



Minnesota Department of **Human Services**

Clinical Supervision

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THE PLANNING FOR AND PROVISION OF CLINICAL SUPERVISION

Objectives of Training

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- To provide information regarding changes to the rule as it relates to clinical supervision
- To provide clarification around clinical supervision expectations
- To provide examples and explanations for the new clinical supervision expectations

Who do these new rules govern

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- These rules cover the provision of services for MHCP clients and the submission of claims.
- While there is “piggybacking” with boards’ requirements for who may be a clinical supervisor these rules are **NOT** for the purpose of licensure supervision or take the place of Licensure Board rules

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- Clarification has been made with regards to which professions fall into the MH Professional categories and who is considered a MH Practitioner clinical trainee.
- **NEW:** Practitioners on licensure track (clinical trainees) are allowed to conduct DA and psychotherapy under appropriate supervision and bill under supervisors license
 - **No longer exclusive** to Rule 29, Community Mental Health Center or Outpatient Hospital

WHO IS THE SUPERVISEE?

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Who is required to receive clinical supervision?

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- ❖ All mental health practitioners who are providing services defined in this rule

Specifically:

- Clinical trainees doing DA's or psychotherapy as part of a legitimate internship or on an approved licensure track to be a MH Professional
- Other Mental Health Practitioners working within a ADULT day treatment, DBT or partial hospitalization program

MH Practitioners: *Clinical Trainees*

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- **Complying with requirements for licensure or board certification as a mental health professional including the supervised practice in the delivery of mental health services for the treatment of mental illness**

OR

- **A student in a bona fide field placement or internship under a program leading to completion of the requirements for licensure as a mental health professional**

Interns

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- **Even if your licensing board does not require the clinical supervisor standards for interns, for the sake of BILLING, we do require the clinical supervisor to meet the requirements of their boards around clinical supervisor standards!**

MH Practitioners: *Clinical Trainees*

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- Supervised by a mental health professional who is qualified as a clinical supervisor
 - Gain knowledge and skills necessary to practice effectively and independently and may include supervision of direct practice; treatment team collaboration; continued professional learning; job management

CLINICAL SUPERVISOR

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**MINNESOTA RULE 9505.0371.
SUBP 4, ITEMS A, B, C AND D .**

Check with your licensing board!

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- Look to your licensing board to find out what is required in order to be recognized as a clinical supervisor!

Clinical Supervisor Requirements

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- Is a licensed mental health professional
 - Defined in 9505.0371 subp.5, A
- Holds license without restrictions, in good standing for at least one year, performed at least 1,000 hours clinical practice;
- Approved, certified, or in some other manner recognized as a qualified clinical supervisor by the person's professional licensing board, **when a board requirement**;

Clinical Supervisor Requirements (cont.)

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- Is competent as demonstrated by experience and graduate-level training in the area of practice and the activities being supervised
- Is not supervisee's blood or legal relative or cohabitant, or someone who has acted as the supervisee's therapist in past two years
- Has experience and skills that are informed by advance training, years of experience, and mastery of a range of competencies

Clinical Supervisor Requirements (cont.)

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- Accepts full professional liability for the supervisee's direction of clients' mental health services
- Instructs supervisee, oversees quality and outcome of supervisee's work

Clinical Supervisor Duties

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- Review, approve, and sign the diagnostic assessment, ITP and ITP reviews created by supervisee
- Review and approve the progress notes according to the supervisee's supervision plan
- Be employed by or under contract with the same agency as the supervisee

Clinical Supervisor Duties (cont.)

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- Develop a clinical supervision plan for each supervisee
- Ensure that each supervisee receives the guidance and support needed to provide treatment services in areas where the supervisee practices and promote cultural competence
- Establish an evaluation process that identifies the performance and competence of each supervisee

Clinical Supervisor MHCP Enrollment

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- Clinical supervisors need to complete the form **“Qualified Mental Health Professional Clinical Supervision Assurance Statement” (DHS-6330-ENG)** in order to be identified as a clinical supervisor for reimbursement purposes
 - ✦ <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6330-ENG>
- Enrollment must be completed prior to claim submission!
- You will not hear back regarding your submitted form.

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**MINNESOTA RULE 9505.0371.SUBP 4, ITEMS A, B, C AND D .
SUBP 5, ITEM D**

Clinical Supervision Modalities

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Individual

- One supervisee and one or more clinical supervisors

Group

- Two to six supervisees and one clinical supervisor

Electronic (Interactive telecommunications)

- Must comply with telemedicine standards

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Must be based on each supervisee's written supervision plan and must:

- Promote professional knowledge, skills, and values development
- Model ethical standards of practice
- Promote cultural competency
- Promote family involvement: recognize the client's family as part of the treatment process, their knowledge about the client, and encourage their participation in treatment planning (for adults, when client allows)
- Monitor, evaluate, and document the supervisee's performance of assessment, treatment planning and service delivery

Clinical Supervision Plan

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- Developed by supervisor and supervisee.
- Reviewed and updated at least annually.
- Completed/implemented within 30 days of employment for newly hired staff

Contents of “The Plan”

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- | | |
|---|--|
| <ul style="list-style-type: none"> • Supervisee name and qualifications & agency name • Name, licensure, and qualifications of the supervisor • Number of individual and group supervision hours | <ul style="list-style-type: none"> • Policy and method that the supervisee must use to contact the clinical supervisor during service provision to a supervisee • Procedures supervisee must use to respond to client emergencies • Authorized scope of practice (3 sub-items) |
|---|--|

Authorized Scope of Practice

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- **Three sub items:**
 - a) Description of the supervisee's service responsibilities
 - b) description of the client population
 - c) treatment methods and modalities

Where Does the Plan Go?

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- **In the supervisee's personal record**
 - Check with your HR Department regarding how long to retain records
 - ✦ If no policy exists, make one!

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Documentation of clinical supervision

- Client specific versus
- Supervisee specific

From the Supervision Plan Example:

- Supervisor is responsible for maintaining supervision notes. Those notes, presenting recommendation for specific cases, will be kept in the case file. Other supervision targeting your professional skills and professional growth will be kept in a supervision file specific to you. All supervision meetings will be documented, reviewed and signed by both of us (supervisee and supervisor). Agency must decide who has access to supervisee file.

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The requirements/ experience of the supervisor

Supervisor (Minnesota Rule 9505.0371, subpart 4, item C, 2):

From the Supervision Plan Example:

- Name: Theresa Thomas. LICSW. LMFT.
- Psychology Doctor.
- Board approved supervisor since 1999 by the SW, MFT, and Psychology Board.
- Experience: 17 years of direct services focused on relationship problems, depression and PTSD in low income families and individuals. 11 years of supervision experience after participating in a supervision group for supervisors for 2 years at the OKE U of MN. Adjunct Professor for the Psychology department since 1995.

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Cultural considerations are to be imbedded in the process of supervision

From Supervision Plan example:

We will utilize supervision time to focus on the use of self in regards to culturally mindful practices, to increase your awareness on how your own culture impacts the therapeutic process, case conceptualization, differential diagnosis and clinical summary.

What do we mean by Cultural Considerations?

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• “Cultural Influences” defined in 9505.0370 subp.9

- Racial or ethnic self-identification
- Experience of cultural bias as a stressor
- Immigration history and status
- Level of acculturation
- Time orientation
- Social orientation
- Verbal communication style
- Locus of control
- Spiritual beliefs
- Health beliefs (including culturally specific healing practices)

Additional Resources

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- **Children's and Adult Mental Health Website**
 - http://www.dhs.state.mn.us/dhs16_160315
- **Bulletin**
 - Q&A
- **Send questions to:**
 - DHS.AdultMHFunding@state.mn.us

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Thank you!