Competency-Based Assessment and Evaluation: Advancing Clinical Supervision

Danielle Keenan-Miller, PhD, Olga Belik, PhD, and Carol Falender, PhD

Several substantial changes occurring in the field of clinical supervision over the last decade have markedly transformed training in professional psychology. The development of clinical competency benchmarks, identification of the need for systematic observation and assessment of trainee's clinical performance, and recognition of supervision as a distinct professional competency have impacted how clinical training is implemented and assessed.

The competencies movement in general represents a shift from a focus on training input, or what the training community put into the developing psychologist, such as the number of hours of service provision or specific coursework, to an output model in which supervisors are responsible for instilling and evaluating specific competencies that are criterion-referenced. The major example of these is Competencies Benchmarks (Fouad et al., 2009) as well as those for specialties such as pediatric psychology (Palermo et al., 2015).

The competencies movement brought a deconstruction of the concept of competence and analysis of the criterion-referenced standards (e.g., Benchmarks), as well as more effective evaluation of the supervisee and the supervision process. Accurate assessment by the supervisor and self-assessment by the supervisee are essential in developing competencies. Self-report can only reflect the degree to which the supervisee is aware of and willing to report on their performance. Thus, the utilization of live observation or review of video/audio recordings is critical in the development of accurate assessment and self-assessment. Despite recognition that direct observation is essential for providing both formative and summative feedback, research suggests that it happens in less than fifteen percent of supervisory sessions (Accurso et al., 2011)

The recognition of the fact that performance evaluation and ongoing feedback contributes significantly to the development of competencies led the field to examine the reliability and validity of competency assessments. Several biases present challenges to the provision of accurate and useful supervisee evaluations, including leniency biases and halo effects, and supervisor assessments generally lack evidence of predictive validity for future trainee performance (Gonsalves & Freestone, 2007). At present, the field is grappling with the development and implementation of improved methods of performance evaluation. For example, Gonsalvez & Calvert (2014) found that supervisor leniency in evaluation when rating supervisees on

Danielle Keenan-Miller, PhD
(danikm@psych.ucla.edu) is the Director of the UCLA Psychology Clinic and an Assistant Adjunct Professor at UCLA. Her research and teaching interests include supervision, evidence-based psychotherapy, and mood disorders.

Olga Belik, PhD
(Olga.Belik@providence.org) is the Training Director and Chief Psychologist at the Providence Saint John's Health Center, Child and Family Development Center (CFDC). She is the current Chair of CPA Division Il: Training and Education in Professional Psychology.

Carol Falender, PhD
(doccarol@gmail.com) is co-author of *Clinical Supervision: A Competency-based Approach* with Edward Shafranske (APA, 2004). She is an Adjunct Professor at Pepperdine University, Clinical Professor in the UCLA Department of Psychology, and Chair of the CPA Continuing Education Committee.

Likert scales can be limited by instead having supervisors rate supervisees by matching them to vignette-based descriptions of particular behavioral responses. The vignette-matching approach increased the likelihood of accurate evaluations, although logistical challenges have limited the extent to which these methods are adopted at present.

The competency movement has also highlighted the extent to which supervision is a distinct professional competency with its own set of skills and need for evaluation. The supervisor must also self-reflect on their supervisory effectiveness and continue to improve their delivery of supervision. For example, shifting from traditional discussions during the supervision hour to an experiential practice, or use of active learning such as role-play, modeling, and critical problem-solving can significantly enhance the supervision process. In addition, frequent feedback from supervisees can promote supervisors' ability to reflect on their supervisory competencies. ■

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