
  - The personal is political
  - Gender-fair, flexible, interactional and life-span oriented
- Cognitive-Behavioral Supervision
  - Examines observable cognitions and behaviors
  - Set agenda, bridge from previous sessions, supervisee homework

# DEVELOPMENTAL MODELS

Progressive stages of supervisee development  
(Continuum from Novice to Expert)

## • Integrated Developmental Model

– 3 levels of development

- Level 1: Balance high anxiety/dependence by being supportive and prescriptive
- Level 2: Monitor growth and developmental needs
- Level 3: Emphasize autonomy and collegial challenging

# DEVELOPMENTAL MODELS

## • Ronnestad and Skovholt's Model – 6 phases of development

- Phase 1: Lay Helper
- Phase 2: Beginning Student
- Phase 3: Advanced Student
- Phase 4: Novice Professional
- Phase 5: Experienced Professional
- Phase 6: Senior Professional

# INTEGRATIVE MODELS

- Bernard's Discrimination Model (social role)
  - Areas of focus
    - Intervention, Conceptualization, Personalization
  - Supervisor roles
    - Teacher, counselor/therapist, consultant
  - Evaluates supervisee's ability within the focus area
  - Selects appropriate role from which to respond

# DEVELOPMENTAL MODELS

- <sup>14</sup> Themes of Counselor Development (Rønnestad and Skovholt)
1. Professional development involves an increasing higher-order integration of the professional self and the personal self.
  2. The focus of functioning shifts dramatically over time from internal to external to internal.
  3. Continuous reflection is a prerequisite for optimal learning and professional development at all levels of experience.
  4. An intense commitment to learn propels the developmental process.
  5. The cognitive map changes: Beginning practitioners rely on external expertise, seasoned practitioners rely on internal expertise.
  6. Professional development is long, slow, continuous process that can also be erratic.
  7. Professional development is a life-long process.
  8. Many beginning practitioners experience much anxiety in their professional work. Over time, anxiety is mastered by most.
  9. Clients serve as a major source of influence and serve as primary teachers.
  10. Personal life influences professional functioning and development throughout the professional life span.
  11. Interpersonal sources of influence propel professional development more than 'impersonal' sources of influence.
  12. New members of the field view professional elders and graduate training with strong affective reactions.
  13. Extensive experience with suffering contributes to heightened recognition, acceptance and appreciation of human variability.
  14. For the practitioner there is a realignment from self as hero to client as hero.

# THOUGHTS QUESTIONS REFLECTIONS

## INTEGRATIVE MODELS

### • Systems Approach

– Relationship is central (bestows power to both supervisor and supervisee)

– 7 dimensions of supervision

• Functions of supervision

• Tasks of supervision

• The client

• The trainee

• The supervisor

• The institution

TASKS		Counseling Skills	Case Conceptualization	Professional Role	Emotional Awareness	Self-Evaluation
FUNCTIONS						
Monitoring						
Instruction						
Modeling						
Consulting						
Supporting						

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