What is Clinical Supervision?

CLINICAL SUPERVISION REVIEWS A SUPERVISEE’S WORK
• It is an organized, intentional process that ensures client welfare, supervisee development, and adherence to ethical and legal standards of clinical practice.

CLINICAL SUPERVISION OCCURS AT REGULAR, CONSISTENT INTERVALS
• The Board recommends a minimum of one (1) hour of Clinical Supervision for every 40 hours of work.
• The frequency of clinical supervision should be determined by the skill level and experience of the supervisee and the context of the services provided.

CLINICAL SUPERVISION INVOLVES FACE-TO-FACE CONTACT
• It utilizes a variety of methods (such as Direct Observation, Audio/Video Recording, Individual and Group Supervision) as the unique needs of supervisees are identified.
• It includes a review of the Supervisee’s clinical documentation and discussion of ethics and scope.

CLINICAL SUPERVISION IS A FORMALIZED PROCESS
• It includes a written supervision contract with clear descriptions of the goals, context, methods, frequency, and responsibilities of both supervisee and supervisor.
• It includes documentation of supervision session dates, lengths and content.

Who Needs Clinical Supervision?

CDCA - A CDCA may practice only while under formalized supervision.
LCDC II - An LCDC II may not practice as an independent practitioner. While this license does not require formalized clinical supervision it is strongly recommended.
LCDC III - An LCDC III may not practice as an independent practitioner and needs formalized clinical supervision if they are diagnosing or clinically supervising others. Clinical supervision for all other areas of practice, while not required, is strongly recommended.
LICDC - An LICDC needs formalized clinical supervision if they are clinically supervising others and do not hold the CS Endorsement.

Who Can Provide Clinical Supervision?
• LCDC III & LICDC (if they are under clinical supervision), LICDC-CS
• Psychologist
• RN, CNP or CNS (if consistent with scope), Physician
• LPCC, LPCC-S, LISW, LISW-S, IMFT, IMFT-S (if consistent with scope)