

Clinical Supervision Record - Treat First

Date:

Starting Time:

Ending Time:

Supervisee/Employee:

Supervisor:

Circle Method(s): Ind/Group; In-person or via teleconference webcam; live, audio recording, Other:

Clinical Issues discussed (do not include patient info):

% of supervision: _____

Ethics & Legal Issues
Informed Consent / Confidentiality / Releases of Information
Competency
Dual Relationships / Boundaries
Case Conceptualization
Risk Assessment / Crisis Intervention
Safety Planning Diagnosis / Assessment Substance Use
Treatment Trauma Informed Care Treatment Planning
Client Progress & use of measures/ Assessments of progress
Team Meetings / Treatment Team collaboration!
Evidence Based Practice / Promising Practices
Practice/ Intervention skills
Emergent client situations
Multicultural / Diversity Issues; Language

Community Supports/Information & Referrals
School/Employment issues for clients
Documentation / Progress Notes
Individual/Family/Group issues
Termination / Discharge issues
Transference / Countertransference
Supervisee emotional reactivity
Supervisee self-exploration / Self-awareness
Supervisee self-care
Duties /expectations / responsibilities
Professionalism
Communication skills of supervisee
Time management of supervisee
Attitude/Judgment of supervisee
Problem solving of supervisee
Flexibility of supervisee
Supervision Goals & Objectives
Supervisee Training Plan
Policy / Procedures
Licensure requirements for supervision

Data / Productivity issues discussed

% of supervision: _

Patient Satisfaction Surveys
Treat First (TF) Session Check-In
Treat First Overall Evaluation of Work Together Caseload
New Assessments (same-day intakes / TF)
Monthly Productivity Encounters: Individual / Group:
No-shows / Cancellations
Treatment Plans current (90 days)
Notes completed and locked within 48 hours
Peer Review Chart Audits

Training discussed

Online/provider req'd

CEUs

CPR / CPI

% of supervision: _____

Administrative discussed

Community involvement

Licensure renewal / requirements

% of supervision: _____

Resources / literature / material discussed

% of supervision: _____

Supervisee strengths/challenges

% of supervision: _____

Tasks to be completed:

Comments/Observations:

Signatures

Supervisor:

Supervisee