

ATTENTION SUPERVISORS

In its ongoing effort to improve the quality of clinical supervision, the Board encourages all supervisors to read the following information.

- A supervisor needs to understand the responsibility/liability assumed when supervising another licensee's practice.
- A supervisor must be familiar with not only his/her profession's statutes and regulations, but also those of their supervisee's.
- A supervisor may want to seek out supervision continuing education to insure he/she is aware of the issues surrounding supervision.
- A supervisor needs to understand that poor supervision may be considered unprofessional conduct. Please review the Unprofessional Conduct Regulation for your profession for more information.
- A supervisor is expected to respond to contact from the Board in a timely manner.
- A supervisor needs to understand the statutory emphasis on psychotherapy and assessment in the post-graduate experience.
 - ❖ During the postgraduate supervised experience the supervisee must be providing psychotherapy and diagnosing mental disorders listed in the DSM IV-TR. The board understands not all clinical contacts require the supervisee provide a formal diagnosis. Therefore, it is acceptable and encouraged that the supervisee assess clients, form a diagnosis using the DSM IV-TR, and review/defend the diagnosis in supervision.
- The board requests that a designated backup supervisor be in place when the training plan is submitted. This is requested in order to ensure supervision is available at all times, should there be an emergency and the main supervisor is unavailable.
- A supervisee must receive one hour of supervision after he/she has accrued the specified number of hours of direct client contact required by regulation. The ratio of supervision to direct client contact varies depending on the supervisee's profession. This ratio may be found in the supervisee's professional regulations. If supervision is not provided in this manner, the supervisee will not be given credit for the direct client contact that exceeds this ratio.
- It is recommended a supervisor give intermittent written feedback to a supervisee, which includes the accumulated clinical contact hours and supervision hours completed to date. Quarterly statements are recommended. In the event of an unplanned unavailability of a supervisor, these reports may become very important to the supervisee.

ATTENTION SUPERVISORS CONTINUED

- Hours completed prior to a training plan being approved by the board cannot be counted. The approval date of a training plan will be assigned when the training plan has been reviewed and approved.
- All changes to a training plan must be submitted to the board for approval within 45 days of the proposed change(s). Otherwise, the supervisee will not be allowed to further count any hours accrued until the board has received and approved the proposed change(s).
- If the postgraduate supervised experience is being completed in the State of Kansas, both the supervisor and the supervisee must hold an active Kansas license throughout the entirety of the supervision process unless working at a federal agency, military base, or on a reservation.
- Supervision training plans shall only be approved if the supervisee is practicing in the State of Kansas. This applies even if the supervisor and supervisee are both licensed in Kansas.