

Philosophy of Supervision
Relationships Matter LLC
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Systemic Thinking

I believe that relationships keep the world going, whether intra or interpersonal. Being trained to embrace a systems perspective means applying that lens to couple, family, and individual counseling. Therefore, the person is not seen as the problem, the problem is the problem. Despite unwanted outcomes, systems naturally seek to maintain homeostasis. Problems and solutions are better understood by getting to know the system. Examples of getting to know the system include: assessing/addressing problematic interactions patterns, formulating hypotheses with clients, using genograms to track multigenerational processes, attending to parallel processing and attending to context and culture (Gehart, 2017, Gurman et al., 2015, Haley, 1987, Sherman & Fredman, 1986); using circular questioning (Brown, 1997); attending to parts (Anderson et al., 2017); and determining stages of family life cycle (McGoldrick et al., 2015). Some basic assumptions that I hold as a systems thinker include (See Gehart, 2017):

- All behavior communicates. There is no way to not communicate.
- Changes and feedback from one person/system influences others.
- Individuals are also systems. Their systems consist of parts.
- Second order change is required for lasting results
- There is more than one way for systems to achieve second order change
- Systems have the capacity for creativity, compassion, and to construct

Goals for Supervision

The result of engaging in supervision is two-fold. The first goal is to promote client welfare and avoid harming clients. The next goal is for supervisees to obtain numerical and narrative ratings as set forth by licensing boards, academic programs, and other credentialing bodies for endorsement. Some professionals may seek specialized and/or additional supervision for professional growth.

The endorsement can lead to:

- Licensure for independent practice within 6 years in Louisiana (LPCBE, 2021a)
- Endorsement for meeting academic standards

Specific goals for many supervisees will depend on the organizations requesting endorsement and professional goals indicated by supervisees in the plan of supervision. Supervisees will learn specific skills for independent practice, build confidence, and be able to appropriately fulfill client responsibilities (American Association for Marriage and Family Therapy [AAMFT], 2015, Std. 1).

Purpose for Supervision

The object of supervision is to support and monitor supervisees in their work toward independent practice or graduation from a program by meeting goals. I strive to support supervisees in being

the best and most sustainable version of themselves who also align with professional standards. Most supervisees come to the profession with some dream of how they want to be helpful. Supervisees are encouraged to remember their *why* especially when things get tough. During this process, supervisees are expected to gain awareness, knowledge, and skills that will allow them to integrate and articulate theory into practice, navigate ethical and legal issues (i.e. seeking legal advice), and working through parts that interfere with joining with clients/system (Anderson et al, 2017, IFS Talks, n.d). At times supervision may be therapeutic, however is not therapy.

Supervisory Roles and Relationships

Supervision is a professional process that is both hierarchal and collegial in nature (Seng & Zimmerman, n.d.). My supervisory roles, which may overlay at times include gatekeeper, educator, and mentor. I have an ethical and professional obligation to help supervisees succeed and make changes when necessary. There are times when I may be more hands on or directive in my approach. Evaluation, timely feedback to supervisees, completion of required documentation, advising, modeling, consulting, appropriate self-disclosure, and adherence to the practices and procedures of the university, credentialing boards, licensing boards, and codes of ethics are necessary for effective supervision. The educator role consists of teaching interventions, professionalism, language acquisition, skill development, ethical decision-making model, and role plays. As educator and gatekeeper, the client is the consumer. Mentoring includes modeling professionalism, encouraging professional development, assisting with networking and career possibilities, coping with anxieties, and processing self-of-therapist issues needed to maintain your responsibilities to clients. When mentoring, you, the supervisee is the consumer; however, I am not your therapist (starting to hear a theme?). The roles and examples indicated above are not exhaustive.

Supervisory Contracts, Evaluations, Supervision Handbook, and Application Process

The supervision contract indicates the supervisory process between myself and supervisees as I work under supervision myself. Parts of the contract will be co-constructed to outline the supervisor-supervisory relationship including how to address concerns that may arise as stated in the AAMFT Supervision Handbook (2023). The contract includes supervisor information, supervisee information, emergency contact for supervisee, supervisor qualifications and emergency contact, due process, commitment to meet, payment and fees, terminating supervision, emergency procedures for clients, scenarios for contacting supervisor, clarification of supervisory relationship, confidentiality, plans for handling impasses/stumbling blocks/disagreements, etc, my AAMFT mentor, additional clarifications, supervisee goals, supervisory methods, evaluation & feedback, authorization to record, checklist of additional documents required for supervision, and signature. Let me know if you would like a copy for review.

Personal and Professional Experiences That Impact Supervision (person of the supervisor)

I intend to attend to both self-of-therapist as a supervisor for supervisees. In instances where I, the supervisor, or supervisees can benefit from additional support or where indicated, such as

time off, processing of events related your own practices, additional training, legal advice, or otherwise will be shared. Here are a few applications that I intend to use:

Self-of-Therapist development for Supervisor includes, but is not limited to:

- Going in/ Body scan to determine what thoughts, feelings, sensations, or images are coming up around Supervisor-Supervisee-Client interactions as indicated with Internal Family Systems (Anderson et al., 2017, IFS Talks, n.d.),
- Attending to identity and diversity issues that impact supervisee way of being using a critical incident journal or timeline (Lee & Nelson, 2021),
- Measuring the 8 C's from IFS including Compassion, Courage, Calmness, Clarity, Curiosity, Compassion Confidence, Creativity, and Connectedness (Anderson et al., 2017), and
- Modeling self-disclosure including "I statements", self-regulation/self-management, and congruent communication stances as indicated with Experiential and Internal Family Systems.

Self-of-Therapist for Supervisees includes, but is not limited to:

- Attending to identity, diversity, relational, and high-risk issues (Lee & Nelson, 2021),
- Check in/body scan/What's coming up for you now?,
- Monitoring and developing skills for self-regulation,
- Using genograms to assess client-therapist-self-of-therapist patterns (i.e. triangles, cutoff, dealing with conflict),
- Facilitating self-disclosure & self-care, and
- Use circular questioning to explore concerns (Brown, 1997, This is an oldy but goody).

Connecting Supervisor and Supervisee Model or Practices

My role is to guide supervisees from a stance of *knowing* to *understanding* in which they can eventually be independent. The primary way in doing this is to develop supervisees core self, or their capacity for Self-Leadership as put forth by Swartz in Internal Family Systems (Anderson et al., 2017, IFS Talks, n.d.). My roles, as the supervisor is to hold space for supervisees by maintaining the 8 C's: Compassion, Courage, Calmness, Clarity, Curiosity, Compassion Confidence, Creativity, and Connectedness as combining those with the 6 P's of Self-led therapist, which are perspective, patience, presence, persistence, playfulness, and partnership (IFS Talks, n.d.). Supervisees are validated, and encouraged to connect with parts that might interfere and enhance their ability to trust their inner wisdom. The connection is used by applying the 6 Fs. See handout below. When supervisees have parts that need therapeutic work, then professional counseling will be recommended. Having supervisees connect with parts is a primary way for supporting, challenging, collaborating, and reflecting in ways that can lead to small continuous changes in the supervisor-supervisee or supervisee-client relationship (MacKay & Brown, 2014). Other theoretical approaches that influence my supervisory style include Structural, Strategic, Solution-focused, Maslow's Hierarchy of Needs, Relational-Cultural, Person-Centered, and Adlerian. Clinical experiences that influence my style include home-based family counseling, couples counseling, and counseling students and families in Pre-K to College settings. I am licensed as both a marriage and family therapist and a professional counselor and in Louisiana. Supervisees are expected to develop, articulate, and demonstrate systemic thinking

(i.e. genograms, interaction patterns, enactments, and collaboration) that aligns with their own models through treatment planning, staffing, and professional development. Creativity, within professional standards, is encouraged.

Contextual Factors in Supervision

It is important to treat all individuals with dignity and respect. A part of my role is to embody the AAMFT Diversity, Equity, and Inclusivity Statement (n.d). It is important to explore supervisee's developmental, social, and cultural identities along with any biases and dominant discourses that may impact therapy. Exploring these areas may reduce supervisees imposing their values on clients. For example, I identify as a middle-aged, African American, heterosexual female. I reside in Southern middle class Louisiana. At times, I may appear to have a serious listening face. Please know that I am rooting for you regardless of how I appear. I seek to honor supervisees' identity by displaying curiosity, humility, and cultural empathy using cultural social frameworks such as Relational Cultural Theory. I invite discourse and dislikes regarding the supervisory process and me. I see discourse and dislike as opportunities to embrace multiple perspectives and possibly develop clarity.

Modes of Supervision

Supervisees will be assessed and taught with the use of live/virtual supervision, enactments, tape review, audio review, trainings, professional activities, individual research, presentations, discussions, consulting, self-report, and client feedback forms. Supervision may be held effectively individually, one-on-one or two-on-one (Lee & Nelson, 2021), or group depending on licensure requirements, state regulations, as well as supervisees' needs. Supervisees are expected to attend supervision prepared. For evaluation supervisees must provide live or recorded sessions to demonstrate skills. Mock recordings may be used as a last resort. I will provide some structure for meetings and my expertise; and supervisees are expected to provide initiative, some structure, and their expertise. Some best practices that I will use include attending to group dynamics, setting ground rules particularly for groups, explaining the limitations of confidentiality, and providing a technology agreement for setting up and emergency situations for supervisees wanting virtual services (See Lee & Nelson, 2021, p. 83). Currently in Louisiana, supervisors and supervisees are required to have an initial 3-hour training in telehealth and 3-hours for each renewal cycle (Louisiana Professional Counselors Board of Examiners, 2021b).

Evidence of Sensitivity to and Competency in Ethical and Legal Factors of Supervision

Ethical

I am familiar with the AAMFT Code of Ethics (2015). For example, Standards IV and VI. Standard IV indicated responsibilities to students and supervisees, such as avoiding financial, emotional, and sexual exploitation, providing appropriate oversight of professional competence, ensuring confidentiality except where limitations apply, clarifying multiple roles and how supervisee are protected from undue influence, and integrating codes of ethics throughout supervision (Stds. 4.1-4.8, p. 6). Standard VI indicates competency in technology use (AAMFT, 2014, Std. VI). The use of technology is essential considering the increased number of supervisees who may be using technology to some degree in their practices. I looked at several

resources that would be helpful for boosting ethical practices such as: a) practices to consider when providing home-based therapy (Children's Behavioral Health Initiative, 2015) which can be found at <http://www.rosied.org/resources/Documents/practice-guidelines-ih.pdf>, and b) best practices for working online with systems (See Caldwell et al., 2017).

Legal

I am familiar with legal requirements for supervisors and supervisees in Louisiana. Specific legal aspects related to mandated reporting, risk and suicide assessment, duty to warn, and having continuous and updated malpractice insurance are emphasized. I work with supervisees to promote both legal and ethical practices, however laws typically outweigh ethics. There are also *red flag* situations indicated in the supervision contract where a follow up is required as soon as possible and no later than 24 hours. Failure to adhere to laws or egregious acts may result in the supervisee and/or supervisor needing to inform the board and/or other relevant organizations. An example might be if supervisees fail to disclose a condition that negatively impacts client or treatment. According to the AAMFT Competencies 5.4.2 and 5.5.2 (as cited in Lee & Nelson, 2021) supervisees are responsible for monitoring their wellness and communicating issues that result in impairment with supervisors. Furthermore, according to the AAMFT *Code of Ethics* (2015) marriage and family therapists seek help when regarding issues that might cause neglect to clients (AAMFT, 2015, Std. 3.3). My first step is to verify and assess the frequency, intensity, and duration of the concern with you. Supervisees may be asked to get further support depending on the level of client impact. Not getting help or getting help when needed will also be discussed.

Awareness of requirements for AAMFT

I am familiar with the current AAMFT Supervision Handbook (2021/2023) and LMFT requirements. I also know where and how to seek help when unfamiliar questions arise. At times we may seek information together. I will be following the regular track in which 36 hours of supervision mentoring is required with 180 hours of supervision. The clock starts when I have obtained clinical fellow membership and obtained supervision from another AAMFT designated supervisor. This information must be documented on the supervision mentor report (See AAMFT, 2021/2023, p. 48). I understand that hours will not accrue if the requirements are not met as indicated. I am also familiar with regulations for Louisiana supervisor candidate designation as indicated in the *Marriage and Family Therapy Approved Supervisor, Supervisor Candidate, and Provisional Licensed Marriage and Family Therapists Handbook* (2021/2023). A few requirements include being licensed for a minimum of two years, ability to supervise both MFT students and provisionally licensed MFT's who are pursuing full licensure, and supervisees must submit their Declaration of Practices & Procedures and get a letter of approval from the licensing board. The full application and rules can be retrieved from the Louisiana Board of Examiners https://www.lpcboard.org/?action=application.app_lmftsc_part2 for currently licensed marriage and family therapists.

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6 F's Handout

Contract = agreement on target part interfering with practice, where do you feel stuck

FEARS AND CONCERNS

Are there any fears or concerns about letting us work with the target part?

- if "no" proceed, if yes, address concerns then proceed

FIND

Go inside. "Find the part in or around your body"

FOCUS

Focus your attention on this part in whatever way you are experiencing it (images, thoughts, emotions, etc.)

FLESH

Begin to flesh it out.

What do you notice about it?

Can you describe it? (An image, age, feelings, thoughts, color, shape, does the part look like you?)

FEEL

"How do you feel towards this part?"

- looking for "C" words = critical mass of Self energy to proceed (Clarity, Compassion, Courage, Connectedness, Creativity, Curiosity, Confident, Calmness

- if not a "C" word, ask part if it would be willing to step back/soften up

BEFRIEND

Find out about the part. Extend self energy..... how does it respond?

Is it aware of your presence?

What does it want you to know about it? –

What's its job?

How does it try to help you?

When did it take on this job?

What would it rather do if it did not have to protect you in this way?

-Update, offer appreciations for its positive intension and how hard it has worked.

- What does it need to trust you more?

FEARS AND CONCERNS

Address all its fears and concerns about what would happen if didn't do its job.

- Is there a more vulnerable part it is protecting?

-What if there was a way to take care of the part it is protecting so it wouldn't have to work so hard?