

Tool 7. Clinical Supervision Policy and Procedure (continued)

Clinical supervision frequency

Each supervisee will receive 4 hours of supervision monthly. A combination of individual and group supervision may be used. Supervisors are to ensure that a minimum of 50 percent of this time is devoted to clinical, as opposed to administrative, supervision.

Ongoing review and feedback

The supervisee will be given an annual performance evaluation that reviews both job expectations and the clinical skills learning plan. Written records of the supervisee will be reviewed on a regular basis. Supervisees will be given specific written feedback regarding their strengths and areas for improvement. The supervision system operates through direct observation of clinical work. This ensures that direct, focused feedback will be provided, increases the degree of trust and safety, and provides an accurate evaluation of skills development progress. Observations will be pre-arranged and take the form of sitting in on a session, co-facilitating, or videotaping. The supervisee will present a case at a minimum of once per month.

Commitment to ongoing professional development

The supervisee's learning plan should document goals, objectives, and methods to promote professional development. The plan should be completed within the first 6 months of employment and updated annually. Ongoing supervision should focus on achieving the identified goals. The agency supports supervisees' participation in training to achieve their professional development goals.

Source: Adapted from unpublished Basics, Inc. materials

The Supervision Contract

A supervision contract protects the rights of the agency, the supervisor, and supervisee. A written contract between supervisor and supervisee, stating the purpose, goals, and objectives of supervision is important. Tool 8 is a template for supervision contracts. In addition to the contract, for the purposes of informed consent, it is useful to have a supervision consent form signed by both the supervisor and supervisee, indicating the supervisee's awareness and agreement to be supervised (see Tool 4).

Tool 8. Supervision Contract Template

This document serves as a description of the supervision provided by (supervisor name, credentials, title) to (supervisee, credentials, title).

Primary Purpose, Goals, and Objectives

- Monitor and ensure client welfare
- Facilitate professional development
- Evaluate job performance

Provision

- (Frequency) of individual supervision at (day and time)
- (Supervision model and case review format) will be used
- Clients of the counselor will give informed consent for supervision of their case
- Counselor will have a minimum of (amount) of supervision for every (number) of client contact hours
- All client cases will be reviewed on a rotating basis based on need

Documentation

- (Form name) will be used to document the content and progress of the supervision
- Informal feedback will be provided at the end of each session
- Written formal evaluation will be provided (frequency)
- Supervision notes will be shared (at the supervisor's discretion or at request of counselor)

Tool 8. Supervision Contract Template (continued)

Duties and Responsibilities

The supervisor at a minimum will:

- Review all psychosocial histories, progress notes, treatment plans, and discharge plans.
- Question the counselor to justify approach and techniques used.
- Present and model appropriate clinical interventions.
- Intervene directly if client welfare is at risk.
- Ensure that ethical guidelines and legal statutes are upheld.
- Monitor proficiencies in working with community resources and networking with community agencies.

The counselor at a minimum will:

- Uphold all ethical guidelines and legal statutes.
- Be prepared to discuss all client cases.
- Discuss approaches and techniques used and any boundary issues or violations that occur.
- Consult supervisor or designee in emergencies.
- Implement supervisor directives.
- Adhere to all agency policies and procedures.

Procedural Consideration

- The Individual Development Plan's goals and objectives will be discussed and amended if necessary.
- The quality of the supervisory relationship will be discussed and conflicts resolved.
- If conflicts cannot be resolved, (name) will be consulted.
- In the event of an emergency, the counselor is to contact the supervisor. If unavailable, contact (alternate's name, title, and other relevant back-up information).
- Crises or emergency consultations will be documented.
- Due process procedures (as explained in the agency's policy and procedure handbook) have been reviewed and will be discussed as needed.

Supervisor's Scope of Competence

- Title/date of credentials/licensure.
- Formal supervisory training and credentials.
- Years providing supervision.
- Current supervisory responsibilities.

This agreement is subject to revision at any time on request of either person. Revision will be made only with consent of the counselor and approval of the supervisor. We agree to uphold the directives outlined in this agreement to the best of our ability and to conduct our professional behavior according to the ethical principles and codes of conduct of our professional associations.

Supervisor _____ Title _____ Date _____

Supervisee _____ Title _____ Date _____

This agreement is in effect from (current date) to (annual date of review or termination)

Source: Mattel, 2007

Another sample supervision contract form can be found in Campbell (2000), p. 285.

The Initial Supervision Sessions

An initial supervision sessions checklist documents the topics to be covered in initial sessions by the supervisor and supervisee. The goal is that as part of establishing the supervisory relationship, the supervisor and supervisee should discuss the basic issues in substance abuse counseling and in supervision. For new supervisors and for administrators to monitor the implementation of supervision, a checklist, such as Tool 9, can ensure that the important issues are discussed. The example below can aid in setting a preliminary structure for supervision, clarifying goals and expectations, and incorporating feedback so as to promote a sense of openness, trust, and safety. It is understood that not all of these topics can be covered in the first few sessions, but these topics are important considerations in initiating clinical supervision.

Documentation and Recordkeeping

Documentation is unquestionably a crucial risk-management tool for clinical supervisors and is no longer optional in supervision. Legal precedents suggest that organizations are both ethically and legally responsible for quality control of their work, and the supervision evaluation, documentation, and record-keeping systems are a useful and necessary part of that professional accountability. However, in contrast with the myriad clinical forms and documentation required, there is a paucity of tools for documentation in supervision. Most organizations rely on the personal style and records of individual supervisors, and do not have an organization-wide standardized system of record keeping for supervision. Documenting supervision should not be burdensome, but it should be systematic and careful. Key components of what should be documented and how it should be documented are provided in the following paragraphs.

A record of supervision sessions needs to be maintained that documents: when supervision was conducted, what was discussed, what recommendations were provided by the supervisor, and what actions resulted. A supervisor should maintain a separate file on each counselor supervised, including:

- Caseloads.
- Notes on particular cases.
- Supervisory recommendations and impressions.
- The supervision contract.
- A brief summary of the supervisee's experience, training, learning needs, and learning styles.
- The individual development plan.
- A summary of all performance evaluations.
- Notations of supervision sessions, particularly concerning duty-to-warn situations, cases discussed, and significant decisions made.
- Notations of canceled or missed supervision sessions.
- Significant issues encountered in supervision and how they were resolved.

By far, the most comprehensive documentation system for clinical supervisors is Falvey's FoRMSS system (2002a), which includes emergency contact information, supervisee profiles, a log sheet for supervision, an initial case overview, a supervision record, and a termination summary that records the circumstances of client termination, client status at termination, and any followup or referrals needed. The FoRMSS system alerts supervisors to potential clinical, ethical, or legal risks associated with cases.

Records of supervision must be retained for the period required by the State and pertinent accreditation bodies. The American Psychological Association's guidelines (2007) recommend retaining clinical and supervisory records for at least 7 years after the last services were delivered. Organization policy may differ from this. Administrators should check with local and State statutes regarding record-keeping requirements. It is prudent for an organization and supervisor to retain supervision records for at least as long as required by the State and accreditation bodies.

Tool 9. Initial Supervision Sessions Checklist

Education, Training, and Clinical Experience

- Educational background
- Training experience
- Setting(s), number of years
- Theoretical orientation
- Clinical competence with various issues, models, techniques, populations, presenting problems, treatment modalities
- Sense of mission and purpose in the field
- Educational plans and professional goals of the supervisee
- Training and awareness of cultural and contextual issues in counseling
- Training and awareness of community networking in counseling

Philosophy of Supervision

- Philosophy of therapy and change
- Purpose of supervision

Previous Supervision Experiences

- Previous supervision experiences (e.g., format, setting)
- Strengths and weaknesses as counselor and as supervisee
- Supervisee's competence with stages of counseling process
- Supervisee's level of development in terms of case planning, notes, collateral support, and networking
- Supervisory competence with various issues, models, techniques, populations, therapy groups, and modalities
- Methods for managing supervisor-supervisee differences

Supervision Goals

- Goals (personal and professional)
- Process of goal evaluation and timeframe
- Requirements for which supervisee is seeking supervision (e.g., licensure, professional certification)
- Requirements to be met by supervision (e.g., total hours, individual or group supervision)

Supervision Style and Techniques

- Specific expectations the supervisee or supervisor has of the parties involved (e.g., roles, hierarchy)
- Type of supervision that would facilitate clinical growth of the supervisee
- Preferred supervision style (didactic, experiential, collegial)
- Parallels between therapy and supervision models
- Supervision focus (e.g., counselor's development, cases)
- Manner of case review (e.g., crisis management, in-depth focus)
- Method (e.g., audio- or videotaping, direct observation)

Theoretical Orientation

- Models and specific theories in which supervisee and supervisor have been trained, practice, and or conduct supervision
- Extent to which these models have been used clinically
- Populations, presenting problems, and/or family forms with which the models have been most effective
- Interest in learning new approaches

Tool 9. Initial Supervision Sessions Checklist (continued)

Legal and Ethical Considerations

- _____ Ultimate responsibility for clients discussed in supervision in different contexts (e.g., licensed vs. unlicensed counselor, private practice vs. public agency)
- _____ Number of cases for which the supervisor will be responsible
- _____ Emergency and back-up procedures
- _____ Awareness of professional ethical codes
- _____ Confidentiality regarding the information discussed in supervision
- _____ Confidentiality issues when more than one supervisee is involved
- _____ Specific issues in situations where dual relationships exist (e.g., former client)
- _____ Process for addressing supervisee issues (e.g., burnout, countertransference)

Other

What do we need to know about each other that we have not already discussed?

Source: Adapted from Falvey, 2002b. Permission pending.

Tools 10–12 are sample documentation forms. (See also Campbell, 2000.)

Tool 10. Supervision Note Sample
Professional Development Plan Current Focus

Goal/TAP Competencies	Objective	Date of Expected Completion

Supervision Content

Issue	Discussion	Recommendation/ Action	Followup

Progress on Professional Development Plan Objectives

Other _____

Supervisor _____ Counselor _____ Date _____

Source: Porter and Gallon, 2006.

Tool 11. Current Risk-Management Review

Case: _____

Date: _____

ISSUES

- Informed Consent
- Parental Consent
- Confidentiality
- Recordkeeping
- Records Security
- Child Abuse/Neglect
- Risk of Significant Harm
- Duty to Warn
- Medical Exam Needed

- Supervisee Expertise
- Supervisor Expertise
- Institutional Conflict
- Dual Relationship
- Sexual Misconduct
- Releases Needed
- Voluntary/Involuntary Hospitalization
- Utilization Review Discharge/Termination

Discussion:

Recommendation:

Action:

Signature _____ Date _____

Title _____

Source: Based on Falvey, 2002b.

Tool 12. Supervisory Interview Observations		
STATEMENTS/BEHAVIORS		COMMENTS
<p>Step 1 SET AGENDA</p> <p>Decrease anxiety Involve counselor</p>		
<p>Step 2 GIVE FEEDBACK</p> <p>Empower Individualize</p>		
<p>Step 3 TEACH and NEGOTIATE</p> <p>Share agenda Clarify knowledge, skills, attitude Identify learning steps Agree upon methods of learning</p>		
<p>Step 4 SECURE COMMITMENT</p> <p>Clarify expectations Clarify responsibility Create mutual accountability</p>		

LOOK FOR	OBSERVATIONS, BEHAVIORS, NOTES
SUMMARY OBSERVATIONS	
Interview structure followed?	
Time managed effectively?	
Established nurturing and supportive environment?	
Stayed on course?	
Resistance? Power struggle?	
Agreement secured?	
Followup plan created?	
NOTES:	
<i>Source: Based on Porter & Gallon, 2006.</i>	