

Definition of Terms

BCACC Approved Clinical Supervisor: an RCC who has completed the requirements established by BCACC for the Approved Clinical Supervisor (ACS) designation.

Clinical Supervision: a planned, goal-directed and systemic activity that takes place on a regular basis between a more experienced and trained clinical supervisor and a supervisee.

The goals of supervision are:

- provide oversight of client care and supervisee safety;
- facilitate ongoing supervisee professional development; ensure ethical clinical decision-making as well as cultural competence;
- encourage the growth of the supervisee by creating a trusting atmosphere where knowledge of self,
- including blind spots can be explored through timely, supportive feedback;
- function in a gate-keeper role to the profession of counselling through the assessment, both formal and informal, of the supervisee's knowledge and skills;
- develop and implement plans to remediate performance problems to assist in their development.
- assist the supervisee to explore the various complexities of their relationship to their client, through reflection and introspection.

A **Clinical supervisor** bears significant liability and responsibility for the work done by the supervisee, it is collaborative and supportive in nature, therefore, it is especially important that the supervision is on a regular schedule preferably by the same supervisor.

Supervisors seek to attain and maintain competence in the practice of supervision through formal education and training.

Group Supervision: an alternate format for delivering clinical supervision in which the clinical supervisor still maintains their responsibilities for the work undertaken by the supervisee, by leading the group process appropriately.

Clinical Consultation: a process similar to clinical supervision in many ways but differing in two important aspects.

1. The power differential is no longer in play, so the evaluation component is not a requirement

2. The people seeking consultations are practicing clinicians seeking some level of advanced clinical knowledge or experience to augment their practice.

It is a voluntary relationship between colleagues in which one is a more experienced practitioner, and in which information and strategies are shared with no obligation on the clinician seeking consultation to implement the information or strategy as shared.

Group Consultation: a process where an experienced clinician shares specialized or advanced information or strategies with other clinicians upon their request. It bears no obligation on those seeking the information or strategies to implement as shared, participants have free will on this matter.

Peer Supervision: a group of interns or clinicians with similar levels of interest and or experience meeting together to discuss their professional work. The leadership of their group process is from amongst those present, with no one person directing the content or having any responsibility for the work of any others present. It is a focused meeting of professional colleagues.

Supervisees: students in clinical training to become mental health counsellors/therapists, postgraduate counsellors/therapists or other clinicians working in the mental health fields, who are seeking clinical supervision for additional credentialing, membership in a professional organization, and/or any other ongoing professional development.

Supervisor Candidate: an RCC who is in the ACS program to complete the training component to become an Approved Clinical Supervisor.

Supervision of Supervision involves an experienced supervisor overseeing and guiding the work of another clinical supervisor to ensure effective and ethical clinical supervision practice. The main objective of this process is to improve the supervisors' skills and competencies, address any challenges they may encounter, and guarantee that they are upholding best practices in their supervisory roles. This process encourages supervisors to self-reflect, assess their performance, and strive for continuous improvement.

In BCACC's Approved Clinical Supervisor Designation Program, supervisor candidates are expected to receive both direct and indirect supervision of supervision in an equal ratio.

Direct supervision of supervision occurs when the supervisor of supervision views a videotape or listens to an audio tape of the supervisor candidate working with the supervisee. Although unlikely to happen, it could also be the supervisor of supervision observing the supervisor candidate working with the supervisee behind a one-way mirror. *Indirect supervision of supervision* is when the supervisor candidate discusses/presents their supervisee's case to the supervisor of supervision without observing or watching/listening to a video/audio tape.

Supervisor of Supervision is an experienced clinical supervisor who is qualified to provide supervision of supervision for supervisor candidates who are in the regular training pathway of the ACS Designation Program.

A qualified Supervisor of Supervision for the ACS program's training component is who

- a. has a minimum of master's degree in counselling psychology or in a related field
- b. is a certified/designated supervisor from a professional/regulatory body (e.g., RCC-ACS, CCS, CACFT-S, CACFT-SM etc); or pre-approved by BCACC
- c. has a minimum of 5 years of clinical supervision experience
- d. has participated in receiving or providing supervision of supervision and is willing to attend BCACC's Supervisor of Supervision orientation
- e. can provide at least 18 regularly scheduled supervision-of-supervision sessions, a minimum of one hour per session

Additional information:

Examples of appropriate clinical supervision activities for the purpose of this application:

Example 1: An individual or group meeting with their designated clinical supervisor in their internship or agency requiring the oversight of a clinical supervisor (clinical supervision)

Example 2: A supervisor seeking out clinical guidance or support for their supervisory work with an intern or clinician they supervise (supervision of supervision)

Example 3: A peer group with a supervisor facilitating the conversations (group supervision)

Examples of not appropriate clinical supervision activities for the purpose of this application:

Example 4: Case consultations in a group of peers with no supervisors discussing cases and personal reactions (peer supervision)

Example 5: An individual or group seeking clinical consultation from a supervisor for direction or guidance on case issues (clinical consultation)

Examples of activities that are not considered clinical supervision/consultation overall:

Example 6: A coffee shop conversation with a trusted peer (not a peer supervision)

Example 7: A water-cooler conversation with a colleague (not a peer consultation)