Live Supervision allows therapists to receive guidance and oversight in a live clinical setting. While the therapist conducts a session with the youth or family, the trainer or supervisor and clinical team observe from another room (with the family’s consent and knowledge, of course). The trainer or supervisor can observe and, if needed, intervene by calling in with suggestions for keeping the session on track and achieving session goals, as well as advancing therapist development. All Live Supervision sessions should be recorded; they can also be used for DVD Review at a later date.

Live Supervision Checklist:

- **A viewing screen or window with one-way mirror glass from the viewing room to therapy room.** The session will take place in the therapy room while the supervisor and team look on from a second location, the viewing room. At many MDFT sites, these rooms are adjacent to each other for ease of viewing and equipment set-up, however, new wireless technologies allow for viewing in any room that is connected to the system and even remote locations.

  Some sites have an old-fashioned one-way mirror that the team can gather around to watch. However, most teams today simply watch video feed of the sessions on a monitor or television screen as it happens, since sessions need to be recorded anyway.

- **Video recording equipment in the therapy room to record the session.**
  All Live Supervision sessions should be recorded. A video camera should be installed or placed on a tripod in the therapy room for this purpose. Some sites also use additional separate microphones for better sound quality.

  Cables connecting the camera/microphones to the viewing screen can be easily run through the ceiling if your office has drop ceiling panels. Other sites use HDMI ports installed in the walls of the two rooms, and some sites use Ethernet cables (Cat5 or Cat6) to carry HDMI over longer distances.

  The higher the quality of the video recording the better, but what matters most is that the dialogue is clear, all participants are on-screen, and background noise is kept at a minimum.

- **A direct-line phone from viewing room to therapy room.**
  The supervisor will intervene in the session by calling the therapist while they are doing the session (hence, live supervision). The best way to do this is to have a direct-line phone into the therapy room that they can use to call the therapist. This allows the supervisor to speak with the therapist with minimal interruption to the session.
Some sites use cell phones, but this opens up the possibility of the session being interrupted by unrelated calls or messages, and often the clients can hear the supervisor’s comments through the cell phone, so this is not recommended if it can be avoided.

A data storage system.

Once sessions are recorded, you need to be able to store them as well as submit some videos to MDFT International for fidelity. Some sites record sessions directly onto discs using DVD players and then store those discs. Some store sessions digitally on a hard drive or a networked shared drive. A typical video of a session can be anywhere from 1 to 5GB, so your camera hard drive/SD card should be large enough to accommodate this. Any permanent storage should be large enough to hold several videos of this size.

Videos submitted to MDFT International for fidelity can either be uploaded to a secure online database (e.g., ShareFile) or physically mailed to us on discs/flash drives.

Sample Set-Up of Viewing Room