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Department of Communication Sciences & Disorders

Providing Feedback in Clinical Supervision: Evidence-Based Practices

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Outcomes

→ After completing this activity, participants will be able to...

- State rationale for the importance of effective feedback
- Identify 8 characteristics of effective feedback
- Describe how to apply effective feedback across settings of clinical practice

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Introductions & Disclosures

→ Louise Pinkerton, M.M., M.A., CCC-SLP

- Specialize in voice and upper airway disorders
- Former positions in acute inpatient, rehab hospital, outpatient settings
- Faculty at the University of Iowa
- Continuing Education Administrator, Pan American Vocology Association

→ Stacy Robinson, M.S., CCC-SLP

- Specialize in pediatric speech and language
- Former positions in outpatient and school settings
- Faculty at the University of Iowa
- Member of the Iowa Board of Speech Pathology and Audiology

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The Importance of Feedback

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Value of Feedback

→ Guides supervisees towards competence and independence (Anderson's continuum)

→ Provides a way to monitor supervisee performance (Lara, Mogensen, & Markuns, 2016)

→ Considered a top factor in judging the effectiveness of clinical education (Heckman-Stone, 2003)

Anderson's Continuum of Supervision

Stages: Evaluation-Feedback | Transitional | Self-Supervision

Styles: Directive | Collaborative | Consultative

Legend: Supervision (grey), Supervisee (white), Peer (light grey)

Adapted from: The Supervisory Process in Speech-Language Pathology and Audiology by G. S. Anderson, M.S., University of Iowa, Copyright © Harcourt Brace and Company

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Providing Feedback

Evidence-based practices for providing effective feedback

Lara, Mogensen, & Markuns (2016)

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Create an Accepting Environment

- Discuss feedback up front
 - Ask for input from the student (e.g., verbal vs written; immediate vs. delayed)
- Normalize mistakes and information gathering as part of the learning process
- Use a nonjudgmental speaking tone

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Focus on Behaviors (Not the Individual)

- Describe what you observed the learner do, focusing on actions that can be continued or changed
- Use "I" statements when providing corrective/negative feedback
 - Less likely to be received by the learner as a value judgment or statement about a learner's worth

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Be Specific

- Extension of focusing on behaviors rather than the individual
- Allows for clear communication between supervisor and supervisee
- Includes rationale and examples
- Aligns with supervisee preferences (Nottingham & Henning, 2014)

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Be Specific

Non-specific	Specific
Great job today!	I noted that your client was more engaged when you... You administered this evaluation tool appropriately by...
The task really didn't work.	This task was too complex for the client. I could tell this because...
Nice work on your note!	Your documentation was concise and covered all the main points of your session, such as...

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Be Specific - Tips

- Take notes in the moment
- Outline comments by activity/task to give supervisees a frame of reference
- Use track changes and comments when editing paperwork
- Use goals and standards to help frame your thinking

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Compare to a Standard

- Review standards at start of supervisory relationship
- Set up regular meetings dedicated to reviewing standards
- Reference standards in daily/weekly feedback as appropriate

Resources for SLP-Specific Standards
 2020 Certification Standards:
<https://www.asha.org/certification/2020-slp-certification-standards/>
 2020 CF Skills Summary:
<https://www.asha.org/siteassets/uploadedFiles/2020-Clinical-Fellowship-Skills-Inventory.pdf>

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Compare to a Standard

May also consider writing individual goals

- Specific to the supervisee or population/setting
- Created at any point in the supervisory process
- Updated or changed based on supervisee progress

Skill	Rating*	Comments
Planning and implementing Treatment		
Making modifications to treatment plans or goals		
Clinical writing (i.e., SOAPs) and other forms of communication (e-mails, etc)		
Self-Reflection		
Interactions (clients, caregivers, collaborators)		
Professionalism (including timeliness)		

*Ratings:
 + = I am progressing as I would hope to in this skill area (even if you see areas for improvement)
 += I think I could be progressing more quickly, or I need more support to progress as I'd hope to in this area
 ! = I am not progressing as I would like in this area, and I see it as a significant need in my clinical growth
 (4) Based on your ratings and comments, write 2-3 goals for yourself for the remainder of the semester:

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Be Timely

- "Timely" is dependent on the content of the feedback
 - In the moment
 - Immediately after
 - During weekly/biweekly meetings
 - Mid- and end-placement evaluations
- Limitations of setting and space
- Supervisee's learning style, preference, and readiness

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Appropriate Amount

- Consider cognitive load
 - Too much is overwhelming
- Choose a couple of learning targets
 - Essential behaviors
- Small amounts
 - Provided frequently



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Appropriate Amount

- Learning targets
 - Choose 1-3 items to address
 - Connect to standards and learning objectives
 - Meta-cognition
 - Conscious attention on strategies for thinking, learning, problem solving (Walden & Gordon-Pershey, 2013)

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Self-directed Learning

- Student ownership
 - Essential to learning
- Complete self-reflection first
 - Then, supervisor feedback
- Student goals
 - Align with learning objectives



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Self-directed Learning

- Self-reflection email
 - At the end of the day:
 - Describe three things you did well and why they are important.
 - Identify three things you would change and how you would alter them.
 - Describe where your focus was during the session and things you did to stay focused on the client.
 - How will I focus on the client's goals in the next session?
- Supervisor provides feedback on self-evaluation

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Request Feedback

- Improving your skills
 - Never ending project
- Open and honest environment
 - Built across interactions
- Model receiving feedback
 - Accepting and listening without defensiveness



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Request Feedback

- How did you feel when receiving feedback?
 - How could it be presented better?
- Online survey
 - Either anonymous or with names
- Regular check-ins
 - Is this working for you? What would you change?
 - How could I make this clearer?
 - What else do you need from me?
- Supervisees discussion with outside facilitator

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Case Studies

What would you do?

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Case Study #1

- Clinical Fellow, Second segment review
- Self-evaluation
 - CF and supervisor both complete the skills inventory prior to review meeting
 - CF rated self as all 3's (3=exceeds expectations)
 - Supervisor rated with both 2's (2=meets expectations) and 1's (1=does not meet expectations)
 - CF required to have all 2's at end of fellowship
- How would you guide the discussion to help the CF modify their perspective and make a plan for growth while maintaining a positive rapport?

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Case Study #2

- Outplacement in school setting
 - Second year, fall semester student
 - First time running group session
- Student demonstrates difficulty across multiple skills
 - Behavior and attention management
 - Differentiating client goals
 - Prompting for specific targets
 - No way to intervene effectively in the moment (other than taking over)
- How does the supervisor debrief with the student and move forward?

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Resources

- Virtual ASHA Presentation
 - Application of Anderson's Continuum in Supporting Mental Health Needs of Students, 3041V
- U Iowa Webinar Series
 - Evidence-based Feedback in Clinical Supervision
- SLP Nerdcast Podcast
 - Mental Health and Supervision: Perspectives on Supervision of Graduate Students
- CAPCSD Feedback Course and ASHA Practice Portal on Supervision
- Presentation Slides and Feedback Handouts

Links available on iPoster

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References

Please see the reference section of our iPoster for a full reference list.

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Thank you for your interest in our presentation.
Please reach out to speech-path-aud@uiowa.edu with questions!

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