

Michigan Association for Infant Mental Health

PRACTICE GUIDELINES FOR REFLECTIVE SUPERVISION AND
CONSULTATION
Bernstein Edit

Distinguishing Between Administrative, Clinical and Reflective
Supervision/Consultation

Many supervisors of infant and family programs are required to provide administrative and/or clinical supervision, while reflective supervision is optional. Put another way, reflective supervision/consultation often includes administrative elements and is always clinical, while administrative and clinical supervision are not always reflective.

Administrative supervision relates to the oversight of federal, state and agency regulations, program policies, rules and procedures. Supervision that is primarily administrative will be driven to achieve the following objectives:

- hire
- train/educate
- oversee paperwork
- write reports
- explain rules and policies
- coordinate
- monitor productivity
- evaluate

Clinical supervision/consultation, while case-focused, does not necessarily consider what the practitioner brings to the intervention nor does it necessarily encourage the exploration of emotion as it relates to work with an infant/toddler and family. Supervision or consultation that is primarily clinical will most likely include many or all of the administrative objectives that are listed above as well as the following objectives:

- review casework
- determine a diagnosis
- develop an intervention or treatment plan
- review and evaluate clinical progress
- give guidance/advice
- teach

Reflective supervision/consultation is distinct due to the shared exploration of the parallel process. That is, attention to all of the relationships, including the ones between practitioner and supervisor, between practitioner and parent, and between parent and infant/toddler and how each of these relationships affects the others. In addition, there is often a greater emphasis on the supervisor/consultant's ability to listen and wait allowing the supervisee to

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discover solutions, concepts and perceptions on his/her own without interruption from the supervisor/consultant. The primary objectives of reflective supervision/consultation are to:

- establish consistent and predictable meetings and times
- ask questions that encourage details about the infant, parent and emerging relationship
- listen
- remain emotionally present
- teach/guide
- nurture/support
- apply the integration of emotion and reason
- foster the reflective process to be internalized by the supervisee
- explore the parallel process and to allow time for personal reflection
- attend to how reactions to the content affect the process

Reflective supervision/consultation relates to professional and personal development within one's discipline in part, by attending to the emotional content of the work and how reactions to the content affect the work. For the purposes of this document, reflective supervision refers specifically to work done in the infant/family field on behalf of the the infant/toddler's primary caregiving relationships.

Reflective consultation may mean different things depending on the program in which it occurs. A reflective supervisor or consultant may be hired/contracted from outside the agency or program, and may be offered to an individual or group/team in order to examine and respond to case material. If the supervisor or consultant is contracted from outside the agency or program, he or she will engage in reflective and clinical discussion, but administrative objectives only when it is clearly indicated in the contract.

If the reflective supervisor/consultant operates within the agency or program, then he/she will most likely need to address reflective, clinical and administrative objectives. When discussions related to disciplinary action need to occur, it is the direct supervisor who addresses them. When the direct supervisor is also the one who provides reflective supervision, some schedule a meeting separate from the reflective supervision time. Others choose to address disciplinary concerns during the regular reflective supervision meeting. Disciplinary action should never occur in group supervision sessions.

In each instance, the supervisor/consultant is expected to set limits that are clear, firm & fair, to work collaboratively and to interact and respond respectfully. The overarching tenet is the understanding that all supervision takes place within the context of a safe and supportive relationship.

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It is important to remember that relationship is the foundation for reflective supervision and consultation. All growth and discovery about the work and oneself will take place within the context of a trusting relationship. To the extent that the supervisor or consultant and supervisee(s) or consultee(s) are able to establish a secure relationship, the capacity to be reflective will flourish.

“When it’s going well, supervision is a holding environment, a place to feel secure enough to expose insecurities, mistakes, questions and differences.” Rebecca Shahmoon Shanock (1992)

Supervision is “the place to understand the meaning of your work with a family and the meaning and impact of your relationship with the family.” Jeree Pawl, public address

“Do unto others as you would have others do unto others.” Jeree Pawl (1998)

Practice Guidelines for the Supervisor/Consultant

- Agree on a regular time and place to meet
- Arrive on time and remain open, curious and emotionally available
- Protect against interruptions, e.g. turn off phone, close door
- Set the agenda together with the supervisee(s) before you begin
- Respect each supervisee’s pace/readiness to learn
- Ally with supervisee’s strengths, offering reassurance and praise, as appropriate
- Observe and listen carefully
- Strengthen supervisee’s observation and listening skills
- Suspend harsh or critical judgment
- Invite the sharing of details about a particular situation, infant, toddler, parent, their competencies, behaviors, interactions, strengths, concerns
- Listen for the emotional experience that the supervisee is describing when discussing the case or response to the work, e.g. anger, impatience, sorrow, confusion, etc.
- Respond with appropriate empathy
- Invite supervisee to have and talk about feelings awakened in the presence of an infant or very young child and parent(s)
- Wonder about, name and respond to those feelings with appropriate empathy
- Encourage exploration of thoughts and feelings that the supervisee has about the work with very young children and families as well as about one’s response(s) to the work, as the supervisee appears ready or able
- Encourage exploration of thoughts and feelings that the supervisee has about the experience of supervision as well as how that

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experience might influence his/her work with infants/toddlers and their families or his/her choices in developing relationships.

- Maintain a shared balance of attention on infant/toddler, parent/caregiver and supervisee
- Reflect on supervision/consultation session in preparation for the next meeting
- Remain available throughout the week if there is a crisis or concern that needs immediate attention

Practice Guidelines for the Supervisee/Consultee

- Agree with the supervisor or consultant on a regular time and place to meet
- Arrive on time and remain open and emotionally available
- Come prepared to share the details of a particular situation, home visit, assessment, experience or dilemma
- Ask questions that allow you to think more deeply about your work with very young children and families and also yourself
- Be aware of the feelings that you have in response to your work and in the presence of an infant or very young child and parent(s)
- When you are able, share those feelings with your supervisor/consultant
- Explore the relationship of your feelings to the work you are doing
- Allow your supervisor/consultant to support you
- Remain curious
- Suspend critical or harsh judgment of yourself and of others
- Reflect on supervision/consultation session to enhance professional practice and personal growth

Reflective Supervision and Consultation:

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