The SuperSkills Model: A Supervisory Microskill Competency Training Model

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Streamlined supervision frameworks are needed to enhance and progress the practice and training of supervisors. This author proposes the SuperSkills Model (SSM), grounded in the practice of microskills and supervision common factors, with a focus on the development and foundational learning of supervisors-in-training. The SSM worksheet prompts for competency-based supervisory behaviors from pre-session to post-session, highlighting a culturally aware supervisory relationship; goals and tasks; and feedback and reflection. The versatility of the SSM allows for utility in various settings, accommodates supervisor developmental level, and may be used to evaluate supervisor-in-training development.

Keywords: supervision, supervisors-in-training, SuperSkills Model, microskills, common factors

The profession of counseling has experienced an evolution regarding counseling training methods over the past decades (Capuzzi & Gross, 2009). Compared to literature on training counselors, literature on training supervisors has received less attention and the topic is less understood (Watkins, 2010). Thus, it is not surprising that systems of development for counselors-in-training (CITs) are more advanced than systems for supervisors-in-training (SITs; Watkins, 2010). For example, Ivey, Normington, Miller, Morrill, and Haase (1968) introduced microskills to the field of mental health care, and after four decades, the approach remains a training prototype (Ridley, Kelly, & Mollen, 2011); yet supervisors still lack a standard training model (Watkins, 2012b). Although much overlap exists in counseling and supervision tasks, the process of supervision adds more skill complexity than clinical tasks alone (Pearson, 2000). Further complicating the situation, many clinicians have assumed supervisors feel incompetent and could be well-served by more supervisory training (Uellendahl & Tenenbaum, 2015).

A movement toward efficient methods of training supervisors should be informed by existing theory. Identifying with a theoretical model is paramount to facilitating growth in CITs (Lampropoulos, 2003). Various models of supervision have been proposed. Bernard and Goodyear (2014) broadly delineated first-wave supervision models into one of three categories: models grounded in psychotherapy theory, developmental models, and process models. Second-wave models are more eclectic, with the ability to combine or cycle between first-wave models as needed. The third-wave models reflect a commonfactors approach, gleaning substantiated elements of supervision from the literature to amalgamate into a best-practices method (Bernard & Goodyear, 2014). Despite the combined breadth of models, there remains a lack of knowledge on what constitutes sound supervisory training, signifying the need for consolidation and movement toward supervisory competency models (Milne, Reiser, Cliffe, & Raine, 2011). Established theories of supervision may be enhanced when translated through microskills, which focus on specific behaviors to link theory and practice (Ivey, 1971; Ivey et al., 1968).

Any model that is chosen or created for effective supervisory training should be competencybased, and microskills may be a viable option. The microskills approach has been adapted for the training of supervisors with successful outcomes (James, Milne, & Morse, 2008; Richardson & Bradley, 1984; Russell-Chapin & Ivey, 2004), and there has been a call in the profession to move toward more competency-based forms of supervisor training (Milne et al., 2011). The SuperSkills

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Model (SSM) proposed in this article combines microskills training with supervision common factors to create a framework with which to enhance the development and training of supervisors. The SSM worksheet provides a consolidated and user-friendly tool to assist with the supervision of SITs (please contact the author for a copy of the worksheet).

A Brief Background of Microskills

The use of microskills as a training instrument was born from the world of education. Succinctly, microtraining uses a systematic format to teach individual helping skills and may utilize recordings of practice, step-by-step training, and self-observation (Ivey et al., 1968). Fortune, Cooper, and Allen (1967) simplified and codified teaching skills into a model they called *micro-teaching*, aiming to provide students with an introduction to the experience and practice of teaching. The model provided experienced teachers with a vehicle for training novice teachers and gave the research team more control to track training effects.

When Ivey and colleagues (1968) introduced microskills within mental health care, they proposed the training of *microcounseling*, which focused on the specific behaviors of counseling skills, as useful in counselor education for the quick and effective teaching of counselor trainees. Ivey and colleagues' adaptation of microskills to the mental health field allowed counselor preparation programs to move from nebulous training techniques to a more systematic approach, providing supervisors with a more delineated method to track trainees' progress in actual skill behaviors. The structured method of tracking progress assists supervisors in the process of gatekeeping, making it easier to filter out candidates with difficulties or barriers to learning the core counseling skills (Lambie & Ascher, 2016).

The concept of utilizing microskills in the process of training supervisors has been broached by other researchers. Richardson and Bradley (1984) combined microskills and supervision training to create a *microsupervision model*, which breaks down the supervision skill acquisition process to assessment, modeling, and transfer. These three stages suggest how an SIT's supervisor identifies skill areas for growth, provides educative and corrective information to the SIT, and allows the SIT opportunities to integrate and display new skills. Russell-Chapin and Ivey (2004) utilized microskill design to develop the Microcounseling Supervision Model (MSM). The Counselling Interview Rater Form (CIRF) is a component of the MSM, which breaks down the counseling session into stages that are then comprised of specific skills to be assessed (Russell-Chapin & Ivey, 2004). The MSM is a useful tool to practice providing constructive feedback, because the CIRF "is mostly used as a method of providing positive, corrective, qualitative and quantitative feedback for supervisees" (Russell-Chapin & Ivey, 2004, p. 167). James, Milne, & Morse (2008) adapted microskills to the dialogue used by supervisors within a cognitive-behavioral supervisory approach. These models can be useful in the development of supervisors; however, there is a need for the creation of a supervision model that rises above current approaches, yet provides enough focus to be specific to clinical supervision (Morgan & Sprenkle, 2007). The proposed SSM acts to fill potential deficiencies by balancing focus between more detailed supervisory actions and a wider breadth of supervisory behaviors.

The Progression of Supervision Models

Clinical supervision is recognized in the mental health professions as the signature pedagogy (Barnett, Erickson Cornish, Goodyear, & Lichtenberg, 2007; Goodyear, Bunch, & Claiborn, 2006). Introducing students to the foundational skills within mental health care has been a practice of supervisors for over 40 years (Ridley et al., 2011). Different professions within mental health care vary in job function and purpose, but the skills, processes, and objectives of supervision remain somewhat uniform across disciplines and cultures (Bernard & Goodyear, 2014). Supervision as an intervention

shares characteristics with other interventions—namely teaching, psychotherapy, and consultation yet is distinct (Milne, 2006). The unique aspects of supervision include the propensity to be provided by and to individuals in the same profession, an evaluative and hierarchical nature, and an extension over time (Bernard & Goodyear, 2014).

The process of supervision is often referred to as *isomorphic*, meaning that the relationship between client and counselor is often similar in structure to the concurrent relationship between counselor and supervisor (Koltz, Odegard, Feit, Provost, & Smith, 2012). However, this triadic configuration does not take a fourth entity into account: the relationship between the supervisor and the supervisor's supervisor. This lapse is partially because of the underrepresentation of supervisory training knowledge in the counseling literature (Richardson & Bradley, 1984).

Another parallel between counseling and supervision is the utilization of theory to inform practice. Models of supervision may be classified in a number of ways. Bernard and Goodyear (2014) broadly delineated first-wave supervision models into one of three categories: models grounded in psychotherapy theory, developmental models, and process models. Psychotherapy-based models utilize psychotherapy's theoretical approaches as a framework for use in supervision. Choice of psychotherapy-based models is often informed by the supervisor's theoretical approach when in the counselor role. Familiarity with one's own theory may provide the supervisor a level of comfort and an added sense of competence. Developmental models focus on the developmental needs of the CIT based on the status, pace, or standard of professional development. Focus on individual development allows the supervisor to tailor interventions to the current needs of the supervisee. Also, under the developmental model umbrella, models of social roles take further consideration of CIT contextual needs, based on such factors as cultural or experiential background (Aten, Strain, & Gillespie, 2008). Process models focus on the process within each supervision session, spotlighting the relationship and interactions between supervisor and CIT. Bernard and Goodyear (2014) proposed that these broad categories are best utilized in conjunction with one another.

From the broad first-wave supervision models, Bernard and Goodyear (2014) identified secondwave models of the next generation: combined models and target-issue models. Combined supervision models may blend multiple approaches within one of the above three categories (e.g., two psychotherapy theories) or between the above three categories (e.g., one developmental model and one process model). This approach may allow supervisors to provide what is needed to themselves and their supervisees within the supervisory process. Target-issue models hone in on specific elements or needs within supervision. These may be helpful to supervisors who need a more direct, concentrated approach to address a specific issue that arises in supervision.

Third-wave models have emerged from continued research on specific supervision models, providing an index of evidence from which supervisors and researchers may benefit. A paucity of evidence for efficacy *between* supervision models has created a movement toward gleaning aspects found to be effective *within* supervision models (Sprenkle, 1999). Supervisory common factors refer to core components that remain consistent when cutting across models and perspectives (Watkins, Budge, & Callahan, 2015). Integrating different approaches to create common-factors models hinges on the assumption that supervision models are unique; by borrowing strengths from multiple models, new frameworks may be created to fill in weaknesses (Lampropoulos, 2003). For example, Lampropoulos (2003) used the notion of eclecticism by blending common supervisory pathways, stages, and processes to make a case for the incorporation of empirically validated practices both within and outside mental health care. Morgan and Sprenkle (2007) provided a similar process, utilizing broader supervision models and popular supervision conceptualizations to create a model

focused on relationship, development, and role continuums in the supervisory position. Aten et al. (2008) described an integrative model that they referred to as *transtheoretical*.

The Case for Systematizing Supervisor Training

Aside from choosing a model of supervision, there are other elements that affect supervisory development. There are two environments supervisors practice within. Some assume the role in settings that primarily serve the public, acting as a supervisor to clinicians or interns working directly with clients. Others supervise in academic settings, primarily supervising the development of novice counseling students.

A large percentage of mental health professionals will ultimately act in a supervisory role (Norcross, Hedges, & Castle, 2002). This circumstance makes it especially perplexing that counseling professionals receive only minimal supervisory training (Pelling, 2008) and oftentimes no training at all (DeKruyf & Pehrsson, 2011). Supervisors are frequently placed into supervisory positions to learn on the job (Knapp & VandeCreek, 1997). Gonsalvez (2008) referred to this route of becoming a supervisor via the maxim *see one, do one, teach one*. When training does take place, it may come in the form of didactic (e.g., seminars, workshops, class instruction) or experiential (e.g., supervision of supervision) means (Watkins, 2012a). However, inconsistencies in training requirements for supervisors have been documented as recently as 2014 (Nate & Haddock, 2014). The Center for Credentialing & Education, an affiliate of the National Board for Certified Counselors, established the Approved Clinical Supervisor (ACS) credential, with 15 states having adopted the requirements as of 2016 (Center for Credentialing & Education, 2016). The compulsory conditions of becoming a supervisor still vary greatly.

Becoming a supervisor has developmental hurdles parallel to those of becoming a counselor (Milne, 2006). Processes and activities in both may look identical (Aten, Madson, & Kruse, 2008; Burns & Holloway, 1990). Encountering the shift in perspective from mental health practitioner to mental health supervisor can be troublesome (Watkins, 2013). SITs may experience feelings of anxiety and demoralization, trouble with forming a supervisory identity, and difficulty finding conviction about the meaningfulness of supervision (Watkins, 2013). Not unlike novice counselors, novice supervisors deal with the juggling of new skills and awareness, the discomfort of trying to find one's own style, and self-doubt (Gazzola, De Stefano, Thériault, & Audet, 2013). These challenges may account for supervision models that aim to utilize SITs' inherent therapeutic skills (Pearson, 2006).

The role of supervisor adds layers of responsibility that may not be present in the role of counselor alone. Counselors are responsible for advocating on behalf of clients (American Counseling Association [ACA], 2014); however, supervisors advocate for clients and CITs. The dual role of advocacy places the supervisor in the role of gatekeeper of the profession, charged with CIT development and the well-being of clients (Gaete & Ness, 2015). Balancing the duality of advocacy and evaluation may be taxing on new supervisors (Johnson, 2007).

The added responsibility of the supervisory role ushers in ethical issues beyond those incurred by clinicians alone (Rubin, 1997). Practitioners placed unwillingly into the supervisory role with little interest in the practice of supervision may pose a threat to the development of clinicians and future supervisors (Ladany, Mori, & Mehr, 2013). If trained in supervision by someone lacking passion for the practice, the meaningfulness of supervision is unlikely to be transmitted to the SIT (Watkins, 2013). It is more ideal to develop a supervisory identity while surrounded by others in a similar learning process (Watkins, 2013), a dynamic that may not be present for practitioners in the field learning new skills of supervision.

Essential Supervisory Microskills: The SuperSkills Model (SSM)

The purpose of the SSM is to fill the need for a functional training model focused on supervisory behaviors gleaned from the supervision literature and deemed to be common across research. The focus is less on (but may be combined with) conceptualizations of supervisor theory and roles, and more on practical utility of supervisory behavior and process before, during, and after a given supervision session. The goal of the SSM worksheet and each of the foci is to help SITs integrate important aspects of supervision into each session. With this approach and tool, SITs are not left to remember all topics simultaneously; instead, the checklist included in the worksheet assists with staying on task and works toward laying the foundation for more adept integration of key supervisory factors as SITs gain more experience. The SSM worksheet may be utilized in a checklist or written fashion, incorporated into necessary supervision notes for documentation purposes, and completed to varying degrees of formality. Depending on supervisory style, the worksheet may be used during a supervision session or supervision-of-supervision meeting, or outside of these (prior to and/or after session). The SSM worksheet also can be used as a tool for supervisors to track individual progress and accordance with supervisory common factors. Generally speaking, the SSM and its worksheet can be adapted to meet the needs of the individual and environmental context.

Within the SSM, there is an assumption that appropriate preparation has taken place prior to or concurrently with supervision (e.g., supervisory training, development of a supervision contract, continued growth toward approach and identity/style, alignment with a model or structure, vetting of supervisees, ethical and legal considerations). These assumptions suggest that the SSM is not a stand-alone method for teaching and learning supervision, but rather a means to assist the foundational learning of SITs and provide supervisors at any stage in development with continued prompting of current supervisory focal points. As new potential supervisory common factors emerge from the literature, focal points may be altered or added. The first element of the current SSM is a pre-session contemplation that encourages intentionality and consideration of focus in an upcoming supervision session. The second component of the SSM emphasizes tangible supervisory behaviors that work toward creating and fostering a strong supervisory relationship hinging on cultural interest and awareness. The third facet of the SSM highlights supervisory goals and tasks and differentiates between practical and process goal and task foci. Feedback and reflection is the SSM's fourth dimension, which also gives consideration to SIT response to practical and process events, and includes attention to direct and indirect feedback and positive and constructive feedback. The final item of the SSM is post-session reflection, which allows for assessment of the supervision session. SITs may use this portion of the SSM to evaluate supervisory skill, consider future areas for focus, and document concerns or needs regarding the CIT.

Pre-Session

The first component of the SSM is pre-session reflection. Prior to beginning a supervision session, it may be necessary for an SIT to refer to notes from previous sessions to recall past areas of focus or pressing issues. A CIT may be working on specific counseling skills chosen for review in the upcoming supervision session and SITs need to be mindful of the focus for the session. The focus also includes supervisory skills that the SIT plans to intentionally practice, which should be written in the initial pre-session consideration on the worksheet. However, flexibility is necessary; when CITs experience difficult client presentations, such as suicidal ideation, SITs may need to adjust focus to best serve the development of the CIT and the supervisory environment (Hoffman, Osborn, & West, 2013). As client welfare falls on the shoulders of both the CIT and the supervisor, there may be a need for SITs to inquire for updates in matters that have legal implications (Branson, Cardona, & Thomas, 2015).

Coming into session considering one's theoretical stance and supervisory style can be beneficial. Even though supervision is highly contextual with many areas to consider, supervision models act as a conceptual map to follow during sessions (Bernard & Goodyear, 2014). The "newness" of the supervisory role and the added layers of awareness may not equate to seamless use of a supervision model; however, using intention in supervision with regard to theory and style may aid continued understanding and improvement as a supervisor. The second pre-session consideration allows SITs to document intentions related to supervisory model, theory, or role.

Culturally Conscious Supervisory Relationships

The SSM's second component is creating and maintaining a relationship with a focus on cultural factors. The supervisory relationship is a significant mediating factor for successful supervision outcomes (Ellis, 1991). Not only is supervisor focus on culture correlated with positive supervisory relationships (Schroeder, Andrews, & Hindes, 2009; Wong, Wong, & Ishiyama, 2013), but emphasizing culture fulfills the supervisor's responsibility to facilitate deeper awareness of cultural realities for supervisees (Fukuyama, 1994). Bordin (1983) conceptualized the supervisory relationship as the emotional bond between supervisor and supervisee and one of the triadic components in the supervisory working alliance (SWA). When SITs bring cultural considerations into supervision, stronger SWAs are created (Bhat & Davis, 2007; Crockett & Hays, 2015). Consequently, a lack of comfort in the supervisory relationship may create a less conducive atmosphere for broaching cultural dialogues (White-Davis, Stein, & Karasz, 2016). The SWA positively affects the therapeutic alliance (DePue, Lambie, Liu, & Gonzalez, 2016), CIT satisfaction with supervision (Crockett & Hays, 2015), CIT willingness to disclose information (Gunn & Pistole, 2012; Mehr, Ladany, & Caskie, 2010), and CIT work satisfaction (Sterner, 2009).

The supervisory relationship is a large component of the SWA, and thus correlations of the SWA on other important supervisory factors may have bearing on building cultural relationships. SITs initiating productive conversations surrounding counseling self-efficacy (Ganske, Gnilka, Ashby, & Rice, 2015), CIT anxiety (Gnilka, Rice, Ashby, & Moate, 2016), and sources of stress and coping (Gnilka, Chang, & Dew, 2012; Sterner, 2009) may ultimately strengthen the supervisory relationship. Focus on these factors has been shown to increase the prevalence of CITs bringing up cultural issues in supervision (Nilsson, 2007). Likewise, supervisors who bring cultural considerations into supervision engender higher levels of supervisee self-efficacy in skill and multicultural competence (Constantine, 2001; Crockett & Hays, 2015; Kissil, Davey, & Davey, 2013; Ladany, Brittan-Powell, & Pannu, 1997; Vereen, Hill, & McNeal, 2008).

A culturally conscious supervisory relationship is beneficial to both supervision and counseling environments; thus, documenting relationship-building actions on the worksheet gives appropriate and necessary focus to the actual relationship-building behaviors by the SIT. Providing time in supervision to focus on CIT relationships in both professional/academic and personal settings is important because both domains influence professional development (Rønnestad & Skovholt, 2003) and may ultimately relate to deepening the supervisory relationship (Mutchler & Anderson, 2010). Challenging dominant ideologies in supervision also has positive implications for broaching the concept of power within the supervisory and counseling environments (Hernández & McDowell, 2010). It may be useful for an SIT to inquire about a CIT's values, beliefs, and on what the counselor places importance, because highlighting culture and relationships in supervision works toward exemplifying the importance of focusing on culture to create therapeutic relationships with clients (Willis-O'Connor, Landine, & Domene, 2016). The SWA is compatible with a multicultural perspective in supervision (Bordin, 1983) and is considered transtheoretical, making the SWA adaptable to different counseling and supervisory theories (Bordin, 1983; Wood, 2005).

Goals and Tasks

The SSM's third component, goals and tasks, is based on the two other components of Bordin's (1983) SWA. These are important to include because the SWA may be the most commonly cited factor in supervision literature (Watkins, 2014b). The goals refer to mutually agreed upon and understood objectives between the SIT and supervisee pertaining to the development of the CIT. The tasks refer to the action steps taken to achieve those objectives and the negotiation between SIT and supervisee to frame these steps in appropriate and achievable ways. Goals help to focus and direct supervision sessions while tasks act to pursue and attain the goals (Watkins, 2014b). The SSM worksheet includes space for the SIT to write goals and tasks for the supervision session, and the 11-point Likert scales provide the means to document the degree to which goals/tasks are agreed upon and achieved.

It is natural for novice supervisors to function from the perspective of a clinician, considering that this framework may be most comfortable or available (Watkins, 2014a). However, in doing so, the SIT may miss important components of CIT growth (Ponton & Sauerheber, 2014). Focus for goals and tasks should be directed at the process of counseling the client and the process of becoming (or being) a counselor; the SIT must attend to the space where the counselor's "professional" meets the "personal" (Ponton & Sauerheber, 2014). For example, if a supervisee is unsure how to proceed with a client's presenting issue, sole focus on goals and tasks aimed at client conceptualization and practical measures may foster dependence within the CIT to seek answers externally and work against a sense of self-efficacy and independence. Likewise, only attending to goals and tasks centralized to the counselor's personal process may miss the opportunity to locate practical skills. Balancing goals and tasks with emphasis on the CIT's process (e.g., potential feelings of inadequacy, confusion, difficulty with ambiguity) and practical abilities (e.g., specific skill use, conceptualization through a specific theoretical lens) may address individual needs and applicable skills to facilitate growth as a counselor. Differences will exist in CIT personality, ability, and developmental progress; therefore, SITs need to determine the appropriate equilibrium between process and practical focus for each supervisee (Reising & Daniels, 1983). The SSM worksheet contains space for the consideration of both practical and process goals and tasks, and the level of agreement and achievement.

Feedback and Reflection

Feedback and reflection comprise the fourth component to the SSM. An integral component to the supervision process, feedback is considered to be a change mechanism consistent across supervisory theory (Goodyear, 2014). Developmental levels of CITs vary (Rønnestad & Skovholt, 2003) and may influence the style of feedback (e.g., direct, indirect). Using the example of CITs who self-criticize their demonstration of skill, it may be useful for SITs to provide direct positive feedback to communicate successful skill demonstration (e.g., "That is a good example of reflecting a feeling."). However, it is important to be mindful that feedback is a learning mechanism and to gradually remove oneself as support and transfer responsibility to the CIT (van de Pol, Volman, & Beishuizen, 2010). To that end, SITs may consider using indirect feedback to assist CITs to self-identify strengths (e.g., "If you had to identify a skill you did really well, what would it be?"). Instances exist throughout counselor development calling for various levels of direction in supervision (Goodyear, 2014), and SITs will develop a feel for when to provide direct and indirect feedback as they gain experience. To assist with this process, the worksheet includes a conceptual continuum for SITs to document feedback as direct or helping the CIT to self-identify.

Similar to goals and tasks, feedback for CITs should encompass both skill and process components (Liddle, 1986). Focus on learning counseling skills increases a CIT's professional competency and identity (Aladağ, Yaka, & Koç, 2014). The ability to make skills explicit helps CITs to know what to

look for and may assist the CIT and SIT in providing guidance and structure to the feedback process (Russell-Chapin & Sherman, 2000). Likewise, allowing CITs to use self-reflection to explore personal process components and arrive at meaningful conclusions may help facilitate learning, growth, and development (Guiffrida, 2015). For an example of skill versus process focus, consider a CIT learning to reflect feelings. By reviewing a recording of a counseling session, the SIT may witness the client expressing anger; or the SIT may choose to focus on skill, prompting the CIT to try identifying what feeling is being expressed or how to effectively reflect anger to the client. By focusing on process, the SIT may explore the CIT's relationship with anger (e.g., how others have displayed anger to the CIT or how the CIT expresses anger), as self-reflection could reveal a barrier toward accurately identifying and reflecting anger. The SSM worksheet contains both practical and process feedback and reflection sections for the SIT to consider.

It is an ethical imperative for supervisors to provide ongoing feedback and evaluation to CITs (ACA, 2014). Positive feedback to CITs has been found to increase counseling self-efficacy and lower anxiety, while negative feedback decreases counseling self-efficacy and elicits more anxiety (Daniels & Larson, 2001). Negative feedback may include such elements as vagueness, inconsiderate tone, hidden meaning, delay between an episode and reference to an episode, and subjectivity (Baron, 1988). Alternately, constructive feedback is relevant, shared immediately, factual, helpful, confidential, respectful, tailored, and encouraging (Ovando, 1994). Constructive feedback in supervision has been found to be the highest-ranked demand among CITs (Ladany, Lehrman-Waterman, Molinaro, & Wolgast, 1999), and when combined with microskills training, it has been found to contribute to learning effectiveness (Fyffe & Oei, 1979). CITs who do not receive constructive feedback may experience stagnation in skill progress (Russell-Chapin & Ivey, 2004). Constructive feedback can be challenging for SITs to provide (Motley, Reese, & Campos, 2014), especially because supervisors are trained as counselors and giving evaluative judgment may seem counterintuitive to the therapeutic skill set (Ladany et al., 1999). The struggles associated with constructive feedback may require supervisors to call upon the supervisory relationship, taking inventory of CIT self-efficacy and confidence levels, to inform how and when to provide constructive feedback (Daniels & Larson, 2001). Supervisor impediments to providing quality feedback are recognized by both CITs and SITs (Heckman-Stone, 2004); thus, the addition of positive and constructive feedback sections on the worksheet may prompt SITs to practice providing both forms of feedback to CITs. The explicit cue for feedback also acts as a practical measure to inform SITs' recording of supervision progress notes following the supervision session.

Post-Session

The SSM's final component is post-session reflection. Utilizing the post-session for documentation benefits the CIT and the SIT. Maintaining supervision notes is an ethically sound practice and can assist supervisors in documenting practical, ethical, and legal issues (Luepker, 2012). Keeping records of supervision also proves beneficial to the development of SITs' style and theoretical stance (Bernard, 2014). Timely and accurate documentation may act as a future reminder for areas on which to focus for the CIT or SIT.

The supervision note may have an evaluative component to it. Where applicable, a supervisor may begin to evaluate a CIT based on criteria set by an associated institution (e.g., university, occupational setting) or on agreed-upon standards between the supervisor and CIT (e.g., a measure found in the literature based on specific need). Likewise, the SIT may utilize documentation to evaluate their progress as a supervisor. Each microskill suggestion may act as an area to consider for evaluation or self-evaluation. These areas may include progress on deepening the cultural relationship, assessment of supervisory actions in working toward agreed-upon goals, appraisal of goal achievement, appropriate

balance of direct feedback and assisting the CIT to formulate their own answers, appropriate balance of focus on counseling instruction and personal process, examples of interventions consistent with a theoretical model or supervisory role, and exploration of countertransference during the session.

Discussion

The SSM's flexibility and focus on a behavioral framework may be efficacious in training supervisors from varying cultural identities and helping SITs learn how to supervise counselors of differing backgrounds. CITs gain multicultural knowledge in their development as counselors; this continual learning process is suitable to microskill techniques, as research has shown that newly acquired skills can be employed during continued multicultural awareness (Hall & Richardson, 2014).

The flexibility of the SSM gives SITs freedom in pace and style of development. Just as neophyte counselors are to focus on their own skills and process in early training, gradually increasing their abilities to work effectively with clients, SITs may follow a similar path of needing to focus on supervisory abilities before providing effective supervision (Lampropoulos, 2003).

The freedom to be flexible in supervisory development is corroborated by existing models. Morgan and Sprenkle (2007) suggested a model that conceptualizes supervisor behaviors and roles on continuums, assuming that supervisors will have knowledge of their own styles and strengths to adjust and flex where needed. Goodyear (2014) created a model that provides SITs the ability to choose how to provide feedback, landing anywhere between direct instruction and self-directed learning. The SSM's composition of common-factor components allows for adaptation to other models with both flexible and focused supervisory interventions. The SSM also utilizes updated research and literature to inform more specified behaviors associated with positive supervisory and therapeutic outcomes.

Conclusions

Supervision continues to become more recognized, accepted, and vital to the mental health professions for the preparation of multiculturally competent counselors (Watkins & Milne, 2014). There remains a dearth of information on how to effectively train supervisors, and a movement toward competency-based models has been suggested (Milne et al., 2011). Just as Ivey and fellow researchers (1968) adapted microskills training to counseling in order to study and bridge theory and practice, consolidating supervisory common factors "could not only provide a template for supervision research, but also for teaching and providing supervision as well" (Morgan & Sprenkle, 2007, p. 2). The SSM and accompanying worksheet are a step toward a simplified conceptualization and user-friendly tool to continue progressing supervision training and practice.

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References

- Aladağ, M., Yaka, B., & Koç, İ. (2014). Opinions of counselor candidates regarding counseling skills training. *Educational Sciences: Theory and Practice*, 14, 879–886. doi:10.12738/estp.2014.3.1958
- American Counseling Association. (2014). 2014 ACA code of ethics. Alexandria, VA: Author.
- Aten, J. D., Madson, M. B., & Kruse, S. J. (2008). The supervision genogram: A tool for preparing supervisorsin-training. *Psychotherapy: Theory, Research, Practice, Training*, 45, 111–116. doi:10.1037/0033-3204.45.1.111
- Aten, J. D., Strain, J. D., & Gillespie, R. E. (2008). A transtheoretical model of clinical supervision. *Training and Education in Professional Psychology*, 2, 1–9. doi:10.1037/1931-3918.2.1.1
- Barnett, J. E., Erickson Cornish, J. A., Goodyear, R. K., & Lichtenberg, J. W. (2007). Commentaries on the ethical and effective practice of clinical supervision. *Professional Psychology: Research and Practice*, 38, 268– 275. doi:10.1037/0735-7028.38.3.268
- Baron, R. A. (1988). Negative effects of destructive criticism: Impact on conflict, self-efficacy, and task performance. *Journal of Applied Psychology*, 73, 199–207. doi:10.1037/0021-9010.73.2.199
- Bernard, J. M. (2014). The use of supervision notes as a targeted training strategy. *American Journal of Psychotherapy*, 68, 195–212.
- Bernard, J. M., & Goodyear, R. K. (2014). *Fundamentals of clinical supervision* (5th ed.). Upper Saddle River, NJ: Pearson Education.
- Bhat, C. S., & Davis, T. E. (2007). Counseling supervisors' assessment of race, racial identity, and working alliance in supervisory dyads. *Journal of Multicultural Counseling and Development*, *35*, 80–91. doi:10.1002/j.2161-1912.2007.tb00051.x
- Bordin, E. S. (1983). Supervision in counseling: II. Contemporary models of supervision: A working alliance based model of supervision. *The Counseling Psychologist*, *11*, 35–42. doi:10.1177/0011000083111007
- Branson, A., Cardona, B., & Thomas, C. (2015). Supporting couples, marriage, and family therapy trainees in need of performance improvement: Implications for counselor educators and supervisors. *The Family Journal*, 23, 309–319. doi:10.1177/1066480715601098
- Burns, C. I., & Holloway, E. L. (1990). Therapy in supervision: An unresolved issue. *The Clinical Supervisor*, *7*, 47–60. doi:10.1300/J001v07n04_05
- Capuzzi, D., & Gross, D. R. (2009). Introduction to the counseling profession. Upper Saddle River, NJ: Pearson.
- Center for Credentialing & Education. (2016). *Approved clinical supervisor*. Retrieved from <u>http://www.cce-global.org/ACS</u>
- Constantine, M. G. (2001). Multiculturally-focused counseling supervision: Its relationship to trainees' multicultural counseling self-efficacy. *The Clinical Supervisor*, 20, 87–98. doi:10.1300/J001v20n01_07
- Crockett, S., & Hays, D. G. (2015). The influence of supervisor multicultural competence on the supervisory working alliance, supervisee counseling self-efficacy, and supervisee satisfaction with supervision: A mediation model. *Counselor Education and Supervision*, 54, 258–273. doi:10.1002/ceas.12025
- Daniels, J. A., & Larson, L. M. (2001). The impact of performance feedback on counseling self-efficacy and counselor anxiety. *Counselor Education and Supervision*, 41, 120–130. doi:10.1002/j.1556-6978.2001.tb01276.x
- DeKruyf, L., & Pehrsson, D.-E. (2011). School counseling site supervisor training: An exploratory study. *Counselor Education and Supervision*, 50, 314–327. doi:10.1002/j.1556-6978.2011.tb01918.x
- DePue, M. K., Lambie, G. W., Liu, R., & Gonzalez, J. (2016). Investigating supervisory relationships and therapeutic alliances using structural equation modeling. *Counselor Education and Supervision*, 55, 263–277. doi:10.1002/ceas.12053
- Ellis, M. V. (1991). Critical incidents in clinical supervision and in supervisor supervision: Assessing supervisory issues. *Journal of Counseling Psychology*, *38*, 342–349. doi:10.1037/0022-0167.38.3.342
- Fortune, J. C., Cooper, J. M., & Allen, D. W. (1967). The Stanford summer micro-teaching clinic, 1965. *Journal of Teacher Education*, *18*, 389–393.
- Fukuyama, M. A. (1994). Critical incidents in multicultural counseling supervision: A phenomenological approach to supervision research. *Counselor Education and Supervision, 34,* 142–151. doi:10.1002/j.1556-6978.1994.tb00321.x
- Fyffe, A. E., & Oei, T. P. S. (1979). Influence of modelling and feedback provided by the supervisors in a microskills training program for beginning counsellors. *Journal of Clinical Psychology*, 35, 651–656. doi:10.1002/1097-4679(197907)35:3<651::AID-JCLP2270350332>3.0.CO;2-Z

- Gaete, J., & Ness, O. (2015). Supervision: From prescribed roles to preferred positionings. *The Clinical Supervisor*, 34, 57–77. doi:10.1080/07325223.2015.1006068
- Ganske, K. H., Gnilka, P. B., Ashby, J. S., & Rice, K. G. (2015). The relationship between counseling trainee perfectionism and the working alliance with supervisor and client. *Journal of Counseling & Development*, 93, 14–24. doi:10.1002/j.1556-6676.2015.00177.x
- Gazzola, N., De Stefano, J., Thériault, A., & Audet, C. T. (2013). Learning to be supervisors: A qualitative investigation of difficulties experienced by supervisors-in-training. *The Clinical Supervisor*, 32, 15–39. doi:10.1080/07325223.2013.778678
- Gnilka, P. B., Chang, C. Y., & Dew, B. J. (2012). The relationship between supervisee stress, coping resources, the working alliance, and the supervisory working alliance. *Journal of Counseling & Development*, 90, 63–70. doi:10.1111/j.1556-6676.2012.00009.x
- Gnilka, P. B., Rice, K. G., Ashby, J. S., & Moate, R. M. (2016). Adult attachment, multidimensional perfectionism, and the alliances among counselor supervisees. *Journal of Counseling & Development*, 94, 285–296. doi:10.1002/jcad.12085
- Gonsalvez, C. J. (2008). Introduction to the special section on clinical supervision. *Australian Psychologist*, 43, 76–78. doi:10.1080/00050060802068547
- Goodyear, R. K. (2014). Supervision as pedagogy: Attending to its essential instructional and learning processes. *The Clinical Supervisor*, *33*, 82–99. doi:10.1080/07325223.2014.918914
- Goodyear, R. K., Bunch, K., & Claiborn, C. D. (2006). Current supervision scholarship in psychology: A five year review. *The Clinical Supervisor*, 24, 137–147. doi:10.1300/J001v24n01_07
- Guiffrida, D. (2015). A constructive approach to counseling and psychotherapy supervision. *Journal of Constructivist Psychology*, 28, 40–52. doi:10.1080/10720537.2014.922911
- Gunn, J. E., & Pistole, M. C. (2012). Trainee supervisor attachment: Explaining the alliance and disclosure in supervision. *Training and Education in Professional Psychology*, *6*, 229–237. doi:10.1037/a0030805
- Hall, K. G., & Richardson, E. D. (2014). Multicultural microskills: Implementation on an existing design. *Journal for International Counselor Education*, *6*, 75–89.
- Heckman-Stone, C. (2004). Trainee preferences for feedback and evaluation in clinical supervision. *The Clinical Supervisor*, 22, 21–33. doi:10.1300/J001v22n01_03
- Hernández, P., & McDowell, T. (2010). Intersectionality, power, and relational safety in context: Key concepts in clinical supervision. *Training and Education in Professional Psychology*, *4*, 29–35. doi:10.1037/a0017064
- Hoffman, R. M., Osborn, C. J., & West, J. D. (2013). Clinical supervision of counselors-in-training working with suicidal clients: A grounded theory investigation. *The Clinical Supervisor*, 32, 105–127. doi:10.1080/07325223.2013.780991
- Ivey, A. E. (1971). *Microcounseling: Innovations in interviewing training*. Oxford, England: Thomas.
- Ivey, A. E., Normington, C. J., Miller, C. D., Morrill, W. H., & Haase, R. F. (1968). Microcounseling and attending behavior: An approach to pre-practicum training [monograph]. *Journal of Counseling Psychology*, 15, 1–12.
- James, I. A., Milne, D. L., & Morse, R. (2008). Microskills of clinical supervision: Scaffolding skills. *Journal of Cognitive Psychotherapy*, 22, 29–36. doi:10.1891/0889.8391.22.1.29
- Johnson, W. B. (2007). Transformational supervision: When supervisors mentor. *Professional Psychology: Research and Practice*, *38*, 259–267. doi:10.1037/0735-7028.38.3.259
- Kissil, K., Davey, M., & Davey, A. (2013). Foreign-born therapists in the United States: Supervisors' multicultural competence, supervision satisfaction, and counseling self-efficacy. *The Clinical Supervisor*, 32, 185–211. doi:10.1080/07325223.2013.846746
- Knapp, S., & VandeCreek, L. (1997). Ethical and legal aspects of clinical supervision. In C. E. Watkins, Jr. (Ed.), *Handbook of Psychotherapy Supervision* (pp. 589–599). New York, NY: Wiley.
- Koltz, R. L., Odegard, M. A., Feit, S. S., Provost, K., & Smith, T. (2012). Parallel process and isomorphism: A model for decision making in the supervisory triad. *The Family Journal*, 20, 233–238. doi:10.1177/1066480712448788
- Ladany, N., Brittan-Powell, C. S., & Pannu, R. K. (1997). The influence of supervisory racial identity interaction and racial matching on the supervisory working alliance and supervisee multicultural competence. *Counselor Education and Supervision*, *36*, 284–304. doi:10.1002/j.1556-6978.1997.tb00396.x

- Ladany, N., Lehrman-Waterman, D., Molinaro, M., & Wolgast, B. (1999). Psychotherapy supervisor ethical practices: Adherence to guidelines, the supervisory working alliance, and supervisee satisfaction. *The Counseling Psychologist*, 27, 443–475. doi:10.1177/0011000099273008
- Ladany, N., Mori, Y., & Mehr, K. E. (2013). Effective and ineffective supervision. *The Counseling Psychologist*, 41, 28–47. doi:10.1177/0011000012442648
- Lambie, G. W., & Ascher, D. L. (2016). A qualitative evaluation of the Counseling Competencies Scale with clinical supervisors and their supervisees. *The Clinical Supervisor*, *35*, 98–116. doi:10.1080/07325223.2015.1132398
- Lampropoulos, G. K. (2003). A common factors view of counseling supervision process. *The Clinical Supervisor*, 21, 77–95. doi:10.1300/J001v21n01_06
- Liddle, B. J. (1986). Resistance in supervision: A response to perceived threat. *Counselor Education and Supervision*, *26*, 117–127. doi:10.1002/j.1556-6978.1986.tb00706.x
- Luepker, E. T. (2012). *Record keeping in psychotherapy and counseling: Protecting confidentiality and the professional relationship* (2nd ed.). New York, NY: Routledge.
- Mehr, K. E., Ladany, N., & Caskie, G. I. L. (2010). Trainee nondisclosure in supervision: What are they not telling you? *Counselling & Psychotherapy Research*, *10*, 103–113. doi:10.1080/14733141003712301
- Milne, D. L. (2006). Developing clinical supervision research through reasoned analogies with therapy. *Clinical Psychology & Psychotherapy*, *13*, 215–222. doi:10.1002/cpp.489
- Milne, D. L., Reiser, R. P., Cliffe, T., & Raine, R. (2011). SAGE: Preliminary evaluation of an instrument for observing competence in CBT supervision. *The Cognitive Behaviour Therapist*, 4, 123–138. doi:10.1017/S1754470X11000079
- Morgan, M. M., & Sprenkle, D. H. (2007). Toward a common-factors approach to supervision. *Journal of Marital and Family Therapy*, 33, 1–17. doi:10.1111/j.1752-0606.2007.00001.x
- Motley, V., Reese, M. K., & Campos, P. (2014). Evaluating corrective feedback self-efficacy changes among counselor educators and site supervisors. *Counselor Education and Supervision*, *53*, 34–46. doi:10.1002/j.1556-6978.2014.00047.x
- Mutchler, M., & Anderson, S. (2010). Therapist personal agency: A model for examining the training context. *Journal of Marital and Family Therapy*, *36*, 511–525. doi:10.1111/j.1752-0606.2010.00198.x
- Nate, R. D., & Haddock, L. R. (2014). An exploration of counselor supervisor requirements across the United States. *Ideas and research you can use: Vistas 2014*. Retrieved from <u>https://www.counseling.org/</u> <u>knowledge-center/vistas/by-year2/vistas-2014/docs/default-source/vistas/article_31</u>
- Nilsson, J. E. (2007). International students in supervision: Course self-efficacy, stress, and cultural discussions in supervision. *The Clinical Supervisor*, *26*, 35–47. doi:10.1300/J001v26n01_04
- Norcross, J. C., Hedges, M., & Castle, P. H. (2002). Psychologists conducting psychotherapy in 2001: A study of the Division 29 membership. *Psychotherapy: Theory, Research, Practice, Training*, 39, 97–102. doi:10.1037/0033-3204.39.1.97
- Ovando, M. N. (1994). Constructive feedback: A key to successful teaching and learning. *International Journal of Educational Management*, *8*, 19–22.
- Pearson, Q. M. (2000). Opportunities and challenges in the supervisory relationship: Implications for counselor supervision. *Journal of Mental Health Counseling*, 22, 283–294.
- Pearson, Q. M. (2006). Psychotherapy-driven supervision: Integrating counseling theories into role-based supervision. *Journal of Mental Health Counseling*, *28*, 241–252. doi:10.17744/mehc.28.3.be1106w7yg3wvt1w
- Pelling, N. (2008). The relationship of supervisory experience, counseling experience, and training in supervision to supervisory identity development. *International Journal for the Advancement of Counselling*, *30*, 235–248. doi:10.1007/s10447-008-9060-2
- Ponton, R. F., & Sauerheber, J. D. (2014). Supervisee countertransference: A holistic supervision approach. *Counselor Education and Supervision*, 53, 254–266. doi:10.1002/j.1556-6978.2014.00061.x
- Reising, G. N., & Daniels, M. H. (1983). A study of Hogan's model of counselor development and supervision. *Journal of Counseling Psychology*, *30*, 235–244. doi:10.1037/0022-0167.30.2.235
- Richardson, B. K., & Bradley, L. J. (1984). Microsupervision: A skill development model for training clinical supervisors. *The Clinical Supervisor*, *2*, 43–54. doi:10.1300/J001v02n03_05
- Ridley, C. R., Kelly, S. M., & Mollen, D. (2011). Microskills training: Evolution, reexamination, and call for reform. *The Counseling Psychologist*, *39*, 800–824. doi:10.1177/0011000010378438

- Rønnestad, M. H., & Skovholt, T. M. (2003). The journey of the counselor and therapist: Research findings and perspectives on professional development. *Journal of Career Development*, *30*, 5–44. doi:10.1023/A:1025173508081
- Rubin, S. S. (1997). Balancing duty to client and therapist in supervision. *The Clinical Supervisor*, *16*, 1–23. doi:10.1300/J001v16n01_01
- Russell-Chapin, L. A., & Ivey, A. E. (2004). Microcounselling supervision: An innovative integrated supervision model. *Canadian Journal of Counselling*, *38*, 165–176.
- Russell-Chapin, L. A., & Sherman, N. E. (2000). The Counselling Interview Rating Form: A teaching and evaluation tool for counsellor education. *British Journal of Guidance & Counselling*, 28, 115–124. doi:10.1080/030698800109655
- Schroeder, M., Andrews, J. J. W., & Hindes, Y. L. (2009). Cross-racial supervision: Critical issues in the supervisory relationship. *Canadian Journal of Counselling*, *43*, 295–310.
- Sprenkle, D. H. (1999). Toward a general model of family therapy supervision: Comment on Roberts, Winek, and Mulgrew. *Contemporary Family Therapy*, 21, 309–315. doi:10.1023/A:1021956214595
- Sterner, W. R. (2009). Influence of the supervisory working alliance on supervisee work satisfaction and workrelated stress. *Journal of Mental Health Counseling*, *31*, 249–263. doi:10.17744/mehc.31.3.f3544l502401831g
- Uellendahl, G. E., & Tenenbaum, M. N. (2015). Supervision training, practices, and interests of California site supervisors. *Counselor Education and Supervision*, 54, 274–287. doi:10.1002/ceas.12026
- van de Pol, J., Volman, M., & Beishuizen, J. (2010). Scaffolding in teacher–student interaction: A decade of research. *Educational Psychology Review*, 22, 271–296. doi:10.1007/s10648-010-9127-6
- Vereen, L. G., Hill, N. R., & McNeal, D. T. (2008). Perceptions of multicultural counseling competency: Integration of the curricular and the practical. *Journal of Mental Health Counseling*, 30, 226–236. doi:10.17744/mehc.30.3.g34u122m16q64g44
- Watkins, C. E., Jr. (2010). Psychoanalytic developmental psychology and the supervision of psychotherapy supervisor trainees. *Psychodynamic Practice*, *16*, 393–407. doi:10.1080/14753634.2010.510345
- Watkins, C. E., Jr. (2012a). Educating psychotherapy supervisors. American Journal of Psychotherapy, 66, 279–309.
- Watkins, C. E., Jr. (2012b). Development of the psychotherapy supervisor: Review of and reflections on 30 years of theory and research. *American Journal of Psychotherapy*, *66*, 45–83.
- Watkins, C. E., Jr. (2013). Being and becoming a psychotherapy supervisor: The crucial triad of learning difficulties. *American Journal of Psychotherapy*, 67, 135–151.
- Watkins, C. E., Jr. (2014a). Leading and learning in the psychotherapy supervision seminar: Some thoughts on the beginnings of supervisor development. *Journal of Contemporary Psychotherapy*, 44, 233–243. doi:10.1007/s10879-014-9268-x
- Watkins, C. E., Jr. (2014b). The supervisory alliance as quintessential integrative variable. *Journal of Contemporary Psychotherapy*, 44, 151–161. doi:10.1007/s10879-013-9252-x
- Watkins, C. E., Jr., Budge, S. L., & Callahan, J. L. (2015). Common and specific factors converging in psychotherapy supervision: A supervisory extrapolation of the Wampold/Budge psychotherapy relationship model. *Journal of Psychotherapy Integration*, 25, 214–235. doi:10.1037/a0039561
- Watkins, C. E., & Milne, D. L. (2014). Clinical supervision at the international crossroads: Current status and future directions. In C. E. Watkins, & D. L. Milne (Eds.), *The Wiley international handbook of clinical supervision* (pp. 673–691). Malden, MA: Wiley Blackwell.
- White-Davis, T., Stein, E., & Karasz, A. (2016). The elephant in the room: Dialogues about race within crosscultural supervisory relationships. *The International Journal of Psychiatry in Medicine*, 51, 347–356. doi:10.1177/0091217416659271
- Willis-O'Connor, S., Landine, J., & Domene, J. F. (2016). International students' perspectives of helpful and hindering factors in the initial stages of a therapeutic relationship. *Canadian Journal of Counselling and Psychotherapy*, 50(Suppl. 3), 156–174.
- Wong, L. C. J., Wong, P. T. P., & Ishiyama, F. I. (2013). What helps and what hinders in cross-cultural clinical supervision: A critical incident study. *The Counseling Psychologist*, 41, 66–85. doi:10.1177/0011000012442652
- Wood, C. (2005). Supervisory working alliance: A model providing direction for college counseling supervision. *Journal of College Counseling*, *8*, 127–137. doi:10.1002/j.2161-1882.2005.tb00079.x

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