

Systematic oversight to uphold competency development and enhance a collaborative learning environment



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CCHPTP Mid-Winter Meeting: 2.28.24



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Disclaimer & Acknowledgements

- The contents of this presentation do not represent the views of the U.S. Department of Veterans Affairs or the U.S. Government.
- There are no conflicts of interest to declare.
- Project funded by VA Office of Rural Health Project (PROJFY-008768). Determined to be quality improvement. Thus, was not reviewed by VA IRB.

- I am not a health psychologist



Learning Objectives

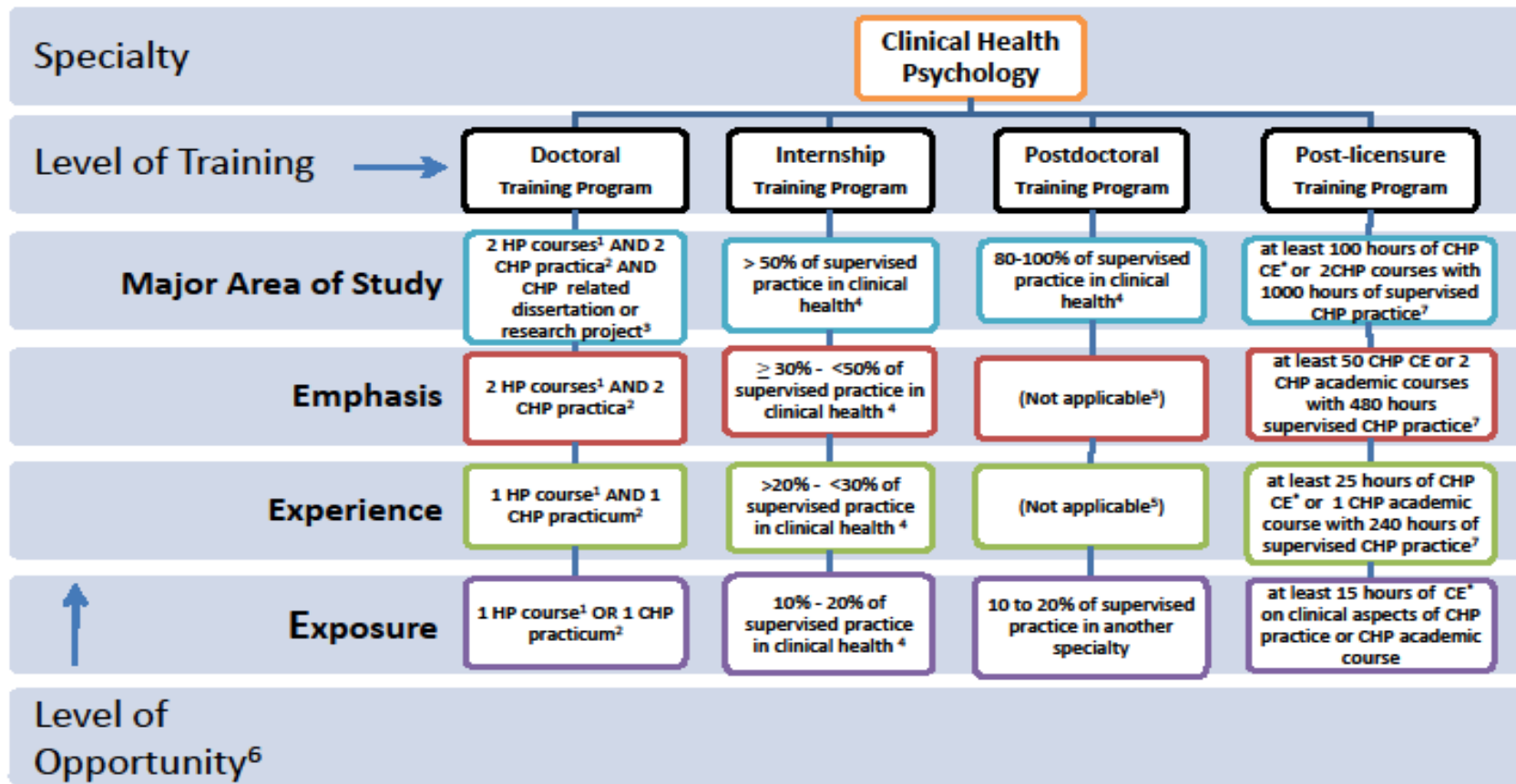
At the end of this presentation, my hope is that participants will be able to:

- Describe two strategies to implement a supervision oversight feedback system that supports competency development and quality training
- Apply two tools or approaches to obtain data to support a collaborative feedback approach
- Identify options for utilizing data to support collaborative learning and on-going program improvement



Life as a Training Director





Clinical Health Psychology Specialty Taxonomy

[ClinicalHealthPsychologySpecialtyTaxonomyFinal.pdf](#)
 [\(societyforhealthpsychology.org\)](http://societyforhealthpsychology.org)



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With so many roads of opportunity in health psychology...

- ▶ Do I have the data necessary to confidently state that the experience someone is getting in my program is the experience I am intending?

AND

- ▶ Is the way I gather and use feedback data consistent with training program values?

Program Opportunity:

- ▶ Look at methods for program oversight (i.e. knowing what is going on)

AND

- ▶ program feedback approach (i.e. how we use this knowledge effectively)



Oversight

Identifying Systematic Opportunities to Know What is
Going On



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How is my oversight and where are my opportunities?

- ▶ How are we ensuring quality of the training experience clinic to clinic?
- ▶ How well are we training to specific health psychology competencies?
- ▶ How are we ensuring we are being socially responsive, upholding value of inclusion, diversity, equity, and access?
- ▶ Are supervision practices consistent with values of the program?
- ▶ Do supervision experiences vary with type of interprofessional they work with?
- ▶ What is being included in supervision sessions?
- ▶ What tools are supervisors using?
- ▶ How are we measuring the climate of my program and/or clinical rotations/practicum?
- ▶ Am I able to intervene when needed or do I often find out information too late?



Historical methods of oversight

- Supervision monitoring of accrual of hours—both of direct service and supervision
- Competency evaluations (consistent with APA accreditation)
- Formative feedback at mid point of a training experience and summative at end of a training experience
- Feedback from alumni in distal data of whether were prepared and developed competency, as well as career outcome (licensure, ABPP)



Enhancing our historical methods of oversight

- ▶ Re-think our frequency and timing of gathering information about the supervision/training experience
 - ▶ Real time (i.e., on-going during training experience) vs. mid-point or end
- ▶ Identify alternatives for gathering and sharing of information via use of technology
- ▶ Assess for elements associated with better outcomes for trainees



Rationale for Gathering More Data

- ▶ Real-time data regarding supervision functioning from both perspective of supervisor and supervisee (underrepresented in research)
- ▶ Training programs have information to make adjustments in supervision when there are elements of supervision compromising values of program, competency-development, or patient safety
- ▶ Training Directors have information on potential concerns needed adjustments in a timely manner that enables opportunity to intervene



Rationale for Making a Data Gathering Shift

- ▶ Meeting needs of diversity of trainees (e.g., gathering information on their perspective that could be missed)
- ▶ Consistent with shared governance principles of giving voice to stakeholders (i.e., supervisors, trainees) and program accountability
 - ▶ Values: collaboration, inclusiveness, transparency
 - ▶ Resource: Council of Chairs of Training Councils (CCTC) 2020 Social Responsiveness in Health Service Psychology Education and Training Toolkit [CCTC Socially-Responsive-HSP-Ed-Training_v7.pdf](#) (cctcpsychology.wpenginepowered.com)



Program Derived Goals of Oversight May Include:

- ▶ Ensuring trainees are receiving effective supervision
- ▶ Ensuring patient safety and quality of care elements are being addressed
- ▶ Providing Training Directors (and supervisors) with timely information to address:
 - ▶ Immediate clinical supervision concerns
 - ▶ Longer-term program development needs



Quality Improvement Supervision Project Insight into Data Gathering



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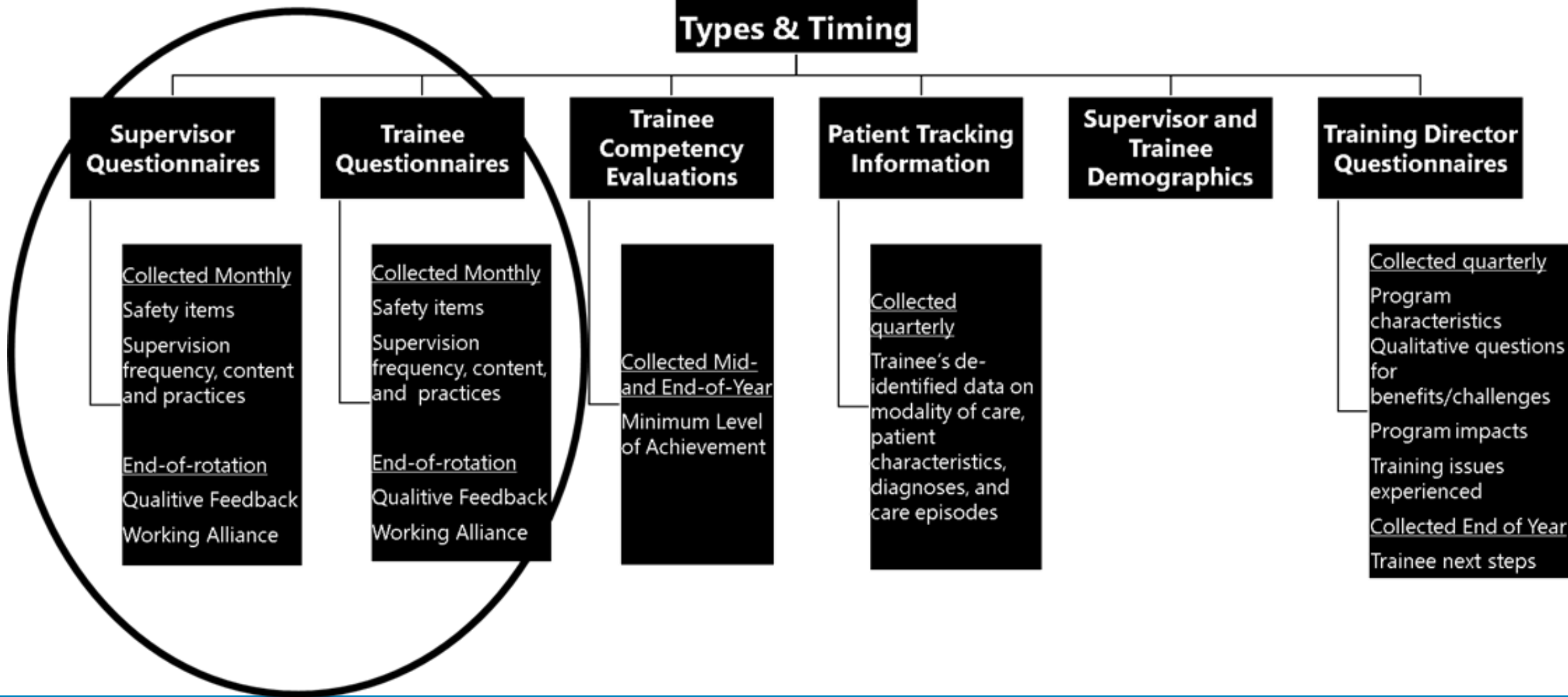
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Overview of Project

- ▶ Eleven small/rural and one urban VA psychology training site participated in quality improvement project funded by Office of Rural Health (2021-2022, 2022-2023, 2023-2024)
- ▶ Project developed empirically derived questionnaires that are delivered to programs via REDCap automated system, enabling oversight of use of telesupervision from supervisor and trainee perspective
- ▶ Link to description of oversight system (open access):
<https://doi.org/10.1007/s41347-024-00384-z> or as a PDF here
<https://link.springer.com/content/pdf/10.1007/s41347-024-00384-z.pdf>.



Data Collection Types & Timing



Program Level Monitoring Decisions

1) Decide what data to collect (vary whether practicum, internship, postdoctoral)

Elements tied to competencies or empirically-derived supervision questions

Program specific or specialty specific

2) Decide how to obtain data

Online survey system-platform (i.e. if want data, need to make it easy to give and beneficial to people providing it)

Automation or schedule to match need of program

Frequency of data collection

3) Decide how to use the data

Clear on how will use the data

Clear on how data will be shared



Areas of Monitoring Focus: What Data to Collect

- Working Alliance between supervisor and trainee
- Addressed learning goals
- Access to supervision as needed
- Resolution of strains and ruptures in supervision relationship
- Consistent supervision meetings
- Consistent evaluative feedback
- Direct observation of clinical work
- Addressed diversity/multicultural identifies of patient(s), trainee, or supervisor interaction
- Monitoring of patient progress
- Opportunities for trainee to see skill modeled/experiential supervision

(Falender & Shafranske, 2021; Falender, 2018)



Resources and Tools for Data Collection

- Elements of effective supervision derived from empirical literature
 - Resource: Supervision Session Checklist Tool (Falender & Shafranske, 2015)
- Consistently utilizing a supervision contract that includes goals and elements important to the program
 - Resource: Clinical supervision: A competency-based approach (Falender & Shafranske, 2021)
- Constructs that support DEI and social responsiveness
 - Resource: CCTC Social responsiveness toolkit constructs or questions from example materials (e.g., climate survey questions)

Resources can be adapted to promote data gathering and sharing can occur at the supervision level or program level

Use of the Feedback Data

Opportunities for Collaboration



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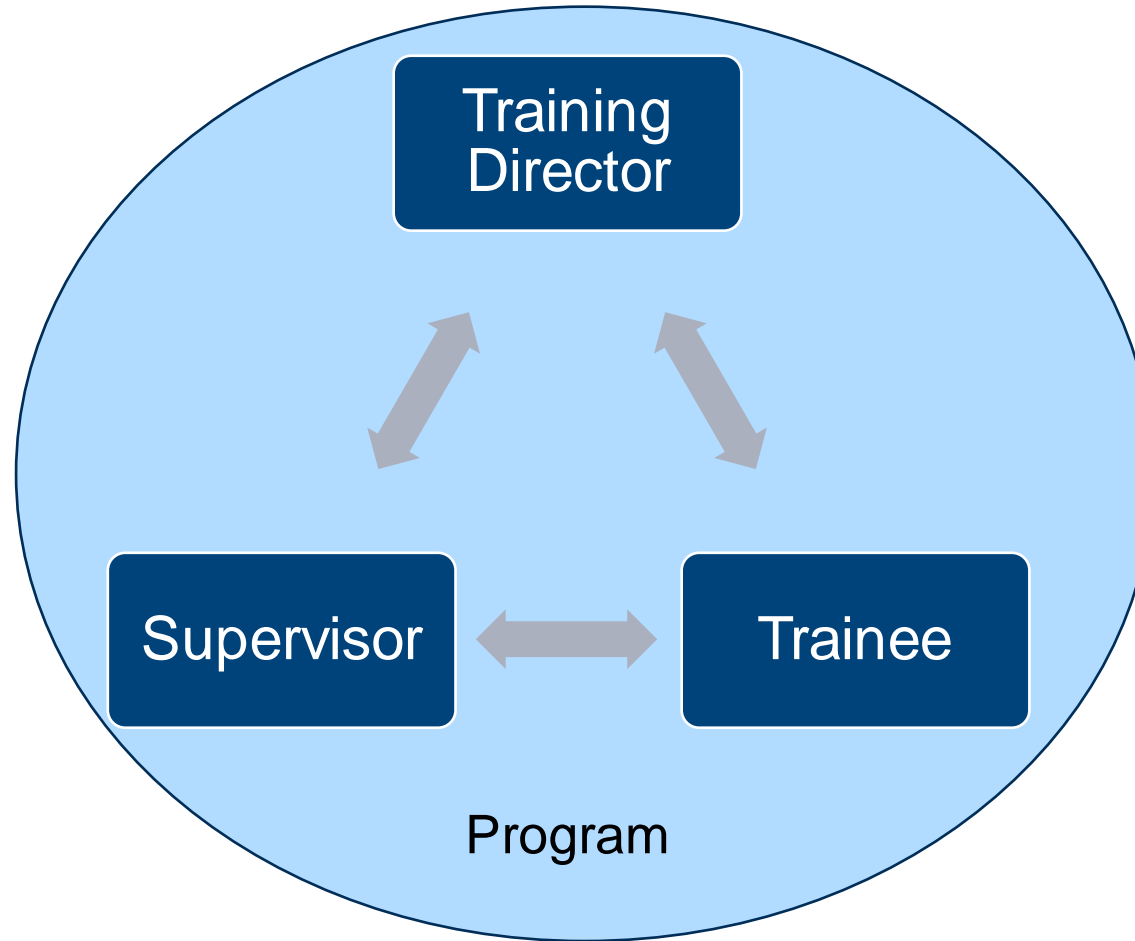
Deciding How to Use the Data

Prior to gather want to be clear on following:

- How feedback data will be utilized?
- Will there be items that are critical that initiate an immediate response?
- Who the feedback data will go to (i.e. just TD, supervision pair)?
- Will data be aggregated or identifiable?
- What will the timeline be in sharing of data?
- What the timeline will be of intervention from the TD, if needed?
- How the TD will intervene (or will TD intervene)?
- What the feedback will be from TD/program to supervisor/program (e.g., year end summary, utilization only as program improvement, corrective action)?



Data Use and Sharing Across the System



Some Options for Use of Data

Supervisor and Trainee engage in formal and informal data sharing

- ▶ Example of Informal: Discussion at end of supervision of a supervision checklist identifying areas that are being effectively included in supervision and areas in need
- ▶ Example of Formal: Trainee and supervisor submit online questionnaire on a weekly or monthly basis, with feedback being available to Training Director and discussed in supervision in regular intervals

Training Director engages in formal and informal data sharing

- ▶ Example of Informal: Discussion of aggregated data at monthly supervisor meetings to identify areas of global improvement opportunities in supervision or areas for positive reinforcement of supervisors
- ▶ Example of Formal: Training Director provides feedback to supervisor individually and meets with trainee regarding needed adjustments. Meets collaboratively with the pair to discuss use of feedback.

Training Director engages in use of data for overall program improvement

- ▶ Example: identifying rotations or clinic sites not meeting critical elements of training or exhibiting supervision practices consistent with program values; making determinations on future training offerings



Setting Ourselves Up for Success via Examination of Feedback Norms

- ▶ The greatest system will not work if people can't be honest and the shared data is misused
- ▶ When shifting how we engage in oversight, we want to think about how we approach feedback and oversight as a normative process of healthy culture within our program.
- ▶ If we do feedback enough and effectively , it becomes normal a routine part of training versus an episodic, stressful endeavor



How would trainees and supervisors describe the feedback norms in my program?

- ▶ Punitive,
- ▶ Only at evaluations,
- ▶ Critical,
- ▶ Overly soft or nice,
- ▶ Collaborative,
- ▶ Just enough to meet requirements,
- ▶ Program enhancing



What we know about giving feedback?

- Establish at onset of training experience that feedback is normative and ongoing
- Feedback should be timely, consistent, and anchored in the competency
- Important to gather formative and summative feedback

(Falender & Shafranske, 2021; Falender, 2018)



Embracing a collaborative approach to feedback

- Particularly important if program/clinic/setting feedback has been unidirectional, punitive, reactive, or inconsistent
- Consistent with shared governance principles
- Business and coaching services have varied offerings of “collaborative feedback” definitions and models.
 - ▶ Collaborative: “work jointly with others or together especially in an intellectual endeavor” (Merriam-Webster, 2024)
 - ▶ Feedback: “information about reactions to a product, a person’s performance of a task, etc. which is used as a basis for improvement (Oxford, 2024)



What is Collaborative Learning?

- ▶ Has historically varied definitions, but includes:
 - Working together in joint intellectual effort by two or more individuals
 - Learning is naturally a social act
 - Two more individuals attempt to learn something together

Laal & Laal, 2012

- ▶ Includes the following elements:
 - Members rely on each other to achieve goal
 - Members help and encourage each other (i.e. gather and share knowledge): provide feedback, challenge conclusions, encouraging
 - Members practice good communication skills
 - Members self assess how well they are doing

Johnson et al, 1990



How collaborative learning can serve as a backdrop for training programs:

- Training Director sets the tone for supervisory peer-engagement and how to approach collaborative learning with trainees
- Training Director can model, provide education on, and provide consultation through the lens of a collaborative approach
- Collaborative learning is consistent with the values of shared governance
- Collaborative learning gives us the guiding parameters and the TD serves to ensure the environment stays true to these principles
- Training Director and supervisors/faculty engaging in a collaborative learning approach have opportunity to translate this in parallel process to the supervisor and trainee dyad.
- Having data available from an oversight system enables the Training Director to know where there are opportunities to target for collaborative improvement (i.e. what is both the content and the process of what is happening in training programs)



Example of Collaborative Learning at Program Level

- Program has a meeting of supervisors monthly
- Training Director sets out expectations and purpose of the meeting as opportunity to consult and learn from peers to improve own supervision skills, ensure supervision quality, and ensure competency-development of trainee.
- Training Director models communication to staff and engages in effective moderating to ensure use of good communication skills, inclusive of how individuals talk about trainees and each other, as well as norms of giving and receiving feedback.
- Mindset in collaboration: the problem is not any one person (trainee or supervisor), but is a shared problem where the group works to achieve a goal
- Training Director uses data gathering (both informally and formally) as means of self-assessing health of collaboration in the meeting/program level



Example of Collaborative Learning and Feedback: Supervision

Rotation and Goals (i.e. supervisory contract) collaboratively developed to include areas of importance to individuals and program

- ▶ Trainee identifies desire to identify how impasses in relationship will be addressed
- ▶ Supervisor identifies desire to clarify communication and expectations on responses
- ▶ Program has asked supervisor and trainee to engage in regular direct observation, sharing of evaluative feedback, and discussion of competency development of the trainee.
- ▶ Supervisor and Trainee each delineate their roles in the supervision contract

Oversight system in support of collaborative learning

- ▶ Informal: Supervisor and trainee check in at end of supervision session to identify if key elements are being addressed (e.g., Falender & Shafranske Supervision checklist, 2015)
- ▶ Formal: Supervisor and trainee complete monthly questionnaires asking about key elements identified in supervision contract; data is gathered by Training Director. Training Director checks in with dyad regarding supervision progress and opportunities for enhancement

Summary

- With the new taxonomy and refinement of health psychology competencies, important for programs to be able to confirm the quality of the training experience
- Data gathering and use can increase confidence that the experience of the trainee and the supervision practices match the intentions of the program
- Shifting how we view, gather, receive, and use feedback creates opportunity for program enhancement and benefit to all training stakeholders
- By increasing the collaborative gathering and use of feedback, we enhance opportunity for feedback to be more normative (and less painful) and potentially more useful



Thank you for your time. Questions?

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Recognition of Supervision Quality Improvement Project Team:

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