

Personal Supervision Model

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Abstract

The following paper covers my particular supervision model. It explores the development of my model and philosophy of supervision. The definition of supervision is then presented. What is my role as the supervisor? An explanation of my philosophy of supervision. My process of evaluating the supervisee. My theory of counselor development. My relationship to the counselor theory used. Then how my biblical worldview is integrated into my supervision model.

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Personal Model and Philosophy of Supervision

While developing my personal model and philosophy of supervision, there were many aspects of supervision that I had to explore. The first thing I will share is what supervision means to me. Then I will describe my role as a supervisor. Next, I will describe my philosophy of supervision. Next, I will explain how I evaluate the supervisee and myself. I then present the theory of counselee development. My relationship with the counseling theory is next. Last is the integration of my biblical worldview into my supervision.

Defining Supervision

I believe that supervision is an intervention shared between a qualified senior person (supervisor) and a person who has less experience (supervisee) (Bernard & Goodyear, 2019). The supervisor will guide the supervisee as a consultant, brief counseling, and teacher. The supervisor can use modeling for the supervisee to help develop her counselor identity. The supervisor is ethically obligated to protect the client from any harm from the supervisee by working as a gatekeeper in the counseling field (Bernard & Goodyear, 2019).

Role of the Supervisor

As I explore the supervisor's role, I will detail the roles discussed briefly in defining what makes a supervisor. First, I would like to address whether the role of a supervisor is in a clinical setting or will the supervision be in a classroom setting, such as practicum or internship faculty supervision. The supervisor will take on several roles for the supervisee, which will shift and change as situations arise throughout the supervision process. I feel these are similar, whether in the teacher or mentor role. The teacher role for a supervisor would be more prominent when taking on the role of faculty supervisor as the supervisee will be in a group setting and seeking

guidance (Bernard & Goodyear, 2019). I believe that the supervisee in a group setting with the faculty supervisor will seek different things from them as they will from their clinical supervisor. I felt this way as I went through practicum and internship. The majority of my guidance and teaching came from faculty supervision. As a clinical supervisor, I will only take on the teacher role when needed.

The main goal in this role is to use brief educational moments and let the supervisee do most of the work; as a teacher and mentor, I will guide the supervisee as she comes up with the answers she is looking for (Borders & Brown, 2005). I will not take up a lot of the supervisee's session as it is a time for the supervisee to explore her growth and development as she begins to create her own identity. The supervisory role as a consultant is similar to the faculty setting in the clinical setting. In both the faculty supervisor role and the clinical supervisor role, the interventional role of the consultant will come up at some point throughout the supervision. As faculty supervisor, I will keep the consulting minimum, and the group will do most of the consulting as needed.

The supervisees will begin learning to work with peers on case conceptualization as some will present, and the group will explore the case and give the presenter feedback (Scott et al., 2015). The consultation would be for the sole purpose of helping the supervisee improve her competency while working with clients (Scott et al., 2015). I need to remember that when I am taking on the role of consultant in the clinical setting, my supervisee looks up to me as an expert, so I must remember to work within my competencies (Scott et al., 2015). The role of the counselor should be minimal in both the faculty supervisor role and the clinical supervisor role. I believe that when it comes to counseling your supervisee, there are some serious ethical concerns. As a supervisor, I will work to encourage the supervisee and assure her that she is

doing great when she thinks otherwise (Borders & Brown, 2005). The potential to develop into a dual relationship in the faculty and clinical supervision role is tangible. Supervisors must approach with caution, trying not to allow the relationship as supervisor to become more therapeutic. I need to remember that I was a counselor first. I must remember to step back and recognize when I am doing this (Borders & Brown, 2005).

Philosophy

My philosophy of supervision is to provide the most effective supervision possible by taking on many different roles according to the supervisee's needs. I will help develop the supervisee's counselor identity and ethically driven competence by integrating several combined models (Bernard & Goodyear, 2019). I believe that it is also essential to make the clients well fair and a top priority during supervision. The role of evaluator and gatekeeper is also something that I feel is an essential part of being a competent and efficient supervisor (Bernard & Goodyear, 2019). As a supervisor, I believe that self-care training is also something that must be taught and evaluated during supervision, including the self-care of the supervisor and the supervisee. I feel that incorporating a crisis plan into the supervision contract is vital for protecting the supervisee and the client. Looking at any multicultural differences between my supervisee and myself is important.

Process of Evaluation

As part of the supervision process, I will utilize different assessments to evaluate and determine the level of competence the supervisee has throughout the supervision. If working with a clinical supervisee in a practicum or internship program, I will use the evaluation forms presented by the school. When in the role of the faculty supervisor, I will utilize the evaluation forms assigned by the school. Then there would be the role of a clinical supervisor without the supervisee being in a

school program. I will utilize the evaluation forms that have been provided for me by the clinic. Within my practice, I will use one of the several evidence-based evaluation forms available from others. I prefer to have the supervisee fill out an evaluation form for me, as I fill out one for her.

I feel that it is essential to make sure that I have a strong and healthy alliance with my supervisee and that she feels the same about me. The supervisee will complete the supervisee needs index to identify what she is looking to get out of supervision (Bernard & Goodyear, 2019). I will review my competency for supervision and complete the supervisor self-efficacy scale to ensure I am in the right place mentally (Bernard & Goodyear, 2019). I will utilize a few different assessments for evaluation throughout the supervision. They are as follows, the evaluation process within the supervision inventory, the brief supervisory alliance scalesupervisor form (BSAS-SF), the brief supervisory alliance scale-trainee form (BSAS-SF), and the supervisory satisfaction questionnaire (Bernard & Goodyear, 2019). If I were working in a group setting, I would use the group supervision scale as an evaluation tool (Bernard & Goodyear, 2019).

Theory of Counselor

Development As a supervisor, it is my responsibility to ensure that my supervisee is ethically competent upon completing the supervision process to not bring any harm to the client or herself. I believe that Borders & Brown (2005) give some tremendous developmental skills to be aware of as a supervisor when working with the supervisee: competency skills, emotional awareness, autonomy, counselor identity, understanding of multicultural differences, and professional ethics. Counselor supervision can use one theory, or it may be a combination of several different ones. I prefer the discrimination model as the basis of my supervision, but I believe in integrating other models to accommodate my supervisee as the need arises. As the

roles and foci develop during a supervision session, many other models can be used to meet the supervisee where she is currently.

The Pearson, Gaete, and Ness models easily integrate with the discrimination model (Bernard & Goodyear, 2019). Because no two supervisees are the same and their clients are different, it is good to have more than just a couple of theories in the supervision toolbox. Pearson integrates these three theories into the supervision, humanistic supervision, cognitivebehavioral supervision, or solution-focused supervision with the discrimination model roles of counselor, teacher, and consultant (Bernard & Goodyear, 2019). Incorporating these into the supervision process increases the supervisor's competency and allows for more ways to help model and grow the supervisee.

In the Gaete and Ness model, the supervisor can take on any of these three roles of trainer, gatekeeper, or protector of the client and integrate with Holloway's SAS model and the Discrimination Model (Bernard & Goodyear, 2019). They are all integrated so easily into the supervision process and with my concerns of protecting the client, taking on the role of gatekeeper when needed, and trainer or facilitator of the supervisee's journey to discover her counselor identity. I believe this integrative model I have chosen will work to protect the supervisee and the client. I see the ability to incorporate self-care because of the potential for burnout. Burnout is one thing I have personally felt at some points throughout my internships during my master's program.

I will also integrate some creative arts interventions into my supervision. I feel they integrate into group and faculty supervision roles, but I will also work to integrate these into my clinical supervision. Degges-White & Davis (2018) believe that a supervisee can receive a new perspective and view of the client's case conceptualization through creative arts. Here she may

see something that she did not previously see. Supervisee self-care can be explored through the use of creative arts interventions.

Relationship to counseling theory

I will now describe my relationship with them more personally. As a counselor and supervisee, I know what struggles I went through and the expectations I had set upon my supervisor. I initially looked to model my supervision based on the supervision I received. But through this class, I have realized that good supervision is not just modeling one specific model read in a book. It comes from past supervision experiences, some good and some not so good. My main concern is not to harm my supervisee and to protect the client from harm by modeling for the supervisee what she is seeking in her supervision. My supervision model is similar to the discrimination model with the foci used. My sessions will look more at the supervisee's basic counseling skills, how well she integrates her theories into her sessions, her professional behaviors, and the development of her counselor identity and self-care (Borders & Brown, 2005). I will take on the three roles of the discrimination model as appropriate to the circumstance, teacher, counselor, and consultant (Bernard & Goodyear, 2019).

As a clinical supervisor, I will integrate creative arts into my sessions. I won't use these interventions in every session but will integrate them throughout the process. I will be in the teacher and consultant role for most of my supervision. Still, I will briefly take on the counselor role to ensure the mental status of the supervisee and refer if the issue is too severe and oversteps the ethical boundaries of supervision. I will guide the supervisee in developing her counseling skills and identity when working as a consultant. When taking on the consultant role, I will model for the supervisee ways to develop and increase her competence (Scott et al., 2015). As a faculty supervisor, I will take on the same roles. The primary role I will be in is teacher, as I

work with either a practicum group or an internship group of supervisees. I will fill this role because the supervisees are in these groups to learn and grow their counseling skills and identities.

As a faculty supervisor, I will be aware of critical incidents with the supervisee and her clinical supervisor. Critical incidences can lead to long-lasting influences that can cause harm to the supervisee or her clients (Howard et al., 2008). I will be a consultant but model this role for the supervisees so they can practice this within the group. I will refer out for most of the counseling of supervisees.

Biblical Worldview as Integrated into Supervision

When it comes to supervision, I believe it is essential to integrate my biblical worldview, as long as it does not cause any harm to the supervisee. There has been more discussion and acceptance of religious training in supervision, and there is a long way to go in developing sound models to use in supervision (Aten & Hernandez, 2004). Supervisors lead the supervisee and must know how to lead biblically. 1 Timothy 3:16 states, "All Scripture is given by inspiration of God, and is profitable for doctrine, for reproof, for correction, for instruction in righteousness." I believe that one of the most important aspects of supervision is promoting self-care, and what better way to promote self-care than using scripture. Counselors utilize the fruit of the spirit in many counseling sessions, and supervisors can benefit from the fruit of the spirit during supervision (Aten & Hernandez, 2004). Galatians 5:22-23 (NKJV) tells us, "But the fruit of the Spirit is love, joy, peace, longsuffering, kindness, goodness, faithfulness, gentleness, selfcontrol. Against such there is no law". As a supervisor, I pray with my supervisees before each session. When working with supervisees of different religious beliefs, I will ask permission to pray with them before the session. If they refuse, I will pray for them before the session. I will keep in

mind the cultural differences between my supervisees and myself. Supervision is changing, and along with these changes, spirituality has become more integrated into the session. I have chosen to integrate several models into my supervision, with the discrimination model as my base. They need to be adaptable to what may arise within the session with the supervisee and will determine which roles or interventions to use during that session. Although counseling is a role the supervisor may fill, it will be with caution and limited counseling during the session.

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