

# Questions Asked During Live Webinar Broadcast on 9/24/2021



## *Advances in Technology: Leveraging Technology to Enable and Enhance Clinical Supervision*

Presenter: Malcolm Horn, PhD, LCSW, MAC, SAP

### **How do you differentiate between a good learning case vs. a case that is out of someone's scope of practice?**

A: Great question. It essentially boils down to comfort level (supervisor and supervisee) and the amount of guidance a supervisor can give. Sometimes, as a supervisor, I may need to staff a case or sit in with a session a few times more than I normally would if it is a particularly difficult case/client. I also have patients that I struggle with, so it's also valuable for supervisees to know that Supervisors also sometimes feel at a loss or stuck with a patient.

### **Regarding the weekend supervision - it sounds like you feel supervision should only be postponed briefly, not skipped. Can you say some more about how much time can pass between supervision, either based on rules or based on best practices?**

A: I believe that supervision should be consistent and steady. Usually, the time spent between supervision is dictated by the state rules (usually something like "no more than 40 hours shall pass without 2 hours of supervision" or something like that....having said that: always follow the rule 😊 However, there may be time (especially as a supervisee gets close to the end of the supervision) that the intensity may back off. Make sure supervisees know who your backup is; if you're on vacation or out of office, make sure that they know who they can go to if they need assistance.

### **Have you found, over time, ways that technology has ENHANCED supervision as opposed to simply facilitate doing it?**

A: Yes, in terms of observing sessions. Much less "intrusive" when I can just be a camera on the wall (literally). Patients and supervisees do not feel as awkward since I'm not physically in the space.

### **Webcam vs. recording - do you find clients are more open to a webcam or more suspicious of it? What are security implications that you need to be mindful of in terms of using a webcam?**

A: honestly, most of our clients haven't seemed to care much at all. I think people, in general, are pretty accepting of a webcam. You must be mindful of ensuring a solid, secure internet connection. You must also be wary of who/what else might be in the space where the patient is. You can only see a small part of them, so making sure that they are not in a public space or in a place where others hear or see their part of the session is important.

### **Is there any distance that is too FAR to supervise someone?**

A: I do not believe so providing that everyone is aware of the different state rules and that there is a way for a person to be on site for support if need be. When supervision is 100% remote, you really want to make sure you have a good working alliance with the person or organization where the supervisee is actually located.

### **What release needs to be done for a clinical supervisor to observe counseling session over webcam?**

A: Clients need to be informed of the risks of using tele (risk of hacking the session, confidentiality breach) and what protocols you put in place to protect them—it's essentially the same thing that you do for the client confidentiality.