



## Competency profile comparison

### Competency Definitions

- “Professional competence is the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflections, in daily practice for the benefit of the individual and community being served” (Epstein & Hundert, 2002. P. 226)
- “As applied to psychology, competence involves understanding and performing tasks consistent with one’s professional qualifications (often having involved specialized training), sensitive to cultural and individual differences, and anchored to evidence based practices” (APA Presidential Task Force on Evidence-Based Practice, 2006).
- “As assembled knowledge, skills, and values (attitudes) assembled in work performance” (Falender & Shafranske, 2004)

### Supervision Definitions

- Supervision is 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, facilitation of supervisee self-assessment, and acquisition of knowledge and skills by instruction, modeling, and mutual problem-solving.
- Building on the recognition of the strengths and talents of the supervisee, supervision encourages self-efficacy.
- Supervision ensures that clinical (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 (Falender & Shafranske, 2004)



Association/Author	Country	Date	Competencies
Supervision Interest Network, Association for Counselor Education and Supervision (ACES)	USA	1990	<ol style="list-style-type: none"> <li>1. Professional counseling supervisors are effective counselors whose knowledge and competencies have been acquired through training, education, and supervised employment experience.</li> <li>2. Professional counseling supervisors demonstrate personal traits and characteristics that are consistent with the role.</li> <li>3. Professional counseling supervisors are knowledgeable regarding ethical, legal and regulatory aspects of the profession, and are skilled in applying this knowledge.</li> <li>4. Professional counseling supervisors demonstrate conceptual knowledge of the personal and professional nature of the supervisory relationship and are skilled in applying this knowledge.</li> <li>5. Professional counseling supervisors demonstrate conceptual knowledge of supervision methods and techniques, and are skilled in using this knowledge to promote counselor development</li> <li>6. Professional counseling supervisors demonstrate conceptual knowledge of the counselor developmental process and are skilled in applying this knowledge.</li> <li>7. Professional counseling supervisors demonstrate knowledge and competency in case conceptualization and management.</li> <li>8. Professional counseling supervisors demonstrate knowledge and competency in client assessment and evaluation.</li> <li>9. Professional counseling supervisors demonstrate knowledge and competency in oral and written reporting and recording.</li> <li>10. Professional counseling supervisors demonstrate knowledge and competency in the evaluation of counseling performance</li> </ol>



			11. Professional counseling supervisors are knowledgeable regarding research in counseling and counselor supervision and consistently incorporate this knowledge into the supervision process.
Supervision Interest Network, Association for Counselor Education and Supervision (ACES)	USA	2011 (current)	<p><b>1. Initiating Supervision</b></p> <ul style="list-style-type: none"> <li>a. The supervisor engages in sound informed consent practices in the initial supervision session.</li> <li>b. The supervisor explicitly states clear parameters for conducting supervision.</li> <li>c. The supervisor facilitates a discussion about the supervision process to foster the supervisory working alliance.</li> </ul> <p><b>2. Goal-Setting</b></p> <ul style="list-style-type: none"> <li>a. To the extent possible, the supervisor co-develops specific goals for supervision with the supervisee.</li> <li>b. The supervisor emphasizes goals that directly benefit the therapeutic alliance between the supervisee and client and the effectiveness of services provided.</li> <li>c. The supervisor is intentional about addressing and evaluating goals in each supervision session.</li> </ul> <p><b>3. Giving Feedback</b></p> <ul style="list-style-type: none"> <li>a. The supervisor provides regular and ongoing feedback.</li> <li>b. The supervisor provides direct feedback as needed.</li> <li>c. The supervisor pays attention to the multiple sources of feedback available to the supervisee.</li> </ul> <p><b>4. Conducting Supervision</b></p> <ul style="list-style-type: none"> <li>a. The supervisor adheres to appropriate professional standards (e.g., accreditation, certification, and licensure regulations) in establishing the frequency and modality of supervision sessions.</li> <li>b. The supervisor provides a safe, supportive, and structured supervision climate.</li> <li>c. The supervisor uses a variety of supervisory interventions.</li> <li>d. The supervisor chooses a group supervision format for multiple reasons; time efficiency is not a primary rationale.</li> <li>e. The supervisor chooses a triadic supervision format for multiple reasons; time efficiency is not a primary rationale.</li> </ul>



			<p>f. The supervisor employs technology in ways that enhance the supervisory process and the development of the supervisee.</p> <p>g. In both academic and post-degree supervision, the supervisor actively evaluates the course of supervision on an ongoing basis.</p> <p><b>5. The Supervisory Relationship</b></p> <p>a. The supervisor operates with an awareness that the supervisory relationship is key to the effectiveness of supervision as well as the growth and development of the supervisee.</p> <p>b. The supervisor intentionally engages with the supervisee to facilitate development of a productive supervisory relationship and working alliance.</p> <p>c. The supervisor attends to ethical and cultural concerns that impact the supervisory relationship. <i>(See also Diversity Considerations and Ethical Considerations sections.)</i></p> <p><b>6. Diversity and Advocacy Considerations</b></p> <p>a. The supervisor recognizes that all supervision is multicultural supervision and infuses multicultural considerations into his/her approach to supervision.</p> <p>b. The supervisor encourages supervisees to infuse diversity and advocacy considerations in their work with clients.</p> <p><b>7. Ethical Considerations</b></p> <p>a. The supervisor conveys to the supervisee that both the supervisor and supervisee are expected to adhere to the ethical codes and guidelines endorsed by the American Counseling Association, the Association for Counselor Education and Supervision and other ACA divisions, relevant credentialing bodies, and models of ethical behavior.</p> <p>b. The supervisor continually monitors his/her own level of competence in providing supervision and acts accordingly.</p> <p>c. The supervisor understands that client welfare is his/her first and highest responsibility and acts accordingly.</p> <p>d. The supervisor does not compromise the supervisory relationship by engaging in relationships with supervisees that are considered inappropriate.</p> <p>e. The supervisor provides ongoing performance assessment and evaluation of the supervisee, including the supervisee's strengths and limitations. <i>(See also Evaluation section.)</i></p> <p><b>8. Documentation</b></p>
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			<p>a. The supervisor maintains documentation that provides a system of supervisor accountability.</p> <p><b>9. Evaluation</b></p> <p>a. The supervisor understands that evaluation is fundamental to supervision and accepts his/her evaluation responsibilities.</p> <p>b. The supervisor clearly communicates the evaluation plan to the supervisee.</p> <p>c. The supervisor encourages ongoing supervisee self-evaluation.</p> <p>d. The supervisor takes appropriate steps when remediation is necessary.</p> <p><b>10. Supervision Format</b></p> <p>a. The supervisor employs various supervision formats (e.g., individual, triadic, peer/colleague review, group supervision) in ways that adhere to accreditation standards and regulations of credentialing bodies (e.g., frequency of individual and group supervision) <i>and</i> that meet the needs of the supervisee, is appropriate to the site, and adequately addresses the needs of clients.</p> <p>b. The supervisor does not choose a format based on what may be convenient for the supervisor (e.g., saves time).</p> <p><b>11. The Supervisor</b></p> <p>a. The supervisor is competent in providing clinical supervision.</p> <p>b. The supervisor can clearly describe the purpose of clinical supervision and distinguish it from the counseling process as well as from administrative and program supervision.</p> <p>c. The supervisor has a collaborative relationship with additional supervisors with whom the supervisee may be working (e.g., clinical, administrative, and/or program supervisor at the university, practicum or internship site, and/or work setting).</p> <p>d. The supervisor engages in self-reflection and other avenues of personal professional development.</p> <p>e. The supervisor manages supervisory relationship dynamics competently and appropriately.</p> <p><b>12. Supervisor Preparation: Supervision Training and Supervision of Supervision</b></p> <p>a. The supervisor has received didactic instruction and experiential training in clinical supervision (concurrent and/or sequential).</p> <p>b. The supervisor's training is based in a developmental perspective and approach.</p>
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			<p>c. The supervisor’s didactic instruction includes all the topics identified in guidelines published by relevant professional organizations (e.g., ACES) and credentialing bodies (e.g., NBCC, CRC). At a minimum, this didactic instruction includes the following: models of supervision; models of counselor development; formats of supervision; supervisory relationship dynamics; supervision methods and techniques; multicultural considerations; counselor assessment, feedback and evaluation; executive/administrative skills; ethical, legal, and professional regulatory issues; and research on these topics.</p> <p>d. The supervisor’s training emphasizes theoretical and conceptual knowledge, skills and techniques, and self-awareness.</p> <p>e. The supervisor’s training includes appropriate application of teaching, counseling, and consulting skills in supervision.</p> <p>f. The supervisor’s training emphasizes the role modeling that the supervisor provides in all his/her interactions with the supervisee.</p> <p>g. The supervisor’s training emphasizes the supervisory relationship as the primary vehicle for learning in supervision.</p> <p>h. The supervisor’s training includes an emphasis on managing the delicate balance of challenge and support of the supervisee.</p> <p>i. The supervisor’s training includes instruction in relevant learning theories, principles, and research.</p> <p>j. The supervisor is trained to understand that his/her focus includes both the clinical and the professional development of the supervisee.</p> <p>k. The supervisor’s training includes recognition of the need for different approaches, formats, structures, and types of supervision for different supervision settings (e.g., universities, agencies, schools, privately contracted).</p> <p>l. The supervisor articulates a personal philosophy of supervision as a result of training and supervised experience as a supervisor.</p> <p>m. The supervisor’s training includes supervision of supervision based in some form of direct observation of his/her work with supervisees.</p> <p>LINK: <a href="http://www.saces.org/resources/documents/aces_best_practices.doc">http://www.saces.org/resources/documents/aces_best_practices.doc</a></p>
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<p>American Board of Examiners in Clinical Social Work</p>	<p>USA</p>	<p>2002</p>	<p>Three Progressive Levels of Professional Competence in Clinical Social Work Practice”</p> <ul style="list-style-type: none"> <li>(1) Postgraduate Practice Level (MSW Level)</li> <li>(2) (2) Autonomous Practice Level (Licensure Level)</li> <li>(3) (3) Advanced Practice Level (Diplomate Level)</li> </ul> <p>Supervisors need to be at a Diplomate level to be able to supervise.</p> <ul style="list-style-type: none"> <li>• Advanced Practice Level (Diplomate level):</li> </ul> <p>The advanced practice level requires a five-year minimum of practice experience beyond graduation as an MSW, plus the achievement of the autonomous practice level. Advanced clinical social workers are expected to have reached the full integration of a professional self and have affirmed their professional role and identity; to recognize that the relationship between theory and practice is often problematic and that theories of development and practice skills require constant emendation (Fook, Ryan and Hawkins, 1997). Advanced clinical social workers are expected to have mastered the skills required for autonomous practice with diverse populations, and may have also developed mastery of specialized areas of clinical practice. Additionally, advanced clinical social workers may have acquired the skills to supervise, consult, teach and otherwise contribute to the professional development of colleagues.</p> <p>Evidence of the full integration of a professional identity and responsible professional role modeling is demonstrated by:</p> <ol style="list-style-type: none"> <li>1. Increased depth and breadth of practice skills</li> <li>2. Independent competence with diverse diagnostic groups</li> <li>3. Ability to adapt core knowledge to unique needs of client and milieu</li> <li>4. Clear definition of limitations in level of expertise and scope of practice</li> <li>5. Continued participation in direct practice activities</li> <li>6. Ongoing motivation for learning from practice experience</li> <li>7. Commitment to and implementation of continuing professional education and development</li> </ol>
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			<p>8. Maintenance of highest level of ethical standards for the profession.</p> <p>Additional skills appropriate to advanced practitioners may include:</p> <ol style="list-style-type: none"> <li>1. Specialization in one or more areas of expertise</li> <li>2. Expertise in participating in the professional development of colleagues (through mentorship, supervision and other modes of teaching)</li> <li>3. Leadership in developing and expanding intervention strategies</li> <li>4. Leadership in defining and attending to professional issues</li> <li>5. Ability to expand the conceptual knowledge of the profession.</li> </ol> <p>LINK: <a href="https://www.abecsw.org/images/Competen.PDF">https://www.abecsw.org/images/Competen.PDF</a></p>
The Association of State and Provincial Psychology Boards	USA	2003	<p><b>Supervision knowledge includes:</b></p> <ul style="list-style-type: none"> <li>• _An understanding of the professional practice being supervised (models, theories, and modalities of supervision);</li> <li>• _Research, scientific, and evidence-base of the supervision literature;</li> <li>• _Professional/supervisee development;</li> <li>• _Ethics and legal issues specific to supervision;</li> <li>• _Evaluation and process outcome; and</li> <li>• _Diversity in all its forms.</li> </ul> <p><b>Skills include:</b></p> <ul style="list-style-type: none"> <li>• _Providing supervision in multiple modalities (e.g., group, individual);</li> <li>• _Forming a supervisory alliance;</li> <li>• _Providing formative and summative feedback;</li> </ul>



		<ul style="list-style-type: none"> <li>• _Promoting the supervisee’s self-assessment and growth;</li> <li>• _Self-assessing by the supervisor;</li> <li>• _Assessing the supervisee’s learning needs and developmental level;</li> <li>• _Eliciting and integrating evaluative feedback from supervisees;</li> <li>• _Teaching and didactics;</li> <li>• _Setting boundaries;</li> <li>• _Knowing when to seek consultation;</li> <li>• _Flexibility; and</li> <li>• _Engaging in scientific thinking and translating theory and research to practice.</li> </ul> <p><b>Attitudes and values include:</b></p> <ul style="list-style-type: none"> <li>• _Appreciation of responsibility for both clients and supervisees;</li> <li>• _Respect;</li> <li>• _Sensitivity to diversity;</li> <li>• _A balancing between being supportive and challenging;</li> <li>• _Empowering;</li> <li>• _A commitment to lifelong learning and professional growth;</li> <li>• _Balancing obligations to client, agency, and service with training needs;</li> <li>• _Valuing ethical principles;</li> <li>• _Knowing and utilizing psychological science related to supervision;</li> <li>• _A commitment to the use of empirically-based supervision; and</li> <li>• _Commitment to knowing one’s own limitations.</li> </ul>
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			Training to achieve competence specific to supervision should include not only coursework in 180 the designated skills, knowledge sets, attitudes, and values listed above, but also supervised 181 experience in providing supervision, including some form of live or video observation of the 182 (Falender et al., 2004).
Falender, C. A., Cornish, J. A. E., Goodyear, R., Hatcher, R., Kaslow, N. J., Leventhal, G., Shafranske, E., & Sigmon, S. T.	USA	2004	<p>Knowledge</p> <ol style="list-style-type: none"> <li>1. Knowledge of area being supervised (psychotherapy, research, assessment, etc.)</li> <li>2. Knowledge of models, theories, modalities, and research on supervision</li> <li>3. Knowledge of professional/supervisee development (how therapists develop, etc.)</li> <li>4. Knowledge of ethics and legal issues specific to supervision</li> <li>5. Knowledge of evaluation, process outcome</li> <li>6. Awareness and knowledge of diversity in all of its forms</li> </ol> <p>Skills</p> <ol style="list-style-type: none"> <li>1. Supervision modalities</li> <li>2. Relationship skills—ability to build supervisory relationship/alliance</li> <li>3. Sensitivity to multiple roles with supervisee and ability to perform and balance multiple roles</li> <li>4. Ability to provide effective formative and summative feedback</li> <li>5. Ability to promote growth and self-assessment in the trainee</li> <li>6. Ability to conduct own self-assessment process</li> <li>7. Ability to assess the learning needs and developmental level of the supervisee</li> <li>8. Ability to encourage and use evaluative feedback from the trainee</li> <li>9. Teaching and didactic skills</li> <li>10. Ability to set appropriate boundaries and seek consultation when supervisory issues are outside domain of supervisory competence</li> <li>11. Flexibility</li> <li>12. Scientific thinking and the translation of scientific findings to practice throughout professional development</li> </ol> <p>Values</p> <ol style="list-style-type: none"> <li>1. Responsibility for client and supervisee rests with the supervisor</li> <li>2. Respectful</li> <li>3. Responsible for sensitivity to diversity in all its forms</li> <li>4. Balance between support and challenging</li> </ol>



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			<p>5. Empowering</p> <p>6. Commitment to lifelong learning and professional growth</p> <p>7. Balance between clinical and training needs</p> <p>8. Value ethical principles</p> <p>9. Commitment to knowing and utilizing available psychological science related to supervision</p> <p>10. Commitment to knowing one's own limitations</p> <p>Social Context Overarching issues:</p> <p>1. Diversity</p> <p>2. Ethical and legal issues</p> <p>3. Developmental process</p> <p>4. Knowledge of the immediate system and expectations within which the supervision is conducted</p> <p>5. Awareness of the sociopolitical context within which the supervision is conducted</p> <p>6. Creation of climate in which honest feedback is the norm (both supportive and challenging)</p> <p>Training of Supervision Competencies</p> <p>1. Coursework in supervision including knowledge and skill areas listed</p> <p>2. Has received supervision of supervision including some form of observation (videotape or audiotape) with critical feedback</p> <p>Assessment of Supervision Competencies</p> <p>1. Successful completion of course on supervision</p> <p>2. Verification of previous supervision of supervision documenting readiness to supervise independently</p> <p>3. Evidence of direct observation (e.g., audiotape or videotape)</p> <p>4. Documentation of supervisory experience reflecting diversity</p> <p>5. Documented supervisee feedback</p> <p>6. Self-assessment and awareness of need for consultation when necessary</p> <p>7. Assessment of supervision outcomes—both individual and group</p>
Substance Abuse and Mental Health Services - Administration U.S	USA	2007	<p><b>1. Theories, roles, and modalities of clinical supervision</b></p> <p>- Understand the role of clinical supervision as the principal method for monitoring and ensuring the quality of clinical services.</p> <p>- Appreciate the systemic role of the clinical supervisor as a primary link between management and direct services.</p>



<p>Department of Health and Human Services</p>		<ul style="list-style-type: none"> <li>- Understand the multiple roles of the clinical supervisor, including consultant, mentor, teacher, team member, evaluator, and administrator.</li> <li>- Be able to define the purpose of clinical supervision specific to the organization’s clinical and administrative contexts, including supervisory goals and methods.</li> <li>- Be familiar with a variety of theoretical models of clinical supervision, including (but not limited to) psychotherapy-based, developmental, multicultural, integrative, and blended models.</li> <li>- Be able to articulate one’s model of supervision.</li> <li>- Be familiar with modalities of clinical supervision, including individual, group, direct observation, and consultation.</li> <li>- Be familiar with the current research literature related to recommended practices in both substance use disorder treatment and clinical supervision.</li> <li>- Be familiar with the literature regarding multiple learning strategies (e.g., instructions, demonstrations, role plays, critiques).</li> <li>- Recognize the importance of establishing with the supervisee a productive, healthy learning alliance focused on improving client services and job performance.</li> <li>- Understand and reinforce the complementary roles of members on a multidisciplinary team.</li> <li>- Understand the importance of assessing needs and carefully planning and systematically implementing individual and group supervisory activities that promote clinical and program service improvement.</li> </ul> <p><b>2. Leadership</b></p> <ul style="list-style-type: none"> <li>- Use a leadership style that creates and maintains an environment based on mutual respect, trust, and teamwork.</li> <li>- Be a role model by taking full responsibility for one’s decisions, supervisory practices, and personal wellness.</li> <li>- Seek job performance feedback from supervisees, peers, and managers to improve supervisory practices.</li> <li>- Create, regularly assess, and revise a personal leadership plan to provide direction for one’s continuing professional development.</li> <li>- Seek out and use leadership mentors to assist with one’s personal development, knowledge acquisition, and skill development.</li> <li>- Understand the historical context of treatment for substance use disorders and use that</li> </ul>
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		<p>understanding to participate in developing the agency’s guiding vision and its related mission, principles, and sense of purpose.</p> <ul style="list-style-type: none"> <li>- Clarify agency vision, mission, and service goals and objectives for the supervisee.</li> <li>- Interpret agency mission, policies, procedures, and critical events. Effectively communicate those interpretations to supervisees and foster an organizational climate that promotes continuous improvement and excellence in client care.</li> <li>- Understand, monitor, and ensure compliance with State and Federal regulations and accrediting body (e.g., Commission on Accreditation of Rehabilitation Facilities, Joint - Commission on Accreditation of Healthcare Organizations, Council on Accreditation) standards for the delivery of substance use disorder treatment.</li> <li>- Recognize the safety and security issues facing the organization and participate in enforcing and enhancing organizational policies that ensure the safety and security of clients, personnel, and facilities.</li> <li>- Understand and acknowledge the power differential inherent in the supervisor–supervisee relationship, using power fairly and purposefully avoiding the abuse of power.</li> <li>- Proactively structure and schedule clinical supervision activities.</li> <li>- Teach, mentor, and coach in the context of the organization’s core values.</li> <li>- Provide honest feedback—positive, constructive, and corrective.</li> <li>- Guide through motivational empowerment rather than control. Facilitate work through team building, training, coaching, and support.</li> <li>- Plan and organize for orderly workflow, controlling details without being overbearing.</li> <li>- Empower and delegate key duties to others while maintaining goal clarity and commitment.</li> <li>- Delegate mindfully, considering both the supervisee’s professional development and the agency’s needs.</li> <li>- Encourage supervisee participation in communicating observations, ideas, and suggestions to agency management.</li> </ul> <p><b>3. Supervisory alliance</b></p> <ul style="list-style-type: none"> <li>- Be familiar with the literature about supervisory alliance, including key factors that strengthen or compromise the supervisory alliance, supervisory contracting, and relational issues (e.g., transference and countertransference).</li> <li>- Understand the complex, multilevel, and bidirectional nature of the supervisory triad of client,</li> </ul>
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		<p>counselor, and supervisor. Maintain an awareness of potential dual relationships and boundary violations within the triad.</p> <ul style="list-style-type: none"> <li>- Recognize that the supervisor–supervisee relationship develops over time and that the stage of relationship development influences the rules, roles, and expectations of the alliance.</li> <li>- Conceptualize the supervisor–supervisee relationship as a learning alliance that provides for role induction, includes agreement on goals and tasks, and recognizes the bond that develops between the supervisor and the supervisee.</li> <li>- Understand the value of mentoring as a dynamic way of forming an alliance, teaching counseling skills through encouragement, and giving suggestions for accomplishing goals.</li> <li>- Create an explicit supervisory contract that clarifies expectations and goals, the relationship’s structure and evaluative criteria, and the limits of supervisor–supervisee confidentiality.</li> <li>- Present as a credible professional who possesses knowledge and expertise relevant to the setting and the population being served.</li> <li>- Model ethical behavior vis-à-vis the supervisee and reinforce ethical standards in the relationship between the supervisee and the supervisee’s clients.</li> <li>- Be continually alert to the effects of one’s interpersonal style on the supervisee.</li> <li>- Maintain appropriate boundaries in forming and maintaining a safe and trusting professional relationship.</li> <li>- Attend to cultural, racial, gender, age, and other diversity variables essential to a productive supervisor–supervisee relationship.</li> <li>- Understand, recognize, and know how to ameliorate the effects of personal countertransference triggered by the supervisee’s interpersonal style, the supervisee’s developmental issues, or the supervisee’s unresolved personal issues.</li> <li>- Recognize interpersonal conflict and supervisory impasses, accept appropriate responsibility, and actively participate in resolving difficulties.</li> </ul> <p><b>4. Critical thinking</b></p> <ul style="list-style-type: none"> <li>- Understand the various contexts (e.g., organizational, political, societal, cultural) in which supervision is conducted.</li> <li>- Analyze and evaluate agency issues and policies to better understand, clarify, and participate in the continuous improvement of agency and staff performance and service outcomes.</li> <li>- Evaluate and select written and oral communication strategies appropriate to the audience and</li> </ul>
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		<p>purpose.</p> <ul style="list-style-type: none"> <li>- Select, adapt, implement, and evaluate appropriate problem solving, decision making, and conflict resolution techniques.</li> <li>- Apply experience, insight, and lessons learned to new situations.</li> <li>- Apply critical thinking to information gathering by evaluating the content of the information and the credibility of its source.</li> <li>- Ask supervisees relevant and clarifying questions and listen critically for content and underlying issues in their self-disclosure.</li> <li>- Help supervisees develop skills in case conceptualization and analysis of client– counselor interactions.</li> <li>- Negotiate, communicate, and document the resolution of conflicts or disagreements and strategies for resolving performance problems. Document outcomes.</li> <li>- Develop sound criteria for self-evaluation and clarify personal beliefs, values, and biases.</li> <li>- Help supervisees develop sound criteria for self-evaluation and clarify their beliefs, values, and biases.</li> </ul> <p><b>5. Organizational management and administration</b></p> <ul style="list-style-type: none"> <li>- Recognize that organizational and managerial skills and tasks enhance clinical supervision.</li> <li>- Understand and consistently apply agency policies, procedures, organizational structure, and communication protocols.</li> <li>- Understand the legal demands and liabilities inherent in supervisory and clinical services, including the vicarious liabilities incurred in supervising interns and students.</li> <li>- Be familiar with and abide by current principles, laws, ethical guidelines, and agency policies regarding personnel management.</li> <li>- Learn to implement effective disciplinary and administrative management techniques that enhance clinical supervision and accomplishment of the organization’s mission.</li> <li>- Understand and ensure supervisee compliance with State program licensing requirements and with other State and Federal laws and statutes.</li> <li>- Understand and ensure supervisee compliance with the substance use disorder treatment standards of the organization’s healthcare accrediting body (e.g., Commission on Accreditation of Rehabilitation Facilities, Joint Commission on Accreditation of Healthcare Organizations).</li> <li>- Monitor and maintain the human and technical resources needed to meet organizational</li> </ul>
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			<p>and program objectives.</p> <ul style="list-style-type: none"> <li>- Evaluate and contribute to improving the organization’s cultural proficiency.</li> <li>- Possess and continually improve organizational and time management skills.</li> <li>- Understand and work within the organization’s budgetary constraints.</li> <li>- Effectively apply technology, within agency and regulatory limits, for communication, program monitoring, report writing, problem solving, recordkeeping, case management, and other activities.</li> <li>- Ensure the maintenance, storage, and security of employee records and protected health information consistent with the organization’s policies and procedures, government regulations, and ethical principles.</li> </ul> <p>LINK: <a href="https://www.unodc.org/ddt-training/treatment/VOLUME%20D/Topic%202/7.Compentencies_for_SA_Treatment.pdf">https://www.unodc.org/ddt-training/treatment/VOLUME%20D/Topic%202/7.Compentencies_for_SA_Treatment.pdf</a></p>
American Association for Marriage and Family Therapy	USA	2007	<p>Approved Supervisors must:</p> <ol style="list-style-type: none"> <li>1. Be familiar with the major models of MFT and supervision, in terms of their philosophical assumptions and pragmatic implications.</li> <li>2. Articulate a personal model of supervision, drawn from existing models of supervision and from preferred styles of therapy.</li> <li>3. Facilitate the co-evolving therapist-client and supervisor-therapist-client relationships.</li> <li>4. Evaluate and identify problems in therapist-client and supervisor-therapist-client relationships.</li> <li>5. Structure supervision, solve problems, and implement supervisory interventions within a range of supervisory modalities (for example, live and videotaped supervision).</li> <li>6. Address distinctive issues that arise in supervision mentoring.</li> <li>7. Be sensitive to contextual variables such as culture, gender, ethnicity, and economics.</li> <li>8. Be knowledgeable of ethical and legal issues of supervision.</li> <li>9. Be aware of the requirements and procedures for supervising trainees for AAMFT Clinical Membership.</li> </ol>



			LINK: <a href="http://www.aamft.org/iMIS15/AAMFT/Content/supervision/Responsibilities.aspx">http://www.aamft.org/iMIS15/AAMFT/Content/supervision/Responsibilities.aspx</a>
Association of Social Work Boards	USA	2009	<p>Supervisory Competencies Grouped by Domain (6)</p> <p>A. Supervisory Relationship and Process</p> <ol style="list-style-type: none"> <li>1. Conduct self assessment (supervisor)</li> <li>2. Establish the supervisory relationship</li> </ol> <p>B. Supervision of Supervisee’s Practice</p> <ol style="list-style-type: none"> <li>1. Integrate into ongoing practice the supervisee’s experience using reflection, analysis, and contextual attributes of the case situation</li> <li>2. Facilitate the acquisition of advanced social work knowledge in assessment, case planning, intervention, and evaluation</li> <li>3. Follow up on case planning – investigate/reflect on what happened, and revise plans</li> <li>4. Guide/direct supervisee to ensure ethical practices within regulations and laws affecting social work practice</li> <li>5. Resolve professional ethical dilemmas in providing service to clients</li> <li>6. Assist supervisee in the appropriate use of advocacy with different systems</li> <li>7. Develop learning plans with supervisee using (elements such as):             <ol style="list-style-type: none"> <li>a. Formal case assessments and/or presentations</li> <li>b. Writing assignments</li> <li>c. Conference attendance</li> <li>d. Current research (articles, books)</li> <li>e. Involvement in professional organizations</li> <li>f. Creative arts (movies, plays, novels, art therapy, music, museum visits)</li> </ol> </li> <li>8. Follow up on and modify learning plans</li> <li>9. Address issues of personal safety and risk</li> </ol> <p>C. Professional Relationships (e.g., external providers, managing teams, other professionals,</p>



		<p>colleagues, supervisors)</p> <ol style="list-style-type: none"> <li>1. Supervisees and their colleagues             <ol style="list-style-type: none"> <li>a. Work with supervisee to create collaborative relationships</li> <li>b. Assist supervisees to develop teamwork skills</li> </ol> </li> <li>2. Recognize and respect socio-cultural differences</li> <li>3. Relationship with other systems (inside/outside the work setting)</li> </ol> <p>D. Work Context</p> <ol style="list-style-type: none"> <li>1. Determine whether practice setting policies, procedures, and materials are consistent with social work ethics</li> <li>2. Educate supervisee in financial practices (on issues such as):             <ol style="list-style-type: none"> <li>a. Insurance reimbursement</li> <li>b. Fee setting and collection</li> <li>c. Financial record keeping</li> </ol> </li> <li>3. Identify impaired professionals and take appropriate action</li> <li>4. Monitor use of technology with supervisee (online or telephone supervision; fax; email)</li> <li>5. Educate supervisees regarding socio-cultural sensitivity</li> <li>6. Assess cultural environment of the practice setting</li> <li>7. Help supervisees develop strategies to increase wellness, including managing stress</li> </ol> <p>E. Evaluation</p> <ol style="list-style-type: none"> <li>1. Assess supervisee's:             <ol style="list-style-type: none"> <li>a. learning goals</li> <li>b. level of professional development and experience</li> <li>c. level of social work knowledge</li> <li>d. job context (the agency mission, the job description, job history, role within the agency)</li> <li>e. strengths and challenges</li> <li>f. learning style</li> </ol> </li> <li>2. Monitor supervisee's documentation (case plans, treatment plans) for quality, clarity, completeness, content.</li> </ol>
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			<p>3. Perform formative and summative evaluation. 4. Address inappropriate behaviors and take corrective actions. 5. Evaluate supervisee and provide recommendations</p> <p><b>F. Life-long Learning and Professional Responsibility</b> 1. Promote continuing education specific to the practice setting 2. Encourage and model: a. self-awareness b. professional development c. professional contributions d. professional engagement e. professional consultation 3. Remain current in knowledge base of changing professional practice, laws, and regulations</p> <p>LINK: <a href="https://www.aswb.org/wp-content/uploads/2013/10/supervisionjobanalysis.pdf">https://www.aswb.org/wp-content/uploads/2013/10/supervisionjobanalysis.pdf</a></p>
National Career Development Association – Career Counsellors	USA	2009	<ul style="list-style-type: none"> <li>• Knowledge of supervision models and theories.</li> <li>• Ability to provide effective supervision to career development facilitators at different levels of experience by: <ul style="list-style-type: none"> <li>- knowledge of their roles, competencies, and ethical standards</li> <li>- determining their competence in each of the areas included in their certification</li> <li>- further training them in competencies, including interpretation of assessment instruments</li> <li>- monitoring and mentoring their activities in support of the professional career counselor; and scheduling regular consultations for the purpose of reviewing their activities</li> </ul> </li> </ul> <p>LINK: <a href="http://www.ncda.org/aws/NCDA/pt/sd/news_article/37798/_self/layout_cmsearch/true">http://www.ncda.org/aws/NCDA/pt/sd/news_article/37798/_self/layout_cmsearch/true</a></p>
Behavior Analyst Certification Board	USA	2012	The supervisor should be able to describe and/or demonstrate



<p>- nonprofit corporation that meets professional credentialing needs for behavior analysts, governments, and consumers of behavior analysis services</p>			<ol style="list-style-type: none"> <li>1. The purpose of supervision</li> <li>2. Important features of supervision</li> <li>3. Behavioural skills training</li> <li>4. Delivering performance feedback</li> <li>5. Evaluating the effects of supervision</li> <li>6. Ongoing professional development</li> </ol> <p>LINK: <a href="http://www.bacb.com/Downloadfiles/supervisor_curriculum.pdf">http://www.bacb.com/Downloadfiles/supervisor_curriculum.pdf</a></p>
<p>Guidelines for Clinical Supervision in Health Services Psychology – Board of Educational Affairs Task Force on Supervision Guidelines (APA)</p>	<p>USA</p>	<p>2014</p>	<p>Domain A: Supervisor Competence</p> <ol style="list-style-type: none"> <li>1. Supervisors strive to be competent in the psychological services provided to clients/patients by supervisees under their supervision and when supervising in areas in which they are less familiar they take reasonable steps to ensure the competence of their work and to protect others from harm.</li> <li>2. Supervisors seek to attain and maintain competence in the practice of supervision through formal education and training.</li> <li>3. Supervisors endeavor to coordinate with other professionals responsible for the supervisee’s education and training to ensure communication and coordination of goals and expectations.</li> <li>4. Supervisors strive for diversity competence across populations and settings</li> <li>5. Supervisors using technology in supervision (including distance supervision), or when supervising care that incorporates technology, strive to be competent regarding its use.</li> </ol> <p>Domain B: Diversity</p> <ol style="list-style-type: none"> <li>1. Supervisors strive to develop and maintain self-awareness regarding their diversity competence, which includes attitudes, knowledge, and skills.</li> <li>2. Supervisors planfully strive to enhance their diversity competence to establish a respectful</li> </ol>



		<p>supervisory relationship and to facilitate the diversity competence of their supervisees.</p> <p>3. Supervisors recognize the value of and pursue ongoing training in diversity competence as part of their professional development and life-long learning.</p> <p>4. Supervisors aim to be knowledgeable about the effects of bias, prejudice, and stereotyping. When possible, supervisors model client/patient advocacy and model promoting change in organizations and communities in the best interest of their clients/patients.</p> <p>5. Supervisors aspire to be familiar with the scholarly literature concerning diversity competence in supervision and training. Supervisors strive to be familiar with promising practices for navigating conflicts among personal and professional values in the interest of protecting the public.</p> <p>Domain C: Supervisory Relationship</p> <p>1. Supervisors value and seek to create and maintain a collaborative relationship that promotes the supervisee's competence.</p> <p>2. Supervisors seek to specify the responsibilities and expectations of both parties in the supervisory relationship. Supervisors identify expected program competencies and performance standards, and assist the supervisee to formulate individual learning goals.</p> <p>3. Supervisors aspire to review regularly the progress of the supervisee and the effectiveness of the supervisory relationship and address issues that arise.</p> <p>Domain D: Professionalism</p> <p>1. Supervisors strive to model professionalism in their own comportment and interactions with others, and teach knowledge, skills, and attitudes associated with professionalism.</p> <p>2. Supervisor's are encouraged to provide ongoing formative and summative evaluations of supervisee's progress towards meeting expectations for professionalism appropriate for each level of education and training.</p>
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		<p>Domain E: Assessment/ Evaluation/ Feedback</p> <ol style="list-style-type: none"> <li>1. Ideally, assessment, evaluation, and feedback occur within a collaborative supervisory relationship. Supervisors promote openness and transparency in feedback and assessment, by anchoring such in the competency development of the supervisee.</li> <li>2. A major supervisory responsibility is monitoring and providing feedback on supervisee performance. Live observation or review of recorded sessions is the preferred procedures</li> <li>3. Supervisors aspire to provide feedback that is direct, clear, and timely, behaviorally anchored, responsive to supervisee’s reactions, and mindful of the impact on the supervisory relationship.</li> <li>4. Supervisors recognize the value of and support supervisee skill in self-assessment of competence and incorporate supervisee self-assessment into the evaluation process.</li> <li>5. Supervisors seek feedback from their supervisees and others about the quality of the supervision they offer, and incorporate that feedback to improve their supervisory competence.</li> </ol> <p>Domain F: Problems of Professional Competence</p> <ol style="list-style-type: none"> <li>1. Supervisors understand and adhere both to the supervisory contract and to program, institutional, and legal policies and procedures related to performance evaluations. Supervisors strive to address performance problems directly.</li> <li>2. Supervisors strive to identify potential performance problems promptly, communicate these to the supervisee, and take steps to address these in a timely manner allowing for opportunities to effect change.</li> <li>3. Supervisors are competent in developing and implementing plans to remediate performance problems.</li> <li>4. Supervisors are mindful of their role as gatekeeper and take appropriate and ethical action in response to supervisee performance problems.</li> </ol> <p>Domain G: Ethical, Legal, and Regulatory Considerations</p>
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			<ol style="list-style-type: none"> <li>1. Supervisors model ethical practice and decision making and conduct themselves in accord with the APA ethical guidelines, guidelines of any other applicable professional organizations, and relevant federal, state, provincial, and other jurisdictional laws and regulations.</li> <li>2. Supervisors uphold their primary ethical and legal obligation to protect the welfare of the client/patient.</li> <li>3. Supervisors serve as gatekeepers to the profession. Gatekeeping entails assessing supervisees' suitability to enter and remain in the field</li> <li>4. Supervisors provide clear information about the expectations for and parameters of supervision to supervisees preferably in the form of a written supervisory contract.</li> <li>5. Supervisors maintain accurate and timely documentation of supervisee performance related to expectations for competency and professional development.</li> </ol> <p>LINK: <a href="http://www.apa.org/about/policy/guidelines-supervision.pdf">http://www.apa.org/about/policy/guidelines-supervision.pdf</a></p>
Centre for Addiction and Mental Health	Canada	2008	<p>COMPETENCY AREA + MICRO SKILLS</p> <ol style="list-style-type: none"> <li>1. Knowledge <ul style="list-style-type: none"> <li>• Knowledge of area being supervised</li> <li>• Knowledge of relevant models, theories, interventions and research</li> <li>• Knowledge about clinicians'</li> <li>• Learning and professional development</li> <li>• Knowledge of ethical and legal issues relating to supervision</li> <li>• Knowledge of clinical outcome and process evaluation</li> <li>• Knowledge and awareness of diversity, marginalization and oppression issues and diversity competence</li> </ul> </li> <li>2. Skills <ul style="list-style-type: none"> <li>• Supervision methods</li> <li>• Relationship skills (building a supervisory alliance)</li> <li>• Sensitivity to multiple roles with supervisee and able to balance multiple roles</li> <li>• Ability to provide constructive and effective feedback</li> <li>• Ability to promote supervisee self-assessment and growth</li> <li>• Ability to conduct own self-assessment process</li> <li>• Ability to assess supervisee's learning needs and developmental level</li> </ul> </li> </ol>



		<ul style="list-style-type: none"> <li>• Ability to encourage and use evaluative feedback from supervisees</li> <li>• Teaching skills</li> <li>• Ability to set appropriate boundaries and seek consultation/ supervision (assess own competence)</li> <li>• Flexibility</li> <li>• Integrating and presenting evidence-based practice and best practice principles</li> <li>• Documentation procedures</li> <li>• Ability to impart evidence-based practice knowledge within the supervisory session</li> </ul> <p>3. Values</p> <ul style="list-style-type: none"> <li>• Supervisor is accountable for supervision provided—to supervisee and to client</li> <li>• Respectful</li> <li>• Responsible for diversity awareness and competence</li> <li>• Balance between support and constructive feedback/ challenging</li> <li>• Empowering</li> <li>• Commitment to continuous learning and professional growth</li> <li>• Balance between clinical and training needs</li> <li>• Valuing ethical principles</li> <li>• Knowing and using supervision research and best practices</li> <li>• Committed to knowing own limitations</li> </ul> <p>4. Social context</p> <ul style="list-style-type: none"> <li>• Diversity overarching</li> <li>• Ethical and legal issues</li> <li>• Developmental process</li> <li>• Knowledge of organization and expectations re. clinical supervision</li> <li>• Awareness of socio-political context within which supervision is conducted</li> <li>• Creation of climate in which authentic, honest feedback is the norm (both supportive and challenging feedback)</li> </ul> <p>5. Training in supervision competencies:</p> <ul style="list-style-type: none"> <li>• Continuing education in supervision knowledge and skills supervision</li> <li>• Receives supervision of supervision, including observation competencies (videotape/audiotape/in vivo observation with critical feedback)</li> </ul>
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			<p>6. Assessment of supervision competencies:</p> <ul style="list-style-type: none"> <li>• Successful completion of supervision course / workshop supervision</li> <li>• Documented evidence of supervision of supervision, noting competencies readiness to supervise independently</li> <li>• Evidence of direct observation</li> <li>• Documented evidence of supervisory experience reflecting diversity competence</li> <li>• Documented supervisee feedback</li> <li>• Self-assessment and awareness of need for consultation / supervision when necessary</li> <li>• Assessment of supervision outcomes</li> <li>• Impact of client outcomes</li> </ul> <p>(Adapted from Falender et al., 2004)</p>
<p>Health Workforce Australia, Human Capital Alliance</p> <p>- Consul public/private organizations through research and planning, program evaluation, competency based management, and aboriginal health workforce</p>	Australia	2012	<ol style="list-style-type: none"> <li>1. Development of competence</li> <li>2. Summative assessment of competence</li> <li>3. Administration of clinical supervision</li> <li>4. Facilitate safety in clinical supervision</li> </ol> <p>Four levels of competence exist.</p> <p>1. Level One Perform clinical supervision activities within a known and stable context, narrow parameters and under supervision. Assist with teaching and learning activities to facilitate the development of a trainee's competence in the clinical environment.</p> <p>Level Two Perform clinical supervision independently within a defined context, established parameters and defined levels of delegation. Apply the principles of adult learning and mentoring to facilitate the development of a trainee's competence in the clinical environment.</p> <p>Level Three Perform clinical supervision autonomously in a changing context with broad parameters. Support and guide others in performing clinical supervision within established protocols. Plan, coordinate and support others undertaking learning and development activities. Monitor the effectiveness of learning and development programs and participate in evaluation of learning and development processes and resources.</p>



			<p>Level Four</p> <p>Provide leadership in clinical supervision. Develop systems, processes, resources and individuals to enhance the practice of clinical supervision. Design, implement and evaluate learning and development programs and systems and processes.</p> <p>LINK: <a href="http://www.hwa.gov.au/sites/uploads/Draft_Compentency_Framework_for_Clinical_Supervision_Aug_2012.pdf">http://www.hwa.gov.au/sites/uploads/Draft_Compentency_Framework_for_Clinical_Supervision_Aug_2012.pdf</a>.</p>
Health Workforce Australia	Australia	2013	<ol style="list-style-type: none"> <li>1. Clinical supervision             <ol style="list-style-type: none"> <li>1.1 Prepare and plan</li> <li>1.2 Facilitating learning</li> <li>1.3 Problem solve</li> <li>1.4 Communication</li> </ol> </li> <li>2. Safety and quality in clinical supervision             <ol style="list-style-type: none"> <li>2.1 Safety</li> <li>2.2 Quality</li> </ol> </li> <li>3. Organization             <ol style="list-style-type: none"> <li>3.1 Integration of supervision and learning activities in clinical practice</li> <li>3.2 Organizational skills/time management</li> </ol> </li> </ol> <p>LINK: <a href="https://www.hwa.gov.au/sites/uploads/HWA-National-Clinical-Supervision-Competency-Resource-VE-201305.pdf">https://www.hwa.gov.au/sites/uploads/HWA-National-Clinical-Supervision-Competency-Resource-VE-201305.pdf</a></p>
British Psychological Society's Centre for Outcome Research	UK	2007	<ol style="list-style-type: none"> <li>1. Generic supervision competencies             <ol style="list-style-type: none"> <li>1.1 Ability to employ educational principles which enhance learning</li> <li>1.2 Ability to enable ethical practice</li> <li>1.3 Ability to foster competence in working with difference</li> </ol> </li> </ol>



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<p>and effectiveness (CORE)</p> <p>- Based in the Research Department of Clinical, Educational and Health Psychology.</p>			<ul style="list-style-type: none"> <li>1.4 Ability to adapt supervision to the organizational and governance context</li> <li>1.5 Ability to form and maintain a supervisory alliance</li> <li>1.6 Ability to structure supervision sessions</li> <li>1.7 Ability to help the supervisee present information about clinical work</li> <li>1.8 Ability to help the supervisee’s ability to reflect on their work and on the usefulness of supervision.</li> <li>1.9 Ability to use a range of methods to give accurate and constructive feedback</li> <li>1.10 Ability to gauge supervisee’s level of competence</li> <li>1.11 Ability for supervisor to reflect (and act on) on limitations in own knowledge and experience</li> <li>2. Specific supervision competencies             <ul style="list-style-type: none"> <li>2.1 Ability to help the supervisee practice clinical skills</li> <li>2.2 Ability to incorporate direct observations into supervision</li> <li>2.3 Ability to apply standards</li> </ul> </li> <li>3. Applications of supervision to specific models/contexts             <ul style="list-style-type: none"> <li>3.1 Supervision of clinical case management</li> <li>3.2 Supervision of low intensity interventions</li> <li>3.3 Supervision of CBT</li> <li>3.4 Supervision of psychodynamic therapy</li> <li>3.5 Supervision of systemic therapy</li> <li>3.6 Supervision of humanistic therapy</li> <li>3.7 Supervision of IPT</li> </ul> </li> <li>4. Metacompetencies             <ul style="list-style-type: none"> <li>4.1 Adapting process and content to supervision</li> <li>4.2 Giving Feedback</li> <li>4.3 Managing concerns about the supervisee’s ability to use supervision</li> <li>4.4 Managing serious concerns about practice</li> <li>4.5 Low intensity supervision</li> </ul> </li> </ul>
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			LINK: <a href="http://www.ucl.ac.uk/clinical-psychology/CORE/supervision_framework.htm">http://www.ucl.ac.uk/clinical-psychology/CORE/supervision_framework.htm</a>
School Counselling Competencies			Unable to find school counsellor competencies.