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Evaluation of a three-hour cross disciplinary internship site supervisor training session

Abstract

Given the importance of supervision in the counseling fields for facilitating trainee growth, the frequency, type, and delivery of supervision varies widely and can be limited or nonexistent (Pearson, 2004). Thus, a supervisor in any counseling profession must have strong supervisory skills that match the needs of the trainee, even if their professional skills and background differ (Davies et al., 2004). This study examined the effectiveness of a professional development training for school counseling, rehabilitation counseling and school psychology site supervisors. Results demonstrated significant improvements in participant confidence in Managing Supervision as well as general improvements in self-reported self-efficacy. Future directions for supporting the ongoing professional development of supervisors is discussed.

Supervision is a required aspect of training in the helping professions and is a key factor in preparing practitioners to function in complex work environments (Bernard & Goodyear, 2014). The helping professions, in this context, include school counseling, marriage and family therapy, rehabilitation counseling, and school psychology, all of which provide counseling services in school or clinical settings as part of standard educational practice. Across each of these professional fields, supervision has been recognized as important for effective behavioral, psychological, and counseling practices (Brown et al., 2017; Bucky et al., 2010; Dunsmuir et al., 2015). While the actual service delivery of each of these professions varies, the supervision needed to work with clients when providing counseling services is equally important. The recognition across professions and University training programs is further important for increased appropriate supervision training. Being recognized as the “transmission of knowledge, skills, and attitudes for enhancing the quality of clinical services,” it is surprising to see the limited amount of supervision training provided (Spence et al., 2001, p.4).

The standards set by the Council for Accreditation of Counseling and Related Educational Programs (CACREP; 2016), the American School Counselor Association Ethical Standards for School Counselors (ASCA, 2016), the American Association for Marriage and Family Therapy Code of Ethics (AAMFT, 2015), and the National Association of School Psychologists Principles for Professional Ethics (NASP, 2010) all require site supervisors to have relevant training and experience in the field in order to supervise students and to provide direct training of practical skills. This requirement is most closely regulated in the field of Marriage and Family Therapy. For instance, in the state of California the Board of Behavioral Sciences requires a six-hour supervision training for clinical supervisors that is subject to audit. In contrast, school counseling, rehabilitation counseling, and school psychology credential and licensing boards typically do not

require supervisors to have completed any formal supervision training to be a site supervisor for training of fieldwork students beyond years of experience.

Despite many professionals providing direct supervision in schools, community, and clinic settings and research highlighting the importance of appropriately trained supervisors, not all graduate training programs require a supervision course (Pearson, 2004) and many psychologists in the United States have not had any formal training in supervision practices (Falender & Shafranske, 2004). At the doctoral level, 39% of pre-doctoral psychology interns reported completing a graduate course on supervision (Lyon et al., 2008) and more recently, across 16 rehabilitation counseling doctoral programs, 69% of training programs reported offering clinical supervision courses (Pebdani et al., 2016). It is then plausible that many professionals providing direct supervision in the field may have received little to no formal training in supervision.

Therefore, it is essential that counselor and psychologist preparation programs be prepared to develop training programs to improve clinical supervision provided to their students. In many universities, funding for these types of outreach programs is limited. As such, counselor and psychologist preparation programs may benefit from providing cross-disciplinary supervisory trainings applicable to clinical supervisors in multiple fields.

Supervisory Skills

One of the primary concerns in counseling supervision is skill development (Bernard & Goodyear, 2014); as such, supervisors take on multiple roles in supervision (e.g., teacher, counselor, supervisor). A multitude of relevant literature provides best practice recommendations for supervision (see: Association for Counselor Education and Supervision, 2011; Borders et al., 2014; Culbreth & Brown, 2009). The individual providing supervision needs a strong background not only in the profession (i.e., skills) but also in the role as a teacher to train and develop the skills

of an emerging professional. Supervisory competence includes having the requisite knowledge, skills, and attitudes required to deliver effective supervision (Falender et al., 2004). Effective supervisors model and teach professional skills by helping supervisees conceptualize cases, process difficult situations, and interpret and integrate data (Bernard & Goodyear, 2014). Good clinical supervision fosters professional growth, strengthens practice, and inducts trainees into the profession (McMahon & Patton, 2000).

Despite the importance of field supervision in the training and development of emerging practitioners, the frequency, type, and delivery of supervision varies widely and can be limited or nonexistent (Pearson, 2004). In particular, limited research has been conducted in the area of school psychology (McIntosh & Phelps, 2000), noting approximately 70% of school psychology trainees perceived a need for additional clinical supervision (Chafouleas et al., 2002). School psychologists provide a wide array of direct and indirect services to students, teachers, staff, administrators, and families on a regular basis including counseling and consultation services (NASP, 2020), and by not receiving adequate supervision, many may be left unprepared to handle clinical issues as they arise. Dunsmuir and colleagues (2015) found that educational psychology trainees most often only received supervision once per month. Individuals receiving supervision felt about 47.8% of the time was spent on professional development, compared to individuals providing supervision who felt that 60.7% of the time was spent on professional development. Although perceptions of supervision quality, type, and frequency differ across professions, it is critical for a supervisor in any counseling profession to have strong supervisory skills that match the needs of the trainee, even if their professional skills and background differ (Davies et al., 2004).

The training of supervisors is also problematic. Despite the call for increased supervision training in the counseling fields, little research has examined such training (Uellendahl &

Tenenbaum, 2015). The literature provides inconsistent guidance on the most effective ways of training supervisors (Bernard, 2010; Spence et al., 2001) or there is little concerted effort to train supervisors (Milne & James, 2002). Without adequate training in supervision, site supervisors may not be prepared to ensure effective supervision of trainees (Wilson et al., 2015). Site supervisors in the counseling professions often report a lack of training for their role as supervisors (Cigrand et al., 2014; DeKruyf & Pehrsson, 2011; Protivnak & Davis, 2008) despite the CACREP requirement that supervisors have “relevant supervisory training” (CACREP, 2016). Graduate students in counseling psychology rated their supervisors as having a positive attitude, ethical integrity, strong listening skills, and above-average intelligence (Bucky et al., 2010). They found their supervisors to be intelligent and competent in their profession. In contrast, participants also reported that supervisors lacked the ability to stay focused, meet time constraints, challenge the supervisee effectively, and stay committed to the supervisory alliance.

Self-Efficacy

Self-efficacy is integral to the acquisition and mastery of the complex skillset required in effective practice (Kozina et al., 2010). Self-efficacy, the belief or expectation in one’s ability to achieve performance standards (Bandura, 1977, 1997), is associated with a variety of positive outcomes in the helping professions, including reducing burnout (Gunduz, 2012), greater likelihood of implementing a new program (Turner & Sanders, 2006), and improving their practices as a result of new knowledge acquisition (Sturgiss et al., 2017).

Although self-efficacy cannot be influenced directly, by increasing knowledge and skills, it is a construct that can be measured based on participant perceptions of skills. Brown and colleagues (2017) evaluated the impact of site supervisor self-efficacy and knowledge after completion of a four-hour direct training with the School Counselor Supervision Model (SCSM;

Luke & Bernard, 2006). With a sample of 31 school counselors, results showed statistically significant and socially valid improvements in participant ratings of self-efficacy. There was no difference found by the grade levels served or by the number of years of experience; however, with a single-day training, this model demonstrated the effectiveness for improving supervisors' self-efficacy simply by increasing their knowledge. Improved self-efficacy, in turn, increases the likelihood that supervisors will implement the skills they learned. For example, Turner and colleagues (2011) found that following a two-day training workshop on a brief parenting and family support intervention, practitioners with high self-efficacy were more likely to implement the program following training compared to those with lower self-efficacy. Unfortunately, with limited supervision training typically provided, site supervisors are often unlikely to self-identify their lack of knowledge in this area (DeKruyf & Pehrsson, 2011) and may be unaware of their need for more support to provide quality supervision.

In the field of counseling and psychology, the concept of self-efficacy extends beyond the supervisee to actually increase relational self-efficacy (i.e., supervisee's perception of how effective their supervisor perceives them to be). Further, supervisee perception of supervisor efficacy and the supervisory working alliance were found to moderate the relationship between relational self-efficacy and overall counseling self-efficacy (Morrison & Lent, 2018). Thus, the need for skills and competency in the profession support the supervisory alliance and self-efficacy for both the supervisee and supervisor.

Purpose of the Current Investigation

The greatest challenge in counseling supervision research is to identify successful methods for supervisors-in-training and to understand the key elements of supervision while moving beyond descriptions of supervision activities (Bernard & Luke, 2015; Inman et al., 2014). Yet, the

skills and applications of effective supervision are complex; therefore, development and acquisition of effective supervision must extend beyond graduate training to professional development opportunities once in practice (Harvey & Pearrow, 2010).

Given the importance of supervision in facilitating trainee growth and the variability of available research on this topic in certain training areas more research is warranted on how supervision training can be provided as professional development across various counseling professions. This study aims to fill this gap by examining the effectiveness of a professional development training for site supervisors across four helping professions. The development of a cross-disciplinary training designed to meet the needs of counselors across multiple professions (Marriage and Family Therapy, School Counseling, Rehabilitation Counseling, and School Psychology) aims to support the universal aspect of each profession in providing counseling services and supporting the needs of site supervisors. This study extends previous research by providing training in supervisor skills and responsibilities to target a change in participant sense of self-efficacy as a committed supervisor. To examine the effectiveness of this cross-disciplinary training, the following research questions were created:

- 1) Did site-supervisor participants report an increase in their self-efficacy after completing this cross-disciplinary training?
- 2) How did site-supervisor participants' reported knowledge and perspectives about supervision change because of this cross-disciplinary training?

Method

This single intervention mixed methods study consisted of three parts: a pre-test measure, a three-hour training intervention, and a post-test measure which included qualitative response options.

Participants

Five graduate program faculty in counseling developed a site-supervisor training as part of a Faculty Learning Community to meet the needs of site supervisors in Marriage and Family Therapy, School Counseling, Rehabilitation Counseling, and School Psychology. All University faculty were employed full-time in the same department and had been employed by the department between two and eight years. Faculty met monthly across a six-month period to review professional training materials, discuss application to each professional field or accrediting body, and to develop the cross-disciplinary site-supervisor training.

Fieldwork supervisors at participating schools, clinics, or agencies were eligible to sign up for the training if they were practicing in one of the four counseling program areas and currently providing supervision to fieldwork students of the graduate programs. Current supervisors were required to meet the training standards in their field (e.g., number of years' experience, credentials or licensure). Since each professional field has its own accrediting body and/or licensing board, the current training by the University only required the supervisors to meet their own accrediting body requirements for licensing. The training was open to those currently providing supervision in the related field and one who anticipated providing supervision in the upcoming year (this individuals' data was examined as a possible outlier and was not found to be significantly different from other informants). The current analysis included 45 participants across the fields of rehabilitation counseling ($n = 4$), school psychology ($n = 10$), and marriage and family therapy and school counseling (combined program model) ($n = 25$). Five participants did not select a specific field and one self-identified as a Board Certified Behavior Analyst (BCBA) provider. For a full demographic table, please see Table 1.

Table 1. Demographics ($N = 45$)

Variable	% of sample	Mean (Standard Deviation)	Median	Range
Age 35-44	52.2	--	--	25-64
Female	80.4	--	--	--
Caseload Per Year	--	360.3 (709.7)	71.5	0-3600
Years Employed	--	11.75 (7.9)	11.0	1-33
Years Supervising	--	5.4 (5.7)	3.0	0-27
Number of Supervisees	--	17.4 (28.6)	9.5	0-150

Procedures

In reviewing the expected competencies required before entering the profession, the participating training programs (School Counseling, Marriage and Family Therapy, School Psychology, and Rehabilitation Counseling) identified significant variability in supervision models, or even lack of supervision models. The skills necessary for ethical and professional competence in the helping professions are essential and the need for consistency was evident. Thus, the need for a site supervisor training was developed to meet the needs across four programs in the helping profession in order to train professionals on the expected skills and competencies for being a fieldwork site-supervisor.

Considering the great deal of overlap across specializations regarding the process and characteristics of effective supervision, supervision activities, and concerns about supervision (O'Donovan et al., 2008), one standard training session was developed for all of the disciplines that provide counseling services to clients. Using the textbook *The Fundamentals of Clinical Supervision, 5th Edition* by Bernard and Goodyear (2014), the faculty conducted a group-guided study directed by the chapters in the textbook on the following topics: Review of Research in Clinical Supervision, Teaching Supervision, The Supervisory Relationship, Delivery of Supervision, and Professional Responsibilities as Supervisors. Faculty then received approval

through the University Institutional Review Board (IRB) to provide a training and collect effectiveness data for this training to improve self-efficacy for site supervisors. In a similar fashion to the guiding text, the site supervisor training was modeled after the core domains outlined the textbook with additional specifics to meet the needs of school versus clinical site supervisory roles.

All participants completed the site supervisor training registration ($N= 45$), which included the Counselor Supervisor Self-Efficacy Scale (CSSES) Adapted Questionnaire (pre-test). The pre-test questionnaire was completed online one week prior to the training. All participants signed a consent form indicating their understanding of the voluntary nature of participating in the training and indicating consent.

Site Supervisor Training

The site supervisor training was held on a weekday afternoon for three hours and consisted of a large group session (75% of training) and breakout sessions by discipline (25%). Continuing education units for the Board of Behavioral Sciences (BBS), the Certified Rehabilitation Counselor (CRC) and the Nationally Certified School Psychologist (NCSP) were provided. The training covered the following content as a large group: overview and context of providing field-based supervision, strategies and techniques for being an effective supervisor, and evaluating supervisees effectively. The following learning objectives were covered: 1) Describe the difference between fieldwork (site supervisor) supervision and university (faculty) supervision, 2) Explain the differences between the three main types of supervision (individual, triadic, group), 3) Clarify the role of the supervisor, specific to supervisor and supervisee relationships, 4) Explain the benefits of supervision from the perspective of the supervisor and the supervisee, 5) Implement effective supervisee evaluation techniques, and 6) Describe the difference between formative and summative evaluation, and how to implement these in a supervision session. Consistent with

evidence-based training recommendations (Milne et al., 2011), teaching (i.e., verbal instruction) and modeling (i.e., video demonstration) were incorporated in the training.

Then, breakout sessions were facilitated by faculty in each program, which enabled consultative discussions on supervision specific to each discipline. After the training, participants completed the post-questionnaire (CSSES-adapted) with additional open-ended response questions addressing whether their knowledge about supervision changed as a result of the training and whether the training helped them to re-evaluate their style of supervision.

Measures

Counselor Supervisor Self-efficacy

Self-efficacy was measured using items from the CSSES (Barnes, 2002). The original CSSES was developed and validated as part of a published doctoral dissertation (Barnes, 2002). The CSSES is a 60-item questionnaire on counselor supervisor practices and level of confidence. The questions were rated on a 9-point scale ranging from 0 (not confident at all) to 9 (completely confident). An exploratory factor analysis revealed six latent factors: Theories & Techniques, Group Supervision, Supervision Ethics, Self in Supervision, Multicultural Competence, and Knowledge of Legal Issues (Barnes, 2002). The subscales in the original measure have internal consistency scores above 0.78 (Knowledge of Legal Issues) up to 0.94 (Theories and Techniques).

An abbreviated version of the CSSES was used for this study with a final set of 45 items based on the University faculty discussion of which domains were applicable across all four of the professional practice areas that would be participating in the training. This adapted version of the CSSES included items from the following subscales: (a) Knowledge of Legal Issues, which measures supervisors' knowledge of legal concerns that may be present in counseling and supervision (8 items, $\alpha = .91$, sample item "Present procedures for assessing and reporting an

occurrence of child abuse”), (b) Self in Supervision, which measures supervisors’ perceptions of their own ability to respect individual differences in supervision and willingness to receive feedback from supervisees (9 items, $\alpha = .95$, sample item “Demonstrate respect for a supervisee who has a different worldview from myself”), and (c) Multicultural Competence, which measures supervisors’ confidence in their ability to address cultural issues in supervision (7 items, $\alpha = .93$, sample item “Address a supervisee’s race or ethnic identity as a counseling process variable”). An additional three domains were added with items covering content of Methods & Techniques of Supervision, which measures supervisors’ ability to use a variety of techniques to provide supervision (8 items, $\alpha = .92$, sample item “Help a trainee recognize and address countertransference issues related to a case”), Managing Supervision (5 items, $\alpha = .88$, sample item “Establish a system for monitoring a supervisee’s management of cases”), and Evaluation, which measures supervisors’ ability to provide various forms of feedback for supervisee development (8 items, $\alpha = .93$, sample item “Write a thorough summative evaluation, indicating supervisee strengths and weaknesses”). The final items and subscales used were determined to have good internal consistency and also high social validity based on the professional text, competencies of supervisors, and the cross-disciplinary nature of the training.

Knowledge and Perspectives about Supervision

Three researcher developed open-ended questions were included in the post-questionnaire to examine qualitative responses on participant changes in knowledge and perspectives about supervision. These questions were provided for written response after the completion of the CSSES. The three questions were: (1) How did your knowledge about supervision change as a result of the training?, (2) How did the training help you re-evaluate your style of supervision?, and (3) How do you hope to change your practice as a result of this training?

Data Analysis

For the quantitative data, prior to conducting the primary analyses, data were screened for missing data and outliers using IBM SPSS Statistics version 23.0 (IBM Corp, 2015). Missing values analysis indicated that there were no survey items or cases with 5% or more missing values. For the analyses conducted, pairwise deletion was used for any missing data (50 participants completed the pre-test and only 22 completed the post-test). Additional analyses revealed no evidence of univariate or multivariate outliers. Item level analyses yielded no evidence of violations regarding the assumptions associated with t-test analyses. Once data were screened and it was determined that data were adequate for the proposed analyses, a series of paired-samples t-tests were run between each scale to identify if there were statistically significant increases in participant knowledge and efficacy with providing supervision. For the purpose of the following results, all participants were analyzed and there were no subgroup analyses due to unequal distribution of group sizes across disciplines.

For the qualitative analysis, data were analyzed in an iterative process to identify comments or themes associated with the topics of interest. Two research team members (the second and third authors) conducted an initial content analysis of the three written-response open-ended survey questions independently using a thematic analysis approach (Braun & Clarke, 2006). Upon first review of the data, the team members conducted theoretical memo writing, reflecting potential themes by marking and identifying ideas for each of the open-ended survey questions. An audit trail was developed by each team member independently to track theme generation. These themes were identified based on the information provided from participants after the survey questions were completed. The team members then reviewed all themes to compare, clarify, and define each theme. The team met to resolve any discrepancies and arrive at consensus coding for all survey

questions. These themes were used for the final dataset, described in the Results section. This approach has been recognized as, “flexible, straight-forward and accessible” (McLeod, 2011, p. 146).

Results

Counselor Supervisor Self-efficacy

To examine research question one, the CSSES-Adapted was used with six subscales. These subscales were based on sum of scores of the individual items. Based on the Likert scale of the CSSES, higher scores indicated more confidence in each domain, or a greater sense of self-efficacy. Participants who completed both the pre- and post- evaluation form ($n=22$) showed an overall increase in self-efficacy for supervision practices across each of these domains. Results of the paired-samples t-tests demonstrated a significant improvement in participant confidence in the domain of Managing Supervision from pre-test ($M = 35.2, SD = 8.9$) to post-test ($M = 39.7, SD = 3.3$), $t(20) = -2.2, p < .05$. One additional domain was approaching confidence for the second subscale which showed a positive trend for participant confidence in Methods and Techniques in Supervision ($M = 57.2, SD = 12.6$) to post-test ($M = 63.5, SD = 5.4$), $t(20) = -2.0, p = .06$. The remaining domains were not significant but showed positive trends for all subscales in the post-evaluation ratings. For full evaluation results, see Table 2.

Table 2. Pre-post CSSES-Adapted Results

	Pre-Mean (Standard Deviation)	Pre- Median	Post-Mean (Standard Deviation)	Pre- Median	<i>t</i>	<i>df</i>	<i>Sig</i>
Managing Supervision	35.2 (8.9)	39.0	39.7 (3.3)	40.0	-2.2	20	.04*
Methods and Techniques	57.2 (12.6)	60.0	63.5 (5.4)	64.0	-2.0	20	.06 ^t
Self in Supervision	66.6 (14.7)	72.0	72.6 (6.1)	73.0	-1.6	18	.13
Multicultural competence	50.6 (11.4)	53.5	54.2 (5.5)	53.0	-1.3	20	.21
Legal and Ethical Supervision	58.6 (12.6)	64.0	64.2 (6.1)	64.0	-1.7	20	.10 ^t
Evaluation	56.9 (13.4)	62.5	63.4 (6.2)	63.0	-1.8	20	.08 ^t

* $p < .05$, ^t $p < .10$

Knowledge and Perceptions about Supervision

Qualitative analysis of the data from the three open-ended response questions revealed three broad themes: (a) increase in knowledge, (b) increase in awareness and reflection, and (c) identification of ways to improve supervision. The thematic patterns included in the responses reflected areas related to increases in knowledge and perceptions of supervision, increases in awareness of supervision practices and self-reflection, and improvement of supervision practices. Qualitative data responses reflect that participants felt their knowledge and perception of what supervision is and their role was clarified and improved. Supervisors expressed an increased level of awareness of their role as a supervisor, their supervision practices, and generally felt more self-reflective about the process. Lastly, supervisors expressed concrete and specific ways in which they would be improving their supervision practices as a result of the training.

Supervisors' qualitative responses about their knowledge and perceptions of supervision were positive. The majority of supervisors reported they learned specific skills during the training or that the training served as "a good refresher," ($n=18$) which is consistent with the significant increases in their self-reported self-efficacy. Comments included: "I learned how to address

students who may be defensive,” “Yes, learning about ‘what not to do’ in supervision... what qualifies as a great supervision,” and “...Reminder of factors to consider being an effective supervisor that are quickly forgotten with day-to-day activities.”

Some supervisors also reported that the training increased their awareness about their own supervision practices and encouraged self-reflection of themselves as supervisors ($n=9$), including identification of their strengths and weaknesses as supervisors. Reflective comments included: “My supervision work is recent and evolving, so input from an objective source has been valuable,” “I need to use more organization, structure, and [set clear] expectations,” and “My thought process has changed in that I will structure my supervision to enhance developmental changes. Spend more time on reflection. I will also ask for feedback for myself.”

Finally, supervisors reported on their ability to identify ways to improve their supervision practices ($n=15$). Specific strategies included: “I will be implementing more live observation,” “More one on one supervision,” and “Be more structured in supervision and make sure they are meeting their NASP competencies via internship opportunities.” In particular, strategies related to evaluation were identified by many of the supervisors, including the use of formative and summative evaluations and providing more reflective, organized, and informed feedback sessions for supervisees.

Discussion

Training and education in supervision is critical in the helping professions; however, many practitioners report feeling unprepared to assume the role of a site supervisor (Uellendahl & Tenenbaum, 2015). For the current study, the objectives of the training covered areas in counseling theories for supervision and supervision structure (i.e., individual, group, triadic) as well as expectations of the supervisor and the understanding of the evaluation process with supervisees.

Contrary to previous research demonstrating significant improvements in self-efficacy following brief training sessions (e.g., DeKruyf & Pehrsson, 2011; Luke & Bernard, 2006), results from this study demonstrated general improvements in participants' self-reported self-efficacy when comparing pre- and post-workshop data; however, only one subscale (Managing Supervision) demonstrated statistically significant results. Given that the training provided information about supervision theory and techniques, it is not surprising that supervisors reported increases in self-efficacy in the domain of supervision management but not necessarily across each domain (e.g., legal and ethical). Similarly, DeKruyf and Pehrsson (2011) found that site supervisors with more than 40 hours of supervision training had higher self-efficacy, but that even brief supervisor trainings based on supervisor areas of need was effective (Brown et al., 2017). Thus, this training model supported a brief supervisor-training model that was able to target practitioners across multiple helping professions in at least targeting some tangible skills and improving components of self-efficacy and is a cost effective model for training programs to consider adopting. Given that self-efficacy is integral to the acquisition and mastery of the complex skillset required in effective practice (Kozina et al., 2010), improving components of self-efficacy using a brief training model can contribute to improved service delivery and supervision practices.

Qualitative responses indicated an increased knowledge of supervision, which is an important part of supervisory competence (Falender et al., 2004). Similarly, participants noted an increased awareness and reflection of their supervisory practice along with plans to improve their supervisory practice by implementing different supervisory skills. This skill development is essential to developing effective supervisors (Bernard & Goodyear, 2014). Participants also noted an increase in understanding of supervision management, which is a core supervisory competency (Kraemer Tebes et al., 2010). Interestingly, this cross-disciplinary training was able to support the

various skills associated with supervision even though the four professions have a different population served (e.g., students with/without disabilities, children/adults, and school/clinic).

Limitations

This study has a few noted limitations, the first being our very small sample size which may have led to the lack of statistical significance. Additionally, the structure of providing a training across the broader field of counseling for practitioners across school and clinical settings who provide services in different ways required the training to be broad in scope. Thus, the training was designed to capture the global skills of being a counseling supervisor without addressing domain specific content with the large group. Rather than have participants complete the open-ended responses individually, the use of a focus group within disciplines may have provided useful information as to how practitioners across each field reflected on the supervision training and implications for their future practice. In addition, these focus groups could have been used to help confirm the themes of the reflections and reduce potential bias from the authors' thematic analysis.

The participants who signed up for the training were primarily school-based counselors or school psychologists, thus leading the majority of participants' evaluations to reflect upon school-based, rather than clinical practice settings. While the training yielded high initial participation rates, with nearly 50 in attendance, only 22 participants completed post-evaluation forms; many participants did not complete the evaluation form due to time constraints. While attrition is common in survey-based research (McKevitt, 2012), this was not well controlled for in the current study. A reduced item questionnaire may be recommended for future research such as the 18-item Psychotherapy Supervisor Development Scale (PSDS; Barker & Hunsley, 2014) in addition to making the survey being available electronically for follow-up. Finally, given that we conducted six separate t-tests, the results of this study have the increased likelihood of a Type-I error.

Directions for Future Research and Implications for Practice

Despite the above limitations, this study is a promising next step in the understanding of training in supervision, including the structure and format of supervision training and participant evaluations of the utility of the training and perceived self-efficacy. In the helping professions, supervision skills have been recognized as being increasingly important to ensure high quality counseling and psychological services (Dunsmuir et al., 2015). Thus, the nature of this training was unique in developing a training model that was designed to meet the needs of professionals across related, but different professions. With overlapping training needs to self-efficacy and supervisory skills, this training was able to fit the needs of both school and clinical providers. As a result, this work supports these general training models as appropriate and separate support for content-specific skills (e.g., assessment techniques) to be addressed with other professional development activities. More research is needed to address how this training model can better support those in clinical versus school-based settings. Future work will also focus on how to integrate this professional development for supervisors into the school or clinic settings to reach a larger audience of practitioners that do not seek out support such as this. Ideally, increasing the participant pool will also help to identify if there is more variability in the results when the self-selection bias is reduced.

As university-based supervisors in various counseling professions, this research team had access to the literature, data, and time needed to design an effective training in counseling supervision. In practice, however, the field of counseling supervision has long been an applied one. Although some counseling professions requires supervisors to complete approved training courses (such as Marriage and Family Therapy), other fields do not (e.g., School Psychology). Without a requirement, it is difficult for agencies and schools to justify putting the time and

resources needed into designing their own supervisory training program. This study demonstrated that designing a cross-disciplinary supervisory training is an effective way to meet the needs of various professional counseling supervisors. It is recommended that more universities consider pooling their resources to offer cross-disciplinary counseling supervision trainings to their community partners and work to offer these trainings on-site to increase participation from all practitioners (i.e., in a school district).

Effective supervision skills are not only important to the development of counselors-in-training; ultimately, these skills play a key role in the quality of services delivered to clients. It is also recommended then, that in addition to creating supervisory trainings for their community partners, universities allow any community organizations and schools that need counseling supervision training to have access to such trainings. For the current program, the results of this initial training will be used to design an annual training for new supervisors and as part of an alumni training supplemental to the graduate training programs, with the potential to scale to the larger community in the future. The intention is to create a hybrid format in which the generalizable supervisory knowledge is provided online, while more university and program specific data is discussed in-person. Such a format has the potential to reach a greater number of counseling professionals, while still maintaining a personal and community-focused approach. In turn, the next steps after improving the reach of such professional development will be to measure the impact on student/client outcomes as a result of working directly with supervisors who have participated in supervisor trainings.

References

- American Association for Marriage and Family Therapy (2015). *Code of ethics*.
<https://www.aamft.org/Documents/Legal%20Ethics/AAMFT-code-of-ethics.pdf>
- American School Counselor Association (2016). *ASCA ethical standards for school counselors*. Alexandria, VA: Author.
- Association for Counselor Education and Supervision (2011). ACES best practices in clinical supervision – 2011. <https://acesonline.net/knowledge-base/aces-best-practices-in-clinical-supervision-2011/>
- Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review*, 84(2), 191-215.
- Bandura, A. (1997). *Self-efficacy: The exercise of control*. New York: W.H. Freeman.
- Barker, K. K., & Hunsley, J. (2014). Reliability and validity of the Psychotherapy Supervisor Development Scale: A meta-analytic evaluation. *The Clinical Supervisor*, 33(2), 123-143. <https://doi.org/10.1080/07325223.2014.978588>
- Barnes, K. L. (2002). *Development and initial validation of a measure of counselor supervisor self-efficacy*. (Doctoral dissertation). Retrieved from ProQuest Information and Learning. (3045772).
- Bernard, J. M. (2010). Special issue on clinical supervision: A reflection. *Canadian Journal of Counselling and Psychotherapy*, 44(3), 238-245. <https://cjc-rcc.ucalgary.ca/article/view/59285>
- Bernard, J. M., & Goodyear, R. K. (2014). *Fundamentals of clinical supervision* (5th ed.). Upper Saddle River, NJ: Pearson.
- Bernard, J. M., & Luke, M. (2015). A content analysis of 10 years of clinical supervision articles in counseling. *Counselor Education & Supervision*, 54(4), 242-257. <https://doi.org/10.1002/ceas.12024>
- 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>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101. <https://doi.org/10.1002/capr.12165>
- Brown, C. H., Olivarez, A., & DeKruyf, L. (2017). The impact of the school counselor supervision model on the self-efficacy of school counselor site supervisors. *Professional School Counseling*, 21(1), 152-160. <https://doi.org/10.5330/1096-2409-21.1.152>
- Bucky, S. F., Marques, S., Daly, J., Alley, J., & Karp, A. (2010). Supervision characteristics related to the supervisory working alliance as rated by doctoral-level supervisees. *The Clinical Supervisor*, 29(1), 49-163. <https://doi.org/10.1080/07325223.2010.519270>
- Chafouleas, S. M., Clonan, S. M., & Vanauken, T. L. (2002). A national survey of current supervision and evaluation practices of school psychologists. *Psychology in the Schools*, 39(3), 317-325. <https://doi.org/10.1002/pits.10021>
- Cigrand, D. L., Wood, S. M., & Duys, D. (2014). School counselors' use of solution-focused tenets and techniques in school-based site supervision. *Journal of School Counseling*, 12, 1-33. <http://www.jsc.montana.edu/articles/v12n15.pdf>
- Council for Accreditation of Counseling and Related Educational Programs (2016). *2016 CACREP standards*. <https://www.cacrep.org/for-programs/2016-cacrep-standards/>

- Culbreth, J. R., & Brown, L. L. (2009). *State of the art in clinical supervision*. New York: Routledge.
- Davies, J., Tennant, A., & Ferguson, E. (2004). Developing models and a framework for multi-professional clinical supervision. *The British Journal of Forensic Practice*, 6(3), 36-42. <https://doi.org/10.1108/14636646200400018>
- DeKruyf, L., & Pehrsson, D. E. (2011). School counseling site supervisor training: An exploratory study. *Counseling Education and Supervision*, 50(5), 314-327. <https://doi.org/10.1002/j.1556-6978.2011.tb01918.x>
- Dunsmuir, S., Lang, J., & Leadbetter, J. (2015). Current trends in educational psychology supervision in the UK. *Educational and Child Psychology*, 32(3), 8-21.
- Falender, C. A., Cornish, J. A., Goodyear, R., Hatcher, R., Kaslow, N. J., Leventhal, G., & ... Grus, C. (2004). Defining competencies in psychology supervision: A consensus statement. *Journal of Clinical Psychology*, 60(7), 771-785. <https://doi.org/10.1002/jclp.20013>
- Falender, C. A., & Shafranske, E. (2004). *Clinical supervision: A competency based approach*. Washington, DC: APA.
- Gunduz, B. (2012). Self-efficacy and burnout in professional school counselors. *Educational Sciences: Theory & Practice*, 12(3), 1761-1767.
- Harvey, V. S., & Pearrow, M. (2010). Identifying challenges in supervising school psychologists. *Psychology in the Schools*, 47(6), 567-581. <https://doi.org/10.1002/pits.20491>
- IBM Corp. Released 2015. *IBM SPSS Statistics for Windows, Version 23.0*. Armonk, NY: IBM Corp.
- Inman, A. G., Hutman, H., Pendse, A., Devdas, L., Luu, L., & Ellis, M. V. (2014). Current trends concerning supervisors, supervisees, and clients in clinical supervision. In C. E. Watkins Jr. & D. L. Milne (Eds.), *The Wiley international handbook of clinical supervision* (pp. 61-102). West Sussex, UK: Wiley.
- Kozina, K., Grabovari, N., De Stefano, J., & Drapeau, M. (2010). Measuring changes in counselor self-efficacy: Further validation and implications for training and supervision. *The Clinical Supervisor*, 29, 117-127. <https://doi.org/10.1080/07325223.2010.517483>
- Kraemer Tebes, J., Matlin, S. L., Migdole, S. J., Farkas, M. S., Money, R. W., Shulman, L., ... Hoge, M. A. (2010). Providing competency training to clinical supervisors through an interactional supervision approach. *Research on Social Work Practice*, 21(2), 190-199. <https://doi.org/10.1177/1049731510385827>
- Luke, M., & Bernard, J. M. (2006). The school counseling supervision model: An extension of the discrimination model. *Counselor Education and Supervision*, 45(4), 282-295. <https://doi.org/10.1002/j.156-6978.2006.tb00004.x>
- Lyon, R. C., Heppler, A., Leavitt, L., & Fisher, L. (2008). Supervisory training experiences and overall supervisory development in predoctoral interns. *The Clinical Supervisor*, 27(2), 268-284. <https://doi.org/10.1080/07325220802490877>
- McKevitt, B. C. (2012). School psychologists' knowledge and use of evidence-based, social-emotional learning interventions. *Contemporary School Psychology*, 16, 33-45. <https://doi.org/10.1007/BF03340974>
- McIntosh, D. E., & Phelps, L. (2000). Supervision in school psychology: Where will the future take us? *Psychology in the Schools*, 37(1), 33-38. [http://doi.org/10.1002/\(SICI\)1520-6807\(200001\)37:1%3C33::AID-PITS4%3E3.0.CO;2-F](http://doi.org/10.1002/(SICI)1520-6807(200001)37:1%3C33::AID-PITS4%3E3.0.CO;2-F)

- McLeod, J. (2011). *Qualitative research in counseling and psychotherapy*, 2nd ed. London, UK: Sage.
- McMahon, M., & Patton, W. (2000). Career counsellors, support and lifelong learning: A case for clinical supervision. *International Journal for the Advancement of Counselling*, 22(2), 157-169. <http://doi.org/10.1023/A:1005632604793>
- Milne, D. L., & James, I. A. (2002). The observed impact of training on competence in clinical supervision. *British Journal of Clinical Psychology*, 41(1), 55-72. <http://doi.org/10.1348/014466502163796>
- Milne, D. L., Sheikh, A. I., Pattison, S., & Wilkinson, A. (2011). Evidence-based training for clinical supervisors: A systematic review of 11 controlled studies. *The Clinical Supervisor*, 30(1), 53-71. <http://doi.org/10.1080/07325223.2011.564955>
- Morrison, M. A., & Lent, R. W. (2018). The working alliance, beliefs about the supervisor, and counseling self-efficacy: Applying the relational efficacy model to counselor supervision. *Journal of Counseling Psychology*, 65(4). <http://doi.org/10.1037/cou0000267>
- National Association of School Psychologists (2020). *Who are school psychologists?* <https://www.nasponline.org/about-school-psychology/who-are-school-psychologists>
- National Association of School Psychologists (2010). *Principles for Professional Ethics*. <https://www.nasponline.org/standards-and-certification/professional-ethics>
- O'Donovan, A., Slattery, L., Kavanagh, D., & Dooley, R. (2008). Opinions of Australian Psychological Society college chairs about process and content in supervision training: Preliminary investigation in Queensland. *Australian Psychologist*, 43(2), 114-120. <http://doi.org/10.1080/00050060801978654>
- Pearson, Q. M. (2004). Getting the most out of clinical supervision: Strategies for mental health. *Journal of Mental Health Counseling*, 26(4), 361-373. <http://doi.org/10.17744/mehc.26.4.tttju8539ke8xuq6>
- Pebdani, R. N., Ferguson-Lucs, T. K., Dong, S., & Oire, S. N. (2016). Examining the status of supervision education in rehabilitation counsellor training. *Australian Journal of Rehabilitation Counseling*, 22(1), 51-56. <http://doi.org/10.1017/jrc.2016.2>
- Protivnak, J. J., & Davis, T. E. (2008). The impact of the supervision relationship on the behaviors of school counseling interns. *Journal of School Counseling*, 6, 1-22. <http://www.jsc.montana.edu/articles/v6n19.pdf>
- Spence, S. H., Wilson, J., Kavanagh, D., Strong, J., & Worrall, L. (2001). Clinical supervision in four mental health professions: A review of the evidence. *Behaviour Change*, 18(3), 135-155. <http://doi.org/10.1375/bech.18.3.135>
- Sturgiss, E., Haesler, E., Elmitt, N., van Weel, C., & Douglas, K. (2017). Increasing general practitioners' confidence and self-efficacy in managing obesity: A mixed methods study. *BMJ Open*, 7, 1-8. <http://doi.org/10.1136/bmjopen-2016-014314>
- Turner, K. M. T., Nicholson, J. M., & Sanders, M. R. (2011). The role of practitioner self-efficacy, training, program and workplace factors on the implementation of an evidence-based parenting intervention in primary care. *The Journal of Primary Prevention*, 32, 95-112. <https://doi.org/10.1007/s10935-011-0240-1>
- Turner, K. M. T., & Sanders, M. R. (2006). Dissemination of evidence-based parenting and family support strategies: Learnings from the Triple P-Positive Parenting Program system approach. *Aggression and Violent Behavior*, 11(2), 176-193. <https://doi.org/10.1016/j.avb.2005.07.005>

Uellendahl, G. E., & Tenenbaum, M. N. (2015). Supervision training, practices, and interests of California site supervisors. *Counselor Education and Supervision*, 54(4), 274-287. <https://doi.org/10.1002/ceas.12026>

Wilson, T. A., Schaeffer, S., & Bruce, M. A. (2015). Supervision experiences of rural school counselors. *The Rural Educator*, 36(2), 27-37. <https://doi.org/10.35608/ruraled.v36i2.341>