Ethics and Supervision


Definition of Supervision
(Bernard & Goodyear, 2009)

Supervision is an intervention provided by a more senior member of a profession to a more junior member or members of that same profession. The relationship is evaluative and hierarchical, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s), monitoring the quality of professional services offered to the clients that she, he, or they see, and serving as a gatekeeper for those who are to enter the particular profession. (p. 7)

Reasons for Integrating Ethics Into Supervision

• Relatively new clinicians may be asked to supervise other, only slightly newer clinicians.
• Legal liability: ensuring the proper behavior of their trainees
• Trainees are typically novices and assume that supervisors are competent
• Many ethical concerns in therapy have similar dynamics in supervision (parallel process)

Supervisors are Key

“If laws and professional regulations serve as the floor, below which we cannot go, then ethics are the ceiling that we reach for. In reality, therapy happens in the middle of the room.”

“If all we ever keep our eyes on is the floor, then no matter how necessary and important it is to do so, we still end up missing a lot of vital information and action.”
Levels of Trainee Development
(Stoltenberg et al., 1998)

• 1: motivated, dependent, focused on themselves and performance
• 2: fluctuating motivation, vacillate between dependency & autonomy, focus on and identify with clients
• 3: stable motivation, generally autonomous, able to accurately assess own strengths and weaknesses as well as those of their clients
• 3i: integrated aspects of 3 across domains of clinical activity

Ethical Concerns

• Level 1: competence, although other areas as well; structuring supervision and being clear about expectations helps reduce anxiety
• Level 2: tendency to overidentify leads to ambiguous boundaries: own & client issues, personal and professional lives, client relationships; helping to set boundaries may be mistaken for lack of empathy; self-care is a potentially helpful strategy
• Level 3 and 3i: clinical blind spots

Combine with Levels of Supervisor Development

Supervisors may be struggling with their own confusion and frustration as supervisors and become angry with supervisees and withdraw their investment in the relationship. Or, they may use evaluations in a punitive way, e.g. “global deficits”, and establish requirements that supervisees either cannot meet or are likely to exacerbate their characteristic resistance. When personal problems or normative emotional responses of Level 2 supervisees become apparent, Level 2 supervisors may respond by subtly shifting into psychotherapy-like interactions, a role that may be more comfortable and confident.

Multiple Relationships

• Collegial (current and former supervisees)
• Friendships (former)
• Rural and small community challenges
• Sensitivity to potential power imbalances that may linger with former supervisees
Sequential, Subtle, and Transient Role Shifts

(Gutheil & Gabbard, 1993)

- Time
- Place and space
- Money
- Gifts
- Clothing
- Language
- Physical contact

Other Considerations

- Self-disclosure
- Requesting or granting favors
- Business and financial interactions
- Outside social and professional interactions

Ethics Principles

- Autonomy
- Beneficence
- Nonmaleficence
- Fidelity
- Justice

Context

Critical-Evaluative Level

Theory

Principles

Rules

Intuitive Level

Facts of Situation

Ordinary Moral Sense
Ethical Decision-Making Model

- Pay attention to “itch”
- Does a relevant, professional, legal, or social standard exist?
- Is there a reason to deviate from the norm?
- What are the ethical dimensions of the issue?
- Can a primary ethical dimension be specified?
- Consult and review codes of ethics: Review literature; consider ethical principles
- Consult with colleagues, attorney, AAMFT
- Generate a list of possible actions

- How does each course of action satisfy the needs/preferences of affected parties?
- Does the course of action present any new ethical problems?
- Can the course of action be implemented?
- Can I live with the consequences of the action?
- Implement the chosen course of action
- Document action (supervision notes)
- Evaluate
- Use experience to potentially modify contract

Ethical Decision-Making in Supervision

- To what extent would engaging in this relationship/action meet the needs of the supervisee? How would this individual likely benefit?
- To what extent would it meet my needs? How might I benefit?
- Are the needs in question primarily personal or professional?
- What could go wrong if I decided to do this? What harm could result and to whom?
- What is the worst-case scenario and how likely is it to occur? If it did occur, what could be done to ameliorate the negative or harmful effects? What can I do in advance to decrease the likelihood of a negative outcome?

- What are the unique characteristics of this individual and of our particular relationship that should be considered? For example, is s/he especially admiring or deferential toward me? Is s/he struggling with trusting me?
- What particular vulnerabilities or needs do I have that have the potential to create a blind spot for me in objectively evaluating this decision?
- From whom did the initiative for this connection come? If the idea was mine, to what extent is that individual likely to feel free to decline, given my responsibility for him or her?
- What are the alternatives? What risks and benefits do they pose?
Examples

1. Trainee wants to provide hypnosis, has some training, supervisor has none
2. What should be considered if a supervisor is contacted by a former trainee who has received her license and the supervisor would like to take her to dinner to celebrate
3. Bartering: trainee develops and manages supervisor’s website in exchange for supervision
4. Trainee has serious mental health problem. How to get out of supervision?

5. Student trainees in group supervision complain because of self-of-therapist exercises in group.
6. Colleague asks opinion about a former trainee without trainee’s listing you as a reference
7. A trainee tells you about a different supervisor’s behavior that borders on boundary crossing or violation