

The Parallel Processes of Counselling Supervision

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Table of Contents

Abstract

Dedication

Introduction..... 6

Rationale..... 7

Self-Positioning Statement..... 9

Literature Review..... 12

- The Skilled Helper Model..... 13
- The Integrative Developmental Model..... 15
- Developmental Comprehensive Supervision Model..... 18

Summary of the Developmental Supervision Models..... 24

- Reflective Supervision Model..... 26
- CBT Supervision – Countertransference & Transference..... 30
- CBT Supervision – Training..... 34
- CBT Supervision – Video Recording Feedback & Techniques..... 37

Summary of the CBT Supervision Models..... 39

- Functional Analytic Psychotherapy..... 41
- Critical Events Model..... 43

Supervision – Cultural Considerations..... 45

- Competency Benchmark Model..... 46
- The CAP Monitor..... 50
- Cultural Assessment Tools..... 52

Summary of Cultural Considerations..... 57

Conclusion of the Literature Review.....	59
Implications for Counselling Psychology.....	61
- The Canadian Psychological Association.....	61
- The Impact of Counselling Associations.....	63
- CAP – Standards of Practice.....	64
- CAP – Practice Guidelines for Non-Regulated Members.....	65
- CAP – Standards for Supervision of Regulated Members.....	66
- The CAP Monitor – Best Practices in Supervision.....	69
Summary of the Implications for Counselling Psychology.....	71
Fundamental Next Steps for Research.....	72
Recommendations for Practice.....	76
- SAM CAM Supervision Model – Developmental Considerations.....	76
- SAM CAM Supervision Model – Reflective Considerations.....	79
- SAM CAM Supervision Model – FAP & CEM Considerations.....	80
- SAM CAM Supervision Model – CBT & Cultural Considerations.....	81
Summary of Recommendations for Practice.....	84
Reflexive Statement.....	85
Conclusion.....	87
References.....	90
Appendix A: The SAM CAM Supervision Model.....	96
Appendix B: Methodology.....	97

Abstract

The literature review explores various supervision models while highlighting key elements of developmental and cognitive behavioural therapy (CBT) supervision models to better understand the capstone research question: *How can developmental and CBT supervision models be used together to support new counselling supervisees?* Furthermore, the capstone research project explores additional supervision models, including reflective supervision, Functional Analytic Psychotherapy, and the Critical Events Model, to support the implementation of a new hypothetical model identified as the SAM CAM supervision model. The capstone research project emphasizes the gaps researchers brought forth that are useful in future studies, including longitudinal research, the use of evidence-based observational methods, and reflective practices to aid in best practices in supervision. The capstone research project highlights the implications for counselling psychology, including cultural and ethical considerations for best practices in supervision and when implementing the SAM CAM supervision model.

Keywords: supervision, parallel processes, developmental supervision model, CBT supervision model, SAM CAM supervision model

Dedication

“I want to thank me,

I want to thank me for believing in me,

I want to thank me for doing all this hard work, ...

I want to thank me for never quitting, ...

I want to thank me for just being me at all times.”

- Snoop Dogg

I also want to thank my internship supervisor, Dr. Shelley Skelton, for setting the stage for a valuable supervision experience. I feel privileged to work alongside you and witness the sharing of your knowledge and experiences. The structure and guidance you provided within supervision supported my learning and development as a student therapist. Thank you for consistently showing up in a way that meant so much to me and supported reflection and identity exploration as a mental health professional. My internship experience will be something I remember fondly and refer to in my future practice.

The Parallel Processes of Counselling Supervision

The Canadian Psychological Association (CPA, 2017) created a document called the *Ethical Guidelines For Supervision In Psychology: Teaching, Research, Practice, and Administration* to inform mental health professionals of their ethical responsibilities related to supervision practices. The CPA provided three definitions of supervision, and for the purposes of this capstone research project, as cited in Falender & Shafranske (2004), *supervision* is defined as:

a distinct professional activity in which education and training aimed at developing science-informed practice are facilitated through a collaborative interpersonal process. It involves observation, evaluation, feedback, the facilitation of supervisee self-assessment, and the acquisition of knowledge and skills by instruction, modeling, and mutual problem solving. In addition, by building on the recognition of the strengths and talents of the supervisee, supervision encourages self-efficacy. Supervision... is conducted in a competent manner in which ethical standards, legal prescriptions, and professional practices are used to promote and protect the welfare of the client, the profession, and society at large. (p. 3)

Supervision may occur in various settings, including clinical, community-funded, privatized, research-based organizations, and educational institutions (CPA, 2017). Supervision may be required or optional depending on the purpose and needs of the supervisee to increase their learning and practical skills and meet educational or licensing requirements (CPA, 2017).

In addition to the CPA, Hill et al. (2016) highlighted three primary clinical supervision roles in psychology, including educational, administrative and supportive roles that supervisors utilize with their supervisees. Hill et al. (2016) emphasized the value of supervisees utilizing

reflective practice as it supports the development of alternative perspectives and ethical decision-making. Hill et al. (2016) explored how interpersonal process recall assists in building awareness of the supervisee's thoughts, feelings, and behaviours. Parallel processes identify how these can be cultivated in supervision and reflected in counselling sessions by focusing on potential countertransference/ transference between the therapist and the client, resulting in a change in interpersonal patterns and eliciting new client behaviours (Hill et al., 2016).

These three roles can be explicitly applied to counselling and held within different types of supervision, such as developmental, theoretical, social/ structural, and competency-based models (Hill et al., 2016). The literature identified that supervisory relationships predicted supervisees' comfort in self-disclosure, confidence in therapeutic relationships, and overall job satisfaction (Hill et al., 2016). This capstone research project aims to address the following research question: *How can developmental and cognitive behavioural therapy (CBT) supervision models be used together to support new counselling supervisees?* This capstone research project will also highlight the similarities and differences between developmental and theoretical models of supervision, with an emphasis on CBT.

Rationale

The rationale for examining the research question, *how can developmental and CBT supervision models be used together to support new counselling supervisees*, includes a critical analysis of supervision models, while highlighting the importance of reflective practice and assessment of developing counselling skills in supervisees. Research completed in the United States and Europe noted differences in the type of supervision models used and inconsistency in training based on continental mental health regulations (Eryilmaz & Bektaş-Aydin, 2022). In Canada, the Canadian Psychological Association (CPA, 2024) identified that provincial mental

health regulations and psychologist qualifications differ. For example, in the provinces of Alberta and Saskatchewan, a person with a master's degree can practice as a registered psychologist, as opposed to other provinces, which require a doctoral degree, emphasizing the need for additional training, practice, and education (CPA, 2024). Therefore, creating and utilizing a mainstream model of clinical supervision in counselling proves challenging in Canada.

The capstone research question emphasizes the importance of critically analyzing differing developmental and CBT supervision models by considering how education, mental health regulations, and training evolve over time (Eryilmaz & Bektaş-Aydin, 2022). Furthermore, Bearman et al. (2020) explained that educational institutions are required to provide adequate and consistent training in supervision models to supervisors and student therapists to ensure competency. Although this research is American, the premise also applies to Canada. Outdated supervision models need to be critically assessed for suitability, since a supervision model can impact a supervisee's professional growth and practical experiences (Eryilmaz & Bektaş-Aydin, 2022). Furthermore, supervisors need to assess and evaluate their supervisees objectively, resulting in an increase in reflective practice and the development of knowledge and practical skills (Bearman et al., 2020). Additionally, providing culturally sensitive supervision is also essential (Fickling et al., 2019).

Within this capstone research project, countertransference, transference, and parallel processes are explored within different supervision models to help support the need for consistency in reflective practice. The counselling field could benefit from promoting reflective practice as it minimizes harm to the client and supports open communication in the supervisory and therapeutic relationships (Fickling et al., 2019). Within the recommendations for future practice section of this capstone, a novel supervisory model is introduced, one that combines

developmental and CBT supervision styles and highlights how integral it is to explore this capstone research question: *How can developmental and CBT supervision models be used together to support new counselling supervisees?* To conclude this capstone research project, cultural and ethical considerations, focusing on internal processes of clinical supervision and the impact on supervisees are explored.

Self-Positioning Statement

In my professional experiences as a community rehabilitation and disability services worker, I have experienced and witnessed how ineffective supervision has affected my colleagues and me. Like in counselling, disability services workers require supervision. In a previous disability worker position, I experienced unclear expectations, a lack of training, unrealistic deadlines, and a lack of support from my supervisor. There were times when I felt unsure and completely burnt out, which felt like complete physical and mental exhaustion. I went from loving my job to ultimately leaving the industry due to unrealistic expectations. I did not feel valued in that work. I spent much time abiding by workplace policies and completing paperwork rather than showing up for my clients. When the work environment was no longer a place of growth, collaboration, and security, I considered my values and my desire for effective leadership. I believed a true leader created more leaders and ultimately provided professional, kind, direct and caring guidance that supported me to obtain further knowledge/ skills. I wanted to become the best version of myself while considering the benefits and risks of my actions and how these may impact others. I wanted to change my narrative in my professional and educational endeavours.

My biases leaned toward distrust and resentment of mental health and advocacy organizations which did not provide adequate support and training. I plan to mitigate these biases

by objectively noting the tools and procedures within the supervision models highlighted in this capstone research project while considering patterns and gaps to impact future research. My hope is that my disheartening disability worker supervision experiences will not be replicated in the counselling field.

As a student therapist completing a counselling internship, I value the importance of highlighting the interpersonal processes of clinical supervision. Doing so can bring awareness to what is working, and the areas of improvement based on the supervisee's learning needs. Thus, exploring interpersonal processes supports internal reflection, cultural awareness, and the development of supervisees' knowledge and skills. In my opinion, developing an understanding of the supervisor's approach to supervision and how interpersonal processes are reflected in supervision can provide insight into supervisors' key considerations when evaluating their supervisees. I bring knowledge and practical experience, having held previous roles as a junior and senior supervisor in the field of disability services. I understand how to support employees in an effective manner from trial-and-error work experiences that focus on employee engagement, support, and productivity that results in adequate and meaningful client care. I noticed from my work experience that my employees' professional concerns were mitigated through collaborative discussions and action, and the feeling that I listened and heard their concerns as their supervisor, trusting I would bring their concerns to upper management. I encouraged employees to take accountability and highlight professional growth opportunities through goal development in their positions. In following through on my duties as a supervisor, there was typically a domino effect, if my employees were successful, their clients were also successful. I have knowledge and practical experience working with vulnerable populations of various ages, abilities, and life circumstances. I do not only work with the client; support came from a systemic framework, and

access to resources, networking, and developing relationships with the communities and employees that support these individuals is key to creating safety and working towards meaningful goals.

Reflecting on my professional experiences, I notice similarities to the counselling field regarding supervision and client care. A parallel process occurs within the supervisory relationship that is reflected in the therapeutic relationship. Ultimately, my counselling internship supervisor is responsible for my professional conduct as a student therapist; therefore, it is important for us to work together while abiding by site policies to ensure the progress of my skill development and ensure the safety and no harm to my clients. Essentially, I believe that what student therapists learn in their internships sets the stage for how they choose to show up as professionals in the counselling field while considering the theories, modalities, and ethical standards that guide them. Reflection on these beliefs, which are also my biases, will guide my future work and how I choose to show up for myself and others while considering and following through on my ethical responsibilities as a counsellor.

For the purpose of this capstone research project, I plan to mitigate my biases by reviewing developmental and CBT supervision models and how these impact supervisees critically and in an objective manner. My thirst for discovering the benefits and risks of utilizing one or multiple models of supervision provides insight into how supervisors currently approach supervision and may provide a foundation for cultivating meaningful supervisory relationships in the future. Through this literature review, I am looking to identify what elements of developmental and CBT supervision models help support the growth of supervisees' clinical skills and values while also noting potential limitations supporting future research development. I prefer the developmental model as it is fascinating to view and assess skills and progress over

time. I recognize that this preference is also a bias. Although I have observed CBT to be helpful in the work with my clients, I prefer something other than CBT in the counselling room. I continue to explore what I am passionate about or see as my preferred theoretical orientation as a student therapist. Having said this, supporting my clients in reaching their therapy goals and using modalities that benefit them, such as CBT, is essential and part of my responsibility as a student therapist. I remain open and inquisitive, yet critical of other supervision models to gain insight into the key elements of the specified models and how these impact supervisees. This critical analysis provided the foundation for the creation of the new supervision model, the SAM CAM model, which I created for the purposes of this capstone research project.

Literature Review

The literature review explores the developmental and CBT supervision models related to counselling and details the interpersonal processes between supervisors and supervisees. This capstone research project will include literature on other supervisory models to better understand the impact these models have on supervisees and the reasoning behind the suggested SAM CAM supervision model. The developmental models explore how the supervisor can support the supervisee as their clinical skills evolve in their training (Hill et al., 2016). This literature review will also explore Social/Structural and Competency-based models for comparison purposes.

The theoretical models explore how therapeutic modalities, such as CBT, are utilized in supervision. Additionally, social/structural models identify roles or potential power dynamics within the supervisory relationship (Hill et al., 2016). The competency-based model explores the progress of the supervisee's skills and knowledge; however, reflective competencies highlighting a supervisee's attitude and values as a therapist are increasingly recognized by researchers (Hill et al., 2016). Although this capstone research project focuses on the key elements and

comparison of developmental and CBT supervision models, it is essential to highlight supplementary supervision models, as mentioned, to include how potential power dynamics, cultural and gender considerations may impact the supervisee and the importance of reflexive practice within the supervisory relationship and how this ultimately is reflected within the therapeutic relationship.

The Skilled Helper Model – Developmental Model

Gerard Egan, a Professor Emeritus at the Loyola University of Chicago, founded *The Skilled Helper Model* in the 1970s, which supported helping professionals, primarily counselling psychologists, in various fields of work and levels of training (Shorrock, 2011). Egan took a humanistic, person-centred approach and highlighted the importance of the therapeutic relationship as a vessel for change (Shorrock, 2011). The skilled helper model utilized an integrative approach which infused CBT and positive psychology (Shorrock, 2011). Through various iterations of Egan's work, the author maintained a commitment to the developmental model's origin.

Egan's *Skilled-Helper Model* is categorized into three developmental stages: Stage One: Current picture, Stage Two: Preferred picture, and Stage Three: The way forward (Shorrock, 2011). The first stage includes collaboration between the practitioner and the client to clarify what is happening and any key issues (Shorrock, 2011). The second stage supports the exploration of the client's presenting concern to identify new possibilities (Shorrock, 2011). In the third stage, the practitioner develops and implements strategies that support clients in attaining their goals (Shorrock, 2011). Egan's 10th edition of the *Skilled Helper Model* highlighted a helping dialogue throughout the stages, including tuning in, active listening, responding with empathy, checking understanding, probing, summarizing, challenging, and

negotiating as essential communication skills (Egan, 2013). Shorrock (2011) noted that stages do not necessarily need to be completed linearly and rather used as a guide for practitioners. The relevance of Egan's *Skilled Helper Model* is that the stages are used within the therapeutic relationship and can also be reflected in the supervisory relationship to support the supervisees in developing their theoretical and practical skills.

Shorrock (2011) reported a strength of Egan's model is the focus on respect and empathy within the therapeutic relationship. However, Shorrock (2011) noted a challenge as the therapeutic relationship may not be the primary focus for practitioners who value standardization of treatment practices for efficiency in goal achievement. Egan's ninth edition of *The Skilled Helper Model* highlighted a need for the balance of the practitioner attending to the therapeutic relationship and practitioner flexibility in reaching therapeutic goals (Shorrock, 2011). A criticism of Egan's research is the lack of emphasis on client resistance and practitioner countertransference responses, potentially resulting in a rupture in the therapeutic relationship (Shorrock, 2011).

These strengths and criticisms of the model regarding the therapeutic relationship can also be noted as strengths and criticisms within the supervisory relationship (Shorrock, 2011). For example, a supervisor may primarily focus on the theoretical implementation (e.g., CBT) of supervision and use assessment tools instead of interpersonal processes within the supervisory relationship. Doing so may result in pushback from the supervisee if they feel unsupported or if there is a limited understanding or collaboration within the supervisory relationship on achieving the supervisee's professional goals. A thorough review of the model supports action in counselling, focusing on the importance of repair and collaboration within the therapeutic relationships (Shorrock, 2011). Egan's *Skilled Helper Model* is essential research explored in this

capstone research project as it represents the necessary developmental stages of a supervisee and how the supervisor supports building a meaningful supervisory relationship. Egan's *Skilled Helper Model* was a starting point for future researchers to reference when creating new integrative therapeutic models (Shorrock, 2011).

The Integrative Developmental Model of Supervision – Developmental Model

Koruk & Kara's (2019) systematic review identified multiple supervision models, including the *Integrative Developmental Model (IDM)*, a highly researched model created by Cal D. Stoltenberg in 1981. The IDM is a commonly utilized supervision model that includes three dimensions of awareness the supervisee develops in relation to the client's world, the supervisee's motivation, and autonomy as a counsellor (Koruk & Kara, 2019). Additionally, the IDM identifies eight professional tasks acquired by supervisees, including implementing interventions, evaluating interventions, individual and cultural considerations, self-evaluation, theoretical orientation, case conceptualization, ethical duties, and future planning (Koruk & Kara, 2019). Although the IDM is a well-known supervision model, current research noted the generalization and simplicity of the model regarding supervisees progress over time (Stoltenberg & McNeill, 2010). Additionally, supervisees may look for a more focused approach from their supervisor and training on theoretical modalities and how to support specific populations (Stoltenberg & McNeill, 2010). The IDM explored the developmental stages in counselling supervision, intending to customize the process for supervisees based on their level and needs to support learning and autonomy as a counsellor (Kim & Mumbauer-Pisano, 2023). The CPA (2017) supervision guidelines highlighted the importance of supervisee goal development as a form of assessment and evaluation to support supervisees in furthering their knowledge and skills. There is an emphasis on supervisors continuing to further their skills to effectively support

their supervisees through attending specific workshops, including specific theoretical orientations, how to support diverse populations, and supervision training (CPA, 2017).

The IDM encompasses four stages that the supervisee experiences throughout their counselling practice. Supervisees in the first stage of the IDM highly depend on their supervisor's knowledge due to lack of experience and limited awareness of the client's worldview (Koruk & Kara, 2019), as the supervisee tends to focus on their performance, which can cause fear and stress when being evaluated by their supervisor (Kim & Mumbauer-Pisano, 2023). The initial stage relates to the capstone research question as it highlights the typical motivation and experiences of the supervisees as beginner counsellors. A strength noted in the first stage is the need for supervisor availability due to the supervisee's lack of experience; conversely, how the supervisor supports and evaluates their supervisees' current skill level is unclear. As noted by Kim & Mumbauer-Pisano (2023), supervisees tend to experience anxiety regarding evaluative practices by their supervisor, and perhaps supervisors need to clarify the process and structure to ease supervisee worry.

The second stage consisted of supervisees continuing to rely on their supervisors due to decreasing motivations when experiencing uncertainty and insecurity (Koruk & Kara, 2019). However, in the second stage, supervisees became increasingly attentive to their clients, resulting in an understanding and readiness to have cognitive and emotional experiences within the therapeutic relationship (Koruk & Kara, 2019). There was a building of self-efficacy and autonomy as the supervisee implemented skills as a novice counsellor (Kim & Mumbauer-Pisano, 2023). The second stage relates to the capstone research question as it highlights the potential for lack of motivation based on the supervisees' experiences. Supervisors continue to provide guidance and encourage flexibility from the supervisees as they continue to build their

counselling skills when presented with challenging circumstances in sessions (Kim & Mumbauer-Pisano, 2023).

The third stage is noted as conditional dependency, where the supervisee has gained insight and further conceptualized their clients (Koruk & Kara, 2019). The supervisees' motivations stabilized, confidence and empathy increased, and they took the initiative to support the building of autonomy (Koruk & Kara, 2019). The supervisee maintained a flexible approach to counselling while establishing their identity as a counsellor (Kim & Mumbauer-Pisano, 2023). The third stage relates to the capstone research question as it notes incorporating the supervisee's sense of self in the therapeutic and supervisory relationships. However, more information is needed on how supervisors evaluate supervisees' increased independence and ability to conceptualize their client's presenting concerns further.

The final stage supported the assimilation of the supervisees' intervention, evaluation, and conceptualization skills (Koruk & Kara, 2019). The supervisory relationship developed over time, and supervisees approached their supervisor as colleagues (Koruk & Kara, 2019). Supervisees in the final stage displayed comfortability when presented with difficulties during counselling; however, they know this is a natural progression as part of the IDM (Koruk & Kara, 2019). The final stage relates to the capstone research question as it notes the progression of the supervisee since the initial stage. Despite the fact that the IDM is 40 years old, it still appears to be applicable to the counselling field in the area of supervision.

Kim & Mumbauer-Pisano (2023) explored the main concepts of the IDM in relation to Narrative Supervision, which includes narrative facilitation by the supervisor to promote supervisee self-exploration and multicultural awareness within the therapeutic relationships. The structure is built through Kim and Mumbauer-Pisano's (2023) Integrative Developmental Model

in Narrative Supervision (IDMNS), where supervisors initially normalize the supervisee's counselling experiences. Next, the supervisor supported the supervisees in exploring specific cognitive or affective difficulties (Kim & Mumbauer-Pisano, 2023). Lastly, the supervisor facilitates supervisees to be reflective in their counselling practice (Kim & Mumbauer-Pisano, 2023). This includes supporting supervisees to identify potential countertransference with clients and recognize, name, and note the effects of the problem(s) to generate approaches and interventions (Kim & Mumbauer-Pisano, 2023). Kim & Mumbauer-Pisano (2023) reported that the hierarchical traits of the IDM may deter supervisees from exploring their preferred theoretical orientation and modalities, as this may remind them of the evaluative nature of supervision. Koruk & Kara (2019) shared criticism of developmental models, involving the clarification and application of the norms and interventions used in each stage while considering potential environmental factors.

Developmental Comprehensive Supervision Model

Eryilmaz & Bektaş-Aydin's (2022) research study identified the use of multiple developmental supervision models that explored supervisees' counselling skills progression from infancy to maturity throughout their educational practicums. Eryilmaz & Bektaş-Aydin's (2022) research highlighted the use of the Developmental Comprehensive Supervision Model (DCSM) to identify how to better support the learning of undergraduate and graduate counselling students in Turkey. Specifically, Eryilmaz & Bektaş-Aydin's (2022) study utilized the DCSM model with 11 undergraduate and seven master's students in the 2019-2020 academic year. Eryilmaz & Bektaş-Aydin (2022) completed two separate studies (i.e., Study One: undergraduate participants, Study Two: graduate participants) within the same twelve-week period. In the following section, this research study is further critically analyzed.

Eryilmaz and Bektaş-Aydin (2022) identified that the DCSM was comprised of three phases: *strengthening*, *development*, and *evaluation*. Additionally, Eryilmaz and Bektaş-Aydin (2022) noted that each phase was categorized into two stages: *strengthening* (i.e., readiness and informing), *development* (i.e., intervention and intervision), and *evaluation* (i.e., supervisee development and use of the DCSM). These phases and stages supported building the supervisee's competence through the efficacious creation, use and development of therapeutic settings and intervention skills (Eryilmaz & Bektaş-Aydin, 2022). The DCSM was based on Egan's 1975 *Skilled Helper Model*, and Eryilmaz and Bektaş-Aydin (2022) emphasized the supervisory relationship as an essential role in the effectiveness of supervision.

The initial *strengthening* phase highlighted the commencement of the supervisory relationship; it included stages where the supervisor assesses the supervisee's *readiness* to provide counselling, which *informs* the supervisor and provided the supervisee with self-awareness of their current skill level (Eryilmaz & Bektaş-Aydin, 2022). The supervisee's readiness was assessed based on three levels of counselling competence, including therapeutic skills, therapeutic conditions, and therapeutic processes; done by providing psychoeducation on the DCSM and exploring problem-solving stages within the model (Koruk & Kara, 2019). The *strengthening* phase of the DCSM is a key element of this capstone research project as it brings attention to the importance of interpersonal processes within the supervisory relationship. The supervisee's self-awareness of their experiences adds to the collaboration in the supervisory relationship (Eryilmaz & Bektaş-Aydin, 2022). Openness in communication, allocating appropriate time, and displaying an interpersonally sensitive manner was highlighted as ideal characteristics of a person in a supervisory role (Eryilmaz & Bektaş-Aydin, 2022).

In the developmental phase, the supervisee applied the skills they have gained in the strengthening phase and implements these in the counselling environment while being monitored by their supervisor (Eryilmaz & Bektaş-Aydin, 2022). In the research study, each supervisee provided individual counselling one hour per week and received 30 minutes of supervision three times weekly within the study (Eryilmaz & Bektaş-Aydin, 2022). Supervision was recorded with the consent of the participants and provided by the author of the research study, a professor in the field of counselling who held a psychotherapy diploma from an accredited association and has over 20 years of experience as a supervisor (Eryilmaz & Bektaş-Aydin, 2022).

Within Egan's 1975 Skilled Helper Model, the developmental phase was categorized into the intervention and intervision stages. The intervention stage encouraged the supervisee to show completed research regarding their client's presenting concerns to support building their case conceptualization, whereas the intervision stage allows the supervisee to reflect on their skills through peer feedback and consultation (Eryilmaz & Bektaş-Aydin, 2022). The research study noted that the need for supervisory support decreases while the participant's developmental level increases (Eryilmaz & Bektaş-Aydin, 2022). The *developmental* phase of the DCSM is a key element of this capstone research project as it identifies the supervisee's and supervisor's responsibilities and incorporates peer feedback that aids in the progression of the supervisee's knowledge and application of counselling skills.

Lastly, during the evaluation phase, the supervisee's development was assessed in relation to the previously mentioned psychological competencies, along with the evaluation of the DCSM using self-assessment tools (Eryilmaz & Bektaş-Aydin, 2022; Koruk & Kara, 2019). The evaluation phase was noted as a strength of the DCSM as Egan's *Skilled Helper Model* did not include an evaluative measure (Eryilmaz & Bektaş-Aydin, 2022). The supervisee should

consider how supervision has supported their problem-solving capacity when presented with therapeutic relationship challenges (Eryilmaz & Bektaş-Aydin, 2022). The *evaluation* phase of the DCSM is noted in this capstone research project as an important consideration because it supports evaluative measures; however, further research is needed to identify appropriate, reliable, and standardized self-assessment tools.

Eryilmaz & Bektaş-Aydin's (2022) data collection was completed by the second author through focus groups and evaluation forms. A transcendental phenomenological approach was implemented when analyzing the data while keeping the researcher's biases in mind and separate to maintain objectivity in the study. A thematic analysis was used through transcription of voice recordings to identify themes in participants' experiences of supervision using the DCSM (Eryilmaz & Bektaş-Aydin, 2022). In my opinion, the transcendental phenomenological approach relates to the capstone research question as it confirms the potential for researcher bias and the importance of objectivity when analyzing and identifying themes within a developmental approach to supervision (Eryilmaz & Bektaş-Aydin, 2022).

In Study One of the undergraduate participants, the supervision process was identified as a central theme, while four sub-themes were highlighted as systematicity of DCSM, supportiveness of supervision, the weight of workload, and self-regulated learning (Eryilmaz & Bektaş-Aydin, 2022). The outcomes of Study One were grouped into two sub-themes: self-confidence and therapeutic skills development (Eryilmaz & Bektaş-Aydin, 2022). Study Two of graduate participants identified the supervision process as a central theme, while three sub-themes were highlighted: systematicity of DCSM, positive affect, and self-regulated learning (Eryilmaz & Bektaş-Aydin, 2022). The outcomes of Study Two were grouped into three sub-

themes: the development of the therapist, the development of the client, and the characteristics of the supervisor (Eryilmaz & Bektaş-Aydin, 2022).

Eryilmaz and Bektaş-Aydin's (2022) qualitative study identified common themes based on undergraduate and graduate counselling participants' supervision experiences. In a review of Eryilmaz & Bektaş-Aydin's (2022) study, some participants noted disadvantages of supervision, including a heavy workload and lack of supervision time per supervisee due to the large number of participants (N=18). The researchers identified the need for more individual and intervention processes for supervisees, resulting in a recommendation for longitudinal research design in future studies to observe how the DCSM impacts participants' supervision experiences in each developmental stage over a longer period (Eryilmaz & Bektaş-Aydin, 2022). Intervention processes included peer feedback, case conceptualizations, review of audio recordings, and literature reviews to support self-regulated learning, a common feature that supports the supervisee's self-assessment and ultimately impacts the supervisee's progress and skill development (Eryilmaz & Bektaş-Aydin, 2022).

A challenge of Eryilmaz and Bektaş-Aydin's (2022) study focused on the supervisory relationship, essentially leaving out the parallel processes impacts on the supervisee and client therapeutic relationship, which was noted as a consideration for future research. Eryilmaz and Bektaş-Aydin (2022) also reported the need for equal distribution regarding the gender of participants, as most of the participants were noted as female in the current study. Eryilmaz and Bektaş-Aydin (2022) highlighted cultural responsiveness as a core competency of supervision. Eryilmaz & Bektaş-Aydin's (2022) research utilized the DCSM in two separate studies of participants receiving Turkish post-secondary education and noted differing supervision needs based on the educational level of undergraduate and graduate participants. For example,

undergraduate students required more supervision, including guidance and facilitation around client processes and emotional support (Eryilmaz & Bektaş-Aydin, 2022). Graduate students have previously accessed these supports and were more focused on positive affect, supervisor characteristics, and client growth supporting problem-solving skills development (Eryilmaz & Bektaş-Aydin, 2022).

The study noted a lack of mental health regulations in Turkey and referred to an accredited organization named the Association for Evaluation and Accreditation of Teacher Education Programs (EPDAD) that was specifically for undergraduate counselling programs (Eryilmaz & Bektaş-Aydin, 2022). As Turkish post-secondary institutions focus on students receiving adequate supervision, Eryilmaz and Bektaş-Aydin (2022) highlighted a lack of consideration outside educational institutions regarding supervision training. In Canada, each province has their own mental health practitioner licensing regulations that consider the counsellor's educational qualifications (i.e., master's or doctoral degree), logged practical hours of experience with the support of a qualified supervisor, and passing written and oral exams that emphasize the importance of ethical practice (CPA, 2024).

The results from Eryilmaz and Bektaş-Aydin's (2022) study provided context and implementation of each phase of the DCSM and can be transferred to Canadian post-secondary students completing counselling internships. Doing so provides supervisors with a framework emphasizing supervisees' progress and development based on their educational level and includes an evaluative phase to identify strengths and areas for improvement. Future research would be required to test this research outcome. Eryilmaz and Bektaş-Aydin's (2022) study results are important regarding the capstone research as it considers how future research should

be carried out when implementing the phases of the DCSM that promote the reliability and validity of processes and measures while taking into account a diverse population of participants.

Summary of the Developmental Supervision Models

Egan's *Skilled Helper Model* focused on the developmental stages within the therapeutic relationship, including the current picture, the preferred picture, and the way forward (Shorrock, 2011). Egan's stages can be transferred and highlighted within the supervisory relationship. The challenge of this model is that it lacks exploration of potential countertransference and that practitioners may focus solely on the standardization of interventions for efficiency purposes regarding client goals as opposed to the therapeutic relationship (Shorrock, 2011). Although Egan's model was created in the 1970s, multiple editions have been made since then, showing its integrative use in research of various helping professions, including counselling.

Koruk and Kara's (2019) research study explored Stoltenberg's IDM and highlighted three aspects of the supervisee's awareness related to the client, the supervisee's motivation and autonomy as a student therapist. Similar to the DSCM, Koruk and Kara's (2019) research identified multiple professional tasks that supervisees must acquire throughout their developmental stages within their counselling practicums. The supervisee moves through four developmental stages while increasing their autonomy (Koruk & Kara, 2019). Kim & Mumbauer-Pisano (2023) research noted the IDM as hierarchical in nature, resulting in the supervisees lacking exploration of their preferred theoretical approaches based on the evaluative process of supervision and the supervisor's preferred theoretical orientation applied within the supervisory relationship.

Eryilmaz and Bektaş-Aydin's (2022) DCSM focused on how the supervisory relationship supports post-secondary counselling students in strengthening, developing, and evaluating their

clinical skills. The DCSM explored how the supervisory relationship identified the supervisee's competency and appropriate use of interventions. Eryilmaz and Bektaş-Aydin (2022) noted the use of self-assessment tools as part of the evaluation process, which was not identified in Egan's Skilled Helper Model; however, there was a lack of standardization when utilizing these tools. Eryilmaz and Bektaş-Aydin (2022) referenced supervisees' experiences within the supervisory relationship and how a heavy workload and lack of supervision time attributed to negative aspects of supervision. Eryilmaz and Bektaş-Aydin's (2022) research lacked parallel processes where the development of the supervisee's skills was not reflected within the therapeutic relationship.

All developmental models identified in this capstone research project are stepped or scaffolding models, where one section builds on the next. Each model has common progression elements of counselling supervision; however, there has yet to be a consensus on how this progression is identified and carried out in research. Egan's *Skilled Helper Model* and the *IDM* focused on the supervisee's process; however, Kim and Mumbauer-Pisano (2023) noted that evaluation is an essential part of supervision and requires a collaborative approach to confirm the supervisor and supervisee's roles, responsibilities and expectations while creating opportunities for frequent formative feedback. Kim and Mumbauer-Pisano (2023) explored narrative supervision within the *IDM*, which focused on reflective aspects of supervision to include the supervisee's potential countertransference and how doing so may impact their ability to implement effective counselling interventions. Developmental supervision models are a key section of this capstone research project, as they identify how supervisors support and evaluate their supervisees over time while promoting autonomy. Identifying the strengths and challenges

of developmental supervision supports the implementation of essential components that comprise the SAM CAM supervision model.

Reflective Supervision

Supplementary supervision models, including reflective supervision, are critically analyzed to identify key elements to be included in the SAM CAM supervision model. Greenberger's (2020) research highlighted that the definition of reflection, reflexivity, or reflective practice is debated among theorists and scholars; however, they all hold mutual values of cultivating self-awareness, enhanced decision-making, and problem-solving skills. The CPA (2017) supervision guidelines explored the importance of supervisors and supervisees considering their personal values and biases to remain objective, appropriately address conflict, and maintain integrity in relationships. Scholars referred to John Dewey's work in their research when exploring reflective practice elements to allow practitioners to explore issues more deeply (Olson, 2023). Dewey, an American philosopher and educator, maintained a constructivist approach in the late 1930s that supported educators' learning through a transformative process of reflection (Olson, 2023). Dewey allocated five phases of reflective thought, including suggestion, intellectualization, hypothesis, reasoning, and testing the hypothesis through action (Greenberger, 2020). Olson (2023) highlighted that Dewey's work regarding reflective practice has been commonly associated with supporting educators. Barron et al. (2021) defined *reflection* as a person's intentional thinking process regarding their observations and feelings while considering their biases that ultimately influence their perspectives and roles within situations. This capstone research project highlights the importance of *reflection* within supervisory relationships when implementing the SAM CAM supervision model to support the building of supervisees' skills, cultural and self-awareness, and therapeutic relationships.

Barron et al. (2021) conducted research in Detroit, Michigan that focused on the reflective elements of supervision within the education and learning field. Barron et al. (2021) utilized a qualitative research design applied through a Grounded Theory Analysis to identify themes through the examination of supervisees' descriptions of the necessary components of reflective supervision/ consultation (RS/C) and how this model impacted their work as infant and early childhood mental health (IECMH) professionals. Barron et al. (2021) referred to *reflective practice* as an interpersonal experience considering a person's responses and actions to challenging behaviours. Barron et al. (2021) implemented focus groups and individual interviews of IECMH professionals, including teachers, administrators, mental health home visitors and mental health consultants with various levels of education (i.e., para-professional, associate, undergraduate, and graduate degrees) and fields of study (i.e., education, nursing, psychology/counselling, and social work). Barron et al. (2021) noted a limitation of the study, including a lack of data collection on participants' ethnic identity. More specifically, Barron, the author and researcher in Barron et al. (2021), noted her inexperience as a researcher and privilege due to her identity as a white woman. It is thus paramount that future research highlights participants' ethnic identity to examine their experiences with RS/C while considering potential bias, race, and acts of discrimination (Barron et al., 2021).

The data analysis reported a developmental and ecological process, such as community support, that impacted the supervisory relationship and the reflective environment (Barron et al., 2021). Minimal research has been conducted on RS/C, and Barron et al. (2021) reported the lack of empirical evidence of its efficacy as only supervisors' experiences were identified in the data. Therefore, Barron et al. (2021) recognized that supervisees' voices need to be heard to implement positive change, such as decreasing feelings of stress, compassion fatigue, and

burnout. The SAM CAM supervision model recognizes the importance of advocacy within the supervisory relationship, which can be explored through reflective practices and paralleled within therapeutic relationships.

Barron et al.'s (2021) research identified the components of RS/C that supervisees found most beneficial, including the importance of feeling safe, trust, consistency, predictability, listening without judgment, and being present. Additionally, supervisees confirmed that professional wellness and personal growth added to their overall professional satisfaction (Barron et al., 2021). Supervisees identified feeling empowered and increased capacity to regulate their emotions when describing personal growth experiences (Barron et al., 2021). Lastly, various themes were highlighted around the supervisees' changed behaviour, including bringing up difficult topics with families, becoming a better observer, developing relationships with families, sharing perspectives and ideas, and re-energizing to keep moving forward (Barron et al., 2021). Although Barron et al.'s (2021) research identified the benefits of reflective supervision from IECMH professionals, what's missing is more research on how this directly impacts student therapists. Barron et al. (2021) suggested that future research focus on specific roles to identify individual experiences related to RS/C. Barron et al. (2021) indicated that building safety and security supports a positive supervisory relationship throughout the supervisees' stages of development in their professional roles. The SAM CAM supervision model highlights reflective supervision, focusing on supporting counselling supervisees, incorporating the research by Barron et al. (2021).

Olson's (2023) research was completed at a post-secondary institution in Alaska. Olson's (2023) research utilized Dewey's reflective practice to support faculty members in implementing meaningful applications of course content that support Indigenous ways of knowing. Olson

(2023) highlighted the lack of subject matter experts who have received specialized training in culturally responsive ideologies and the implementation of these practices. Data analysis focused on Olson's (2023) personal reflections as an educator, a review of the course content guide, student demographics and support systems, and further explored the data to create and implement an appropriate action plan. In doing so, Olson's (2023) data analysis supported instructors in gaining cultural competency and accessing applicable research about Indigenous ways of knowing that can be allocated to the instructional design. Olson (2023) also concluded that the course content guide required updates and a review of assignment expectations was needed to include student reflection journals. Olson (2023) explored the importance of cross-cultural training that supported involvement in Indigenous communities and gaining awareness and understanding of Indigenous traditions. Olson's (2023) research study explored reflective practice from an educational perspective; however, it also highlighted the importance of faculty cultural competence and responsive teaching practices that parallel the importance of reflective supervision in the counselling field. The SAM CAM supervision model emphasizes acquiring an intersectional lens and cultural assessment tools within the supervisory relationship to broaden cultural perspectives reflected in therapeutic relationships, building on this work by Olson.

Olson's (2023) research highlighted Dewey's work on aspects of reflective supervision in educational professionals. Greenberger's (2020) research noted the importance of faculty members implementing reflective practices, including discovery, integration, application, and teaching. Although Barron et al.'s (2021) and Olson's (2023) studies explored the benefits of the reflective elements of supervision from a supervisee's point of view, a significant challenge noted is that most research is from an educational perspective, as opposed to a counselling perspective; therefore, leaving information up for interpretation within the counselling

supervisory relationship and how this ultimately impacts the therapeutic relationship. Reflective supervision seems to be a natural result in developmental models of supervision as reflection occurs for the supervisee over the course of their practical experience. Reflection also plays a part in CBT supervision, specifically about potential countertransference and transference experienced within the supervisory and therapeutic relationships. The SAM CAM supervision model provides a definition of reflective practice that supports counselling supervisees.

CBT Supervision – Countertransference & Transference

Prasko et al.'s (2022) research defined transference and countertransference as “the organization of an individual’s experiences and behaviours throughout patterns composed of self-confirming sequences, including cognitive, emotional, and interpersonal processes based on previous experience. Individuals play roles and seek or provoke reciprocal reactions from others” (p. 2130). The CPA (2017) *Code of Ethics* does not provide a definition of countertransference; however, a therapist’s ability to identify potential countertransference is highlighted in the principle of integrity in relationships that focus on remaining objective and unbiased when supporting clients and in areas of research, teaching, peer review, and providing supervision. The CPA (2017) further explored a therapist’s objectivity through the evaluation of “their own experiences, attitudes, culture, beliefs, values, individual differences, specific training, external pressures... [that] might influence their activities and thinking” (p. 27). Prasko et al.'s (2022) research was completed at a post-secondary institution in the Czech Republic and explored the effects of countertransference and transference between the supervisee and client and how CBT supervision supports exploring these in detail to aid in the supervisee’s learning experience.

Sigmund Freud, the founder of psychoanalysis, highlighted the term countertransference in 1909, where transference was viewed as a form of resistance and made forming the

therapeutic alliance a challenge (Prasko et al., 2022). In a lecture given by Freud (1910), he defined *countertransference* as “which arises in the physician as a result of the patient’s influence on his unconscious feelings, and have nearly come to the point of requiring the physician to recognize and overcome this countertransference in himself” (p. 289). Aaron Beck, a well-known psychiatrist, developed CBT and recognized the lack of research when it comes to exploring countertransference and transference, especially in brief therapies, unless these were used to unpack the client’s core beliefs or highlight conditions that are triggered within the therapeutic relationship (Prasko et al., 2022). Having said this, the supervisory relationship builds awareness of the potential countertransference and transference, creating a parallel process between the supervisory and therapeutic relationships (Prasko et al., 2022).

Furthermore, Aaron Beck’s daughter, Judith Beck et al. (2008), highlighted countertransference in a chapter book referencing psychotherapy-based approaches to supervision. Beck et al. (2008) described psychodynamic-oriented supervision as a relational approach that supports the exploration of the supervisee’s countertransference within the supervisory relationship. Beck et al. (2008) identified that the supervisee might experience countertransference within the therapeutic relationship that is unconsciously reenacted within the supervisory relationship. Beck et al. (2008) emphasized the potential for regressive experiences or resistance to the exploration of countertransference from the supervisee. Beck et al. (2008) emphasized that the supervisor may attend to the supervisee’s countertransference by implementing a *teach-treat boundary* that provides a safe space that fosters the supervisee’s professional development and encourages the supervisee to set limits on the depth of the exploration. Beck et al. (2008) suggested the supervisor can move from non-verbal spaces to verbal discussions while highlighting the supervisee’s present-moment experiences through

enactments that support awareness and understanding. Furthermore, Beck et al. (2008) underlined that the supervisor must acknowledge their countertransference, any reactions, provide appropriate self-disclosure, and process these within the supervisory relationship. Beck et al. (2008) noted that the purpose of a relational approach to supervision is that the supervisor supports the supervisee in exploring their countertransference that facilitates their professional development and is paralleled within the therapeutic relationship. The capstone research project notes that Beck et al. (2008) referenced countertransference as psychodynamic supervision instead of CBT supervision; however, both types highlighted the importance of collaboration and a relational approach that utilizes structure and here-and-now exercises that prompt awareness of countertransference within the supervisory relationship.

Regarding CBT supervision, Prasko et al. (2022) noted that the supervisor can support the supervisee by providing a reflective environment that prompts cognitive restructuring or an alternative perspective when working with their clients. The supervisor encourages cognitive restructuring by creating a Socratic dialogue or asking guided questions, with the intent to emphasize errors in thinking that bring awareness to how the supervisee's worldview is mirrored within the therapeutic relationship (Prasko et al., 2022). The supervisee can mitigate countertransference by providing empathy, appropriate self-disclosure, and collaboration that supports client autonomy (Prasko et al., 2022). Doing so prevents counteractive behaviour from the supervisee that may result in their countertransference (Prasko et al., 2022). The ability of the supervisee to identify potential countertransference and transference is a key component of this capstone research project, as it supports reflection within the therapeutic and supervisory relationships that broaden the supervisee's worldview.

Prasko et al. (2022) shared that the supervisee needs to become aware, understand, name, and express emotions the client evokes to appropriately identify their countertransference, as self-reflection is considered a necessary competency of a therapist and supports the supervisee in emotional processing and responding fittingly. Additionally, Prasko et al. (2022) mentioned that both countertransference and transference responses within the supervisory and therapeutic alliances may come from cultural beliefs, values and attitudes that may impact the supervisee's worldview and case conceptualization of the client. Lastly, Prasko et al. (2022) identified the importance of the supervisor's awareness of potential countertransference responses within the supervisory relationship and the supervisee's transference to the supervisor.

In doing so, Prasko et al. (2022) noted that the supervisor should consider how the supervisee's transference shows up in supervision, such as testing expectations and maladaptive thoughts, and if it affects their cooperation in supervision or harms the therapeutic relationship. Truscott & Crook (2021) identified that supervisors play the role of the professional and evaluator, which may result in potential conflict due to these multiple roles. Truscott & Crook (2021) highlighted a potential conflict, including a supervisee's comfort in disclosing potential countertransference during supervision, which may result in fear of their supervisor passing judgment and the supervisee's ability to counsel clients. Due to this conflict, supervisees may not disclose potential countertransference, ultimately impacting their development as a counsellor and the support they receive in supervision (Truscott & Crook, 2021). Countertransference and transference are key components of this capstone research project, as they support transparency and reflection and cultivate openness within the supervisory relationship. Doing so increases the capacity of the supervisor and supervisee to remain objective and use objective measures that

support supervisee skill development, which is an important piece in CBT supervision and the implementation of the SAM CAM supervision model.

CBT Supervision Training

Pretorius' (2006) systematic review highlighted the goal of CBT supervision was to assist the supervisee in utilizing the theoretical orientation of CBT to support restructuring in their client's thoughts, feelings, and behaviours that sustain positive changes by using specialized skills and interventions. Major contributors to CBT and supervision include psychiatrist Bruce Leise and previously mentioned psychologist Judith Beck (Pretorius, 2006). CBT and supervision are systematic and structured in nature, with a person-centred approach that focuses on goals, collaboration, clear boundaries, and power dynamics that require both the supervisor and the supervisee to consider their ethical responsibilities to each other and their clients (Pretorius, 2006). There is an emphasis on trust, openness, practical experience, supporting change, strength building, utilizing objective measures, and developing case conceptualization skills (Pretorius, 2006). The relevance of Pretorius' (2006) systematic review supports an understanding of CBT in relation to this capstone research project and how CBT can be implemented within the supervisory relationship and applied to the SAM CAM supervision model.

Another study completed by Bearman et al. (2020) reported that CBT was a standard model therapists use; however, in the United States (US), there is limited formal training provided to clinical supervisors to maintain competency. Bearman et al. (2020) recommended providing formal CBT supervision training during graduate studies as these post-secondary counselling programs already implement evaluative strategies that assess supervisees' knowledge and practical competency skills development. Bearman et al. (2020) confirmed that CBT

supervision includes theoretical learning, experiential practices through modelling and role-play, adherence to CBT approaches through reviewing video recordings, and feedback on the supervisee's implementation of CBT skills. Bearman et al. (2020) suggested that CBT supervisors include general elements of supervision that include cultural sensitivity, ethical responsibilities, and appropriate boundaries within the supervisory and therapeutic relationships. Bearman et al. (2020) identified that US psychology graduate programs do not consider specific supervision training, such as CBT, of high importance, and there appears to be inconsistencies and a lack of structure in what CBT supervision training entails. Therefore, Bearman et al. (2020) suggested that psychology graduate programs are ideal for providing requisite training and curriculum to therapists in training where knowledge is incorporated into practice.

Bearman et al. (2020) measured CBT supervision competency with three self-assessment tools, including the *Supervision Process Questionnaire* to gauge prior experiences with supervision, the *Supervision Knowledge Questionnaire* to determine increased declarative knowledge of CBT supervision, and the *Supervisory Competence Questionnaire* to assess general and specific competencies regarding therapeutic modalities. Each of these questionnaires were established as reliable and valid. Bearman et al. (2020) shared that using self-assessment tools is important as this helps supervisees reflect on their current knowledge, practical application, and progress regarding implementing their CBT counselling skills. Bearman et al.'s (2020) research study included 23 doctoral students (i.e., 17 females and six males of various ethnicities) in a clinical psychology program who preferred CBT as their primary theoretical orientation; however, they have yet to receive formal CBT supervision training. Bearman et al. (2020) noted a limitation regarding participant characteristics regarding their training and experiences that may ultimately impact the study results, such as a small number of participants who all preferred

the CBT approach, as opposed to selecting participants who utilized another theoretical orientation. Participants provided written consent to complete an eight-hour workshop that included pre- and post-supervisory questionnaires; the university's institutional review board approved the study (Bearman et al., 2020). The pre-questionnaire responses highlighted that theoretical knowledge and practical skills of CBT were lacking and that being supervised does not support participants in adequately conducting supervision in the future (Bearman et al., 2020).

The goals of the training were to provide CBT-specific supervision training (i.e., group exercises, discussions, audio/video recordings, experiential strategies and observer feedback) and include resources, such as systematic reviews of CBT-based clinical trials that support the high-quality implementation of CBT interventions (Bearman et al., 2020). A portion of the workshop focused on culturally sensitive supervision practices to gauge participants' competence in therapy and supervision with a diverse supervisee (Bearman et al., 2020). Bearman et al.'s (2020) qualitative results demonstrated that participants' knowledge of CBT supervision improved after the workshop. Limitations of the study included no objective measure of competency or change in behaviour; future research should include longitudinal research to assess these measures over an extended time period, as the goals of the workshop can be transferred to course content in a typical term or semester (Bearman et al., 2020). In conclusion, Bearman et al. (2020) noted that the practical aspects of supervision are of value; however, supervision could be better evaluated within graduate studies and clinical settings. The measures used to evaluate supervisees' practical skills are necessary to support evaluative practices and a structured and evidence-based approach to CBT supervision. Doing so aids in the supervisees' skill development, which is reflected in this capstone research project's implementation of the SAM CAM supervision model.

CBT Supervision – Video Recording Feedback & Techniques

Gonsalvez et al.'s (2016) research was completed in Sydney, Australia, and explored the value of video recordings in supporting supervisees to build their competency skills as an evidence-based approach to CBT supervision. Additionally, Gonsalvez et al. (2016) research examined two video recording techniques by developing standard protocols and case illustrations that support effective review and reflection of video recordings utilized in CBT supervision. Gonsalvez et al. (2016) identified video recordings as an effective observational technique that supports supervisee reflection and gives the supervisor an opportunity for evaluation while providing constructive feedback on the supervisee's skills, attitudes, and rapport building. Gonsalvez et al. (2016) highlighted that video recordings and feedback are under-utilized in supervision as supervisors tend to favour case presentation methods carried out by their supervisees that focus on psychoeducation, research, and literature. Gonsalvez et al. (2016) identified that supervisees' subjective reports in supervision may be skewed due to withholding information. Furthermore, a supervisee may not share information, unintentionally or intentionally, regarding therapy sessions due to their developmental level, lack of practical knowledge, and the presence of potential biases that influence the information they disclose and impact client case conceptualizations and the supervisory relationship (Gonsalvez et al., 2016). Therefore, from an evaluative stance, supervisee self-reporting exhibits low to moderate validity and reliability assessment practices (Gonsalvez et al., 2016).

Gonsalvez et al. (2016) noted the advantages of video recordings, including accessibility, cost efficiency, convenience, and collaboration between the supervisor and supervisee regarding potential treatment interventions, ethical dilemmas, and opportune moments for further exploration in therapy sessions. Gonsalvez et al. (2016) emphasized that video recordings can be

utilized in individual and group supervision and provide additional opportunities for peer feedback and supervisee reflection. Gonsalvez et al.'s (2016) research considered supervisees' common experience of social anxiety when completing video recordings. Gonsalvez et al. (2016) identified that recordings can be used as a behavioural experiment where the supervisor can challenge the supervisees' negative self-talk regarding their performance and interactions with clients and support reframing the supervisee's thoughts to a more positive self-image and appraisals. Gonsalvez et al. (2016) highlighted that video review techniques have become increasingly prevalent in CBT supervision, such as role-playing interpersonal situations, implementing social skills training, and reviewing experiential therapeutic approaches that support the building of supervisee collaboration and problem-solving skills.

Gonsalvez et al. (2016) highlighted two video feedback techniques in their observational research: the *Give-me-5* and *I-Spy* techniques. The *Give-me-5* technique supports the supervisor and supervisee in identifying five, and only five, aspects of the video recording; Gonsalvez et al. (2016) noted supervisees' tendency to become overwhelmed and confused when differentiating major and minor comments when their supervisor provided feedback. Gonsalvez et al. (2016) shared that the purpose of the *Give-me-5* technique is to highlight patterns and pertinent issues instead of zoning in on specific behaviours and missed opportunities. Gonsalvez et al. (2016) explored the *I-Spy* technique, narrowing the focus to the use of one particular microskill based on the developmental level of the supervisee (e.g., Socratic questions, paraphrasing or summarizing response). Gonsalvez et al. (2016) emphasized the supervisor in identifying strengths if the supervisee is experiencing social anxiety or is overly critical of their performance. Gonsalvez et al. (2016) noted that the two video recording techniques are considered complimentary of each other and other CBT supervision techniques to support the supervisee in the development of their

CBT knowledge and practical skills. Gonsalvez et al. (2016) research is essential to this capstone research project, as it explores the usefulness of video recordings in CBT supervision and highlights how to effectively review video recordings through the implementation of techniques that support supervisees to build their competency and provides useful when considering key elements of the SAM CAM supervision model.

Summary of the CBT Supervision Model

Prasko et al.'s (2022) research study highlighted the importance of exploring the potential of transference and countertransference within supervisory and therapeutic relationships. CBT supervision explores transference and countertransference, where the supervisor provides a reflective and safe space for the supervisee to note any potential biases that may impact how they provide therapeutic support (Prasko et al., 2022). The challenge lies in the space created by the supervisor, who holds the dual roles of a professional and an evaluator, which may impact the supervisee's desire to share (Prasko et al., 2022). Prasko et al.'s (2022) research is essential in the development of the SAM CAM supervision model as it highlights the importance of the supervisee's insight into transference and countertransference, which results in consideration of their ethical responsibilities as a student therapist who can better support the client from an objective stance.

Pretorius' (2006) research study highlighted the use of CBT within the supervisory relationship. Pretorius (2006) noted CBT supervision as a structured approach that helps supervisees build their case conceptualization skills, provide effective psychoeducation, and utilize CBT interventions to assist clients in reaching their goals. Bearman et al. (2020) research study suggested that CBT supervision training be provided to graduate students that support theoretical learning and the development of practical skills and include an evaluative process

using self-assessment tools. Bearman et al. (2020) noted a lack of objective evaluative measures over an extended period that would support the effective implementation of CBT supervision. Pretorius' (2006) research provided a structure for effectively applying and implementing research, interventions, and evaluative measures as CBT supervision is included as part of the SAM CAM supervision model.

Gonsalvez et al.'s (2016) qualitative research highlighted that video recordings of therapy sessions play a large role in CBT supervision. Gonsalvez et al. (2016) explored the benefits of utilizing video recordings as an effective observational method rather than assessing competency through supervisees self-reporting and examining applicable literature. Although there is an emphasis on the use and techniques of video recordings, Gonsalvez et al. (2016) stressed the supervisee's experience of social anxiety in completing this task. Therefore, it is essential that the supervisor be cognizant of potential power dynamics and ensure their feedback is given in a professional and sensitive manner. Gonsalvez et al. (2016) established that doing so will motivate supervisees to be reflective in their practice, foster their learning and increase their autonomy instead of feedback that could cause harm and potentially rupture the supervisory relationship. Gonsalvez et al.'s (2016) research is a key aspect of this capstone research project, as it explores the importance of observational methods in developing the SAM CAM supervision model and the significance of collaboration and feedback within the supervisory relationship. An emphasis on an additional behavioural approach that supports the use of evidence-based observational methods to encourage the development of supervisees' interpersonal skills is explored in the following section.

Functional Analytic Psychotherapy

Novoa-Gomez et al.'s (2019) research study relates to the capstone research project as it analyzed the necessary clinical skills supervisees develop by utilizing Functional Analytic Psychotherapy (FAP), a behavioural approach to supervision. Smith's (2023) research article identified an American clinical psychologist, Robert J. Kohlenberg, as the founder of FAP. In the mid-1980s, Kohlenberg and his partner, Mavis Tsai, developed the FAP approach to highlight how client behaviours occur within interpersonal relationships, including the therapeutic relationship (Smith, 2023). FAP is considered a third-wave behaviour-based therapeutic approach that focuses on how interactions play out between the client and therapist during sessions (Smith, 2023). The capstone research project will consider FAP in the incorporation of the SAM CAM supervision model, as it provides an evidence-based behavioural approach that supports collaboration within the supervisory relationship and the supervisee's overall growth and development of their competency skills.

Novoa-Gomez et al.'s (2019) research applied FAP, highlighting the therapeutic relationship between the therapist (i.e., supervisee) and the client, which was noted as the vessel of change in behaviour. Novoa-Gomez et al.'s (2019) qualitative research was completed in Colombia in post-secondary institutions and considered FAP of meaningful use for supervisors to assist in building the supervisee's interpersonal skills. Novoa-Gomez et al.'s (2019) research emphasized that the study aimed to identify response classes during recorded supervision sessions using the *Supervisor-Supervisee Interaction Assessment Manual* developed by the American Psychological Association. Novoa-Gomez et al.'s (2019) research applies to the capstone research project as it highlights the importance of observational methods, such as video recordings and evaluative practices.

Novoa-Gomez et al.'s (2019) research noted a strong focus in supervision sessions on the supervisees' assessment and intervention skills, a fundamental aspect of clinical training and professional practice. However, the research identified that discussions around supervisee autonomy were very low, which Novoa-Gomez et al. (2019) stressed as concerning as this limits the supervisee in building a foundation to choose appropriate treatment interventions and potentially modify these to meet the client's therapy goals. Furthermore, Novoa-Gomez et al. (2019) identified that discussions on self-evaluation practices, cultural diversity and interpersonal skills were infrequent in supervision sessions, which can result in supervisee dissatisfaction with their supervisor and within their clinical practice.

Novoa-Gomez et al.'s (2019) qualitative research explored how FAP relates to clinical supervision with a focus on how behaviours show up not only in the therapeutic relationship but also in the supervisory relationship and ultimately create lasting change. Although FAP provides structure like CBT supervision, Novoa-Gomez et al. (2019) noted a challenge in building the supervisee's autonomy, as the majority of the focus is spent on evaluating the supervisee's intervention skills and may not explore the supervisee's developmental stages in their practical experience. Novoa-Gomez et al.'s (2019) research is essential to the capstone research project as the observational method highlighted the supervisee's assessment and intervention skills; however, it also identified a lack of focus on the development of the supervisee's interpersonal skills and cultural considerations over the course of their practical experiences.

The CPA (2017) *Ethical Guidelines for Supervision* noted that supervisees and supervisors should identify their preferred theories and practices, interpersonal differences, and biases that may impact the supervisory relationship. Additionally, the ethical guidelines emphasized the importance of identifying the parameters of the supervisory relationship and

making them clear regarding confidentiality, educational or learning requirements, site procedures, supervision goals, and evaluative processes (CPA, 2017). Doing so supports the supervisor in identifying the supervisee's current competency level and goal development while ensuring the supervisor is on-site and easily accessible for supervision (CPA, 2017).

Critical Events Model

Ladany et al.'s (2016) research study identified the *Critical Events Model* (CEM) as an interpersonal approach focusing on common challenging issues that supervisees experience within supervisory relationships. Ladany et al. (2016) defined supervision according to the CEM as moving through sequential tasks that determine a cumulative or overall outcome. Over the past 30 years, the events paradigm has acknowledged the importance of the supervisor's responsiveness to the supervisee regarding contextual aspects of client sessions and how the supervisee can be a part of the process that supports change (Ladany et al., 2016).

The research study by Xu et al. (2021) was completed in the US and identified the supervisory relationship as a critical element in supporting the advancement of the supervisee's skills. Xu et al. (2021) utilized the CEM to analyze the level of the supervisor's ability to explore the supervisee's needs, the therapeutic relationship, potential countertransference, the supervisory relationship, and the parallel processes between the supervisory and therapeutic alliances. Xu et al. (2021) examined the parallel process as the supervisee unconsciously re-enacts responses that coincide with the supervisory relationship with their client. These elements are further explored by Xu et al. (2021) through the self-report measure, the Relational Behavioural Scale (RBS), and observation and recording of multiple supervision sessions. The RBS asked supervisees to consider how much of their supervision time focuses on relational content and how the interpersonal style of the supervisor's chosen therapeutic approach

translates to the supervisee's therapeutic practice (Xu et al., 2021). Xu et al. (2021) noted that supervisors utilize multiple supervision approaches at a master's educational level, such as developmental, feminist therapy, emotion-focused therapy, and CBT.

The study by Xu et al. (2021) suggested that in addition to observable behaviours, supervisors' thought processes before and during supervision and their internal responses should be considered in future research. The CEM reflects the importance of the capstone research question as it identifies the common difficulties supervisees experience within the supervisory relationship and the need to identify specific tasks to support supervisees in reaching their goals. Using the RBS aids the supervisor in supporting the supervisee within a specific therapeutic approach and how interpersonal dynamics are reflected within the therapeutic alliance. Xu et al.'s (2021) research noted a modest-to-strong focus on interpersonal relationships within the therapeutic alliance and the concept of countertransference from supervisors who participated in the research study. The researchers noted minimal emphasis on parallel processes, observed in less than half of the supervision sessions based on the supervisor's theoretical orientation and the topics of focus from both the supervisor and the supervisee (Xu et al., 2021).

Xu et al. (2021) noted that the CEM acknowledges the reflective aspects of supervision and includes identifying potential countertransference and the parallel processes between the supervisory and therapeutic relationships; however, when put into practice, Xu et al. (2021) marked a lack of connection between the supervisory and therapeutic relationships. Xu et al. (2021) referenced the RBS as a self-assessment tool for supervisees to note the amount of reflection included in supervision and indicate how the supervisor's chosen theoretical approach impacted their interpersonal communications within the supervisory relationship. The capstone research project noted similarities between Xu et al.'s (2021) research on the CEM and Novoa-

Gomez et al.'s (2019) research on FAP, as both highlighted the importance of building the supervisee's interpersonal skills and additionally identified common challenges within the supervisory relationship, such as reflective practice and cultural awareness, that is critically analyzed in the next section and can be mitigated in the implementation of the SAM CAM supervision model.

Supervision – Cultural Considerations

The aforementioned research studies (Barron et al., 2021; Bearman et al., 2020; Eryilmaz & Bektaş-Aydin, 2022; Koruk & Kara, 2019; Novoa-Gomez et al., 2019; Olson, 2023; Prasko et al., 2022; Xu et al., 2021) highlighted the importance of cultural awareness and sensitivity within the supervisory and therapeutic relationships. Blasini-Mendez's (2019) research highlighted how reflection on his biases and countertransference within the supervisory relationship impacted his work with his clients. When a person's culture is reflected upon during supervision, this goes beyond evaluating the supervisee's skills and competence and supports building open and honest communication within the supervisory relationship (Blasini-Mendez, 2019).

Blasini-Mendez's (2019) research investigated the struggles of personal insecurities and countertransference within the therapeutic relationship that supervisees experience and the difficulties that may arise when identifying these with their supervisor. Blasini-Mendez (2019) recognized the hesitancy of supervisees in highlighting their struggles during their internship experience, as they may be perceived as incompetent and receive disapproval from their supervisor. Blasini-Mendez (2019) identified as a "Puerto Rican, white-skinned man" and shared his experience on how intersectionality and postcolonialism affect his role as a therapist and how communicating this with his supervisor supported his growth and development. Blasini-Mendez (2019) identified that "historically, intersectionality focuses on inequality among individuals,

while postcolonialism has...focused on power relations and the interactions with others” (p. 234). Blasini-Mendez (2019) emphasized the importance of an interpersonal postcolonial approach to supervision as it supports vulnerability and authenticity within the supervisory relationship. Blasini-Mendez’s (2019) research concluded that bringing forth his countertransference and insecurities during supervision sessions assisted him in better utilizing his clinical skills and understanding himself and his clients while showing up authentically in his personal and professional life as a therapist. Blasini-Mendez (2019) concluded that reflecting on power, privilege and oppression in the supervisory relationship produces a brave space and supports parallel processes and presence with clients. Blasini-Mendez’s (2019) research highlighted the importance of exploring cultural considerations within the supervisory relationship and relates to the capstone research question of how the supervision process ultimately impacts the supervisee’s ability to gain insight into how their own culture and that of their clients impact the therapeutic relationship. Cultural considerations should be further explored within the supervision models discussed in this capstone research project, including from a developmental, reflective, CBT, FAP, and CEM lens and applied in the SAM CAM supervision model.

Competency Benchmark Model

Fouad et al.’s (2009) study highlighted the use of the Competency Benchmark Model (CBM) as an assessment tool that supervisors can use to support supervisee’s growth and development. Fouad et al.’s (2009) research explored the seven foundational core competencies of the CBM, including professionalism, reflective practice/ self-assessment/ self-care, scientific knowledge and methods, relationships, individual and cultural diversity, ethical legal standards and policy, and interdisciplinary systems. Furthermore, Fouad et al.’s (2009) research explored

the eight functional core competencies of the CBM, including assessment, intervention, consultation, research/ evaluation, supervision, teaching, management/ administration, and advocacy. Fouad et al. (2009) provided a definition of each competency and described the essential components of each over three developmental periods, including a supervisee's readiness for practicum, readiness for internship, and readiness for entry into practice. Fouad et al. (2009) also utilized behavioural anchors that support supervisors in assessing and evaluating the supervisee's competency and skills. The capstone research project explores Fouad et al.'s (2009) research by explaining each competency in the following section to support utilizing assessment tools within the SAM CAM supervision model.

Fouad et al. (2009) identified the CBM's foundational competencies, including professionalism, reflective practice/ self-assessment/ self-care, scientific knowledge and methods, relationships, individual and cultural diversity, ethical legal standards and policy, and interdisciplinary systems that refer to the supervisee's knowledge, skills, attitudes, and values as a student therapist. The core competency of *professionalism* ensures the supervisee demonstrates appropriate ethical behaviour, including honesty, responsibility, and integrity (Fouad et al., 2009). The core competency of *reflective practice/self-assessment/self-care* supports the supervisee in building awareness and implementing mindfulness-based self-care practices (Fouad et al., 2009). The core competency of *scientific knowledge and methods* supports supervisees in demonstrating their knowledge by appropriately completing and applying research methods within the supervisory and therapeutic relationships (Fouad et al., 2009). The core competency of *relationships* supports supervisees in building their interpersonal skills to maintain respectful connections with each other, peers, and their clients (Fouad et al., 2009).

The core competency of *individual and cultural diversity* supports supervisees in building awareness and sensitivity to how their culture may impact their work with their clients, potential treatment interventions, and when consulting with other mental health professionals (Fouad et al., 2009). The core competency of *ethical, legal standards and policy* supports supervisees in developing an awareness of potential legal issues while attaining knowledge, understanding and applying ethical principles and codes of conduct related to counselling (Fouad et al., 2009). The core competency of *interdisciplinary systems* supports supervisees in gaining knowledge and understanding of differing mental health professionals' roles and responsibilities, professional standards, and scope of practice (Fouad et al., 2009).

Fouad et al. (2009) identified these CBM functional core competencies to refer to the supervisee's performance, integration, and problem-solving skills as a student therapist. The core competency of *assessment* supports supervisees in gaining knowledge of assessing for specific concerns and selecting appropriate and multiple measurement tools for diverse populations (Fouad et al., 2009). The core competency of *intervention* supports supervisees in obtaining knowledge and applying appropriate evidence-based interventions that support clients in obtaining their therapeutic goals (Fouad et al., 2009). The core competency of *consultation* supports supervisees in addressing client referral questions, recognizing when it is appropriate to seek consultation and offering applicable interventions and recommendations (Fouad et al., 2009).

The core competency of *research/ evaluation* supports supervisees in developing knowledge and critical thinking skills when implementing evidence-based practices and evaluating potential outcomes (Fouad et al., 2009). The core competency of *supervision* supports supervisees in understanding expectations, roles, and processes within supervision that support

skill development and the impact of diversity in professional settings (Fouad et al., 2009). The core competency of *teaching* supports supervisees in obtaining knowledge and application of different theories of learning (Fouad et al., 2009). The core competency of *management/administration* supports supervisees in understanding organizational policies and managing the administrative aspects to maintain the delivery of services (Fouad et al., 2009). The core competency of *advocacy* supports supervisees in gaining awareness and taking action regarding social, political, economic, or cultural factors that support meaningful change on an individual, institutional, group, and systemic level (Fouad et al., 2009).

The core competencies of the CBM identified the qualities supervisors can reference when evaluating supervisees' theoretical and practical skills development (Fouad et al., 2009). Despite the age of the CBM, the core competencies support the capstone research question as they can be implemented over the course of the supervisee's developmental stages within a specific therapeutic approach, such as CBT, and incorporated into the SAM CAM supervision model. Doing so will highlight the supervisee's strengths and areas of growth and promote reflection of their beliefs, attitudes, and culture within the supervisory relationship, creating a parallel process within the therapeutic relationship. To explore cultural aspects further, the following paragraphs review how power dynamics and gender may impact the supervisory relationship.

Valmas et al. (2020) conducted research in the US and explored how supervisor-supervisee genders and intersecting identities play a factor in supervisory relationships and that positive relationships lead to positive practicum and internship outcomes. Valmas et al. (2020) utilized the CBM core competencies to assess and evaluate supervisees' competency and skills. Valmas et al.'s (2020) research applied the CBM through a qualitative review of three women's

experiences with their supervisors as therapists in training and identified how gender and power dynamics have impacted their perception of themselves and as practitioners. Valmas et al. (2020) identified a lack of resources for supervisors to access regarding exploring gender and intersectionality within the supervisory relationship. Valmas et al.'s (2020) research suggested that supervisors utilize an intersectional lens and consider implementing the CBM to bring awareness and sensitivity regarding gender, culture, and power dynamics within supervisory and therapeutic relationships. Valmas et al. (2020) advised that future research implement the CBM throughout the supervisees' training stages to engage in conversations regarding interpersonal processes during evaluations regularly.

Valmas et al.'s (2020) study is essential to the capstone research project as it highlighted an underrepresented group, brought awareness to the pertinent issue of gender roles and power dynamics, and provided language for participants to note their experiences with power differentials and microaggressions by their supervisors. Valmas et al.'s (2020) research allowed future researchers to explore this issue to gain further reliability and validity regarding supervisees' experiences. The SAM CAM supervision model will reflect Valmas et al.'s (2020) mention of the importance of supervisors supporting the integration of gender role sensitivity and power dynamics within the supervisory relationship.

The CAP Monitor

The College of Alberta Psychologists (CAP) is the regulatory licensing body for registered psychologists and registered provisional psychologists (i.e., psychologists in training who require supervision) who practice in the province of Alberta. The CAP publishes a quarterly newsletter named *The CAP Monitor* that endorses ethical standards and guidelines for its members from an organizational standpoint. The CAP Monitor's Spring 2024 issue explored the

complexities within supervision and how it influences supervisees' growth and development (CAP, 2024). Power dynamics within the supervisory relationship were highlighted due to the multiple roles played by the supervisor, including educator, supporter, mentor, gatekeeper of the field of psychology, and protector of the public when accessing mental health services (CAP, 2024). The CAP (2024) issue identified foundational skills of a good supervisor, including building a positive alliance, consideration of the supervisee's learning needs, providing and receiving feedback competently, addressing multicultural considerations, and engaging in reflective practice. Moreover, the CAP (2024) noted that supervisees may experience microaggressions and discrimination through comments made during supervision; therefore, supervisors must attend culturally sensitive trainings that promote diverse perspectives within the supervisory relationship. Supervisors should maintain a sense of openness to their own and other's cultural identities, such as power dynamics and privilege, and how this may impact the supervisory and therapeutic relationships (CAP, 2024). Doing so has been shown to prompt supervisees to be more open in disclosing potential countertransference and enhance self-efficacy and a collaborative approach within the supervisory relationship (CAP, 2024).

The CAP (2024) issue highlighted the importance of supervision and included articles from their Supervision Review Committee members who shared knowledge and resources on best practices and reflections on their experiences as previous supervisees and as supervisors. Furthermore, the authors of the CAP (2024) issue provided updated information on the supervision standards for provisional psychologists and the required competencies to become fully registered, including completing 1600 hours and passing two exams with three attempts for the Examination of Professional Practice in Psychology (EPPP) within a five-year period once added to the registrar list. If applicants do not meet these requirements within five years, they are

not eligible for full registration in the province of Alberta (CAP, 2024). The CAP (2024) determined these updates to coincide with policies in various Canadian jurisdictions and with the public's best interest and to maintain confidence in the field of psychology.

The CAP (2024) issue is pertinent to the capstone research project as it displays the effective use of power and privilege as supervisors who were once supervisees. The SAM CAM supervision model welcomes the authors' shared evidence-based research that supports best practices in supervision provided by a regulatory body that emphasizes the importance of psychologists' ethical roles and responsibilities as mental health practitioners. Moreover, the CAP (2024) issue identified the updated rules and regulations for provisional psychologists to obtain registration, identifying the parameters and assessment tools used to maintain competency as a fully registered psychologist in the province of Alberta.

Cultural Assessment Tools

The systematic review by Fickling et al. (2019) highlighted the importance of incorporating a multicultural and social justice approach to clinical supervision practices when supporting counselling supervisees. The review identified the Multicultural and Social Justice Counseling Competencies (MSJCC) developed by the American Counseling Association (ACA) for counsellors to build therapeutic rapport with their clients; however, Fickling et al. (2019) utilized the MSJCC from the perspective of exploring the supervisory relationship. The ACA is similar to the Canadian Psychological Association or, more province-specific, the Psychologists' Association of Alberta, as these organizations offer memberships to support counsellors in staying updated on rules and regulations and provide applicable resources to further their knowledge and practical skills. Fickling et al. (2019) discussed how the MSJCC can support supervisors in reflecting on their own cultural identities and how this model can be used to

support supervisees in building their case conceptualizations and the implementation of treatment interventions. Fickling et al. (2019) highlighted the developmental domains of supervision utilizing the MSJCC, including supervisor self-awareness, supervisee worldview, supervisory relationship, supervision, and advocacy interventions.

Fickling et al. (2019) applied the concept of broaching, defined as “an attitude that translates to behaviours that give the... supervisees the option of bringing their cultural identities and experiences into the [supervisory] relationship” (p. 310). Furthermore, Fickling et al.’s (2019) research illustrated that the supervisor facilitates broaching by focusing on the supervisory relationship and the supervisee’s conceptualization of their clients while exploring the dynamics of the therapeutic relationship. Fickling et al.’s (2019) definition of broaching was identified as optional, and the responsibility of implementing broaching is on the supervisor instead of a collaborative approach within the supervisory relationship. Fickling et al.’s (2019) review questioned the quality of broaching within the supervisory relationship and in the use of the MSJCC, and this will be taken into consideration in the development of the SAM CAM supervision model to ensure an authentic approach to the development of cultural competence within the supervisory relationship. Fickling et al.’s (2019) research contributes to the capstone research question by identifying and suggesting a cultural assessment tool to be implemented within supervision models and the supervisory relationship. Fickling et al. (2019) noted the challenges of assessing cultural competence and integrating a multicultural and advocacy approach in clinical supervision and parallel processes within the therapeutic relationship. The next section critically analyzes a cultural assessment tool in the Diagnostic and Statistical Manual of Mental Disorders (DSM), a handbook by the American Psychiatric Association (APA).

The APA (2024) authored the DSM and has made additional updates since its initial publication in 1952. The APA developed the Cultural Formulation Interview (CFI) in the DSM-IV, in 1994 and has since updated the handbook noted in the most recent version, the DSM 5-Text Revision, in 2022 (APA, 2024). The APA implemented the CFI to aid mental health practitioners in identifying and obtaining culturally relevant information that supports an accurate assessment of their clients based on their presentation and informs appropriate treatment planning (APA, 2022). The CFI highlighted three essential categories, including core questions that provide an initial assessment, an informant version that provides collateral information, and supplementary questions that expand on the information if necessary and for specific populations, such as children and adolescents, seniors and caregivers, and immigrants and refugees (APA, 2022). The CFI is a semi-structured interview that consists of culturally relevant questions, including client background information (i.e., age, gender, sexual orientation, abilities, religion, language, ethnicity, race, location, socioeconomic status, marital status, family system, education, and occupation), developmental and societal contexts and groups, health organizations/ systems that influence the client's values, knowledge, and practices that aids in the meaning they give to their experiences (APA, 2022). The CFI takes a person-centred approach to explore the client's presenting concerns within the individual and broader societal contexts that shed light on how the client seeks support from others (APA, 2022). The APA (2022) noted that the CFI had been field-tested among practitioners, clients, and their support systems and has shown to be an effective cultural assessment tool.

Lewis-Fernandez et al.'s (2017) mixed-methods study was the first field study to administer the CFI to 318 clients, 75 practitioners over 11 sites in six countries, including Canada. Lewis-Fernandez et al.'s (2017) main site was located in New York City, and collected

and analyzed the data from other sites that participated in the study from November 2011 to September 2012. Lewis-Fernandez et al. (2017) emphasized that all practitioners of various outpatient psychiatric sites completed a two-hour CFI training to review guidelines, video demonstrations, role-playing scenarios that included feedback, and a question-and-answer session. Lewis-Fernandez et al.'s (2017) data methods included pre-interview demographic surveys for clients and practitioners that included practitioners' professional and cultural competence experiences, practitioners' delivery of DSM-IV diagnoses, follow-up questionnaires and semi-structured qualitative interviews for both participant groups. Lewis-Fernandez et al.'s (2017) questionnaires were created specifically for the field study and included the *Debriefing for Patients* and *Debriefing for Clinicians*, which included Likert scale questions to assess the CFI's feasibility, acceptability, and clinical utility. Lewis-Fernandez et al. (2017) noted that clients aged 16+ and fluent in the language of their practitioners were eligible for the study. Additionally, clients did not have previous contact with their practitioner, as Lewis-Fernandez et al.'s (2017) study focused on implementing the CFI in the initial assessment.

Lewis-Fernandez et al.'s (2017) study results confirmed that clients positively viewed the implementation of the CFI more than practitioners due to practical concerns about feasibility and limited time due to organizational constraints and client caseload. Furthermore, Lewis-Fernandez et al. (2017) noted that practitioners lacked differentiation between the CFI and routine intake procedures. Lewis-Fernandez et al. (2017) emphasized that Canada was rated as having extensive intake procedures due to programs designed specifically for immigrants and refugees. Lewis-Fernandez et al. (2017) emphasized that these concerns were addressed in the DSM-5 revisions of the CFI, providing clarity in wording and course of questions and separating the CFI's intentions from routine procedures. Lewis-Fernandez et al. (2017) highlighted that future

research should include the CFI in clinical practice and training that supports the practitioner's development of cultural awareness that plays a part in routine practice. Lewis-Fernandez et al.'s (2017) study confirmed that as practitioners utilized the CFI regularly, less time was needed for the initial assessment and that the CFI is relevant and can be generalized to other medical professions beyond psychiatry. Lewis-Fernandez et al.'s (2017) research is relevant to the capstone research project as it highlights the reliability and validity of using the CFI in countries beyond its origin, such as Canada. The key domains of the CFI are critically analyzed in the following section.

The CFI identified four domains when completing a cultural assessment, including a cultural definition of the problem, cultural perceptions of the problem (e.g., cause, context, and support), cultural factors affecting coping and previous outreach, and cultural factors affecting current outreach (APA, 2022). The APA (2022) highlighted that the CFI is most helpful when the practitioner is presented with difficulty completing a diagnostic assessment due to a vast difference between their and their client's cultures. Additionally, the CFI can be used when the practitioner is presented with uncertainty between culturally relevant symptoms versus diagnostic symptoms and the severity (APA, 2022). The CFI is helpful when the client lacks trust in the assessment process based on negative experiences and care with previous healthcare systems that prompt a lack of engagement in the current process and if the practitioner and client disagree about how to proceed with treatment interventions (APA, 2022). The CFI supports the capstone research project as it reflects how the practitioner's (i.e., supervisee's) own culture and the client's culture may impact their case conceptualization and the therapeutic relationship. The SAM CAM supervision model will highlight a parallel process that emphasizes using the CFI within the supervisory relationship to promote collaboration for effective treatment and client

care, encourage objective assessments, and develop the supervisee's skills and competencies. A summary of the literature exploring cultural considerations within the supervisory and therapeutic relationships is provided in the next section.

Summary of Cultural Considerations

Blasini-Mendez's (2019) research highlighted the value of exploring his biases and intersectionality within the supervisory relationship, as this supported him in maintaining objectivity and building his case conceptualization and rapport within his therapeutic relationships. Blasini-Mendez (2019) noted that having an awareness of power, privilege, and oppression aided him in building his reflection and interpersonal skills that are paralleled within the therapeutic relationship. Blasini-Mendez's (2019) research is essential to the capstone research project as bringing awareness to the supervisor and supervisee's countertransference is utilized within CBT supervision and supports building a trusting and authentic supervisory relationship.

Fouad et al.'s (2009) exploration of the CBM provided research and a useful evaluative measure of the functional and foundational characteristics of student therapist's competencies, including cultural diversity. Valmas et al. (2020) qualitative research also explored using the CBM as an objective evaluative measure to avoid potential power differentials and microaggressions, such as gender roles, within the supervisory relationship. Valmas et al. (2020) identified three women's experiences during their practical internship and emphasized a lack of research on intersecting identities within the supervisory relationship and how this impacts supervisees' views of themselves and as professionals. Fouad et al.'s (2009) and Valmas et al.'s (2020) research are central to the capstone research project as both explored how the CBM can be utilized in different supervision models that support cultural awareness, collaboration,

objectivity, and exploration of the supervisee's competency skills. Furthermore, the CBM highlights the developmental stages explored in this capstone research project in the various developmental supervision models.

The CAP Monitor's Spring 2024 issue emphasized the importance of effective supervision, and the authors suggested key elements of effective supervision based on personal experiences as supervisees and current supervisors. The CAP Monitor newsletter is endorsed by the provincial regulatory body governing the ethical duties of practicing provisional and fully registered psychologists in Alberta. The CAP (2024) issue highlighted foundational supervisory skills that support collaboration, building the supervisee's knowledge and practical skills, professional feedback, intersecting identities, and reflective practice. The CAP (2024) issue also updated provisional psychologists' requirements to become fully registered psychologists in Alberta. The CAP (2024) issue is valuable to the capstone research project as it supports using objective measures to assess the supervisee's competence and the importance of reflective aspects and best supervision practices.

Fickling et al.'s (2019) systematic review highlighted the MSJCC as a cultural assessment tool designed by the ACA. Fickling et al. (2019) suggested using the MSJCC within the supervisory relationship to support cultural awareness, reflection, and collaboration that results in implementing appropriate client treatment interventions. Fickling et al. (2019) introduced the concept of broaching to explore cultural identities within the supervisory relationship. Fickling et al.'s (2019) review identified a cultural assessment tool that the capstone research project highlighted as an important element of multiple supervision models.

The APA (2022) authored the DSM and developed the CFI as a cultural assessment tool within the therapeutic relationship. The APA (2022) identified the CFI as a semi-structured

interview with culturally relevant questions to obtain client background information that supports how culture informs potential issues and diagnoses, interventions, and collaboration with the practitioner. Lewis-Fernandez et al.'s (2017) mixed-methods study administered the CFI in multiple countries and was noted as the first field study to do so. Lewis-Fernandez et al.'s (2017) research analyzed clients' and practitioners' responses to gauge the CFI's feasibility, acceptability, and clinical utility. Lewis-Fernandez et al. (2017) received positive responses from clients; however, practitioners had concerns about the feasibility due to time constraints and confusion between the CFI and initial assessment procedures. Lewis-Fernandez et al. (2017) noted the APA has since updated the DSM to provide clarity and structure regarding the implementation of the CFI that can be used by medical professionals outside of psychiatry and proved useful to practitioners that reside in countries such as Canada. The CFI is essential to the capstone research project as it can be utilized as a cultural assessment tool within the SAM CAM supervision model to support cultural awareness and collaboration on client care within the supervisory relationship.

Conclusion of the Literature Review

The literature review identified various research studies that explored how developmental and CBT supervision models can support new counselling supervisees. Furthermore, additional supervision models were analyzed and included reflective supervision, FAP supervision, and CEM supervision, which highlighted key components to be implemented into the SAM CAM supervision model. Cultural considerations were examined to support cultural awareness, mitigate biases, maintain objectivity, and identify cultural assessment tools that support the building of the supervisory relationship and promote effective case conceptualizations that support appropriate treatment and best practice within therapeutic relationships.

The literature review identified several models that have been used in supervision. These models share similarities, focusing on goal development and using specific therapeutic approaches such as CBT. Furthermore, they emphasize the importance of observational and evaluative processes within supervision. Bearman et al.'s (2020) research emphasized the importance of CBT supervision training and self-assessment tools in graduate programs supporting supervisees' competency-building skills. Lastly, the reviewed models highlighted the need for collaboration and culturally responsive practices in supervision that support reflection and are paralleled within therapeutic relationships. Doing so builds awareness of how the supervisor and supervisee's values, attitudes, biases, and cultural identities may influence the supervisory relationship and work with clients. The capstone research project values the similarities of the aforementioned supervision models as they emphasize the essential supervision considerations implemented in the SAM CAM supervision model that support the growth and development of supervisees' professional identities and competency skills.

However, these models' shortcomings include the lack of evidence-based cultural and competency-based assessment tools that verify the evaluative processes in supervision. Additionally, these models noted a heavy reliance on self-assessment tools rather than evidence-based observational tools in supervision. The SAM CAM supervision model utilizes the CBM's core competencies to support evaluative measures used in supervision. Furthermore, Olson (2023) emphasized that reflection and reflective supervision are commonly associated with the educational field and that future researchers should consider narrowing their focus to a specific field, such as counselling. Barron et al.'s (2021) research emphasized the need for diversity of participants, supervisees' voices to be heard, and rapport building within the supervisory relationship, as current research is from the supervisors' perspectives. The SAM CAM

supervision model utilizes the CFI developed by the APA (2022) as a cultural assessment tool for use by Canadian practitioners and within the supervisory relationship. The capstone research project highlights key elements of multiple supervision models, emphasizing developmental and CBT supervision models and how these impact supervisees. The strengths and challenges of previous models have been critically analyzed to help develop the SAM CAM supervision model, and they are presented in the recommendations for practice section.

Implications for Counselling Psychology

The capstone research question highlights key components of developmental and CBT supervision models and how these supervision models can be merged together to support new counselling supervisees. In addition to combining these two supervision models, other supervision models were critically analyzed to support the implementation of the SAM CAM supervision model. Ethical considerations will be emphasized in the implications section to understand better supervision processes, governing organizations, best practices in counselling and how these can be utilized in the SAM CAM supervision model.

The Canadian Psychological Association

The Canadian Psychological Association's (CPA, 2017) *Code of Ethics* identified four principles that psychologists are to abide by when practicing in the field, including a) respect for the dignity of persons and peoples, b) responsible caring, c) integrity in relationships, and d) responsibility to society. Of these four principles of the Code of Ethics, the following two resonate with this capstone research project: respect for the dignity of persons and peoples and integrity in relationships.

The principle of respect for the dignity of persons and peoples, psychologists maintain competency through consultation and collaboration with other mental health professionals while

promoting objectivity and being unprejudiced in their practices (CPA, 2017). As such, supervisees are considered a vulnerable population as there is a direct power dynamic between the supervisor and supervisee (CPA, 2017). It is the supervisor's responsibility to implement safeguards that protect the rights of the supervisees as they partake in professional activities and supervision that assist in developing their clinical skills (CPA, 2017). The principle of integrity in relationships identifies the supervisor's overall responsibility for their supervisee's professional development, including competency and building therapeutic rapport with clients (CPA, 2017). This principle acknowledges the importance of supervisor's reflection on their values, culture, and beliefs and how this may impact their supervisees (CPA, 2017). The CPA's *Code of Ethics* is essential to the capstone research project as it highlights psychologists' ethical responsibilities and characteristics of respect and integrity within the supervisory relationship.

The CPA's (2017) *Ethical Guidelines for Supervision in Psychology* utilized the principles in the *Code of Ethics* to explore teaching, administration, practice and administration within the supervisory relationship. The guidelines identified that Principle One requires respect within the supervisory relationship and for others who provide support and consultation during the supervisee's practical experiences (CPA, 2017). The guidelines identified that Principle Two requires self-awareness and self-exploration within the supervisory relationship to understand further how attitudes and beliefs may influence work with clients, prevent undue harm, and provide services in the client's best interests (CPA, 2017). The guidelines for Principle Three require openness, trust, and objectivity within the supervisory relationship to effectively care for clients while referring to the *Code of Ethics* to maintain ethical responsibilities as psychologists (CPA, 2017). Lastly, the guidelines for Principle Four require the exploration of advocacy and contributions to the welfare of society within the supervisory relationship (CPA, 2017).

The CPA's (2017) *Code of Ethics* and *Ethical Guidelines for Supervision* are documents referred to by mental health professionals in the psychology field throughout Canada; however, each province has its own licensing requirements, regulatory organizations, membership associations, and documents supporting ethical standards and practice guidelines in supervision. The CPA documents are highlighted in the capstone research project to bring awareness to the ethical principles that guide psychologists and supervisors in their practice.

The Impact of Counselling Associations

The Canadian Counselling and Psychotherapy Association (CCPA, 2024) is a national organization established in 1965 that supports counsellors and psychotherapists in various mental health professions. The CCPA (2024) recognized the difference between a professional association and a regulatory college, where associations advocate for the practitioner and regulatory colleges for the public's best interest and harm prevention. The CCPA (2024) noted that obtaining college and association memberships is considered best practice. The CCPA (2024) has provided memberships, including educational and professional development courses, networking resources, a code of ethics, standards of practice, and certifications such as Canadian Certified Counsellor and Canadian Clinical Supervisor. The CCPA (2024) has supported regulation processes in multiple provinces through financial and community resource initiatives.

Furthermore, in addition to the CCPA's contributions to Alberta counselling regulations, both the CCPA and The Association of Counselling Therapy of Alberta (ACTA, 2024) support the provincial Government's new direction as of March 2024 to regulate all counsellors practicing in Alberta under the College of Alberta Psychologists (CAP). The ACTA legislation supports the regulation of professions, including counselling therapy, addictions counselling, and child & youth care counselling, which will be added to the Alberta Health Professions Act (HPA)

that supports the public's best interest and uniformity in national standards (ACTA, 2024). The ACTA (2024) *Guiding Principles for Regulation* emphasized that this new direction does not combine psychologists and counselling therapy titles and that these professions are, in fact, distinct from each other; however, they are equal in partnership. The CCPA and ACTA's support of Alberta's government direction supports the capstone research project as it explores collaboration within organizations that present a counselling field and counselling best practices pathway.

CAP – Standards of Practice

The CAP (2023) *Standards of Practice* highlighted supervisor relationships with supervisees. The CAP (2023) standards emphasized that supervisors do not delegate professional or restricted activities to a supervisee who does not display the competence to carry out these tasks. The HPA (2023) defined *restricted activities* for practicing psychologists in Alberta as “[performing] a psychosocial intervention with an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognize reality, or ability to meet the ordinary demands of life” (p. 19). The CAP (2023) standards confirmed that students and trainees not regulated by the CAP are authorized to carry out restricted activities within a training program supervised by a regulated member who has provided consent, mental health services, and maintained professional relationships.

The CAP (2023) standards required that supervisors be accessible, review all documentation, and be satisfied with the supervisee's competency skills to perform professional and restricted activities. Furthermore, the CAP (2023) standards referenced the *Practice Guidelines* for psychologists supervising persons not regulated by the CAP to ensure supervision requirements are met in Alberta. Lastly, the CAP (2023) standards referenced the *Standards for*

Supervision to identify the competency requirements for regulated members, or provisional psychologists, to ensure adequate supervision in Alberta. The CAP (2023) standards of practice are essential to the capstone research project as they provide context into the significance of the supervisory relationship and set the stage for best practices for regulated and non-regulated members.

CAP – Practice Guidelines for Non-Regulated Members

The CAP (2013) *Practice Guideline* for regulated members supervising non-regulated members integrated the CPA's *Code of Ethics* to provide additional information on best practices in supervision. The CAP (2013) practice guidelines confirmed that regulated members must be fully registered as psychologists to provide supervision within their scope of practice. The CAP (2013) practice guidelines highlighted supervisors being available, declaring an alternative supervisor if needed, ensuring professional activities are within the supervisee's competency skills, and the supervisor assuming ethical responsibility for their supervisees' actions when carrying out professional activities. The CAP (2013) practice guidelines identified that supervisors have adequate knowledge of the populations served when providing services, that the supervisee's status is made known, and that client cases may be reviewed within the supervisory relationship. The CAP (2013) practice guidelines noted that clients are advised that they have access to supervisors upon request and that supervisors do not enter into dual relationships with their supervisees.

The CAP (2013) practice guidelines identified that supervisors may provide supervision to supervisees who are a part of other regulated professions (e.g., social work, nursing); however, supervisors need to review these regulations and set the expectations in applications of separate regulatory bodies' legislation, guidelines, and code of ethics. The CAP (2013) practice guidelines

emphasized that supervisors who provide supervision to non-regulated members who are not a part of other regulatory professions review and apply standards of the *CPA Code of Ethics*, *Health Professions Act*, *Psychologists Profession Regulations*, *CAP Bylaws*, *CAP Standards of Practice*, relevant *CAP Practice Guidelines*, and applicable *Jurisprudence* legislations. The capstone research project emphasizes the CAP (2013) practice guidelines, highlighting general supervision standards for non-regulated members such as post-secondary graduate counselling students and other trainees seeking supervision.

CAP – Standards for Supervision of Regulated Members

The CAP (2024) *Standards for Supervision of Registered Provisional Psychologists* identified the requirements for maintaining the competency of regulated members, including supervisors and supervisees. The CAP (2024) standards for supervision noted that supervisors must familiarize themselves with the Psychologists Profession Regulation (PPR), be available for consultation and ensure access to an alternative supervisor if needed. The PPR (2023) provided information on register categories (i.e., general, provisional, and courtesy registers) and practice permit renewal requirements within Alberta.

The PPR (2023) identified the educational, examination, and practical requirements of a general register applicant, including obtaining a post-graduate degree, successfully passing examinations with a focus on theory, research, practice, ethics and jurisprudence legislations, completing 1600 hours under a registered psychologist, and receive approval by the registration committee. The PPR (2023) reiterated that the same qualifications would be completed within five years for provisional register applicants and include supervision by a regulated member on the general register list. The PPR (2023) included similar requirements for psychology educators with the exception of obtaining 1600 hours of supervised practical experience and the courtesy

registers for applicants who are currently practicing in another jurisdiction and are seeking temporary registration in Alberta. The CAP (2024) standards for supervision require regulated members to abide by the PPR requirements and the CAP Bylaws utilized to identify and interpret governance structures, committees, membership, meetings, professional conduct, administration, delegation, code of ethics, publications, and registration requirements. The PPR (2023) and CAP Bylaws are pertinent to the capstone research project as these documents support the consistency of competency requirements for regulated members throughout Alberta.

Furthermore, the CAP (2024) *Standards for Supervision of Registered Provisional Psychologists* emphasized that supervisors review and apply the aforementioned documents when supervising non-regulated members. The CAP (2024) standards for supervision declared that a supervisor must be a member and a registered psychologist currently on the registrar, maintain no disciplinary orders, and have practiced primarily in Alberta for at least five years. The CAP (2024) standards for supervision maintained that the supervisor must obtain approval from the CAP to provide supervision and confirm no conflict of interest with their supervisees. The CAP (2024) standards for supervision shared that regulated supervisees are prohibited from employing their supervisors and cannot provide mental health services without supervision. The CAP (2024) standards for supervision require that supervisors be accessible to their supervisees for consultation and that an approved alternate supervisor may provide supervision for a maximum of 30 days and include an evaluation of the supervisee's competency skills.

The CAP (2024) standards for supervision maintained that a supervisee may have multiple primary supervisors for each professional activity and obtain one supervision hour for every 15 hours of practice. The CAP (2024) standards for supervision highlighted that up to 25% of supervision hours accrue face-to-face at the applicable site and that 75% of supervision must

be counted as individual rather than group supervision with a maximum of six supervisees. The CAP (2024) standards for supervision shared that supervisors can be considered external and must receive consent from the supervisee's site to access applicable documentation and provide on-site supervision. The CAP (2024) standards for supervision emphasize that supervision occurs for one hour per month if the supervisee ceases to practice and is on leave, and supervision may focus on examination preparation. The CAP (2024) standards for supervision identified that if supervision is terminated before the completion of 1600 hours, a new supervision plan must be implemented for the remaining hours.

The CAP (2024) standards for supervision noted that supervision fees are the supervisee's responsibility, and there must be an ongoing method of confidentially obtaining and storing documentation of supervision processes. The CAP (2024) standards for supervision require supervisors to complete mid-term and final reports confirming the supervisee's professional activities, interpersonal and competency skills, any limitations, completion of supervision requirements, and a recommendation for independent practice; final evaluations are provided to the supervisee and the CAP within one month of termination of supervision. The CAP (2024) standards for supervision mentioned ongoing evaluations every six months after the supervisee has completed their 1600 hours to confirm professional activities and competency skills. The CAP (2024) standards for supervision mentioned that the regulatory organization may ask for additional information about any concerns the supervisor raises and may deny or request the supervisee complete additional supervision hours to obtain competency and become a fully registered psychologist. Lastly, the CAP (2024) standards for supervision confirmed that the supervisee must inform clients of their provisional status, review cases with their supervisor, and have written reports reviewed, approved, and signed by their supervisor. The CAP (2024)

standards for supervision are a key component of the capstone research project as they highlight the structure and assessment of supervision requirements that support regulated supervisees in building and maintaining their competency skills.

The CAP Monitor – Best Practices in Supervision

The capstone research project identified *The CAP Monitor* in the literature review as a newsletter endorsed by the CAP regulatory college. The CAP Monitor (2024) issue highlighted the subject of supervision that explored various topics, including Alberta-specific provisional psychologist competency requirements, the value of supervision, foundational skills to becoming a good supervisor, onboarding in clinical supervision, multimodal supervision, and the importance of adequate supervision for public safety. For this capstone research project, the CAP Monitor's onboarding and multimodal supervision topics will be critically analyzed in the following section to identify observational methods and best practices in supervision (CAP, 2024).

The CAP Monitor (2024) issue published information authored by registered psychologist and supervisor Dr. Jeff Chang on clinical onboarding in supervision. Chang shared knowledge of appropriate onboarding procedures, the importance of the supervision process and the supervisory relationship that supports building the supervisees' competencies, which can be referenced as part of evaluative procedures (CAP, 2024). Chang considered differing site policies and procedures regarding supervision; however, offered the following considerations and suggestions as best practices, including transparency as a relational foundation, theoretical orientation, previous coursework, practica and experience, approach to evaluations, personal factors, culture, diversity and intersectional identities, and creating a supervision contract (CAP, 2024). Chang noted the supervisee's vulnerability and encouraged the supervisor to disclose

appropriately to promote transparency within the supervisory relationship (CAP, 2024). Chang identified competency in theoretical orientation(s) as a part of the supervision process that can be further explored through psychoeducation to support supervisors in evaluating supervisees' understanding and implementation of various theoretical approaches (CAP, 2024).

Chang emphasized that the supervisor should explore the supervisee's previous professional and educational experiences; this includes cultural considerations to understand better the supervisee's specific therapeutic modalities and populations of interest and how their skills are transferred or reflected in their work as student therapists (CAP, 2024). Chang stressed the importance of observational methods as part of the evaluative process of supervision to support appropriate feedback and the supervisee's competency skills development (CAP, 2024). Chang highlighted exploring personal factors and cultural diversity to understand the supervisee's potential life stressors, background, worldview, and values to encourage collaboration, appropriate disclosures, and trust within the supervisory relationship (CAP, 2024). Chang's article is important to the capstone research project as it supports best practices in supervision. Chang effectively utilized his position and privilege as a supervisor to offer his knowledge and experience to other practitioners who may or are considering providing supervision in the future.

The CAP Monitor's (2024) issue published information authored by registered psychologist and supervisor Dr. Erica Dunn on multimodal supervision. Dunn highlighted observational methods, such as video/ audio recordings and direct observation, as an essential aspect of the evaluative process; however, Dunn noted them as underutilized by supervisors who typically referred to case conceptualizations and documentation reviews as evaluative measures of supervisees' competencies (CAP, 2024). Dunn emphasized that the *CAP Standards for*

Supervision currently do not identify supervision modality requirements as part of the supervision process (CAP, 2024).

As psychology is a self-regulating profession, Dunn questioned using self-reporting measures rather than observational methods in supervision (CAP, 2024). Dunn shared that self-reporting in supervision restricts supervisor efficacy and the capacity for supervisee autonomy in their practical experiences (CAP, 2024). Dunn noted that self-reporting may not reflect transparency within the supervisory relationship and may impact client care; supervisees' nondisclosure is based on a lack of experience, fear of negative consequences, and below-standard evaluations (CAP, 2024). Dunn highlighted the importance of implementing multiple observational modalities to maintain objectivity, provide opportunities for feedback, and explore client case conceptualizations that ultimately build supervisees' competency skills (CAP, 2024). Dunn's article is essential to the capstone research project, reflecting the necessity and consistency of reliable observational methods typically utilized in CBT supervision.

Summary of the Implications for Counselling Psychology

The implications for the counselling psychology section explored various associations and regulatory colleges that support supervisors and supervisees in maintaining competency and best practices in the field. The CPA is highlighted as a national association that has developed *Ethical Guidelines for Supervision* that incorporate the main principles of the *Code of Ethics* used by mental health practitioners throughout the country (CPA, 2017). The CCPA and ACTA are key associations that provide certifications and resources that support regulation processes throughout provinces, specifically supporting Alberta's new direction of regulatory processes for all counselling professions with the CAP. The *CAP Standards of Practice* and *Standards of Supervision* were reviewed for non-regulated and regulated members, confirming Alberta's

competency and supervision requirements. The CAP Monitor emphasized supervision onboarding processes and a multimodal approach that prompts cultural considerations, observational methods, and transparency within the supervisory relationship (CAP, 2024). The reviewed literature is fundamental to the capstone research project as it provides structure regarding the ethical principles and best practices of the SAM CAM supervision model and underlines the value of collaboration within organizations to maintain consistency in implementing supervision processes that support supervisees' growth and development of their knowledge and practical skills. It is important for current and future counselling professionals to be aware of their responsibilities as both a supervisor and supervisee.

Fundamental Next Steps for Research

The capstone research question highlights *how developmental and CBT supervision models can be used together to support new counselling supervisees*. Furthermore, the capstone research project introduces the SAM CAM supervision model and incorporates various supervision models that support supervisees' development, reflection, and competency skills. The capstone research project will reflect on the literature review to identify the gaps in the research and common themes that support areas of focus in future research applicable to supervision and the counselling field.

Shorrock's (2011) research explored Egan's *Skilled Helper Model* and noted that research focuses on standardized treatment interventions rather than rapport building, client resistance, countertransference, and goal setting within therapeutic relationships. The limitations noted by Shorrock (2011) may be explored further within the supervisory relationship to promote structure, parameters, safety, and transparency throughout the supervisee's developmental stages of their practical experiences. Koruk and Kara's (2019) research emphasized the IDM as

simplistic in nature and generalized regarding supervisee progression over time due to a lack of attention to therapeutic approaches, diverse populations accessing mental health services, and supervision evaluative processes. Koruk and Kara (2019) identified that supervisors continue to further their knowledge and practical skills through training to offer efficacious supervision. Similarly, Kim and Mumbauer-Pisano's (2023) research on the IDM inquired how to apply interventions within the IDM. Kim and Mumbauer-Pisano (2023) supported therapeutic approaches by implementing narrative therapy within IDM supervision that supports cultural awareness and reflective practice; however, they identified supervisee anxiety regarding evaluations.

Eryilmaz and Bektaş-Aydin's (2022) research on the DCSM supported using evaluative measures in supervision through self-assessment tools and peer feedback. Eryilmaz and Bektaş-Aydin (2022) noted that future research may focus on the reliability and standardization of self-assessment tools used in supervision evaluative processes. Eryilmaz and Bektaş-Aydin (2022) emphasized that future research may consider a longitudinal research design that focuses on supervision processes regarding adequate individual and group supervision time, appropriate workload expectations, and diversity of participants and how interpersonal processes within the supervisory relationship are paralleled within the therapeutic relationship.

Novoa-Gomez et al.'s (2019) research explored the use of FAP as an interpersonal approach that analyzed behaviour during recorded supervision sessions. Novoa-Gomez et al. (2019) utilized the *supervisor-supervisee interaction assessment manual* to analyze behaviour response classes. Novoa-Gomez et al. (2019) noted a lack of discussion on cultural diversity and interpersonal skills when put into practice due to the concentration on the supervisee's intervention skills, resulting in challenges in providing supervisee autonomy. Similarly, Xu et

al.'s (2021) research explored using the CEM as an interpersonal approach to supervision. Xu et al. (2021) asked supervisees to complete the *Relational Behavioural Scale* to gauge the relational content of supervision and how various therapeutic approaches implemented by supervisors impacted their interpersonal approach to supervision. Xu et al. (2021) suggested that future research consider the supervisor's thought processes before and during supervision in addition to behaviour responses and consider how interpersonal approaches may be paralleled within the therapeutic relationship. The CPA's (2017) *Ethical Guidelines for Supervision* highlighted implementing parameters within the supervisory relationship to clarify expectations of supervision processes, requirements, evaluative measures, and potential biases and interpersonal differences that may influence the supervisory relationship.

In addition to developmental and interpersonal approaches to supervision, Prasko et al.'s (2022) research explored countertransference within CBT supervision that is cultivated through an open and transparent supervisory relationship and paralleled in the therapeutic relationship. Although countertransference is highlighted by Prasko et al. (2022) in CBT supervision, countertransference is a form of reflective supervision. Greenberger's (2020) research emphasized that reflection or reflective practice is commonly referenced in education rather than counselling. Barron et al.'s (2021) research explored reflective supervision amongst educational professionals; however, they noted the need for cultural responsiveness as part of reflective practice, as Barron et al. (2021) did not identify participants' ethnicity within the study. Olson's (2023) research highlighted the lack of specialized training for post-secondary faculty members in culturally responsive ideologies. The CPA's (2017) *Code of Ethics* highlighted the importance of practitioners reflecting on their beliefs, attitudes, and cultural identities to remain objective; however, it does not define reflection or countertransference, making it challenging to implement

these aspects and culturally responsive ideologies in supervision. Valmas et al.'s research noted a lack of resources utilizing an intersectional lens in supervision that promotes the exploration of cultural identities, including gender roles and power differentials within supervision.

Pretorius' (2006) research noted the need for goal development and objective measures associated with CBT approaches. Bearman et al. (2020) suggested supervision training in a specialized area, such as CBT, in graduate programs to promote psychoeducation, observational methods, and experiential learning. Bearman et al. (2020) suggested that future studies include longitudinal research to implement objective competency measures instead of self-assessment tools. Gonsalvez et al.'s (2016) research highlighted the importance of evidence-based observational methods and professional feedback in objectively evaluating the supervisee's competency. The CAP Monitor (2024) emphasized cultivating multicultural awareness, openness, and transparency within the supervisory relationship and a multimodal supervision approach involving evidence-based observational methods that support objectivity in supervisee evaluations.

The capstone research project identifies themes, including focusing on goal development, using specific therapeutic approaches, evidence-based observational methods, and standardized evaluation tools in supervision. Additionally, the capstone research project identifies the need for a definition of reflective practice, or countertransference, specific to counselling and includes diverse participants and professional training that supports an intersectional lens in supervision. The capstone research project also identifies themes of exploring interpersonal skills and reflection in supervision practice, including cultural diversity and creating a parallel process in the therapeutic relationship. The CPA (2024) identified that each province has its own legislation and regulation requirements to obtain registration as a psychologist. The capstone research

project highlights the importance of collaboration between membership organizations and regulatory colleges to promote consistency and objectivity in standards of practice, code of ethics, standards of supervision, and applicable tools and resources that support mental health professionals in building and maintaining their competency skills. The SAM CAM supervision model was created and could be tested in the future as evidence-based practice. The hope is that the SAM CAM supervision model can be refined through research and become a framework used within the counselling field.

Recommendations for Practice

The capstone research question explores *how developmental and CBT supervision models can be used together to support new counselling supervisees*. Additionally, the capstone research project reviewed various supervision models which provided the foundation for the creation of a new, hypothetical model, known as the SAM CAM supervision model. The SAM CAM supervision model will emphasize the importance of cultural and ethical considerations in counselling supervision. The capstone research project will utilize various components from the literature review in implementing the SAM CAM supervision model, which is specifically highlighted for use with graduate students and counselling supervisees, to promote the development of their competency skills and best supervision practices in counselling psychology. A visual depiction of the SAM CAM supervision model is available for reference within Appendix A.

SAM CAM Supervision Model – Developmental Considerations

The developmental supervision models critically analyzed in the literature review highlighted the importance of building supervisees' competency skills and autonomy throughout their practical experiences. The SAM CAM supervision model includes elements of Egan's

Skilled Helper Model, which reflects the need for goal development within the therapeutic relationship (Shorrock, 2011). However, the SAM CAM supervision model also emphasizes goal development within the supervisory relationship. Shorrock's (2011) research identified three stages that are used in the SAM CAM supervision model regarding supervisee goal development, including a) the current picture, b) the preferred picture, and c) the way forward. In the SAM CAM supervision model, the supervisor could support the supervisee in gauging where they are currently at with their counselling skills and where they would like to be and collaborate on strategies that support the supervisee in building their skills. For example, perhaps the supervisee's goals focus on developing their counselling micro-skills, risk assessment skills, building therapeutic rapport, a specific therapeutic approach, documentation, or case conceptualization.

Koruk and Kara's (2019) systematic review explored utilizing the IDM in supervision. Elements of the four stages of the IDM are applied within the SAM CAM supervision model to support the supervisee's autonomy over time. In theory, during the first stage, the supervisor has a presence in most of the supervisee's professional activities to gauge the current competence level, areas of growth, and goals (Koruk & Kara, 2019). The SAM CAM supervision model could review the supervision process, responsibilities, and evaluative procedures to clarify expectations, including goal development, consent and confidentiality, and the necessity of observational methods that support evaluation processes. The SAM CAM supervision model incorporates Koruk and Kara's (2019) need for supervisors to encourage supervisee flexibility within the second stage. The SAM CAM supervision model focuses on transparency and collaboration within the supervisory relationship, supporting case conceptualization and

reflective practices to identify potential biases and alternative perspectives (Koruk & Kara, 2019).

Koruk and Kara (2019) explored the concept of increasing autonomy within the third developmental stage. The SAM CAM supervision model also supports increased autonomy by highlighting the supervisee's strengths during the debriefing of observational methods, including direct observations and video recordings, and supports building their identity as a counsellor (Koruk & Kara, 2019). The final stage, as recognized by Koruk and Kara (2019), combines intervention, evaluative and conceptualization skills. The final stage of the SAM CAM supervision model includes identifying the supervisee's ability to problem-solve and provide and accept professional feedback from their supervisor and colleagues. Kim and Mumbauer-Pisano's (2023) study highlighted using a specific approach within the IDM and supervision. The SAM CAM supervision model encourages the supervisee's exploration of a specific therapeutic approach of interest within the supervisory and therapeutic relationships and include evaluative measures to assess the application of interventions and gauge skill development.

Eryilmaz & Bektaş-Aydin's (2022) research featured the evaluative aspects of the *DCSM* to assess the progression of the supervisee's competency skills. In the SAM CAM supervision model, the supervisee's goals are confirmed in writing and reviewed monthly during supervision, during which strategies are discussed, practiced through role-play, and debriefed through observational methods, such as direct observation or video recordings and reflective practices. The SAM CAM supervision model utilizes self-reporting measures as part of the evaluative process for supervisees and supervisors to rate goal development on a Likert scale (i.e., below standard, approaching standard, at standard, and above standard). The CAP Monitor's (2024) reiteration of supervision standards and requirements is essential to maintaining competency,

protecting the public, and best practices. For example, the SAM CAM supervision model may be used for post-secondary graduate counselling students where the standards to maintain competency and best practice require individual supervision for one hour per five practice hours to ensure supervisee competency and effective client care.

Furthermore, the SAM CAM supervision model recognizes that group supervision plays an essential role within the supervision process and supports reviewing observational methods, such as video recordings, and using role-play, reflective practices, and psychoeducation that promote the practice of providing and receiving peer feedback. The SAM CAM supervision model identifies that group supervision should hold up to 50% of total supervision hours and a maximum of five supervisees to ensure flexibility in hourly group supervision sessions. In summary, the SAM CAM supervision model utilizes the developmental supervision models that support the supervisee's goal progression, competency skills, and autonomy while implementing evaluative measures, including observational methods, psychoeducation, self-reporting tools, documentation review, and reflective practices. Although the SAM CAM supervision model is a hypothetical framework, it does possess the elements of a sound supervisory framework.

SAM CAM Supervision Model – Reflective Considerations

The SAM CAM supervision model includes elements from the supplementary reflective supervision model. Although Olson's (2023) research emphasized that reflective supervision's origin is in the educational field, the SAM CAM supervision model utilizes elements of reflection to support the development of counselling supervisees' competency skills. The SAM CAM supervision model considers the CPA's (2017) *Code of Ethics* when defining *reflective practice* as cultivating awareness about how a counsellor's beliefs, culture, attitudes, and values influence their worldview and professional practice to maintain an unbiased and objective stance

when carrying out their ethical responsibilities. Greenberger's (2020) research highlighted Dewey's five phases of reflective thought, including *suggestion, intellectualization, hypothesis, reasoning, and testing the hypothesis by action*. This prompts contemplation through scholarly activities and outcomes. This is reflected in the next paragraph of the SAM CAM model.

Similarly, the SAM CAM supervision model references the CPA's (2017) *10-Step Decision-Making Model* to support supervisees working through potential ethical dilemmas within supervision while utilizing the CPA's ethical guiding principles when evaluating the potential courses of action, consequences to all involved, and assuming ethical responsibility for actions taken or not taken. In addition to exploring reflective thought toward potential ethical dilemmas in counselling, the SAM CAM supervision model supports Barron et al.'s (2021) research of promoting supervisees' advocacy for themselves and their clients. Advocacy could look like exploring the cultural identity and needs of the supervisees and their clients to provide meaningful and appropriate supervision and client care.

SAM CAM Supervision Model – FAP & CEM Considerations

Novoa-Gomez et al.'s (2019) study emphasized the use of FAP that explored behaviour response classes, including intervention, assessment and emotional processes within the supervisory relationship. In addition to evaluating the supervisee's assessment and intervention skills through evidence-based observational methods, the SAM CAM supervision model considers the FAP five response classes noted in Novoa-Gomez et al.'s (2019) study that assesses the supervisee's interpersonal skills, including establishing needs, professional feedback, conflict resolution, appropriate self-disclosure, and expression. Xu et al.'s (2021) research explored the CEM as an interpersonal approach to supervision and utilized the RBS as a self-report measure of five identified relational behaviours. The SAM CAM supervision model considers Xu et al.'s

(2021) use of the CEM, which emphasizes reflection and developing interpersonal skills within the supervisory relationship and supports a parallel process within the therapeutic relationship.

SAM CAM Supervision Model – CBT & Cultural Considerations

The SAM CAM supervision model supports reflection by exploring potential countertransference and transference within the supervisory relationship. The SAM CAM supervision model utilizes CBT supervision to foster awareness of countertransference and culturally responsive behaviours to understand better how the supervisor's and supervisee's cultural identities impact collaboration, therapeutic approaches, interventions, and, ultimately, the therapeutic alliance (Prasko et al., 2022). The SAM CAM supervision model utilizes the APA's (2022) CFI as an assessment tool within the supervisory and therapeutic relationships. The SAM CAM supervision model identifies and modifies questions at the core CFI as noted by the APA (2022) which supervisors could implement within the first developmental stage of the supervision process, including:

- “What are the most important aspects of your background or identity?”
- “Are there any aspects of your background or identity that are causing concerns or difficulties for you [in supervision and practical experience]?”
- “Are there any kinds of stresses that make [supervision or your practical experience challenging]?”
- “Are there any kinds of support that make [supervision or your practical experience] better, such as support from family, friends, or others?”
- “Sometimes people have various ways of dealing with [challenges in supervision and their practical experiences]. What have you done on your own to cope with [these challenges]?”

The SAM CAM supervision model identifies the aforementioned CFI questions as useful as supervisees reflect on how various aspects of their cultural identity (e.g., communities, languages, family, race, ethnicity, gender, sexual orientation, religion) may impact their practical experience and how the supervisor can support the supervisee to reach their professional goals (APA, 2022). Additionally, the supervisor supports the supervisee in addressing potential stressors (e.g., SES, finances, employment) and accessible support systems (e.g., family, friends, and community groups) during their practical experiences (APA, 2022). Lastly, the supervisee gains awareness about appropriate and effective self-care and coping strategies during their practical experiences (APA, 2022).

The SAM CAM supervision model promotes self-care and asks supervisors to check in regarding self-care practices, as it is their responsibility to ensure the supervisee maintains competency to provide mental health services and to prevent undue harm to clients. The SAM CAM supervision model asks supervisors to reflect on these questions and how their cultural identity may impact their capacity to provide appropriate supervision and use of therapeutic approaches. As highlighted by Prasko et al. (2022), the SAM CAM supervision model asks supervisors to support without judgment the identification of countertransference by creating a safe space within the supervisory relationship that supports reflection, offering appropriate self-disclosure, cognitive restructuring through Socratic or guided questioning, and the exploration of differing perspectives.

Furthermore, in addition to exploring countertransference, the SAM CAM supervision model asks supervisors to support supervisees in gaining knowledge and practical skills of the CBT approach by investigating thoughts, feelings and behaviours within the supervisory and therapeutic relationships. Bearman et al.'s (2020) research suggested that CBT supervision

training be provided in graduate programs to further the supervisee's knowledge and understanding of the elements and applications of the CBT approach. The SAM CAM supervision model highlights the importance of psychoeducation within the supervision process. For example, the SAM CAM supervision model utilizes the CBT concept of core beliefs that can be explored within supervision to build client case conceptualization and role-play cognitive restructuring that facilitates a behaviour change. The SAM CAM supervision model may also promote evidence-based observational methods to assess the supervisee's competency skills.

Gonsalvez et al.'s (2016) research emphasized the essential component of CBT supervision, including observational methods and provided techniques used within session recordings to promote effective feedback. The SAM CAM supervision model could utilize observation methods such as role-plays, direction observation and video recordings. The SAM CAM supervision model asks supervisors to observe a session for each supervisee every month. The SAM CAM supervision model confirms that video recordings shared within supervision require the client's written consent and can be included in the initial consent form for training sites that identify the supervisee as a student therapist per CAP (2013; 2024) supervision standards for non-regulated and regulated members. The SAM CAM supervision model requires supervisees to record one session per five practice hours to be debriefed biweekly within individual or group supervision to ensure the evidence-based review of the supervisee's competency skills and the practice of providing and receiving professional feedback. The SAM CAM supervision model asks that supervisees choose 15-20 minutes of a video recording to share in supervision and that supervisors and peers inquire what type of feedback the supervisee is looking for regarding video recordings so as not to overwhelm and narrow the focus when providing feedback. The SAM CAM supervision model supports Pretorius' (2006) research that

emphasized the need for structure, openness, collaboration, and objective measures within CBT supervision that support goal development and a person-centred approach.

The SAM CAM supervision model considers Valmas et al.'s (2020) research a niche; however, essential topic that explored the potential for gender roles and power dynamics within the supervisory relationship and that the CBM may be used to mitigate these concerns. The SAM CAM supervision model promotes using Fouad et al.'s (2009) CBM as an assessment tool to evaluate supervisees' foundational and functional competency skills. The SAM CAM supervision model finds the core competencies of the CBM useful as it highlights the supervisees' competency in aspects, including *professionalism, reflective practice/self-assessment/self-care, scientific knowledge and methods, relationships, individual and cultural diversity, ethical legal standards and policy, interdisciplinary systems, assessment, intervention, consultation, research/ evaluation, supervision, teaching, management/ administration, and advocacy* (Fouad et al., 2009). Lastly, the SAM CAM supervision model suggests using the CBM throughout the developmental stages to assess the supervisee's readiness for practicum, internship, and independent practice (Fouad et al., 2009).

Summary of Recommendations for Practice

The SAM CAM hypothetical supervision model emphasizes the creative usefulness of combining various supervision models to support supervisees' competency skills and best practices, including developmental, CBT, reflective, and interpersonal approaches to supervision. A visual representation of the SAM CAM supervision model is noted in Appendix A. The SAM CAM supervision model highlights the developmental and CBT supervision models, as these support structure, evidence-based observational methods, psychoeducation, reflection, supervisee autonomy, and goal setting. The SAM CAM supervision model is rooted in ethics and considers

the CAP's (2024) best practices, such as onboarding procedures, cultural awareness, and a multimodal approach to supervision that supports the development of supervisees' competency skills.

Reflexive Statement

The capstone research project has provided me with further knowledge about various supervision models concerning the counselling field. I learned that the developmental models come from early research and reflect stages of supervision that support goal development and increase the supervisee's autonomy. I appreciate the structure that CBT supervision provides in relation to goal development, countertransference, psychoeducation, and observational methods while utilizing CBT approaches. I learned the importance of evidence-based observational methods and self-assessment tools as evaluative measures within supervision. Fouad et al.'s (2009) research emphasized the use of the CBM to identify the core competency requirements and proved valuable in supervision to support the supervisee's growth and development. I appreciate the use of the APA's (2022) CFI that supports exploring the client's culture to further the practitioner's case conceptualization of the client's presenting problems. However, I believe the counselling field needs more cultural assessment tools like the CFI to implement in supervision to highlight reflective practices, the importance of cultural awareness, and parallel processes within therapeutic relationships. I have learned that interpersonal and reflective approaches are essential to supervision; however, they are overlooked in the research related to counselling.

When I started the capstone research project, I thought a supervisor had to stick with one supervision model; however, I realized that multiple supervision models could be used together to further the supervisee's knowledge and practical skills. Therefore, I implemented various

aspects from the identified literature review into the SAM CAM supervision model, emphasizing developmental and CBT supervision models that support supervisee autonomy and the expansion of CBT skills. The SAM CAM supervision model highlights the value of supervisee goal development, collaboration, evidence-based observational methods, an intersectional lens that supports reflective practice and professional identity development, and a review of the parameters of the supervisory relationship to identify interpersonal approaches, expectations, parallel processes, and evaluative measures of supervision.

As each province in Canada abides by its own standards of practice and regulatory requirements, standardized self-assessment, cultural assessment, and objective assessment tools are lacking to promote best practices in counselling supervision. As I completed the literature review, I noticed a collaboration between regulatory bodies, membership organizations, and provincial legislation that supports mental health professionals in building their professional knowledge and skills while keeping them updated on any changes to legislation and competency requirements. I appreciate ACTA's (2024) support in creating legislation that regulates all counsellors in Alberta, as this creates consistency of competency requirements and expectations of best practices in the field.

The CPA's (2017) *Code of Ethics* supported my ethical responsibilities and mitigated my biases using the guiding principles. As a counsellor, I have a responsibility to respect the privacy and opinions of others (i.e., supervisors, colleagues, and clients) while protecting vulnerable populations. I am responsible for informing clients of the risks and benefits of therapy and providing appropriate referrals if what they seek is outside of my scope of practice. As a counsellor, I am responsible for continuing to learn and increase my knowledge, skills, and competence to support clients in reaching their therapeutic goals. Additionally, I want to

minimize harm and potential power dynamics between myself as a counsellor, my clients, and in the future as a clinical supervisor by encouraging collaboration and transparency. Reflection, consultation, and an in-depth understanding of my ethical responsibilities and standards of practice are key to minimizing harm to others and maintaining objectivity when providing counselling services. As a counsellor and potential supervisor in the future, I have a responsibility to give back to society, and I want to contribute by teaching and informing others. The capstone research project has supported my learning of various supervision models and the implementation of the CAP (2023) *Standards of Practice* and the CAP (2017) *Practice Guideline* of supervision for non-regulated members such as myself as a graduate counselling supervisee. I hope to see future research that highlights supervisees' supervision experiences as post-secondary students entering the counselling field.

Conclusion

The purpose of the capstone research project was to answer the following research question: *How can developmental and CBT supervision models be used together to support new counselling supervisees?* The capstone research project highlights the unique elements of developmental supervision, including goal development and stages of development, intending to increase supervisees' autonomy in their practical experiences. The capstone research project also emphasizes the distinctive features of CBT supervision, including the exploration of countertransference, structure, psychoeducation of CBT approaches, and evidence-based observational methods that support evaluative processes. The capstone research project notes that the elements of developmental and CBT supervision models, each with their unique contributions, complement each other and, when used together within the supervisory relationship, support the growth of supervisees' competency skills throughout their practical

experiences. Furthermore, the capstone research project explored various supervision models to support the recommendation of the SAM CAM supervision model in future research and practice in the counselling field.

In addition to emphasizing developmental and CBT supervision models, the SAM CAM supervision model includes reflective and interpersonal approaches while highlighting cultural and ethical considerations within supervision and the counselling field. The capstone research project noted a common theme in the literature review of the application of reflection in supervision and the counselling field; however, it was overlooked when put into practice due to the focus on the supervisee's assessment and intervention skills. Additionally, a theme of obtaining cultural competence within the supervisory and therapeutic relationships was apparent; however, limited cultural assessment tools are utilized in supervision. Therefore, the SAM CAM supervision model encourages an intersectional lens and refers to the APA's (2022) CFI and modified questions to be utilized within the supervisory relationship to support cultural awareness, identities, transparency, and a parallel process within the therapeutic relationships.

The capstone research project noted an emphasis in the literature review on developing interpersonal skills within the supervisory and therapeutic relationships. The SAM CAM supervision model explores interpersonal approaches through evidence-based observational methods, such as video recordings and providing and receiving feedback in individual and group supervision. Furthermore, the SAM CAM supervision model utilizes Fouad et al.'s (2009) CBM as an evaluative measure that supports assessing the supervisee's core competency skills, including interpersonal aspects, such as *professionalism, reflective practice, relationships, and individual and cultural diversity*. The capstone research project underlines the crucial role of

ethics and cultural considerations in the counselling field, urging their prioritization in practice and research.

Fouad et al. (2009) CBM also noted a supervisee's core competency of *ethical legal standards and policy, and interdisciplinary systems*. The capstone research project is heavily rooted in ethics and emphasizes the importance of Canada's national *Code of Ethics* and *Ethical Guidelines for Supervision* (CPA, 2017). The capstone research project values the memberships, networking, and resources that mental health associations offer to practitioners. Furthermore, the capstone research project highlights the collaboration between mental health associations that are working alongside provincial regulatory colleges to promote consistency of regulation requirements for counsellors that support legislation licensing requirements, supervision standards, practitioner competency and public safety. The capstone research project underscores the critical role of ethical and legal standards in counselling, stressing their significance for the safety and well-being of practitioners and clients. The capstone research project highlights the key components of various supervision models within the literature review to emphasize the need for implementation of multiple aspects that are evidence-based and reflective that support building supervisees' professional identities and a supervisory relationship that supports the development of knowledge, competence and practical skills that are paralleled within therapeutic relationships.

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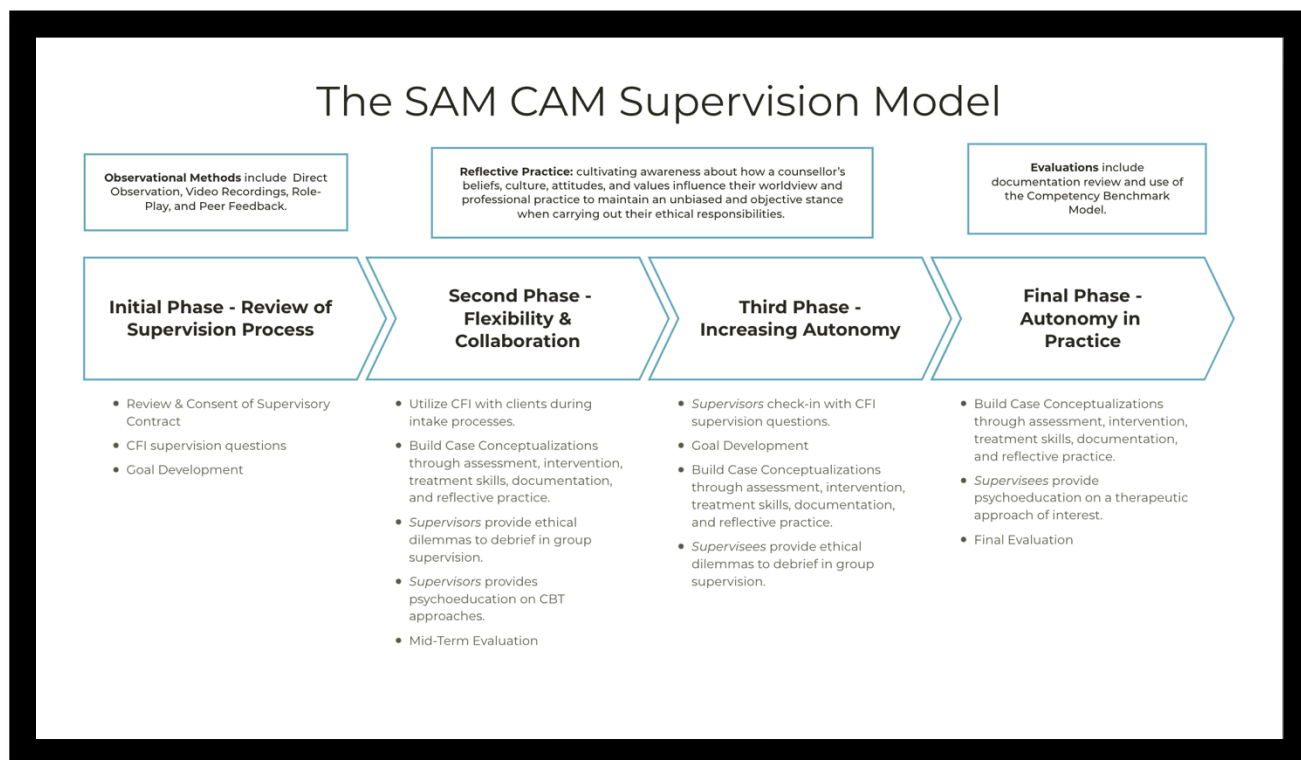
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Appendix A

The SAM CAM Supervision Model



Appendix B

Methodology Chart

Authors	Year	Title	Sample Size	Selection/recruitment	Data collection process	Data analysis process	Qual/quant/mixed/case study	Notes on findings
Barron, C. C., Dayton, C. J., & Goletz, J. L.	2022	From the voices of supervisees: What is reflective supervision and how does it support their work? (part I). <i>Infant Mental Health Journal</i> , 43(2), 207-225. https://doi.org/10.1002/imhj.21972	25	Infant and early childhood mental health professionals	Purposeful sampling of focus groups and semi-structured individual interviews.	Grounded Theory Analysis to identify themes when exploring supervisees' experiences in reflective supervision.	Qualitative	Supervisees identified components of reflective supervision, including safety, trust, consistency, predictability, active listening, and being present that supported their professional development.
Bearman, S. K., Bailin, A., & Sale, R.	2020	Graduate school training in CBT supervision to develop knowledge and competencies. <i>The Clinical Supervisor</i> , 39(1), 66-84. https://doi.org/10.1080/07325223.2019.1663459	23	Clinical psychology graduate trainees	Self-assessment of supervision experiences and competency before and after an eight-hour formal CBT supervision workshop.	Process Questionnaire Supervision Knowledge Questionnaire Supervisory Competence Questionnaire	Qualitative	Implementation of CBT supervision in graduate training was shown to improve participants' declarative knowledge and skills. Participants were provided with a CBT supervision workshop with identified content, experiential learning exercises that produced and increase in learning outcomes.
Eryılmaz, A., & Bektaş-Aydın, C.	2022	One developmental model, two developmental stages: Supervisees' experiences of the developmental comprehensive supervision model. <i>International Journal for the Advancement of Counselling</i> , 44(4), 694-719. https://doi.org/10.1007/s10447-022-09486-w	18	Undergraduate & graduate counselling students	Recordings and transcripts of supervision meetings using the developmental comprehensive supervision model. The incorporation of focus group interviews and peer feedback, including a report presented to the supervisor.	Transcendental phenomenological research method, including thematic analysis method.	Qualitative	Two themes were identified for undergraduate students and four themes were identified for graduate students that not only focused on supervision process and outcome, but included supervisor characteristics and disadvantages of the study.
Koruk, S., & Kara, A.	2019	Supervision models in psychological counseling. <i>Eskisehir Osmangazi Üniversitesi Sosyal Bilimler Dergisi</i> , 20, 51-63. https://doi.org/10.17494/ogusbd.548256	Systematic Review	Integrative Developmental Model of Supervision	A review of the Integrative Developmental Model (IDM).	A review of the IDM's functionality and philosophies within clinical supervision.	Systematic Review	The IDM is categorized into four stages, and the supervisee is evaluated based on their insight on client's perspectives, motivation, and autonomy. Furthermore, there are eight professional functions that the supervisee must obtain during the supervision process.

Prasko, J., Ociskova, M., Vanek, J., Burkauskas, J., Slepecky, M., Bite, I., Krone, I., Sollar, T., & Juskiene, A.	2022	Managing transference and countertransference in cognitive behavioral supervision: Theoretical framework and clinical application. <i>Psychology Research and Behavior Management</i> , 15, 2129-2155. https://doi.org/10.2147/PRBM.S369294	Systematic Review	Countertansference and transference within CBT supervision model	A review of countertransference and transference.	A review of the parallel processes between the supervisory and therapeutic relationships.	Systematic Review	The importance of reflective practices associated with transference and countertransference in clinical supervision to support the supervisee in understanding their clients and building the therapeutic alliance.
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