

# **Applying Evidence-Based Practice (EBP) Principles to the Process of Clinical Supervision**

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# Clinical Supervision

“Evidence-Based practice in psychology (EBPP) is the integration of the best available research with clinical expertise in the context of patient characteristics, culture, and preferences”

Report of the 2005 Presidential Task Force on Evidence-Based Practice (American Psychological Association, 2005)

# Best Available Research Evidence

*What research evidence exists for the impact of supervisory method, the characteristics of the individual supervisor and supervisee, and the supervisory relationship on effective supervision?*

# Best Available Research Evidence

- Surveys indicate that most clinical supervisors practice without specific education in supervision, training on how to conduct supervision, or supervision on their supervision of trainees (Scott et al., 2000).
- This occurs despite calls for the importance of competence in supervision (Falender, Cornish, Goodyear, Hatcher, Kaslow, Leventhal et al., 2004; Stoltenberg, Kaslow, Cornish, Felander, Bjorkman, Goodyear et al., 2003).

# **Best Available Research Evidence**

- Discussions have moved beyond Empirically Validated Treatments and Empirically Supported Treatments.
- Discussions of evidence-based practice in supervision must not only address what is taught, but also how supervisees are educated and trained in professional practice.

# Best Available Research Evidence

- Discussions of supervision orientations often group approaches into broad categories (e.g., Falender & Shafranske, 2004; Bernard & Goodyear, 1998; Stoltenberg, 2008).
- Although it is likely that most supervisors (as do therapists) probably rely on eclectic procedures and intuition while working with their supervisees.

# Supervision Models

## Psychotherapy-Based Approaches

- Supervisor is seen as engaging in a similar process as would the therapist working with a client
- The effectiveness of these approaches lies in the assumption that the goals, processes, and roles of the supervisor and supervisee closely approximate those of the therapist and client

# Supervision Models

## Psychotherapy-Based Approaches

- Person-centered approaches have emphasized facilitative conditions (empathy, genuineness, warmth) that fit well with a focus on supervisee learning and growth
- Supervision is more educational and less psychotherapeutic than the goals of psychotherapy

# Supervision Models

## Psychotherapy-Based Approaches

- Potential for ethical problems with the risk that the supervisor will fall into the habit of psychotherapy with the supervisee and breach ethical guidelines
- Little direct research, but strengths of the psychotherapy-based approaches should be integrated with more specific supervision based models

# Supervision Models

## Process-Based Approaches

- Focus on the components of the supervision process (roles, tasks, and so on), also called social role models
- Functions in supervision fall into the role categories of teacher, counselor/therapist, and consultant and monitoring and/or evaluation functions

# Supervision Models

## Process-Based Approaches

- Little specific research has been done on these models
- When are teaching versus counseling orientations most useful in dealing with specific situations in supervision?

# Supervision Models

## Competency-Based Approaches

- Competencies associated with training psychologists through clinical supervision have received attention (Falender et al., 2004; Milne & James, 2002; Stoltenberg et al., 2003).
- Can be viewed as an extension and updating of the skills training models that flourished in the late 1960's and 1970's

# Supervision Models

## Competency-Based Approaches

- Studies examining these approaches suggested that the skills could be effectively learned, but that they may not generalize to other counseling contexts, and may decay over time.
- Helping skills have a significant, though small, effect on impact in specific sessions and evidence also suggests that the skills are actually used, in various degrees, in counseling sessions.

# Supervision Models

## Competency-Based Approaches

- Professional competencies have addressed specific knowledge and skills, with an additional focus on attitudes
- Recent work in this area has expanded this focus to address specific benchmarks and methods of assessment of competencies

# Supervision Models

## Competency-Based Approaches

- May move to a “no professional psychologist left behind” framework that provides guidelines for establishing evidence for standards being met (akin to treatment objectives and goals), but limited guidance concerning how to achieve them (treatment planning).

# Supervision Models

## Developmental Approaches

- Meta-theoretical, tend to view the process of supervision as a distinct professional activity that is, largely, independent of overall orientation of the therapeutic models used by the supervisor and supervisee
- Integrated Developmental Model posits supervisee development through three levels over time as evidenced by changes in self-other awareness, motivation, and autonomy.

# Supervision Models

## Developmental Approaches

- Development is conceptualized to occur within a number of domains of professional practice, noting that any given supervisee may be functioning at different levels for different domains at a particular point in time
- Research broadly supportive of at least some aspects of the approach, though problems with methodology

# Supervision Models

## Summary

- Insufficient support exists for one to select a particular approach to supervision based solely on the current state of empirical research specifically examining these orientations
- However, more effective to have a model for conducting supervision than merely “shooting from the hip”
- Similar state of affairs to psychotherapy research

# Individual Characteristics

## Characteristics found to be influential include

- cognitive complexity (conceptual level)
- cognitive style (one's preferred way of learning or processing information)
- theoretical orientation (of supervisee and supervisor)
- gender (of the supervisee and supervisor)
- relevant experience (of supervisees and, to some extent, supervisors)
- developmental level (specifically as related to professional development).

# Individual Characteristics

Culture is also important

- The most powerful influence may be the supervisor's willingness to "open the cultural door and walk through it with the supervisee" (Bernard & Goodyear, 2004)
- "all interactions are multicultural" (Bernard & Goodyear, 2004)
- Sensitivity as well as process and outcome evaluation of supervision can alert us to the need for more specific and careful scrutiny of these variables for any given supervision relationship

# Supervisory Relationship

Supervisees of various levels of training have differing needs and expectations for supervision

- Beginners: focus on didactic training and developing self-awareness
- Intermediate: learning to develop alternative conceptualizations, emphasizing personal development, and deriving a cohesive theory
- Advanced: prefer a more complex examination of personal development, transference and countertransference, parallel process, and issues of defensiveness and resistance.

# Supervisory Relationship

- “warmth, acceptance, respect, understanding, and trust” characterize good supervisory relationships
- Effective supervisors encourage an atmosphere of experimentation and appropriately self-disclose (Stoltenberg et al., 1998)

# Supervisory Relationship

- Supervision enhances “working alliance” in therapy, which enhances client outcomes
- Little direct research evidence
- From an EBPP perspective, it is important to assess the impact of supervision on the effectiveness of the supervisee’s counseling and psychotherapy with his or her clients as well as evidence for the learning and professional development of the supervisee

# **Evidence For One's Own Effectiveness in Supervision**

*How does one evaluate what is occurring (evidence) in a given supervision relationship, the impact on the supervisee and the impact on the client?*

# **Evidence For One's Own Effectiveness in Supervision**

If supervisors are unaware of the impact of our supervisees on their clients, it is difficult to consider what should be emphasized in supervision beyond simply attending to the requests or reactions of the supervisees in supervision sessions, or professional development concerns that become apparent in our interactions with them.

# **Evidence For One's Own Effectiveness in Supervision**

Although there is still disagreement regarding what constitutes “evidence” in EBPP, a number of approaches have been discussed as appropriate for determining evidence for effective practice, a few of these appear to fit rather well within the constraints of a supervisory relationship.

# Evidence For One's Own Effectiveness in Supervision

Some of the more relevant approaches include

- Single-participant or N=1 research
- Change process research
- Case studies

These mechanisms offer supervisees tools with which to examine their own work in therapy as well as their role as therapist, aspects of the therapeutic relationship, and relevant client variables.

# **Evidence For One's Own Effectiveness in Supervision**

Useful mechanisms for accomplishing this include

- Evaluating observations of one's own behavior and that of the client in therapy against a given theory (case studies)
- Identifying and measuring process variables that are thought to have an impact on outcomes (process research)

# **Evidence For One's Own Effectiveness in Supervision**

- Identifying and measuring client behaviors before, during, and after interventions (N=1 studies)

# **Evidence For One's Own Effectiveness in Supervision**

Consistent with an EBPP perspective is to ask supervisees, “to investigate and use approaches/interventions that have some empirically established rationale (or lacking that, strong theoretical grounding), and then assess how and why this approach works (or doesn't work) for them when implemented with a given client” (Stoltenberg & Pace, 2007).

# **Evidence For One's Own Effectiveness in Supervision**

This self-evaluation also encourages the supervisee to examine how effectively he or she has assessed client needs, selected interventions, and administered those interventions.

This process should be one that supervisees can apply in other settings as they progress through their careers.

# **Evidence For One's Own Effectiveness in Supervision**

Depending upon the developmental level of the supervisee, different approaches to the selection of therapeutic orientation and interventions may be pursued.

- Less experienced supervisees: the supervisor may prescribe, or at least suggest, an orientation and subsequent interventions to the supervisee and work closely with her or him to identify objectives and goals.

# **Evidence For One's Own Effectiveness in Supervision**

- More experienced supervisees: rather than requiring a particular approach be taken with a given client, the supervisee might produce a rationale based on a relevant review of the literature or previously acquired knowledge.
- Evaluation of supervision should, by extension, include (but not be limited to) an evaluation of the effectiveness of the supervisee in working with clients.

# **Evidence For One's Own Effectiveness in Supervision**

A three stage EBPP approach to supervision includes:

1. assessment of modifying factors relevant to supervision process and goals (including on-going evaluation of supervisee effectiveness)
2. formulation of a supervision plan
3. implementation and on-going evaluation of supervision.

# Assessment of Modifying Factors Relevant to Supervision

## Goals and Developmental Stage

### **Monitor client well being:**

- An ethical duty
- Review and discussion of the assessment of client symptoms, goals, background and risk factors
- Review of formal assessments
- Observation of actual counseling sessions (video or live) or actual supervisor interaction with the client

# Assessment of Modifying Factors Relevant to Supervision

## **Enhance supervisee development**

- Development of basic skills and attitudes
  - ensure supervisees have ample practice experiences, use modeling and direct coaching to enhance skill acquisition, and provide specific feedback regarding the supervisee's performance

# Assessment of Modifying Factors Relevant to Supervision

## **Enhance supervisee development**

- Develop advanced theoretical or critical thinking abilities
  - broad based case presentations, literature reviews, discussions of theory, and case conferences

# Assessment of Modifying Factors Relevant to Supervision

## **Enhance supervisee development**

- Focus on self-awareness or the development of empathy and emotional competence
  - experiential methods such as service assignments in diverse contexts, multicultural awareness exercises, empathy training, exploration of personal life experiences, or referral for personal therapy

# Assessment of Modifying Factors Relevant to Supervision

## **Enhance supervisee development**

- Assessment of the supervisee's stage of professional development
  - early emphasis on a single theoretical model or set of techniques may foster pre-mature closure of exploration of alternatives
  - early focus on fundamental skills and attitudes most appropriate

# Assessment of Modifying Factors Relevant to Supervision

## **Enhance supervisee development**

- Next, focus on critical thinking and theoretical reflection is often very helpful after basic skills have been reasonably mastered
- EVT's or EST's can provide framework for this as can integration of theoretical approaches

# Assessment of Modifying Factors Relevant to Supervision

## **Enhance supervisee development**

- Supervisee Qualities
  - may vary from amotivation through extrinsic and to intrinsic motivation, reflecting a locus of causality in regards to their own behavior (varies by developmental level)
  - supervisees begin their professional development from a more or less encapsulated culture – worldview

# Assessment of Modifying Factors Relevant to Supervision

## **Enhance supervisee development**

- Supervisee Qualities
  - advanced self, interpersonal and cultural awareness are needed by the supervisor as well as a willingness to be open to different cultural perspectives
  - one's experiences are largely determined by the sociocultural contexts we have experienced and, therefore, are subject to expansion and alteration (broadening of schemata) through additional exposure and processing of experience

# Assessment of Modifying Factors Relevant to Supervision

## **Enhance supervisee development**

- Supervisee Qualities
  - Relevant dimensions of diversity may include gender, race/ethnicity, SES, rural-urban backgrounds, relational and family status (marriage, children...), sexual orientation, spiritual and/or religious differences, age, life-stage, career-stage, health, personality, and situational demands or stressors

# Formulation of a Supervision Plan

## **Where the supervisee is functioning developmentally?**

- Supervision goals and methods should be guided by such an assessment across domains of practice relevant to the supervisee's current professional activities, and varied according to the needs reflected in competencies attained.

# Formulation of a Supervision Plan

## **Contextual and multicultural perspective**

- Individual and situational factors (across supervisees, between supervisees and supervisor) should be addressed in order to thoughtfully, respectfully and effectively engage each supervisee in relevant ways and draw upon and expand their strengths and resources to aid their development and their clinical work.

# Formulation of a Supervision Plan

**Personal and professional beliefs, experiences, interests, strengths, characteristics, limitations and biases of the supervisor**

- Cultural self-assessment may help to prevent supervisors from acting from habit and comfort alone, may keep their interactions open and engaged in learning and development and thus more authentic and attuned to supervisee, client and contextual needs.

# Formulation of a Supervision Plan

## **Important aspects of the clinical context of the supervisory relationship**

- Specific client needs, agency or setting needs and policies, professional and ethical standards, legal considerations, limitations of competency or resources, and community needs and standards all may play a modifying role in shaping the content and process of supervision.

# Formulation of a Supervision Plan

## **Important aspects of the clinical context of the supervisory relationship**

- The effectiveness of supervision in part depends upon the quality and specificity of the information available to use in the process of supervision
- We need solid external evidence to be able to see and understand ourselves as well as to guide our decision-making

# Implementation and On-going Evaluation of Supervision

- All aspects of the plan should be evaluated in a self-corrective dynamic fashion allowing for modification as specific needs are met and others emerge or conditions change.
- Evaluation should address supervisee developmental level across motivation, autonomy and awareness (Stoltenberg et al., 1998) as well as the performance of the supervisor and supervisee.

# Implementation and On-going Evaluation of Supervision

- The supervisory alliance (Efstation et al., 1990) should be evaluated along with the unique cultural and contextual factors that may be impacting the supervision relationship, professional learning and development, and client needs and outcomes.
- consider the effects of processes and the outcomes of supervision including the assessment of specific professional competencies

# Implementation and On-going Evaluation of Supervision

Methods of evaluation should be multiple

- Self-reflection and reflection on the process by both supervisee and supervisor forms a foundation, but are limited in terms of processes and impacts that can be assessed.
- Various rating forms tapping supervisee, supervisor, and client assessments of processes and outcomes

# Implementation and On-going Evaluation of Supervision

Methods of evaluation should be multiple

- Work samples from the supervisee are also necessary and include videotape and/or live observation, case conceptualizations, assessments, and so on.
- Supervision is a serious, diverse, complex, resource influenced and time intensive professional activity that requires focal professional development and on-going educational growth

# Clinical Expertise

- Fewer than 1/3 of practicing clinicians monitor client outcomes (Lambert & Hawkins, 2004).
- Clinicians are susceptible to the same biases as anyone unless they are aware of them

# Clinical Expertise

- Accurate and constructive feedback through the training process by supervisors and peers (from direct observation of behavior), should develop more useful “clinical expertise”, particularly if we remain open to feedback and actively collect evidence allowing us to evaluate our effectiveness.

# Conclusion

- In order to effectively utilize the best available research evidence, clinical expertise, and understanding supervisee characteristics, culture, and preferences, supervisors need to become and remain current in our understanding of the research and models of clinical supervision.

# Conclusion

- Specific training in supervision, and supervision of one's supervision, is necessary to set this process in motion.
- Theories and research from other fields (e.g., learning, psychotherapy, human development) should be used to augment our understanding of key processes within the supervision environment.

# Conclusion

- We should maintain a focus on the effects of supervisee behavior on clients and others in the professional environment as part of a comprehensive evaluation of supervision process and outcomes.
- Considerable thoughtful, informed, systematic, and effortful investment in the supervision process is necessary by all parties to enhance the growth and development of supervisees, and protect the welfare of their clients.

Much of preceding perspective  
culled from:

Stoltenberg, C. D., & Pace, T. M. (in press).  
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