

Clinical supervision

Bring One Useful Question to Supervision

Clinicians and clinical supervisees | 10 to 15 minutes

Choose a deidentified moment where you felt unsure, stuck, or pulled toward a quick answer. You do not need to present a polished case narrative. Focus on the decision that affects care, what the client experienced, and what input would help you proceed responsibly.

Prepare the key facts, your uncertainty, and a specific request. Leave room to revise your view after feedback.

Name the learning edge

Separate the clinical question from fear of appearing inexperienced. State what you tried and what remains unclear. Include relevant cultural, access, and power dynamics without using identity labels as explanations for behavior.

Plan follow-through

Ask whether guidance is a recommendation, a required supervisory direction, or an issue needing further consultation. Clarify disagreement respectfully. After the meeting, identify an action, its owner, and how you will review the effect on care.

1. What clinical moment or decision do I want help understanding?**2. What facts, client feedback, and assumptions should the supervisor hear?****3. What specific question or disagreement do I want to raise?****4. What action and review point will follow the discussion?****Clinical use and adaptation**

Use approved confidential channels and clarify supervision boundaries. Do not delay urgent assessment, reporting, or consultation while preparing a worksheet. Explore power and evaluation concerns; this reflection should not require personal trauma disclosure or substitute for formal competency procedures.