

St. Clair County Community Mental Health  
**Clinical or Direct Service Personnel Supervision**

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Date: \_\_\_\_\_

Name of Staff: \_\_\_\_\_

*(Please Print Names)*

Name of Person Providing Supervision: \_\_\_\_\_

**Specialized Training Provided to Staff:**

- QIDP** (Qualified Intellectual Disability Professional)
- QMHP** (Qualified Mental Health Professional)
- CMHP** (Child Mental Health Professional)
- CAADC/CADC** (Certified (Advanced) Alcohol & Drug Counselor)

**Length of Supervision:**

- 15 Minutes                       30 Minutes
- 45 Minutes                       60 Minutes
- 120 Minutes                       Other: \_\_\_\_\_

**Topics Covered:**

- Accuracy of assessment and referral skills (appropriateness of referral)
- The appropriateness of the treatment or service intervention selected relative to the specific needs of each person served (medical necessity).
- Treatment/service effectiveness as reflected by the person served meeting goals identified in the persons centered plan.
- Risk factors for suicide and other dangerous behaviors.
- Issues of ethics, legal aspects of clinical practice, and professional standards, including boundaries.
- Cultural competency issues
- Model fidelity, when implementing evidence based practices
  - Curriculum changes?       Yes       No
- Staff productivity
- Service utilization – Frequency, Scope, and Duration
- Integrated Care/Health Status
- Trauma

**Case(s) Reviewed:** \_\_\_\_\_ **Next Meeting:** \_\_\_\_\_

**Summary of Session:**

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date