Developing Capacity in Clinical Supervision: A Call to Action

by Jeff Chang

In this article, I assert that clinical supervision is a distinct professional competency. I present what is known about how psychologists prepare to be clinical supervisors, and share some anecdotal observations about the state of supervision among Alberta psychologists. Finally, I offer some suggestions for the profession of psychology in Alberta, and individual psychologists, to build capacity for clinical supervision.

**A distinct professional competency**

There is a consensus that clinical supervision is a distinct professional competency within psychology (Bernard & Goodyear, 2019; Falender et al., 2004; Falender & Shafranske, 2016). It is a required competency for graduates of Canadian Psychological Association-accredited programs (CPA, 2011). The Canadian Counselling and Psychotherapy Association (CCPA) characterizes clinical supervision as a specialized practice “evolving from emerging to established ...” (italics in original) (CCPA, 2020a, para 2).

Our College (CAP, 2010, p. 1) defines competence as “knowledge, skills, judgment, and diligence” (emphases in original). How do we acquire knowledge in clinical supervision? In psychology and related professions, there is continuing education (e.g., American Association for Marriage and Family Therapy [AAMFT], 2020; CCPA, 2020b; University of Calgary, 2020). Hadjistavropoulos et al.’s (2010), survey of Directors of Clinical Training (DCTs) of CPA-accredited clinical and counselling psychology programs, found that 13 of the 20 respondents reported covering clinical supervision in coursework, either in a full course or as a portion of one. Ten programs required a course. In the school psychology arena, 20 to 30% of two US samples had had education in clinical supervision (Cochrane et al. 2010; Flanagan & Grehan, 2011). Crook-Lyon et al. (2008) found that only 39% of predoctoral interns in clinical and counselling psychology in American Psychological Association-accredited sites had had a clinical supervision graduate course, but 72% had provided clinical supervision. Based on the small number of studies, it appears few supervisors have received education in clinical supervision.

CAP (2010, pp. 1–2) defines the second element...
of competence, skill, as "... the ability to effectively apply knowledge in actual practice ..." It is generally accepted that supervised field experience such as practica and internships are necessary to acquire the required skills for the practice of psychology." However, supervised supervision practice ("supervision of supervision" [SOS]) is rare. CCPA awards a supervisory credential, Canadian Certified Counsellor-Supervisor, without requiring SOS. Similarly, 15 US jurisdictions require those seeking to be a Licensed Professional Counselor to be supervised by a Licensed Professional Counselor Supervisor (LPC-S). None of these states requires SOS to earn the LPC-S credential (Center for Credentialing and Education, 2020).

Where do novice supervisors obtain SOS? Or do they? Hadjistavropoulos et al. (2010) found that 13 of the 20 programs represented by their DCTs provided opportunities for students to receive SOS, but only five required SOS. Many expressed the desire to improve the supervision course content in their programs and increase opportunities for SOS. Interestingly, using the same sample as in their earlier study, Crook-Lyon et al. (2011) found that interns in university counselling centres (mostly from counselling psychology programs) were more likely to receive SOS opportunities than interns in hospital, clinic, Veterans’ Administration, correctional or K-12 school sites (mostly from clinical psychology programs). In addition to a graduate level course (either in a doctoral program or as continuing education), AAMFT-Approved Supervisors must complete 36 hours of SOS.

It appears that a majority of novice supervisors have neither education in clinical supervision nor SOS. If a colleague started a new practice area such as trauma counselling, psychoeducational assessment or couples therapy with neither education nor supervision, I believe most of us would ask them, ever so kindly, whether this was such a good idea. I suggest that this just as relevant to the practice of clinical supervision, given that clinical supervision is a service in which psychologists in training universally participate. It is also a professional activity that most of us perform at one time or another. Forty to 50% of psychologists across branches of psychology (Norcross & Karpia, 2012; Norcross & Rogan, 2013; Wysocki et al., 2017), including one Canadian sample (Goodyear et al., 2016), supervise trainees at any given time, and 75 to 80% of us do it at some time in our careers. Moreover, the effects of poor supervision ripple on for years. As Mann and Merced (2018) note, "... insufficiently trained supervisors provide suboptimal supervision to trainees, who then replicate that with which they are familiar.”

Supply and demand, quality and quantity

New graduates often tell me of their difficulty in finding a supervisor for their provisional hours. Others have told me of harsh, dismissive, inattentive, unstructured and even abusive and exploitative supervisors. Provisionals have raised concerns to CAP about compensation, transparency in billings and disagreements related to performance/contractual obligations, sometimes leading to a breakdown of the supervisory relationship (Dr. R. Spelliscy, personal communication, July 7, 2020). This seems consistent with research documenting poor or even harmful supervision (Grey et al., 2001; McNamara et al., 2017).

I know many excellent senior psychologists, mostly private practitioners, who don’t supervise Provisionals, so I decided to ask, “Why not?” Most accept the idea that offering supervision is a way to give back to the profession. Many cite their gratitude and appreciation for the wonderful supervisors they’ve had in the past. Those who have been supervisors cite the satisfaction, and even joy they derive from seeing their supervisees develop and grow. And they are all conscientious about their competence. They hesitate to supervise Provisionals until they have at least had introductory training. On the other hand, as busy professionals, they find it hard to spend the money and time in private practice for, at best, a break-even proposition financially. Some express reluctance to assume the risk for the actions of a novice practitioner.

Those who work in the public sector suggest their employers do not make it easy for them to provide supervision. Bare-bones funding promotes an attitude of scarcity in which supervision is seen as a drain on resources; the employer may not permit the employee to supervise students or Provisionals unless they do it on top of their regular duties. Supervision might
fall victim to cutbacks if the employer sees it as an unnecessary expenditure of resources.

**Capacity-building: For the individual and the profession**

How might we support individual psychologists and the profession as whole to develop capacity to provide _high quality clinical supervision to each and every Registered Provisional Psychologist_? First, because most of the research I’ve cited is not Alberta-based, and because my observations are anecdotal, a need exists for research on the state of supervision among Alberta psychologists: the preparation of Registered Psychologists to supervise, their effectiveness and the experience of Provisionals. A well-constructed survey of the profession will go a long way toward documenting strengths and problems, and assisting the profession to plan to optimize the quality of supervision for every Provisional.

I applaud the work done by the University of Alberta and the University of Calgary, both in collaboration with the Psychologists’ Association of Alberta (PAA) to deliver continuing education in supervision. I think we need more. The University of Alberta offerings have been place-based, and the University of Calgary offering, while on-line, is time-specific each spring, dependent on registrations.1 Neither reach enough people. Webinars—“bite-sized”, frequent, and on-line—may increase the capacity of busy and widely dispersed psychologists to learn about supervision. Cost should be kept as low as possible.

PAA is doing a great service maintaining a list of potential supervisors for Provisionals. The list asks available supervisors to describe their education and training in clinical supervision. I might suggest two things. First, I think it would helpful if the list was more specific about whether listees have had SOS or a supervisory credential. Secondly, I would encourage more potential supervisors to be listed. At the time of writing, there were 79 listings. About mandatory education for supervisors, one Canadian regulator, the College of Registered Psychotherapists of Ontario (CRPO), now requires supervisors of qualifying Registered Psychotherapists to have had 30 hours of directed learning in supervision (CRPO, 2020, para 7). However, I think it would deter our membership from supervising Provisionals. Requiring supervisors of Provisionals to have a supervisory credential would likely have the same effect. But listing these qualifications in one central place can help Provisionals looking for a supervisor to be smart consumers.

I further suggest that PAA establish a roster of supervision mentors—experienced supervisors who can support new supervisors. While some new supervisors might be interested in formal SOS, I think many more would like to have someone to call or meet with when they feel they might be in over their head. Distinct from CAP’s supervision consultants, who tend to be invited to deal with problematic situations before they turn into regulatory issues, supervision mentors would provide consultation—ongoing or as and when required—to supervisors at all stages of their development.

CAP determines who is permitted to supervise Provisionals and how supervision occurs. I suggest a graduate of a CPA- or APA-accredited program who has had a graduate course in supervision and SOS, or one who holds an earned supervision credential but who has been registered less than five years, might be better prepared to provide supervision than a psychologist who has been registered for five years but has no preparation in clinical supervision. Perhaps the CAP might consider alternate routes for eligibility to supervise Provisionals.

Some potential supervisors are deterred by the requirement that 25% of supervision hours must be delivered on site at the Provisional’s workplace. While it is essential for an external supervisor to understand the context of a Provisional’s work (e.g., funding, referral route, legal or program mandates, nature of the clientele, emergency procedures, etc.), I invite CAP to reflect on whether it is necessary to require 25% of the supervision to be on site. With two different Provisionals to whom I provided external

---

1 Full disclosure: I have taught this course in four of the last six years After having run it about 15 times, I would estimate that about 250 practitioners have completed the course, about 80% (or a total of roughly 200) being Alberta psychologists.
supervision, the Provisional’s employer was quite open to having me access client information. However, given the nature of the clientele (in one case, young women exiting sexual exploitation, and in the other, corporate clients recovering from substance misuse), they did not permit me to observe client work on site, so there was little point in being there in an ongoing way. Also, as COVID has taught us, with current technology, we can still be effective using secure web-based platforms. These also create some interesting possibilities for live supervision without requiring additional investment in technology.

University programs must attract and retain the pool of supervisors for their practicum students. Perhaps offering them supervision training by a member of the program’s faculty would be a useful way of expressing appreciation. Supervisors might value this more than the usual token honorarium.

Individual psychologists can act as well. First of all, review your competence to supervise. There are several supervision competency profiles. My favorite was developed by the Ontario Psychological Association (2015). You likely already have many transferable skills you can use as a supervisor and you will learn where you need to fill in your knowledge. Read a book! Take a workshop! Connect with others who are interested in supervision!

Furthermore, individual psychologists can advocate with their employers for a sustainable model that can provide potential supervisors with support in the form of dedicated time to provide supervision, training in supervision and access to ongoing consultation for supervisors. Employers are more likely to respond positively if you can present a rationale that hosting Provisionals can increase resources, or at least show how it is resource neutral.

If you are thinking this is the time to start supervising Provisionals, it just might be. I urge you to reflect on the balance between the need for variety in your professional life, the effect on your earning capacity, your energy level, the satisfaction and rejuvenation that supervising others will bring and your legacy. Connect with other likeminded potential supervisors to create a consultation group or reading group.

Finally, about assuming the risk of supervising others’ work, the best risk mitigation strategy is competence—knowing how to contract and give clear evaluations, develop a supervisory alliance so supervisees can tell you about their mistakes and insecurities without fear and repair supervisory relationships when we slip up.

Provisionals and those about to be Provisionals: Ask lots of questions. Ask prospective supervisors about their preparation to be supervisors. Examine their supervision contract. Tell your supervisor what you appreciate about what they do, and be as assertive as you can be about what is not going well. Read some of the references in this article so you will have an idea of what quality supervision should look like. While you are the most vulnerable person here, you are also the most important. Most of you will be here much longer than we senior psychologists will be. You are the future!

Final thoughts

On a personal note, between the submission of this article and its publication, I will have had my 33rd anniversary as a Registered Psychologist. I am a psychologist through and through, and proud of it. In 2021, the new College of Counselling Therapists of Alberta will begin to license Registered Counselling Therapists. Masters counselling graduates will qualify for this license immediately upon graduation. In my view, masters-level Registered Psychologists have a great deal more to offer by virtue of our rigorous Provisional process, including post-master’s supervision. I do not suggest we should make it easier to become Registered Psychologists. Rather, I suggest we should work to provide high quality clinical supervision to each and every Provisional Psychologist. Unfortunately, this does not always happen.

I’ve occasionally heard new Registered Psychologists comment that if they had known that becoming registered was going to be “this much hassle,” they would have just gotten an MSW, since their social work colleagues in the public sector may do the same job for the same pay with no post-masters supervision or exams. Several factors contribute to this sentiment. Let’s not make poor quality supervision one of them. For psychology in Alberta to keep growing, we must increase the quality of supervision, or risk losing potential new registrants to other professions.
Developing Capacity in Clinical Supervision: A Call to Action


Center for Credentialing Education. (2020). Required training: CCE Approved Clinical Supervisor (ACS) Program. [webpage] https://www.cce-global.org/credentialing/acs/training


James Canniff, Roger Gervais, and Paul Jerry are members of the Publications Committee who monitor the content of The CAP Monitor to ensure the information being conveyed is consistent with the College’s mandate, governing documents and policy.

The CAP Monitor is a regular publication of the College of Alberta Psychologists. To the best of our knowledge it is complete and accurate at the time of publication.