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Disclosures

- Katie Strong:
 - Financial: Katie has received conference registration and hotel accommodations for presenting this course. She receives a salary from Central Michigan University.
 - Non-financial: She has no relevant non-financial relationships to disclose.
- Janice Fialka:
 - Financial: Janice has received conference registration and hotel accommodations for presenting this course. She is the owner of the Dance of Partnership and receives royalties for her books.
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Learning Outcomes

After this course, participants will be able to:

- describe at least 2 frameworks for clinical supervision
- discuss at least 2 methods of delivering feedback to supervisees
- describe at least 2 strategies for asking reflective questions to support supervisee growth



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Where we're headed today

- Importance of Relationship in Supervision
- Clinical Supervision Frameworks
- Delivering Feedback to Supervisees
- Emotional Labor
- Reflective Supervision
- Q and A



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What is your experience with supervision?

- Think of an experience you have had, either as a supervisor or supervisee. Settle into it for a moment. Where were you? Who were you with?
- Recall a positive experience, a conversation, a moment that was helpful, encouraging, meaningful, etc.
- What did you feel? What contributed to this experience?



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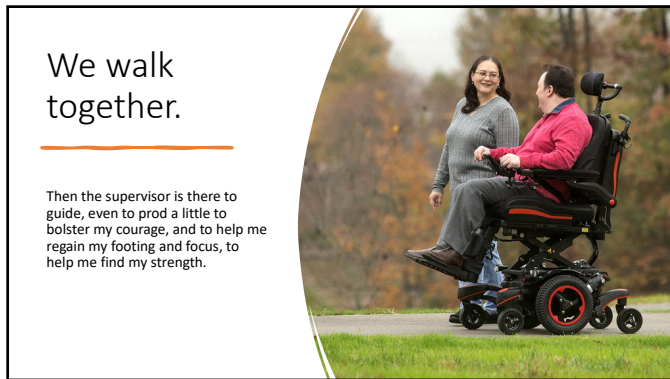


"The best supervisors I've had---and there need to be many over the course of a career---listened intently, found something to value, and then recast what I told them, embellishing it with something of their own."

"Strengths are emphasized while vulnerabilities are partnered."

-Rebecca Shahmoon Shanok
Erickson Institute

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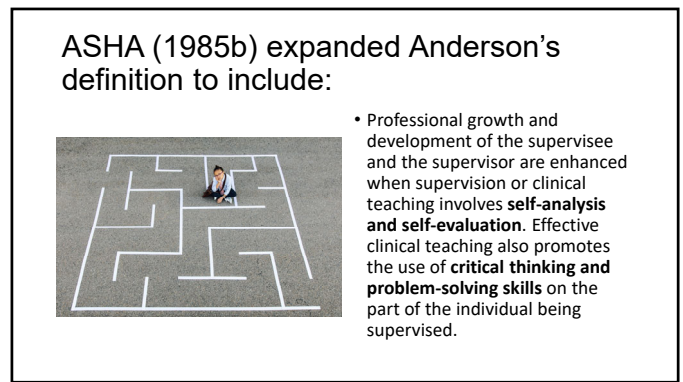
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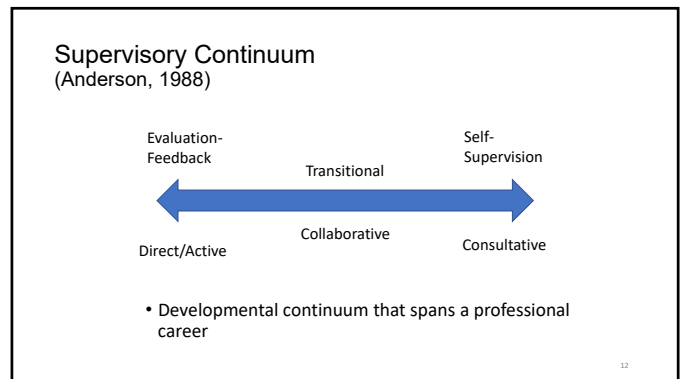
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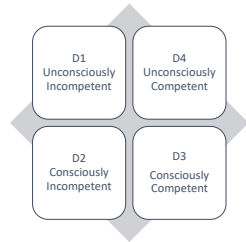
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Supervision, Questioning & Feedback (SQF) Model of Supervision (Levy et. al 2009)

- SQF comes from colleagues in Athletic Training
- Begins by first determining the learner's development level with consideration of student knowledge base, experience and self confidence. (Howell & Fleishman, 1982)
- This is specific to both the student and the task/skill and is modeled from the Conscious Competency Model.



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Situational Supervision

- Level of supervision is best matched with the learner's development level and should adapt as student progresses.

Situation

Learner
Task
Urgency
Consequences

S1 = Provide direction and coaching; staying close; standing beside

S2 = Being supportive & encouraging; creating space; over the shoulder

S3 = Delegating; create distance; observing from an alternate area

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Questioning

- The supervisor reflects on how to question the learner to support the development of knowledge & skills (pair with learner's level).

Q1 = Remembering - Recall facts; Targets knowledge

What ?s

Q2 = Using Facts - Analyze → Synthesize → Apply knowledge

So what ?s

Q3 = Creating - Evaluate; Provide rationale to decisions

Now what ?s

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Questions based on Bloom's Taxonomy and the SQF Supervision Model

(Strong, Bates, Hillenbrand, Jones, Hicks, 2017)

What ? Level

- Knowledge: What tests could you use to assess for ____?
- Comprehension: What symptoms did you observe that support the diagnosis?

So What ? Level

- Application: What recommendations will you have based on your interpretation of the evaluation results?
- Analysis: What is your rationale for selecting....?
- Synthesis: What are 2 alternative cuing strategies for __ ?

Now What ? Level

- Evaluation: What is the most important objective for this client?

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Feedback

- Any information given to students regarding their skills and knowledge.
- Can be verbal, written, or behavioral.
- Should be timely and specific.

Confirming Feedback: Lets supervisee know that their knowledge and skills are being applied correctly.

Guiding Feedback: Reinforces and advances supervisee's current knowledge and skill level; allows for refining, improving, clarifying

Corrective Feedback: Lets supervisee know that their knowledge and skills are not on target; focus on accuracy of knowledge and application in a non-confrontational manner

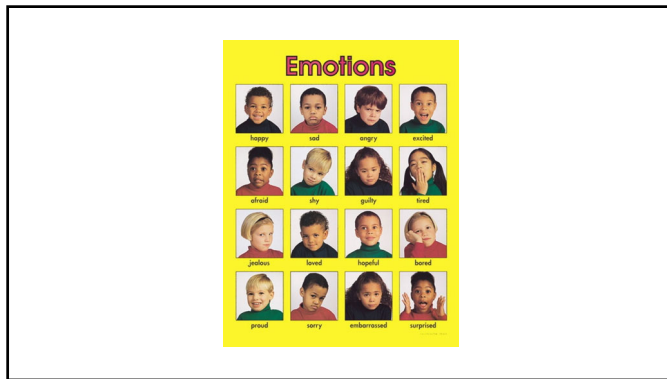
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Let's talk...



- When feedback is given or received – what are some of the feelings that are provoked in the
 - supervisor
 - supervisee

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Importance of Naming Feelings

Brain scans show that putting emotions into words actually calms the brain's emotion center.

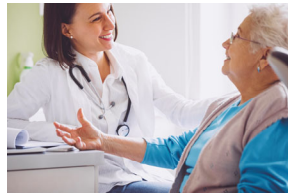


Wenner, M. (2007) *Brain scans reveal why meditation works.*
www.livescience.com/7306-brain-scans-reveal-meditation-works.html

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Food for thought

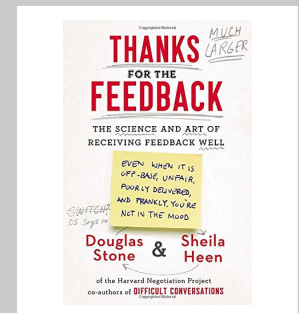
- This is all parallel processed to what the supervisee will be doing with the client and family.



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Giving and Receiving Feedback ...

leading to a **growth identity** for supervisors and supervisees



(Stone & Heen, 2014)

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Three types of feedback

(Stone & Heen, 2014)



Appreciation

Giving thanks to you and encouraging you to keep doing what you are doing. For it to be effective, it needs to be specific, authentic, and in a form that you find satisfying.



Coaching

Showing you a better way to do something to help you grow. Coaching can be related to improving your skills or at fixing a perceived imbalance in a relationship.



Evaluation

Telling you where you stand compared to a standard or compared to others. Evaluation aligns expectations and clarifies consequences.

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Feedback Triggers

(Stone & Heen, 2014)

Truth triggers

- We view the feedback as wrong, unfair or unhelpful. Thus, we are either defensive, or completely reject the information.


Relationship triggers

- We question the person giving the feedback or the relationship itself. Thus, we can view the giver as less trustworthy.

Identity triggers

- Something about the feedback causes us to question ourselves. Thus, we can think of ourselves as a 'failure' in case the feedback is true.

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Making sense of it

- Think of a time (or imagine one) when you were triggered by
 - Truth
 - Relationship
 - Identity
- What was something you noticed in yourself or your supervisee?

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Beware of the blind spots

(Stone & Heen, 2014)

<p>1</p> <p>Blind Spot - Your Face</p> <ul style="list-style-type: none"> • People react to subtle nuances in your eyes and facial expressions that convey your mood to them. You are largely unaware of the messages your face sends. 	<p>2</p> <p>Blind Spot – Your Tone</p> <ul style="list-style-type: none"> • You are unable to hear your voice the way others do. Your tone, pitch, and cadence convey your emotional state to them. 	<p>3</p> <p>Blind Spot- Your Patterns</p> <ul style="list-style-type: none"> • You often don't realize that you have establish behavior patterns which have affected others' opinion of you.
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Cultivate a growth identity

(Stone & Heen, 2014)

- **Shift to a growth mindset.** View tough situations as learning opportunities. Praise yourself (and others) for how much effort they put into learning rather than natural ability.
- **Move toward a growth identity.** See yourself as a person who is eager to put effort into learning. Try to find something you can learn from feedback.
- **Encourage people to discuss your blind spots with you.**
- **Shift from blame conversations to joint contribution conversations** and start by asking what you might have contributed to the problem.
- **Hold people accountable** by showing them how you hold yourself accountable alongside them.
- **Give yourself a second score.** Evaluate yourself on how well you handled the evaluation. This score is as important to your growth as the evaluation itself.


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Reflective Supervision


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The power of the reflective supervision is that it is a parallel process. What occurs in the reflective relationship between the supervisor and supervisee often mirrors what occurs between the speech therapist and the client or family. Professor Jeree H Pawl



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In other words,



“Do Unto Others As You Would Have Others Do Unto Others”

Professor Jeree H Pawl

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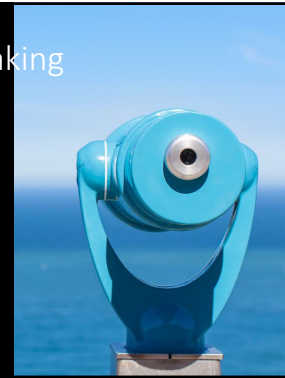


Strategies for Managing Emotional Labor (Lane, 2011)

- Focus on Positives
- Formal Support
 - Seeking support from supervisors
 - Regularly scheduled reflective supervision sessions
- Informal Support
 - Peer discussion
 - Reflective journaling

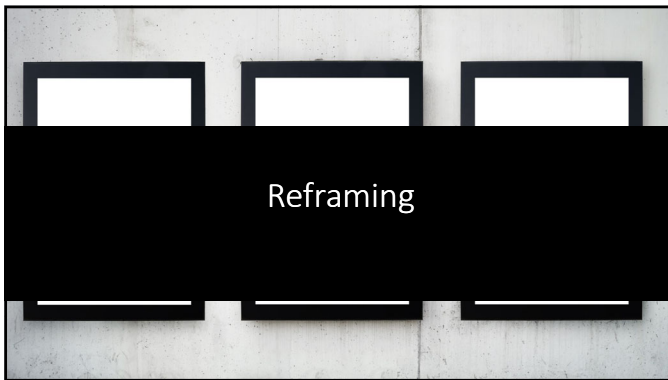
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Perspective Taking



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Reframing



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Promoting Reflective Moments (Geller & Foley, 2009; Lane, 2011)

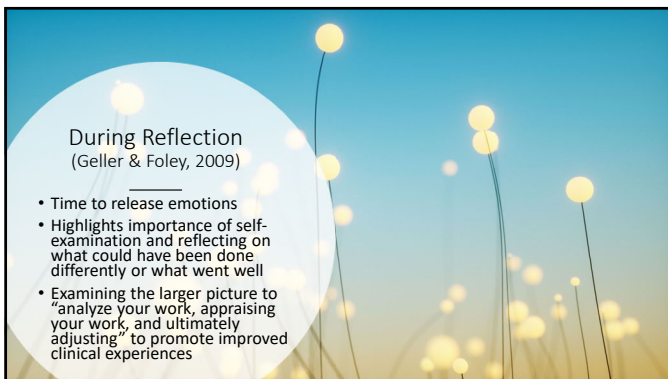
- Setting up regular times with supervisors or peers
- Demonstrating honest emotions requiring less energy to perform emotional masking



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During Reflection (Geller & Foley, 2009)

- Time to release emotions
- Highlights importance of self-examination and reflecting on what could have been done differently or what went well
- Examining the larger picture to "analyze your work, appraising your work, and ultimately adjusting" to promote improved clinical experiences

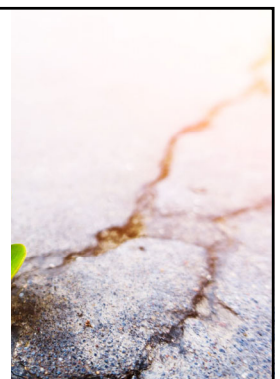


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How it Works

(Geller & Foley, 2009; Lane, 2011)

- Individually
 - Journaling/reflecting on experiences
 - Specified time for self-reflection/self-examination
- Peers
 - Discussion of experiences
 - Offloading/venting without judgment or need to find solution
- Supervisor
 - Specified time for reflection with supportive authority figure
 - Time to offload experience while looking at possible outcomes together



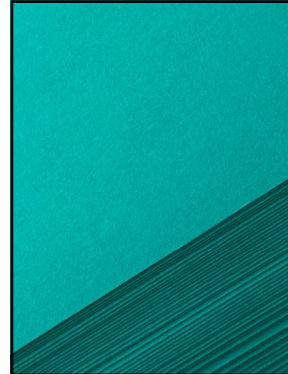
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Who would benefit from reflective supervision?

- Interns
- Clinical Supervisors
- SLPs and Mentors during the Clinical Fellowship
- Employees
- Supervisors

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Benefits of Reflection

(Geller & Foley, 2009)

- Embeds mental health approach within discipline to better manage emotional labor
- Improves insights and self-awareness, self-reflection, self-examination
- Perspective shifts for client and caregivers, which occur during reflection, improves the therapeutic alliance with families
- Allows for clinicians to emphasize strengths and empower clients and their families

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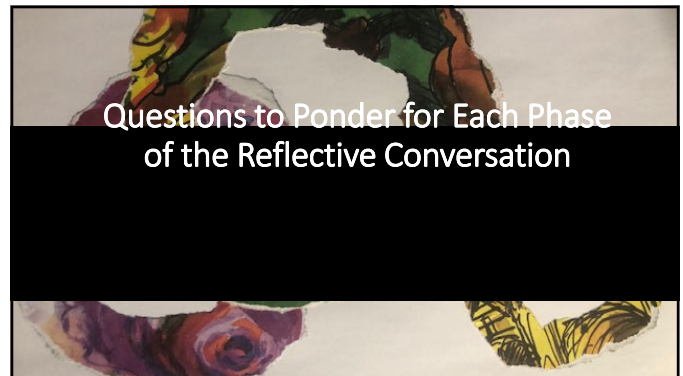
Phases of a Reflective Conversation



1. Preparation
2. Greeting/reconnecting
3. Opening the dialogue/finding the agenda
4. Telling the story/focusing on the details
5. Understanding perspective/generating hypothesis
6. Considering next steps
7. Closing
8. Post supervision reflection

(Gilkerson & Scott Heller, 2009)

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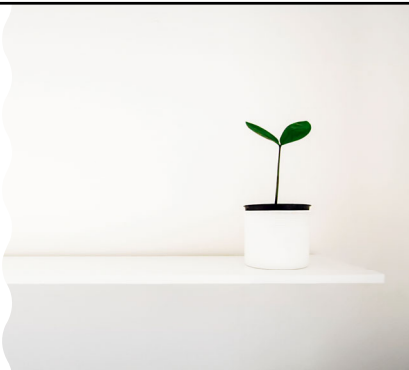


Questions to Ponder for Each Phase of the Reflective Conversation


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Phase 1: Preparation

- What do I need to do to shift my attention from the tasks at hand to the supervision?
- What do I need to do to make the environment conducive to reflection?



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Phase 2: Greeting

- How do I typically greet the supervisee?
- What does the greeting convey?
- What would I like the greeting to convey?
- Is there a ritual I encourage/use?

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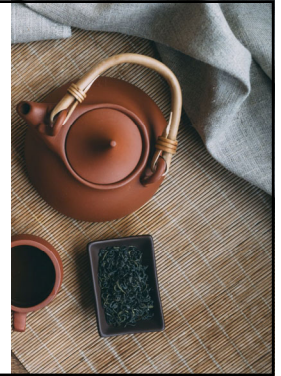
Phase 3:
Opening the
Dialogue/Finding the
Agenda

- How are the topics/agenda determined?
- How do I facilitate creating the agenda?
- What is my expectation of the supervisee and how do I communicate this expectation?

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Phase 4: Telling the
story/Focusing on
the details

- How do I create a safe environment where supervisee can explore all side of the interaction?
- What kinds of questions do I use?



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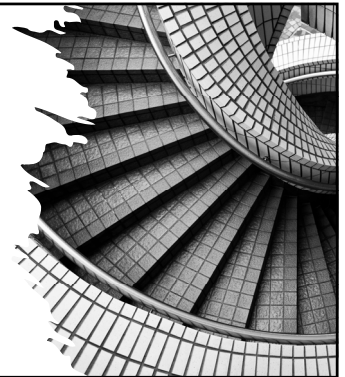
Phase 5:
Understanding the
perspective/Generating
hypotheses

- At what point do I offer my own thinking, understanding about the concerns/issues raised?
- How do I assess how much to teach, guide, mentor, coach?



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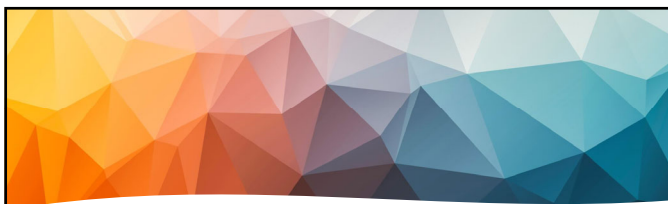
Phase 6:
Considering next steps
How do we co-create
the next steps?



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Phase 7:
Closing

- How do I typically end the session?
- How can I bring close to the session in a way that validates what has occurred (feelings, actions, insights, etc.)?
- What ritual might I practice?



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Phase 8:
Post Supervision
Reflection

- What thoughtful ways can I reflect on this session, noting key themes, feelings experienced by both, moments of uneasiness, discovery, follow-up, etc.

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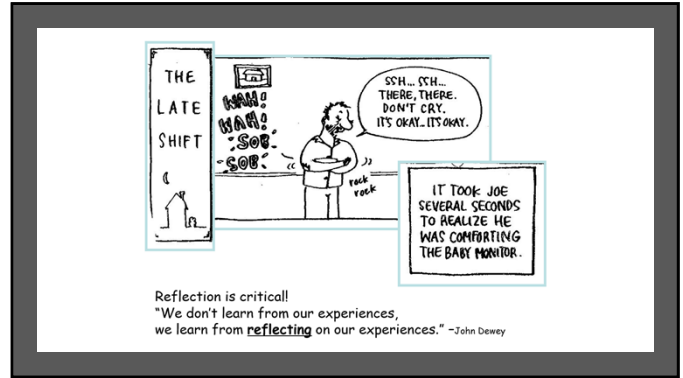


Take a moment to consider...

- How do you start your supervision session?
- Do you follow a routine in how you proceed?
- Does your process match any of the steps?
- Do you make time to reflect "post supervision"?

(Gilkerson & Scott Heller, 2009)

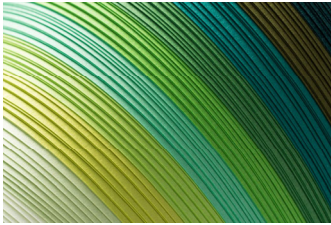
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Pulling all of this together

- Importance of relationship in supervision
- Supervision models
- Power of giving and receiving feedback
- Recognizing and addressing emotional labor
- Benefits of reflective supervision



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At the center of all relationships, reflections, and feedback is

listening

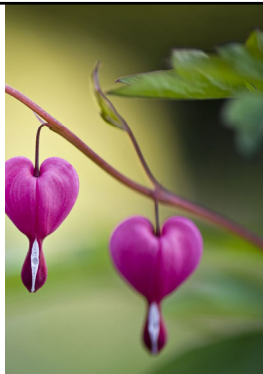
both to ourselves and our partners.

We underestimate the power of concentrated listening in a safe place.

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Advice by Christine Mayer

- If you are going to work with me, you have to listen to me.
- And you can't just listen with your ears, because it will go to your head too fast.
- You have to listen with your whole body.
- If you listen slow, with your whole self, some of what I say will enter your heart.



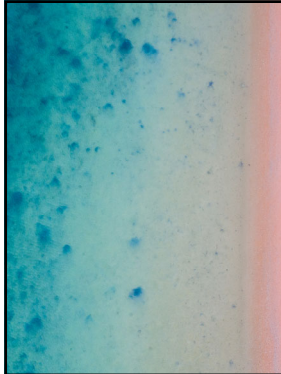
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WAIT

Why Am I Talking?



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In closing

We invite you to share one word that reflects what you are feeling or thinking...that might capture what you want to remember about this presentation.


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Being in service is very demanding and while in many cases, technology has altered the clinical landscape, the most important clinical 'tool' is still the clinician. Clinical tools need periodic care and much like the audiologist sending the audiometer out to be calibrated clinicians must take periodic timeouts to recalibrate themselves.

Luterman, 2007

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Thank you

- Questions?
- Discussion?
- Comments?

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We'd love to connect



Janice Fialka, LMSW, ACSW
The Dance of Partnership
www.danceofpartnership.com



Katie Strong, Ph.D., CCC-SLP
Central Michigan University
strong4ka@cmich.edu
Twitter @StrongStoryLab @KatieStrongSLP
Facebook @StrongStoryLab
www.strongstorylab.org

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