



Policy Title:	Personnel: Supervision of SCCCMH Staff
Policy #:	06-001-0020
Effective Date:	11/26/2024
Approved by:	Telly Delor, Chief Operating Officer
Functional Area:	Program Operations and Human Resources
Responsible Leader:	Kathleen Gallagher, Chief Clinical Officer and Kimberly Prowse, Director of Human Resources
Policy Owner:	Jody Kruskie, Labor/Employee Relations Manager
Applies to:	SCCCMH Staff

Purpose: To implement CARF Program/Service/Structure 2.A-25 & 26.

I. Policy Statement

It is the policy of St. Clair County Community Mental Health (SCCCMH) to ensure that supervision will be provided to all staff, both administrative and clinical, as appropriate.

II. Standards

- A.** A professional staff who is licensed, certified, or registered by the state of Michigan will provide clinical supervision to non-professional direct service staff.
- B.** When applicable, ongoing supervision of direct service personnel addresses the following (per CARF Behavioral Health Standards Manual):
 - 1. Accuracy of assessment and referral skills, when applicable.
 - 2. The appropriateness of the treatment or service intervention selected relative to the specific needs of each person served.
 - 3. Treatment/service effectiveness as reflected by the person served meeting their individual goals.
 - 4. The provision of feedback that enhances the skills of direct service personnel.
 - 5. Issues of ethics, legal aspects of clinical practice, and professional standards, including boundaries.
 - 6. Clinical documentation issues identified through ongoing compliance review.

7. Cultural competency issues.
 8. Model fidelity, when implementing evidence-based practices.
- C. Formal supervision should be at a frequency deemed necessary by the *supervisor* or as directed by Leadership.
 - D. Supervisory format must be endorsed by the Chief Clinical Officer for each supervisory unit and should be attached to the *Program Supervisory Plan*. The format may vary from supervisory unit to supervisory unit but should be consistent within any supervisory unit. The format must delineate between clinical and administrative issues and document clearly expected outcomes.

III. Procedures, Definitions, and Other Resources

A. Procedures

Responsibilities

Position	Responsibilities
Clinical Program Supervisor	Assess program supervisory needs and develop a Program Supervisory Plan Outline.
Chief Clinical Officer	Review/revise as necessary/approve Program Supervisory Plan Outline.
All Supervisors	Document <i>clinical and/or administrative supervision</i> of staff.
Supervisor	Maintain documentation of supervision in confidential program file.

Actions

Action Number	Responsible Stakeholder	Details
1.0	Clinical Program Supervisor	<ol style="list-style-type: none"> 1. Assess program supervisory needs based upon factors such as population served, intensity, and modality of treatment, makeup and needs of staff program capacity, etc. 2. Develop form #0726 Program Supervisory Plan Outline which indicates requirements for frequency of supervision for all professional disciplines within the program, and if needed for any paraprofessional staff, the suggested modality (group by discipline, planning team, individual, etc.) through which supervision will be provided, and designates alternate qualified staff to provide clinical supervision if that best meets program/division needs.
2.0	All Supervisors	<ol style="list-style-type: none"> 3. Utilize standardized supervisory form #0735 Clinical or Direct Service Personnel Supervision or standardized supervisory form #0737 Administrative Supervision Summary to document clinical and/or administrative

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		supervision of staff. 4. Forward form #0726 Program Supervisory Plan Outline to Chief Clinical Officer for review and approval.
3.0	Chief Clinical Officer or Designee	5. Approve form #0726 Program Supervisory Plan Outline and/or negotiates any revisions. 6. Include program specific supervisory responsibilities on supervisor's Functional Job Task List. 7. Maintain master file of Program Supervisory Plan Outline documents.
4.0	Supervisor	8. Ensure there is consistency in terms of how much supervision is needed for a given employee when possible. 9. Ensure that supervision is conducted within the program and is documented via the approved Supervisory Form. If appropriate, the supervision should also be documented on form #1034 Case Consultation and submitted electronically to the case file.
5.0	Supervisor	10. Maintain documentation of supervision in confidential program file; do not forward to personnel files. 11. Complete form #0702 Employee Communication Memorandum to note any accolades or concerns that are raised during a supervision session. 12. Forward form #0702 Employee Communication Memorandum for filing in the employee's personnel file.

B. Related Policies

N/A

C. Definitions

1. *Administrative Supervision:* Oversight, by a supervisor, of emergency and day-to-day program and employee functioning. This may be done through individual, group, and full staff meetings. Topics for administrative supervision may include employee recognition for significant efforts, education regarding agency policies and protocols, reinforcement of program standards, program development activities, employee discipline, time management, general agency information sharing, employee evaluation, clinical protocols, education regarding Level I authorizations, as well as other activities.
2. *Clinical Supervision:* Oversight, by a supervisor, of emergency and day-to-day clinical interventions and services provided to persons open for services by

professional and paraprofessional staff. Clinical supervision is usually provided face to face, either individually, such as when a supervisor meets with a staff member, or in a team when staff meet together to discuss a case or cases. It may include activities such as support, education, skill building, and improvement feedback.

3. *Program Supervisory Format*: A standard format used within a supervisory unit to document issues and expected outcomes from supervision sessions.
4. *Clinical Program Supervisory Plan*: An attachment to the annual Program Contract that specifies, supervision requirements for service program staff. The plan is based upon a supervisory assessment of a variety of program factors such as population, intensity of services, skills and experience of program staff standards imposed by external agencies (Evidence Based Practices, etc.) and program capacity.
5. *Supervisor*: Includes all positions beginning with the level of manager through and including the Chief Executive Officer.

D. Forms

[#0702 Employee Communication Memorandum](#)

[#0726 Program Supervisory Plan Outline](#)

[#0735 Clinical or Direct Service Personnel Supervision](#)

[#1034 Case Consultation](#)

[#0737 Administrative Supervision Summary](#)

E. Other Resources (i.e., training, secondary contact information, exhibits, etc.)

N/A

F. References

1. CARF Program/Service/Structure 2. A-25 & 26

IV. History

- Initial Approval Date: 03/1997
- Last Revision Date: 11/2024 BY: Jody Kruskie
- Last Reviewed Date: 09/2003
- Non-Substantive Revisions: N/A
- Key Words: Supervision, Supervisory Plan Outline, Case Consultation