Exploring How Counselor Education Programs Support Site Supervisors

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Abstract

CACREP standards require counselor education programs to provide site supervisors with orientation, consultation, and professional development opportunities (PD). Using a nonexperimental descriptive design, we collected data from a national sample of CACREP-accredited programs (N=46, 13.3% response rate) via an online descriptive survey to explore how programs provide such opportunities to site supervisors. The survey contained open-ended and multiple-choice items addressing orientation, consultation, PD, and participants' opinions on how their program addressed the three domains. We analyzed numerical data using descriptive statistics and open-ended responses using content analysis. We found that most programs offered orientation, consultation, and PD, though site supervisor engagement and methods of implementation varied considerably. Implications for research and practice are discussed in light of the findings.

Keywords

supervision, site supervisor, professional development, counseling, CACREP

Author's Notes

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Site supervisors are predominantly master's-level clinicians, working in a variety of clinical and school settings, who are vital to the training and supervision of student supervisees during field placement experiences. In counselor education, it is considered supervisory best practice to establish and maintain collaborative relationships among university and site supervisors such that roles and expectations of site supervisors are clarified and agreed upon (Borders et al., 2014). The American Counseling Association (ACA, 2014) *Code of Ethics* and Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2015) accreditation standards require counselor educators to support site supervisors who work with their students. CACREP standard 3.Q. operationalized the notion of "support" to include orientation, consultation, and professional development (PD) opportunities. Despite the identified need to support site supervisors, researchers have not investigated how counselor education programs comprehensively provide such support. Thus, there is a gap in understanding how to support site supervisors optimally, and by extension, student supervisees and their clients. In this study, we sought to address this gap by exploring how CACREP-accredited programs support site supervisors.

For students entering practicum and internship field placements, site supervisors often are instrumental to supervisee growth and development. Site supervisors promote knowledge and competence, provide a source of stability and grounding, and offer objectivity and guidance on difficult client cases (Bjornestad et al., 2014). Although site supervisors are vital to supervisee development and to client care, many site supervisors are not adequately trained or prepared for the supervisory role (Bjornestad et al., 2014; Uellendahl & Tenenbaum, 2015).

The responsibility for supporting site supervisors falls on counselor education program faculty who rely on site supervisors to help train their students (ACA, 2014; CACREP, 2015).

For programs accredited by CACREP, the 2016 standards outline three discrete areas of support that programs should provide to site supervisors: orientation, consultation, and PD (3.Q). These three domains are not operationally defined in the standards, though broadly speaking, we suggest that orientation refers to introducing a site supervisor to basic requirements of supervision or to practicum and internship course expectations at a university. Consultation may refer generally to communication between faculty and site supervisors for supervision-related issues or needs, and PD may refer to training or educational opportunities for site supervisors. Although CACREP standard 3.Q outlines what programs must adhere to, it does not prescribe how programs must meet the standard. The lack of prescription is important for a multitude of reasons, but one consequence is that the standard is open to interpretation, which may result in confusion in how to meet the standard and in considerable variation in how programs support site supervisors (Muro, 2004).

Available statistics suggest that site supervisors may not receive much supervision training or support from counselor education programs. Researchers have found that 48% (DeKruyf & Pehrsson, 2011) to 83% (Brott et al., 2016) of sampled site supervisors received no supervision training at all. DeKruyf and Pehrsson (2011) also found that among those who *did* receive supervision training, the least common source of training was at an intern's university (12%). Uellendahl and Tenenbaum (2015) found that 78% of surveyed site supervisors in California received no supervision of their site supervision, but 84% were very interested in supervisory training. These authors also found that site supervisors wanted more clarification of university expectations and guidelines, more training and support overall, and increased contact with program faculty. These findings seem to signal that site supervisors are not receiving adequate support, which is an ethical and accreditation imperative.

In contrast to these findings, some site supervisor trainings have been developed and tested by researchers. Bjornestad and colleagues (2014) designed three, 30-minute, online, site supervisor training modules, coupled with a networking component, for which site supervisors could earn continuing education (CE) hours. With a group of 19 site supervisors, the authors found a significant pre/posttest increase in self-efficacy related to the teaching role of supervision, but found no significant pre/posttest change in self-efficacy related to other supervisory roles. Related, Motley and colleagues (2014) designed a six-hour workshop to increase self-efficacy in providing corrective feedback to supervisees, and the workshop was offered to both site and university supervisors. They found a significant pre/posttest increase in corrective feedback self-efficacy among 31 participants, though the authors did not analyze between-group differences.

Brott and colleagues (2016) developed half-day, introductory and advanced supervision trainings, and Brown and colleagues (2017) developed a four-hour site supervisor training based on supervision models. Brown and colleagues (2017) found a significant pre/posttest increase in site supervisor self-efficacy in relation to their training. Swank and Tyson (2012) detailed a self-paced, web-based, six-module training that was designed to be completed before serving as a site supervisor. In their modules, Swank and Tyson (2012) touched on elements of orientation (e.g., introducing the counselor education program; addressing student, faculty, and site supervisor expectations and requirements) and PD (e.g., supervisee/supervisor characteristics, the supervisory relationship, supervision models and techniques, ethical and legal issues). Gruman and Purgason (2019) designed a two-hour site supervisor training, based in experiential learning theory, involving case studies, small group discussion, reflective prompts, and didactic instruction. These authors found evidence in a pilot study that the training was helpful to

attendees. Merlin and Brendel (2017) described a campus-based training that involved three, four-and-a-half hour sessions over the course of a semester, and the authors reported preliminary data showing that attendees found the training helpful for improving their knowledge and skill. Although preliminary and small-scale, researchers have consistently found evidence that site supervisor training yields desired outcomes.

In addition to trainings and workshops, some scholars have harnessed technology to support site supervisors. To address time constraints and logistical challenges of being in a rural area, Manzanares and colleagues (2004) designed a CD-ROM with orientation materials for site supervisors that included program expectations, paperwork and forms for supervision, a student handbook and clinical manual, a video of faculty discussing supervision topics, and brief training material on supervision theory and techniques. McCoy and Neale-McFall (2017) described a similar set of resources that they housed in their university's online learning management system. They included three modules (setting expectations, the supervisory relationship, and defining supervision) that were required before serving as a site supervisor, as well as multiple follow-up modules that site supervisors could opt to complete at their leisure.

The resources and training designed to date are promising, important, and certainly seem to fit the spirit of supporting and training site supervisors as outlined in the ACA code of ethics and CACREP standards. Importantly, however, the majority of the described training programs appear to speak more to PD, while the virtual resources may provide elements of orientation and PD. Also, as previously mentioned, many sampled site supervisors have reported receiving little supervisory training in general, and particularly little from counselor education programs (Brott et al., 2016; DeKruyf & Pehrsson, 2011; Uellendahl & Tenenbaum, 2015). Thus, there is little evidence to suggest that the training programs or virtual resources described here have been

widely adopted and used across counselor education programs. Alternatively, it is possible that counselor education programs are offering trainings and supports to site supervisors, but a barrier exists in which many site supervisors are not accessing available supports. Although researchers have developed and tested some ideas, there has been no research on how counselor education programs in particular are implementing specific orientation, consultation, and PD efforts like the programs detailed in this section. This gap in knowledge could limit programs' efforts to address accreditation standard as a minimum standard of practice (i.e., to meet standards to obtain/maintain accreditation) and as an aspirational praxis (i.e., to support supervisors who are volunteering their time with students and to advance the practice of clinical supervision). To address these needs, the purpose of this study was to explore how CACREP-accredited counselor education programs address standard 3.Q. Specifically, we sought to address the following research question: in what ways are CACREP-accredited counselor education programs providing orientation, consultation, and PD opportunities to site supervisors?

Method

We utilized a nonexperimental descriptive design to collect data from a national sample of CACREP-accredited programs and to explore their efforts to provide orientation, consultation, and PD opportunities. A nonexperimental descriptive design is common in exploratory research when attempting to provide a snapshot of an issue or phenomenon (Carlisle et al., 2017).

Participants and Procedures

We compiled a list of CACREP liaisons' contact information (i.e., academic institution, name e-mail) for all accredited programs as published on the CACREP website directory, which was current as of January 2020. After obtaining Institutional Review Board (IRB) approval, we e-mailed each CACREP liaison ($N = 345$), requesting that they, or a practicum/internship

coordinator or program coordinator/department chair, complete an online survey. We sent two reminder e-mails at one-week intervals. Participants completed the online survey in Qualtrics. Fifty-three people responded to the survey, but seven participants opened but did not complete the survey, so we removed them from the sample, leaving final sample of 46 participants (13.3% response rate). All participants were either CACREP liaisons or practicum/internship coordinators at their respective accredited institutions. The 46 counselor education programs had tracks in the following areas: clinical mental health counseling (95.7%); school counseling (56.5%); doctoral program (e.g. counselor education and supervision; 23.9%); marriage, couple, and family counseling (10.9%); rehabilitation counseling (6.5%); addiction counseling (4.3%); clinical rehabilitation counseling (4.3%); and career counseling (2.2%). Programs were located in the following Association for Counselor Education and Supervision (ACES) regions: Southern (43.5%), North Atlantic (23.9%), North Central (13.0%), Rocky Mountain (6.5%), and Western (6.5%). Programs were full time (67.4%) and part time (8.7%) and included campus-based (80.4%), hybrid (e.g., courses online and campus-based, online courses with immersions or residencies; 10.9%), and other (e.g., some tracks campus-based and others online; 4.3%) formats.

Instrumentation

We designed a descriptive survey containing open-ended and multiple-choice items divided into four sections: orientation, consultation, PD, and participants' evaluation of their program's overall strengths and limitations. Multiple-choice items allowed participants to categorize, and concretely evaluate, their program's efforts in each section. Open-ended questions allowed participants to give more individualized responses detailing specifics of their program as it related to CACREP standard 3.Q. Consistent with prior research (Carlisle et al., 2017), we sought to establish content validity by submitting a draft of the survey to a panel of

three experts, one of whom had more than 30 years of experience as counselor educator (including expertise in clinical supervision research), one who had 20 years of experience as a counselor educator (with 15 years of online/remote teaching and supervision experience) and who had served as a CACREP site team member, and a third who had 17 years of experience as a counselor educator (with 14 years of online/remote teaching and supervision experience) and who had served as a CACREP site team member for 10 years and site team leader for 3 years. Collectively, the experts offered 32 points of feedback on the survey (e.g., defining orientation, consultation, and PD; reframing questions as multiple choice; item wording/clarity; and expanding item response options). After making the recommended changes, the survey contained 38 items (19 multiple choice [some with options to clarify a response], seven Likert, 12 open-ended), as well as seven demographic items. The survey is archived and freely available on Open Science Framework at https://doi.org/10.17605/OSF.IO/SE2XW.

Data Analysis

For multiple choice and Likert scale items, we used descriptive statistics (e.g., frequency counts, percentages, means, standard deviations) to describe programs' orientation, consultation, and PD efforts. We analyzed responses to the open-ended survey questions using content analysis (CA), which allows researchers to provide a contextualized review of communication (Krippendorff, 2018). We followed Krippendorff's (2018) process to conduct the CA: unitizing, sampling, recording, and reducing. We defined the *unit of analysis*, or the type of communication being analyzed (McKibben et al., in press), as each participant's written text responses to the open-ended survey questions. This allowed us to capture participant-level responses consistent with the overall descriptive survey. The *sample* consisted of the participants described above. *Recording* refers to describing interpretable categories from the units (McKibben et al., in press;

Krippendorff, 2018).We began with an inductive coding procedure (McKibben et al., 2017) by allowing initial categories to emerge from the data, without a priori definitions, that described the main ideas for each question. Working as a team, we reviewed responses to each open-ended question to identify and reach consensus on initial emergent themes. Next, to maximize validity and reliability, we defined each theme in a codebook and assigned numerical, categorical codes to each theme to guide an in-depth deductive coding procedure (McKibben et al., in press).

To *reduce* the data into interpretable categories, we used the codebook and an accompanying coding sheet to conduct a pre-test of our coding scheme with 10% ($n = 39$) of the participant responses across the open-ended questions (McKibben et al., in press). Because interrater reliability (IRR) was $> .8$ (Krippendorff's $\alpha = .87$, 89.74% observed agreement) and we were able to resolve all discrepancies, we continued with the deductive coding process in two rounds of coding. Each author served as a coder and coded independently, coming together after each round to compare codes and resolve discrepancies (Round 1 IRR [$n = 139$]: Krippendorff's $\alpha = .82$, 85.13% observed agreement; Round 2 IRR [$n = 122$]: Krippendorff's $\alpha = .83$, 85.25% observed agreement). We used Recal3 (Freelon, 2013) to calculate IRR. We used descriptive statistics (i.e., frequency counts, percentages), along with participant quotes, to describe the categories coded in responses to the open-ended questions.

Results

In this section, results from the descriptive survey are broken down by orientation, consultation, and PD, followed by participants' overall opinions on how their program addresses CACREP standard 3.Q. Because many items on the descriptive survey allowed participants to select more than response, some percentages total to more than 100%.

Orientation

Of the 46 programs represented, 35 (76.1%) required orientation for site supervisors, 7 (15.2%) provided optional orientation, and four (8.7%) did not offer orientation. Among programs that offered orientation to site supervisors, the following topics were addressed in orientation: program practicum and/or internship policies and requirements (89.1%), evaluation and assessment of supervisees (e.g., midterm or final evaluations; 89.1%), programmatic procedures (67.4%), program handbook (60.9%), supervision models and/or skills (58.7%), supervision ethics (52.2%), supervision best practices (47.8%), and other topics (e.g., multi-cultural aspects and considerations, use of internship hours log, PD and identity, self-care; 10.9%). Site supervisor orientation was provided via written or electronic documents (e.g., manual, PowerPoint; 60.9%), in person/campus-based (e.g., workshop, meeting; 47.8%), online (e.g., webinar; 37.0%), via other means (e.g., phone, individual meetings/trainings, follow-ups at sites, online formats for supervisors unable to attend in person, training with new agencies; 15.2%), and through media resources (e.g., DVD, CD; 2.2%).

Orientation was provided to site supervisors by faculty serving as a practicum/internship coordinator (82.6%), faculty supervising practicum or internship (30.4%), faculty not supervising practicum or internship (e.g., other core faculty, clinic staff; 6.5%), other faculty/staff (e.g., CACREP unit coordinator, faculty emeritus; 6.5%), doctoral students supervising practicum or internship (2.2%), and program/university staff (e.g., field placement member; 2.2%). Participants indicated that programs offered orientation across a range of once per semester/quarter (38.1%), less than once per semester/quarter but at least once per academic year (31.0%), at varying times (e.g., when requirements change, when new supervisors or sites onboard, on an as-needed basis, on an ongoing basis by visiting agencies or through recorded

trainings or documents; 19.0%), more than once per semester/quarter (e.g., whenever new supervisors came aboard, annually unless new sites were added; 7.1%), and less than once per academic year (4.8%). Participants estimated average site supervisor participation in their program's orientation, which ranged from three to 100 supervisors ($M = 25.3$, $Mdn = 18$, SD = 24.2) and approximated a 10-100% participation rate ($M = 73.6\%$, $Mdn = 83\%$, SD = 27.5%).

Seventeen participants provided additional information about their program's site supervisor orientation efforts, which yielded 21 coded statements for the content analysis. Nine (13.8%) statements indicated that improvements or changes to orientation efforts are needed or have been recently undertaken. For example, one participant shared,

> With changes in our program faculty, we have been taking steps to restructure our past practices. Typically, there have been separate sessions for school and clinical mental health supervisors, done once for each group per year. This year, we decided to combine the training and offer two workshops…This allows for collaboration among the two fields and rich discussion about issues presented during the workshop…

Four (6.2%) statements indicated that site supervisors are reluctant to participate in orientation ("We have struggled to get sufficient attendance and participation and tried several different ways of delivering this."). Four (6.2%) statements referred to orientation provided on a follow-up or as needed basis. For example, one participant noted, "We follow-up with our site supervisors to provide additional information as needed. Also, we provide individual orientation should it be necessary…" Two (3.1%) statements indicated that site supervisors tended to find their orientation helpful ("Site supervisors are often reluctant to attend but feedback afterwards indicates this is a valuable experience in which supervisors gained new information.").

Thirty-nine participants elaborated on how their program provides evidence of site supervisor orientation to CACREP, which yielded 65 coded statements. Twenty-seven (41.5%) statements referred to general documentation, such as signed forms, a written description of orientation efforts in the program's CACREP documents, or a supervision contract that included orientation information. Other evidence stemmed from orientation meetings or online modules, including PowerPoint slides and training materials ($n = 12$, 18.5%), sign-in sheets ($n = 8$, 12.3%), meeting agendas ($n = 6$, 9.2%), completion certificates ($n = 5$, 7.7%), and quizzes ($n = 4$, 6.2%). Three statements (4.6%) indicated not providing evidence of orientation to CACREP.

Consultation

All 46 participants indicated that their program offered consultation to site supervisors; 18 (39.1%) indicated that consultation was required for site supervisors, and 28 (60.9%) indicated that consultation was optional. Participants indicated that consultation typically consisted of discussing supervisee issues (e.g., strengths, concerns, limitations; 97.8%), site issues (e.g., site needs client/student populations; 84.8%), program policies or requirements (87.0%), supervisor issues (e.g., strengths, concerns, limitations; 73.9%), general supervision issues (65.2%), and suggestions for training improvement (2.2%). Consultation was provided to site supervisors by phone (e.g., calls, texts; 95.7%), online (e.g., email, virtual meetings; 87.0%), in person (e.g., meetings; 63.0%), and via in person (76.1%) or virtual (19.6%) site visits.

Consultation with site supervisors was provided by faculty supervising practicum or internship (89.1%), faculty serving as a practicum/internship coordinator (82.6%), faculty not supervising practicum or internship (e.g., department chair, program coordinator; 10.9%), program/university staff members (e.g., field experience or placement coordinator, administrative assistant [for procedural questions], clinic director; 10.9%), other faculty/staff

(e.g., fieldwork coordinator, department chair; 4.3%), and doctoral students supervising

practicum or internship (2.2%). Participants estimated that consultation occurred across a range

of 1-2 times per semester/quarter (45.7%), monthly (19.6%), at varying frequencies (e.g., as

needed, when requested by site supervisors or students, bi-weekly during practicum and

quarterly during internship, monthly to multiple time per month, three times per semester;

15.2%), weekly (10.9%), and very rarely (8.7%).

Thirty-five (76.1%) participants indicated that site visits were required in their program;

ten (21.7%) indicated that site visits were not required, and one (2.2%) was not sure. Among the

programs requiring site visits, the visits were conducted by faculty supervising practicum or

internship (82.8%), faculty serving as a practicum/internship coordinator (62.9%), faculty

members not supervising practicum or internship (e.g., adjuncts hired to do site visits, chairs;

5.7%), doctoral students supervising practicum or internship (2.9%), program/university staff

(e.g., field placement team member; 2.9%), and others (e.g., field work coordinator; 2.9%). The

frequency at which programs completed site visits ranged across once per semester/quarter

(62.2%), less than once per semester/quarter but at least once per academic year (24.3%), at

varying frequencies (e.g., when sites are newly established, upon request, as needed; 10.8%), or

more than once per semester/quarter (2.7%).

Thirty-nine participants elaborated on how their program provided evidence of

consultation to CACREP, which yielded 46 coded statements. Seventeen (37.0%) statements

indicated that programs logged or documented any consultation (e.g., phone calls, emails). For

example, one participant shared, "We have documents indicating when and how site supervisor

meetings occur. When there are remediation issues, we have documentation in student files and

student practica files." Seventeen (37.0%) statements indicated that consultation was verified via

documentation of site visits (e.g., notes, logs, reports). One participant shared, "We document the date and content of the site visit in Taskstream." Six (13.0%) statements revealed that programs do not provide evidence of consultation to CACREP (e.g., "No formal documentation is established for these conversations with university supervisors as they're relatively informal."). Five (10.9%) statements referred to a manual or handbook; for example, one participant shared, "Our supervision contract contains contact information for the university supervisor and a statement that the site supervisor can request consultation at any time." One statement (2.2%) indicated the program used "formal evaluations, when available."

Professional Development Opportunities

Of the 46 sampled programs, 35 (76.1%) offered optional PD opportunities for site supervisors, six (13.0%) offered required PD, and five (10.9%) offered no PD to site supervisors. Programs focused on the following supervision areas in PD education and training: supervision ethics (56.5%), providing feedback (45.7%), supervisee evaluation/assessment (43.5%), supervisory relationship or working alliance (41.3%), multicultural competence or considerations (37.0%), professional standards (e.g., accreditation, certification, licensure; 34.8%), modalities (e.g., individual, triadic, group; 34.8%), supervision models (32.6%), technology in supervision (28.3%), supervision competencies (28.3%), initiating supervision (e.g., informed consent, policies/parameters; 23.9%), supervisory interventions (23.9%), goal setting (21.7%), and advocacy (17.4%). Other PD topics (23.9%) described by participants included new supervision developments, social-emotional learning and trauma informed schools, self-study packets, Integrated Developmental Model, neurobiology, general topics, wellness, common client issues at sites, and university courses. Programs delivered PD via in-person/campus-based (e.g., workshop, meeting; $n = 34$, 73.9%), online (e.g., webinar; n = 18, 39.1%), written or electronic

document (e.g., books, handouts, PowerPoint; $n = 10$, 21.7%), and media (e.g., DVD, CD; $n = 1$, 2.2%) outlets, and four (8.7%) specified others means of PD delivery (e.g., at sites, community-based presentations, and adding online components).

PD was provided by faculty serving as a practicum/internship coordinator (56.5%), faculty supervising practicum or internship (50.0%), faculty not supervising practicum or internship (e.g., faculty with content expertise, those interested in helping, faculty rotating responsibilities, all or any faculty, chair; 34.8%), invited speakers from outside the university (e.g., alumni, faculty from other institutions, certified supervisors, experts; 26.1%), doctoral students supervising practicum or internship (8.7%), program/university staff members (e.g., director of university counseling office; 6.5%), and "other" (e.g., all faculty, faculty emeriti; 4.3%). Thirty-eight participants estimated that PD was provided to site supervisors less than once per semester/quarter but once per academic year (44.7%), once per semester/quarter (28.9%), more than once per semester/quarter (e.g., 2-3 times, 15.8%), less than once per academic year (7.9%), and twice per academic year (2.6%). Thirty-nine participants estimated that an average of three to 71 supervisors participated in their program's PD opportunities ($M = 17.66$, $Mdn = 14$, SD $= 13.5$), which approximated a 2-95% participation rate ($M = 44.7$, $Mdn = 49$, SD $= 24.6$). Of the 46 programs, 67.4% offered continuing education (CE) credits to site supervisors who attended PD opportunities, 17.4% did not, 2.2% were not sure, and 13.0% did not respond to the question.

Twenty-eight participants provided additional information about their program's PD efforts, which yielded 31 coded statements. Seventeen (54.8%) statements referenced trainings (e.g., invited speaker, educational events, activities, meet and greet, supervision site fair, invited speaker). One participant stated, "Our programs offer our site supervisors and community

counseling partners continuing education once a year. Topics vary but generally center around ethics and or cultural diversity." Nine (29.0%) statements referenced workshops; for example, a participant shared, "Yearly workshops based on supervisors' expressed needs and interests that are collected at site visits and communicated with the university supervisor during regular consultation." Three (9.7%) statements indicated that site supervisors were invited to or notified of departmental activities or events (e.g., "Supervisors are notified of professional development opportunities including special speakers coming to discuss special topics related to supervision and ethics."). Two (6.5%) statements revealed that programs provide no PD opportunities to site supervisors (e.g., "This is an area of weakness for our program since our university does not support us providing professional development for supervisors.").

Twenty-nine participants elaborated on how their program provided evidence of PD to CACREP, which yielded 42 coded statements. The majority of the coded statements pointed to evidence that events took place, such as event announcements (e.g., flyers, invitations, emails; $n = 12$, 28.6%), sign-in sheets ($n = 9$, 21.4%), completion logs or CE certificates ($n = 7$, 16.7%), agendas ($n = 5$, 11.9%), and evaluations ($n = 4$, 9.5%). Five (11.9%) statements did not fall neatly into an above category and were coded as "other." These statements included "written narrative," "links to online modules," and "We've recorded the trainings and will continue to do so in the future."

Overall Opinions

Participants rated their overall satisfaction with their program's orientation, consultation, and PD efforts on three Likert scale items (see Table 1). Additionally, twenty-nine participants commented on their program's strengths in relation to site supervisor support, which yielded 42 coded statements. Fourteen (33.3%) statements indicated that communication with site

supervisors is a primary strength (e.g., "Consistent communication with site supervisors to discuss student progress, issues, strengths, challenges."). Similarly, twelve (28.6%) statements referenced good relationships with sites. One participant shared, "We have strong, long-standing relationships with our site supervisors." Twelve (28.6%) statements referred to strengths as tangible outputs, such as trainings, program/faculty resources, and opportunities/experiences offered to site supervisors. For example, one participant stated, "Providing individualized site supervision training is convenient for the site supervisors all the timely [sic] for the faculty." Another shared, "This year a faculty member has been moved to the field placement office and given course releases to fully focus on field experiences for the program (CMHC and School)…" Three (7.1%) statements indicate that they review evaluations and feedback from students and site supervisors. One participant noted, "We are serious about the quality of supervision and evaluate once a year and respond immediately to any reported issue or concern expressed by supervisees or supervisors." Two (4.8%) statements referenced following CACREP standards as a strength (e.g., "Follow the standards").

Table 1.

Participant Satisfaction with Program's Site Supervisor Support Efforts ($N = 44$)

	1 Very Dissatisfied	2 Dissatisfied	3 Mixed Feelings	4 Satisfied	5 Very Satisfied	Scale Descriptives
Orientation	---	4 (9.1%)	12 (27.3%)	21 (47.7%)	7 (15.9%)	$M = 3.7$ $Mdn = 4.0$ $SD = 0.9$
Consultation	1 (2.3%)	3 (6.8%)	11 (25.0%)	19 (43.2%)	10 (22.7%)	$M = 3.8$ $Mdn = 4.0$ $SD = 1.0$
PD Opportunities	3 (6.8%)	4 (9.1%)	12 (27.3%)	18 (40.9%)	7 (15.9%)	$M = 3.5$ $Mdn = 4.0$ $SD = 1.1$

Notes: PD – professional development, M – mean, Mdn – median, SD – standard deviation.

Twenty-seven participants also reflected upon desired changes they would like to see in relation to supporting site supervisors, which yielded 36 coded statements. Fourteen (38.9%) statements reflected a desire to increase workshops or trainings for site supervisors (e.g., "Ideally, I'd like to offer a CE course for new supervisors each year and then professional development workshops on Saturdays for our supervisors and the community at large."). Seven (19.4%) statements expressed a wish for online options (e.g., "We are considering an online option for site supervision training. This might be more convenient for some supervisors…"), and five (13.9%) statements referred to increasing site visits (e.g., "We would probably be on-site with every practicum and internship placement on a much more regular basis."). Five (13.9%) statements spoke to a desire to have funding specifically to cover the cost of services or to pay site supervisors and interns. One participant shared, "Pay for the missed income supervisors are taking for training students, attending workshops, etc. Ensure all students are paid for work. Provide a stipend to supervise students." Three (8.3%) statements addressed a wish for program/faculty resources. As one participant wished, "A full time clinical coordinator who would be responsible for developing & managing all accreditation requirements and best practices for site supervisors." Finally, two (5.5%) statements noted that there were no issues or desired changes (e.g., "We do not see resources as an issue here.").

Twenty-nine participants also discussed barriers to making desired changes, which yielded 43 coded statements. Fourteen (32.6%) statements addressed money/funding, such as "Money to support travel to sites, "cost of software," and "…program budgets." Thirteen (30.2%) statements underscored a lack of faculty resources as a barrier (e.g., "We are a very large program with limited resources and a fluctuating faculty at the moment."), and 13 (30.2%) additional statements identified a lack of time for both faculty (e.g., "As with everything else,

faculty time.") and site supervisors (e.g., "Available time. Supervisors are very busy people!").

Three (7.0%) statements referenced lack of attendance/participation from site supervisors as a barrier. One participant shared, "I wish we would offer more opportunities for site supervisors to get together and focus on supervision - we just know from experience that they will not attend."

Discussion

In this study, most sampled programs reported offering orientation (91.3%), consultation (100%), and PD (89.1%) to site supervisors. Generally speaking, these findings seem to contrast previous studies of site supervisors who have reported not receiving much support in general, including from interns' counseling programs (Brott et al., 2016; DeKruyf & Pehrsson, 2011; Uellendahl & Tenenbaum, 2015). However, respondents in this study also indicated wide ranges in the extent to which site supervisors engaged supports offered by counselor education programs. For example, respondents estimated that, on average, almost 75% of programs' site supervisors participated in orientation efforts, perhaps because nearly 75% of programs required participation, but less than half (44%) of programs' site supervisors, on average, engaged in PD opportunities. The range of site supervisor participation also varied substantially, with some programs reporting as few as 10%, and some programs as many as 100%, of their site supervisors engaging in orientation. Similarly, some programs reported as few as 2%, and as many as 95%, of site supervisors attending PD events. Another area of variation was in how frequently counselor education programs offered supports. About 69% of programs offered orientation at least once per year, though nearly 20% of programs offered orientation at varying times depending on needs. About 75% of programs offered consultation weekly, monthly, or semester/quarterly, with about 25% offering it at varying times or rarely. Most programs (92%) offered PD opportunities at least once per academic year, with many offering several per year.

Collectively, the findings from this study, when compared to previous research on site supervisors, suggests that two things may be true at once. One the one hand, programs sampled in this study do seem to be generally meeting the spirit or CACREP standard 3.Q by offering support to site supervisors. Simultaneously, the variability in which supports are offered by programs and/or sought out or engaged by site supervisors may result in many site supervisors still not receiving the consistent support. Reasons for the varied participation seem multifaceted, but some programs expressed a desire to reach and more actively support site supervisors. Respondents recognized that site supervisors are very busy and that more PD opportunities in particular could be useful if funding and faculty time were more abundant. Consistency and communication may be important factors in site supervisors knowing about and being able to access available supports from counselor education programs.

Programs primarily provided orientation via written or electronic documents, followed less frequently by in person or online meetings or webinars. In orientation, programs commonly focused on programmatic and handbook policies, requirements, and procedures; supervisee evaluation and assessment; and supervisory models, skills, ethics, and best practices. Faculty most commonly consulted with site supervisors via phone, email, and via site visits, and less frequently in person. Consultation typically focused on supervisee, supervisor, or site issues; program policies or requirements; and general supervision issues. About 75% of sampled programs required site visits, and about 25% who did not. Programs mostly offered PD as campus-based workshops or meetings (nearly 75%), and less frequently as online webinars, written or electronic documents, or media resources. This finding aligns with site supervisor training programs described in the literature, which tended to be designed more frequently for in-person delivery (Brott et al., 2016; Brown, et al., 2017; Gruman & Purgason, 2019; Merlin &

Brendel, 2017; Motley et al., 2014) than online (Bjornestad et al., 2014; Swank & Tyson, 2012). Over half of sampled programs provided PD on supervision ethics; less frequently covered topics included providing feedback, evaluation and assessment, supervisory relationship, multicultural issues, professional standards, supervision modalities and models, technology, competencies, initiating supervision, supervisory interventions, goal setting, and advocacy.

Trends emerged across the three areas of support; for example, faculty serving as practicum/internship coordinator or supervising practicum or internship primarily provided support to site supervisors. In terms of CACREP evidence, programs tended to provide artifacts that an event occurred or that site supervisors participated in a specific event. Evidence that some sort of event occurred included copies of PowerPoint slides, training materials, agendas, faculty notes and logs, and event announcements. Evidence of site supervisor participation included sign-in sheets, completion certificates, quiz logs, feedback evaluations. Finally, although a majority of respondents appeared satisfied with their program's support for site supervisors, about 25% had mixed feelings about their program's efforts in each of the three areas.

Limitations

Readers should evaluate our findings in light of several limitations. Because we sampled counselor education programs rather than site supervisors, our findings highlight what programs are doing, but we did not capture what site supervisors might need in terms of support or whether they actually find the support from programs helpful in their roles as site supervisors. We also relied of self-report data, which are subject to inaccuracies. There is also the possibility of response bias in that those who participated could have had a motivated interest in the topic or are active in providing support to site supervisors. The length of our survey may have affected responses; some participants responded to some, but not other, items throughout the survey.

Demographically, most programs in our sample were campus-based (80.4%) and/or full time (67.4%) programs located primarily in the North Atlantic and Southern ACES regions (72.1%). We also observed a low response rate (13.3%). Thus, our findings may not fully capture efforts of counseling programs around standard 3.Q., particularly online or hybrid programs, part time programs, or programs in central and western states. Because we sampled CACREP-accredited programs, our results may or may not generalize to non-accredited programs.

Implications for Research and Practice

Programs in this study varied widely in how they designed and implemented support across the three domains, underscoring an intuitively held assumption that faculty interpret and apply CACREP standard 3.Q. in different ways. From an accreditation perspective, CACREP standards are not prescriptive as to how a program must meet a given standard, and the wording of standard 3.Q. allows individuals to interpret the provision of orientation, consultation, and PD in a myriad number of ways. Counselor educators may benefit from conversations in their program about how best to provide the elements of support for site supervisors, as well as how to provide clear evidence to CACREP that their program is meeting the standard. Programs should also consider the implications of site supervisor support on faculty load expectations.

A related consideration for counselor educators is how to maximize site supervisor participation in orientation, consultation, and PD. Importantly, CACREP standard 3.Q. does not explicitly state that *site supervisors* be required to participate in these opportunities, but it does place duty on *counselor educators* to ensure that site supervisors are supported. In this study, more programs required site supervisors to participate in orientation than in consultation or PD. Programs should consider the opportunities and limitations for requiring participation in these three areas compared to allowing for optional participation. Programs also should consider

incentivizing participation as much as possible (e.g., offering CEs for trainings) and utilizing technology to increase their reach to as many site supervisors as possible.

Related, future researchers might investigate possible gaps between programs offering support and site supervisors engaging the supports. Respondents in this study indicated that site supervisors are busy, and at times, programs seemed hesitant to offer additional support because of low site supervisor engagement. Previous studies have supported the potential for site supervisor training workshops, and this study highlighted that many programs are making efforts to support site supervisors, but a question that remains unanswered is how to maximize engagement in the various supports available. Related, future researchers might investigate what site supervisors believe is most helpful for their own supervisory growth and development and in supervising future counselors. This knowledge may help counselor educators be optimally responsive to site supervisors' needs through orientation, PD, and consultation efforts.

References

American Counseling Association. (2014). *Code of ethics*. Author.

Bjornestad, A., Johnson, V., Hittner, J., & Paulson, K. (2014). Preparing site supervisors of counselor education students. *Counselor Education & Supervision, 53*, 242-253. https://doi.org/10.1002/j.1556-6978.2014.00060.x

Borders, L. D., Glosoff, H. L., Welfare, L. E., Hays, D. G., DeKruyf, L., Fernando, D. M., Page, B. (2014). Best practices in clinical supervision: Evolution of a counseling specialty. *The Clinical Supervisor, 33*, 26-44. https://doi.org/10.1080/07325223.2014.905225

Brott, P. E., Stone, V., & Davis, T. E. (2016). Growing together: A developmental model for training school counseling site supervisors. *Professional School Counseling, 20*, 139-148. https://doi.org/10.5330/1096-2409-20.1.139

Brown, C. H., Oliverez, A., & DeKruyf, L. (2017). The impact of the school counselor supervision model on the self-efficacy of school counselors site supervisors. *Professional School Counseling, 21*, 152–160. https://doi.org/10.5330%2F1096-2409-21.1.152

Carlisle, R. M., Hays, D. G., Pribesh, S. L., & Wood, C. T. (2017). Educational technology and distance supervision in counselor education. *Counselor Education & Supervision, 56*, 33–49. https://doi.org/10.1002/ceas.12058

Council for Accreditation of Counseling and Related Educational Programs. (2015). *2016 CACREP standards*. Retrieved from http://www.cacrep.org/wp-content/uploads/2017/08/2016-Standards-with-citations.pdf

DeKruyf, L., & Pehrsson, D. E. (2011). School counseling site supervisor training: An exploratory study. *Counselor Education & Supervision, 50*, 314-327. https://doi.org/10.1002/j.1556-6978.2011.tb01918.x

Freelon, D. (2013). ReCal OIR: Ordinal, interval, and ratio intercoder reliability as a web service. *International Journal of Internet Science, 8*, 10-16.

Gruman, D. H., & Purgason, L. L. (2019). A brief experiential school counseling site supervisor training approach. *The Clinical Supervisor, 38*, 243-261. https://doi.org/10.1080/07325223.2019.1635061

Krippendorff, K. (2018). *Content analysis: An introduction to its methodology* (4th ed.). Sage.

Manzanares, M. G., O'Halloran, T. M., McCartney, T. J., Filer, R. D., Varhely, S. C., & Calhoun, K. (2004). CD-ROM technology for education and support of site supervisors. *Counselor Education and Supervision, 43*, 220-230. https://doi.org/10.1002/j.1556-6978.2004.tb01844.x

McCoy, V. A., & Neale-McFall, C. (2017). Online site supervisor training in counselor education: Using your learning management system beyond the classroom to provide content for site supervisors. *Vistas*. Retrieved from https://www.counseling.org/docs/default-source/vistas/online-site-supervisor-training.pdf?sfvrsn=6e9e4a2c_4

McKibben, W. B., Cade, R., Purgason, L. L., & Wahesh, E. (in press). A guide to content analysis methodology in counseling research. *Counseling Outcome Research and Evaluation*. https://doi.org/10.1080/21501378.2020.1846992

McKibben, W. B., Umstead, L. K., & Borders, L. D. (2017). Identifying dynamics of counseling leadership: A content analysis study. *Journal of Counseling & Development, 95*, 192-202. https://doi.org/10.1002/jcad.12131

Merlin, C., & Brendel, J. M. (2017). A supervision training program for school counseling site

supervisors. *The Clinical Supervisor, 36*, 304-323. https://doi.org/10.1080/07325223.2017.1328629

Motley, V., Reese, M. K., & Campos, P. (2014). Evaluating corrective feedback self-efficacy changes among counselor educators and site supervisors. *Counselor Education and Supervision, 53*, 34-46. https://doi.org/10.1002/j.1556-6978.2014.00047.x

Muro, J. H. (2004). *An investigation into how CACREP accredited institutions meet the CACREP practicum standards* [Doctoral dissertation, University of North Texas]. ProQuest Dissertations & Theses Global.

Swank, J. M., & Tyson, L. (2012). School counselor site supervisor training: A web-based approach. *Professional School Counseling, 16*, 40-48. https://doi.org/10.1177%2F2156759X1201600105

Uellendahl, G. E., & Tenenbaum, M. N. (2015). Supervision training, practices, and interests of California site supervisors. *Counselor Education & Supervision, 54*, 274-287. https://doi.org/10.1002/ceas.12026