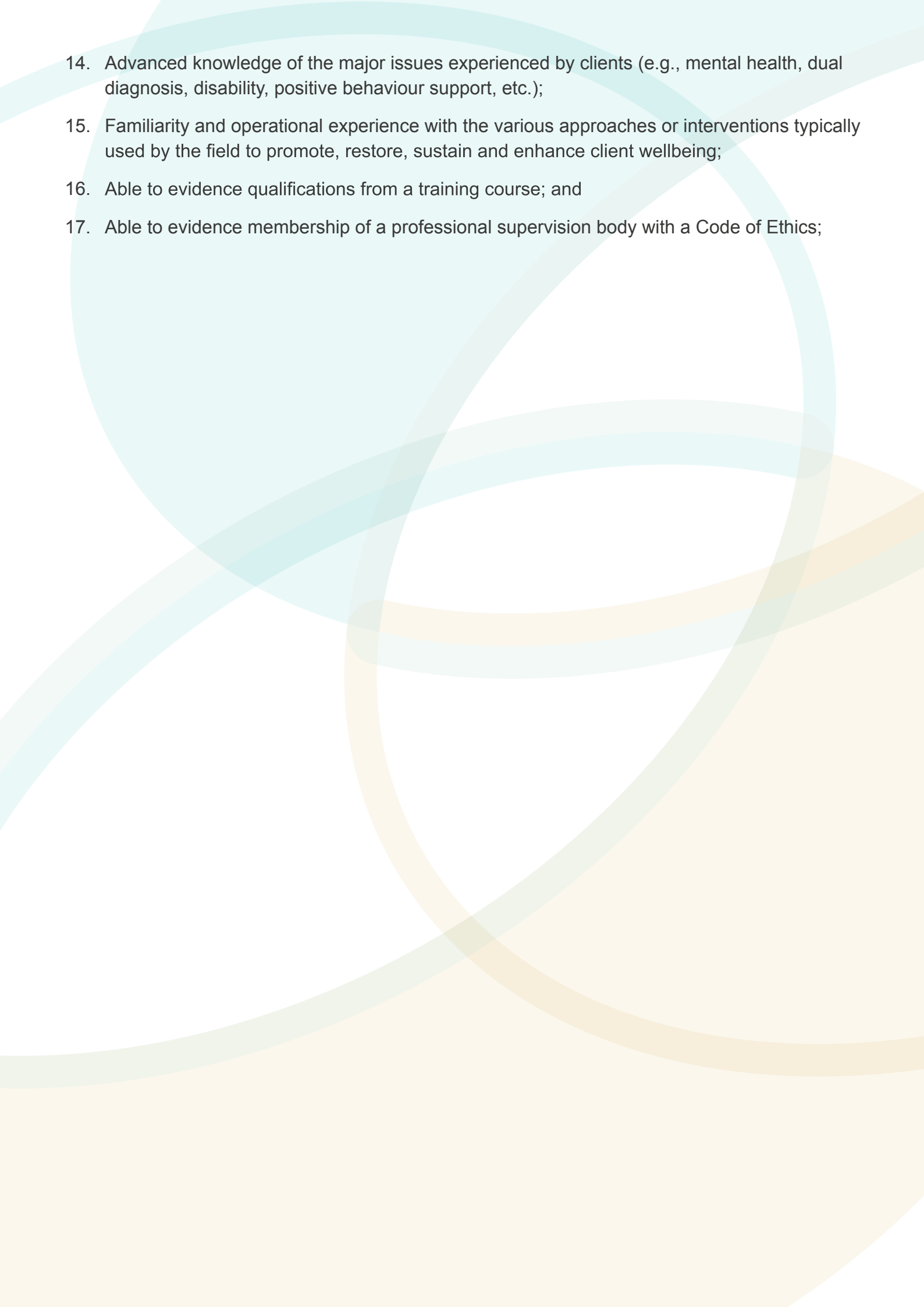


Clinical Supervisor's Competencies

Clinical supervision is a skill in and of itself that has to be developed and maintained. Clinical supervisors need a role orientation toward both program and client goals and a knowledge base to complement a new set of skills. Clinical supervisors in the community services will function most effectively when they achieve competency both in clinical supervision as a discipline generally, and in considerable competency as relevant to their specific context.

GENERAL CLINICAL SUPERVISOR COMPETENCIES

1. Familiarity with the major models of clinical supervision, in terms of philosophical assumptions and practical implications, and the ability to compare and contrast them with other models;
2. The capacity to articulate a personal model of supervision, drawn from existing models of supervision and from preferred styles of therapeutic practice;
3. Awareness of and sensitivity to the wider context and its influence on the supervisory relationship and processes (e.g., the organisational culture and policies, the client population, etc.);
4. The capacity to attend capably to the multiple functions and tasks of clinical supervision;
5. The capacity to facilitate the co-evolving relationships between the worker-client and supervisor-worker-client relationships, identifying and addressing problems that arise;
6. Ability to structure supervision and implement supervisory interventions within a range of modalities (e.g., case presentations; role plays; live supervision; review of transcribed or videotaped sessions);
7. Awareness and sensitivity to contextual variables such as race, culture, gender, sexuality, disability, economics and lived experience, and how they impact on the range of working relationships (e.g., worker-client, supervisor-worker-client, and peer-peer);
8. Knowledge of the service delivery protocol and treatment standards of the employing organisation(s) as well as the ethical mandates of relevant professional bodies;
9. Knowledge about processes for working through ethical dilemmas in clinical supervision;
10. Awareness of legal issues which may arise in clinical supervision, and commitment to ensuring that supervisees are also aware of these (e.g., duty to report, limits of confidentiality, etc.);
11. Skill in giving and receiving feedback in clinical supervision, both informally (e.g., in the course of supervision sessions) and formally (e.g., planned and documented reviews of supervision process and of supervisees' clinical skills);
12. The capacity to provide a high standard of record keeping for clinical supervision sessions;
13. The capacity to reflect on one's own clinical supervision practices, with a network of peers, or one's own clinical supervisor;

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14. Advanced knowledge of the major issues experienced by clients (e.g., mental health, dual diagnosis, disability, positive behaviour support, etc.);
 15. Familiarity and operational experience with the various approaches or interventions typically used by the field to promote, restore, sustain and enhance client wellbeing;
 16. Able to evidence qualifications from a training course; and
 17. Able to evidence membership of a professional supervision body with a Code of Ethics;