

# HEALTHWEST

## Procedure

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Prepared by:

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Approved by:

Subject: Clinical Supervision

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### I. PURPOSE

To establish a process for timely and effective clinical supervision of HealthWest employees (professional and para-professional) and contracted providers in order to ensure that the services and supports they provide incorporate recovery principles and result in positive outcomes for individuals receiving services.

### II. APPLICATION

All employees and designated contracted providers who deliver direct care and/or services but do not have clinical privileges.

### III. DEFINITIONS/BACKGROUND INFORMATION

- A. Administrative Supervision: The formal organizational hierarchy through which responsibility is delegated and authority is exercised. It consists of monitoring, assessing, and intervening to support, remedy, or improve staff/contracted providers' understanding and execution of formally defined job descriptions that govern their work toward the organization's mission, goals and objectives. All staff/contracted providers receive administrative supervision.
- B. Demonstrated Current Competence: A set of factors and criteria used to establish current competence to perform job duties including, but not limited to the following:
1. Verification of licenses, certifications, registrations, academic degree, training, and references.
  2. Participation in continuing education programs.
  3. Compliance with Muskegon County and HealthWest policies and procedures.
  4. Outcome of annual competency-based performance evaluation.

C. Peer Review: The criteria and process by which the Agency may evaluate clinical competency and quality of work. The criteria for peer review may be established by clinical/discipline peers or supervisors, benchmarks, research or commonly accepted clinical standards. The peer review process may include, but is not limited to, case presentation, observation, demonstration, and record review.

#### IV. PROCEDURE

A. Clinical supervision is intended to provide clinical direction and assessment to enhance each individual's competencies as defined in their job description. This may include any of the following as applicable.

1. Accuracy and thoroughness of assessments.
2. Person-centered treatment planning.
3. Appropriateness of referral, transitional and discharge planning.
4. Appropriateness of the treatment or service intervention recommended.
5. Appropriateness of services being provided.
6. Effectiveness of treatment is evidenced by goals set and achieved.
7. Feedback that enhances the skills of direct service staff.
8. Legal aspects of clinical practice, professional standards, and ethics.
9. Adherence to agency clinical documentation standards
10. Cultural competency issues.

B. Clinical supervision may be both formal and informal. All staff/contracted providers who provide direct services will be encouraged to discuss clinical issues or problems with their Supervisor on an ongoing basis. Supervisors will provide direction and assistance as needed and be regularly available for such consultation.

Methods and tools may include:

1. Review of functional outcomes of individuals receiving treatment.
2. Participation in treatment/service planning meetings
3. Organizational staff meetings
4. Focused document review.
5. Case presentation.
6. Clinical consultation: individual and/or group.
7. Memorandums written to staff/contracted providers giving feedback.
8. Direct observation, side by side sessions with the person served.
9. Management information reports such as utilization management, chart reviews, and customer satisfaction.
10. Program/Agency outcome measures.
11. Performance improvement plans for employees/contracted providers.
12. Peer review and consultation.

C. Clinical supervision is primarily the responsibility of the Administrative Supervisor unless otherwise specified. The Administrative Supervisor is responsible to ensure that each staff/contracted provider under his/her supervision receives appropriate clinical supervision.

1. Clinical Supervision will be provided at regular intervals and documented by the supervisor.

2. Should the Administrative Supervisor not have the education, training, or background in the clinical disciplines of their staff/contracted providers, he/she shall assure that clinical supervision occurs through alternative means.
3. Any alternative method of providing appropriate clinical supervision will be determined by the Supervisor, in consultation with the Chief Clinical Officer and Human Resources, and documented appropriately.
4. The intensity of clinical supervision for a staff person/contracted provider will vary according to the length of time in his/her position, experience, and demonstrated current competency.

SP/hb