

THE DEVELOPING PSYCHOTHERAPY SUPERVISOR:
THE EXPERIENCE OF CHANGE AND GROWTH IN THE EARLY YEARS

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Abstract

While the impact of clinical supervision on psychotherapist professional development is well documented in the literature, far less is known about the professional development of the psychotherapy supervisor. This study explored experiences perceived as being most impactful to the professional development of novice psychotherapy supervisors. Phenomenology provided the framework to investigate the primary research question: **What experiences do novice clinical supervisors perceive to be most helpful or challenging to their professional development and growth?**

The research participants chosen for this study represented both the early and later phases within the novice supervisory stage of development. Three participants with approximately one-year experience in providing supervision were followed during a six-month long period of providing supervision. They completed monthly journal entries and sat for an hour-long, semi-structured interview two months after the completion of the journal entries. Three additional participants with approximately three years of experience providing clinical supervision completed a retrospective interview reflecting on the impactful experiences nearing the end of this novice supervisor phase.

The participants of this study indicated reflexivity and spirituality, positive interactions with supervisees, and previous clinical experiences as being positively impactful to their growth and development as supervisors. The results of this study contribute to expand the current –and limited- understanding of what experiences in initial practice are considered most impactful on supervisor development. This study contributes to the field with the development of a theoretical proposition on supervisor development, as well as a practical training application in the form of a guidebook for new supervisors.

Keywords: clinical supervision, supervisor, psychotherapy, development, spirituality, reflective practice, reflexivity.

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To forever learning,

A handwritten signature in black ink, appearing to read 'Jillian', followed by a long horizontal line extending to the right.

Jillian Mannella, Ph.D.

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CHAPTER 1: INTRODUCTION

“What we see changes what we know. What we know changes what we see.”

— Jean Piaget

Clinical supervision is an integral component to the psychotherapy profession (Baranchok & Kunkel, 1990; Bernard & Goodyear, 2014; Gazzola, De Stefano, Thériault & Audet, 2013; Hill & Knox, 2013; Pelling, 2008; Skovholt & Rønnestad, 2003; Styczynski, 1980; Watkins, 2012). Within the field of psychotherapy, practitioners engage in extensive educational and supervised clinical training, ensuring the acquisition of professional knowledge and the development of clinical competencies (Bernard & Goodyear, 2014; Rønnestad & Skovholt, 2001). While psychotherapists must engage in supervised practice as part of their initial training, the impact of clinical supervision is often experienced throughout the entirety of professional practice (Gazzola et al., 2013; Rønnestad & Skovholt, 2013; Skovholt & Rønnestad, 2003).

Supervision is often noted to be the most valuable aspect for the development of psychotherapists-in-training (Bernard & Goodyear, 2014; Hess, et al., 2008; Hill & Knox, 2013; Kassan, Fellner, Jones, Palandra, & Wilson, 2015; Rønnestad & Skovholt, 2013; Skovholt & Rønnestad, 2003; Watkins, 2012). The importance and intricacies of the clinical supervisory role to the psychotherapy profession is well defined by Bernard and Goodyear (2014) as:

An intervention provided by a more senior member of a profession to a more junior colleague or colleagues who typically (but not always) are members of that same profession. This relationship is evaluative and hierarchical, extends over

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time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s); monitoring the quality of professional services offered to the clients that she, he, or they see; and serving as a gatekeeper for the particular profession the supervisee seeks to enter (p. 9).

The distinct nature of the supervisor role ensures the advancement of both psychotherapists-in-training and those practicing in the profession. Furthermore, the psychotherapy supervisor as a gatekeeper ensures the safety of the public by monitoring the quality of care being provided, while simultaneously informing best practice (Barker & Hunsley, 2013; Falender & Shafranske, 2004).

Although the importance of the psychotherapy supervisory role is well documented, there remains a considerable dearth of research directed toward understanding the development and training needs of psychotherapy supervisors, specifically those new to the role (Barker, 2014; Gazzola & Theriault, 2007; Kassan et al., 2015; Majcher & Daniluk, 2009; Watkins, 2012). Consequently, there are minimal training standards in place monitoring the competency of psychotherapy supervision, as well as the requirements for those to supervise (Barker, 2014; Gazzola et al., 2013; Gazzola, De Stefano, Thériault & Audet, 2014).

Most notably, in Ontario, a governing body monitoring the act of psychotherapy is only of recent development. This body—the College of Registered Psychotherapists of Ontario—originally did not require any formal training for supervisors to provide supervision to other psychotherapists (CRPO, 2016). Only until recently, three years after the proclamation of the college, those providing supervision were asked to have a

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minimum of five years of clinical experience, as well as demonstrated competence in the realm of providing clinical supervision (CRPO/OPAO Professional Practice Standards for Registered Psychotherapists, 2016). Generally, competence would be proven through thirty hours of education, directed learning, independent study, group learning, and/or supervised practice as a clinical supervisor (CRPO, 2016).

Similarly, other professional associations in Ontario also suggest five years of clinical experience prior to providing clinical supervision. The Canadian Counselling and Psychotherapy Association [CCPA] has only just begun to emphasize supervisor training through a supervisor certification within the past five years (CCPA, 2013). However, training courses are not yet mandatory across all professional associations and colleges for this competency considered central to psychotherapist development (Bernard & Goodyear, 2014; CCPA, 2013; CPO, 2005; Watkins, 2012).

A plethora of practitioners within the field of psychotherapy provide supervision to less experienced psychotherapists having had minimal clinical supervisor training or experience (Blocher, 1983; Bernard & Goodyear, 2009; Campbell, 2006; Gazzola et al., 2013; Nielsen, Jacobsen, & Mathiesen, 2013; Peake, Nussbaum, & Tindell, 2002). It is a generally accepted practice within the field of psychotherapy to begin providing clinical supervision having only previous counselling experience and based on personal experiences and prior learnings in supervision (Campbell, 2006; Gazzola et al., 2013; Gazzola et al., 2014; Pelling, 2008; Majcher, 2003). As a result, there is a considerable need for research highlighting the training and developmental needs of clinical supervisors in the psychotherapy profession in order to best support those assuming this

distinct competency (Bernard & Goodyear, 2009; Nielsen et al., 2013; Orlinsky, Rønnestad & Ambühl, 2005; Rønnestad & Skovholt, 2001; Watkins, 2012).

While clinical psychotherapy supervisors have a significant impact on both the development of psychotherapists and the protection of the public, research conducted on the competency is surprisingly scant: “we empirically know the least about the party who may exert the most substantial impact on supervisees’ therapeutic development and actualization” (Watkins, 2012, p. 70). The literature calls for more extensive research on supervision as a competency, as well as the professional development of supervisors (Gazzola et al., 2013; Nielsen et al., 2013; Watkins, 2012). In fact, Watkins (2012) considers the understanding of how supervisors develop to be most influential and least researched in the literature to date.

Rationale

There is a significant need for research directed toward highlighting the experience of supervisor development. The “interior experience” of the developing supervisor is neglected in the current literature, thus suggesting a need for research contributing to a more complete understanding of supervisor development (Watkins, 2012, p. 46). Currently, existing supervisor development literature outlines trajectories of development in the profession (Alonzo, 1983; Hess, 1987; Stoltenberg & McNeill, 2010; Watkins, 1993; Watkins, 2012), but lacks an understanding of what specifically impacts supervisor development throughout various stages of the profession (Barker, 2014; Desmond, Rapisarda & Nelson, 2011; Nielsen et al., 2013). Initial experiences of supervisor development have been considered influential in the journey of becoming an effective supervisor, as evident by the experiences of role shock and anxiety (Cohen &

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Lim, 2008; Nielsen et al., 2013). Yet, there is also a lack of consensus regarding whether or not developmental phases best describe the process of supervisor growth in the field (Ellis & Ladany, 1997).

Research indicates that the quality and depth of training relates to positive supervisory experiences (Gazzola et al., 2014; Lyon et al., 2008; Milne & James, 2002; Milne, Sheikh, Pattison, & Wilkinson, 2011; Stevens, Goodyear, & Robertson, 1998; Wheeler & King, 2000). However, experiences perceived as being impactful on the professional development of the psychotherapy supervisor remain unknown in research to date and thus, call for further investigation.

The interest in this topic and the design of this study derives from the researcher's personal experiences as both supervisee and supervisor. Having experienced the impactful nature of the supervisory role first hand, questions concerning supervisor development arose naturally and fueled the primary question for this study of what experiences are most impactful for the novice psychotherapy supervisor.

As such, this study attends to the experience of becoming a psychotherapy supervisor and to the processes that best support supervisor development and growth in the early stages of supervisor development. Specifically, this study explores the initial experiences of providing psychotherapy supervision that are identified by the novice clinical supervisor as being most impactful to their professional development as supervisors. Experiences that participants perceive as being most helpful or most challenging during initial practice were explored, as well as the personal strengths and resources that facilitated supervisor development and growth. Spirituality, in addition to

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participant reflexivity, was explored with each participant in relation to internal resources that might have facilitated personal and professional growth.

In an effort to answer the question of what experiences are helpful or challenging to novice supervisor development, six supervisors participated in this phenomenological study. For the purpose of this study, the novice stage of supervisor development was defined as being approximately three years in length and characterized by a sense of developing competence in the role. Three supervisors at the beginning of the novice stage were asked to complete journal entries chronicling their initial four months practicing as a supervisor, followed by a semi-structured interview taking place two months after the completion of the journal entries. Three more supervisors that were nearing the end of the novice stage—and on the cusp of a more advanced professional categorization—were asked to participate in a semi-structured, retrospective interview exploring their initial experiences of providing supervision.

The data collected from both journal entries and interviews are presented in this thesis in an effort to illuminate the integral experiences of the early years of supervisor development, as well as highlight aspects which supervisors may consider impactful in the early stages of assuming the role. Specifically, the results of this study highlight the involvement of spirituality and reflective practices in guiding the developmental journey of the novice supervisor and shape the findings of this study.

The following section presents a brief description of the main concepts that have become integral to the development and implementation of this study. These concepts will be reviewed in greater detail in the following chapter.

Core Concepts

While the following concepts are discussed in greater detail in the Literature Review, an introductory description is provided in this section to provide context to the use of the terms in this study.

Supervision

Supervision is approached in this study as a distinct, clinical competency within the psychotherapy profession. Strongly influenced by Bernard and Goodyear's (2014) definition of clinical supervision, this study approaches the competency as being separate from counselling –yet interrelated –and as having an evaluative role intended to improve functioning of the supervisee, while ensuring adequate client care. This study recognizes the distinctiveness of supervision from counselling, as supervisors are tasked with applying and integrating many competencies unique to the role (Gazzola et al., 2013). Supervision is differentiated from other forms of professional consultation in that the supervisory relationship is contractual in nature, extends over a period of time, involves regular meetings with the supervisee, includes an evaluative function, and the supervisor has an ethical responsibility over the course and trajectory of client care as a “gatekeeper” to the profession (Chang, 2013; Bernard & Goodyear, 2014, p. 9).

Finally, in many professional settings, the supervisor is tasked with multiple roles in providing clinical supervision and working with supervisees' professional development (Kreider, 2014). Supervisors embody both administrative and clinical responsibilities in ensuring the safe and ethical practice of their supervisees. The supervisor monitors the quality of client care and supervisee professional development, in addition to various

regulatory body and agency administrative requirements (Chang, 2013). These responsibilities –while at times seemingly conflicting—tend to be interrelated to the supervisory role and necessary in understanding the complexity of providing clinical supervision (Chang, 2013; Kreider, 2014). Hence, this study approaches the definition of clinical supervision by also taking into account the very real and practical challenges of working within the regulations of governing bodies, educational institutions, and in agency settings.

Novice Supervisor

Currently, research investigating supervisor development remains limited in the literature (Watkins, 2012). To date, there are few models dedicated to understanding the professional growth and development of the psychotherapy supervisor –some of which are based on trajectories of therapist development (Bernard & Goodyear, 2014; Stoltenberg & McNeill, 2009). With limited existing research, a consensus in defining the novice supervisor does not yet exist.

In this study, a novice clinical psychotherapy supervisor is considered to be a practicing professional who is within their first three years of practice as a supervisor, perceives themselves as new to this distinct role, and is still in the midst of identity formation as a supervisor. This definition of a novice psychotherapy supervisor derives from both supervisor and therapist development models, as well as the current state of the literature (Bernard & Goodyear, 2014; Hess, 1986; Stoltenberg & McNeill, 2009; Rodenhauser, 1994). Most notably, some supervisor development models are based on therapist development models and highlight development in stage progression formats

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(Bernard & Goodyear, 2014; Stoltenberg & McNeill, 2009; Majcher, 2003). However, there is not yet a consensus in the literature that supervisor development is linear, nor is there empirical research to support a timeframe for development between stages (Ellis & Ladany, 1997; Goodyear et al., 2014; Heid, 1997; Majcher, 2003; Watkins, 1995).

The definition of a novice supervisor for this study derives from similar qualities and developmental tasks outlined across the five main supervisor development models, as well as the time frames associated to the developmental stages of therapist development (Alonso, 1983; Hess, 1986; Rønnestad & Skovholt, 2013; Stoltenberg & Delworth, 1987). Most notably, in Alonso's (1983) model of supervisor development supervisors are described as moving from novice to late career phases of development. Alonso (1983) describes the novice phase as being heavily influenced by the struggle of developing a supervisory identity. In Hess's (1986) exploration of stages of supervisor development, supervisors in the beginning stages of development are tasked with coming to terms with a change in their professional role. Progression in these models is often accompanied with a decrease of anxiety and increased self-consciousness (Hess, 1986; Majcher, 2003). Stoltenberg and Delworth (1987) also highlight the beginning stage of supervisor development as one that is riddled with anxieties and confusion regarding their newfound role as a supervisor, similar to the experience of the novice therapist. Rønnestad and Skovholt (2013) outline therapist development through the Lifespan Developmental Model and consider the novice therapist to be a practicing professional two to five years after graduation.

While trajectories of supervisor development remain unclear in the literature, many models perceive the early stages of supervisor development to be characterized by a

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sense of role confusion, newness to the role, anxiety, and a search for identity in the new role (Hess, 1986; Lerner, 2008; Nielsen et al., 2013). This study uses the dimensions of development identified in supervisor development models, as well as the time frame applied to therapist development models, for the purpose of defining the novice psychotherapy supervisor. Consequently, the novice phase in this study was defined as being approximately three years in length and characterized by a sense of uncertainty and anxiety in the role. It is expected this definition will capture the beginning experiences of the developing supervisor prior to competency development, while maintaining consistency with commonly used characteristics and timeframes applied to various supervisor and therapist development models (Rønnestad & Skovholt, 2013).

Growth and Professional Development

Due to the fact that models of supervisor development are not yet empirically validated, understanding and highlighting development remains challenging (Gosselin, Barker, Kogan, Pomerleau, & Pitre d'Iorio, 2015). For the purpose of this study, development is approached with a lens deriving from developmental learning theories (Kegan, 1994; McAuliffe, 2006), as well as embodying the ultimate goal of achieving professional competence.

Developmental learning is commonly considered fundamental in explaining and understanding professional competence (Kegan, 1994; McAuliffe, 2006). Professionals who engage in development learning processes often experience changes in their current knowledgebase that are “irreversible, hierarchical, sequential, and more adequate” (McAuliffe, 2006, p. 479). Developmental learning is considered a form of change in a

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mental framework and refers to one's ability to make meaning across a variety of domains in life, including in tasks considered vital to a given profession (Granott, 1998; McAuliffe, 2006; Willis & Dublin, 1990). Most notably, this form of learning refers to not merely knowledge acquisition, but pervasive and profound changes in one's worldview and interaction with others (McAuliffe, 2006). As such, developmental learning tasks the practitioner to advance their knowledge base, shift their means of approaching their current worldview, and finally, develop knowledge that begets further knowledge acquisition (McAuliffe, 2006). Developmental learning theories provide a framework for understanding the tasks of professional development in cognitive, logical, ethical, and interpersonal domains (McAuliffe, 2006).

Finally, professional development in psychotherapy literature is commonly defined by a perceived growth in competence, as well as a sense of invigoration by the work (Rønnestad & Skovholt, 2013). This involvement in the professional competence allows for one to be energized by the work in an effort to avoid stagnation, exhaustion, and/or burnout (Rønnestad & Skovholt, 2013).

Proposing an updated definition of supervisor development, Gosselin et al., (2015) adapted criteria from supervisor development research (Milne, 2007; Watkins, 2012). The proposed definition intended to meet various existing limitations of the understanding of supervisor development, as well as adequately define the process of growth involved:

The developmental process of professional and personal growth involved in being and becoming a competent psychotherapy supervisor with levels of proficiency

beyond competence (precision); the factors (e.g., attention to diversity in all its forms; attention to legal and ethical issues; professional and personal factors such as values, beliefs, interpersonal biases, and conflicts that are considered to be sources of countertransference; and the necessity that both self- and peer assessment occur regularly across all levels of supervisor development) that impact its development toward and beyond competence (specification); and the tailoring of supervisory interventions to match supervision of supervision needs in the process of developing specific competencies across four areas (e.g., knowledge, skills, values, and social context overarching issues), which must be articulated through the training (e.g., didactic and/or experiential) for specific supervision competencies and the assessment of supervision competencies (operationalization) by senior/qualified psychotherapy supervisors (or similarly experienced staff). (Gosselin et al., 2015, p. 380).

This definition of supervisor development highlights both the personal and professional tasks of a developing supervisor on the journey to an increased sense of competence in self. In particular, the developing supervisor is tasked with developing competence across four specific areas –the “knowledge, skills, values, and social context issues”—through both training and experience, while integrating their personal and professional beliefs and values (Gosselin et al., 2015, p. 380).

Based on the current state of the literature, this study approaches development and growth as achieving proficiency in the supervisory role, being able to understand the unique nuances of supervision, and making meaning of the identity of the supervisor.

Reflection and Reflexivity

While there exists a plethora of definitions for reflective practice and reflexivity in the literature, reflection in this study is approached in conjunction with tenets of developmental learning and professional competence: “reflective practice inherently carries within it the seeds of improved competence” (McAuliffe, 2006, p. 483). Dewey (1933), as one of the original authors to explore reflection, considered the act as a means of improving professional practice (Bernard & Goodyear, 2014). Reflection calls upon the professional to critically examine events occurring “outside of oneself” in an effort to explore experiences from multiple angles and viewpoints (Bolton, 2005, p. 13). The act of reflection in itself has the potential to encourage development and professional competence through identification of personal limitations and the means necessary to foster continuous improvement (Bernard & Goodyear, 2014; Cheetham & Chivers, 1998; McAuliffe, 2006).

Furthermore, the notion of reflexivity –distinct from reflection—was deemed fundamental to include and explore throughout this study due to its important relationship with professional development, growth, and self-awareness essential to the psychotherapy profession. Reflexivity requires the practitioner to shift reflection inwards in an effort to question held attitudes, values, opinions and beliefs (Bolton, 2005). The act of reflexivity encourages practitioners to examine and understand how their actions may impact the other, as well as how the other may experience the practitioner (Bolton, 2005). While both reflection and reflexivity encourage examination of experiences, reflexivity includes itself within “its own imperative” (Scaife, 2010, p. 8).

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For the purpose of this study, both concepts of reflection and reflexivity are explored throughout the experience of becoming a novice psychotherapy supervisor. These terms are referred to distinctly, as study participants engage in processes of reflection that include both their actions, as well as those of their supervisees. The intricate role of the supervisor necessitates both reflection and reflexive stances to fully explore and understand experience, one's connection to the other, and to achieve a separateness from values or beliefs that may impact the former (Bolton, 2005).

Spirituality

Spirituality is approached throughout this study as both a professional competency to master, and a personal developmental achievement through the ability to assume a reflexive stance. As reflective practice is considered necessary for professional development, and viewed by the researcher as a fundamental component of spirituality, approaching the research with consideration of spirituality was deemed necessary and vital in understanding personal and professional development.

Common defining characteristics of spirituality found in the literature include, but are not limited to: humanism, connection, compassion, transcendence, meaning in life, creativity, a sense of wholeness, and is thought by some to be distinct from religiosity (Bishop, Avila-Juarbe & Thumme, 2003; Gall, Malette & Guirguis-Younger, 2011; Polanski, 2003). The ability to engage in one's spirituality is considered to be both an active and passive process (Burke & Miranti, 1996).

Spirituality is defined in this study by both individual participant's understanding of their beliefs, as well as in conjunction with active reflective processes that stimulate

meaning making in the individual's identity and role as a supervisor. Perhaps most fundamental to the notion of spirituality in this study is Polanski's (2003) examination of the impact of personal values on professional practice, as well as the consideration of these values as being a "core component" of education (p. 131). Spirituality is defined as an active and passive consideration of personal beliefs through a reflexive stance and reflective processes. It is fundamental in understanding supervisor growth as a means to explore factors influencing personal and professional growth, as well as a developmental learning capacity.

Overview of Thesis

This thesis explores the professional growth and development of the novice psychotherapy supervisor. In an effort to understand the various factors influencing growth and development, a brief review of the literature and significant concepts is presented in the following chapter. Also, the methodology highlighting the structure of this study, participant sampling procedures, and steps taken to reduce limitations is presented. The results stemming from the six research participants are presented and explored in relation to significant findings, as well as a theoretical proposition and practical application that emerged from the data. It is hoped that the significance of this study and the resulting data will become clear throughout the discussion. Contributions and implications to research will be explored in great depth in an effort to provide an understanding of future directions for research investigating the needs of the novice psychotherapy supervisor.

CHAPTER 2: LITERATURE REVIEW

“A mind that is stretched by a new experience can never go back to its old dimensions”

— Oliver Wendell Holmes Jr.

This chapter introduces and explores various concepts deemed essential in the development of this research study. Currently, research dedicated to understanding the initial experiences of novice supervisors remains limited in the literature (Nielsen et al., 2013). While there has been considerable significance placed on psychotherapist development in research, there is comparably less attention directed toward supervisor development despite the noted importance of the supervisor to the field (Bernard & Goodyear, 2014; Nielsen et al., 2013; Watkins, 2012; Wheeler & Richards, 2007). Improving the current understanding of supervisor development is theorized to lead to improved quality of care in the counselling and psychotherapy field, thus adding to the importance of research on this topic (Nielsen et al., 2013; Wheeler & Richards, 2007).

To best address this gap in the literature, it becomes fundamental to gain an understanding of the various concepts involved in supervision and supervisor development. After having reviewed existing literature to cultivate an understanding of the topic of supervision, significant areas of understanding are reviewed below, including: the importance of clinical supervision, psychotherapist and supervisor development models, and reflective practice and spirituality in clinical supervision. These areas were chosen for review due to their influence and impact on the development of the clinical supervisor. Specifically, reflective practices have been considered to be the basis for professional development, and thus, provide a framework to theorize how supervisors

may make sense of their new roles. An initial review of literature indicated the importance of engaging in reflection for professional development, especially for those in the healthcare fields (McAuliffe, 2006). As a result, reflection is explored in relation to supervisor development. Furthermore, spirituality is presented and explored in relation to supervisor reflexivity, as well as personal and professional growth. A thorough examination of the literature follows.

The Importance of Clinical Supervision

It is well documented that the role of the supervisor is fundamentally impactful in psychotherapist training and development (Bernard & Goodyear, 2014; Hill & Knox, 2013; Lerner, 2008; Pelling, 2008; Watkins, 2012; Weatherford, O'Shaughnessy, Mori, & Kaduvetoor, 2008). A plethora of research has been dedicated toward understanding the developmental processes of psychotherapists, as well as what aspects of training are most impactful throughout stages of therapist development (Skovholt & McCarthy, 1988; Skovholt & Rønnestad, 1992; Rønnestad & Skovholt, 2001; Rønnestad & Skovholt, 2013; Westefeld, 2009). Given the close proximity of the supervisor to the practitioner-in-training, supervision has been identified as being greatly significant and impactful during training (Bernard & Goodyear, 2014; Hill & Knox, 2013; Rønnestad & Skovholt, 2013).

However, research has identified clinical supervision as having the potential for both positive and deleterious effects on psychotherapist development. Specifically, psychotherapists in training have considered supervision to be positively impactful on the development of their skills, knowledge of theory, autonomy, and efficacy (Hill & Knox, 2013; Rønnestad & Skovholt, 2013). These practitioners-in-training noted effective

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supervisory skills to include: strong alliance, open discussion, providing challenge, and offering feedback (Hill & Knox, 2013).

Various deleterious effects of clinical supervision on the practitioner-in-training have been identified in the forms of weakened efficacy and feelings of powerlessness (Hill & Knox, 2013). Research identified that supervisors who emphasized evaluation, had poor alliances, poor adherence to ethical guidelines, and devalued the supervisory process, have negative effects on supervisees' professional development and growth (Hill & Knox, 2013; Rønnestad & Skovholt, 2013).

Furthermore, the impact of clinical supervision extends beyond the development of the psychotherapist, to the satisfaction of clientele. The positive and negative effects of clinical supervision on psychotherapist development and client satisfaction are highlighted in research (Hill & Knox, 2013; Rønnestad & Skovholt, 2013; Watkins, 2012). Hill and Knox (2013) found that clients who receive psychotherapy from supervised psychotherapists report greater satisfaction than those who are seen by unsupervised psychotherapists. Current research identifies a need for further investigation of best practices toward the training of clinical supervisors in order to better meet the needs of both clientele and psychotherapists in the profession (Barker, 2014; Hill & Knox, 2013; Rønnestad & Skovholt, 2013; Watkins, 2012).

A Review of Current Supervisor Development Literature

Given the importance of the clinical supervisory role to the psychotherapy profession, it is surprising that there is limited research dedicated toward understanding supervisor development, as well as a lack of regulations monitoring this professional

competency in practice (Barker, 2014). According to Watkins' (2012) review of more than thirty years of research, the helping professions reached a fundamental consensus that "training in supervision matters" (p. 75). Yet research suggests "fewer than 20% of supervisors receive formal supervision training" (Cohen, & Lim, 2008, p. 82; Peake et al., 2002). Thus, Hoffman's (1994) reference to the lack of training for clinical supervisors as the profession's "dirty little secret" (p. 40) tends to still be present to date.

In Ontario, training for clinical psychotherapy supervisors is of recent development and yet to be a requirement across all professional associations and regulatory bodies (CCPA, 2013; CPO, 2005; CRPO, 2016). The Canadian Counselling and Psychotherapy Association [CCPA] has a newly formed designation for certified clinical supervisors, requesting some specific training requirements for a supervisor to hold this designation (CCPA, 2013). Practitioners applying for a clinical supervisor designation (CCC-S) can do so with work experience, in addition to clinical training courses. Similar newly implemented standards exist for regulatory bodies in Ontario, including the College of Registered Psychotherapists [CRPO] (CRPO, 2016). The CRPO asks practicing supervisors to prove competence through prior work experience, as well as a minimum of thirty hours of training or education.

However, the College of Psychologists of Ontario [CPO] has traditionally held the supervising practitioner responsible to decide and monitor their competence in providing clinical supervision (CPO, 2005). Recently, collections of supervisor competencies have begun to emerge across regulatory bodies and current literature (OPA, 2015; Falender & Shafranske, 2010). These competency profiles act as a means of aiding supervisors in understanding and proving their competence in the role, as seen in the competency profile

developed by the Ontario Psychological Association (2015) for use by clinical psychologists providing supervision (OPA, 2015).

Regardless, the limited training requirements and regulations monitoring the competency of providing clinical supervision has typically resulted in practitioners providing clinical supervision based on their personal experiences as supervisees (Bernard & Goodyear, 2014; Watkins, 2012).

There are few research studies directed toward understanding clinical supervisor development, transition into the professional role, and impact of training on a developing supervisor (Barker, 2014; Desmond, et al., 2011; Cohen & Lim, 2008; Majcher, 2009; Majcher & Daniluk, 2009). While some research has recently begun to highlight the psychotherapy supervisor, Watkins (2012) suggests the overall state of the literature to remain “absent and sorely needed” (p. 78). It is hypothesized that the difficult nature of the population, and a general disinterest in the field, has discouraged further research from being conducted regardless of the pressing need (Bernard & Goodyear, 2014; Hill & Knox, 2013).

Watkins (2012) suggests there is a need for research that is cumulative in nature, as opposed to “one and done” efforts of dissertations and theses (p. 72). Hill and Knox (2013) further this notion by suggesting researchers to concentrate on developing a plethora of qualitative studies to expand a general base of knowledge on the topic.

Psychotherapy Development Models

It remains interesting to note that psychotherapist development literature saturates academia (Barker, 2014; Rønnestad & Skovholt, 2001; Rønnestad & Skovholt, 2013;

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Skovholt & McCarthy, 1988; Skovholt & Rønnestad, 1992; Westefeld, 2009). A plethora of research has been conducted on the developing psychotherapy practitioner, highlighting positively and negatively impactful experiences of training and clinical work within the field of psychotherapy. The extensive psychotherapist development literature provides a basis of knowledge to situate hypotheses of how clinical supervisors might experience training and development (Majcher, 2001; Watkins, 1990). Barker (2014) suggests that psychotherapist development models mirror many of the characteristics of supervisor development models, while other researchers caution adhering to this assumption that therapist development is linear and applicable to supervisor development (Ellis & Ladany, 1997; Gazzola et al., 2014). However, currently both supervisor and supervisee developmental models tend to progress sequentially, with a predetermined endpoint, regardless of empirical validation (Barker, 2014; Gazzola et al., 2014).

In particular, Rønnestad and Skovholt's (2013) Lifespan Developmental Model highlights therapist development in a five-stage sequence, encompassing a variety of themes central to clinical competency development. Growth in this model is characterized by a decrease in anxiety, as well as increases in autonomy, competency, and identity development. The model is based on the developmental tasks needed to be achieved in order to progress to further stages of development. Within each stage, Rønnestad and Skovholt highlight the particular needs of the therapist, as well as developmental tasks to be mastered in order to progress to subsequent stages.

The first stage of Rønnestad and Skovholt's (2013) Lifespan Developmental Model highlights the needs of the novice student (See Table 1). Within this phase, the student is tasked with mastering a plethora of new material, meeting the educational

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standards of the institution, managing anxiety associated with seeing their first client, as well as maintaining an open and receptive attitude to theoretical models. This stage represents a form of learning based on acquisition, rather than reflection (Rønnestad & Skovholt, 2013).

Table 1

Key Aspects of Therapist Development (adapted from Rønnestad and Skovholt, 2013)

Rønnestad and Skovholt's Lifespan Developmental Model (2013)			
Phases	Experience Level	Developmental Tasks	Supervision
The Novice Student Phase	In the beginning of graduate training to the second year of training	Make sense of theory, demonstrate competence, manage own emotions, remain open to theories	Supervision ranked by novice students as most important to professional development
The Advanced Student Phase	In the last part of graduate training and/or when students are engaged in their graduate practicum	To learn more complex information, to show mastery of learnings, maintaining openness, managing perfectionistic tendencies and confusion that comes with the field	Rated to be significantly important during this phase. Challenging moments in supervision as considered detrimental. There is a struggle in finding autonomy. Preference for honest feedback
The Novice Professional Phase	First 2-5 years after graduation	Develop professional identity, become independent within the profession, master disillusionment, define role	More independence from supervisor, more professional/peer consultation
The Experienced Professional Phase	Practiced a number of years in multiple settings, and with multiple client populations	Avoidance of burnout, continued growth, find congruence in work and personal life	Consultative role
The Senior Professional Phase	Practiced at least 25 years	Avoidance of burnout, continued growth, congruence in work and personal life	Becomes more of an internalized mentor

The novice student practitioner is perhaps most eager to develop a professional identity. While they behave in a manner that mirrors the “stereotypical images” of

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psychotherapists, they simultaneously begin to recognize the complexity of the field (Rønnestad & Skovholt, 2013, p. 64). Novice student psychotherapists continue to derive professional satisfaction from external sources, and base their development on client improvement –a measure of effectiveness that does not accurately depict cognitive complexity (McAuliffe, 2006; Rønnestad & Skovholt, 2013). Therapists in this stage report supervision as being the single most influential source of training. Should the student master the developmental tasks at this stage, they advance to the Advanced Student Phase.

Within the Advanced Student Phase, supervision has the potential to become far more detrimental to the student. Although it is still considered a primary and preferred source of training, negative experiences in supervision lead to regression in confidence and self-efficacy (Rønnestad & Skovholt, 2013). The advanced student balances their understanding of a client from being highly structured to one that is congruent with their burgeoning therapeutic style. Perhaps most important to the development of the advanced student is their understanding that not all clients accomplish change. This shift in responsibility greatly impacts the students' understanding of their professional role and responsibilities as a psychotherapist (Rønnestad & Skovholt, 2013). With graduation approaching, the advanced student recognizes the need to master material, all while recognizing the inherent complexity of the psychotherapy profession.

The third stage of Rønnestad and Skovholt's (2013) Lifespan Developmental Model highlights the significant developmental tasks facing the newly graduated student. In the Novice Professional Phase, the new psychotherapist is tasked with forming a professional identity, becoming autonomous in the profession, and mastering

disillusionment with the field (Rønnestad & Skovholt, 2013). This stage is particularly challenging, as the psychotherapist experiences higher client dropout rates than expected, slower progression in therapy, and more difficulties in identity formation (Rønnestad & Skovholt, 2013). The therapist is conditionally autonomous, but is tasked with separating from the supervisor to gain more autonomy (Rønnestad & Skovholt, 2013). Rønnestad and Skovholt highlight the need for the therapist to continue receiving supervision in order to navigate the greatest challenge of the professional development to this point – developing autonomy.

As the psychotherapist develops into the Experienced and Senior Professional Phases, perhaps most fundamental to the longevity of their professional career is the development and integration of the professional identity (Rønnestad & Skovholt, 2013). Throughout the latter phases of their career and this developmental model, the psychotherapist is tasked with continual professional development while avoiding burnout, integration of personal self into the professional self, and finding congruence and meaning in work (Rønnestad & Skovholt, 2013). Finding overlap in the personal and professional selves is deemed fundamental to identity development and meaning construction (Rønnestad & Skovholt, 2013; Super, 1953). This involves constant assessment of values, interests, theory, competencies and limitations, while finding a suitable work environment (Rønnestad & Skovholt, 2013).

The greatest developmental feat for practitioners in these stages is to feel competent with the realization that they are limited in their abilities (Rønnestad & Skovholt, 2013). A realistic understanding of their professional limitations develops a reflective practitioner, who is cognizant of their capabilities and thus, produces a feeling

of congruence in practice (Rønnestad & Skovholt, 2013). Accordingly, the Experienced and Senior Professionals begin to rely on the therapeutic relationship to influence change, rather than theory itself. A greater belief in the power of the client is developed and thus, a less directive role in therapy is adopted (Rønnestad & Skovholt, 2013).

Given the understanding that many psychotherapists will naturally assume the role of clinical supervisor, the notion of psychotherapist professional development has been researched throughout the literature (Bernard & Goodyear, 2014; Desmond, et al., 2011; Goodyear, Lichtenberg, Bang & Gragg, 2014; Rønnestad & Skovholt, 2013). However, supervisor development remains a fairly new interest in research, yet considered incredibly important and relevant to explore.

Supervisor Development Models

Currently, the majority of research investigating supervisor development remains a product of the 1980s and 1990s (Watkins, 2012). Supervisor development, considered the “unfolding process of growth in being and becoming a supervisor” (Watkins, 2012, p. 45), has been outlined in the primary models of development (Alonso, 1983; Hess, 1986, 1987; Rodenhauser, 1994; Stoltenberg & McNeill, 2010; Watkins, 1993; Watkins, 2012). These primary models of supervisor development include: Alonso’s Model (1983), Hess’s model (1986), Rodenhauser’s model (1994), Stoltenberg and McNeill’s Integrated Developmental Model (2009), and Watkins’ (1990) model of supervisor development (Bernard & Goodyear, 2014; Watkins, 2012).

These supervisor development models somewhat mirror each other in the sense that they are stage progression models that are characterized by a mastery of tasks

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(Barker & Hunsley, 2013; Watkins, 2012). Supervisors who progress through the stages of these models often experience an increase in skill mastery and identity development, as well as a decrease in self-doubt and anxieties (Cohen & Lim, 2008; Watkins, 2012). Generally, development in accordance to these models is characterized by a movement from confusion, or anxiety, to clarity and identity development (Watkins, 2012). This developmental process has been noted to be aided by supervisees who express an interest to improve, are receptive, and have an ability to engage in reflection (Watkins, 2012; McAuliffe, 2006). The supervisor development models tend to provide a general understanding of the characteristics necessary for supervisor development.

Supervisor development models, while seeking to highlight changes in the supervisor development process, remain incomplete in many ways (Watkins, 2012). According to Watkins (2012), these models lack an understanding or explanation of how change is initiated in the developing clinical supervisor. These models tend to lack a theory of transition explaining the progression of the novice supervisor to the expert supervisor (Barker, 2014; Watkins, 2012). Watkins (2012) suggests that supervisor development models lack empirical testing and are in need of developing a more thorough understanding of what affects change between stages of the models. A brief overview of the models of supervisor development follows.

Firstly, Alonso (1983) presents one of the earliest models of supervisor development. This model explores the professional development of the supervisor in three distinct stages: novice, midcareer, and late career (Alonso, 1983; Bernard & Goodyear, 2014; Watkins, 2012). Throughout these stages, the supervisor is tasked with developing their sense of identity in the role of supervisor, shifting from a focus on their

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own developmental needs to that of their supervisees', and finally, maintaining their identity in the role of supervisor despite the challenges encountered later in the career (Alonso, 1983; Bernard & Goodyear, 2014). Alonso describes the advanced supervisor as one that values their accrued wisdom and the act of passing it down to others (Alonso, 1983; Bernard & Goodyear, 2014).

Similar to Alonso's (1983) model of supervisor development, Hess's (1986) model outlines the trajectory of supervisor development in a three-stage sequence. Hess views supervisor development to progress through a beginning stage, a stage of exploration, and finally, a stage characterized by confirmation of supervisor identity (Hess, 1986). Specifically, Hess posits that as supervisors gain experience, so are they able to develop an increased sense of competence and confidence in their role. Ultimately, supervisors in the final stage of this model have an inherent sense of pride in their work and consider themselves to be "good supervisors" (Bernard & Goodyear, 2014, p. 292).

While therapist development is well researched and represented in the literature, supervisor development is relatively new. As such, Stoltenberg and McNeil's (2009) model of supervisor development builds upon the current understanding of how psychotherapists develop. Specifically, Stoltenberg and McNeil posit that supervisor development mirrors much of what we know about how psychotherapists develop. They suggest that supervisors progress through many of the same stages of psychotherapist development. This model is characterized by four sequential stages of growth, beginning with an experience of anxiety and shifting to ultimately a sense of mastery in the competence (Bernard & Goodyear, 2014; Stoltenberg & McNeil 2009).

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Watkins' (1990) model of supervisor development – known as the Supervisory Complexity Model (SCM)— is rather unique, as it tends to focus on the development and assumption of the supervisory identity. Watkins' model was created with the intention of following newly graduated practitioners who have begun providing supervision to other less experienced practitioners. Watkins specifies the importance of recognizing individual differences that account for inequalities in progression through the four specified developmental stages. These stages are characterized by an initial experience of self-doubt –or “shock”—in the supervisor role, to ultimately an experience of mastery as the supervisor (Bernard & Goodyear, 2014, p. 291). However, very little information is provided regarding what assists in the developmental progress of trainee supervisors – regardless of individual differences. Watkins' model of supervisor development is based primarily on his personal experience of becoming a clinical supervisor, as well as other existing psychotherapist development models (Majcher, 2001).

Finally, Rodenhauser's (1994) model of supervisor development similarly follows a four-stage progression of professional development. In this model, supervisors move from a variety of stages, including: emulation, conceptualization, incorporation, and consolidation (Rodenhauser, 1994). This model is characterized by the new supervisor originally channeling their supervisor mentor, to eventually incorporating their learnings and meeting their supervisees' needs by addressing parallel processes (Bernard & Goodyear, 2014).

These primary models of supervisor development explore and discuss the various stages that a supervisor might progress through on their professional development journey. These models, while unique, possess similarities in their linear progression

nature. The models suggest that supervisors progress through (three to four) stages of development with the ultimate goal of an increased sense of competence and identity in the role. Recently however, processes underlying these trajectories of development have been explored in an effort to outline the non-linear nature of professional growth. While the majority of the literature has approached development of both psychotherapists and clinical supervisors from stage progression models, Goodyear et al., (2014) have argued that considering development via means of dimensions provides a novel and beneficial lens to understanding the process of change for the developing clinical supervisor. Specific elements contributing to supervisor development are further explored below.

Supervisor Development and Dimensions of Growth

Further developing research conducted by Heid (1997), Goodyear, Lichtenberg, Bang and Gragg (2014) outline ten themes of change experienced by psychotherapists in the process of becoming clinical supervisors (See Table 2 and Table 3). Identified themes range from learning to think like a supervisor to developing confidence in the supervisory role (Goodyear et al., 2014; Heid, 1997). The proposal of these themes –or dimensions—to explore supervisor development provides an alternate way of viewing supervisor development that is not bound by sequential stages, but rather various areas of development (Goodyear et al., 2014).

Table 2

Heid's (1997) Integrated Model of Supervisor Lifespan Development

Heid's (1997) Integrated Model of Supervisor Lifespan Development (adapted from: Bernard, J. M., & Goodyear, R. K. (2014). <i>Fundamentals of clinical supervision</i> . Boston: Allyn and Bacon.)	
Themes of Supervisor Development	
1	Sense of identity as a supervisor

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2	Felt confidence as a supervisor
3	Degrees of felt autonomy/dependence on others
4	Use of power and authority with supervisees
5	Degrees of structure, flexibility, and variety of interventions
6	Focus on the needs of supervisee
7	Degree of investment in supervisee and client success
8	Emphasis on use of supervisory relationship
9	Degree of awareness of impact of self on the supervisory relationship and process
10	Degree of realistic appraisal of competencies and limitations

The use of dimensions outlining supervisor development is significant in understanding supervisor development from a novel perspective. Rather than viewing development as characterized by task mastery and stage progression, the use of dimensions identifies general changes that take place over time, yet considerably differs amongst individuals and experiences (Goodyear et al., 2014). This particular approach to development argues that development is not necessarily uniform or linear in nature and gives space for varying trajectories of development (Goodyear et al., 2014).

Table 3

Dimensions of Change Experienced by Psychotherapists Becoming Supervisors

Dimensions of Change Experienced by Psychotherapists Becoming Supervisors (adapted from: Goodyear, R., Lichtenberg, J. W., Bang, K., & Gragg, J. B. (2014). Ten Changes Psychotherapists Typically Make as They Mature Into the Role of Supervisor. <i>Journal of Clinical Psychology</i> , 70, 11, 1042-1050).	
Developmental Dimensions	
1	Becoming able to perceive/act on complex response opportunities
2	Learning to think like a supervisor
3	Developing the ability to be oneself
4	Learning to view one's self as a supervisor
5	Developing the capacity to use reflection as a tool to monitor one's biases and one's impact on others
6	Developing confidence in one's judgments about what constitutes effective

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	counseling
7	Developing confidence in one's competence as a supervisor
8	Developing patience with the process of supervisee development
9	Developing the courage to do the right thing in the gatekeeper role
10	Learning to understand and manage power

The notion of development as progressing along dimensions, rather than stages, proposed by Goodyear et al., (2014) is relatively new to supervisor development literature. However, the notion of dimensions of development can be previously seen in therapist development literature proposed by Rønnestad and Skovholt (2013). Most notably, Rønnestad and Skovholt (2013) use a “different lens” to identify ten themes of professional development to summarize psychotherapists’ experience of growth (p. 145). These themes range from an integration of the personal and professional self, to the need for continuous reflection in order to develop (See Table 4). Perhaps most important to both the themes proposed by Rønnestad and Skovholt (2013), as well as the dimensions proposed by Goodyear et al., (2014) is the similar notion that not all practitioners will develop accordingly. As such, it is noted that development is not linear and requires reflection in order to experience progression (Goodyear et al., 2014; Rønnestad & Skovholt, 2013).

Table 4

Themes of Therapist/Counsellor Professional Development

Themes of Therapist Professional Development (adapted from: Rønnestad, H., & Skovholt, T. (2013). <i>The developing Practitioner: Growth and stagnation of therapist and counsellors</i> . East Sussex: Routledge.).	
Developmental Themes	
1	Optimal professional development involves integration of the personal and professional self
2	Modes of therapist functioning shift over time (internal to external to

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	internal)
3	Continuous reflection is a prerequisite for optimal learning
4	Professional development is a lifelong process
5	Professional development –while mainly continuous—may also be cyclical and intermittent
6	Development is encouraged by a commitment to learn
7	Initial anxiety is common, yet subsides with time
8	Interpersonal sources of influence encourages professional development
9	Not all therapists develop optimally
10	The therapist shifts from self as powerful to client as powerful

While there is no one consensus in the literature regarding stage development or dimensions of development, both concepts warrant attention due to the common understanding that overall development is uneven amongst individuals. Development – whether via stages or dimensions—necessitates growth in one’s reflective capacity (Kegan, 1994; McAuliffe, 2006; Rønnestad & Skovholt, 2013).

Reflective Practice

The notion of reflective practice is widely considered fundamental to overall improvement and development in both personal and professional capacities (Hunt, 2001; Kassan et al., 2015; McAuliffe, 2006; Scaife, 2010). To date, there remain a variety of definitions to describe the concept of reflective practice in the literature. Most notably, reflective practice was initially described by Dewey (1933) as an “active, persistent, and careful consideration of any belief or supposed form of knowledge” (p. 9). McAuliffe (2006) suggests that it is through reflective practice and an openness to experience that professionals are able to consider multiple points of view to attend to situations, rather than applying a single learned theory to all experiences. This understanding of reflective

practice emphasizes reflection in action –the present experience—to inform future decision-making processes.

Similarly, Scaife (2010) indicates that reflective practice occurs “when critical reflection shapes future action” (p. 2). This description of reflective practice embodies a future oriented connotation. Scaife further outlines the results of reflective practice to impact future actions by becoming increasingly more informed of the implications of personal actions (2010). Engaging in the reflective process should allow for an individual to become aware of how their own biases and judgments impact their future actions (Scaife, 2010). Scaife’s understanding of reflective practice mirrors many of the characteristics of McAuliffe’s (2006) use of reflective practice in developmental learning.

Finally, Hunt (2001) describes reflective practice as a process of “trying to identify articulate, take ownership of, and begin to understand that which constitutes the ‘mind-baggage’ ... the often-unconscious ideas, assumptions, preferences, habits, etc. that might otherwise control my thoughts and actions” (p. 7). Hunt approaches reflective practice with a significant emphasis on past events and the knowledge garnered from previous life experiences. Most importantly, Hunt emphasizes reflective practice as a means to allow past experiences to inform present actions, but to also be simultaneously “freed” from experiences of the past (p. 7).

Reflective practice is widely considered a fundamental process for continued development and progress. However, the literature presents varying definitions of reflective practice itself. Most notably, Dewey (1933), Hunt (2001), and Scaife (2010) explore reflective practices past, present, and/or future stances. Although stemming from

varying approaches to understanding reflective practice, similarities exist across the literature: reflection on experience—in the past, present, or future—is a necessary component to continued development and progression.

Furthermore, the concept of reflexivity necessitates the practitioner to reflect inward on personal values, beliefs, forms of knowledge, assumptions, and interactions with others (Bolton, 2005). A reflexive stance encourages a form of reflection that includes the very nature of the practitioner. In this stance, the practitioner must “stand back from belief and value systems, habitual ways of thinking and relating to others, structures of understanding themselves and their relationship to the world, and their assumptions about the way that the world impinges upon them” (Bolton, 2005, p. 14). As such, both reflection and reflexivity call for critical examination of experience from the stance of both the event and the self to make deep meaning and understanding in a critical manner—processes that become fundamental to professional development.

Reflective Practice to Stimulate Professional Development

Discrepancies in development—regardless of training—have been researched in therapist development literature. Most notably, Rønnestad and Skovholt (2013) outline differences in therapist development in their *Cyclical/Trajectories Model of Therapists’ Professional Development and Stagnation* (Rønnestad & Skovholt, 2013, p. 160). The need for reflection to counteract stagnation and inform development is outlined in this model and furthers the notion that professional development is not linear.

The essential nature of reflection to counteract stagnation is a fundamental aspect of development, extending beyond the confines of psychotherapy literature (McAuliffe,

2006). Current literature highlights a variety of variables impacting therapist development (Bernard & Goodyear, 2014; Hill & Knox, 2013; McAuliffe, 2006; Watkins, 2012). While both training and personal experiences heavily impact trajectories of therapist development, McAuliffe (2006) outlines significant aspects of development that resides within the learner. Most notably, for optimal development, McAuliffe posits that the practitioner must experience conflict –or limitations –in their current knowledge base, as well as mental readiness to meet the challenge of ongoing development. As such, it becomes necessary and eminent to understand the impact of both the person of the therapist, as well as the training received in educational institutions.

Research by McAuliffe (2006) and Scaife (2010) highlight the implications of including developmental learning principles and reflective practice in training curricula. Most notably, McAuliffe advocates for the inclusion of developmental learning principles, as it is suggested they are necessary for professional competence. It is noted that learning begets further learning, and as such, developmental qualities are necessary for this continued growth (McAuliffe, 2006). Various means to implement developmental learning strategies into curricula are suggested, including but not limited to: promoting reflective practice, promoting multiple perspectives, and valuing the ambiguous (McAuliffe, 2006). This adaptation to training curricula suggests that developmental learning will ensue and thus, trainees will learn and develop the personal qualities necessary to become professionally competent and autonomous.

McAuliffe (2006) identifies one's reflective capacity as being primarily responsible for the development of professional competencies. Professional competence refers to the ability to function according to the expectations of a profession, and is

dependent on the level of difficulty set, as well as the professional's personal characteristics (McAuliffe, 2006). Personal characteristics that are conducive for professional competence in a given profession include, but are not limited to: flexibility, sensitivity, communication, autonomy, and reflexivity (McAuliffe, 2006). Professionals experience development by encountering challenge in their work and reflecting on means in which they can meet and eventually, overcome the professional challenge (McAuliffe, 2006; Scaife, 2010). As such, achieving professional competence is linked with the ability to engage in autonomous thinking and a self-correcting nature –characteristics that necessitate a reflective capacity (McAuliffe, 2006). Similar to research by Rønnestad and Skovholt (2013), McAuliffe posits that reflective practice is fundamental for improvement and development across professions.

Reflective practice is deemed necessary for professional development and in engaging in the learning process (Kassan et al., 2015; McAuliffe, 2006). In order for an individual to become competent in the tasks of a given profession, they must become proficient in the field. However, to truly excel in a profession, an individual's personal characteristics are largely responsible for development and progression. McAuliffe (2006) explains that professional competence is commonly associated with the ability to engage in tasks autonomously, and as such, requires a reflective capacity. Professional competence necessitates reflection in order to overcome challenges encountered in an autonomous fashion. Perhaps most fundamental to this description of reflective practice in professional development is the notion that overall improvement necessitates reflection (McAuliffe, 2006).

McAuliffe (2006) highlights the importance of reflection in professional development through his review and synthesis of career/life phase literature, specifically through Schein (1978) and Super's (1980) theories. Career phase theory is reviewed in relation to how an individual approaches challenges at different stages in their career. Throughout the early, mid-, and late career phases, the professional is tasked with varying developmental challenges and may confront these challenges in a manner of crisis to commitment (McAuliffe, 2006). Should the professional encountering challenges approach the crisis with an explorative attitude, they can recommit to continual development and learning (McAuliffe, 2006). A reflective capacity is necessary in order to navigate the challenges in the respective phases of development.

While a reflective capacity is considered essential in navigating various challenges, Kegan (1994) notes a limitation to the theory in the assumption made that all professionals have the inherent ability to navigate challenges. Kegan applies his rendition of constructive development theory to further explain the cognitive, emotional, and interpersonal changes necessary to experience professional growth. In order for an individual to progress developmentally, there must be an understanding that their current knowledge is inadequate, and the individual experiences a readiness to meet the challenge of further development (McAuliffe, 2006). This readiness is synonymous with a sense of autonomy and a reflective/reflexive capacity, whereby the individual is able to explore their held values, assumptions, beliefs, and the limitations of their self in relation to the other. Kegan posits that not all professionals are capable of progressing to the highest levels of development. Thus, a reflective capacity is in itself a developmental achievement indicative of higher cognitive and interpersonal role complexity.

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In his rendition of constructive developmental theory, Kegan (1982, 1994) highlights professional development and cognitive complexity in a stage progression model (McAuliffe, 2006). This model posits that professionals progress through a series of stages of mental development, tasking the professional with making sense of unique cognitive, relational, and ethical processes (McAuliffe, 2006). Through this developmental model, it is suggested that professional competence is strongly related to “how professionals think, not what they know” (McAuliffe, 2006, p. 484). Most notably, competent working professionals exhibit the ability to work independently and autonomously –referred to by Kegan (1994) as fourth order consciousness. These professionals have the ability to be self-correcting and self-authoring (McAuliffe, 2006). They are considered to have mastered their professional role (McAuliffe, 2006). Perhaps most importantly, professionals who achieve fourth order consciousness are able to identify their individual connection and interconnection to the larger whole of society and the other (McAuliffe, 2006). These individuals embody an added layer of awareness to the dimensions of thought that underlie their actions and behaviours.

While the third order of consciousness is distinguished by an individual’s pursuit of meeting societal expectations, the fourth order of consciousness describes the individual’s burgeoning ability to evaluate their beliefs in relation to the societal norms, or the other whole (Kegan, 1994; McAuliffe, 2006). Furthermore, this stage of developmental learning includes a variety of characteristics focused on individual development, including: self-correcting behaviour, the ability to take responsibility for one’s own work, the ability to be guided by one’s own visions, and also the ability to envision one’s role in relation to the whole (Kegan, 1994; McAuliffe, 2006).

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Perhaps most important to this level of cognitive complexity are the notions of autonomy and self-authoring. The professional who has advanced to this level of thought has the ability to make meaning via a thorough understanding of one's own needs and personal values – which is suggestive of a reflective capacity (McAuliffe, 2006). These professionals adhere to self-imposed professional and ethical standards, rather than simply obeying external expectations (McAuliffe, 2006). While those within the fourth order consciousness accept feedback from others, it remains preferred that the feedback does not contradict personal values and beliefs (McAuliffe, 2006). McAuliffe encourages the ability to explore presuppositions and view experience from multiple perspectives as a form of improving reflective practices and engaging in developmental learning.

Kegan's (1994) version of constructive developmental theory applied to professional competence and development continues on to highlight characteristics of fifth order consciousness. This level of development highlights the various advanced abilities of the professional, including: "uncovering of the larger purposes of the profession, a socially critical stance and an awareness of the historical moment and cultural context that they inhabit" (McAuliffe, 2006, p. 486). Perhaps most notable to this phase, the professional transcends social constructs to engage in critical questioning of their total surroundings and experiences (McAuliffe, 2006). This thinker is more aware of the overarching "principles, not rules" (McAuliffe, 2006, p. 486). Kegan's fifth order consciousness describes a professional's reflexive capacity –the ability to engage in critical questioning of how one is both perceived and experienced by others (Bolton, 2005). It is here that they recognize the limits to their own framework of thought. Thus, Kegan's application of constructive development theory to professional development –

and in this case, supervisor development—suggests a need for complexity in consciousness as seen in the fourth order to engage in reflective and reflexive processes in an effort to navigate the unique challenges to the role.

Those who advance to this complex way of thinking –beyond the characteristic of societal adherence common to the third order of consciousness—obtain a greater efficacy in self and their professional role (McAuliffe, 2006). This autonomy – common to the fourth order of consciousness— allows for an understanding of the role of personal values in relation to the other, which in turn develops a greater understanding of multiple perspectives and frameworks of thought. The characteristics of Kegan’s (1994) fourth order of consciousness mirror many of the dimensions identified as necessary to become an effective clinical psychotherapy supervisor (Bernard & Goodyear, 2014; Cohen, & Lim, 2008). Furthermore, the developmental achievement of empathy, and essentially, greater cognitive complexity, mirrors many of the characteristics in that of spirituality.

Spirituality in Clinical Supervision

Spirituality is considered to be an integral aspect of human development (Bishop, Avila-Juarbe & Thumme, 2003; Shafranske, 2016). It is further argued that integrating a spiritual element in psychotherapy is necessary in order to provide holistic client care (Gingrich & Worthington, 2007; Miller, Korinek, & Ivey, 2006; Miller & Thoresen, 1999; Polanski, 2003; Worthington & Sandage, 2001). The notion of spirituality is becoming increasingly more important in the health science fields, as well as in research (Bishop et al., 2003; Gall et al., 2011; Hull, Suarez, Sells & Miller, 2013; Polanski, 2003; Shafranske & Cummings, 2013). However, there is no one consensus in the literature for a universal definition of spirituality (Bishop et al., 2003; Gall et al., 2011; Miller et al.,

2006). Common characteristics used to describe the notion of spirituality include, but are not limited to: humanism, connection, compassion, transcendence, meaning in life, creativity, a sense of wholeness, and is thought by some to be distinct from religiosity (Bishop et al., 2003; Gall et al., 2011; Polanski, 2003). The experience of spirituality is further described as “an active and passive process...a capacity and a tendency that is innate and unique to all persons” (Burke & Miranti, 1996, p. 2). The vast and unique experiences of spirituality provide resources for clientele, yet also poses particular challenges to health care providers (Hull et al., 2013).

It becomes important that practitioners within the helping professions—as well as those supervising said practitioners—are adequately trained on the impact of spirituality in order to achieve holistic client care (Hull et al., 2013). Since clinical supervision has a considerable impact on “therapist self-awareness, skills, self-efficacy, theoretical orientation, support and outcomes for the client” (Wheeler & Richards, 2007, p. 63), it is suggested that supervisors have training specifically aimed at managing both the psychological and spiritual needs of clientele (West, 2010). Furthermore, while spirituality is increasingly being recognized as a fundamental addition to holistic client care, far less is known about the impact of spirituality on the professional and personal development of the practitioner (Gingrich & Worthington, 2007; Polanski, 2003; Scaife, 2010; Worthington & Sandage, 2001). Spirituality thus presents in the literature as both a professional competency and a professional developmental achievement.

As a professional competency, supervision becomes a means of working with spirituality in the psychotherapy profession (Polanski, 2003; Shafranske, 2016). Most notably, there is a considerable increase of clients seeking psychotherapy to address

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spiritual needs, resulting in psychotherapists and supervisors being tasked with developing the skills necessary to address this clinical competency (Miller et al., 2006; Polanski, 2003). While the literature on the topic of spirituality in supervision and its integration in graduate training is relatively scant, Polanski (2003) outlines the Discrimination Model (Bernard, 1997) of framing supervision as an appropriate means to address and cultivate spiritual competencies in supervision.

This model of supervision stresses the importance of supervisor self-exploration of personal beliefs in order to increase sensitivity and understanding to all belief systems and the roles they may play in clients' lives (Polanski, 2003). According to Timm (2015), the Discrimination Model may be fundamental in decreasing performance anxieties, while improving self-awareness by: "reducing supervisee anxiety, promoting creativity, and exploring and solidifying personal and vocational values" (p. 115). Benefits resulting from the use of the Discrimination Model necessitate adequately trained supervisors with the ability to effectively promote such reflectivity and awareness.

However, Schulenberg, Hutzell and Rogina (2010) suggest that it is difficult to deem one model as having ultimate superiority and effectiveness amongst all aspects of the supervisor competency. Rather, it is suggested that integrating theory from Logotherapy would augment models of supervision currently being used in the psychotherapy profession in order to clinically address existential and spiritual issues (Schulenberg et al., 2010). Schulenberg and colleagues specifically identify the supervisory alliance between the supervisor and supervisee as lacking attention in current theoretical models. As such, the integration of Logotherapy tenets aims to increase the

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scope of current models, while specifically targeting personal meaning made in supervision between the supervisor and supervisee (Schulenberg et al., 2010).

Logotherapy posits that finding meaning throughout life experiences enables an individual to deal with difficult tasks in a more effective manner (Frankl, 1963; Schulenberg et al., 2010). While suffering is considered an inevitable aspect of life, the ability to find meaning despite suffering remains a fundamental aspect of Logotherapy (Frankl, 1963). The concept of finding meaning in experience is meant to encourage people to understand their inner values and live in accordance to those values and meanings in life –keeping with the aforementioned defined notions of spirituality (Frankl, 1963; Schulenberg et al., 2010). Schulenberg et al., (2010) apply the central tenets of Logotherapy to models of supervision with the fundamental purpose of encouraging supervisee growth during a time of learning largely regarded as sensitive and delicate in nature (Rønnestad & Skovholt, 2013).

While the benefits of living in accordance to personal values are discussed in Logotherapy, there is meaningful research dedicated to difficult experiences of being unable to act in accordance to personal values (McCarthy & Deady, 2008; Nuttgens & Chang, 2013). Most notably, Nuttgens and Chang (2013) explain that while the supervisory role and relationship is fundamental in ensuring adequate client care and supervisee training, there are various factors that threaten supervisor effectiveness, including that of moral distress.

With a variety of existing definitions, Nuttgens and Chang (2013) explain the core tenet of moral distress to include “knowing what one believes to be the correct ethical

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action, yet feeling constrained from pursuing it” (p. 284). Moral distress often results in negative emotional outcomes, however there are a few notable benefits: “individuals [may be] more aware of and reflective about their own moral, spiritual, and philosophical beliefs and it can strengthen their resolve to do better next time” (McCarthy & Deady, 2008, p. 257). Therefore, through difficult experiences, a supervisee can be encouraged to reflect on their beliefs to find meaning and improve in future instances. Issues related to moral distress are heavily researched in health science fields, but are considered to have future merit in psychotherapy research –specifically with regards to meaning making and the supervisory alliance (Nuttgens & Chang, 2013).

Similar to Rønnestad and Skovholt’s (2013) Lifespan Developmental Model, Logotherapy, and the concept of moral distress, Polanski (2003) notes that the person of the psychotherapist is greatly influenced by personal life experiences that warrant awareness in order to work effectively. Schulenberg et al., (2010) also reference the impact that the transient nature of personal and professional lives may have on a developing supervisee, as well as the supervisory alliance. A fundamental developmental goal in the psychotherapy profession is to have the practitioner develop a sense of congruence between their personal and professional lives (Rønnestad & Skovholt, 2013).

Engaging in reflective practice and taking a reflexive stance is considered necessary for practicing psychotherapists to meet the spiritual needs of clients, but also as a means of developing the awareness to identify personal values that may impact the therapeutic relationship (Polanski, 2003). Therefore, providing a reflective supervisory environment –through reflective practice or a Logotherapy infused supervisory model—that encourages the supervisee to learn, experience growth during difficult periods, and

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understand the impact of their personal values becomes significant for both the supervisees' development, as well as holistic client care (Schulenber, 2010).

The notion of addressing spirituality for professional growth is particularly relevant for both supervisee and supervisor. While the supervisee may experience professional growth through the careful consideration of their beliefs or values, the supervisor is susceptible to the same growth process while engaging in reflective practice. Since the supervisor is considered by some to progress through stages of development similar to that of the therapist (Stoltenberg & McNeill, 2009), special consideration should be directed to the importance and impact of spirituality as a supervisory competency, as well as a conduit to growth.

Professional development literature refers to reflective practice as necessary to promote development, but also as a developmental achievement necessitated by cognitive, emotional, and interpersonal complexity (Kegan, 1994; McAuliffe, 2006). Given that the original purpose and overall essence of supervision is considered to be the practitioners' ability to "know thyself" (Hess, 2008, p. 5), embodying a reflexive stance becomes a fundamental and spiritual practice that develops awareness of personal values and held assumptions that may impact psychotherapy outcomes and the effectiveness of the supervisory alliance (Hunt, 2001; Scaife, 2010; Schulenber, 2010). Reflective practice becomes necessary to master the competency of working with spirituality, develop awareness of one's own spiritual beliefs, and provides a framework to support continued professional development –both as a psychotherapist and clinical supervisor (Hunt, 2001; McAuliffe, 2006; Polanski, 2003; Rønnestad & Skovholt, 2013; Scaife, 2010; Schulenber, 2010).

Subjects for Further Consideration

It was once believed that by progressing through the developmental stages of becoming a psychotherapist, the practitioner was sufficiently prepared to assume the professional role of clinical supervisor (Desmond, et al., 2011). Previous experience as a supervisee, modeling past supervisor behaviour, and integration of counselling skills in supervision were considered the skills necessary to be competent in providing supervision (Desmond et al., 2011). However, it is now suggested in the literature that not enough is known about trajectories of therapist development, supervisor development, nor the training needs of the developing supervisor –warranting further investigation (Barker, 2014; Desmond et al., 2011; Majcher, 2009; Majcher & Daniluk, 2009; Milne & James, 2002; Milne, Sheikh, Pattison, & Wilkinson, 2011; Wheeler & King, 2000).

Current research indicates that positive supervisory behaviours and experiences are linked to the depth of training received prior to providing supervision (Gazzola et al., 2014; Milne & James, 2002; Milne et al., 2011; Wheeler & King, 2000). Also, formal training is considered a fundamental tool in skill practice and competency development (Lyon et al., 2008; Stevens, Goodyear, & Robertson, 1998). However, it is still common practice to provide supervision with only counselling experience and no formal training (Cohen & Lim, 2008; Gazzola et al., 2014; Peake et al., 2002). While it is assumed that supervisors will develop in similar trajectories to therapists, there is not enough validated evidence to support this frequently held belief, calling for further research and investigation into the experience of becoming in this unique clinical role (Barker, 2014; Desmond et al., 2011; Gazzola et al., 2014; Majcher, 2009; Majcher & Daniluk, 2009; Milne & James, 2002; Milne et al., 2011; Wheeler & King, 2000).

Finally, while the developmental trajectory of the clinical supervisor is widely assumed to be similar to that of the developing psychotherapist, much of the supervisor's interior experience and trajectory of development remains unknown in the literature, thus necessitating further investigation: "the developmental interior of the psychotherapy supervisor has the potential to be charted and better understood, and our vision of the supervision experience has the possibility of being accordingly transformed" (Watkins, 2012, p. 79). Due to the current emphasis placed on supervision, and the emerging trend to seek supervisor training, the population that was once inaccessible is becoming more predominant in the field, reigniting an interest and greater need for research to be conducted on the topic.

It is suggested conducting research that investigates the experience of the developing supervisor through qualitative measures in order to develop a basis of knowledge that can situate further quantitative studies in the future (Hill & Knox, 2013). Qualitative inquiry provides a method of understanding the experience of supervisor development, as well as a means to develop a knowledge base in a field that is currently limited (Bernard & Goodyear, 2014; Watkins, 2012).

Overview of the Literature and Concluding Remarks

Currently, there is significant depth in therapist development literature (Skovholt & McCarthy, 1988; Skovholt & Rønnestad, 1992; Rønnestad & Skovholt, 2001; Rønnestad & Skovholt, 2013; Westefeld, 2009). However, the current state of the literature on supervisor development remains at rudimentary levels (Watkins, 2012). A preliminary overview of supervisor development theories provides a starting point for new research to expand upon. Reflective practice in professional development literature

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highlights resources necessary for improvement and provides an area of focus when considering developmental needs of the novice supervisor. Furthermore, the exploration of spirituality, developmental learning, and reflective practice in connection to supervisor growth provides areas for consideration when researching novice supervisor needs and internal resources for professional development. While it has been noted that supervisor development literature remains in the early stages of production (Watkins, 2012), this literature review offers a starting point for understanding the research conducted to date. Also, it identifies other areas of research connected with professional growth and development relevant in understanding the early experiences of novice psychotherapy supervisors.

CHAPTER 3: METHODOLOGY

“Don't become a mere recorder of facts, but try to penetrate the mystery of their origin.”

— Ivan Pavlov

Research aimed at identifying the unique developmental needs and processes of becoming a psychotherapy supervisor remains minimal (Watkins, 2012). Bernard and Goodyear (2014) credit this to a general loss of interest in the field. Yet, Hill and Knox (2013) suggest the challenging nature of the supervisor population as discouraging further research from being conducted. Regardless, there is a considerable need for research dedicated to understanding the processes that are most impactful in becoming a supervisor, as well as various best practices associated with supervisor development. The majority of research investigating supervisor development tends to be outdated and limited in nature (Watkins, 2012).

In an attempt to address this gap in the psychotherapy supervisor development literature, this study explored various experiences deemed impactful by novice supervisors during their initial years of practice. This chapter outlines the phenomenological framework used in investigating the early experiences of novice supervisors. The goal of the study, specific research questions addressing supervisor development, the measures used in investigation, as well as the method of data analysis are presented. Finally, means of addressing researcher bias and various ethical considerations are discussed and explored in depth.

Goal of the Study

This study was designed with the primary objective of developing an understanding of the experience of becoming a clinical supervisor. Specifically, this study explored what initial experiences were perceived by novice clinical supervisors as being most helpful and/or challenging to their professional development.

It was hoped that the results of this study would have implications for both clinical supervision trainers and trainees. Most notably, it was anticipated that the results of this study would assist in easing the transition from psychotherapist to clinical supervisor, as well as provide an understanding of the experiences of training that were considered most impactful on the novice psychotherapy supervisor. This study aimed to generate results relevant for future supervisor training programs by providing insight into the developmental needs of the novice supervisor and the specific experiences that promote professional growth and development in the early years of supervisory practice.

Research Questions

This study explored the first years of becoming a psychotherapy supervisor. Specifically, this study attempted to identify particular experiences in the early years of practice that were perceived as being most impactful on the professional development and growth of the novice psychotherapy supervisor, as well as the personal and professional resources that aided in this process.

The research questions that guided this study are as follows:

- i. What specific experiences do novice psychotherapy supervisors perceive to be most helpful for their professional development and growth?

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- ii. What specific experiences do novice psychotherapy supervisors perceive to be least helpful, or challenging, to their professional development and growth?
- iii. What resources –if any—facilitate the process of professional development and growth during the initial years of becoming a psychotherapy supervisor?
 - In particular, what has been the role of spirituality and reflection on the journey to become a psychotherapy supervisor?

Method

Rationale

This study was designed using a qualitative, phenomenological framework of inquiry. Qualitative inquiry has been deemed particularly beneficial when investigating human experiences often hidden from observation (Creswell, 2007). Currently, the internal experiences of the novice supervisor remain relatively unknown to researchers (Watkins, 2012). Consequently, qualitative inquiry was considered favorable in approaching supervisor development research and providing a basis of knowledge to situate future quantitative results that meaningfully contribute to supervisor development literature (Hill & Knox, 2013; Watkins, 2012).

As a method of inquiry, phenomenology has been considered well suited for investigating the developmental process of clinical supervisors, as it is primarily concerned with several individuals' experiences of a phenomenon (Creswell, 2013; Gallagher, 2012, McLeod, 2011). Phenomenology would allow the researcher to be immersed in participants' experiences and the meaning derived by those who are all

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living the same phenomenon (Creswell, 2013; Gallagher, 2012). The descriptive and interpretive nature of phenomenology allowed for this study to target the experiences perceived to be most impactful on the development of novice supervisors, while generating relevant results to future psychotherapists assuming the supervisory role (McLeod, 2011). The phenomenological framework used throughout this study embraced various realities experienced by the participants. It became instrumental in exploring what specific experiences novice clinical supervisors perceived to be most helpful and/or challenging for their professional development and growth, as well as what resources facilitated their growth throughout their developmental journey.

Design

Using a phenomenological lens, the experience of professional growth in the early years of providing supervision was explored amongst six individuals. This qualitative study was designed as being longitudinal in nature. Specifically, six novice supervisors with a maximum of three years of experience supervising participated in this study.

Three of the six supervisors were at the beginning of their supervisor careers, just starting to provide supervision. These participants were deemed to be at the beginning of the novice phase of becoming a supervisor with less than one year of supervisory experience by the end of the data collection period for this study. These three supervisors at the early novice stage were followed for a period of six months. During this time, they were asked to complete monthly journal entries (consisting of four separate entries) and sit for an hour-long interview exploring impactful experiences, as well as resources that assisted their growth during this time (See Appendix A, B, C). Furthermore, interview questions were also designed specifically for those who had prior formal training in

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clinical supervision, and for those who have had no formal training in clinical supervision. Journals were chosen as a data collecting method since they have been considered fundamental in counsellor development research, and thus, provided a medium suitable for exploring supervisor development, as well as in identifying incidents considered impactful on development over time (Ellis, 1991; Furr & Carroll, 2003; Heppner & Roehlke 1984; Howard, et al., 2006; Skovholt & McCarthy, 1988).

The other three participants were nearing the end of the novice phase with approximately three years of experience in providing supervision. They were considered to be at the advanced novice stage of supervisor development. They were asked to complete a retrospective interview exploring experiences they deemed to be most impactful since the time they assumed the novice role as a supervisor.

Incorporating a discovery-oriented approach to phenomenological research, this study remained open to the various experiences and the changing nature of meaning garnered by research participants. This method of inquiry allowed for both objective and subjective understandings of participants' lived experience. It can ultimately provide policy makers with some additional information to aid in the development of training strategies that may meet the needs and promote the professional development of clinical supervisors. In turn, it is expected that this study will "reveal the richness and complexity of phenomena" (Howard et al, 2006, pg. 92) around the early years of becoming a psychotherapy supervisor.

Recruitment Procedure/Participants

Convenience sampling procedures were used to recruit participants for the study. Participants were recruited through e-mail distribution of the study recruitment poster to trainees registered on counselling list-serves and members of professional counselling and psychotherapy bodies in Ontario (See Appendix D). Also, the study recruitment poster was advertised on the university campuses offering counselling education programs.

Participants

This study assembled a participant sample consisting of six novice supervisors. This sample allowed for a manageable participant size to render reliable and valid qualitative results (Creswell, 2007; McLeod, 2011). The sample consisted of novice clinical supervisors who were in their initial three years of providing supervision. The participant sample was divided into two groups: those beginning the novice stage of providing supervision, as well as those nearing the end of the novice stage of providing supervision. Both participant groups were engaged in providing clinical supervision during the course of the study in various settings, including: university training programs, community agencies, and private practice (See Table 5 below for participant characteristics).

There was no exclusion criteria based on prior clinical experience, religion, age, gender, or cultural background. Due to the researcher's limited ability to speak languages other than English, only participants that were fluent in English were recruited to participate. As such, the participant sample consisted of three male and three female supervisors. The participants' experience levels ranged from novice (less than one year

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experience providing supervision) to advanced novice (having approximately three years of experience in providing supervision). Three participants were categorized as novice and three participants were categorized as advanced novice. All participants had Masters degrees, while three participants were Doctoral students, and one participant had completed Doctoral studies.

Table 5

Participant Profiles

Participant¹	Age	Formal Supervision Training	Supervision Setting	Educational Experience	Supervisor Experience at Start of Study	Engaged in Journaling
Alexander	39	None	University training program	Doctoral student	Novice	Yes
Monica	47	None	University training program	Masters graduate	Novice	Yes
Michelle	58	Formal course	Private practice	Masters graduate	Novice	Yes
Jeremy	33	None	Community agency	Doctoral student	Advanced Novice	No
Brandon	35	None	University training program	PhD graduate	Advanced Novice	No
Victoria	36	Formal course	University training program	Doctoral student	Advanced Novice	No

Analysis

The data used in this study was collected in the form of semi-structured interviews and self-recorded journals. Both interview transcripts and journal entries were analyzed

¹ Pseudonyms were used in presenting the participants of this study in order to maintain anonymity, yet preserve the human nature of the experience of becoming a psychotherapy supervisor.

using a phenomenological method of analysis. Phenomenological research methods provided a systematic and structured means of analysis (Creswell, 2013; McLeod, 2011). However, while phenomenological methods of analysis are structured, they tend to differ slightly amongst researchers. Most notably, McLeod (2011) indicates the most accepted and widely used phenomenological analysis procedures are described by Colaizzi (1978), Bullington and Karlsson (1984), and Moustakas (1994), amongst others. Furthermore, Creswell (2013) highlights Moustakas' (1994) adaptation of the Stevick-Colaizzi-Keen analysis method to be "the most practical, useful approach [to analysis]" (p. 193). Creswell (2013) further simplifies this approach in a structured, six-step method of analysis fundamental for deriving meaning from participants' experiences. This method is further described below.

Creswell's (2013) modified approach was used to analyze participants' transcribed interviews and journal entries. Creswell (2013) approaches Moustakas' (1994) adaptation of the Stevick-Colaizzi-Keen method in six simplified steps (See Table 6). Following this method of analysis for this study, the researcher was initially tasked with bracketing personal experiences related to the phenomenon under study. Creswell (2013) suggests this be accomplished by thoroughly documenting all personal experiences related to the phenomenon. As a result, it is assumed that the researcher attempts to reduce bias and the focus remains on participants' experiences.

Within the context of this study, reducing bias involved fully describing the researcher's personal experiences in relation to receiving, providing, and learning about clinical supervision in psychotherapy (See Appendix F, G). With knowledge that the researcher conducting this study was also a novice clinical supervisor, it became

fundamental to reduce bias in an effort to give space to explore the participants' experiences with a genuine sense of curiosity to guide the research process (Creswell, 2007). Additional measures were taken to bracket personal bias from the results as best as possible, including: journaling prior to the first experience of providing supervision and completing a narrative biography (See Appendix F). This process required the researcher to complete the interview protocol prior to interviewing research participants, in an effort to become familiar with personal values associated to the research. The narrative biography acted as a storied experience to provide further depth to the researcher's involvement in the study.

Following the interpretive phenomenological framework outlined by Creswell (2007), the researcher approached the study from a method of "conceptual encounter" (de Rivera, 2006; McLeod, 2011, p. 95). Conceptual encounter necessitates the researcher to rely on both their own experiences to make sense of the research, as well as the collected data (McLeod, 2011). Engaging in a conceptual encounter allowed the researcher to approach the study "sensitized to the topic" with an understanding of personal experiences and values that might influence the process of research and data collection (de Rivera, 2006; McLeod, 2011, p. 94). Framing phenomenological research with a conceptual encounter method allowed for the researcher to reflect on personal biases, as well as differences between participants' experiences and the researcher's.

Developing clear insight of the phenomenon under study was considered an attempt by the researcher to bracket personal bias by providing a framework of understanding what values and opinions might unintentionally guide the research process (Creswell, 2007; Findlay, 2008). In this way, the researcher was able to approach the

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study with a greater understanding of pre-existing, held biases that warrant suspension while engaging in the research process (Creswell, 2007; Findlay, 2008). As a result, there remained a gentle balance between bracketing one's bias, as well as using the bias to guide the research process – a balance considered necessary by some researchers to promote a reflexive and curious stance (Findlay, 2008).

Afterwards, the researcher developed a list of “significant statements” found in the collected data (Creswell, 2013, p. 193). The significant statements gathered described how participants’ experienced the phenomenon being studied. These statements were assessed and then recorded in a non-repetitive list (Creswell, 2013). The researcher was tasked with grouping significant statements into larger, resembling groups referred to as “meaning units” (Creswell, 2013, p. 193). The meaning units developed provided the researcher with key themes describing the participants’ lived experience.

The researcher was then tasked with writing a thorough description of the events experienced by the participants. Creswell (2013) notes that this description –referred to as a “textural description” –often includes verbatim examples (p. 193). As part of this step, the researcher developed a “structural description” used to explain how participants experienced the phenomenon under study (Creswell, 2013, p. 193). The context of the participants’ surroundings was taken into consideration in this description and required significant reflection on the part of the researcher (Creswell, 2013).

Finally, the researcher developed a description that captured the essence of the phenomenon being studied (Creswell, 2013). This description combined both the textural and structural descriptions previously developed by the researcher. This final description

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presented an understanding of what exactly was experienced and how it was experienced by participants (Creswell, 2013). Similarly to Creswell's (2013) concluding step to phenomenological analysis, McLeod (2011) further explains that the researcher must develop an "exhaustive description" of the phenomenon in its' entirety (McLeod, 2011, p. 41).

Table 6

Steps of Data Analysis (Adapted from Creswell, 2013)

Steps of Analysis:		Application to this Study:
1.	Bracketing personal assumptions	The researcher fully described their personal experiences related to the phenomenon being studied (See Appendix F, G). This involved journaling and self-administration of the interview questions prior to conducting research.
2.	Approach data from conceptual encounter	The researcher reflected on personal biases, as well as differences between participants' experiences from the researcher's.
3.	Develop a list of significant statements	The data was reviewed multiple times in order to become immersed in participant experiences. Significant statements were recorded individually by both researcher and independent reviewers.
4.	Group significant statements into larger groups referred to as "meaning units"	Significant statements were grouped under overarching themes.
5.	A thorough description of events is written	Participants' experiences were described case by case.
6.	A final description that captures the essence of the phenomenon being studied is developed	A compilation of themes garnered from participants' interviews, as well as journal entries, was generated in an attempt to understand the commonalities of the phenomenon under study across all cases.
7. *	Additional step taken: Development of a theoretical proposition emerging from the data	A theoretical proposition was developed based on the observations from the collected data. This emerging model was used to illustrate and describe participant experiences in greater depth.

When conducting a phenomenological method of analysis, it is suggested that the researcher engages in various processes to ensure data is analyzed adequately (McLeod, 2011). Most notably, the researcher should approach the data with a sense of curiosity, view no one statement as more important than others, spend time immersed in the topic, pay attention to finer details, and finally, look for meaning in what is lived by participants (McLeod, 2011). McLeod (2011) highlights the importance of using and balancing creativity in this highly systematic approach to research. An effort was made to have these suggestions implemented in this study through the use of researcher personal journaling, completion of the self-interview, and writing of the narrative biography.

In order to improve the trustworthiness of data analysis and reduce researcher bias, various techniques were used for verification of identified themes. Most notably, respondent validation and peer review were two techniques used to verify researcher analysis and improve rigor, as per recommendations found in the literature (Birt, Walter, Scott, Cavers, & Campbell, 2016; Burnard, Gill, Stewart, Treasure, & Chadwick, 2008). It is important to note that there is no consensus amongst researchers regarding the use of these techniques in improving validity and rigour in qualitative research (Barbour, 2001; Birt, et al., 2016; Burnard et al., 2008). While these techniques have been used for some time in qualitative research, some researchers question whether qualitative data can be interpreted with the same meaning and applied to the social world as a whole (Burnard et al., 2008). Furthermore, Burnard et al., (2008) have raised the question of whether different interpretations of meaning can be equally valid if they result from the same dataset.

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In this study, respondent validation and peer review were used as a means of reducing researcher bias. Respondent validation involved having one interviewee review their transcript and answer a series of questions following the protocols outlined by Birt et al., (2016) in their method of data review known as *Synthesized Member Checking* (p. 1803). This interviewee was provided with their interview transcript, significant statements, meaning units, and reflective questions. The reflective questions targeted the accuracy of the emerging themes. Questions included, but were not limited to: Does this analysis match your experience, would you like to change anything, and finally, would you like to add anything? (Birt et al, 2016). The participant was provided with the opportunity to provide feedback and confirm whether their interview was interpreted accurately.

The peer review technique involved having interview transcripts independently reviewed by a volunteer doctoral candidate in a counselling program. After independent review, emerging themes were explored, leading to a shared understanding and consensus of the emerging themes.

Measures /Instruments

Data was collected from participants using self-recorded journals and semi-structured interviews (See Appendix A, B, C). Journals were guided by reflection questions targeting participants' early experiences of providing supervision that they perceived to be the most and/or least helpful on their personal and professional development and growth (See Appendix A). In these monthly journal reflections, participants were invited to identify the perceived changes they have experienced during their supervisory work and the resources they have utilized to attend to their growth and

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development. Reflective monthly journals were completed by the participants who belonged in the early novice stage, as they were just starting to provide supervision. These journal entries provided the opportunity to follow supervisors at the very beginning of their experiences in this role. The three participants who belonged to the early novice stage of supervisor development completed a journal entry at the end of each month in a four-month period. Entries were approximately one to two pages in length.

Interviews provided an in-depth understanding of the experiences of growth felt by novice clinical supervisors during their early years of providing clinical supervision. The interview protocols were guided by and adapted via critical incident analysis research (Ellis, 1991; Furr & Carroll, 2003; Heppner & Roehlke 1984; Howard, et al., 2006; Skovholt & McCarthy, 1988). Critical incident analysis provided the researcher with guidelines for investigating helpful or challenging incidents experienced by participants.

The semi-structured interview was designed to provide participants with an opportunity to explain and expand upon impactful moments during supervision formation and also to reflect on their experiences as a new supervisor. The semi-structured interview asked questions targeting the impact of reflexivity and spirituality on their development as a clinical supervisor (See Appendix B, C). Interviews consisted of twenty-five questions, took approximately forty-five minutes to one hour to complete, and occurred either in person or over the phone depending on participant preference and availability. All interviews were conducted by the researcher, were recorded, and fully transcribed. For the early novice group the interviews were conducted approximately two months after the four-month period of journaling.

Reducing Limitations and Bracketing of Personal Assumptions

This study attempted to minimize bias by inviting participants from multiple practice sites (Watkins, 2012). It was hoped that this participant population would provide a heterogeneous sample, and essentially, add to the richness of data. Additionally, by including participants from multiple locations, it was the researcher's intention to obtain a large enough participant sample to increase the generalizability of the study and account for sample attrition rates. Also, the participant sample included supervisors with formal training and those without, in an effort identify how training experience might influence novice supervisor development. Furthermore, this study was designed with repeated measures taking place during various points of the novice supervisor stage, in an effort to capture impactful experiences during this precise and formative time.

Finally, as the primary researcher for this study was enrolled in Doctoral studies as a psychotherapist and novice psychotherapy supervisor, it was paramount to become aware of personal experiences throughout the interview and data analysis stages in an effort to reduce personal bias. Engaging in reflexive processes required the researcher to explore multiple aspects of their consciousness in an effort to develop awareness of potential biases and presuppositions (Tufford & Newman, 2012). Firstly, in order to address researcher bias, the researcher engaged in the phenomenological method of "conceptual encounter" (McLeod, 2011, p. 94). The notion of conceptual encounter refers to a researcher's approach to a study that may include sensitivity to personal experience, in conjunction with knowledge gained from the literature (McLeod, 2011). This process necessitated the researcher to reflect and become fully aware of her personal

experiences regarding the topic under study, and thus, allow for an understanding of how she may be influenced to interact with the participants (McLeod, 2011; See Appendix F, G). Journals have commonly been used to explore biases and presuppositions in qualitative research (Majcher, 2001; Tufford & Newman, 2012). Keeping a journal and discussing with her doctoral research group her biases and assumptions became fundamental in reducing personal bias during data collection, analysis, and dissemination.

Narrative Biography

As part of the reflective stance taken throughout this study, an autobiographical account of the experiences that led to this research was developed (See Appendix F). This account explored personal experiences and thought processes that influenced the investigation of experiences throughout the study. Furthermore, through completion of this autobiography, as well as the self-completed interview (See Appendix G), researcher bias was limited by developing an understanding of what values, expectations, and hopes guide the research process. While literature indicates that researcher bias cannot ever fully be eliminated (Creswell, 2013; Häggman-Laitila, 1999), it was hoped that the use of the autobiography, as well as completion of the interview would aid in limiting bias throughout the course of the study.

Presuppositions

For this study, the researcher engaged in various reflective processes found to be used in other qualitative studies to become sensitized to personal experiences, biases, and presuppositions (Majcher, 2001; Tufford & Newman, 2012). The following assumptions emerged from this practice: an expectation of elevated levels of anxiety for novice supervisors, an experience of role shock (Watkins, 1990), relying on previous supervisory

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experiences to guide work, and finally, a need for extensive clinical experience prior to providing supervision. Through familiarity with the research, as well as engaging in reflective practices, these assumptions emerged as presuppositions held by the researcher. These assumptions were explored in greater depth and presented below with the intention of providing an understanding of how the researcher came to terms with their involvement prior to the study. This practice allowed the researcher to approach the research study with less bias.

Firstly, the notion of novice supervisors holding anxiety related to the role extended from both the literature and reflection upon personal experiences. Throughout both psychotherapist and supervisor development models, it is considered accepted within existing literature that those new to the role of psychotherapist or supervisor would carry with them a sense of anxiety related to mastering the new role, competencies, and expectations (Watkins, 2012). Based on reflection of personal experiences, the notion of experiencing anxiety when new to the supervisory role resonated with the experience.

Similar to the expectation of higher levels of anxiety for novice supervisors, the presupposed notion of experiencing role shock was based both in personal experience and existing literature (Cohen & Lim, 2008; Watkins, 1990). There is both an expectation that supervisors who are new to the role will experience some form of bewilderment in mastering the new competencies, as well as assuming the new identity of supervisor. Through personal reflection, it became obvious that the challenge of assuming the supervisory identity is presupposition held by the researcher.

The third presupposition extended largely from the researcher's personal experience in reflection upon providing supervision. While it is noted in the research that supervisors often become internalized mentors for supervisees and many new supervisors base their supervision off of previous experiences (Campbell, 2006; Cohen & Lim, 2008; Gazzola et al., 2013; Lerner, 2008), reflection of the researcher indicated many skills used in supervision were based on personal experiences.

Finally, the need for extensive clinical experience prior to providing clinical supervision is a presupposition based both in the literature and personal experience. Most notably, current regulatory bodies in Ontario suggest approximately five years counselling related experience before providing clinical supervision (CCPA, 2015; CRPO, 2014). Also, based in psychotherapist development literature, there is an understanding the positive supervisory experiences extend from a supervisor who is well versed in theory and can assume the role of the expert (Hill & Knox, 2013).

Ethical Considerations

Ethical considerations in qualitative research are most concerned with the "morality of human conduct" (Edwards & Mauthner, 2012, p. 14). Adhering to ethical standards is fundamental in designing a research project, as they hold the researcher accountable and responsible for their conduct throughout the course of the study (Creswell, 2013; Edwards & Mauthner, 2012). The exposed and unscripted nature of qualitative interviews leaves both the researcher and participant vulnerable to the unknown of the discourse (Majcher, 2001). Hence, various ethical procedures must be adhered to in order to validity of the study and safety of participants.

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Due to the personal nature of the conversations and reflections, additional ethical procedures were taken into consideration for this study. Most notably, participants were fully informed of the purpose of the study, the parameters of their participation, potential risks and benefits associated with their participations, parameters of confidentiality, data collection and storage procedures, the voluntary nature of their participation, and their ability to withdraw at any point during the study (See Appendix E). Participants were provided with the consent form and it was made very clear that they may withdraw at any point during the course of the study. Participants were also provided with the research supervisor's contact information should they have further questions or concerns. Participants' identities remained anonymous throughout the data through use of a participant code that they were to fill out and complete on their own. All identifying information of the participants was removed from the hard data to further protect their identity and confidentiality. Pseudonyms were chosen for the presentation of data to protect participant identities and assure anonymity, while attempting to maintain the human component behind the experiences. This study received approval from the Research Ethics Board of Saint Paul University.

Summary of Methodology

This study aimed to add to the existing –albeit limited—knowledgebase and specifically address what experiences are most impactful to the novice supervisor. Using a phenomenological method of inquiry, the experiences of six novice supervisors were explored through journal entries and in-depth interviews. Various techniques were employed to best monitor researcher bias and stay close to the meaning experienced by those beginning their journey as novice psychotherapy supervisors. It was hoped that the

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findings of this study could increase awareness regarding the experiences of those newly assuming the role of the psychotherapy supervisor, and to help better understand the training and professional development needs of novice supervisors.

CHAPTER 4: FINDINGS

“In any given moment, we have two options: to step forward into growth or to step back into safety.”

— Abraham Maslow

This study was designed with the intention of exploring the lived experiences of novice supervisors and what they perceived as being most impactful to their development and growth during the early years of providing supervision. Specifically, this study explored the interior experience of six novice supervisors –three at the early novice stage and three at the advanced novice stage. The results of this research process identified various helpful and challenging experiences, as well as strengths and resources utilized by the novice supervisor throughout their initial experiences to overcome challenges and facilitate development.

The findings of this study are presented with the aim of providing an understanding of the initial experiences of becoming a psychotherapy supervisor. Specifically, the findings of this study are presented in three parts: a brief overview/summary of each participant experiences so as to reflect the context and intricacies of the person interviewed, the emerging themes that captured participants’ answers to the research questions, and finally, the emerging processes observed to be experienced by the participants throughout the course of becoming a supervisor. The theoretical model that emerged from these processes, as well as how it translates to a practical application, is presented in subsequent chapters.

Findings

The participants of this study provided a rich description of their early experiences practicing as a supervisor. While the interviews and journal entries investigated key experiences and resources that were impactful on the novice supervisor's development, additional information emerged during the course of the interviews. Participants took the time to reminisce not only on the impactful moments during their initial experiences, but also on the underlying processes of how they interacted with and made sense of these moments. The participant experiences, emerging themes, and underlying processes that were perceived as the most impactful to the development of these novice supervisors are presented in greater detail below.

Part 1: A Brief Overview to the Participants' Experiences of Becoming a Supervisor

To illustrate the individual ways that each participant experienced their journey of becoming a psychotherapy supervisor, condensed summaries of the narrated experiences are first presented by order of increasing supervisor experience. The first three cases presented represent those participants that were just beginning to supervise and were categorized in the early novice stage of supervisor development. The next three cases presented represent those participants in the advanced novice stage of supervisor development. These cases highlight both the uniqueness and similarities of helpful and challenging moments for novice supervisors, as well as the processes involved. It is hoped that they may provide a glimpse into the intricacy of the process of becoming a supervisor for each participant, as well as the human stories behind the findings.

**“Growing Pains” and Rising to the Challenge: Alexander’s Journey of
Becoming a Psychotherapy Supervisor**

Participant	Gender/ Age	Supervision Training	Supervision Setting	Educational Experience	Engaged in Journaling Process	Supervisor Experience at Start of Study
Alexander	Male, 39	None	University Training Program	Doctoral Student	Yes	Early Novice Stage

Alexander’s journey of becoming a psychotherapy supervisor could be summarized by the phrase *growing pains*. This term was used throughout the interview with Alexander to describe the often dichotomous and challenging nature of becoming a psychotherapy supervisor: a process riddled with novel learning moments, as well as familiar experiences from one’s own past.

The interview with Alexander took place over the phone and lasted approximately one hour. Central topics explored in Alexander’s initial experience in providing supervision included: the importance of the relationship with supervisees, challenges in balancing supervisee needs, and finding support in receiving supervision of supervision. Alexander explained that a primary reason in becoming a supervisor was to give back to the field that he had accrued years of experience working in. Alexander often referenced the challenge of adjusting his work to the differing needs of supervisees. He explained that his supervisees were at different developmental levels, necessitating different objectives from supervision –something that tested Alexander. However, Alexander did highlight the value of having positive past supervisors to draw upon. Also, he noted his current supervisor of his supervisory work as being a powerful, positive mentor for him.

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Alexander emphasized his ability to rise and meet the challenges posed by this unique professional competency. He provided an elaborate view into the challenges, strengths, and resources encountered throughout his early experiences in the field as a novice psychotherapy supervisor, including: inspiration from his supervisees, challenging interpersonal experiences, and great support from his supervisor mentors.

Alexander had a plethora of advice to pass along to others considering venturing on this journey: “Umm advice... I think be supervised through it, if you can be, by a seasoned supervisor. That's just really helped me. I really appreciate that type of guidance because I recognize my limitations”. Alexander’s ability to recognize his limits tended to reduce additional stress during this initial year of supervising. He carried with him not only a sense of resilience in meeting challenges, but also a level of awareness that guided his understanding of what areas needed further attention for development:

I think students are looking to you for guidance and support and encouragement and I think you have to show that each and every time and to be able to maintain that integrity about yourself ... It’s almost like a spiritual practice. (Alexander)

Using Past Experiences to Inform New Challenges: Monica’s Journey of Becoming a Psychotherapy Supervisor

Participant	Gender/ Age	Formal Supervision Training	Supervision Setting	Educational Experience	Engaged in Journaling Process	Supervisor Experience at Start of Study
Monica	Female, 47	None	University training program	Masters graduate	Yes	Early Novice Stage

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Monica's journey of becoming a clinical supervisor can be described as an ongoing challenge of finding a balance between client welfare and supervisee development. Her years of experience and strong clinical intuition often guided her supervision sessions but posed challenges to the supervisees who were not as advanced.

This interview took place at Monica's private office and lasted approximately a half hour. Central topics in Monica's initial experience in providing supervision included: self-awareness, balancing roles of the supervisor, valuing rapport in supervision, and having a belief in the significance of the supervisory role. Monica expressed interest in becoming a supervisor as a means of giving back to the profession and contributing what she has learned to the field of psychotherapy. Monica further explored growth and development in relationship to spirituality and reflective practices. She described the challenge of being self-reflective as a supervisor in order to understand her relationship and connection with others, particularly the supervisees.

Monica was the most experienced counsellor taking part in this research project. She entered the study with approximately thirty years of counselling and social work experience –“I'm an oldie” she laughed as we began our interview. Her years of experience and strong clinical intuition often guided her supervision sessions but posed challenges to the supervisees who were not as advanced. Throughout her initial year of providing supervision, Monica experienced some challenges within the supervisory process. However, she relied on her own accrued knowledge of psychotherapy, as well as her spiritual understanding in life to guide her interventions and work through the challenges posed in this new role.

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Perhaps most significant in relaying the value Monica placed on quality supervision and the importance to the field of psychotherapy is her final contemplation of the interview:

I wish I'd had more good supervision. I think it would have made a big difference in how I'd started out. It would have given me more support and nurturing along the way and I don't think I got that, so ... Yeah. It makes me see what I've missed. (Monica).

“Not Your Typical Supervisor”: Michelle’s Journey of Becoming a Psychotherapy Supervisor

Participant	Gender/ Age	Supervision Training	Supervision Setting	Educational Experience	Engaged in Journaling Process	Supervisor Experience at Start of Study
Michelle	Female, 58	Formal Course	Private Practice	Masters graduate	Yes	Early Novice Stage

Michelle’s journey of becoming a psychotherapy supervisor is perhaps most unusual. Having practiced psychotherapy in three different countries, she has had to prove on several occasions her competence to meet accreditation standards. With over 24 years experience as a psychotherapist in different countries, Michelle did not only rely on her accrued wisdom in the field when beginning her journey as a supervisor, but also her commitment to ongoing learning, courses, and theories.

This interview took place at Michelle’s private office and lasted approximately one hour. Central topics in Michelle’s initial experience in providing supervision

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included: developing confidence, learning the distinct role of the supervisor, and self-awareness as necessary to the profession. Michelle explained that she originally engaged in supervision training as a means of developing a connection within the field and a sense of identity. She also noted that she experienced anxiety related to competence prior to providing supervision. Michelle highlighted the challenge of distinguishing the boundary between the supervisor and therapist role in her work.

Throughout the course of the interview, Michelle described the various unique challenges in her becoming a psychotherapy supervisor. From practicing in diverse countries to feeling isolated in the professional community, she highlighted novel challenges distinct from the other participants interviewed for this study. Michelle described a sense of self-doubt prior to providing supervision. The challenges posed from isolation, newness to the country, and self-doubt from not being fully versed in psychotherapy supervision literature were addressed for Michelle by taking additional training prior to seeing supervisees.

The value of caring for the person and professional was highlighted by Michelle as being particularly important to the satisfaction she got in doing her work as a supervisor: “You know the longer I do this work, the more I see that it’s so much about building a relationship”. She explained helpful moments with her supervisees and colleagues that assisted in developing confidence in herself and her interventions as a novice supervisor. While Michelle applied her life values to her work with her supervisees, she also implored new supervisors to “get lots of work as a therapist in first” before embarking in supervising others.

**The Supervisor’s “Buffet”: Jeremy’s Journey of Becoming a Psychotherapy
Supervisor**

Participant	Gender/ Age	Supervision Training	Supervision Setting	Educational Experience	Engaged in Journaling Process	Supervisor Experience at Start of Study
Jeremy	Male, 33	None	Community Agency	Doctoral Candidate	No	Advanced Novice Stage

Jeremy provided a glimpse of the wealth of knowledge, experience, and inherent wisdom seemingly guiding his way through the challenges of becoming a novice supervisor. While he recognizes his journey is far from over –and is hopeful to have many more experiences along the way—Jeremy reflected on the many resources and influences in his life that have helped him become a supervisor. From pop culture to past supervisors, Jeremy’s journey of becoming a supervisor has multiple influences, but generally one goal: to continue his professional development in the field of psychotherapy.

This interview with Jeremy took place on his university campus and lasted approximately one hour. A central focus in Jeremy’s initial experience in providing supervision was the influence of past and present supervisors. Jeremy referred to his work similar to that of a “buffet” with many good things offered to taste. He reflected on supervisory influences of the past and present and how he had adapted and implemented the learnings from prior positive supervisory mentors into his clinical supervision work. While Jeremy explained that he decided to engage in providing supervision as a way to

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continue professional growth and development, he also highlighted the satisfaction gained from witnessing the growth of supervisees.

Jeremy noted past and present supervisors to act as positive supports in his development. He reflected –and reflected often—on experiences in his life in order to treat it like a buffet: to take what is wholesome, appealing, and has been good in the past; leave whatever does not fulfill, nourish, or help others. He shared: “it is almost like being at a buffet. Like oh I like that I’m going to pick that. And I like that and I’m going to pick that ... I try to channel different people.”

While he was challenged to think of hindering experiences, Jeremy explained he was confronted at times with difficult supervisees and initially with his own self-doubt and self-confidence. Jeremy poignantly described his role as something greater than just the next steps in his career. He described being a psychotherapy supervisor as a vocation for him – one that provided him with the opportunity to positively impact those within the counselling profession and contribute to a sense of meaning in his life.

With Curiosity Come Great Learnings: Brandon’s Journey of Becoming a Psychotherapy Supervisor

Participant	Gender/ Age	Formal Supervision Training	Supervision Setting	Educational Experience	Engaged in Journaling Process	Supervisor Experience at Start of Study
Brandon	Male, 35	None	University training program	PhD graduate	No	Advanced Novice Stage

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Brandon entered this research study as one of the least experienced psychotherapists. Brandon was quite clear that there was more to learn for him as both a counsellor and supervisor. He consistently described a sense of curiosity that fueled his development as a supervisor. While he was faced with many new challenges in assuming the role of supervisor, his love of learning and curiosity helped him approach any conflict with openness and willingness to grow.

This interview with Brandon took place over the phone and lasted approximately an hour. Central topics in Brandon's interview included: satisfaction in helping others develop, promotion of own personal growth, and an openness to learn new things. Brandon emphasized the value of the supervisory relationship throughout the supervision process. Most notably, he explained how the relational component was necessary for the ongoing growth and development of everyone involved in the supervisory process. Brandon noted that the learning process was complex in nature—for both supervisor and supervisee—and required openness to both theory of counselling and relationships with others.

Brandon talked with enthusiasm about the many personal and professional resources (e.g., personal supervision and the use of theory) that helped during the initial stages of his journey as a supervisor, but perhaps more than anything he highlighted his inherent sense of wonder as being the biggest resource for his own professional growth and development.

Brandon reflected on his journey of becoming a psychotherapy supervisor with awe in the learning that occurred through experience. He used his novice curiosity to his

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advantage in exploring what others know with a sense of openness and excitement. Brandon described his challenges in upholding the gatekeeping role as supervisor, particularly in providing difficult feedback to his supervisees. However, he talked about these challenges in positive terms related to growth. He further described helpful experiences as a novice supervisor related to witnessing the growth of his supervisees firsthand, with a sense of admiration and professional satisfaction. Perhaps most inspiring was Brandon's message to be passed along to other new supervisors highlighting the fundamental –and transcendent—impact one could have while assuming this role:

When you start doing this work, you not only help others develop, but you are also being helped by the work to develop ... So, I think that is my advice #1, is that it is a learning process, so be open to new knowledge, be open to new ways of doing things, of course you will be assessing what works for you, while you are assessing what works for the student, the supervisees.

Counselling Theory and “Care for the Soul”: Victoria's Journey of Becoming a Psychotherapy Supervisor

Participant	Gender/ Age	Supervision Training	Supervision Setting	Educational Experience	Engaged in Journaling Process	Supervisor Experience at Start of Study
Victoria	Female, 36	Formal Course	University training program	Doctoral Student	No	Advanced Novice stage

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In speaking with Victoria, it became evident that her approach and emphasis in clinical supervision was distinct in its dichotomy: considerable value was placed on both counselling theory and the spiritual care of the supervisee.

This interview with Victoria took place over the phone and lasted approximately one hour. Central themes in Victoria's initial experience in providing supervision included: self-awareness, supervisee rapport, and past supervisory experiences. Victoria explained her motivation to take a formal training course on supervision as a means of developing self-awareness, as well as informing her practice. Victoria further noted that her supervision practice prior to training was informed by past experiences as a supervisee. Victoria particularly valued the relationship between herself and her supervisees and that was reflected in: modeling empathy, maintaining openness and safety, and highlighting the "humanness" of the supervisee in the room. Victoria highlighted personal growth challenges in managing the different developmental needs of supervisees, but noted the important role reflexivity played in monitoring this challenge. Victoria's emphasis placed on the humanity of both supervisor and supervisee and brought forward a touching aspect of her supervision: "care for the soul" of self and others.

Victoria had over ten years experience as an Emotion-Focused Therapist prior to beginning her journey as a supervisor. However, she still sought out formal training inline with her counselling theoretical orientation through the American Association of Marriage and Family Therapy (AAMFT). She credited her formal supervision training as being a fundamental resource for her professional growth during these early years of providing supervision. As she stated: "Taking that course was a huge leap or bound for me forward in terms of my professional development." Victoria further explained the

importance of the supervision course from a reflective stance of having the opportunity to better learn about herself, as well as learn theories that would augment her existing clinical intuition: “What I wanted to do was learn more about myself, like who I wanted to be as a supervisor and I think I wanted to be more current on the research on supervision.” While Victoria alluded to the fact that she had many clinical skills solidified when beginning her journey as a supervisor, she attributed the supervision course as being fundamental in developing intentionality to her interventions –something that was helpful to her growth as a supervisor.

Overview of Participant Stories

The six individual interviews conducted for this study provided the participants with the opportunity to reflect in great detail about their early experiences in becoming a supervisor. The interviews offered useful background information for better understanding each participant’s context that has contributed to their journey as a novice psychotherapy supervisor. The brief overview/narrative introduction of each participant was intended to add to the understanding of the emerging themes and experiential processes that are presented in more detail below.

Part 2: Helpful and Challenging Experiences During the Early Years as Supervisor

The novice supervisors who participated in this study were interviewed with the hope of understanding what was most helpful in the initial and formative years of their practice. Of course, in understanding what was most helpful, it became natural to investigate what was least helpful, as well as what assisted these novice supervisors in overcoming these particular challenges. The resulting data from both journal entries and

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interviews highlighted various moments/aspects that were perceived as being impactful by the novice psychotherapy supervisor. The helpful and challenging experiences, as well as supportive resources that facilitated their development are summarized in Table 7 and discussed in greater depth below.

Table 7

Impactful Experiences and Resources in Novice Supervisor Development

Helpful Experiences:	• Feedback/support from professional network • Positive experiences/interactions with supervisee • Feedback from supervisee • Previous clinical practice • Self-reflection (personal and professional) • Deep connection with supervisee (empathic engagement)
Challenging Experiences:	• Interpersonal challenges/difficulties with supervisees/negative interactions • Enacting the gatekeeping role ○ Providing difficult feedback • Lack of confidence/self-doubt • Maintaining supervisory boundaries
Resources:	• Spirituality ○ Use of reflective processes and grounding practices • Professional consultation (supervision of supervision) • Theory/existing knowledge • Formal supervision training/supervision course

Helpful Experiences

All novice supervisors who participated in this study spoke in great lengths about their most helpful experiences. In fact, when asked to describe their initial experiences of providing supervision, most participants used positive terms, expressed high regard and fondly described the work they were doing: “My experience of being a supervisor is very

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satisfying to me. Very satisfying in a sense that I learn and I also help others learn. I see people grow, I see people develop” (Brandon). In particular, the most common elements that were described as being helpful to their practice and development as novice supervisors included: receiving feedback from supervisees, receiving support from those within their professional network, having positive interactions with supervisees, engaging in reflexivity, and feeling connected in deeply understanding their supervisees.

Most notably, the experience of receiving feedback from supervisees –constructive or otherwise—was considered as the most helpful aspect for three research participants assuming the supervisory role:

Over the past month, the experiences which have been most helpful for my growth as a clinical supervisor include receiving feedback from the students ... in terms of how supervision is helpful for them in their development. (Monica)

Unsolicited feedback from supervisee was helpful. (Michelle)

The supervisors who identified receiving feedback as being helpful insinuated that feedback allowed them to gauge how to structure their supervisory interventions. Also, feedback from supervisees appeared to increase the level of confidence in their professional role as a novice supervisor.

Similarly, four of the six participants found positive experiences in receiving feedback through professional consultations—or supervision of supervision—to be particularly helpful in their initial experiences of providing supervision. Specifically, receiving feedback and support in validating their decisions as a supervisor appeared to be positively impactful in reducing anxiety and increasing a felt sense of competence:

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I wasn't sure how able she was actually to take on the case that she had and I did seek out supervision of supervision myself. And that helped. To know that that's there is great. I just went for the one session but it was very helpful and I thought 'yup, I would go back if I needed that again'. (Michelle)

Umm, actually what was really helpful was being given the green light to do it. Because I really wanted to...when you get the support of your supervisor, it's a nice feeling. (Alexander)

Validating and supportive feedback from professional consultations certainly appeared to be most helpful for the participants during times of greater uncertainty. Although the research participants entered their professional consultation with a general understanding of necessary actions to take in supervision, the consultation appeared to augment confidence and provide a helpful sense of support while assuming the new role.

While receiving external feedback was considered helpful, the use of various internal strengths and skills were also deemed particularly facilitative in the development of the novice supervisor. Most notably, participants highlighted reflective experiences, to be most helpful during their initial experiences:

The reflection piece helped because it helped me sit back and go 'Ok. This has to happen and I somehow have to get this to happen, so what do I have to pull out of myself to...?' (Alexander)

Furthermore, most of the participants found their use of empathy and deep understanding of their supervisees to positively impact their practice as a novice supervisor. When participants channeled their already existing abilities to empathize and

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reflect, they appeared to experience positive moments of growth through an increased sense of competence:

Experiences which I have found to be the most helpful, which have impacted my growth as a clinical supervisor, are related to the empathy I am feeling for the interns as they start to see their initial clients ... (Monica)

This use of self through empathy appeared to allow participants to meet the needs of their supervisees by recognizing where they were developmentally.

The novice supervisors interviewed for this study spoke with high regard about their relationships with their supervisees. Positive interactions with the supervisees appeared to increase a sense of role satisfaction felt by the supervisor. Specifically, participants highlighted that observing moments of growth in the supervisee was particularly invigorating for their own fulfillment and satisfaction as supervisor:

And I know that when my supervisee... when I told her 'look you're doing ok here', those are the memorable moments actually. Because the beam on her face of 'whoa!' I can see that it matters so much to be told that she's ok; she's going to be ok here. Because she's feeling so vulnerable. (Michelle)

I truly love seeing the interns grow and develop and do find energy in our dialogue. It is exciting to hear them trying new steps. (Monica)

Also, the novice supervisors' intention of passing down their knowledge to newer practitioners appeared to further add to their sense of role satisfaction: "it's almost like being an elder. And owning it, you see" (Michelle). Specifically, four novice supervisors

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spoke about passing on their life knowledge to their supervisees as a means of improving the supervisees' practice. However, it became clear supervisors were acknowledging their professional experiences and were hopeful to have supervisees learn from their past challenges: "... I believe that the interns are able to learn from my experience (both positive and negative) and perspectives about growth and development" (Monica).

Finally, the supervisors interviewed for this study spoke about their supervisees in very caring and tender terms. They identified caring for the needs of their supervisee both professionally and personally. Most notably, Victoria approached her supervisees in a holistic manner –something that seemingly aided to the development of a safe learning environment for both supervisor and supervisee:

I care about them as a human being and so I care about their spirituality, I care about them emotionally, I care about their physicality, their mental state, umm, and it also informs I think the way that I show them a safe place to make mistakes ... I think my greatest asset is the relationship that I am able to build with the supervisees. And when I say relationship, to me it involves two things: it's the safe place for them to make a mistake, and that safe supportive environment where they know that I do really care for them as a person. (Victoria)

Those research participants who valued positive supervisory relationships appeared to care for supervisee development both personally and professionally. They valued safety in their relationships in order to adequately address various aspects of growth in supervision:

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It's all about learning how to communicate with them and connecting with them.

Because when you do you know that you have. And when they feel supported they're going to rise. When they don't feel supported they're not going to.

(Alexander)

These participants appeared to provide a sense of unconditional positive regard, which ultimately led to an increase in role satisfaction and fulfillment.

The novice supervisors interviewed for this study fondly reminisced on their initial experiences of providing supervision. They appeared to be most invigorated by their interactions with their supervisees with the best intentions of helping their development. All supervisors identified experiences with their supervisees as being particularly helpful to their growth and development as a supervisor. However, negative experiences with supervisees also led to challenges in novice supervisor growth and development explored in further detail below.

Challenging Experiences

While participants emphasized the importance and value of maintaining positive supervisory relationships and a good sense of self as a supervisor, they specified various challenges encountered with professional relationships as a novice supervisor. Most notably, participants pointed out that having negative interactions with their supervisees was challenging to their development and confidence in their role. Challenging experiences identified by participants included: providing negative feedback to supervisees, acting as the gatekeeper of the profession, lacking confidence in self as supervisor, and having difficulties in the maintenance of supervisory boundaries.

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The research participants reminisced on the challenges of navigating the new boundaries posed by the supervisory role. They described the challenge of making the shift from therapist to supervisor. Specifically, they highlighted their already ample experience as clinicians and their ability to quickly assess what was needed by the client to take lead in supervision sessions. They described initially prescribing supervisee techniques, rather than encouraging reflection and learning. As a result, they identified the challenge of balancing the client needs, as well as the supervisees' learning needs, within the context of supervisory boundaries:

I think when I started supervising, what I found challenging was ... what was difficult was not being the co-therapist. Because that was what supervisees really want you to be. It's not that they need it, but they want it. (Michelle)

A challenge for me is probably that I might tell more than ask at times...I think it's part of my excitement and desire to help the client and because it's easy for me to often see the path I want to help the student see it also. (Monica)

Similarly, participants described the novel experience of acting as a gatekeeper of the counselling profession and the challenges that emerged from this new responsibility. Specifically, they described the challenges resulting from the need to provide hard feedback to safeguard the safety of clients and the credibility of the profession:

Yeah and also like the profession's best interest, right? Because I also see myself as a bit of a gatekeeper to the profession. So I don't want to graduate them and then find out that they have been doing things unethically or have breached some

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ethical considerations along the way. Like I also want to make sure that I'm also maintaining the integrity of our profession. (Victoria)

Ethics. For sure. You know, what is ethically umm fair. For the client. And if that means that the clinician isn't allowed to see the client, that is ok. Because there is something that is not ethically occurring that should be within that relationship, so that always guides me. (Monica).

Participants described their supervisory responsibilities of ensuring therapist development to be both helpful and challenging at times. While many participants described entering the role with a desire to pass on their knowledge to others, their confidence as supervisor appeared to be challenged when they were responsible for providing corrective—or what was perceived as negative—feedback to their supervisees. Although the participants justified the necessity of these experiences, the experiences were nonetheless challenging:

You will be in a relationship with a person, a personal and professional relationship, but um, its not always going to be a happy relationship. (Brandon)

Finally, participants described challenges in not only maintaining the boundaries of being a supervisor with a gatekeeper role, but also their own transition and journey to assuming the new responsibilities of supervisor:

It was a little overwhelming when I first started because like you go through it as a student, but then, all of a sudden you're responsible for a lot more, right? So it was an adjustment. (Alexander)

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The sense of confidence in this supervisory competency appeared to be something that was very much in the development stages for the participants and not yet fully assumed in their identity of being a supervisor:

Hmm. It's funny, as you say that... my journey to arrive here, I haven't actually sat down and said to myself 'Michelle you are a supervisor' actually. Until I said it right now! [laughter]. I think of myself as a psychotherapist who does a bit of supervision ... I'm nearly there but I'm not there to own that. You know, to own that competence. That identity I suppose. (Michelle)

While one participant referred to their supervisory role in definitive terms, the other participants were more tentative in truly seeing themselves as the supervisor. However, the majority of participants described a fluctuating sense of confidence as they encountered challenges throughout their initial experiences as a psychotherapy supervisor.

Resources

Throughout the first years of practice as a supervisor, various resources were highlighted as being most helpful to overcome challenges and thus, facilitate growth. Four of the six participants described the challenges encountered as initially reducing their levels of confidence, creating uncertainty and leading to seek external resources and assurance from more experienced professionals: "I wasn't sure how able she was actually to take on the case that she had and I did seek out supervision of supervision myself. And that helped" (Michelle). Receiving supervision of their supervision provided support and was acknowledged as an important resource that facilitated novice supervisors' growth and development.

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It is important to highlight that when participants engaged in reflective practices and were guided by their spirituality, they indicated a greater ability to make sense of the challenges and essentially, grow. The use of meditation, related grounding practices, and inner resources appeared to allow the participants to gain perspective and better understand themselves and their supervisees:

I meditate often and reflect upon my experiences with others on a daily basis. This gives me perspective. I also receive my own supervision, which helps me greatly in understanding what my supervisees are experiencing. (Alexander)

Meditation helps me as a therapist and supervisor, reflection and reading also help. (Michelle)

As mentioned previously, four of the six research participants indicated seeking out professional consultation as a professional resource to guide their supervisory interventions. The use of this service was described as being particularly helpful in gaining confidence in their decision-making skills.

Also, participants described drawing upon their own clinical knowledge and prior experience as a helpful resource in guiding their work with supervisees:

I think my strengths are attributed to my 24 years as a therapist. (Michelle)

Age is another issue that helps as well, you see. We do I think become wise with age, you know. Especially doing this work because you meet all kinds of people all the time, so yeah. (Michelle)

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In addition to years of clinical experience, some participants also identified the use of theoretical knowledge to be a particularly helpful resource during their initial years of supervisory practice. Particularly when working with more novice supervisees, they described that their ability to draw upon theory to teach and eventually guide their supervisees was a helpful resource in grounding their supervision in a particular framework, while helping them reduce their anxiety:

I have a good grasp of psychodynamic process, which enables me to interpret the clients that are presented to supervision. This, I feel helps the students see what I see. (Alexander)

What has been helpful this month was the revisiting of theory and participating in a supervision of supervision consultation ... Theory can be a good container for anxiety in my case. (Michelle)

Most notably, the two participants who completed training on supervision prior to engaging in providing supervision indicated how valuable it was for their confidence, and awareness, as well as for the refinement of their practical conceptualization skills:

‘Yeah. I can do this.’ That’s what I felt. And before the training I wouldn’t have felt that. I kind of knew it on an intuitive level but I don’t think I would have settled as a supervisor and offered that without that training. (Michelle)

I think the [supervision] course really helped to solidify and cement a lot of things I had already felt, but it just sort of gave me a vocabulary for it. It gave me words for it. (Victoria)

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Furthermore, those remaining participants who have not yet engaged in a formal supervision course/training recognized its value as a potential resource that could aid their growth and development:

I think I will know what to change when I take the course. That's my next challenge. Take the course and see how it helps bring light to where I am going.
(Brandon)

Both participants who engaged in formal supervision training highlighted the value of the course taken. They identified the use of theoretical knowledge to structure interventions, as well as having an increase in confidence through understanding. Those participants without formal training often made use of affirmations and resources from other sources, including that of supervisees, professional networks, and personal grounding through connection with spirituality. While every participant highlighted a particular challenge during their initial year of practice, they also identified the importance placed on internal and external resources that guided their practice throughout particularly challenging times.

Summary

The participants interviewed for this study highlighted the presence of helpful moments with supervisees and peer supervisors. They spoke fondly about their experience as a clinician and the confidence that their prior clinical experiences offered in providing supervision. They placed great value on their use of empathy and reflection in helping them navigate the challenging stage of being a novice supervisor. The caring nature of the person of the supervisor was perhaps most evident with the value placed on

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the best interest of the supervisee. All six research participants spoke in great detail about the genuine care they had for their supervisees' growth –both personally and professionally.

Consequently, the research participants spoke with some distress regarding the challenges faced during their initial experiences as supervisor –many of which involved their interactions with supervisees. Nearly all research participants (five of six) highlighted challenging experiences to revolve around conflict with their supervisees. Participants explained that providing negative/corrective feedback to the supervisee was particularly difficult. Also, they explained monitoring their boundaries within the supervisory relationship, as well as upholding gatekeeping standards, to be particularly challenging. As a result, four of the six research participants explained initially experiencing moments of self-doubt and anxiety about assuming this new role.

While professional development for the novice supervisor involved various helpful moments and challenges, the participants interviewed for this study described facilitative resources which aided their growth in the early years of practice. Most notably, professional consultations and theoretical knowledge were described as being helpful tools to provide a framework for practice. However, the use of reflective practices and spirituality to provide a sense of groundedness during a particularly new and unknown time remained to be most fundamental in facilitating growth.

Part 3: Observed Processes Underlying Novice Supervisor Development

The above findings shed light on the most impactful experiences (helpful and challenging) and perceived facilitative resources used by the novice supervisors in this

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study. In addition to these findings, the research participants reflected and shared with the researcher various experiences that were perceived as memorable in the process of becoming a supervisor. These experiences provided an added layer of richness and an understanding about some key processes that the novice supervisors seem to undergo in their initial steps of becoming a psychotherapy supervisor. Although the narrative descriptions were unique to each participant, the underlying processes that captured their perceived sense of development were similar across all cases that participated in this study. These processes are listed and explored in greater depth below (See Table 8 & 9).

Table 8

Underlying Processes in the Development of the Novice Supervisor

1. Developing Confidence in Supervisor Competence
- Including: movement from relying on external validation to inherent wisdom, movement from feeling anxious to more assured, perceived sense of growth stemming from initial supervisory experiences.
2. Increased Use of Self as the Supervisor
- Including: increased use of past work/life experiences to inform supervisory work, increased use of personal qualities in supervision (empathy, openness, understanding).
3. Finding Guidance in Spirituality and Reflective Practice
- Including: increased self-awareness and reflexivity, increased use of reflective practices and spirituality to inform practice.

The novice supervisors interviewed for this study described various processes of growth and development that underlined their initial years of practice. Perhaps most notable, research participants described: a sense of growth through increased confidence in their supervisory competence, increased use of self as the supervisor, and finding

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guidance to encourage growth through their spirituality and reflexivity. These processes emerged from participants' experiences in capitalizing on helpful moments, navigating challenges, and making the most of available resources—both external and internal—to facilitate their growth and development as a supervisor.

Table 9

Underlying Processes of Development by Participant

		Jeremy	Victoria	Alexander	Michelle	Monica	Brandon
1. Developing Confidence in Supervisor Competence	Movement from external validation to internal wisdom	✓		✓	✓	✓	
	Personal growth from academic learning	✓	✓		✓		✓
	Movement from anxious to relaxed	✓	✓	✓	✓		
	Personal growth from supervisory experience	✓		✓			✓
2. Increased Use of Self as the Supervisor							
	Increased use of past experiences to inform supervisory work	✓	✓	✓	✓	✓	
	Increased use of openness to new experience	✓	✓	✓	✓	✓	✓
3. Finding Guidance in Spirituality and Reflexivity							
	Increase in self-awareness	✓	✓	✓	✓	✓	
	Increased use of reflexivity and spirituality	✓	✓	✓	✓	✓	

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An in-depth presentation of emerging process themes follows:

Process 1: Developing Confidence in Supervisor Competence

The first process of development identified in the data collected throughout this research study involved a sense of increased confidence in supervisory competence. Based on the collected data, the novice psychotherapy supervisor was tasked with mastering the skills needed to engage in this unique clinical competency. This process necessitated the novice psychotherapy supervisor to develop new skills, while channeling existing strengths and resources to assist in the professional transition. While the participants may have entered the role of supervisor with a solidified competence as a psychotherapist, their sense of trust in self as a supervisor was still being formed based on their initial experiences. As such, various observed emerging subthemes included: movement from relying on external validation to inherent wisdom, movement from feeling anxious to more assured, and a perceived sense of growth stemming from the initial supervisory experiences.

Validation for their work appeared to greatly influence the novice supervisors' sense of confidence. Most notably, three of the six participants initially identified external validation and feedback to be particularly helpful to their growth: "When you get the support of your supervisor, it's a nice feeling" (Alexander). Furthermore, feedback from the supervisees also appeared to be important in improving confidence in their own sense of competence. Participants who completed monthly journal entries over a period of four months (Alexander, Monica, and Michelle) highlighted feedback from supervisees as being helpful for their development throughout their first months of supervision practice. However, when asked what was helpful nearing the end of the

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study, these participants identified their own theoretical and practical knowledge and internal resources as being most helpful:

I have a good grasp of psychodynamic process, which enables me to interpret the clients that are presented to supervision. This, I feel helps the students see what I see. (Alexander)

I am reflecting on how my interaction with my supervisee influence the intersecting web of relationships; therapeutic, professional and personal in which we both participate. Theory can be a good container for anxiety in my case. (Michelle)

These research participants appeared to make a shift from valuing external validation for their work, to relying on their internal knowledge related to the role. Rather than taking a passive role of receiving feedback to validate their work, they began to adopt a more active role in processing experience through reflection and integration of already existing knowledge and theory.

Experiencing a shift from feeling anxious to assured –or more competent- became another emerging process theme within the person of the supervisor. Most notably, four of the six research participants referenced initial feelings of self-doubt or anxiety when assuming the role of the supervisor:

I think when my advisor basically said we have this intern, one of the senior supervisors was going to take it, but she has no room, I want you to do it. And I was thinking like: ‘really?’ So maybe there was some early on doubt. Like do you

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really think I'm ready for this? Because I don't know if I am. But it turned out okay. I guess I was. (Jeremy)

These participants noted initial experiences of self-doubt related to their competence in providing supervision. While the experience of anxiety was present for the majority of participants, those who identified initial anxiety also highlighted a reduction in anxiety, through learning to embrace their limitations and shortcomings and become more open:

I see myself as becoming more relaxed and reflexive... I make sure I admit my limitations to the students. I do my best to be transparent. (Alexander)

And as I learn this, I feel that growth and it really goes to my professional self-esteem from day to day, from time to time, from student to student, from group to group. I feel more confident; it is a growing field, a growing process, in a positive way. (Brandon)

While time and experience in practice as a psychotherapy supervisor tended to assist in reducing anxiety, participants also noted personal work through reflection, a professional support network, and the use of theory to further assist deal with initial feelings of self-doubt and anxiety. Most notably, four of the six participants referred to their previous clinical experiences as an existing strength and a mitigating factor to levels of anxiety. These participants appeared to revisit their existing knowledge and skillset to mitigate feelings of anxiety: "I think my strengths are attributed to my 24 years as a therapist" (Michelle).

Process 2: Increased Use of Self as the Supervisor

The increased use of self as a supervisor highlighted the importance and uniqueness of each participant in the study. The person of the supervisor became progressively more instrumental in the course of supervision process. Inherent skills, abilities, values, and personal experiences were vastly different amongst novice supervisors, yet they played equally important roles in supporting the journey of becoming a clinical supervisor. Throughout this study, it became evident that the participants increasingly relied on many of the inherent skills and qualities they possessed to guide their supervision sessions. There was an increased use of self of the supervisor that was evidenced through: an increased use of personal qualities and attitudes (empathy, openness, understanding, non-judgmental stances) to navigate challenging experiences in supervision, as well as an increased use of past work/life experiences to inform supervision practice.

All six participants commented on valuing the characteristic of openness in their supervisory work. It became clear that the quality of openness was positively regarded by novice supervisors as a means of developing and growing the therapeutic relationship with their supervisees. While the participants referred to how they experienced or expressed openness differently, they all described it as a necessary quality of a supervisor, and one that assisted in developing strong rapport with supervisees: “I believe that my strengths are that we as a group continue to have a very trusting relationship and my openness and lack of negative judging has helped to create a safe environment in which to learn” (Monica). The research participants positively described the characteristic of openness as a way to develop strong rapport and build trust amongst supervisees.

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While openness was referred to by all participants involved, other related qualities were considered helpful in engaging in the role of the supervisor. Most notably, participants described their use of self in the supervision sessions to humble the more typical notion of the supervisor as expert on a hierarchy. These participants explained approaching supervision with an increasing sense of humility and genuineness toward their supervisees:

The biggest change for me has been being able to say I can demystify the role of the supervisor and just be a human. Just be okay sometimes with not knowing and just saying to my supervisees: Ok lets figure this out together. (Victoria)

I think as a supervisor we have to be transparent. I don't know everything but together we can figure it out. (Alexander)

I think a big piece of supervision for me is to model for my supervisees congruence which is a Satir term... (Victoria)

Participants described a shift in their supervisory work where modeling core therapeutic conditions became fundamental, as opposed to teaching skills or even receiving feedback from supervisees.

As a result, participants tended to bring their life experiences –both personal and professional—into the supervisory context:

Well I wanted to give back. Like I have a lot of experience in mental health. I have over ten years experience in mental health, as a social worker and as a counsellor or therapist ... how I've learned to engage with people, I have a lot to

offer. People want to do this for a living, so it's given me a lot of perspective and also confidence because now I'm at this stage where I can actually you know supervise and teach. (Alexander)

So, both in my therapeutic work and in my supervisory work it comes up all the time and I will discuss beliefs with people ... I don't know. I can't imagine living without some spiritual framework, actually. (Michelle)

While Alexander was able to identify his increasing ability to give back in the role, Victoria also highlighted various skills that utilized what she brought into the room as the person of the supervisor: “and maybe it is because I am an EFT therapist by default ... that when there is an emotion in the room that my students bring in I find that those are the most palpable moments in supervision” (Victoria).

The use of self of the supervisor supported both the growth of supervisees as well as the further growth of the supervisor. This could best be summarized by Brandon: “When you start doing this work, you not only help others develop, but you are also being helped by the work to develop ...” (Brandon). The person of the supervisor appeared to gain a more active role with experience –both in how they contributed to supervision, as well as how they were affected by it.

Process 3: Finding Guidance in Spirituality and Reflexivity

Finally, spirituality in relation to engaging in a reflective practice emerged as a relevant and overarching process theme connected to professional development. The notion of spirituality was approached in an inclusive manner, where participants' personal understandings of spirituality were explored throughout the interview process.

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Spirituality was considered to be a reflective process, encouraging connection to self and others, having a greater understanding of actions, a sense of meaning, and a personal awakening. Various subthemes that emerged under this process related to supervisor development included: an increased sense of self-awareness/expanded sense of self, as well as an increased use of reflexivity and spirituality in supervision practice.

Throughout this research study, the notion of spirituality was approached with a tentative curiosity. There appeared to be an increase in self-awareness of the supervisor, and an increased use of reflexivity and spirituality. Five of the six participants highlighted self-awareness and reflexivity to be important aspects to their work as supervisors, their growth as professionals and people, and finally, contributing factors to their understanding of spirituality.

The notion of self-awareness and reflexivity was identified by five of the six research participants as being important to their spirituality, professional growth, connection with supervisees, and thus, the supervisory role. Although these participants approached their reflective practice differently, their overall goal of engaging in reflective practice and the importance they assigned to it remained to be quite similar. Reflexivity was considered to bring more awareness to self and actions of others, as well as positively contribute to novice supervisor development and growth through expanding their ways of viewing the situation.

Reflective practice was often described by the participants as an ongoing process of self-discovery through asking oneself questions, remembering and exploring the day's experiences, and processing past experiences in the present moment to impact future

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actions. The participants described improving their understanding of themselves and their values, as well as their work with supervisees, through engaging in their own form of reflective practice:

Yeah. Reading, thinking, writing, asking yourself what do I really believe? And why do I believe that? And where is that belief coming from? Is that just conditioning? (Michelle)

[Q: What would you do differently?] Take a step back and reflect upon my own experiences with my first client and use that to help myself and the student move through it. Emphasize it as a growing experience. (Alexander)

These participants highlighted reflective practice as a tenet central to their current supervisory practice, but also as a means of processing their experiences in the new role for future consideration.

While reflection has been deemed as fundamental to growth in practice, participants alluded to the increased use of reflective practice with time and experience as a supervisor:

I would say I am more aware of perhaps the interventions I am using and to what end and what therapeutic means I am using them because before, I still had that awareness but now I feel like I am supervising my own students there is another added layer of awareness. (Victoria)

I see myself as becoming more relaxed and reflexive... I make sure I admit my limitations to the students. I do my best to be transparent. (Alexander)

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The supervisors appeared to engage in more reflective processes when initial anxiety and self-doubt subsided, giving space to reflect on the challenges and make sense of their supervisory work.

With time and experience mounting as a supervisor, participants appeared to shift their focus from attaining specific clinical objectives to positively impacting their supervisees' life and beyond. This shift was accompanied by a sense of wider meaning, fulfillment and service that supported the development of a more expanded and transcendent view of the process:

It's a neat feeling to think that I've been a part of bettering someone's life so that they can go and better someone else's from a counsellor and client context.
(Jeremy)

So to me [spirituality] informs the way I do my supervision. It informs the way I care for my students, the way I really truly care about them and who they are and who they are becoming. And it also informs the way I care about our profession. Because to me it is spiritual work as much as it is emotional or mental or psychological work. (Victoria)

The participants began to view human connection as a form of spirituality in terms of how one's actions may greatly impact other people:

Like my spirituality is a resource to me in terms of working with my students and giving me energy to be with them and um hopefully giving me the right words to say to them and to give them what they need in the moment. Like to me, my

spirituality it feeds me. So um it keeps me going. And hopefully, my students can feel that from me. It's like an outflowing I guess. (Victoria)

Also, two of the participants in this study identified that a positive connection with others first began with a positive connection with themselves and ability to be with what is present, even fear or anxiety:

To me, it is all about a relationship and umm so it starts with me, my relationship with myself, which usually goes well, and how I relate to other people or how I don't. That's what I teach my clients. That's the first thing I teach my clients. (Alexander)

We have to be able to sit with ourselves and our own minds and face our own minds ... and yeah. The anxiety and the fear that might come up. And face our own feelings. However we learn how to do that. Face the reality of our own minds, if you like. (Michelle)

These participants discussed spirituality and connection with others as beginning primarily a positive self-relationship, and then a relationship extending outwards. According to one participant, the positive self-relationship allowed for thorough self-awareness that facilitated giving to others.

Summary

Throughout this research process, the participants involved highlighted a variety of helpful moments, challenges, and supportive resources during their initial experiences of change and growth as novice psychotherapy supervisors. The participants took the opportunity to explore their experiences in great depth and provide a complex and

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humanistic understanding of the experience of becoming a psychotherapy supervisor.

They provided insight into their challenges, as well as expressed an understanding to their felt sense of change and growth.

Most notably, the majority of participants emphasized challenging experiences with supervisees as being particularly impactful on their growth as supervisors, necessitating ongoing reflection, and seeking additional supports through the use of theory or professional consultation. These participants valued external feedback from both supervisees and peers to assist in overcoming challenges experienced during these early stages. While there initially appeared to be great value placed on external validation, participants appeared to eventually shift toward trusting their own internal strengths and resources –a change facilitated by an increase of use of reflective practice. All participants referenced reflective practice and their spirituality as factors that guided their work in the field, as well as their deeper connection with others.

All participants spoke highly of the value they placed on supervisee relations, development, and growth. The participants discussed their role with a sense of great responsibility, accomplishment, and care beyond job description: “So I think of it as a vocation –the work as a counsellor. And I’ve never really thought of it in terms of supervising. But ... it’s about a vocation.” (Jeremy).

CHAPTER 5: THEORETICAL PROPOSITION

“Who looks outside, dreams; who looks inside, awakens.”

— Carl Jung

The findings of this research project outline six individuals’ initial experiences in the role of psychotherapy supervisor. Each participant provided their account of helpful and challenging moments, as well as the various strengths and resources that aided them in navigating this new and distinctly different role in the counselling and psychotherapy profession. While each account was unique in some regards, an overall pattern of development emerged through the data. Most notably, it became evident that the participants engaged in a cycle of development aided by reflection. Throughout this cycle, participants were confronted with various challenges in the supervisory role, and were required to make sense of the experiences prior to continuing on their developmental journey.

As a result of this observed cycle of development, a model emerged of how novice supervisors rise to meet challenges and restore trust in their clinical abilities, with the end result of developing an integrated sense of competence as supervisor. This chapter explains the proposed model in greater detail and its implications to theory and research. Finally, the practical implications and applications of the model are presented in the form of a supervisor training guidebook related to the findings of this study and the review of literature on the topic.

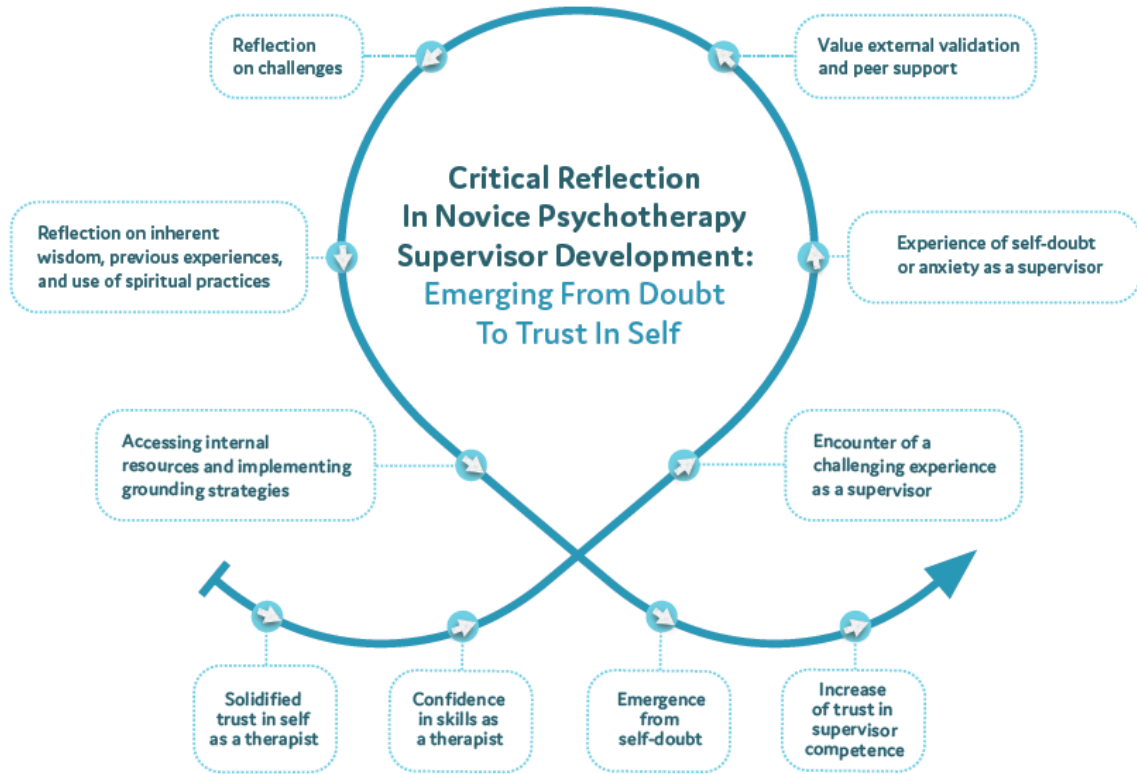
Novice Supervisor Development Model: Using Reflective Practice to Weave Confidence in Supervisor Competence

The themes observed throughout this research project suggest a specific process of development experienced by novice psychotherapy supervisors. While the experiences of the participants were not all uniform, there were various similarities in experience that highlight a possible process of development. Most notably, those who participated in this research study indicated an initial experience of self-doubt or anxiety related to their capacity to provide clinical supervision. Most of the participants explained beginning their journey as clinical supervisors with the comfort of already having many years of clinical experience as psychotherapists.

However, even with this experience, these participants initially tended to rely on external validation and support when feelings of self-doubt arose. All participants of this study indicated experiencing at least one instance of challenge by their supervisee, and essentially, experience doubt in their decision-making. These participants tended to rely on external resources initially, including: feedback from the supervisees, peers, or professional consultations. Only upon critical reflection, returning to their preexisting years of inherent clinical wisdom, taking a reflexive stance, and using spiritual grounding practices did they mitigate feelings of self-doubt to begin to develop trust in their abilities to navigate this novel role (See Figure 1).

Figure 1

Critical Reflection in Novice Psychotherapy Supervisor Development: Emerging from Doubt to Trust in Self

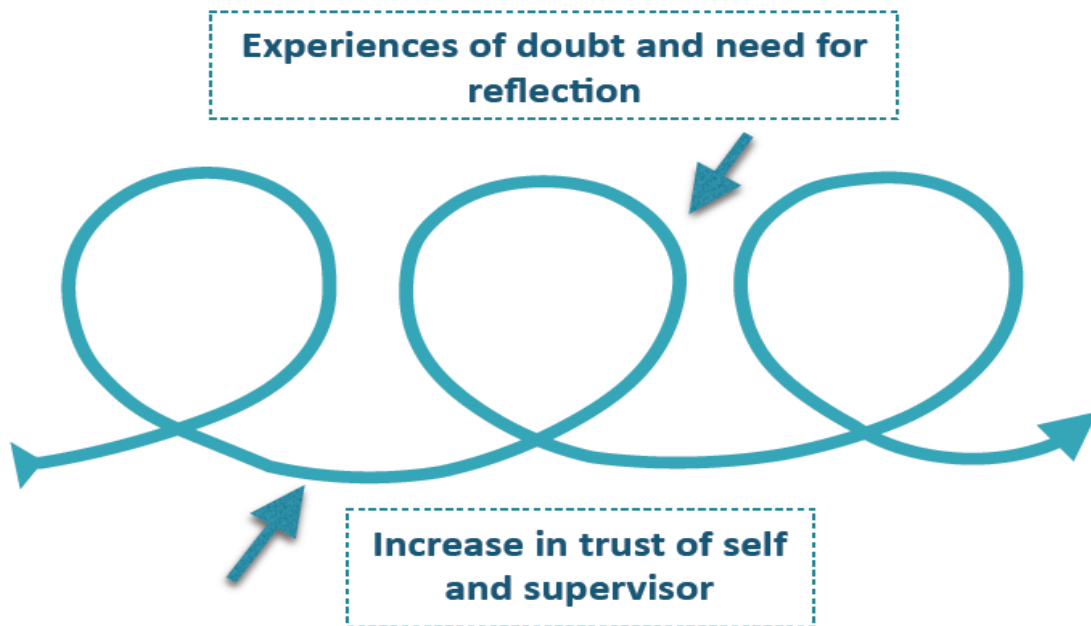


This cyclical process of critical reflection to build trust in existing skills resembles a loop, whereby the participants regress somewhat into an area of doubt, and only upon reflection from a reflexive stance, propel forward into the supervisory role with increased confidence and trust in self. While they enter the loop with a solidified identity as a psychotherapist, the novel role and various challenges as a new supervisor entails accessing both external and internal resources to reflect and make meaning from the new experiences. The identified increase of trust in self as supervisor highlights moments where confidence in the supervisory competence is increased. In these moments, the novice supervisor acts from a more reflexive and autonomous stance. Furthermore, this loop tends to repeat itself in an ongoing weave, as the complex nature of the supervisory

role requires ongoing reflection and meaning making of presenting challenging experiences (See Figure 2).

Figure 2

Reflective Weaving Processes in in Novice Supervisor Competence Development



This ongoing process of weaving meaning and experiences necessitates the novice supervisor to critically reflect on past experiences, practical knowledge, and current challenges in an effort to make overall sense of the intricate role. The critical reflective process challenges the supervisor to reflect upon past experiences and existing inherent wisdom, while integrating new experiences and knowledge, together weaving a tapestry that is unique of each assuming the role of the supervisor. The supervisor is tasked with making sense of experience, as well as how their held worldviews might impact that of the other involved in the supervisory process.

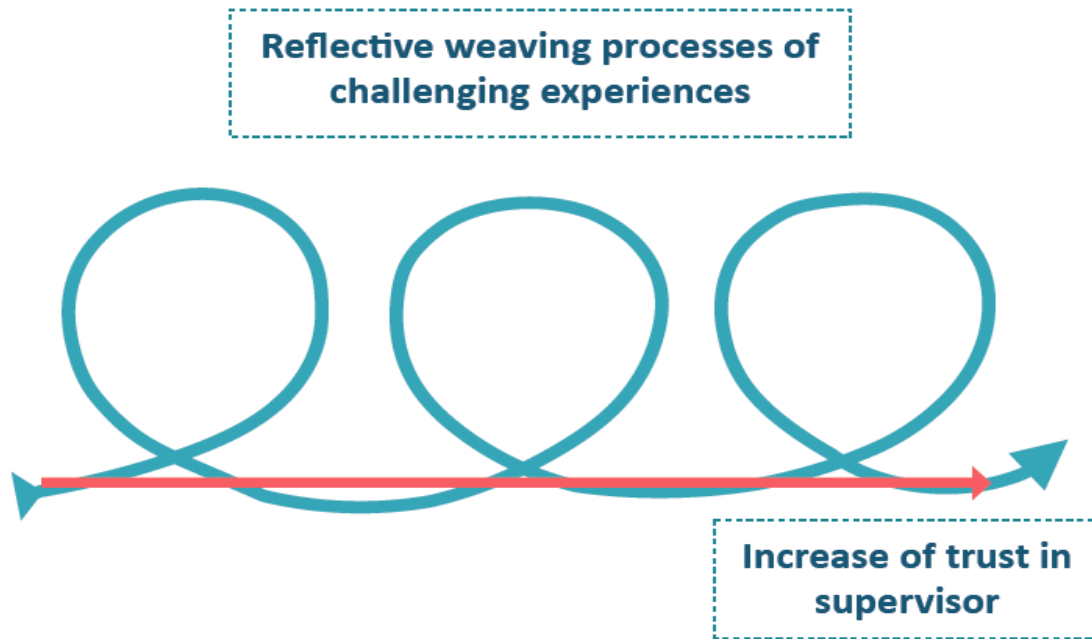
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By accessing inherent wisdom, in addition to processing new experiences in the role, the novice supervisor tends to reduce anxiety through deriving meaning from challenging experiences and trust in existing knowledge. The “tapestry” that is woven is unique for each supervisor, as different life experiences and accrued wisdom are interlaced, but the ultimate outcome remains the same: an increased sense of competence and trust in self as the supervisor.

Weaving an understanding of experience to increase trust in self as a supervisor necessitates the novice psychotherapy supervisor to process present experiences, integrate previous learnings into clinical work, learn nuances of the role through theory or supervision/consultation, developing a stronger sense of autonomy, and finally, process the many emerging emotions that accompany assuming a new and challenging role. As such, this weaving process asks new supervisors to monitor and integrate aspects of their self in a holistic manner, taking into account cognitions, emotions, sensations, and their spirituality. This process tasks the supervisor with taking a critical stance to experience whereby they question and reflect upon the multiple facets of the experience, as well as their personal role and impact on the other involved. When novice psychotherapy supervisors can take a reflexive stance, ground themselves through spiritual practice, and overcome challenging experiences, they are able to develop an integrated and more autonomous sense of trust in themselves as a supervisor – an experience similar to that of the fourth order consciousness applied by Kegan (1994) to professional development (See Figure 3).

Figure 3

Grounding Experiences in Reflective Weaving Processes in Novice Supervisor Competence Development



The above diagram highlights the observed phenomenon experienced by novice supervisors throughout this study. The weaving loops represent the ongoing process of reflecting upon experiences of self-doubt as a novice psychotherapy supervisor. Experiences of self-doubt include uncertainty of knowledge of theory, the supervisory process, interactions with others, as well as an inherent felt-sense. This weaving pattern highlights the process of reflection on various role challenges to accessing resources, make meaning of the situation, and increase trust in self as a competent supervisor.

When there is a felt increase in self-trust, the novice supervisor experiences an integrated and confident sense of competence as a supervisor. They begin to practice with more autonomy from a reflexive stance, while drawing more from their inner

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resources. This experience is represented in the diagram by the red line that intersects the loops in the areas of increased trust. The red line representing a felt sense of competence in the role is designed to intersect areas of trust at the bottom of the weaving pattern. Being placed at the bottom of the weaving loops is further representative of a sense of groundedness in competence and self. As the loops digress from this line, there is less trust in self, and thus, less of a sense of groundedness.

While it would be more than ideal to always be located as a new supervisor on this spectrum of integrated identity, the regression points on the loops provide integral opportunities for reflection on challenges and further promote professional growth. As supervisors experience aspects of life beyond the supervisory realm, their inherent self and wisdom changes, ultimately impacting their understanding of professional work and necessitating ongoing reflection.

This model outlines a potential developmental process specific for the novice supervisor, yet possibly applicable across the professional lifespan of supervisors due to the emphasis placed on ongoing learning processes. It suggests that a solidified competence as a psychotherapist is needed when initially assuming the supervisory role. Also, it highlights the potential significance of a reflective capacity in making meaning of challenges to develop trust in an integrated sense of competence as a supervisor. This preliminary model proposes that the novice supervisor engages in a process of making sense of new experiences, as well as shifting their pre-existing framework to develop new ways of relating to the profession and the other.

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This reflective capacity may allow the supervisor – possibly at any stage—to access internal resources learned from previous areas of the loop, or know when to rely upon various external resources for additional support in navigating challenges. It simultaneously promotes autonomous practice from a reflexive and self-correcting stance similar to that of fourth order consciousness (Kegan, 1994). This necessitates both challenge and readiness to meet the challenge. The above diagram highlights a possible process of encountering challenges, as well as the personal characteristics needed to encourage growth.

Specifically, relational encounters with supervisees were highlighted as being particularly challenging, thus necessitating a reflective capacity to improve the overall supervisory experience. As a result, this model indicates various areas of focus that may assist the novice supervisor in their transition to this new role. In particular, developing a reflective capacity, valuing the supervisory relationship, understanding theories and best practices of supervision as a supportive resource may ease the novice supervisor into the new role and assist in integrating trust in their ability to supervise as an autonomous practitioner.

As a result, the data collected from this study, as well as the emerging model, have been instrumental in developing a practical guidebook on supervision for a central Ottawa community counselling agency's use (See Appendix H). It was designed with the intended purpose of supporting the novice supervisor through possible challenges, as well as facilitating reflective processes in order to integrate trust in their newly forming identities and encourage developmental learning processes. The guidebook is explored in greater depth throughout the remainder of this chapter.

Practical Application: A Guidebook on Clinical Supervision

The participants interviewed for this study provided a subtle glimpse into the early experiences of psychotherapists assuming the supervisory role. While only six participants with varying degrees of clinical experience were interviewed for this study, their interviews and journal entries highlighted various commonalities in experience as novice supervisor. Influenced by the data collected for this study, an introductory guidebook to clinical supervision was developed for use in an agency setting (See Appendix H).

This guidebook was developed taking into consideration the helpful moments, challenges, and supportive resources identified by the six participants interviewed and the key points that emerged from the aforementioned theoretical proposition. The guidebook was designed with the hope of addressing various gaps in training and support, as well as providing practical tools for the novice supervisor navigating the unique challenges of the supervisory role. While it remains a modest collection of information from existing literature and the knowledge that has emerged from this study, it is hoped that it may provide a supportive starting point for ongoing learning, while addressing various role challenges and stimulating a reflective capacity. This guidebook was designed with the intention of fostering exploration of internal and external wisdom for those novice supervisors continuing their journey of development.

This supervision guidebook was developed and written by the researcher, after conducting a thorough review of literature, attending to the findings that emerged from this study, as well as through discussion and reflection with clinical managers and directors at Family Services Ottawa [FSO]. FSO is a community agency employing

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psychotherapists for various counselling related programs, including: general counselling, mental health counselling, LGBTQ specific counselling, and anti-violence programs.

FSO operates from an inclusive and diverse lens with the vision of helping those in the community to live healthy and fulfilling lives. FSO has a vision to develop a sustainable model of supervision within the context of a collaborative learning environment. As such, with feedback from the clinical manager, as well as results from this research study, relevant material deemed most helpful for novice supervisees was compiled for this guidebook was created with the intention of acting as a training instrument and reflective practice guide.

The participants interviewed for this research study provided valuable feedback into the formative experiences shaping the identity of the novice supervisor. Perhaps most fundamental on this journey –and common amongst all participants—has been the value placed on reflective practice, the supervisory relationship, and personal supportive resources. These participants explained these facets as being fundamental to their growth and identity development as a clinical supervisor. The supervision guidebook for use at FSO was developed taking into consideration these emphasized areas of importance. It was written with consideration of the proposed model of supervisor development and developmental learning principles, while taking into account the need for challenges to stimulate growth, reflection to make sense of the challenges, the value placed on supervisory relationships, and ultimately, developing trust in one's self as supervisor. The guidebook developed for FSO is approximately forty pages in length and acts as an introductory resource for the new supervisor, as well as an instrument to ongoing training and development. It addresses the various challenges and resources deemed to be

impactful by this study's participants. A précis of the important areas addressed in this guidebook is presented in the remainder of this chapter.

Reflective Practice

Since reflective practice has been identified in the literature as being particularly important to professional growth and development (McAuliffe, 2006), it is not surprising to note that the research participants interviewed about reflective practice all commented on the valuable role of reflection in their development. When discussing the importance of reflection, the participants explained engaging in various processes of reflection and self-questioning in an effort to develop greater self-awareness into their internal processes. Also, they explained using reflective practices to make sense of dynamics in the supervisee relationship. Furthermore, based on the model proposed from the results of this research, reflective practice appears to be a fundamental component in overcoming challenges as a novice supervisor and in encouraging professional growth and development. Therefore, an introduction to reflective practice processes and theories was deemed a fundamental addition to this manual.

The inclusion of reflective practice was approached from a developmental learning perspective (Kegan, 1994; McAuliffe, 2006). Specifically, the notion of supporting supervisors in striving towards higher orders of consciousness was deemed fundamental to this guidebook, since characteristics of higher orders of consciousness (i.e. openness to various frameworks of thoughts, autonomy, reflexivity, and valuing the perspective of the other) are seemingly integral to the supervisory role and appeared to be valued by the participants of this study.

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Reflective practice was included in the guidebook through a general description of what reflection entails, how one might engage in reflective processes and reflexive stances, as well as potential supervision activities that promote supervisee reflection.

The Supervisory Relationship

Every participant interviewed for this study highlighted the importance of a strong supervisory relationship. Each participant identified challenging moments stemming from their work with supervisees, yet also impactful and positive moments that were formative in their identity development. As a result, sections highlighting important factors influencing the supervisory relationship—and ultimately the effectiveness of supervision—were included in the supervision guidebook for use at FSO. Specific aspects of the relationship that were identified by the research participants as having positive or deleterious effects include: the notion of boundaries, the role of gatekeeping, evaluative processes, conflict in the relationship, and parameters of the relationship. These areas were further highlighted in the guidebook with introductory points of how to best balance this delicate relationship of being both a mentor and evaluator. It was hoped that these sections would begin to address the gaps identified in experience by the six novice supervisor research participants who took part in this study.

Personal Supportive Resources

Finally, when exploring resources that were deemed helpful in overcoming particular challenges posed by assuming this new role, the participants in this research study identified both internal and external resources. Many participants noted their years of clinical psychotherapy experience as being positive for their confidence as a supervisor.

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They suggested their openness, genuine care, and curiosity as being positive supervisor qualities. However, several participants also highlighted the value of peer consultations, supervision of supervision, and having an internalized mentor. As part of this guidebook on supervision, it became important to emphasize the value of seeking out additional support at any stage of the supervisory experience. Based on the data collected, some research participants noted the “humanness” and fallible nature of the supervisor. Once considered the expert, these participants explained that part of being a genuine and open supervisor was having the willingness to be vulnerable and explain when they did not have answers. This revelation accentuated the value of identifying how supervision of supervision is a vital and important aspect to supervisor development, at any stage of their journey. This section was added to the guidebook with the hope of encouraging ongoing learning, while reducing undue pressures of having to be the expert.

Finally, the addition of supervision theories to this introductory guidebook was well debated during its development and implementation. While not all participants emphasized value of supervision theories, many participants highlighted challenges in their early experiences that could have potentially been addressed with knowledge stemming from various supervision theories. For the purpose of this introductory manual, and based on the data collected from the research participants, Rønnestad and Skovholt’s (2013) Lifespan Developmental Model was chosen to be included as a starting point for supervision theory. This model was selected as it provides the novice supervisor with a framework for understanding supervisee needs. Since all six participants highlighted strains in the supervisory rapport as being particularly challenging, this model was considered suitable for providing a means of understanding supervisee needs at different

levels of their development, and thus, an indirect understanding of how to strengthen rapport.

Summary

The participants of this study provided valuable insight into the early experiences of becoming a psychotherapy supervisor. They explored specific processes experienced during the early years of providing supervision that impacted their development and growth as supervisors. The model proposed in this chapter was designed to highlight the cyclical nature of their development and learning. It emphasized the importance of engaging in reflective practice, taking a reflexive stance on learning, and integrating spirituality in an effort monitor the various nuances of the supervisory role.

Furthermore, the guidebook on clinical supervision (Appendix H) was developed for community agency use with the intention of providing an introductory and supportive guide for novice supervisors. While it is suggested that further training be provided, the guidebook was designed with the hope of addressing the basic needs and challenges experienced by the novice supervisor, as derived from the results of this study and the review of the literature. It is hoped that this guidebook's emphasis on reflective practice, the supervisory relationship, and the person of the supervisor may provide novice supervisors –and perhaps supervisors at any stage of development—with basic guidance and support to navigate the ongoing loop of development in so that an integrated sense of trust, autonomy, and competence as a supervisor may be further honed.

CHAPTER 6: DISCUSSION AND CONCLUSIONS

“One day, in retrospect, the years of struggle will strike you as the most beautiful.”

— Sigmund Freud

This research project was designed with the intention of gaining a better understanding of the initial experiences of becoming a psychotherapy supervisor. Specifically, this research project was guided by the primary research question: What particular experiences do novice psychotherapy supervisors perceive to be most helpful or challenging for their professional development and growth?

The findings of this research project have provided a valuable starting point for ongoing discussion. Through interview transcripts and journal analyses, the six research participants involved offered a meaningful glimpse into the inner experience of being a novice psychotherapy supervisor. While each participant highlighted unique experiences, helpful moments, and challenges, there appeared to be an overall trend amongst participants of an increase of trust in their selves as supervisor garnered through spirituality, reflection, a reflexive stance, and accessing preexisting, internal resources. Exploring the identified challenges in their initial supervisory experiences, participants highlighted various learnings and means to overcome the challenges, which ultimately aided in the development of their professional competence in this newly assumed role.

This chapter presents a review of the findings of this study, as well as an in-depth discussion of the helpful and challenging aspects experienced by novice supervisors. The specific processes observed to be experienced in the initial stage of providing supervision will be reviewed and explored. Also, this chapter will explore the limitations of the study,

future directions for research, and implications for supervisor training programs. Finally, the results of this study will be explored in relation to the ultimate goal of contributing to the field of counselling and psychotherapy in achieving a greater understanding of the needs of novice psychotherapy supervisors during a particularly formative time in their professional development.

Discussion

Brief Overview of Findings

Through the course of this study, six novice supervisors were interviewed with the hope of gaining an understanding of the experiences common to the early stages of becoming a psychotherapy supervisor. Helpful moments, challenging experiences, and resources that aided growth were explored. In analyzing the data collected for this study, a pattern of development emerged that highlighted a potential process of growth experienced by the novice psychotherapy supervisor.

Most notably, research participants highlighted a variety of *helpful moments* during their initial experiences of providing supervision, including: receiving feedback or support from their professional network, having positive interactions with supervisees, receiving feedback from supervisees, having a wealth of prior clinical experience, engaging in self-reflection, and having a deep connection and rapport with their supervisees. Research participants considered these aspects to be most helpful in developing their supervisory competence and confidence in the role.

Participants also identified and explored a variety of experiences they found to be *most challenging* during their initial stages of providing supervision. In particular, all

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participants interviewed for this study highlighted interpersonal challenges with their supervisee to be most challenging in nature. Also, upholding the gatekeeping role, lacking confidence in self, and maintaining supervisory boundaries were identified as additional challenges experienced during this early and formative time.

While challenging moments were identified by many participants, various *supportive resources* were explored in relation to overcoming said challenges and thus, facilitating growth. Most notably, participants indicated using spirituality and various grounding practices to mitigate the negative effects of challenges and encourage growth. These participants also relied on professional consultations, their understanding of theory to provide a framework for practice, and supervision courses/theory to guide their work during particularly challenging times. These resources aided participants in meaning making, in an effort to encourage growth and develop an understanding of the supervisor competence.

Participants discussed and explored the various helpful experiences and challenging moments they encountered in great depth. They identified resources that aided growth, as well as openly discussed their fluctuating levels of anxiety and self-doubt. As a result, processes of growth emerged from the data and the participant experiences. The observed processes of growth included: developing an increased sense of confidence in supervisor competence, an increased use of self as the supervisor, and finally, an increased use of spirituality and reflective processes to encourage growth. As a result, a theoretical proposition was developed in an effort to offer further explanation to the participant experiences of growth observed throughout the course of the study (Figure 1). This theoretical proposition highlighted the processes observed to be

experienced by the participants whereby initial challenging experiences tended to decrease confidence in self as supervisor. Only upon critical reflection, engaging in a reflexive stance, and the use of spirituality and grounding practices was meaning garnered from challenging moments, leading to overall professional growth and an increase of trust in self as supervisor.

The findings of this research project bring to light important considerations and contributions to the current state of the literature on the experience and development of the novice supervisor. These findings are discussed in more detail below.

The Theoretical Proposition and Models of Supervisor Development

The proposed model of supervisor development (Figure 1) offers a tentative explanation to the observed phenomenon of novice supervisor growth in a novel and distinct manner. Most notably, this theoretical proposition outlines participants' perceived growth as a micro-process – an ongoing, fluctuating, and continuous experience of development that may occur or repeat at any point in the supervisor's professional practice. This micro-process outlines a repeated pattern of development through the encounter of challenges and use of spirituality and reflective practice to make meaning and experience growth.

This proposed model is particularly important due to its assertion that the experience of growth and increased trust in supervisor competency may possibly occur earlier and more frequently than previously considered (Alonso, 1983; Bernard & Goodyear, 2014; Hess, 1986, 1987; Watkins, 2012). Many supervisor development models are stage progression models characterized by their described movement from

uncertainty to increased confidence in the supervisory role (Alonso, 1983; Bernard & Goodyear, 2014; Hess, 1986, 1987; Rodenhauser, 1994; Stoltenberg & McNeill, 2010; Watkins, 1993; Watkins, 2012). However, the proposed model (Figure 1) outlines the observations made throughout this study that this movement from self-doubt to confidence may occur in the beginning stages, but is not necessarily a linear form of progression. Specifically, participants were observed to encounter –and process—various challenges throughout the novice phase, suggesting novice supervisor growth is more cyclical than linear in nature. Therefore, the theoretical proposition highlights micro-processes of growth that may occur throughout the duration of the novice supervisory experience and may extend beyond this early stage. This notion further adds to more recent supervisor development literature that suggests development may be better investigated through dimensions as opposed to stages (Goodyear et al., 2014; Heid, 1997).

Furthermore, existing models of supervisor development have been critiqued as lacking an understanding of how supervisors transition between proposed stages of development (Barker, 2014; Watkins, 2012). The supervisor development model proposed as a result of this research suggests various potential factors that facilitate change and growth in novice supervisors, thus contributing to a preliminary understanding of how transitional development occurs. The proposed model suggests that supervisors must engage in reflection upon encountering challenges to their current ways of knowing and relating to others in an effort to make sense of challenges and encourage developmental learning that is transformative in nature. It suggests the use of spirituality and reflective practices to manage heightened emotions and increase trust of internal resources to guide their work. The observed process of development necessitates the

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supervisor's capacity for higher order thinking to make meaning from complex experiences, as evident by the developing supervisor's shift from relying on external resources to inform best practices to their own autonomy in decision making—a shift that is reminiscent of the characteristics of third to fourth order consciousness (McAuliffe, 2006). It also requires a cognitive readiness to approach the challenges and garner depth from meaning in an effort to grow developmentally. These findings suggest that development—or transition between stages—might also be facilitated by integrating a reflective/spiritual capacity to navigate and make meaning from the challenges presented in a given stage of development.

The theoretical proposition (Chapter 5) mirrors and further contributes to Hess' (1986) model of supervisor development. A central tenet in Hess' model posits that as supervisors gain experience, so do they gain confidence and an increased sense of identity (Bernard & Goodyear, 2014; Hess, 1986). Hess' model of supervisor development proposes three stages that supervisors may progress through during their development in the clinical competency. The first stage—the Beginning Stage—describes the uncertainty and many learning moments encountered by those new to the role (Hess, 1986). The second stage outlines a process of exploration of self and experiences that leads to the third stage of confirmation of supervisory identity (Hess, 1986). Hess describes identity consolidation as having trust in self and supervisee, appreciating the supervisory relationship rather than worrying about the relationship, as well as observing the supervisees' increased engagement in the supervisory process. In this final stage, the supervisor shifts inward to working with the supervisee from a relational level, rather than

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cognitively (Bernard & Goodyear, 2014; Hess, 1986). The supervisor in this stage has more trust in their identity and relies less on validation from external sources.

The theoretical proposition emerging from this research study (Figure 1) further adds to Hess' (1986) model. The reflective processes observed in the participants throughout this study mirror the ongoing process of professional development through an increase of trust in self and engagement in the supervisory process. However, Hess' (1986) model takes place over time and indicates supervisor identity development as an ultimate goal. The weaving micro-processes observed in this study highlight the potential ongoing process for identity and competency development that may take place at any point in time as a supervisor. The micro-process is considered more of a means to accomplish development, rather than an ultimate goal in itself, reminiscent to a constructive developmental learning tenet: "professional competence is related to how professionals think, not what they know" (McAuliffe, 2006, p. 484).

Finally, it was observed that the novice supervisors participating in this study made a shift from relying on feedback from others, to trusting their own experiences and instincts. This is also reflected in Hess' (1986) model of supervisor development by the third stage, whereby supervisors are most concerned with the relationships with supervisees, rather than the feedback from others. Both Hess' model and the weaving process observed in this study necessitate reflective capacity of the supervisor to increase trust in self and ultimately, competence as a supervisor.

The processes observed throughout the course of this study identified both a potential sense of progression and regression in competence development based on

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encountering new experiences as a supervisor. These processes appear to be similar to that of current therapist development research (Rønnestad & Skovholt, 2013). In the proposed model, the supervisor is confronted with new experiences that initially instill a sense of self-doubt. Only upon critical reflection and integration of personal resources might they progress forward in development. It appears as though the initial experience of self-doubt and regression is fundamental to the progression of professional development itself—a process also observed in therapist development literature (Rønnestad & Skovholt, 2013). The proposed model highlights a form of professional growth for the supervisor that necessitates stagnation. While this concept mirrors therapist development research (Rønnestad & Skovholt, 2013), it is especially unique in the sense that the supervisor engages in this process of development with a pre-existing therapist identity, existing skillset, and professional resources.

The proposed model that emerged from this study has the potential to contribute to supervisor development theories found in current literature (Alonso, 1983; Hess, 1986, 1987; Rodenhauser, 1994; Stoltenberg & McNeill, 2010; Watkins, 1993; Watkins, 2012). The research conducted in this study promotes additional understanding of the nuances of supervisor development for those novice supervisors with or without formal training. The model offers a unique viewpoint on the various processes of development observed to be experienced specifically in the novice stage of supervisor development. This model identifies similar processes to that of Hess' (1986) model, yet on a micro scale in the initial three years of practice. It also tentatively suggests that these processes repeat, and are not linear, nor confined to specific stages, with the ultimate goal of contributing to current literature on dimensions of development (Goodyear et al., 2014; Heid, 1997). It

questions typical notions or trajectories of development and proposes that the observed processes take place earlier, are ongoing, and are repetitive or cyclical in nature.

The Developmental Processes of Growth for the Novice Supervisor

In the proposed model of supervisor development (Figure 1), progression and regression in professional competence development are clearly influenced by the supervisor's ability to reflect on challenges, learn from experiences, develop awareness of internal processes, and potentially, experience an increased sense of trust and autonomy in self as the supervisor. As observed in the collected data and the theoretical proposition, the novice supervisor appears to experience an increase in confidence and autonomy, an increase in their use of self in supervision, as well as an increased use of spirituality and grounding techniques. This observed process highlights a shift from relying on external resources for guidance, to internal knowledge, resulting in an increased sense of autonomy in practice. This observed movement from dependence on others to self-regulation and autonomy is similar to developmental learning achievements made in moving from third to fourth order consciousness, as explained in Kegan's (1994) constructive developmental learning theory (Kegan, 1994; McAuliffe, 2006). As such, the cyclical configuration of the proposed model highlights the necessity of ongoing challenges to encourage transformative learning and growth essential for novice supervisor professional development in this demanding and continually evolving field.

The participant discussions and reflections taking place throughout the interview and journal analyses highlighted instances where the participants were tasked with setting aside heightened emotions in order to effectively assume the role of supervisor. These

experiences mirror developmental learning principles and Kegan's (1994) orders of consciousness to further an understanding of the initial processes novice supervisors undergo when working with supervisees: a practice of maturity and advanced thought that allows for addressing challenges without becoming overwhelmed and ineffective in experience (Kegan, 1994; McAuliffe, 2006). In these instances, the novice supervisors appeared to rely upon external support, as well as preexisting internal resources to make meaning of the challenges and adequately address the situations before them –findings similar to existing supervisor development models (Alonso, 1983; Hess, 1986; Watkins, 1990). This internal process of separating thoughts, feelings, values, assumptions, and judgments can be seen in the developing novice supervisor throughout this study, as evident by the participants' ability to mitigate feelings of self-doubt, balance the multiple supervisory roles, as well as the needs of the supervisee. This observed process alludes to an advanced form of thinking that is characteristic to the fourth order of consciousness, which appears to be necessary to assume the supervisory role (Kegan, 1994; McAuliffe, 2006).

The ability to gain trust in one's skills and learn through challenging personal experiences, reflection, and inner knowledge mirrors that of developmental learning principles as outlined by McAuliffe (2006) and Kegan (1994). Both authors note that a reflective capacity is necessary for professional development, and specifically, to overcome challenging experiences in the profession. While Kegan challenges the notion that all professionals have the cognitive capacity to reflect and progress beyond challenges, the participants in this study appear to engage in a movement from seeking external validation to relying on both reflection and a reflexive stance to overcome

challenges. Through these reflective and reflexive processes, meaning is drawn from past and present experiences, as well as cognitive and emotional interactions between supervisor and supervisee. The trust in one's self and felt competence as a supervisor appeared to be most strong when the ability to "think like a supervisor" was present, as well as the ability to monitor emotional reactions to others (Goodyear et al., 2014, p. 1044).

The participants appeared to engage in a form of questioning both their initial experiences, as well as their personal contribution to the other involved. By engaging in this reflexive process, the novice supervisor appeared to make meaning of the new situation and deeply change their framework of relating to the profession and the other. Kegan's (1994) version of constructive developmental theory, specifically, Kegan's use of third and fourth order consciousness to describe professional competence appears to be particularly applicable to the novice supervisor who engages in –and is ready to meet– the new tasks of this professional role. As observed throughout this study, the novice psychotherapy supervisor encounters various challenges that have the potential to stagnate growth and development. However, the participants' use of reflection on experience, as well as taking a reflexive stance, allowed for ongoing development by expanding the framework by which they make meaning and approach the supervisory relationship.

In this observed process, the novice supervisor may potentially enter in a higher order of consciousness (the fourth order) where they can critically examine and understand their actions and values in relation to self and other –a relational strength identified by the participants of this study (McAuliffe, 2006). At this optimal point in

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development, the supervisor is able to critically examine their interpersonal impact and autonomously act in the best interest of both self and other:

The biggest change for this past year was going from wanting to teach the skills to umm having to pull back and help the students find their own answers a little bit more. (Monica)

As a result, the participants' experiences explored throughout this study reflect a need for a form of cognitive and emotional maturity prior to beginning supervision in order to navigate the challenges presented in the newly assumed role. The results from this study suggest that supervisor professional growth necessitates characteristics common to higher orders of consciousness, including: independence and self-regulation, the ability to take responsibility for their own actions and beliefs, and the ability to engage in self-correcting behaviours (Kegan, 1994; McAuliffe, 2006). Also, the results from this study indicate the novice supervisor experiences challenges in achieving advanced cognitive, emotional, and interpersonal capacities to monitor the delicate relational challenges and various nuances of the role.

The notion of reflection to encourage development is frequently discussed in professional development and adult education literature to date (Driessen, Overeem, & Tartwijk, 2010; Embo, Driessen, Valcke, & Van, 2014; Kegan, 1994; Mann, 2011; McAuliffe, 2006). As such, encouraging reflective processes becomes a fundamental and important aspect of providing supervision. Dewey (1933) explored reflection in the context of improving professional practice. Reflection has been described as “a process that begins with a professional practice situation that is somehow upsetting, surprising, or

confusing” (Bernard & Goodyear, 2014, pg. 39). Through reflection, one is able to make sense of the challenging experience in an effort to develop a new understanding to be applied to future similar encounters (Bernard & Goodyear, 2014).

The importance of engaging in reflective practice thus becomes fundamental for both supervisee and supervisor professional development and has further implications for this study. Most notably, Bernard and Goodyear (2014) highlight reflective processes in three step model, which includes: a trigger event that elicits some form of confusion, the supervisee critically re-evaluating what is known of the situation using existing skills and resources, and finally, the supervisee developing new perspective of the situation to be applied to future experiences. These steps of reflection in supervision outline the experience of growth for supervisees and appear to carry similarities with the process of development for novice supervisors that necessitates an awareness that the current way of thinking is inadequate, as well as a mental readiness to meet the challenge for ongoing growth (Bernard & Goodyear, 2014; McAuliffe, 2006).

Throughout this process of reflection in supervision, the supervisor moves from a teacher to more of a mentor or consultant (Bernard & Goodyear, 2014). As the supervisee develops, emphasis in supervision shifts from learning techniques to engaging in thoughtful reflection. Bernard and Goodyear note that the supervisee is expected to draw upon both internal processes, as well as a well-formed understanding of professional practice and expectations. This process is also reminiscent of fourth order consciousness whereby the professional is able to manage the increasing demands that multiple roles in life may place on the individual (McAuliffe, 2006).

This reflective model of supervision described by Bernard and Goodyear (2014) resembles the process of supervisor professional development outlined previously (Chapter 5). Specifically, both models identify challenging experiences as fundamental to engaging in reflective and meaning making processes (Bernard & Goodyear, 2014). Also, the reflective model of supervision described by Bernard and Goodyear highlights a process of movement from external validation and support to a movement inwards relying on preexisting knowledge and resources to make sense of challenges. This concept mirrors the supervisor competency development previously outlined (Chapter 5), yet from the perspective of the supervisee. However, the theory proposed from the results of this research (Figure 1) is unique in the sense that it identifies similar processes of reflection and development, but specifically at the level of the supervisor. The proposed theory suggests that the supervisor—although entering the role with significant therapist experience—engages in a very similar process of growth and development as the supervisee, consequently suggesting a need for ongoing growth through the application of existing skills.

Furthermore, while Rønnestad and Skovholt (2013) highlight trajectories of therapist professional development, this study's theoretical proposition also identifies processes that contribute to supervisor professional development. A fundamental difference remains to be the fact that the supervisor begins their identity development journey with a preexisting and solidified identity as a therapist. Hence, they enter the weaving loop of development with existing knowledge and a skillset that can be applied to process their experiences and encourage growth in a novel role. These findings suggest

that the novice supervisor requires a greater cognitive and interpersonal capacity for their work, yet is more equipped with prior experience to engage in reflective processing.

The ongoing weaving of loops (outlined in Figure 1) suggest that the novice supervisor's greatest gift appears to be their inherent wisdom and knowledge from past experiences—in both life and the profession—that guide their spiritual and reflective processes for ongoing development. While this model mirrors the work by Rønnestad and Skovholt (2013) in that development is lifelong and continuous, it also highlights challenges as ongoing in professional development at the supervisory level. The proposed model identifies a developmental learning capacity needed by the novice supervisor to meet the challenges encountered during this early phase of their supervisor career. Specifically, it suggests that for optimal development, the novice supervisor must possess the capacity for higher orders of consciousness (specifically, the fourth order) in an effort to engage their reflexivity, take a socially critical stance, manage the demands of multiple roles, as well as adjust their framework of relating to the profession and supervisee (Kegan, 1994). In the proposed model, the supervisor is observed to engage in a process of developmental learning when their own way of knowing is challenged, they are ready to take a reflexive stance, and are able to make meaning of the situation at hand. The novice supervisor thus shifts their personal framework and way of relating to self, others, and the profession. It remains fundamental to note that in the proposed theory, greater emphasis is placed on preexisting skills alongside a reflective and spiritual capacity.

Spirituality/Grounding Resources in Increasing Supervisory Competence

The notion of spirituality and the use of grounding practices to promote growth emerged as a fundamental process throughout the course of this study. Most notably, participants discussed and explored their spirituality as both a supportive resource and as part of the helpful experiences in their work as supervisor. Spirituality through reflection and grounding was identified as a means of promoting growth by managing anxieties, as well as processing challenging events. When participants began to engage in reflective practices and rely on their spirituality as a supportive resource, their experiences of self-doubt decreased and there appeared to be an increased level of trust in their competence of self as supervisor. This experience is highlighted in the proposed theory as a sense of groundedness, as outlined by the red line intersecting the weaving loop (Figure 3). This line suggests that the novice supervisor does experience transient moments of competence and confidence in self, prior to experiencing challenges and engaging in the reflective process of growth.

Unlike current models of supervisor development that suggest role consolidation to be the ultimate goal of professional development (Watkins, 1990), this study has observed role consolidation to fluctuate and occur earlier in professional development. Furthermore, this sense of groundedness appears to reflect the supervisor operating at an optimal level, whereby anxiety is not overwhelming and they meet the learning needs of both their own development and their supervisees'. Achieving groundedness through the use of spirituality and reflexivity appears to be a finding that is particularly unique to this model and study of supervisor development.

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The process of using spiritual grounding to increase trust in supervisor competency development (outlined in Figure 1) is similar to that of Flow Theory (Csikszentmihalyi, 2008). According to Csikszentmihalyi, the flow experience is achieved when there is a balance between the challenge of a task and one's capabilities or skill. Should a task be overly challenging, one may experience additional worry and anxiety. Should the skills required to complete a task be advanced or deficient, there may be an experience of boredom or anxiety (Csikszentmihalyi, 2008). As a result, having an adequate skillset and appropriate level of challenge lends to an experience where someone can prosper.

The theoretical proposition outlines the process of professional development whereby the supervisor is tasked in processing and making meaning of challenges in assuming this novel role. While it is well known that new supervisors must master novel cognitive tasks, various authors refer to the challenging emotions—often related to anxiety—that arise for new supervisors who assume the supervisory position (Cohen & Lim, 2008; Goodyear et al., 2014). Novice supervisors tend to experience anxiety when first assuming the role, as there is a greater challenge in the new tasks to master, as well as an uncertainty in their existing skills and abilities (Hess, 1986; Watkins, 2014).

Supervisor competency development is complex in nature and appears to task the novice supervisor with a mastery of cognitive, emotional, and interpersonal challenges (Cohen & Lim, 2008; Goodyear et al., 2014; McAuliffe, 2006). When the novice supervisor can develop trust in their competence in the supervisor role, they appear to enter into an experience similar to that of Csikszentmihalyi's theory of Flow (2008). During these times the novice supervisor's trust in self is stronger and they experience a

greater sense of self as the supervisor. The red line intersecting Figure 3 highlights the optimal path for professional development with characteristics similar to that of Flow theory. However, it also identifies the ongoing variations to accessing this path, as well as the spiritual and reflective processes needed to achieve a wider sense of trust in competence as a supervisor.

It remains interesting to note that five of six participants interviewed for this study actively sought out supervision positions. While only one participant was asked to take on a supervisory role, the other participants applied for, or began practicing as supervisors, independently. This active engagement in assuming the supervisory role brings forward multiple influences in supervisor development. Most notably, the notion of work satisfaction and motivation was mentioned by multiple participants throughout the course of this study. In fact, one participant explained feeling energized by her supervisory role, despite working full time elsewhere. Those who took on the role as supervisor often discussed their experiences with a sense of fulfillment in career choice. This idea of work satisfaction related to professional development is a notion explored in depth by Orlinsky and Rønnestad (2012) in a quantitative study exploring clinicians' experiences of the two dimensions of therapeutic work: healing involvement and stressful involvement.

The dimension of healing involvement was discussed by Orlinsky and Rønnestad (2012) as having a “sense of current skillfulness in work; minimal difficulties in practice; reliance on constructive coping strategies when difficulties occur; a sense of being personally invested in genuine, affirmative, and receptive relationships with patients ... and an overall sense of therapeutic efficacy” (Orlinsky & Rønnestad, 2012, p. 267). The notion of healing involvement is also recognized in Csikszentmihalyi's felt sense of flow

(2008). Orlinsky and Rønnestad identified therapist personal qualities conducive to healing involvement in their clinical work to be: breadth of theoretical orientation, flexibility in practice, and satisfaction in the occupational setting. When therapists' personal qualities and experiences in clinical settings are present, it is suggested that there is greater satisfaction with clinical work.

Orlinsky and Rønnestad (2012) further discuss scales created to measure therapist development: *currently experiencing growth* and *currently experiencing depletion* (p. 269). The scale *currently experiencing growth* includes “an awareness of dynamic change and improvement, deepening understanding of therapeutic process, enhanced skillfulness, enthusiasm for practice, and overcoming past limitations as a therapist” (Orlinsky & Rønnestad, 2012, p. 269). When a therapist experiences general satisfaction in their work (identified as *healing involvement*) they may engage in the process of growth (*currently experiencing growth*) (Orlinsky & Rønnestad, 2012). Orlinsky and Rønnestad highlight this positive process of growth in a developmental cycle exploring a variety of positively impactful qualities, including: depth of clinical experience, professional development resources, satisfaction with clinical work, felt sense of satisfaction, sense of resourcefulness, and personal motivation amongst others.

This cycle of therapist growth highlights the many internal and external resources needed for development in the profession. Orlinsky and Rønnestad (2012) make a point of highlighting both the internal and external resources necessary in promoting ongoing growth and professional development. The components necessary for growth and healing involvement mirror many of the experiences and resources identified by these novice supervisors when exploring their experiences of growth in the early years. Satisfaction

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with the role, engagement, professional support, and theoretical knowledge were all positive aspects of professional growth and development highlighted by the research participants that mirror the model of therapist growth developed by Orlinsky and Rønnestad. However, this study also pointed out that attention to spirituality through reflection and grounding practices is a fundamental addition to the necessary conditions for supervisory growth.

The use of spirituality became a fundamental dimension to overcoming challenges encountered by novice supervisors and in promoting their growth. This is a particularly important contribution to the literature, as the findings of this study identify spirituality through reflection and grounding to be a new dimension of supervisor growth and professional development. Most notably, the ten themes of supervisor development discussed previously (Table 3 & 4) outline various dimension of change and growth experienced by a developing supervisor (Goodyear et al., 2014; Heid, 1997). Missing from these dimensions is a spiritual component influencing the growth process by mitigating the effects of challenging experiences. As a result, this study contributes an important finding that identifies supervisors' spirituality, reflexivity, and grounding practices as important dimensions impacting the holistic nature of supervisor professional development and transition between stages.

Spirituality and reflexivity have already been considered fundamental to holistic client care, as well as imperative for ongoing professional development (Gingrich & Worthington, 2007; Miller, Korinek, & Ivey, 2006; Miller & Thoresen, 1999; Polanski, 2003; Worthington & Sandage, 2001). The findings of this study assert that spirituality has a more significant role in supervisor development than currently assumed.

Spirituality thus necessitates further consideration as a distinct dimension of supervisor development due to its role in promoting supervisor growth –a notion supported by the experiences of the participants in this study:

You know what [spirituality] is the foundation of my work and people don't realize that about me. I take a very spiritual focus on my work and my life.

(Alexander)

Contributions to Research

It is well documented that research on clinical supervision in the field of counselling and psychotherapy is truly needed (Barker, 2014; Gazzola & Theriault, 2007; Kassan et al., 2015; Majcher & Daniluk, 2009; Watkins, 2012). The published literature directed toward understanding supervisor development remains dated and minimal, suggesting a need for further research aimed at understanding this unique and important role (Gazzola et al., 2013; Watkins, 2012).

This research study contributes to building the current and modest understanding of supervisor development and provides access to the initial experiences of becoming a supervisor. The description of the essence of the experience of six novice supervisors adds to the existing knowledge base that is necessary prior to embarking on larger scale quantitative studies. The results of this study mirror some therapist development models and are also in line with the early phases of supervisor development models and experiences (Cohen & Lim, 2008; Hess, 1986; Rønnestad & Skovholt, 2013).

Specifically, this study provides further evidence on the inner experience of becoming a novice psychotherapy supervisor and the process of moving from a sense of

role shock to a gradual increase in mastery. The processes observed in this study suggest that the novice supervisory role necessitates the capacity for a higher order of consciousness so as to adjust one's framework of relating to both the supervisor knowledge base and the supervisee (Kegan, 1994; McAuliffe, 2006). A capacity to engage from a reflexive stance allows for the novice supervisor to engage in critical meaning making and development (Goodyear et al., 2014). Thus, this professional role necessitates very specific capacities –cognitively, emotionally, and interpersonally amongst other facets—to nurture ongoing development of both supervisor and supervisee.

Perhaps most original and unique to this study is the finding that spirituality represents a fundamental aspect to encourage the growth and developmental learning of the participants. Spirituality was identified as being a particularly important resource for grounding the supervisor in practice, facilitating growth, and navigating the challenging experiences encountered during the initial years of practice. Participants engaged their spirituality in conjunction with a reflexive stance to make sense of challenges and mitigate feelings of self-doubt. They began to act more autonomously from a more critically aware stance, understanding how their values, assumptions, beliefs, and actions may impact the other in the delicate supervisory relationship. The impact of one's grounding practices on supervisor professional development has not yet sufficiently been explored in the literature and remains to be an important finding of this study. This study has suggested that the use of spirituality to provide a sense of groundedness during challenging experiences is a distinct dimension influencing supervisor development.

The proposed supervisor development model outlining weaving processes of competence development aims to contribute further understanding of the various

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processes of growth experienced by the novice supervisor during the early and formative stages of their journey of becoming a supervisor. While this model highlights and affirms some aspects of existing supervisor models (Alonso, 1983; Hess, 1986, 1987; Rodenhauser, 1994; Stoltenberg & McNeill, 2010; Watkins, 1993; Watkins, 2012), it also identifies a preliminary shift from relying on external validation and resources, to relying on pre-existing internal strengths and resources. This movement inwards signifies a considerable increase in trust of self as a supervisor. It begins to suggest the development of autonomy as a novice supervisor in the ability to make meaning from experience between self and other, as seen in Kegan's (1994) constructive developmental theory.

This model uniquely explores this potential developmental process as being ongoing and repetitive, as well as not solely confined to a specific phase of development. It is hoped that this model can be further tested and ultimately, add new knowledge and understandings to currently existing research and literature. The knowledge stemming from this process of developing trust in competence from a movement inwards can potentially assist new supervisors in assuming this role by providing an understanding of how to autonomously promote growth. Finally, a common criticism of current supervisor development models remains to be the lack of understanding or information regarding how supervisors may transition or progress through developmental stages (Barker, 2014; Watkins, 2012). Watkins (2012) suggests that there is a need for further investigation on what factors may influence development of supervisors, as well as factors that may promote change. The model of supervisor development proposed in this study suggests that the supervisor's capacity to reflect on challenges, engage their spiritual practice for grounding, draw meaning from experience, and tap into personal wisdom are factors that

are instrumental in facilitating change—a finding necessitating further attention in the research from a developmental learning perspective.

A contribution of this study was the development of a community agency-based training guidebook intended to assist and support both counsellors newly assuming the role of supervisor, as well as those who have been providing supervision based on personal experiences in the field (See Appendix H). It is hoped that through existing research and the results of this study, the guidebook will provide some useful guidelines to potential challenges, as well as support to overcome them. While this supervision guidebook is merely an introductory text addressing the areas of challenge identified by these six research participants, it is hoped that it will act as a conduit to further learning and development for all those who read it.

Implications for Supervisors

Potential implications for supervisors involve improving training standards in order to better prepare supervisors to meet the challenges experienced during the early and formative years of professional identity development. These training standards would ensure novice supervisors are prepared to identify the importance of supervisee rapport, potential breaches in relationships, and the need for balance with gatekeeping. Also, due to the fact that reflection was identified as being particularly helpful in navigating the challenges encountered, providing training on how to adequately engage in reflective processes may assist the novice psychotherapy supervisor in their early experiences while encouraging profound developmental changes.

McAuliffe (2006) identified reflective processes as being particularly fundamental for professional development. However, he noted the challenging nature of encouraging reflection, as well as teaching one to truly reflect on experiences without being confined to agency processes or protocols. For example, Embo et al., (2014) identify reflective writing as a popular technique to encourage reflection, yet not always yielding the desired results of critical reflection. McAuliffe suggests the reflective capacity could be fostered by encouraging the view of multiple perspectives, promoting an understanding of one's own knowledge and experiences, and supporting the ambiguous or unknown. The aspects of reflective learning extend beyond the textbook and into experience, but certainly touch upon the areas of growth and positive learning moments identified by the participants of this study, including: a sense of openness, tapping into personal strengths and past experiences, and gaining an understanding of the supervisees' point of view. These identified strengths, as well as McAuliffe's suggestions for promoting reflexivity amongst professionals, point to a future area of possible training for the novice supervisor.

Finally, it is important to emphasize the value placed by the more experienced participants on their prior clinical experiences as therapists in providing supervision. Many of the participants highlighted their previous experiences—both clinically and in life—to be particularly helpful in navigating the nuances of this novel role. Due to the fact that there are few current regulations for the qualifications of those providing supervision, it is hoped that the results of this study would encourage regulators to develop firm guidelines encouraging greater clinical experience for those seeking to provide supervision. The results of this study also suggest that particular attention be

directed toward the integration and use of grounding practices/spirituality in supervisor training to positively impact professional development and growth.

Limitations

While this study provided an insightful glimpse into six individuals' experiences as novice psychotherapy supervisors, there are several identified limitations to this study and design. Specifically, as a form of inquiry, phenomenology requires a separateness of the researcher from their worldviews and assumptions in order to fully immerse in the research and transcend to new understanding (Creswell, 2007; McLeod, 2011). Since the primary researcher of this study is also a novice psychotherapy supervisor, bracketing assumptions and minimizing personal biases remained a considerable challenge.

Although various steps were implemented to assure research bias was minimized (See Appendix F & G), completely removing personal biases was a particularly challenging task within this study.

Also, due to the reliance on an interpretive analysis of data, the academic community has marginalized phenomenological research given the difficulties in replicating studies (McLeod, 2011). It is further questioned whether multiple interpretations of the same data set may provide equally valid and important results, (Burnard et al., 2008). Engaging in the process of member checking is not a universally accepted method of data analysis, since multiple perspectives and understandings of the data are no less valid (Birt et al., 2016). As such, interpretations of the data collected cannot be guaranteed as replicable or absolute.

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It is further important to note the significance –and challenge—of recruiting research participants who have experienced the same phenomenon to take part in the study (Creswell, 2007). This presents a practical dilemma that is fundamental to completing a sound study. The research participants who took part in this study had varying professional backgrounds, clinical experiences, practicing locations, academic backgrounds, and years of experience prior to providing clinical supervision. This participant sample was heterogeneous in nature. Therefore, it becomes challenging to develop generalizable understandings of the experience of novice psychotherapy supervisors.

Furthermore, the sample size of participants (six) remains smaller than initially intended. Due to the time consuming requirements of the study, there was a higher attrition rate and lower interest in participation than originally anticipated. Creswell (1998) noted phenomenological studies should have between five and twenty-five participants, while Morse (1994) explained that phenomenological studies should have at least six participants (Mason, 2010). As such, the sample size used for this study meets the minimum requirements suggested in the literature. However, interpretations should be held tentatively, in order to have a greater and more in-depth glimpse of the early experiences of the novice psychotherapy supervisor.

Nevertheless, due to the rudimentary state of the literature, and the challenging nature of finding novice supervisor participants, the current sample size still allows for starting the conversation about the needs of novice supervisors and their professional development. The results garnered from this study may be applied to the current literature

with the hope of providing further insight into the needs of the novice supervisor, as well as further direction and inspiration for future areas of research.

Suggestions for Future Research

This study aimed to identify helpful and challenging experiences in becoming a psychotherapy supervisor. The research participants highlighted various resources and values as being formative during their early months of practice, including that of reflective practice, spirituality, supportive internal resources, and valuing positive interactions and rapport with supervisees. Through this research project, the inner experience of becoming a supervisor was explored and an attempt was made to have the experience distilled into its essence and disseminated to the field. In this attempt to answer the questions that the research project was initially broached with, more questions undoubtedly arose, providing a direction for further investigation. Most notably, the six research participants who identified challenges to their growth and development also identified the resources and a reflective capacity that supported them in overcoming the challenges in a relatively short time frame. This study did not encounter participants who experienced a prolonged sense of “stuckness”. Rather, the moments of “stuckness” fueled the process for further reflection and in return more groundedness in the sense of self as a supervisor. However, this process necessitates further examination to see whether this is the case with another participant group.

The theoretical model proposed in this study calls for further investigation to better understanding the experience of those who may find themselves stuck in the weaving process, or who decide to exit the role of supervisor. Current research highlights a lack of understanding related to how transitions between developmental stages occur

and this study is of no exception (Barker, 2014; Watkins, 2012). While trust in self as supervisor was explored briefly in theoretical proposition of Chapter 5, further research is needed to explore identity development through stage transitions as a novice psychotherapy supervisor. Also, the factors identified to facilitate change throughout this model of supervisor development—reflection, spirituality, and use of prior experiences—are preliminary in nature and necessitate further study to confirm their impact on change within supervisor development models.

It is suggested that future research be conducted using a larger sample size in an effort to further contribute to and augment the existing knowledge base. It would be ideal—albeit challenging—to follow participants from a point prior to providing clinical supervision to various years and experience levels of providing supervision. Also, including a larger sample size would allow for a greater understanding of how different experience and training levels may impact the transition to supervisor. Due to the importance and value placed on supervisee rapport by these research participants, it would be interesting—and relevant—to include supervisees in research interviews in order to gain a sense of understanding of the supervisees' experiences in working with novice and developing supervisors.

Finally, supervisor training remains an important area for further research and consideration. Currently, there remains limited research aimed at understanding the impacts of training on supervisor competency development (Bernard & Goodyear, 2014). With training now being emphasized by various regulatory bodies in Ontario, additional research on training efficacy could greatly benefit the novice supervisor—and their supervisees—for years to come.

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The intricate journey of becoming a supervisor is not yet well understood in the literature. However, the importance of this role and competency in the field of psychotherapy has not been misplaced. The supervisor remains an integral component of counselling and psychotherapy. Their reach extends beyond therapist competency development to the wellbeing of the client, and essentially, the community. The experience of those assuming this important role—with minimal training and standards in place—remains relatively unknown to date. Further research is needed to explore the needs of the supervisor at varying stages, as well as the impact of training in supporting and encouraging growth on this delicate and intricate journey.

Personal Statement

I recall my very first day of my doctoral studies like no other. Sitting in a class of four, my professor explained that a doctoral program is a journey. She described the winding road of doctoral studies, where only when you find your destination will the journey make sense. At the time, my naivety fully understood this comparison and continued on in the program with little reflection or further thought. However, upon reflection, I can see just how accurate this statement was made to be. My doctoral studies, as a budding psychotherapist and supervisor-in-training, have been an incredible journey of growth, challenge, and profound learning.

Throughout my studies, I have been asked to become familiar with the literature, learn new models of psychotherapy, and train others. I have immersed myself in the experiences of new supervisors, became curious about growth, and wondered about what makes a good supervisor truly, and irrevocably, good?

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While asking these questions, reading these texts, and living these experiences, I myself have grown in a way that I never could have expected on that very first day of class five years ago. My ability to reflect, to feel, to wonder, and most importantly, to look inward has become a central component in my way of thinking. No longer (fully) bound by the confines of textbooks or theoretical frameworks, my doctoral –and supervisory—journey has been one of unexpected liberation.

Having once had the expectation of graduating as an expert, my journey thus far has taught me that the journey is in fact not yet over. Growth and development is ongoing, continuous, and beautiful. Much like the experience of the novice supervisor, who is expected to be the expert, the most profound growth stems from a look inward, for there is always room to grow. As I hope to graduate from my studies and complete my research, I feel as though I have become a better person, psychotherapist, supervisor, and most significantly, a better learner.

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Appendices

Appendix A

Monthly Reflection Questions

Participant's code: _____

Date of entry: _____

1. Over the course of this last month of practice, **what experiences have been most helpful for your growth as a clinical supervisor?** Explain.
2. Over the course of this last month of practice, **what has made you feel most stuck or has been problematic in your early experiences as a clinical supervisor?** Explain.
3. What have you learned from these moments? What would you do differently?
 - a. As a clinical supervisor?
 - b. As a person?
4. What helped you through the challenges of your journey this month? (e.g., spirituality, reflection, self-care, family, support groups, etc.)?
5. How do you currently see yourself in the role of clinical supervisor? (e.g. perceived strengths and limitations)

Appendix B

Semi-Structured Interview Procedure (For Participants with Formal Training)

Introduction

Your interview will last approximately sixty minutes. The major topics of this interview will include your experience in training, any helpful or hindering aspects of training that influenced change, and any internal and/or external resources that supported you through your development. You will also be invited to reflect on your initial experiences of providing clinical supervision. The information gathered in this interview will assist in understanding the learning needs of novice clinical supervisors and may inform future training programs.

This interview will be audio recorded for later transcription.

Questions

Background:

1. Looking back now, what were some of the reasons you decided to take a clinical supervision course?
 - a. What were you looking to get from training? (Prompt: goals, hopes, and expectations?)
2. Looking back now, how would you describe your training experience in clinical supervision in general?
3. How do you approach your clinical work now since completing your supervision training?

Growth:

4. What changes did you experience as a person throughout your supervision training? Through supervision practice?

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5. What would you say was the most important change experienced as a result of training? As a result of practice?
6. Is there anything that you wanted to change but did not change with training?
7. In this new role as clinical supervisor, how would you describe professional growth? (What does professional growth mean to you?)

Challenges and Resources:

8. What did you find most challenging during your training in supervision? (Prompt: specific events, incidents etc.)
9. What did you find most helpful during training?
10. What has been the greatest support (or resource) during your supervision training and initial months of practicing supervision? (Prompt: what helped you through those times?)
11. What has been the most memorable moment so far in your journey to become a clinical supervisor?
12. What do you consider to be desirable qualities of an effective supervisor?
13. What are your greatest strengths/assets as a supervisor?
14. What is an area that you would like to grow as a clinical supervisor?

Spirituality/ Values:

15. What does spirituality mean to you? How would you define it?
16. What has been the role of spirituality in your work as a novice supervisor?
(Prompt: How do you see the role of spirituality in your growth as a clinical supervisor?)

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17. Have you experienced any changes in the way you understand your spirituality since you started training in supervision (or practicing supervision?) (Prompt: What?)
18. What values guide you in your work as a clinical supervisor? (Prompt: In your personal life?)
19. Have these values ever been challenged in your professional work as clinical supervisor? (Follow-up: How did you handle that?)
20. Have you experienced any changes in the way you live (according to) your values since you started your training and practice as a clinical supervisor? (If yes, prompt: Where do you attribute these changes?)
21. How do you see the role of reflective practice in your development as a clinical supervisor? (Prompt: Do you currently engage in this? How? Do you see any connection between spirituality and reflectivity? What?).

Future Implications:

22. What are your future plans for providing clinical supervision?
23. What is the next step (future plans) for developing as a clinical supervisor? (Prompt: What do you need to continue growing?)
24. Do you have any advice for other novice clinical supervisors beginning their training or practice?
25. If you try to describe to me in a few words or in a sentence your journey of becoming a supervisor... what would you say?

Appendix C

Semi-Structured Interview Procedure (For Participants without Formal Clinical
Supervision Training)

Introduction

Your interview will last approximately sixty minutes. The major topics of this interview will include your initial experience in providing clinical supervision, any helpful or hindering clinical supervisory experiences that influenced change, and any internal and/or external resources that supported you throughout your development. You will also be invited to reflect on your experience as you transitioned to your new role as a clinical supervisor. The information gathered in this interview will assist in understanding the learning needs of novice clinical supervisors and may inform future training programs.

This interview will be audio recorded for later transcription.

Questions:

Background:

1. What were the main reasons you decided to become a clinical supervisor?
 - a. What were you looking to get from this experience? (Prompt: goals, hopes, and expectations?)
2. Looking back now, how would you describe your experiences as a clinical **supervisee** in general? Your initial experiences as a clinical **supervisor**?

Growth:

3. After starting this new phase of your career, how would you describe professional growth?
4. What changes did you experience as a person throughout your initial experiences as a clinical supervisor?

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5. What would you say was the most important change experienced that you attribute to your clinical work as a supervisor?
6. Are there any areas you hope to develop or change for future supervision practice?

Challenges and Resources:

7. What did you find most challenging during your initial experiences in providing supervision? (Prompt: specific events, incidents etc.)
8. What did you find most helpful during your initial experiences in providing supervision?
9. What has been the greatest support (or resource) during your initial months of practicing supervision? (Prompt: what helped you through those times?)
10. What has been the most memorable moment so far in your journey to become a clinical supervisor?
11. What do you consider to be desirable qualities of an effective supervisor?
12. What are your greatest strengths/assets as a supervisor?
13. What is an area that you would like to grow as a clinical supervisor?

Spirituality/ Values:

14. What does spirituality mean to you? How would you define it?
15. What has been the role of spirituality in your work as a novice supervisor?
(Prompt: How do you see the role of spirituality in your growth as a clinical supervisor?)

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16. Have you experienced any changes in the way you understand your spirituality since you started practicing as a supervisor? (Prompt: What?)
17. What values guide you in your work as a clinical supervisor? (Prompt: In your personal life?)
18. Have these values ever been challenged in your professional work as clinical supervisor? (Follow-up: How did you handle that?)
19. Have you experienced any changes in the way you live (according to) your values since you started your practice as a clinical supervisor? (If yes, prompt: Where do you attribute these changes?)
20. How do you see the role of reflective practice in your development as a clinical supervisor? (Prompt: Do you currently engage in this? How? Do you see any connection between spirituality and reflectivity? What?)

Future Implications:

21. What role do you see reflective practice and spirituality having in your future clinical work (therapeutic or supervisory)?
22. Do you have an interest in taking a formal supervision course in the future? (If yes or no, for what reasons?)
23. What is the next step (future plans) for developing as a clinical supervisor? (Prompt: What do you need to continue growing?)
24. Do you have any advice for other novice clinical supervisors beginning their training or practice?
25. If you try to describe to me in a few words or in a sentence your journey of becoming a supervisor... what would you say?

Appendix D

Sample Participant Recruitment Poster

UNIVERSITÉ SAINT-PAUL

FACULTÉ DES SCIENCES HUMAINES



223 Main Ottawa ON Canada K1S 1C4
TEL: (613) 236-1393 FAX: (613) 751-4028

SAINT PAUL UNIVERSITY

FACULTY OF HUMAN SCIENCES

NEW CLINICAL SUPERVISORS

YOU ARE INVITED TO PARTICIPATE IN THE PROJECT:

“THE DEVELOPING PSYCHOTHERAPY SUPERVISOR: THE EXPERIENCE OF CHANGE
AND GROWTH IN THE EARLY YEARS”

Researcher: Jillian Mannella

Email: [REDACTED]

This proposed study seeks to identify impactful experiences of training and of providing clinical supervision that are perceived to contribute to your development and growth as a new clinical supervisor having **one to three years’ experience as a supervisor**. We would like to explore experiences you consider as being the most impactful on your professional development as a new clinical supervisor. By participating in this study, it is hoped that the results will be used to improve current training programs by identifying the training and clinical needs of novice clinical supervisors.

As part of your participation, you will need to fill one background information questionnaire, log a monthly journal, and sit for a brief one-hour interview at your earliest convenience.

Your participation is **voluntary** and you are **free to withdraw** at any point.

Participation in this project is independent from any contract or role responsibilities you carry. Your participation will remain anonymous and the information you provide will be confidential.

Participating in this study will provide you with the opportunity to share your experience and support you in your reflexive practice.

You will also make an **important contribution** to improving clinical supervisor training.

If you want to know more about this project please contact the researcher listed below:

Jillian Mannella, PhD. (Cand.)

Email: [REDACTED]

Appendix E

Consent Form for Participation in the Study



Consent Form

Title of the Study: The Developing Psychotherapy Supervisor: The Experience Of Change And Growth In The Early Years

Researcher: Jillian Mannella, Ph.D (Candidate); e-mail: [REDACTED]

Research Supervisor: Prof. Soti Grafanaki, School of Counselling, Psychotherapy & Spirituality; e-mail: [REDACTED]

Invitation to Participate: I am invited to participate in the abovementioned research study conducted by Jillian Mannella, supervised by Professor Soti Grafanaki.

Purpose of the Study: The purpose of the study is to identify and explore various experiences that are perceived as being most impactful on the professional development of novice psychotherapy supervisors. Specifically, the study seeks to understand what experiences of training and initial practice were perceived as being most impactful on the development of clinical supervisors. The results of this study will contribute to the improvement of current training programs by identifying the training and clinical needs of the novice clinical psychotherapy supervisor.

Participation: My participation will consist of: filling out one background questionnaire which will take approximately forty-five minutes, logging monthly one-two page journal entries over the period of four months (for a total of four journal entries), and taking part in an interview lasting approximately sixty minutes. The background questionnaire and journal entries can be completed electronically, during a time and location of your choice. Interviews will occur in person or via tele-conferencing. In person interviews will take place at the study or work place of the participant during a mutually convenient time. At any point during the interview you have the right NOT to answer certain questions or to withdraw from the study without any penalty or providing any reason.

Risks: My participation in this study will entail that I volunteer information regarding experiences of growth and change during my supervisor training and/or initial experiences of clinical practice, as well as the personal resources I may have utilized to attend to my personal and/or professional growth and development. I understand that this may cause me to feel inconvenienced in time and effort. I have received assurance from the researcher that every effort will be made to minimize these inconveniences, such as meeting at mutually convenient times and locations to conduct interviews. The risk associated with this research is minimal.

Benefits: Participating in this study will provide you with the opportunity to share your experience and support you in your reflexive practice. You will also make an important contribution to improving clinical supervisor training.

Anonymity & Confidentiality: I have received assurance from the researcher that the information I will share will remain strictly confidential. I understand that the contents

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will be used only for the study *The Developing Psychotherapy Supervisor: The Experience Of Change And Growth In The Early Years* and that my confidentiality will be protected through the use of pseudonyms and the removal of any identifying information from transcripts, publications, and presentations. You reserve the right to request your data not be used. This data will be destroyed and not included in the analysis. You have the right not to answer certain questions, without having to provide a reason.

The data collected in this study will be confidential, unless there are issues of misconduct or harm to you or any other person as outlined in the code of Ethics you abide as a therapist and clinical supervisor.

Conservation of data: Material collected through this study (questionnaires, audio-tapes and interview transcripts) will be stored in a secure place (locked cabinet) in the researcher's home office for a period of five years. Interview recordings will be deleted after the transcript has been completed. All electronic files will be password protected. After completion of the study, all files will be securely disposed. Only the researcher will have access to the data.

Voluntary Participation: I am under no obligation to participate and if I choose to participate, I can withdraw from the study at any time and/or refuse to answer any questions, without suffering any negative consequences. If I choose to withdraw, all data gathered until the time of withdrawal will can be disposed of securely at your request.

Acceptance: I, _____, agree to participate in the above research study conducted by *Jillian Mannella* of the Department of Counselling and Spirituality, Faculty of Human Sciences at Saint Paul University, which research is under the supervision of *Professor Soti Grafanaki*.

If I have any questions about the study, I may contact the researcher or her supervisor.

If I have any questions regarding the ethical conduct of this study, I may contact the Office of Research and Ethics, Saint Paul University, 223 Main Street, Ottawa, ON K1S 1C4 Tel.: (613) 236-1393

There are two copies of the consent form, one of which is mine to keep.

Participant's signature:

Date:

Researcher's signature:

Date:

Appendix F

Narrative Biography of the Researcher

I still recall the day I met my first ever clinical supervision group as the supervisor. I was by far the youngest person in the room and had to clarify that I was in fact the supervisor. I tried to clarify this with a calm, steady, and confident voice. However, I was shaking on the inside and hoping the Masters practicum students could not see through this façade. There was a split second where I wondered: why did I agree to do this?

My interest in the field of counselling and psychotherapy comes from a deeply personal and profound place. I became motivated to pursue a career in counselling midway through my undergrad after having experienced various stressors myself. I had an epiphany that I would absolutely love to have a career helping others in the way I had found so helpful to myself. My pursuit of this career came from a source of youthful naiveté and genuine interest.

While I had found it challenging to meet the requirements of admittance into graduate school, I didn't realize that I would be carrying with me a limitation that can only be improved with time: inexperience. I was noticeably younger than many of my classmates, and perhaps most challenging, I was noticeably younger than many of my clients. I certainly tried to ignore this and rely on my youthful motivation and determination to help. This motivation and internal desire I had carried with me certainly helped in getting through my first year of academic study and preparation to see clients.

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However, my motivation added to the anxiety and pressure I felt to be a “counsellor” when it became time to see clients.

In my second year, I was enrolled in a placement working with at-risk youth, many of whom had seen more challenges in life than I could possibly imagine. I entered this placement with that same motivation to help, combined with intense anxiety and a form of pressure stemming from the fact that graduation was a mere eight months away. The next eight months would become the most formative and impactful months of my career. It was through my first two placement experiences that I truly understood the value and impact clinical supervision can have on both client and counsellor. While I was experiencing the pressure to perform and be the “expert” counsellor, I was also navigating many nuances of this incredibly challenging and intricate profession. My first experience in supervision was riddled with judgment, bias, and agency expectations. I recall my supervisor having little time to meet with the student and whenever we did meet, I certainly recall feeling judged for making mistakes. For me, supervision was not a safe place.

My next clinical placement began with all the more pressure. This was it. This was my last chance to perform... to achieve my goal of helping others. I want to make a difference in the world, how can it be this hard? I walked in to meet my new clinical supervisor and I was shaking. I recall waiting to learn from her my many limitations and undesirable qualities I present with. I was very surprised to learn what supervision actually is...

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This supervisor was supportive, patient, nurturing, and caring. She cared about how I felt in the room and she cared about what experiences I brought with me to my placement. I was not just an intern that carried an administrative burden. I was certainly a student in the truest sense of the word. I was given the opportunity to try, to practice, and to make mistakes. I was asked to learn from my experiences and it was celebrated when I had done so. My learning was held with a gentle sense and nurtured to grow into something more. Supervision had become a great place of learning, growth, challenge, and support. Supervision had become spiritual.

I had carried with me so much confusion about how an experience can be so incredibly helpful and yet so incredibly harmful in two very similar contexts. How is it that my first two experiences in supervision could be enough to make me contemplate leaving my vocation, as well as solidify my life's purpose? I learned many things that year, but I perhaps left with more questions than answers. This deeply spiritual experience led to many reflections on my life, my self, and the field of counselling and psychotherapy. It fuelled my curiosity: what makes a good supervisor good?

I entered my PhD program with answering this question as a new task added to my mission of helping others. I wanted to know, learn, and explore how is it this that powerful role in the psychotherapy profession can be so impactful in both helpful and deleterious ways. More so, I want to become the counsellor that can help clients and the supervisor that can help therapists. My goal for my career morphed into something more holistic and interconnected. Again, into something spiritual.

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In terms of answering my initial question in this reflection, I agreed to take on that supervision group, as a young doctoral candidate, because I wanted to provide a learning experience that was safe, supportive, encouraging, ethical, and accountable.

My first experience as a clinical supervisor was far more challenging than I expected. There were new competencies to apply and master. I had the personal understanding of how detrimental a negative experience could be to new counsellors and as such, I had an over investment into their well being and success. I wanted to walk every step of their learning path with them –a venture that may be unrealistic in the long run. Perhaps my greatest learning on this side of the supervisory experience was understanding the importance of gatekeeping, regardless of how much you want your supervisees to succeed. I recall the desire I had as a supervisee to improve and I wanted to nurture that desire while keeping their anxiety at bay. However, there is a very real responsibility of gatekeeping in the profession; a responsibility that does not always coexist peacefully with good intentions.

My learning in the field of counselling and psychotherapy has been undoubtedly influenced by my time as a supervisee and as a clinical supervisor. I learned the value of reflection, use of self, ethics, and case conceptualizations. I now better understand how the experiences we carry with us may have infinite impacts on our actions. I also value this role more now than ever. Through my PhD studies and research, I certainly hope to promote further research and understanding of clinical supervision, and more specifically, the person of the supervisor.

Appendix G

Researcher's Self Interview

In an effort to develop an understanding of personal experiences and potential biases prior to engaging in participant interviews, the researcher answered all interview questions and transcribed the results of the interview. This interview transcription is provided below:

Question (Q): We'll begin with maybe what were some of the main reasons you decided to become a clinical supervisor? What were you looking to get from this experience? Goals? Hopes? Expectations?

Researcher (R): I think I was always interested in becoming a clinical supervisor just because I had a few experiences of my own in supervision where they were particularly negative. I had bad experiences to the point where I didn't think I'd want to stay in the field. So once I got over that and worked harder and had a good supervisor that I really enjoyed being with, then ... being ... I guess being in the field was more important to me and I wanted to make sure other new supervisees had better experiences themselves so I really wanted to improve other people's experiences so that they didn't have to go through something that I went through.

Q: So looking back now, how would you describe your experiences as a clinical supervisor in general? Your initial experiences as a supervisor?

R: Umm, I had a really great first experience. I really enjoyed working with the group of new people, or novice therapists that I had. It was just... it was a really good experience. I

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felt like I was getting something back from this. I felt like I was giving something to them. Like I was making a difference. So it was really good. I had certainly a challenge with one of my supervisees where they weren't developing as quickly as others, so that was a challenge there. More of learning how to work with different developmental levels, but in general my experience was pretty phenomenal.

Q: So after starting this new phase of your career, how would you describe professional growth?

R: Umm, I think professional growth is more than just learning about the needs or learning about the information in a profession. You know the competencies of a profession. I think it's also that confidence aspect where you're more independent and you know what you're doing on your own. You're more sure in your interventions, rather than just wondering you know next steps and things like that. You're more confident.

Q: What changes did you experience as a person throughout your initial experiences as a clinical supervisor?

R: I definitely became more calm [laughter]. And more patient. I noticed for sure at the end of the first year I was a lot better in a group. I was a lot better at conceptualizing therapy and different interventions. But as a person I think I was more patient and more calm. I was able to sit in a moment better and really appreciate a moment with another person.

Q: What would you say was the most important change experienced that you attribute to your clinical work as a supervisor?

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R: I think my ability to conceptualize cases developed a lot more. Umm as a supervisor, in my experience I had to be the expert that was the wealth of knowledge for the supervisee, and I think that pressure of needing to be the expert certainly made me increase my skills of conceptualization so I would have something to provide my students with.

Q: are there any areas you hope to develop or change for future supervision practice?

R: Hmm any areas I hope to develop? Umm I think I need to be maybe a little bit tougher with that gatekeeping role. I know in my first experience I wanted everyone to have a good experience similar to the one I didn't have. I wanted to make sure everyone was happy and empathized with and validated so I think maybe next time that honoring the importance of the gatekeeping role is something that is important and certainly something that needs work for me ... being able to give helpful feedback but not to shy away from having the students or the therapist improve upon things that may not be up to par.

Q: What did you find most challenging during your initial experiences in providing supervision?

R: Again it would have been the providing feedback. That was a bit of a challenge. It was certainly difficult for me to provide feedback simply because I didn't want to ruin the students' experience or.... I didn't want to detriment their development in anyway.

Q: What did you most helpful in your initial experiences of providing supervision?

R: I think having the supervisees submit data for supervision so... DVD recordings, was certainly helpful because it gave me something tangible to work with. Umm we were able

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to review sessions and have something to really build upon and set goals for. And also having a really structured supervision session was helpful for me and my own anxieties, but also for what the students could expect.

Q: What has been the greatest support or resource during the initial months of practicing supervision? What helped you through these times?

R: I was very nervous, that's for sure. It was a nerve-wracking time because I was going from you know, being a fellow therapist to the expert of the experts. So it was nerve-wracking but probably what helped me most was doing a lot of research on my own. A lot of reading. A lot of consultation with other supervisors.

Q: What has been most memorable so far in your journey of becoming a clinical supervisor?

R: Probably the one negative experience I had with one of my students with providing negative feedback. That was a bit of a challenge. Something that you know what hard for me and for the student and something I would have to learn from for sure.

Q: What do you consider to be desirable qualities of an effective supervisor?

R: Definitely patience. Definitely patience. And a sense of calm. I think having a supervisor that doesn't get rattled easily and is able to be this calm oasis in a challenging field, I think that really helps the supervisees open up and have a sense of trust and safety in the room. And I really think that's most important to their development at any time in the field.

Q: What are your greatest strengths and assets as a supervisor?

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R: I think my greatest asset or strength would be patience and the ability to develop rapport with my supervisees. Where they know they can share without fear of getting in trouble or anything like that.

Q: What is an area that you would like to grow as a clinical supervisor?

R: Probably my confidence. It fluctuates. There are some times where I feel like I am doing a great job and I am modeling for the supervisees and I'm becoming an internalized mentor for them and everything is going well. And there are other times where I feel like I can't give them enough and I don't even want to comment on negative experiences for them and umm ... so I think the confidence needs to grow a bit and that should come with more experience.

Q: What does spirituality mean to you and how do you define it?

R: I think spirituality is a sense of purpose and meaning in the world. Something beyond just surviving and just living. I think its connection with everyone around. That you have the power to impact others whether you know it or not. It's that sense of something is bigger than you in the world. That sense of something that is beyond you and you have a responsibility to do good to others because we're all related and we're all connected and we can all impact each other.

Q: What is the role of spirituality in your work as a novice supervisor? How do you see the role of spirituality in your growth as a clinical supervisor?

R: I think the role of the clinical supervisor is pretty much at the top of our profession. You know, they oversee all the therapists and the work that's done. From the supervisor

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you go to the therapist and then you go to the client and then the client goes off into the world. Umm so I think that supervisors really ... they're the part that begins the impact on others and begins this sort of domino effect so I think that it is, as a role, spiritual in nature due to this interconnectedness of it. The essence of it is being interconnected and having responsibility to help others and you have responsibility of the person you're supervising and as well as the person that they are seeing as a client or a patient. So I think spirituality is intrinsic to the supervisory role with that sense of connectedness and altruism.

Q: Have you experienced any changes in the way that you understand your spirituality since you started practicing as a supervisor?

R: I think rather than understanding spirituality, I think I started to feel it more. Where you feel a fulfillment in the work you do. Its something I have started to feel is just fulfilled in being a supervisor by helping others and seeing these therapists go and make differences in the lives of others is meaningful and I think I feel more fulfilled and spiritual based on these experiences.

Q: What values guide you in your work as a clinical supervisor and in your personal life?

R: I think do unto others as you would have them do unto you is certainly something that guides my work. I really want there to be a sense of fulfillment in everyone's life and a sense of goodness in the world so I am really guided in my work to help others and that is certainly an important value of honesty and genuineness and unconditional positive regard I suppose.

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Q: Have these values ever been challenged in your professional work as a clinical supervisor? How did you handle that?

R: I think my personal values certainly have been challenged in the sense that the supervisor role has that gatekeeping capacity to it so I have certainly had to be cognizant of that and to remember that sometimes there needs to be a gatekeeper and that has been challenging because you've had to deliver difficult news or hold people back and I feel as though it goes against my values but at the same time it goes for the greater good of the profession so... its a bit of a juxtaposition that has been a challenge for me.

Q: Have you experienced any challenges in the way that you have lived according to your values since you started practicing as a clinical supervisor?

R: No, I wouldn't say. Not necessarily, no. I certainly try to stick to my values as best as I can and even though the gatekeeping role is a bit of a challenge for me, outside in the "real world" if you will, I try to stick to that sense of altruism and doing good for the world.

Q: How do you see the role of reflective practice in your development as a clinical supervisor?

R: I see it as being absolutely fundamental to be completely aware of your own blind spots and your own values and beliefs going into that room would be so important to help others. If only I knew how difficult ahead of time it would be for me to be a gatekeeper, I think the first experience as a supervisor would have gone a little bit differently and I would have had a little more balance between promoting or helping my supervisees as well as giving them feedback and suggestions and corrective feedback.

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Q: What role do you see reflective practice and spirituality having in your future clinical work?

R: I think I'm going to integrate it a lot more. It's going to be a lot more central. It needs to be a lot more central because it is very beneficial.

Q: Do you have an interest in taking a formal supervision course in the future?

R: Yeah I think the field is still changing and growing so there is a lot more literature and research and it is a lot more important to continue growing and staying up to date.

Q: What is the next step for developing as a clinical supervisor?

R: Definitely more practice. Because I need that [laughter].

Q: Do you have any advice for other novice clinical supervisors beginning their training or practice?

R: Umm ... reflect on your own anxieties before going in. Because you're definitely going to have them, you're definitely going to have anxiety so it is worth reflecting upon. See where that comes up for you and how you can manage it so that your supervisees get the best part of you that you have to offer.

Q: If you were to describe to me in a few words or in a sentence, your journey of becoming a clinical supervisor, what would you say?

R: Umm [laughter], bumpy. I would say it's bumpy but its been on a bumpy path but during a bright and sunny day. So... that's how I would describe it.

Q: Alright, thank you.

Appendix H

Clinical Supervision Guidebook for Use at Family Services Ottawa



Clinical Supervision Guidebook

Jillian Mannella, PhD Candidate

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Purpose of the Manual

With the hope of inspiring lifelong learning and exploration, this guidebook was developed to assist those at Family Services Ottawa (FSO) on their journey to becoming a clinical supervisor. The development and use of this guidebook on clinical supervision is of particular importance to FSO's mandate of providing quality services that help make lasting improvements in people's lives. Given the fact that supervisors at FSO oversee and monitor many clinical experiences, having well supported and trained supervisors will certainly assist in adhering to this mandate. Through this guidebook, it is hoped that FSO supervisors gain an understanding of the importance of their role to the quality of client care provided.

While clinical supervision is fundamental to the helping professions, training on this unique and important role is not yet mandatory within the field. This results in vastly different approaches to supervision within the agency. FSO hopes to support supervisors in providing high quality supervision that makes lasting improvements in counsellors' work, as well as clients' lives.

In order to achieve consistency and support for FSO supervisors, this guidebook highlights many of the general principles, competencies, and best practices associated with providing supervision within the agency² (See Appendix A). Ultimately, this manual serves as a means of training and guidance for those providing supervision for staff and/or

² This document was written primarily from the lens of a clinical psychotherapist and should be noted that there are additional sources of knowledge, including that of the OCSWSSW, OASW, and AAMFT

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student interns. It is hoped that this manual will add more knowledge to support the already skilled clinicians on staff.

Getting Started!

With an understanding of the purpose of this guidebook, there are several important points to take into consideration for providing clinical supervision at FSO. Perhaps most important to your work as a clinical supervisor would be **reflecting upon your own experiences in supervision**: What worked? What didn't work? What did it feel like to be unsure or unsafe in supervision? What informs your practice today? Developing an understanding of **impactful experiences** on your clinical practice and professional development will certainly assist in guiding your supervisory work.

The impact and importance of clinical supervision is often well understood by clinicians through their personal experiences in the field. Those in the helping professions can frequently recall instances in training and supervision that they found to be particularly helpful (or not!) to their professional growth and wellbeing. However, due to the varying and fluctuating nature of the supervisory role, defining the role, beyond our individual understanding and experience of it, is far more difficult. **Understanding the role and purpose of the supervisor will perhaps be most influential in supervisory work at FSO.**

Furthermore, similar to how therapists use theories of therapy to frame their clinical work, the same can be done for supervision. **If the supervisor is familiar with theories of supervision, they will better meet the needs of their supervisee.** The reflective aspect of preparing for supervision certainly assists in understanding which

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theories of supervision resonate most with the person of the supervisor. Specifically, theories of therapist development are helpful to know for all supervisors regardless of place of employment. These models function as a roadmap to therapist developmental needs during different stages of experience. It helps the supervisor tailor their clinical work to what the supervisee needs most at a given time.

Just as we may all continue to grow and develop as human beings, clients, interns, or therapists/counsellors, the process of becoming a clinical supervisor is also a development process, which builds upon prior experiences in the field. Both the definition of clinical supervision and theories of practice provide insight into our own experiences in the field, normalize many emotions related to this challenging role, and provide a roadmap to guide both supervisor and supervisee on their developmental journeys...

Understanding Clinical Supervision

As a distinct competency, clinical supervision has the purpose of ensuring client welfare and safety, as well as supporting the professional development of the practitioner. The impact of clinical supervision is well documented in the literature. For example, psychotherapists who engage in supervision and view their experiences positively report an increase in clinical skills and competencies (Hill & Knox, 2013). However, those psychotherapists who report negative experiences of supervision also report a decrease in clinical efficacy (Hill & Knox, 2013). In terms of the client experience, those who are seen by supervised therapists report greater satisfaction with their experience in therapy (Hill & Knox, 2013). Clinical supervision can have both positive and negative impacts on

practitioner and client. As such, the importance and impact of the supervisory role is well noted, bringing proper supervisor training to the forefront of FSO's current agenda.

While there are many definitions of clinical supervision in the literature, Bernard and Goodyear's (2014) understanding of clinical supervision is widely referenced in both literature and counselling governing bodies:

an intervention provided by a more senior member of a profession to a more junior colleague ... This relationship is evaluative and hierarchical, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person (s); monitoring the quality of professional services offered to the clients that she, he, or they see; and serving as a gatekeeper for the particular profession ... (p. 9).

The Canadian Counselling and Psychotherapy Association (CCPA) references this definition of clinical supervision in the training and preparation of its practitioners. However, the CCPA further notes that supervision should be considered a specialty within the helping profession, as well as a competency that is perhaps most important to developing practitioners.

The College of Registered Psychotherapists of Ontario (CRPO) defines the competency of clinical supervision similar to that of the CCPA, highlighting both the importance of promoting client welfare, as well as encouraging the professional development of the practitioner: "a contractual relationship in which a clinical supervisor engages with a supervisee to promote the professional growth of the supervisee; enhance the supervisee's safe and effective use of self in the therapeutic relationship, discuss the

direction of therapy; and safeguard the well-being of the client” (CRPO/OPAP Professional Practice Standards for Registered Psychotherapists, 2014, p. 50). Perhaps most interesting to highlight is the emphasis placed on practitioner use of self in the therapeutic relationship. The CRPO continues to note the purposeful and intentional nature of supervision, highlighting the need for records, contracts, and regular meetings.

While the ultimate purpose of clinical supervision remains to be protection of client welfare and professional development of practitioners, the role assumed by the clinical supervisor varies greatly and further adds to the complexity of the competency. Most notably, the clinical supervisor embodies the role of teacher, consultant, mentor, and counsellor among others. Monitoring administrative tasks has become an important function of the supervisor within organizations and warrants further discussion. The administrative function of the clinical supervisor ensures organizational policies and priorities are achieved (OASW, 2015). Balancing both clinical and administrative functions of the clinical supervisor is challenging in this nearly unavoidable dual relationship (Kreider, 2014). The functions of the clinical supervisor vary and are dependent on the needs of the client and the needs of the supervisee. Developing a thorough understanding of the varying functions and ultimate purpose of the clinical supervisor is fundamental in providing supervision.

Lifespan Developmental Model of Supervision

No matter how experienced the clinician, first experiences in the field of counselling and psychotherapy tend to be most memorable. Many clinicians reminisce on those often anxiety provoking first client experiences. Often, there are supervisors who

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stand out as being particularly important during these formative years of development. As such, a supervisor who is aware of these particularly daunting experiences for new practitioners can certainly assist in making their first experiences in the field positively memorable. Rønnestad and Skovholt's (2013) Lifespan Developmental Model is summarized and presented below with the intention of providing new supervisors with a basic understanding of the needs of clinicians at all stages of development, in an effort to better support supervisee growth and development.

Novice Clinical Interns

Clinical supervisory needs tend to change with experience and development in the field. The novice clinical intern, relatively new to the field of counselling, has distinct needs from the supervisory experience. With some preparation and training, clinical supervisors can greatly ease the challenges of this particularly stressful and formative time for trainees (See Appendix E).

As highlighted by Rønnestad and Skovholt's (2013) Lifespan Developmental Model, the novice student intern is tasked with acquiring a plethora of new knowledge, meeting evaluative requirements of educational institutions, managing higher levels of anxiety associated with clinical work, and finally, maintaining an openness to various therapeutic orientations. The experience of supervision for the novice clinical intern is important to their development and the quality of care being provided. The novice intern requires supervision that emphasizes teaching and modeling of technique (Rønnestad &

Skovholt, 2013). As such, the supervisor can best assist the trainee by fulfilling the role of teacher.³

Since trainees at this stage tend to feel most anxious, there is a greater need for support and encouragement from the supervisor. Again, novice clinical interns **report their supervision experiences as being most influential on their development** (Rønnestad & Skovholt, 2013). The clinical supervisor working with interning clinicians should be mindful of the impactful nature of this fiduciary relationship. The supervisor working with a new therapist has the power to greatly influence their professional development ...

Important points to remember for supervisors working with novice interns:

- It is to be expected that the novice student experiences greater levels of anxiety than normal
 - There is a need for support, encouragement, and normalization
- The novice student learns most in supervision from modeling and teaching

Advanced Clinical Interns

The more advanced intern is interesting to work with, as they provide unique challenges in supervision. The advanced clinical intern is considered to be a student engaging in clinical work and nearing the end of their graduate clinical training program (Rønnestad & Skovholt, 2013). During this stage, supervisees tend to fluctuate between confidence and feelings of inadequacy. A trainee's confidence can be derailed after a single particularly challenging session. The supervisee, aware that their graduation is just

³ For a helpful, awareness building supervision technique, see Appendix I!

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around the corner, wants to learn as quickly as possible what is needed before the end of their clinical training (Rønnestad & Skovholt, 2013). As such, there is a need for more direct feedback from the supervisor. The increased expectations established by the supervisee lend negative supervisory feedback to be especially detrimental. Therefore, the supervisor is tasked with balancing the learning needs of the supervisee with their experience of heightened anxiety.

Important points to remember for supervisors working with advanced interns:

- Supervision in this stage has the potential to be harmful
 - Extra care is needed
- It is normal for the student to fluctuate between feeling confident and being overwhelmed
- The student benefits from more direct feedback, teaching, modeling

Practicing Professionals (Novice, Experienced, and Senior Stages)

What is perhaps most beautiful about this profession is the fact that clinicians in the field have the potential to continue growing and developing with each new experience in both life and clinical work. The supervisory experience needs to adapt to the changing needs of the clinician throughout the course of their professional practice.

One challenge that stands out most to new independent practitioners is making that leap from being a student to a professional. There is a certain level of shock that comes from becoming an autonomous practitioner (Bernard & Goodyear, 2014; Rønnestad & Skovholt, 2013). While training is certainly an experience that stands out to most, the first foray into independent practice is also memorable.

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As such, supervisors working with newly independent practitioners can best assist them by becoming aware of the challenges unique to this stage. For example, during the first five years of clinical practice, the novice practitioner is tasked with developing an identity with the profession, as well as becoming an independent and autonomous practitioner. During this stage of development, the novice practitioner will be less likely to model the supervisor and more likely to create a style of therapy that is congruent with their own beliefs and values (Rønnestad & Skovholt, 2013). While there are often challenges during this stage of practice, these challenges encourage reflection and growth, and should not be avoided –by supervisor or supervisee! ⁴

The function of supervision in this stage adjusts from modeling and teaching, to more reflection and mentorship with the ultimate goal of encouraging continued professional growth and development of identity through the tougher times ahead...

Important points to remember for supervisors working with novice professionals:

- It is to be expected that the novice professional experiences challenges during their transition to more autonomous practice
- The novice professional is tasked with developing a style of therapy that resonates most with their personal values and beliefs
- The supervisor is most helpful in encouraging further development by reflecting on encountered challenges

⁴ For supervision techniques that encourage reflection, see Appendix I!

Advanced Professionals

More experience often brings about more confidence. Clinical professionals with more than five years' of experience are considered to enter the experienced stages of professional development. Those with twenty years' experience or more are deemed to be senior practitioners. These practitioners have had a lot of experience in the field –both helpful and challenging to their development. Often, they are asked to supervise other clinicians! While it tends to become easier with time –and a hectic schedule- to solely rely on experience for guidance and forego supervision, supervision is still helpful in many ways. For example, experienced and senior professionals may be bombarded with a variety of responsibilities in their personal and professional lives. A significant challenge for these professionals involves remaining engaged in clinical work without experiencing burnout or stagnation on their development (Rønnestad & Skovholt, 2013). Practitioners who are satisfied and experience a sense of wellness are able to integrate their life learnings into practice. This integration of life experience into work develops a sense of meaning and purpose that is extremely valuable in continued growth and avoiding burnout (Orlinsky & Rønnestad, 2012; Rønnestad & Skovholt, 2013). Supervision throughout these stages functions as mentorship to encourage continued professional development, integration of life learnings, and a means of preventing burnout or disengagement.

Important points to remember for supervisors working with advanced professionals:

- The advanced professional is tasked with avoiding burnout and disengagement

- The clinical supervisor functions as a means of encouraging self-care and integration of personal and professional self
 - The clinical supervisor as mentor and consultant become effective supervisor functions

Other Models of Supervision

Education and training related to theories of supervision assist in easing a new supervisor into the role, while providing a framework to ground practice in theory. Basing their practice in theoretical models, the psychotherapy supervisor can make informed decisions to best assist their supervisees' development. Similar to a psychotherapist having knowledge of theories of therapy, best practice suggests a supervisor have knowledge on models of supervision (Bernard & Goodyear, 2014).

Supervision models are separated into **three broad categories: psychotherapy, process, and developmental models** (Bernard & Goodyear, 2014). It is suggested that supervisors practice across categories, rather than within (See Appendix D). As such, familiarizing oneself with models of supervision becomes important for developing a structure for when working with supervisees. Firstly, **psychotherapy based models of supervision embody the goal of passing on a therapeutic approach to supervisees.** This type of model is helpful in assisting supervisees learn specific theories of psychotherapy. These models intend to pass on a therapeutic approach to counsellors and provide counsellors with a sense of how the client might feel in counselling. However, there is an inherent risk of blurring boundaries between practicing clinical supervision as opposed to therapy –something the supervisor must remain cognizant of.

In process models of supervision, the supervisor works with the goal of observing and commenting on the supervision process itself, in an effort to promote supervisee development by deconstructing behaviour (Bernard & Goodyear, 2014). It has been suggested that process models lack an emphasis on theory. Some process models of supervision include, but are not limited to: the Discrimination Model, Hawkins and Shohet's model, and the Events-Based Process model (Bernard & Goodyear, 2014).

Finally, developmental models of supervision focus the supervisory work on the learning needs of the supervisee at their specific point of development. Given the fact that supervisees greatly differ in development and their learning needs, the supervisor is encouraged to work with a variety of models in an effort to meet differing needs. While the differing levels of supervisee development are clearly outlined, it has been noted in the literature that this model is lacking attention to cultural differences, as well as differences in learning styles (Bernard & Goodyear, 2014). Some developmental models of supervision include, but are not limited to: the Integrated Developmental Model by Stollenberb and McNeill, the Life-Span Developmental Model, and Loganbill, Hardy, & Delworth's model (Bernard & Goodyear, 2014).

Psychotherapy, process, and developmental categories of supervision embody several specific models to guide supervisory interactions. **While no single model is complete**, supervisors are encouraged to know the theories behind many models, in an effort to develop a complete understanding of supervisor impact and supervisee needs.

Clinical Supervision: Best Practices

Contracting and Documentation

Similar to providing counselling and psychotherapy, clinical supervision has an informed consent procedure necessary when engaging in the supervisor process. Prior to beginning the supervisory process, it is best practice to have a **written contract** signed between the supervisor and supervisee (Borders, Glosoff, Welfare, Hays, DeKruyf, Fernando & Page, 2014; See Appendix B). The consent form should include, yet is not limited to: the nature of the supervisory roles (teacher, mentor, counsellor, or consultant), the expectations and goals from both supervisor and supervisee from the process, evaluation procedure and various criteria for evaluation, crisis plan, and remediation plans for underperformance. Various logistical additions to the supervision contract would include: location, date, time, duration of the contract, cancellation procedures, fees, and means to collect or transfer records in the event of an emergency (Borders et al, 2014). This contract should be regarded as a **living document**, whereby it is referred to frequently for updates, additions, achievements, and goal development (Borders et al, 2014).

Documentation remains essential to ethical practice in the supervisory process. Considered a “system of supervisor accountability” (Borders et al, 2014, p. 40), documentation often includes: an initial supervisor contract, supervisee and client informed consent, content of what was discussed, review of data, feedback for counsellor and client care, missed and cancelled sessions, and finally, the discussion of problems or a remediation plan if deemed necessary.

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Perhaps most important to note is the fact that both counsellor and client have the right to access supervision documentation. It becomes imperative that documentation is accurate, clear, and responsible (See Appendix C). All documents should remain in a secure location. Rough notes (or “jot notes”) should be transcribed and added to the supervisee file, or destroyed following the supervision session.

Important points to remember for contracting and documentation in supervision:

- Documentation is fundamental for supervisor accountability
 - Clinical Supervisor general guideline: if it is not documented, it did not happen ...
- Supervision documentation should include:
 - An initial contract
 - A consent form
 - Records of the content of sessions/missed sessions
 - A remediation plan if necessary
- Clients and therapists have access to supervisor notes

Evaluation Process

Being evaluated invokes a particular sense of vulnerability. Especially in counselling and supervision, evaluation can be a raw experience for some, as there is a fine line between the person of the therapist and their clinical skills. However, evaluation tends to be a central component of supervision for a variety of reasons (Bernard & Goodyear, 2014). The gatekeeping role of the clinical supervisor, as well as the professional development needs of the supervisee, necessitates an evaluative function of

supervision. It becomes woven into the supervisory process, from initial contracting to termination, in order to assist the development of the clinician, as well as the well-being of the client. The supervisor is tasked with balancing both the needs of the supervisee as a person, as well as the evaluative function of supervision –a very challenging undertaking!

Criteria of Evaluation (Data Types)

Evaluation is often based on criteria set by the institution where one is practicing, competencies as listed by a regulatory body, or individual goals as outlined by the supervisee. Generally, the supervisor is responsible for monitoring the knowledge, skills, and professionalism of the supervisee, in conjunction with their own understanding of how the clinician should be functioning within the profession. The supervisor is responsible for basing their final evaluation on some form of concrete data. It is considered a best practice to ask for data, including: audio, video, shadowing, or journaling (Borders et al, 2014). Also, the supervisor should consider reviewing an entire session per evaluation period.

However, the supervisee should be encouraged to take part in the evaluation process. The supervisee may contribute to evaluation criteria by providing independently developed learning goals, as well as engaging in self-reflective practices. A self-evaluation conducted by the supervisee remains to be an effective tool for developing self-awareness, as well as beginning the discussion.

The process of evaluation has commonly been experienced with angst and vulnerability. Specifically, those new to the helping profession often find negative evaluation experiences to be detrimental to their development (Rønnestad & Skovholt,

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2013). However, the supervisor has the ability to mitigate unnecessary anxiety related to the evaluation process –another indication of the importance of the supervisory role! (For more tips, See Appendix H). A clearly outlined evaluation process with regular opportunities for feedback from both supervisor and supervisee creates a transparent process of safety.

Supervisors should provide feedback in both formative and summative processes. A formative evaluation process occurs regularly throughout the supervision contract and involves informal feedback opportunities. Summative evaluations occur at the end of the contract period and represent the “moment of truth” to the supervisee (Bernard & Goodyear, 2014, p. 224). The supervisor should remain cognizant of the hierarchical nature of supervision, and act accordingly. This involves working with supervisee defensiveness and vulnerabilities, avoiding hasty evaluations, and monitoring the working relationship.

This description of an evaluation process is particularly accurate for the student practitioner. However, ongoing employees at FSO may be more familiar with performance appraisals. Performance appraisals are expected to occur on an annual basis and highlight both areas of strength of the clinician, as well as future areas of development. This process ensures and promotes continual development –something that is necessary in the profession!

Important points to remember for evaluation in supervision:

- Evaluation is a fundamental component to the supervisory process
- Evaluation should be facilitated by both supervisor and supervisee

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- Supervision is hierarchical, and thus, calls for sensitivity in evaluation
- Data types include:
 - Audio recordings
 - Video recordings
 - Direct observation
 - Journaling

Parameters of the Supervisory Relationship

The quality of the supervisory relationship is an important factor in providing effective supervision. It is well known that emotional intelligence, humility, openness, flexibility, and transparency are necessary for a positive supervisory relationship.

While certain personal qualities of the supervisor are helpful in developing a positive supervisory experience, a supervisor must be aware of the importance of relational boundaries. Due to the fiduciary and hierarchical nature of the supervisory relationship, the supervisor must maintain **clearly defined boundaries** and **avoid multiple roles** if possible. In organizational settings, it is particularly difficult to avoid dual relationships. In these instances, the supervisor should be transparent about the nature of the relationship, prevent harm to the supervisee, and maintain objectivity in evaluation –something that requires a reflective capacity. While the role of reflection to stimulate supervisee growth is fundamental, it is necessary for the supervisor to engage in similar reflective practice to evaluate the quality of the supervisory relationship.

Working with Conflict in the Supervisory Relationship

Similar to any interpersonal relationship, the supervisory relationship is not immune to conflict. Although positive supervisory skills, such as transparency, openness and genuineness, have been identified to enhance supervisee development, various experiences have been identified to hinder supervision effectiveness. Bernard and Goodyear (2014) note that conflict often occurs in relationships, yet it is through constructive resolution that the supervisory relationship may strengthen and grow. Alliance strains in supervision are common due to the taxing work supervisors and clinicians engage in. However, through clarity, transparency, integrity, and sensitivity, these strains can be truly managed.⁵

Important points to remember for an effective supervisory relationship:

- A supervisory relationship will often encounter strains ... this is normal!
- Dealing with conflict in supervision is most important for improving the working alliance
 - A supervisor can best manage conflict with an open, supportive, and reflective position

Professional Consultations (Supervision of Supervision)

Professional consultation –or supervision of supervision—is a common element of training for those in doctoral training programs. However, professional consultation can be useful for practicing supervisors in the helping professions. Furthermore, professional

⁵ For tips on managing conflict in the supervisory relationship, see Appendix J!

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consultation is particularly useful for those who are new supervisors, as this aspect of training may ease the transition into assuming the supervisory role.

Professional consultation mirrors many aspects of supervision of counselling work. Most notably, this type of supervision may include videotape review, role-playing, live supervision of supervision, or even group supervision of supervision. It is suggested that through this supervision of supervision, various learning objectives are considered, including: gaining knowledge of supervision models, understanding and conceptualizing counsellor development, the impact of the supervisory relationship, evaluation, skills, and ethical issues (Bernard & Goodyear, 2014; See Appendix A). Although supervisory skills are unique to this competency, supervision and practice are fundamental to the development of a supervisor: “as with the development of therapy skills, supervised practice is necessary to become a good supervisor” (Bernard & Goodyear, 2014, p. 286).

Important points to remember for supervision of supervision:

- Similar to supervision of clinical work, professional consultation is deemed helpful in the training of supervisors
- Supervision for the novice supervisor eases their transition into this unique competency
- Professional consultation/supervision of supervision may focus on several aspects of supervisor professional development including, but not limited to:
 - Supervision models
 - Conceptualization of supervisee needs

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- Supervisory relationship
- Supervisee evaluation
- Skills
- Ethical and legal issues

Supervision Format

Individual Supervision

Individual supervision varies based on counsellor need and experience.

Counsellors are expected to meet with their clinical supervisor at least once a month.

New counsellors beginning at the agency are asked to meet on a more ongoing basis until they are accustomed to the policies and procedures at FSO. The initial supervisory meeting with the clinical supervisor will review expectations, learning goals, preferred learning style, and plans for further development. The contract outlining the supervisory expectations and learning goals will be reviewed approximately every six months to assess counsellor ongoing development and progress toward learning goals (See Appendix F and G for format of supervision).

Group Supervision

Group supervision provides a unique forum with many benefits to counsellors.

Sharing the supervisory space with colleagues invites opportunities for learning that are otherwise inaccessible. The opportunity to observe the work and thought processes of one's colleagues has been considered most beneficial for learning in the group environment (Hillerbrand, 1989). Furthermore, counsellors may be exposed to a variety of client cases, affording more opportunities to learn from different presentations.

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Colleagues are also encouraged to provide reflections and feedback within this format, increasing both the breadth and depth of the supervisory experience.

Finally, group supervision often normalizes feelings experienced by even the most seasoned counsellor. Counsellors can benefit in knowing that they are not alone in the feelings experienced throughout the therapeutic process. Having a safe and inviting environment is perhaps most helpful in encouraging this format. It is important to consider: what can you bring in to the group format to make it as positive, safe, and beneficial as possible?

Group supervision takes place approximately once a month for an hour and a half. Counsellors are asked to come prepared to participate in some form: either with a case presentation or feedback for peers.

Peer Consultation

Counsellors are encouraged to engage in peer consultation whenever they deem feasible or helpful. Peer consultation is a great way to learn from others, informally consult regarding cases, and explore or reflect on challenges experienced throughout clinical work. Peer supervision or consultation becomes an effective antidote to burnout and isolation in the field of counselling and psychotherapy.

Expectations for Supervisees in Supervision

Our supervisees can do a lot to make supervision more effective and enjoyable. Supervisees are expected to contribute to the supervision process in a collaborative, cooperative, safe, and exploratory manner. Supervisees should reflect on their learning goals, needs for professional development, and areas for improvement. Also, supervisees

should come prepared to each supervision session with cases to present in an organized and thoughtful manner.

Ethical Considerations

Supervisors are bound by a distinct set of ethical guidelines, not unlike those followed by counsellors and psychotherapists. Most notably, supervisors and supervisees are expected to keep detailed records of their meetings (See Appendix B and C). These records may be accessed by both client and counsellor. Consent for supervision should be received prior to beginning the supervisory process. A counsellor should be informed of the expectations of supervision, goals for development, any fees associated with the service, preferred feedback styles, possible remediation plans, and alternate supervisor's contact information in case of emergency. Confidentiality should also be included and reviewed in how it applies to both counsellor and client. Due to the fact that the supervisory relationship is inherently hierarchical, the supervisor should take extra consideration in how to value and approach the supervisory relationship. The supervisor should work with the counsellor in an environment that is safe, conducive to development, and can still work with issues related to resistance and conflict. As a gatekeeper to the profession, a supervisor must be aware of potential issues facing supervisee development.

Important points to remember for Ethics in Supervision:

- Record Keeping:
 - Considered a system of accountability (Borders et al, 2014)
- Records should include:
 - A supervisor contract

- Supervisee- and client-informed consent
- Content of what was discussed
- Review of data
- Feedback for counsellor/client care
- Missed/cancelled sessions
- Discussion of problems/remediation plan if necessary

Reflective Practice and Professional Development

Within the field of counselling and psychotherapy, practitioners are encouraged to engage in professional development activities with the hope of promoting continual growth and development. The supervisory role in particular asks practicing professionals to learn new theories and approach psychotherapy with a different lens. As such, supervisors –novice to experienced—are required to have great awareness of their needs, their supervisees’ needs, future areas of development, and ways to achieve their own development. In a sense, they view the supervisory experience from *a bird’s eye*: overseeing the many dynamics and nuances from a distance (Scaife, 2010).

Reflective practice becomes fundamental for both supervisors and supervisees as a means of promoting ongoing development and growth. According to McAuliffe (2006), reflective practice is the basis for improvement and growth, providing a framework for supervisors to truly view their work from novel perspectives.

Reflective practice appears in the literature in a variety of ways. Most notably, it has been referred to as a process of critical reflection that influences future action (Scaife, 2010), a form of careful consideration of one’s beliefs (McAuliffe, 2006), as well as a

form of taking control of one's own history or personal burdens (Hunt, 2001). Engaging in reflective practice certainly impacts a supervisor's role and practice. **Viewing experiences—cognitive, emotional, and sensory—from an aerial view, results in new ways of seeing situations for both supervisor and supervisee (Scaife, 2010).** This practice calls upon supervisors to go beyond initial appearances to also process, hypothesize and consider future actions (Goodyear, Lichtenber, Bang, Gragg, 2014). In its essence, reflective practice responds to experience in its totality and necessitates self-awareness of the practitioner.

Supervisors may encourage reflective practice for both their own development and that of their supervisees. **While reflective practice necessitates some form of self-awareness, supervisors may promote this practice by encouraging their supervisee to view multiple perspectives (the bird's eye view), encouraging a move inward to one's own truths and experiences, and finally, teaching all to value the ambiguous of what is certain, as this truly emphasises ongoing consideration and learning (McAuliffe, 2006; Scaife, 2010).**

Reflective practice is considered a key component to professional development and growth (McAuliffe, 2006). However, engaging in this practice necessitates a sense of self-awareness and empathy. While these characteristics may not be fully formed for all supervisees, they can be developed with practice and patience. It may be challenging to view experiences from new angles, but stretching the mind lends itself to ongoing growth—something that is truly remarkable within this profession.

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Important points to remember for reflective practice:

- Reflective practice is a necessary component for professional growth and development
- There are many understandings of what reflective practice entails, including:
 - Consideration of past events
 - Understanding of current beliefs and forms of knowledge
 - Consideration of future action
- Reflective practice can be promoted by:
 - Encouraging multiple perspectives
 - Encouraging a move inwards to one's truth
 - Valuing the ambiguous over certainty

Summary

The clinical supervisor has the opportunity to develop counsellors, improve client care, and consult with colleagues. Although the supervisory role is still not thoroughly explored in research and literature, it is known to have the potential to greatly impact both counsellor growth and client satisfaction. As such, this important role necessitates training, support and guidance, and an inherent passion for the field. FSO is dedicated to helping counsellors assume this role and the next steps in their professional development as counsellors and supervisors, in an effort to promote continual learning and optimal client care. Current supervisors can improve their practice by remaining up to date with literature, engaging in best practices previously outlined, valuing the supervisory relationship, and practicing reflexivity to promote ongoing development.

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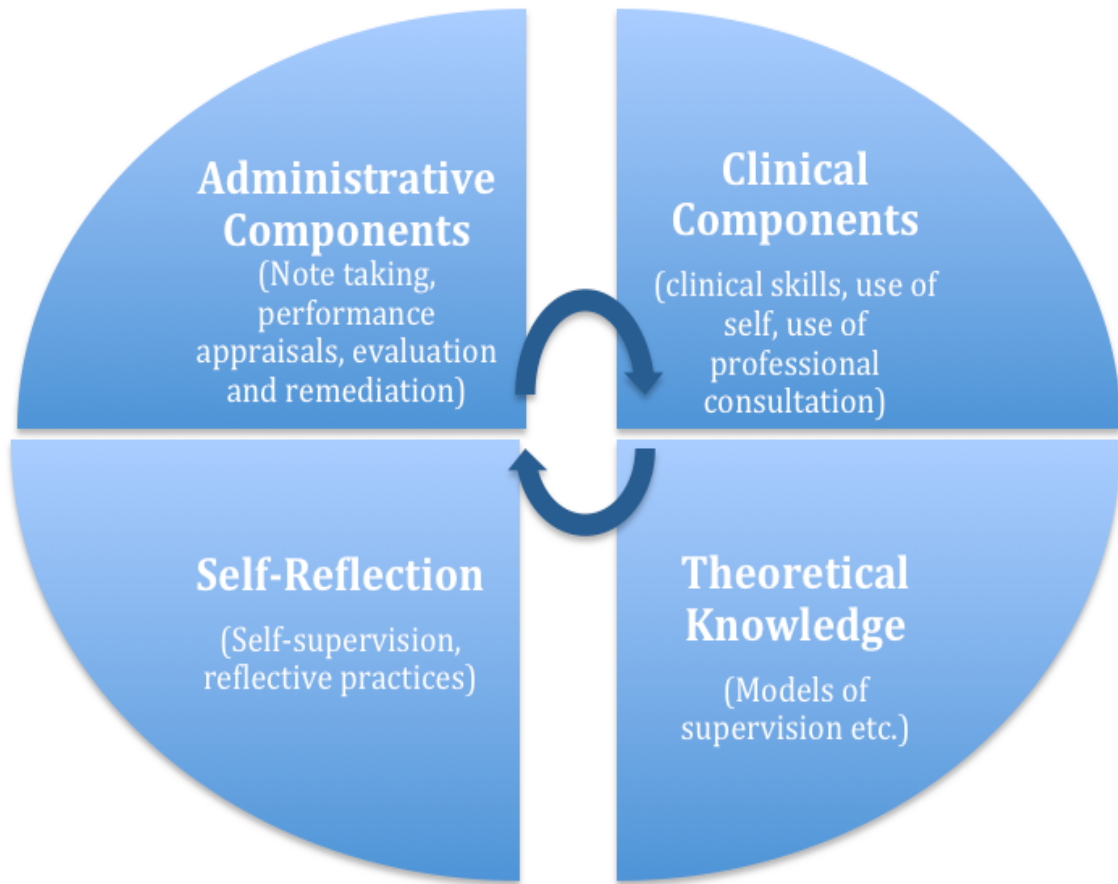
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Appendix A

Professional Development and Learning Objective Goals for Supervisors at FSO



Please use this tool as a means of increasing awareness of potential learning objectives and areas of growth as a supervisor. You may revisit and add to areas of growth regularly.

Adapted for use at Family Services Ottawa from: Borders, L.D., Bernard, J.M., Dye, H.A., Fong, M.L., Henderson, P., & Nance, D.W. (1991). Curriculum guide for training counselling supervisors: Rationale, development, and implementation. *Counsellor Education & Supervision*, 31, 58-82.

Appendix B

Supervision Contract

**Supervision Agreement Form for Staff & Student Interns**

This is a supervision contract between _____ and _____

College and Professional Membership(s) for each of us:

Supervisee
Supervisor

Goals and Purpose of Supervision

We agree that supervision is used by supervisees to reflect on all aspects of their counselling work. The focus of supervision is on the well-being of the supervisee, their clients, and the improvement of the quality of work and life. Supervision may occur in a variety of formats including individual, group using various methodologies such as in person discussion, supervisor as an observer in a session, supervisor as a co-therapist, videotaping, reflecting teams etc.

Guidelines

- Confidentiality: All discussions are confidential except:
 - where there is a risk of harm and/or legal involvement
 - where there is a conflict that requires involving a third party
 - where an external third party is reviewing agency work; ie for research, accreditation purposes
- Openness/transparency is a cornerstone to our working together (about work done, the supervisory relationship etc.)
- Should disagreements, disputes, or areas of conflict arise between the supervisor/supervisee that cannot be resolved amicably; the supervisor and/or the supervisee will consult their Program Director or designate
- In the absence of clinical manager, supervisees will be advised who will provide clinical consultations.
- Keeping of supervisory notes: Both the supervisor and supervisee may write notes during sessions. These notes are confidential and shall be kept in a safe and secure location.
- The supervisee is required to inform the supervisor of any other forms of supervision/consultation they are engaged with

Shared Responsibility:

- Create an environment that nurtures trust. If either the supervisee or the supervisor cannot attend a session they will let the other know as soon as possible. The person cancelling will take responsibility to reschedule within a week.
- Tracking time spent in Clinical supervision
- Developing the overall agenda for meetings
- Reflecting on the client situation and relationship with counsellor
- Reflecting on and providing input to assessment and evaluation of counsellor/intern/supervisor (keeping in mind that evaluation is an ongoing process and formal evaluations should never include 'surprises')
- Ongoing reflection of the supervisory relationship and experience
- Remaining aware of the ethical issues in counselling and supervision. Safety issues will take priority over all other issues in the supervisory process (e.g. child protection, domestic abuse, mental health issues, referrals).

Logistics:

- We agree to meet for a minimum of 1 hour per month in individual supervision at a mutually convenient time and 1.5 hours per month in scheduled group supervision; may be pro-rated on basis of FTE.
- All supervision is conducted in line with the Code of Ethics and Standards of Practice of the Canadian Counselling and Psychotherapy College and/or the Ontario College of Social Workers and Social Service Workers.
- The notes taken during supervisory sessions are kept securely and confidentially at all times and will be destroyed at such time as this agreement is terminated or as per FSO Policies and Procedures
- If there is need for extra supervision this will be negotiated

Supervisor Responsibility:

- Completing supervisory reports/notes in a timely fashion as required by external agencies (e.g., educational institutions, regulatory bodies) and by FSO (file audits, performance appraisals, etc)
 - Completing formal Assessment and Evaluation
 - Formal evaluation will take place as part of the scheduled Performance appraisal on _____
- Supervisee Responsibility:**
- Preparing for supervision
 - Presenting transparently in supervision: the content, themes, skills, theory and interventions of your work with clients
 - Applying learning from supervision
 - Documenting the plan/outcome of the supervision in the client file is the responsibility of the supervisee

CHANGE AND GROWTH IN NOVICE PSYCHOTHERAPY SUPERVISORS



Communication: learning styles and readiness for change can impact communication in supervision		
Preferred learning styles: Visual (spatial) ; Aural (auditory-musical); Verbal (linguistic); Physical (kinesthetic); Logical (mathematical); Social (interpersonal); Solitary (intrapersonal): Stages of change: Pre-contemplation; Contemplation; Preparation; Action; Maintenance		
Supervisee: I prefer to receive feedback in the following manner 		
Preferred approaches to work with clients (brief listing); how do you prefer to support clients to enhance their quality of life? 		
Professional Development Goals		
Goal	Task	Evaluation
Preferred approaches to supervision; how can I best support your ongoing growth as a therapist and the quality of your work life?		
Goal	Task	Evaluation

Supervision Duration Start _____ End _____

Date of Initial Agreement Start _____ Review Date _____

I have read and understand the above agreement and I agree to accept and abide by them throughout the supervisory process.

_____ Supervisee December 2015	_____ Date	_____ Supervisor	_____ Date 1
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CHANGE AND GROWTH IN NOVICE PSYCHOTHERAPY SUPERVISORS

Appendix C

Supervision Notes

Supervisee Name:

Supervisor Name:

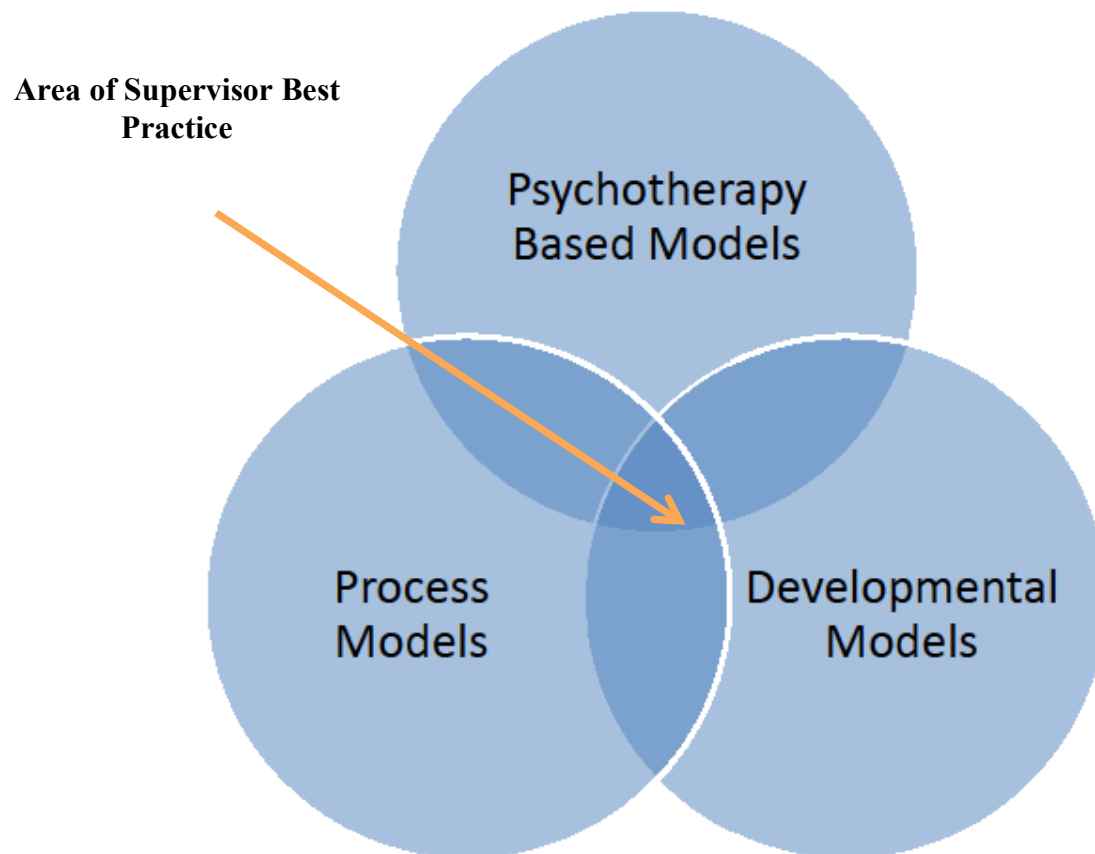
Date:

Client #	Context, Question, and Supervisor Feedback

Other:

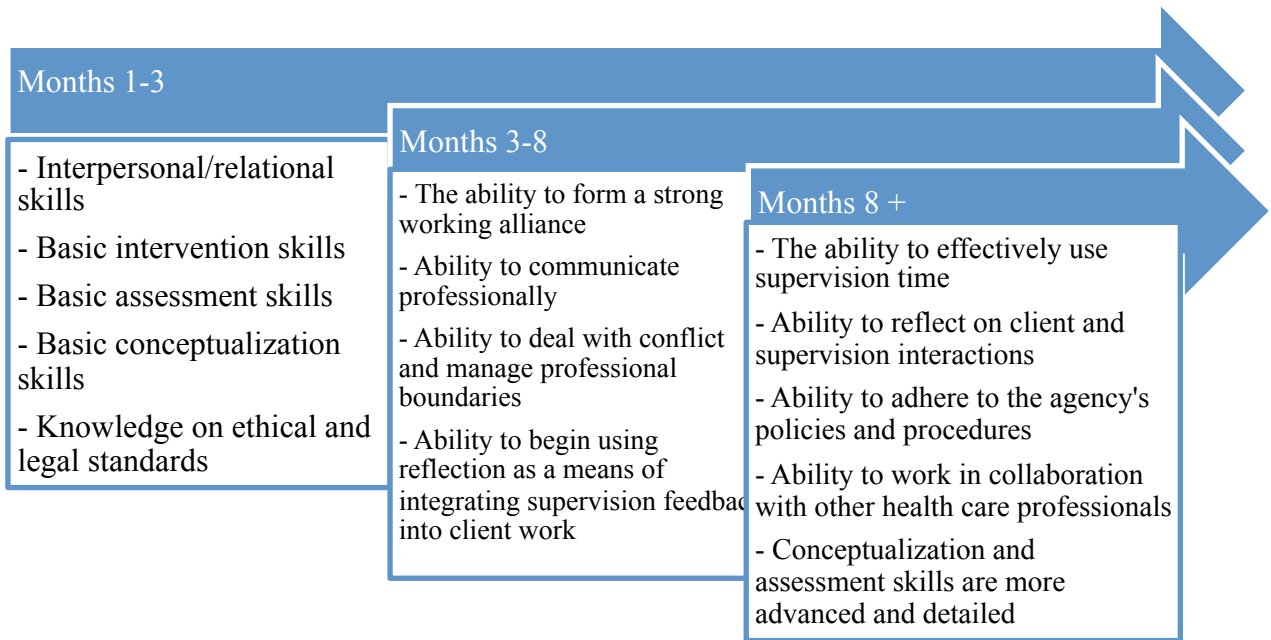
Appendix D

Supervision Model Diagram



Appendix E

Competencies in Intern Development



Adapted for use at Family Services Ottawa from: Bernard, J. M., & Goodyear, R. K. (2014). Fundamentals of clinical supervision. Fifth edition, Pearson.

Appendix F

The Initial Supervision Meeting (Step-by-Step)

Session Format

Welcome and Introduction (about 20 minutes)

- The supervisor and therapist meet at a schedule time for approximately one hour
 - Supervisor:
 - Introductions, discuss credentials, counselling experience, and supervisory style
 - Describe role as a supervisor (supervisor/manager)
 - Supervisee:
 - Introduction and description of academic background, clinical experience and training
 - Brief discussion of what would like to be achieved during supervisory meetings
 - Description of therapeutic skills to be developed or professional development opportunities you hope to attend

The Purpose of Supervision is Discussed (about 20 minutes)

- The supervision agreement is introduced and explored together
 - Supervisee preferred learning styles, approaches to working with clients, and professional development goals are discussed
- The purpose, goals and objectives of supervision are introduced
 - Purpose of monitoring client care and promoting wellness of supervisee
- Methods of evaluation are discussed

The Practical Expectations of Supervision are Discussed (about 10 minutes)

- The context of supervision is discussed
 - Dates, times, contract duration
- A conversation is started regarding expectations from supervision sessions
 - What the supervisee is expected to come prepared with
 - Questions
 - Cases
 - Files, notes, and forms

Questions, Comments, and Signing Contracts (about 10 minutes)

- Supervision contract to be filled out and signed by supervisee

Appendix G

Subsequent Supervision Meetings (Step-by-Step)

Session Format

Check-In and Introduction of Case Presentations (about 5-10 minutes)

- The supervisor informally checks-in with the supervisee's progress and experiences since the last meeting
- The supervisee presents the cases they would like to discuss during the meeting, as well as any additional miscellaneous questions

Case Presentations and Discussion (about 40 minutes)

- The supervisee presents cases, including:
 - File number
 - Client Initials
 - Context of client
 - Age
 - Family of Origin
 - Presenting Problem
 - Assessment and Conceptualization
 - Question for supervisor
 - What specific needs to you have from the supervision session?
 - Discussion of therapeutic approach to be used and future treatment Goals

Closing and Check-Out (about 5-10 minutes)

- The supervisor checks-out with the supervisee
 - How was the session for you?
 - Any additional questions?
 - Anything that you wanted to address but we did not get to today?
 - Anything to be added to the next supervision agenda?

Appendix H

Tip Sheet for Supervisors at FSO

The Do's and Don't's of Clinical Supervision

Do's:

- Do understand the impact of clinical supervision
- Do contract and set goals collaboratively
- Do accept and receive feedback
- Do understand and implement boundaries
- Do provide opportunities for evaluation and feedback
 - Do ask for data
- Do value the supervisory relationship
- Do keep detailed records
- Do practice and encourage self-care habits
- Do know some theories of supervision to ground your work
- Do focus on developing self-awareness for both self and supervisee
- Do seek out additional training and remain up to date with the literature
- Do engage in reflective practices often

Don't:

- Don't over emphasize evaluation ... Balance!
- Don't shy away from the ambiguous. The unknown is the best place to learn!
- Don't over the importance of the gatekeeping function ...

CHANGE AND GROWTH IN NOVICE PSYCHOTHERAPY SUPERVISORS

Appendix I

Reflective Exercise for use in Supervision

Background:

- This tool might assist supervisees in developing self-awareness
- This intervention builds on existing strengths and provides areas of focus for supervision and ongoing development, specifically with areas related to working at Family Services Ottawa

Instructions:

- Rate the items on a scale from 1-5 (no concern to great concern)
- Share, discuss, and explore the top five concerns with your supervisee (s)
- Reframe concerns into positive learning goals for the supervisee

	Rated on a Scale of 1-5 (1 = no concern to 5 = Great Concern)
Experiencing difficulty with countertransference	
Competences with risk assessments	
Ability to work within a narrative framework (walk-in or general counselling programs)	
Feelings of self-doubt	
Ability to work across programs and agency settings	
Making mistakes	
Working in a collaborative team environment	

Adapted for use at Family Services Ottawa from: Chapter 12 in: Bean, R. A., In Davis, S. D., & In Davey, M. P. (2014). *Clinical supervision activities for increasing competence and self-awareness*. Hoboken, New Jersey: John Wiley & Sons, Inc., 2014.

Appendix J

Working With Conflict in Supervision

Tips for conflict in supervision:

- Preventing conflict:
 - Set clear boundaries, expectations, and guidelines from the beginning of the relationship
 - Use a supervision contract to outline parameters of the relationship
 - Regularly discuss progress in an open and transparent manner
- Working with conflict:
 - Openly discuss experience of conflict
 - Share personal reaction to conflict by providing specific examples
 - Take a reflective stance
 - Use of immediacy when felt alliance breach