Course Objectives:
1. Understand current standards of supervision under Ohio regulations, including the definition and expectations of ‘clinical supervision’ and ‘training supervision’.
2. Understand the difference between general and ‘advanced practice’.
3. Understand the benefits of and ways to foster supervisee efficacy.
4. Recognize and prevent supervisee burn-out and vicarious trauma.
5. Recognize the role of cultural competence in supervision.

Key resources:
Ohio Counselor Social Worker and Marriage and Family Therapist Board: http://cswmft.ohio.gov/
- Ohio regulations for social work licensure and practice
- Pdf of Ohio Administrative Code
- Sample social work supervision logs – to be maintained by supervisee and signed by supervisor
- Downloadable PER (Professional Employment Reference) – to be completed by supervisor

Council on Social Work Education: www.cswe.org
- Accreditation requirements for schools of social work

Substance Abuse and Mental Health Services Administration: www.samhsa.gov
- Free publications, including: “Clinical Supervision and Professional Development of the Substance Abuse Counselor”

Social Work Supervision: ORC 4757-23-01 (A):
“Training supervision” means supervision for the purposes of obtaining a license and/or development of new areas of proficiency while providing services to clients. Training supervision may be individual supervision or group supervision. Note: “Group supervision” means face-to-face contact between a supervisor and a small group (not to exceed six supervisees) in a private session wherein practice problems are dealt with that are similar in nature and complexity to all supervisees in the group.

LISW-S must: (1) Have demonstrated competence in the area in which they are supervising; (2) Have training in supervision theory and practice; (3) Have training in legal and ethical issues relevant to counseling, psychosocial interventions and social psychotherapy; (4) Complete and forward to the board all supervision evaluation forms required by the board within thirty days of receipt of the form from a supervisee.

LSW to LISW supervision requirements in Ohio:
- Must be an LSW before work begins
- 2 years (24 months) of supervised work - at least 3000 hours, 1500 cannot be in same 12-month period
- One hour of individual or group supervision for every 20 hours of work
- Supervisor and supervisee must complete PER (Professional Employment Reference)
- Supervision log is maintained by supervisee and signed at least quarterly by supervisor
  - Responsibility belongs to supervisee to maintain the supervision log
  - Must include date, content and goals.
  - Does not get submitted with LISW application. Applicants may be audited to provide copies of all logs.
  - Sample logs can be found on CSWMFT website.
General vs. ‘Advanced Practice’

Excerpts from CSWE ‘Advanced Social Work Practice in Clinical Social Work’:

Engagement:
Social workers:
• substantively and effectively prepare for action with individuals, families, groups, organizations, and communities
• use empathy and other interpersonal skills;
• develop a mutually agreed-on focus of work and desired outcomes
Advanced practitioners in clinical social work:
• develop a culturally responsive therapeutic relationship
• attend to the interpersonal dynamics and contextual factors that both strengthen and potentially threaten the therapeutic alliance
• establish a relationally based process that encourages clients to be equal participants in the establishment of treatment goals and expected outcomes

Assessment:
Social workers:
• collect, organize, and interpret client data
• assess client strengths and limitations
• develop mutually agreed-on intervention goals and objectives
• select appropriate intervention strategies
Advanced practitioners in clinical social work
• use multidimensional bio-psycho-social-spiritual assessment tools
• assess clients’ readiness for change
• assess client coping strategies to reinforce and improve adaptation to life situations, circumstances, and events
• select and modify appropriate intervention strategies based on continuous clinical assessment use differential and multiaxial diagnoses

Excerpt from CSWE ‘Advanced Social Work Practice in Trauma’:

Apply knowledge of human behavior and the social environment:
Social workers are knowledgeable about:
• human behavior across the life course
• range of social systems in which people live
• ways social systems promote or deter people in maintaining or achieving health and well-being
• apply theories and knowledge from the liberal arts to understand biological, social, cultural, psychological, and spiritual development
The advanced social work practitioner:
• brings knowledge of the impact of trauma on the biopsychosocial development of the individual, including specific knowledge of the neurological impact of trauma
• understand that trauma has an impact on individuals, families, organizations, and communities in specific ways
• able to use knowledge about resiliency to develop promotive factors facilitating recovery from trauma
**Burnout**

Burnout is stress that is related to the work environment

Gradual process that affects a worker’s ability to empathize with clients.

**Vicarious Trauma**

Vicarious Trauma is related to the content of the work

Necessary ingredients of VT (Figley, 1995):
- Empathy with traumatized clients
- Exposure to trauma

VT can be a precursor to burnout

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**Contributing factors in Vicarious Trauma:**

- Empathy
- Worker’s own history of past trauma
  - Unresolved (Figley, 1995)
  - Childhood (Nelson-Gardell and Harris, 2003)
- Length of time working with survivors
- Working with sexually traumatized survivors
- Percentage of caseload that is traumatized
- Sense of helplessness and hopelessness
- Negative coping

**Sources of developing Self-Efficacy (Bandura 1997):**

- Vicarious Experiences
  - Observation
  - Good Role Models
- Verbal Persuasion
  - Encouragement
  - Verbal practice of tasks
- Enactive Mastery Experience
  - Actual task success (generative, gradual process)
- Positive Physiological and Affective States
  - Sense of accomplishment
  - Pride
  - Happiness

**Top Field Placement Challenges – per ‘Heart of Social Work’ award winners (Homonoff, 2008):**

- teaching a wide variety of skills of assessment and intervention
- balancing the teaching of these skills with the encouragement of reflection
- teaching interns to connect theory and practice
- developing an integrative model of supervision
- applying research to practice
- showing appropriate support to interns
- upholding the mission of field education in the face of fiscal retrenchment and pressures for accountability.
Resilience
(Stacy Simera, MSSA, LISW-S, SAP)

Resilience:
• ‘an ability to recover from or adjust easily to misfortune or change’
• ‘the power or ability to return to the original form, position, etc., after being bent, compressed, or stretched; elasticity’

**Being resilient increases a person’s ability to fight stress and depression.**

Factors related to resilience (from studies on veterans, 9/11 survivors, and other people who have faced trauma or great stress):
• accepting change
• flexibility
• sense of group identity, such as with others who share history or illness
• connecting with the group, seeking support from the group
• connecting with other people in general
• giving of yourself to others (altruism)
• accepting and tolerating your emotions
• accepting fear in self and in others
• sharing thoughts and feelings with others (self-disclosure)
• internal sense of control - you can’t control everything, but you realize there are some things you can control
• spirituality, finding meaning in things
• active coping - rather than sitting by and hoping things get better (problem solving)
• absence of guilt
• sense of humor
• interests, hobbies
• positive emotions such as love and compassion
• feeling competent, good self-worth

(Bride, 2004; King, et all, 1998; Regehr, Hill, and Glancy 2000)
References – S.Simera - Supervision


