

getting a baby skin to skin for the first time, helping a mama breastfeed the first time, providing education to families on all the things the baby is doing on their own when they are feeling so helpless since they are now not the “expert” on their child, and loving and snuggling sweet babies, of course! The challenges are also plentiful. Many NICUs across the world have developed practices that are not necessarily developmentally centered. Because medical staff personnel may not understand, “old-school cultures” may be perpetuated. Creating relationships to affect change is something many NICU therapists will bond over. It is a constant challenge. Also, while many babies have such positive outcomes, there are some who will live only a short while. These families hold pieces of your heart, and, emotionally, it can be taxing.

CLD Corner—Staying Current in a New Environment of Supervision: A Timeline of Considerations for the Supervisor and Supervisee Experience

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“The goals of the supervisory process are the professional growth and development of the supervisee and the supervisor, which it is assumed will result ultimately in optimal service to clients” (Anderson, 1988, p. 12).

Speech-language pathology (SLP) supervisors have different preferences based on their experience levels. Supervisors who have more experience with supervision prefer to work on one task at a time and on tasks that have a more global focus than supervisors who have less experience with supervision (Summers et al., 2014). These differences make it important for supervisors and supervisees to explicitly discuss their expectations during the supervision process. There is no one-size-fits-all model for successful supervision, yet there are strategies that would benefit any approach to supervision. The supervisor and supervisee are both key players in the supervision process, no matter the approach.

According to the new 2020 supervision standards of the American Speech-Language-Hearing Association (ASHA), in order to supervise a student or clinical fellow for the purpose of ASHA certification, a supervisor must complete a minimum of nine months of full-time clinical experience after earning their Certificate of Clinical Competence (CCC) and obtain a minimum of two hours of professional development in the area of clinical instruction/supervision (ASHA, 2020). As for supervising a speech-language pathology assistant (SLPA), a supervisor must have current ASHA certification and/or state licensure, have completed at least two years of practice after the completion of ASHA certification, and complete at least 10 hours of continuing education (CE) credits in the area of supervision prior to the first SLPA supervision (ASHA, n.d.).

The pairing of supervisor to supervisee may look different across different settings and experiences. It is often that a supervisee is simply placed with an available supervisor, or, in unique cases, a supervisor may be matched with a supervisee based on their clinical interests. A graduate student may have the option to seek a clinical placement supervisor based on the experience they would like to gain, wherein other cases those options may be limited. It is important to remember no matter the setting or the supervisor that the experience itself is what builds one’s professional connections and clinical experience. As for finding a clinical fellowship supervisor, the main goal may be to find a supportive mentor who will support you and your specific needs as a new clinician. SLPAs are often placed with a supervisor based on location, experience, and availability. However, no matter the

form in which the supervisor-supervisee connection is built, it is important to maintain communication and establish a foundation for an effective supervisee and supervisor experience.

Supervision of bilingual supervisees adds another variable to the supervision experience. This brings to question if a bilingual supervisee requires a bilingual supervisor. As a bilingual supervisee seeks different supervisory experiences, the ideal situation would be to be paired with or to find a bilingual supervisor in order to create a flowing channel of supervision to share bilingual experiences and expertise; however, that is not always possible. There continues to be a shortage of bilingual SLPs, and as we continue to address the gap, it brings to question how we can manage the influx of supervisory needs. A supervisor does not need to be bilingual to be culturally and linguistically informed. In fact, not all bilingual SLPs have all the answers to bilingual treatment and assessment questions. In these situations, one must use the supervisory experience to learn and expand on one's skillset and knowledge about culturally and linguistically diverse (CLD) populations. As a bilingual supervisee, you are not only able to provide bilingual services to support monolingual supervisors but you also bring a unique set of experiences and knowledge to the table from your own cultural and linguistic background, in addition to what you have learned through experience and in the educational setting. As supervisors, it is okay to not have all the answers; however, when a bilingual supervisee is in need of guidance, work with them or provide resources and connections they may reach out to for further support during the supervisory experience. In the end, the supervisory experience should be a collaboration and learning experience for both the supervisee and supervisor.

The beginning of the supervisory experience is full of opportunities to set the stage for an effective supervisor-supervisee relationship as well as to ensure positive outcomes for all involved. Before the supervisee starts working with clients or students, an initial meeting between the supervisor and the supervisee can help lay out what each day will look like as well as a plan for the total experience as a whole. The supervisor may set up an in-person or virtual meeting to survey the current experience of the supervisee, discuss details of support and feedback, and gain an understanding of the supervisee's needs, including learning style, personality, and work habits.

At the initial meeting, the supervisor may develop a personal checklist of points to cover to gather information to set this mentor-mentee relationship off on the right foot. However, both the supervisor and supervisee are encouraged to come to this initial meeting with questions for one another as well as an open attitude, seeking to understand one another and how best to work together. During the initial meeting, both parties may wish to address the following:

- **Building a relationship.** One must take care at the start of a supervisory relationship to examine how each views their role as inherent power dynamics exist in any supervisor-supervisee relationship due to the hierarchical structure of supervision. An individual in a higher position of power may inadvertently misuse their authority in various ways. While it is important to build a relationship of openness and trust, both parties also must take care to establish professional boundaries. If the professional line between supervisor and supervisee becomes blurred, the relationship can become complicated and make addressing clinical, professional, and ethical issues more challenging (McGlenn & Sheets, 2018). At the same time, a supervisor ought to be intentional about presenting oneself as a support and guide for learning to help the supervisee feel at ease and not fear negative reactions from the supervisor. A supervisee who enters the supervisory relationship with fear about what will happen or fear about being criticized or humiliated will experience a block to their growth as a professional. In some cases, fear can be a driving factor to motivate, though too much fear could inhibit learning and limit growth. The supervisee also may be afraid to question the supervisor's opinions or decisions or even uncomfortable coming forward to ask questions and request support when needed. If the supervisee does not feel comfortable with coming to the supervisor, this may negatively affect the productivity, effectiveness, or even compliance of the supervisee. It also may result in an unintended negative effect on the

quality of services to the client, so it is paramount to establish and build upon an initial level of trust between both parties.

- **Experience level.** If working with the pediatric population, the supervisee may want to gauge how much time the supervisee has spent around children, both in his or her personal life and in a clinical setting. In addition, it is important to assess how comfortable the supervisee feels at the start of the internship to serve a particular population. This comfort level may vary for the age of the clients served as well as for the nature and/or severity of the disability. In an adult clinical setting, perhaps the supervisee has less experience working with individuals with head and neck cancer but has had extensive experience working with clients with aphasia in graduate clinical placements. Through open-ended questions and conversation, the supervisor may assemble a working profile of the supervisee's experience levels to begin to plan for how to best use one's own experience and expertise to provide support as a mentor.
- **Overview of expectations.** One crucial discussion to include prior to the start of the mentorship is a discussion to review expectations and responsibilities. This discussion should include not only the responsibility the supervisee has to prepare for and conduct assessments and therapy sessions but also other job responsibilities SLPs and audiologists have outside of direct client contact. By delineating at the onset which responsibilities will be transitioned to the supervisee (if a graduate student clinician), which will be completed independently, and when and how other responsibilities must be fulfilled, both parties will feel more at ease due to the clarity provided. This clarity results in a stronger working relationship, reduced opportunities for conflict, and more efficient and effective services for the populations served.
- **Learning style of the supervisee.** To best understand one's own strengths and to self-direct one's learning and growth, a supervisee would benefit from coming to the beginning of a supervisory experience with a strong understanding of his or her own learning style as well as the ability to communicate that learning style to their supervisor. Learning in a clinical setting—working one-on-one with the clinical educator or supervisor—presents different challenges compared to an academic or classroom learning environment.

During the fieldwork experience, a supervisee may begin by focusing on the learning style that comes most naturally to them for learning most effectively, though they also could benefit from learning to adapt a multimodal learning style as they engage in different learning experiences and environments. A supervisor must be able to take into consideration the mentee's learning preferences but also may consider his or her own learning style. Similarities in learning styles may support the learning experience, though differences in style can be complementary and may extend the learning strategies of both supervisor and supervisee (Robertson et al., 2011). A discussion of each individual's learning styles at the initial meeting can help both the supervisor and supervisee gain the most from the experience.

- **Preference for receiving feedback.** Personal learning styles also contribute to one's preference for how to receive feedback about performance. Some learners may prefer to receive oral feedback, while others would prefer written feedback in order to be able to refer back to notes later. When providing feedback about a session, a supervisor may opt to provide cues during the session, step in to demonstrate an approach or offer a suggestion to alter the course of the session, or perhaps wait until after the therapy session has concluded. For some early-practicing clinicians, feedback given during a session may be perceived as an intrusion of thoughts and may make it difficult for the less-experienced supervisee to get mentally back on track to continue the session. While there are benefits to each style of

feedback and a combined approach may be effective for many, knowing both the supervisor's preference for providing that information as well as the supervisee's optimal mode for accepting feedback to best learn can result in greater outcomes for both the supervisor and supervisee.

- **Preference for communication style.** The supervisor and supervisee would benefit from outlining a plan for communication with one another throughout the supervisory period. Consideration of communication type and frequency is important not only for delivering feedback but also for completing joint tasks if working with a graduate clinician. When working together on tasks such as evaluation reports, both should discuss how the assignment of tasks to be completed will be communicated (e.g., email tasks as they occur, have a master to-do list of upcoming tasks to be completed, a weekly meeting to discuss the priority of the next tasks to be completed). When a clinical fellow needs support from the supervisor, would the two prefer to communicate via email, phone calls, or virtual meetings as issues or questions arise? Is the supervisee welcome to contact the supervisor as each question or issue comes up, or does the supervisor prefer to address any non-time-sensitive questions all at once during regularly scheduled meetings? Though the needs for communication type and frequency may change over time, discussing initial thoughts, expectations, and preferences are important to establish a cooperative relationship.

Every supervision experience will be distinct. All supervisors have different styles of supervision, and all supervisees have different learning and supervisory needs. It is throughout the course of supervision we each adapt and learn from one another. Whether the supervisee is a clinical fellow, graduate student, or speech-language pathologist assistant, it is important to maintain communication and establish check-ins in order to monitor the supervision experiences and make changes when necessary. This way both parties can continue building their clinical expertise and can provide optimal services to our clients.

Considerations During Supervision

- By the end of 2020, many professionals have had to adapt with the flexibility of a gymnast due to the never-ending changes and turns they faced throughout the year. It is important to maintain flexibility when it comes to the supervision process. As a supervisee, your supervisor may not always be accessible; therefore, when support is sought out, be patient and flexible with time. A supervisor may not always be able to supervise or meet on a certain day; consider scheduling the meeting with a set time, attempting a phone call or a virtual meeting, providing multiple time options, or asking your supervisor when they are available. As a supervisor, it is important to consider what support or guidance a supervisee may need. For example, if a supervisee mentions difficulty or continues to ask questions about a certain patient or area, consider scheduling a time for this discussion to provide training or guidance. This will take time, but it will help both people in the long run. A supervisee may request to be supervised for a specific client with whom they are struggling. Although these requests may sometimes seem challenging to meet, these are crucial teaching and learning opportunities that can be lost if not taken.
- Every SLP/SLPA/SLP-to-be is different—type A, type B, introvert, extrovert, or maybe a combination of each. Just as we all come with different backgrounds and experiences, no SLP can, will, or is meant to be the same. Although we should take into consideration the supervisor's and supervisee's personalities in different aspects of supervision, it should not hinder the outcomes or the ultimate goals of the supervision process. In some cases, supervisees are sponges, observing and learning the beauty and the challenges of the profession, while adapting their personality to become fully licensed SLPs. In other cases, an experienced supervisee (e.g., SLPA with years of experience) may only be looking for

support and collaboration when needed. Learning to collaborate and communicate with colleagues and supervisors with different personalities is part of the professions in itself. As supervisors, it is important to take into account the supervisee's personality not only to gauge feedback but also to consider how and when to provide necessary support. For example, an introverted supervisee may not always express their needs throughout the supervisory process; therefore, a supervisor may have to initiate the point of contact or allow for more open-ended questions during check-ins. In other cases, the supervisor is more introverted or reserved, and the supervisee is more extroverted; situations like this, although difficult, can be managed through flexibility and open discussion about personality differences. As a supervisee, keep in mind you are not working to learn to become your supervisor. To attempt to do this can sometimes bring an overpowering sense of imposter syndrome (thinking you are too shy, not type A enough, etc.); however, you are still learning and are more than capable. As for communicating with your supervisor, don't be afraid to reach out to your supervisor but also remember your supervisor isn't your only support. There is a wide world of resources, colleagues, and peers out there as well. In the field of speech-language pathology, SLPs are often perceived to be type A, extroverted people; however, we are all unique in our own special way. The supervisee must take into consideration the personality of the supervisor and the supervisor that of the supervisee; this often can provide a better sense of understanding on how to support and make the supervisory process more efficient and less emotionally impacting for both parties in the end.

- **Check-ins.** It is important for the supervisor and supervisee to regularly check in with one another throughout the supervision process—not only to see how the experience is going on each side but to determine if any changes need to be made or if preferences have developed. As the supervisory process progresses, the level or form of support begins to change. This progression and development of supervision can be discussed explicitly in order to foster greater independence for the supervisee. As a supervisee, if you need more support in a certain area or less support in another, talk to your supervisor to see what can be done. For example, if your supervisor is primarily providing written feedback and you are more of a hands-on or visual learner, you can ask your supervisor if he or she would consider also incorporating feedback more aligned with your needs. As a graduate student, if you would like to try something independently or try something new/different for the first time, don't hesitate to bring it up. Also, be open with your supervisor about the kind of support you would like to continue receiving or what support you would like to be faded out as much as possible. As a supervisor, evaluate what is going well, and check in with your supervisee to ask for ways you can adapt your support based on their current level of skill development. As one part of your check-in, perhaps consider providing a small token of appreciation, whether it be a thank-you card, coffee, or words of affirmation. We all know life and work can occasionally take a mental toll on everyone, particularly during these recent times. Consider reminding each other of the “why” that drives us to do what we do or helping the supervisee formulate their “why.” The smallest act of appreciation and connection can go a long way to maintain and support the supervisory experience.
- It is important to discuss changes in the preferences of giving and receiving feedback as the fieldwork experience progresses. Re-evaluate the type of feedback being provided (written, oral, hands-on), the timing with which it is being provided (during the session, after the session, or during a scheduled meeting time), the setting (one on one, in a group), and the nature (direct or indirect feedback). Direct feedback often facilitates learning at a surface level as the supervisor provides the information to the supervisee to teach concepts and skills, whereas indirect feedback involves more of an active role on the part of the supervisee. By asking the supervisee open-ended questions and helping them develop their own response to the question, the supervisor can facilitate problem-solving skills leading toward deeper learning. As the supervisee/clinician gains clinical experience, they

“require/benefit” most from a less direct style of supervision (Anderson, 1988). No matter the type of feedback provided, it continues to be a crucial element throughout the supervisory experience. Feedback is what helps the supervisee move beyond technical skills toward the problem-solving skills needed to effectively assess and treat patients.

As the supervision period comes to an end, whether it be the Clinical Fellowship Year (CFY), a clinical practicum year, or a SLP Assistantship, clear communication remains important. Both the supervisor and supervisee need to be clear on their plans and expectations.

Both the supervisor and supervisee should be clear on the amount and type of future contact they wish to have. Supervisors can explicitly state if they would like to serve as a future reference. If the supervisor wishes to continue in a mentoring role, they can offer that to the supervisee. If the supervisee wishes to have the supervisor continue to serve as a mentor, they also can make that request. If either the supervisor or supervisee does not wish to be contacted in the future, having a tactful conversation can prevent future awkward conversations. Sharing (or not sharing) personal information such as personal phone numbers, personal emails, or social media handles is a good way to indicate whether or not the supervisor and supervisee would like to continue to stay in contact.

A summary of the experiences of the supervisor and supervisee can be a tactful way to raise any uncertainties or questions about future interactions. Summaries can include the development of proficiency for both the supervisor and supervisee. Additionally, sharing something that each person learned from the other as part of the supervisory experience provides both useful feedback and an opportunity for both people to self-reflect. A discussion of how the learning styles of the two individuals complemented each other (or did not) during the supervision process is helpful. Both supervisors and supervisees can benefit from feedback as it is likely they will participate in a similar experience in the future. Bilingual supervisors are likely to be asked to supervise other bilingual students in the future. Bilingual supervisees are likely to one day be bilingual supervisors in the future, given the lack of bilingual SLPs.

Given the lack of bilingual SLPs in the field, it is important that strong supervisory experiences occur for bilingual SLPs and bilingual SLPs in training. Positive supervisory experiences help SLPs to serve in supervisory roles in the future. Also, as the languages spoken by SLPs in training increase, the need for supervision of bilingual supervisees also will increase. This is a good problem that provides the fields with the potential to best serve more clients following best practices.

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A Question and Answer from the TSHA Public School Committee

By: Jessica Alanis, MA, CCC-SLP, Public School Committee Member

Question

I am a certified speech-language pathologist (SLP) working for a contract company within a charter school system. The charter system recently released the evaluation criteria for both SLPs and SLP-Assistants that included points for the number of students dismissed from services. I supervise an assistant that is expected to have at least four points in all areas or face a penalty. For her to receive four points in the dismissal category, we are expected to dismiss 20 students from the caseload. They did clarify that students would no longer meet Texas Speech-Language-Hearing Association (TSHA) criteria as a student with a speech impairment (SI). I have personal and professional opinions regarding this matter, but I was hoping for formal guidance or documentation regarding this matter.

Answer

Information from TSHA

There are many red flags in this situation as described. For one, students should never be dismissed from speech therapy in Texas schools based on an annual appraisal system. TSHA has provided detailed information on when a student should and should not be considered for dismissal from services. Dismissal considerations can be found in the new *TSHA: SI Eligibility Determination Guidelines, 2020* (p. 34). Dismissal consideration must mirror eligibility considerations as determined by the Individuals with Disabilities Act (IDEA), including the following:

1. Does the student continue to exhibit a communication disorder?
2. Does the communication disorder continue to adversely affect academic achievement and/or functional performance?

In addition, the following information must be considered by the SLP with the input of the Admission, Review, and Dismissal (ARD) committee:

- How long has the student received speech/language therapy services?
- What service delivery models have been attempted with the student?
- What is the student's current level of performance on individual education plan (IEP) goals and objectives?
- What level of support does the student need to be successful?

Only after consideration of all the above should a student possibly be dismissed from speech therapy. Although this information is not written in law, it is written in the [TSHA Speech-Impairment Eligibility Guidelines](#) as a way to help public school SLPs enhance the quality of services to students in public schools. These guidelines provide a thorough manner of reviewing all pertinent information that should be considered when making eligibility decisions for students.