Ethical Issues in the Supervision of New Clinicians: An Interactive Case-Based Training

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Program Goals

• How to train new clinicians to more fully recognize potential issues and utilize ethical decision-making strategies
• Explore sections of the AMHCA Code of Ethics
• Practice identifying potential ethical issues faced by new clinicians in their client work
Warm-up Case: Social Media

• How would you approach the following supervision scenario by both (a) treating it as a learning situation, (b) without negatively impacting clients?

• Your supervisee reports the following has occurred since their intake session with a new client:
  • The client wrote a glowing review of the supervisee on their Yelp account
  • The supervisee looked up their client on Google

• What are the ethical issues here?
• How might you address this during supervision?
An Introduction to Supervising New Clinicians

Part One.
Relevance

• The supervisory relationship is the crucible in which ethical practice is developed and reinforced
• “Students and supervisees have the same ethical obligations to clients as those required of mental health counselors.”
• Supervision is a requirement of all new licensure candidates
• Critical period of counselor development
• Many clinical issues are experienced for the first time
• Challenges with generalizing learning beyond classroom
• Yet many states (~50%) do not require supervision training
Protecting Client Welfare

• “The primary obligation of supervisors is to monitor services provided by supervisees to ensure client welfare. Training must not put clients at risk.”

• Assessing capability of trainee is often difficult

• Competence paradox:
  • Is it OK to “practice” on a client?
  • Practicing outside competence vs. needing to practice to develop competence!

• Trainee impairment and unethical behavior
  • Burnout, mental health issues
  • Boundary issues
Protecting Client Welfare

• Importance of Tarasoff case law
• Vicarious responsibility
• Nondisclosures in supervision (Ladany et al., 1996)
• Particularly problematic when we cannot directly observe supervisees
  • E.g., in post-graduate practice settings
  • Even videos are shown in segments
Who are New Clinicians?

• Definition: graduate student and new graduate
• Developmental differences (Stoltenberg & McNeil, 2009)
  • Stage 1
  • Stage 2
  • Stage 3
• Generational differences
  • Baby boomers
  • Generation X
  • Generation Y
Stages of Counselor Development

• Level 1 Supervisee:
  • Lacks confidence, anxiety about performance and evaluation, discomfort motivates actions, highly dependent on modeling and directives in supervision

• Level 2 Supervisee:
  • attuned to worldview of client but may struggle to retain objectivity, more confident and engaged, less preoccupied with performance, at times overwhelmed by choices for treatment, transitioning from dependency to autonomy in supervision

• Level 3 Supervisee:
  • Self-assured, objectivity and intentionality, aware of dynamics in counseling, functions independently and responsibly

• What ethical issues might come up during each stage?
• How could you address them?
• What if supervisee isn’t progressing through these stages as expected?
Generational Differences

• Baby boomers
• Generation X
• Generation Y

• Parallel processes?
• Differences in belief systems?
• Differences in lifestyle, relationships, approach to work?
For Adult Learners...

• May be very competent in certain areas of their lives
• Though are learning the new task of become clinicians
• “Professional adolescence”
• And may...
  • Be overconfident in their skills and knowledge,
    • “I can handle the situation”
    • “I’m fine, I’m an ethical person”
  • Feign competence,
  • Resist suggestions from supervisor,
  • And seek to build their own practices prematurely
A New Clinician’s Tasks

• Confidence
• Identity development
  • Trying out theories/interventions
  • Differentiation from supervisor
  • Professionalism and involvement in organizations
  • Taking on the “therapist” persona

• What ethical issues might come up for new clinicians?
• How could you address them in supervision?
A New Clinician’s Tasks

- Boundaries
  - Taking work home
  - Separating client’s reporting from what occurred
  - Over-identifying with client
  - Termination issues
  - “Dog” example

- What ethical issues might come up for new clinicians?
- How could you address them in supervision?
A New Clinician’s Tasks

• What to use, and when
  • Timing, phrasing, goodness of fit

• Directing vs. Listening
  • Problems with being overly directive: client goes too deep, too soon
  • Problems with being overly nondirective: client doesn’t address core issues

• What ethical issues might come up for new clinicians?

• How could you address them in supervision?
A New Clinician’s Tasks

• Continuing to expand multicultural competence
  • Understanding diversity as going beyond external differences
  • Developing a sense for how a person’s history, background, environment shapes their experience (and the therapist’s!)
  • Understanding the role of white privilege, oppression, discrimination, what this looks like in practice
  • Avoiding subtle imposition of values, such as...
    • Placing pressure on client to “come out”
    • Telling client to get out of a troubled marriage

• What ethical issues might come up for new clinicians?
• How could you address them in supervision?
A New Clinician’s Tasks

- Learning the “system”
- Legal obligations:
  - Abuse and neglect reporting
  - Suicide/homicide assessment
  - Court-referred clients
  - Disability evaluations
  - Custody evaluations
  - Signing-off on gender identity transition paperwork for hormone treatment

- What ethical issues might come up for new clinicians?
- How could you address them in supervision?
A New Clinician’s Tasks

• Learning the “system”

• Mental health system:
  • Interfacing with psychiatrists and medical staff
  • Case management activities and phone calls
  • Understanding how a person meets criteria for service provision
    • Medicaid
    • Intensive services such as residential or inpatient treatment
    • Wrap-around and in-home programs (child)

• What ethical issues might come up for new clinicians?
• How could you address them in supervision?
A New Clinician’s Tasks

- Learning the “system”
- Documentation requirements
  - Insurance paperwork
  - Maintaining orderly files
  - Writing progress notes on time
  - Preparing for audits
  - Writing for the client

What ethical issues might come up for new clinicians?

How could you address them in supervision?
A New Clinician’s Tasks

• Learning technologies
  • Electronic medical records
  • Phone calls and videoconferencing (telemental health)
  • Text reminders
  • Scheduling software
  • Managing professional email

• What ethical issues might come up for new clinicians?
• How could you address them in supervision?
Ethical Issues in Supervising New Clinicians

Part Two.
ACA Ethical Decision-Making Model
(Forester-Miller & Davis, 1996)

• Let’s review how to address complex ethical issues
• “We don’t know what we don’t know”
• ... consulting literature/colleagues and reviewing options thoroughly helps prevent unintended harm

1. Identify problem
2. Apply the relevant code of ethics.
3. Determine nature and dimensions of dilemma
   • review literature, consult with colleagues & prof. associations
4. Generate potential courses of action
5. Consider consequences of options and make a decision
6. Evaluate selected course of action
7. Implement course of action
AMHCA Code of Ethics (2010)

• The following are ethical guidelines as per AMHCA (2010)
• We selected ethical standards based on new clinician issues
• For groups of ethical standards, we will present a case scenario for interactive discussion in small groups
AMHCA Code of Ethics (2010) – Areas Explored

• Case Example 1
  • Confidentiality
  • Counseling Plans
  • Informed Consent
  • Termination and Referral

• Case Example 2
  • Exploitive Relationships
  • Competence
  • Other Roles – Advocate
Confidentiality

• “Mental health counselors take necessary precautions to ensure client confidentiality of information transmitted electronically through the use of a computer, e-mail, fax, telephone, voice mail, answering machines, or any other electronic means.”
  • AMHCA Code of Ethics, 2010, A.2.o.
Counseling Plans

• Mental health counselors and their clients work jointly in devising integrated, individual counseling plans that offer reasonable promise of success and are consistent with the abilities, ethnic, social, cultural, and values backgrounds, and circumstances of clients."
Informed Consent

• “Mental health counselors inform the client of specific limitations, potential risks, and/or potential benefits relevant to the client’s anticipated use of on-line counseling services.”
  • AMHCA Code of Ethics, 2010, B.2.e.
Termination and Referral

• “Assistance is given in making appropriate arrangements for the continuation of treatment, when necessary, during interruptions such as vacation and following termination.”
Case Example: Confidentiality, Termination and Referral, Counseling Plans, Informed Consent

• How would you approach the following supervision scenario by both (a) treating it as a learning situation, (b) without negatively impacting clients?

• Supervisee’s client is traveling to their home country of India for a six weeks, and asks to continue counseling during that time via online means. The treatment plan and informed consent do not mention online counseling services specifically.

• **What ethical issues might come up for new clinicians?**
• **How could you address them in supervision?**
Exploitive Relationships

• “Mental health counselors are aware of their own values, attitudes, beliefs and behaviors, as well as how these apply in a society with clients from diverse ethnic, social, cultural, religious, and economic backgrounds.”
Competence

• “Recognize the boundaries of their particular competencies and the limitations of their expertise.”

• “Provide only those services and use only those techniques for which they are qualified by education, training, or experience.”
Other Roles – Advocate

• “Mental health counselors are aware of and make every effort to avoid pitfalls of advocacy including conflicts of interest, inappropriate relationships and other negative consequences. Mental health counselors remain sensitive to the potential personal and cultural impact on clients of their advocacy efforts.”

• “Mental health counselors may encourage clients to challenge familial, institutional, and societal obstacles to their growth and development and they may advocate on the clients’ behalf. Mental health counselors remain aware of the potential dangers of becoming overly involved as an advocate.”
  • AMHCA Code of Ethics, 2010, F.2.b.
Case Example: Exploitive Relationships, Competence, Other Roles (Advocate)

• How would you approach the following supervision scenario by both (a) treating it as a learning situation, (b) without negatively impacting clients?

• Supervisee’s client, who identifies as an African-American woman, was recently let go from her job because of “cut-backs,” yet notices that she was the only person who was cut. She is now unable to afford counseling services. The client wants help finding another job, though the supervisee has no prior experience with career counseling. The supervisee discloses in supervision that they strongly believe the client has been discriminated against.

• What ethical issues might come up for new clinicians?
• How could you address them in supervision?
Summary

• Protect client welfare,
• While helping supervisees develop competence.

• Address developmental issues, such as:
  • Over and underconfidence
  • Boundary issues
  • Professional adolescence, nondisclosures, resistance
  • Building practices prematurely
  • Cultural competence and values imposition
  • Knowing one’s limits
References

