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Article 42

Investigating the Effectiveness of Clinical Supervision in a CACREP Accredited Online Counseling Program

Paper based on a program presented at the 2009 ACES Conference, San Diego, CA., October 17.

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An increasing number of counselor education students are completing their academic program through online, distance, and virtual learning environments. More and more programs are exclusively online, and counselor education faculty must find non-traditional ways to deliver both instruction and clinical supervision. According to the Council for the Accreditation and Counseling Related Programs (CACREP), there are currently seven CACREP accredited master's and doctoral programs that are predominately online (CACREP list of Accredited Programs, 2011). Even through virtual learning, counselor education faculty are responsible for ensuring that students receive instruction and supervision that adequately prepares them to seek licensure and work with clients. Some might argue that there is an increased accountability in online learning, as faculty have fewer opportunities to directly evaluate through traditional face-to-face means the development of necessary clinical skills.

Technology-Assisted Supervision

Recent contributions to the literature have discussed the importance of examining the potential efficacy of technology-assisted supervision (Manosevitz, 2006; McAdams & Wyatt, 2010; Wood, Miller, & Hargrove, 2005). In a round-table discussion at the American Psychological Association (APA) conference in 2006, Manosevitz asserted that telephone supervision is a necessity in distance programs. He also suggested that the establishment of a successful working alliance between supervisor and supervisee was

more important than whether the supervision was face-to-face or conducted at a distance (Manosevitz, 2006). Manosevitz and the other panel participants also called for more research on the efficacy of distance supervision approaches.

Wood et al. (2005) discussed the application of a distance supervision model with psychology interns in a rural setting. Certainly geographic limitations are a real concern for any counselor education program that serves students in rural settings. Wood et al. discussed the use of both asynchronous interactions (i.e., e-mail, asynchronous classrooms) and synchronous interactions (i.e., telephone, videoconferences) during clinical supervision. The authors suggested that when conducting technology-assisted supervision, supervisors must remain cognizant of the potential limitations of the medium and how the communication could be compromised by the loss of face-to-face interactions. By contrast, the use of technology-assisted supervision can, in some cases, lower inhibitions of participants and enhance contributions made by supervisees who might otherwise be less engaged in a face-to-face setting.

In a recent analysis of how state boards are regulating technology-assisted clinical supervision, McAdams and Wyatt (2010) concluded that only 13% of state licensure boards for counseling currently have specific regulations governing this practice. The authors reported that many state boards are currently discussing how distance and technology-assisted supervision should be regulated. About 20% of state regulatory boards favor minimal additional regulations. In addition, these same regulatory boards indicate that technology-assisted supervision should fall under existing rules and regulations regarding clinical supervision. The majority of state boards interviewed, however, favored more stringent regulations for technology-assisted supervision as a specialty area; and in some cases, requiring special certification (McAdams & Wyatt, 2010). All states interviewed did acknowledge that technology-assisted supervision is a reality of the counselor education landscape, and that states have a responsibility to examine how to regulate this practice towards professional licensure.

Measuring Effective Supervision

Given the growing pervasiveness of the use of technology-assisted clinical supervision both in online counseling programs and in programs where geographic limitations require its use, it is important to examine the effectiveness of such methods. Like any other instructional activity, practitioners need to actively work to improve this practice. There is much written on what constitutes effectiveness of supervision, including supervisory style and role (Ladany, Walker, & Melincoff, 2001), the matching of supervisor role with the developmental level of the supervisee (Bernard, 1997), and the emphasis of the supervisor during supervision (Usher & Borders, 1993). One empirically-supported concept of effective clinical supervision is the supervisory working alliance as proposed by Bordin (1983) and supported by the work of Efstation, Patton, and Kardash (1990).

While previous models of supervision included a focus on specific tasks of supervisors and supervisees as well as specific goals for supervision, the concept of the supervisory working alliance was the first to focus on the importance of the bond between supervisor and supervisee. According to Patton and Kivlighan (1997), “the supervisor's primary task in early supervision sessions is to establish a strong working

alliance with her or his supervisee” (p. 109). This working alliance has been shown to then positively impact the supervisee’s acquisition of counseling skills and their development as an emerging counseling professional.

Several authors have written about the importance of establishing a supervisory working alliance. Ladanay et al. (2001) examined the effect of a positive working alliance on both the supervision process and identified outcome variables with positive results. Wood (2005) discussed the use of the supervisory working alliance of supervisors and supervisees in a college counseling setting as a recommended method of delivering clinical supervision. In a study by Patton and Kivlighan (1997), a positive correlation between supervisory working alliance and counselor/client working alliance was identified. Studies by Ladany and Lehrman-Waterman (1999) and Ladany et al. (2001) further highlighted the role the bond between supervisor and supervisee played in enhancing agreement upon specific goals and tasks for supervision.

In 1990, Efstation et al. developed the Supervisor Working Alliance Inventory (SWAI) to measure the relationship between supervisor and supervisee in a clinical supervision. This instrument was developed in response to criticisms in the literature that not enough attention had been paid to the relationship between supervisor and supervisee in bringing out positive change (Holloway, 1987; Worthington, 1984). According to Efstation et al., a limitation of the popular developmental models was that they did not take into account another factor that had been shown to impact trainee development; namely, the working alliance between supervisor and supervisee. The SWAI was developed to measure supervisee perceptions of the working alliance between supervisor and supervisee as defined by Bordin (1983). According to Bordin, there are three major tasks within the working alliance model: goals, tasks, and bond. It is important for a mutual agreement on goals and tasks to occur, as well as a strong and supportive emotional bond to develop.

One study conducted by the lead author and colleagues used the SWAI to assess the perceptions of supervisees across several supervision delivery modalities including face-to-face, text-chat through a computer interface, and text-chat with a video component through a computer interface (Coker, Jones, Harbach, & Staples, 2002). Results of the study indicated that supervisees’ perceptions of the effectiveness of the supervisory working alliance as measured by the SWAI were not statistically different between the face-to-face, text-chat, and text-chat with video modalities. This study supports both the use of the SWAI as a measure of perceived efficacy of supervision as well as the potential for using technology-enhanced supervision methods effectively.

Online Clinical Training

Many CACREP accredited online counselor education programs have a clinical sequence that includes one or more face-to-face “residencies” to provide initial skills training and practice (much like a traditional pre-practicum course), a 100-hour practicum in an approved clinical setting, and a 600-hour internship in an approved clinical setting. Faculty in these programs provide direct supervision of emerging clinical skills through direct observation and feedback (particularly at face-to-face residencies), facilitation of real-time group supervision during practicum and internship, usually through conference call and technology-supported interactions to include chat or document/file sharing, and

ongoing consultation with site-based supervisors who provide direct observation and feedback of clinical skills during practicum and internship experiences.

Faculty in online counseling programs, therefore, must establish effective supervisory relationships with students both during face-to-face residencies and during distance practicum and internship experiences. The researchers were interested in understanding the experiences of counseling students in a CACREP accredited online counselor training program when it came to receiving supervision and feedback from their faculty. The authors hypothesized that faculty supervisors could establish effective supervisory relationships with students that enhanced student learning and skill attainment both during face-to-face interactions at residencies as well as distance supervision interactions.

In the setting used for this project, the residency experiences entailed 2 five and a half day intensive workshop-like experiences for participants to engage in structured role plays multiple times each day. The curriculum of the weeklong experience moved from basic listening skills through rapport building, question formulation, problem conceptualization, interventions, model driven conceptualization, and various topics related to assessment and intervention. Activities ranged from role plays in dyads, triads, and small groups, as well as faculty demonstrations. For many participants, attending their first residency was the first time they had ever flown, and very likely the first time they had met any fellow students in their program. It was also probable that this was the first time they had met or worked directly with their instructor for the residency process. The experience of being away from family, especially children, virtually sequestered in a hotel conference area, rooming with a stranger and working intensely with another group of strangers made the experience potentially both stressful and intense. This environment made the supervisor/student working relationship quite different than a traditional brick-and-mortar university pre-practicum, practicum, or basic skills course that is held weekly over 13–16 weeks.

From the very beginning of the residency week, participants were asked to role-play as clients, counselors, and observers, providing the supervisor the opportunity to evaluate skills and professionalism from multiple aspects of each participant. In any given cohort at residency, the skill level ranged from participants who had never been in the room with a client to participants with many years of experience in helping professions such as teachers, case managers, and addictions counselors. This variety of skill levels likely also had an impact on the supervisor/student working relationship development.

Throughout the week, participants were given verbal and written feedback at least once per day on one of their role plays. Participants were encouraged to give feedback to each other on every role-play. The ability to spend time with each participant was also driven by the number of participants in each of the weeks. Typically enrollment in the first residency week is higher, 16–20 per cohort, as compared to 8–12 per cohort for the second residency. In both cases, all the members of the cohort continued in an online course for 10 weeks with their residency instructor. There was often a break in contact between the residency and the online portion of as little as a few weeks to as much as a few months. It was atypical for any one participant to have the same instructor for both residency experiences. The two residency experiences might be separated by as little as a few months and as much as a year or more.

Once students completed their second residency experience, they were eligible to enroll in their fieldwork practicum. Again, the time between completing residency and starting practicum could be as little as three months or as much as a year. Because of a smaller pool of faculty designated to teach the fieldwork courses, there was a higher likelihood that any one student might have the same instructor from residency as fieldwork. For most students, once enrolled in fieldwork, they retained the same instructor throughout the entire experience.

The practicum and internship courses entailed three to four 10 week quarter terms of online courseroom discussions related to their on-site clinical activities. In some cases, students enrolled in a third internship to complete additional hours if required by their states, but data was not collected from this group. In addition to the required one hour of supervision with their site supervisors each week, fieldwork instructors conducted group phone supervision for 1.5 to 2 hours each week. Fieldwork cohorts typically consisted of 10–16 students, and phone sessions were typically 4–8 students on any one call. During these calls, students would present specific cases, discuss general clinical topics, and provide feedback and support to their peers. Supervision activities included model driven case conceptualization, discussion of ethical/legal considerations, and awareness of diversity and contextual factors. Fieldwork instructors provided weekly written feedback on each student's posts that were typically related to some aspect of cases being seen at the site.

Method

Students enrolled in a CACREP-accredited online counselor education program who were attending their first or second residency (residency I or residency II) or enrolled in their practicum/internship (fieldwork) terms were invited to participate in the current study. Institutional Review Board (IRB) approval was obtained by the online university, and a written consent form and demographic data form were developed for use in the study. The Supervisory Working Alliance Inventory (SWAI) was used to determine satisfaction with the supervisory interaction under investigation. Descriptive statistics and a one-way ANOVA were conducted to evaluate responses on the SWAI and to compare supervision experiences of subjects across the three conditions (residency I, residency II, fieldwork).

Participating students completed the Supervisory Working Alliance Inventory (SWAI) and were asked to reflect specifically on their supervisory experiences with their faculty member during either residency I, residency II, or fieldwork. This provided the potential for three points of data. The SWAI was developed by Efstation et al. (1990), and is based on the working alliance model and on the teaching-learning alliance. The SWAI has 2 scales: the Rapport scale has a reliability of .90 and the Client Focus scale has a reliability of .77. It contains 19 Likert scale questions with a range from 1 (almost never) to 7 (almost always). Questions are related to supervisee satisfaction with their supervisory relationships. Sample items include, *“My supervisor is tactful when commenting on my performance, My supervisor helps me stay on track during our meetings, In supervision, I am more curious than anxious when discussing difficulties with my clients”* (Efstation et al., 1990).

Participants also completed a demographic questionnaire to identify which counseling program they were in (Mental Health Counseling, Marriage and Family Therapy, or School Counseling), and other demographic information including gender, age, and ethnicity. Students who opted to participate during their residency I (N = 27) or residency II (N = 28) experience completed the consent form, demographic data form, and SWAI at the end of their 10 week online course. Participating students were asked to reflect on the relationship with and feedback received by their faculty supervisor during the week of residency they attended.

Students who participated in the current study during their fieldwork training (N = 22) were invited to complete the consent form, demographic data form, and SWAI upon completion of the academic term of fieldwork (10 week period). Faculty supervisors in the online counseling program under investigation facilitated weekly group supervision for 1.5 to 2 hours per week with a small cohort group of interns. During these sessions, interns presented counseling cases for review, asked process and content questions, and elicited feedback from their supervisor and peers about their overall performance as an intern. Students who opted to participate in the current study were asked to reflect on the relationship with a feedback received by their faculty supervisor over the course of the 10 week quarter.

Results

Demographic Data

Of the 77 students who participated in the study, 14 of the participants were from the MFT program, 55 from MHC, and 8 from SC. Sixty-six participants were female, and 11 were male. Twenty-one participants identified themselves as African-American, 53 Caucasian, and 2 Latina/Latino and, 1 identified as “other.” Thirty-one participants were between 20-30 years old, 15 were between 31-40 years old, 23 were between 41-50 years old and 8 were between 51-60 years old. These demographics accurately depict the diversity of students seeking education in online learning. According to the online institution’s fact sheet published in February of 2010, over half of the total population of students are students of color, and the average age of students is 39. In addition, two-thirds of students at the institution were female, while approximately one-third were male.

SWAI Data

SWAI responses are reported on a Likert scale ranging from 1 (almost never) to 7 (almost always). Table 1 identifies the mean scores of selected SWAI items across the three conditions of administration (residency I, residency II, fieldwork).

The Mean scores for the residency I group ranged from 5.52 to 6.78. The Mean scores for the residency II group ranged from 5.39 to 6.71. The Mean scores for the fieldwork group ranged from 5.32 to 6.32. The 20th question asks for an overall rating of the supervision relationship. The Mean score for the overall rating of supervision: Residency I group: M = 6.74, Residency II group: M = 6.59, Fieldwork group: M = 5.90. Participants identified positive supervision experiences both for the Rapport scale (M range from 5.44 to 6.51) and the Client focus scale (M range from 5.78-6.40) across all training experiences.

Table 1

Mean Scores on Selected SWAI Items Across Three Conditions

Condition		N	Mean Score
I feel comfortable working with supervisor	Residency I	27	6.52
	Residency II	28	6.43
	Fieldwork	22	6.05
Supervisor encourages me to talk about my work	Residency I	27	6.63
	Residency II	28	6.39
	Fieldwork	22	6.05
Supervisor is tactful when commenting	Residency I	27	6.67
	Residency II	28	6.68
	Fieldwork	22	6.09
Supervisor helps me to talk freely	Residency I	27	6.74
	Residency II	27	6.56
	Fieldwork	22	6.05
Supervisor stays in tune with me during supervision	Residency I	27	6.56
	Residency II	27	6.26
	Fieldwork	22	5.91
I feel free to mention troublesome feelings to him/her	Residency I	27	5.93
	Residency II	28	5.96
	Fieldwork	21	5.48
Overall, my supervision experience was (1-extremely negative to 7-extremely positive)	Residency I	27	6.74
	Residency II	27	6.59
	Fieldwork	21	5.90

One way ANOVA analysis was conducted to compare the satisfaction with supervisory relationships between residency students and their fieldwork counterparts. Table 2 provides selected results of the one-way ANOVA analysis for within and between group differences across Residency I and II and Fieldwork.

In almost every case, the hypothesis that there are little to no differences between group experiences of supervisory satisfaction was upheld. Some supervision experiences were reported as more positive in the face-to-face residency conditions vs. the distance fieldwork conditions. Specifically, participants tended to report more positive supervision experiences in face-to-face supervision interactions than phone group supervision interactions, but very little overall difference between the two experiences existed. Examples of items that were statistically different between the face-to-face residencies and distance fieldwork conditions included, *My supervisor encourages me to take time to understand what my client is saying and doing* ($F = 4.188$, $Sig. = .019$); *When correcting errors with a client, my supervisor offers alternative ways of intervening with the client* ($F = 5.211$, $Sig. = .008$), *My supervisor helps me stay on track during supervision* ($F = 6.828$, $Sig. = .002$).

Table 2

ANOVA of Satisfaction Among Residency and Fieldwork Students

		Sum of Squares	df	Mean Square	F	Sig.
Supervisor encourages me to take time to understand client	Between Groups	9.885	2	4.943	4.188	.019
	Within Groups	87.335	74	1.180		
	Total	97.221	76			
When correcting errors, supervisor offers alternatives	Between Groups	14.632	2	7.316	5.211	.008
	Within Groups	103.887	74	1.404		
	Total	118.519	76			
Supervisor helps me to stay on track	Between Groups	19.585	2	9.792	6.828	.002
	Within Groups	106.130	74	1.434		
	Total	125.714	76			

One-way ANOVA analyses were also conducted to examine any differences of experiences in supervision based on gender, ethnicity, and age. No between-group differences of significance were found related to gender and ethnicity, but some SWAI items did demonstrate differences based on participant age. Those participants in the highest age range (51-60, N = 8), tended to score supervisory satisfaction as lower overall across all three conditions than their younger counterparts. By contrast, those in the lowest age range (20-30, N = 31) tended to score supervisory satisfaction as higher overall across all three conditions than other age groups. Specifically, *I feel comfortable working with my supervisor* ($F = 2.921, Sig. = .040$), *My supervisor welcomes my explanations* ($F = 4.180, Sig. = .009$), *My supervisor is tactful when commenting about my performance* ($F = 3.963, Sig. = .011$), and *My supervisor encourages me to formulate my own interventions* ($F = 2.832, Sig. = .044$) all demonstrated lower ratings from participants ages 51-60 in the current analysis.

Discussion

According to Coker et al. (2002), supervisee satisfaction with the supervisory relationship can be experienced through both face-to-face and technology-enhanced conditions. The current study supports this assertion and provides evidence that students in online counselor education programs experience positive supervisory experiences through distance modalities. Results also suggest, however, that experiences of students receiving distance supervision could have more positive interactions with supervisors. The lack of visual cues, for example, could potentially impact the quality of interactions between supervisors and supervisees. The addition of other multi-media (i.e., Adobe Connect, Skype, Microsoft Live Meeting, or other real-time chat) might serve to enhance the learners' supervision experiences. At the time of this publication, the authors are working at their respective online institutions to enhance group supervision through the

use of additional virtual media to improve the quality of supervisory interactions during distance supervision experiences.

An interesting yet unanticipated finding is the lower ratings of supervisory experiences of older students in the current study. While the sample size of this group was small, it is still telling that overall, the supervisor working alliance was rated as lower across all three conditions. As the average age of students seeking online degrees tends to be higher than that of students in traditional institutions, it is important to examine supervision practices that are efficacious for older students. It is possible that traditional supervision practices may need to be evaluated for efficacy with older counselor education students.

There are some limitations of note in the current study. Due to the small sample size across each condition, the results are not generalizable to other populations, institutions, and supervision experiences. The results, however, do provide a snapshot of experiences of students in CACREP accredited Mental Health Counseling, Marriage and Family Therapy, and School Counseling programs receiving both face-to-face supervision and distance supervision.

Implications for Improving the Practice

While results of the study indicate that there is no significant difference between the modes of supervision within this study, the trend toward lower satisfaction with the supervisory working alliance during distance supervision experiences cannot be ignored by faculty supervisors. Consideration could be made to seek ways to keep students engaged to continue to build the working alliance during the breaks between the residency experiences and the online courseroom portion. More consideration should be made in accounting for adult learner styles of learning in the supervisory relationship.

Future Direction

The authors intend to continue an examination of supervisory experiences of students in online counselor education programs. Next steps in research include creating enhanced distance supervision experiences of fieldwork students to include multi-media components including video, chat, and web-enhanced interactions through use of programs such as Adobe Connect and Microsoft Live Meeting which can provide additional levels of interaction during distance supervision experiences. Examining counseling student perceptions over time as they move through supervision experiences will allow researchers to better understand the specific factors that contribute to satisfactory supervisory working alliances. A qualitative evaluation of online program supervision methods in fieldwork through introducing open-ended questions and learner interviews to better capture the essence of their supervision experiences is also planned. Some additional areas of inquiry could include identifying best practices for technology-enhanced supervision, comparing learner supervision experiences using different modalities (phone conference call; phone with Adobe Connect or Microsoft Live Meeting; phone with video chat), and comparing supervision experiences of students in online, traditional, and hybrid counseling programs.

The importance of being gatekeepers for the counseling profession is enhanced when supervising through a distance format. This study supports the efficacy of this modality in terms of student satisfaction with the supervisory relationship, but also

provides an impetus to begin to better understand the supervisory experiences of students in distance counselor education programs.

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