The Barbara Wand Seminar in Professional Ethics, Standards and Conduct

June 15, 2023 1 pm - 4 pm



AGENDA

1:00 - 1:10	Welcome Barry Gang, Dip.C.S., C.Psych.Assoc. Deputy Registrar & Director, Professional Affairs College of Psychologists of Ontario			
	Wanda Towers, Ph.D., C.Psych. President, College of Psychologists of Ontario			
1:10 - 1:40	Tony DeBono, MBA, Ph.D., C.Psych Registrar & Executive Director Ethical Principles of Supervision			
1:40 - 2:10	Barry Gang MBA, Dip.C.S., C.Psych.Assoc. Deputy Registrar & Director, Professional Affairs Available Supervision Resources & Answers to Popular Practice Queries			
2:10 - 2:40	Lesia Macanyn Director, Registration Common Challenges in Supervision for Registration			
2:40 - 2:45	Break			
2:45 - 3:20	Zimra Yetnikoff Director, Investigations & Hearings Complaints About Supervision			
3:20 - 3:45	Questions			
3:45	Wrap Up			

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SPEAKER BIOGRAPHIES

Tony DeBono, MBA, Ph.D., C.Psych.

Dr. DeBono is the Registrar & Executive Director of the College of Psychologists of Ontario. Tony received his doctoral degree in Clinical-Developmental Psychology from York University after completing his pre-doctoral internship at the Hospital for Sick Children. Tony earned dual MBAs from Queen's University and Cornell University, graduating with distinction. He has held a variety of clinical and leadership roles in academic health science. As Chief of Interprofessional Practice at Hamilton Health Sciences (HHS), he performed investigations of professional practice matters and has significant experience in applying the Regulated Health Professions Act, 1991, particularly with respect to mandatory reports to regulatory bodies. Tony has served as a bioethics consultant at HHS and on hospital ethics committees. Prior to his appointment to the College, Tony was working on transformational initiatives at The Royal Ottawa Mental Health Centre, with an interdisciplinary team developing strategic metrics and modernizing the process of obtaining client experience feedback.

Tony served on the Board of Directors of the Ontario Psychological Association in 2022 and was the recipient of the Association's Dr. Ruth Berman Award for Leadership as an Early Career Psychologist in 2018.

Barry Gang, MBA, Dip.C.S., C.Psych. Assoc.

Barry is the Deputy Registrar and Director of Professional Affairs at the College of Psychologists of Ontario, where he was formerly the Director of Investigations and Hearings. His responsibilities currently include management of the College's Practice Advisory Service and management support to the Client Relations and Quality Assurance Committees at the College

Prior to joining the College staff in March 2000, Mr. Gang worked primarily with children and families in direct service and a variety of leadership positions in community mental health settings.

Lesia Mackanyn

Since 2012, Lesia has been the Director the Registration at the College of Psychologists of Ontario. Her responsibilities include management of the College's registration department, and support to the College's Registration Committee, and Jurisprudence and Ethics Examination Committee.

Zimra Yetnikoff

Zimra Yetnikoff is Director, Investigations & Hearings at the College of Psychologists of Ontario, where she oversees complaint, discipline, and fitness to practice matters. Prior to becoming Director she was a Case Manager at the College, and was responsible for investigating allegations of professional misconduct.

Prior to joining the College in 2009, Ms. Yetnikoff worked as legal counsel with the Special Investigations Unit at the Ministry of the Attorney General of Ontario



Barbara Wand Seminar in Professional Ethics,

Ethical Principles of Supervision

Standards and Conduct

June 15, 2023

Tony DeBono, MBA, Ph.D, C.Psych. Registrar & Executive Director





An ongoing **educational**, **evaluative**, **and hierarchical** relationship, where the **supervisee is required to comply** with the direction of the supervisor, and the **supervisor is responsible** for the actions of the supervisee.





Supervision Resource Manual (3rd Edition; 2022)



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Let's start with Why

Why do you want to be a supervisor?



Why Supervise?

- Develop, maintain, and enhance competence in supervision
- Serve the public interest by training future psychological practitioners
- Professional Gate-Keeping ensuring quality care at least the minimum standard
- To keep up-to-date on emerging trends in the profession
- · To generate revenue



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Take a Moment to Reflect on Your Own Experiences Being Supervised

- What aspects of supervision were most influential to you in a positive way?
 - What made it so?
- What experiences as a supervisee do you not want to replicate as a supervisor?
 - Why?



The Duties of a Supervisor • The public • The supervisee • The profession

Ethical Values of a Regulated Health Professional

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The Privilege of Self-Regulation & the Therapeutic Use of Self

- How does a supervisee develop their therapeutic use of self?
 - In psychology, the professional is the vehicle of healing
- If the profession does not have registrants who provide high quality supervision, this places the public at risk:
 - Boundary violations
 - Abuse
 - · Level of quality of care
 - Lack of qualified practitioners



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Supervision Requires Self-Reflection

- Am I promoting the supervisee's professional development?
- Am I turning my mind sufficiently to my practice of supervision?
- Is my conduct (including evaluation): fair, respectful, helpful, and transparent?
- Am I attuned to the inherent power differential?
- What is my contribution to a disagreement I am having with my supervisee?
- Am I engaging in conduct that is unethical? Am I harming the supervisee? How does this impact client care?



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What Gets in the Way?

- Supervisor factors
 - Targets established by administrators in public settings
 - Need for revenue in private settings
 - Need to decrease waitlists (in public & private settings)
- Supervisee factors
 - Desire to quickly work through requirements
 - Supervisee not meeting minimum standards
 - Concerns regarding professional practice
 - · Quality of services is substandard
 - Requires a disproportionate amount of supervisor time/attention/training
 - · No improvements or changes despite the additional feedback/training



Supervision is a Professional Relationship

- Different than a "therapeutic relationship" but some similar themes
 - Attunement to the relationship and taking initiative in managing ruptures
 - Values of openness, curiosity, understanding, and empathy
 - Cultural humility and humility more generally
 - Modelling of behaviour
 - Clear and transparent communication
 - Establishing clear expectations of the professional relationship



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Unethical Supervision Can Harm

- Supervisees may experience supervision that...
 - · Does not promote their professional development
 - Does not attend to factors of diversity
 - Is inattentive to the power differential between supervisor and supervisee
 - Does not provide evaluative feedback that is fair, respectful, helpful, and transparent
- At a minimum, do no harm
 - · Engaging in inappropriate action or inaction that causes genuine harm to the supervisee
 - Engaging in unethical behavior that is known to cause harm to a supervisee
- "Failing to supervise adequately a person who is under the professional responsibility of the member and who is providing a psychological service"
 - Professional misconduct



Best Practices in Supervision

- Importance of Attending to the Supervisory Working Alliance
- Ongoing practice of self-reflection and self-awareness
- Knowledge & skill development
- Appreciating assumptions, values, biases, expectations, and world-views
- Fostering and modeling a position of cultural humility and curiosity
- Peer consultation as a supervisor
- Reflection on the power imbalance within a supervisory relationship
- Establishing clear, documented expectations:
 - Style or model of supervision
 - Communication between supervisor and supervisee
 - Method of feedback (including any opportunities for the supervisor to observe the work)
 - Tailoring supervision to the developmental level and needs of the supervisee



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The Barbara Wand Seminar in Professional Ethics, Standards and Conduct

Available Supervision Resources & Answers to Popular Practice Queries

June 15, 2023

Barry Gang
Deputy Registrar and Director of
Professional Affairs
College of Psychologists of Ontario



- How to supervise: many resources available
- Opportunities for achieving competence in supervision are currently offered in many graduate programs, at least in Canada
- If not a graduate student, may have to search for resources
- This portion of seminar not about nuts and bolts of how to supervise
- Is about how to supervise ethically, regardless of supervision model, techniques or setting
- Without endorsing any particular provider's opinions or recommendations, here are some resources are a few clicks away:

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Supervision Resources

- ETHICAL GUIDELINES FOR SUPERVISION IN PSYCHOLOGY: TEACHING, RESEARCH, PRACTICE, AND ADMINISTRATION https://cpa.ca/docs/File/Publications/CoEGuidelines Supervision2017 final.pdf
- OPA BEST PRACTICES FOR SUPERVISION OF REGISTERED MEMBERS OF OTHER COLLEGES AUTHORIZED IN THE CONTROLLED ACT OF PSYCHOTHERAPY https://www.psych.on.ca/getmedia/f7e76c03-c0fd-4527-b2dc-c774dce9f003/OPA-BEST-PRACTICES-FOR-SUPERVISION-OF-REGISTERED-MEMBERS-OF-OTHER-COLLEGES-AUTHORIZED-IN-THE-CONTROLLED-ACT-OF-PSYCHOTHERAPY.pdf
- Other OPA Documents:
 - Bill of Rights for Supervisees
 - Guidelines for Supervisee Responsibilities
 - Supervision of Masters Graduates Preparing to Register as Psychological Associates
 - Self-Assessment Tool for Best Practices in Supervision
- https://oamhp.ca/supervision-evolution-of-practice/

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https://www.apa.org/education-career/ce/topic/?query=cetopic:Supervision:

Effective Supervision of School Psychology Trainees: What Supervisors Need to Know

Develop strategies to proactively structure an experience and select supervision methods appropriate to the supervisee's level of training.

Online Course / Video On-Demand | 1.5 credits

Clinical Supervision in Health Service Psychology: Applications of the APA Guidelines

This program details the APA Guidelines for Clinical Supervision in Health Service Psychology and their application. Discuss the rationale for conceptualizing supervision as a competency that requires training. Online Course / Video On-Demand | 3 credits

How Should A Junior Psychologist Handle a Supervisor's Compromised Competence?

Identify the Ethics Code Standards involved in a psychologist's compromised competence. Article-Based Exam | 1 credit

Supervision Essentials for Cognitive-Behavioral Therapy

Acquire the essential dimensions and key principles of the supervisory relationship. Book-Based Exam | 4 credits

Supervision Essentials for the Practice of Competency-Based Supervision

Describe the key components of supervisory effectiveness.

Book-Based Exam | 4 credits

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Supervision Essentials for Emotion-Focused Therapy
Discuss the essential components of the emotion-focused therapy model of supervision (contact, markers, task environment, change processes and resolution). Book-Based Exam | 5 credits

<u>Supervision Essentials for Integrative Psychotherapy</u>
Describe the goals, tasks, functions and evaluation techniques associated with integrative supervision. Book-Based Exam | 5 credits

<u>Clinical Supervision Through a New Lens</u>
Describe the relationship of competencies to self-assessment, goal-setting, contracting and monitoring.
Online Course / Video On-Demand | 3 credits

How to Be a Better Supervisor for Students in Health Services
Learn to identify certain types of harmful supervision and describe the guidelines and training available to help supervisors improve their oversight. Article-Based Exam | 1 credit

<u>Multiculturalism and Diversity in Clinical Supervision: A Competency-Based Approach</u>
This practical guide presents a model for developing multicultural competence within supervision.

Book-Based Exam | 8 credits

Casebook for Clinical Supervision: A Competency-Based Approach (Book-based Program)
Identify the key ethical responsibilities of competent supervision learn how to analyze diverse models of competent supervision, in line with the cognitive, psychodynamic and family systems traditions Book-Based Exam | 8 credits

Clinical Supervision: A Competency-Based Approach (Book-based Program)

A resource for mental health professionals who currently provide supervision in academic, training and treatment settings as well as to students and practitioners who are studying the supervision research and theory for the first time.

Book-Based Exam | 10 credits

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- Carol Falender: http://www.cfalender.com/continuing-education.html
- Relevant courses currently listed on her website:
- <u>Telesupervision and Clinical Supervision: Supervising in a Trauma-informed</u>
 <u>Mode</u> This workshop introduces the most current best practices and guidelines for telesupervision and supervision. Published: May 2021
- <u>Decolonizing Psychology Training Conference</u> A virtual full day conference to critically examine and decolonize curriculum, research, supervision, and mentorship practices. Fri, April 16, 2021 6:00AM – 12:00PM

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Focus on Ethics

- Ethics ...consists of the fundamental issues of practical decision making, and its major concerns include the nature of ultimate value and the standards by which human actions can be judged right or wrong (https://www.britannica.com/topic/ethics-philosophy)
- the discipline dealing with what is good and bad and with moral duty and obligation (https://www.merriam-webster.com/dictionary/ethic)
- dealing with values relating to human conduct, with respect to the rightness and wrongness of certain actions and to the goodness and badness of the motives and ends of such actions. (https://www.dictionary.com/browse/ethics)
- Ethics are informed by values (fundamental beliefs that guide or motivate attitudes or actions)

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Commonly Accepted Fundamental Beliefs, Values

- Best interest of clients (& future clients)
- Best interest and development of supervisee
- Own well-being
- Integrity, reputation, respect for profession
- Objectivity
- Fairness
- Trustworthiness
- Accountability
- Humility
- Lawfulness

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(Some) Key Ethical Issues

- Dual Relationship with Supervisee (Employer/Employee, Friendship/Professional Colleagues,...)
- · Power imbalance in relationship
- Conflict between best interest of the clients and (feared) impact of critical feedback
- Tensions between appropriate independence and accountability
- · Accessibility of services vs. minimum standards of competence

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Potential Impediments to Ethical Decision Making in Supervision

- Lack of time to supervise adequately
- Lack of management or organizational support for adequate supervision
- Misunderstanding purpose of supervision
- Lack of training or skill in supervision
- Ambiguity in nature of supervisory relationship/roles.
- Supervisee's lack of preparedness and/or openness to new learning.
- Interpersonal challenges

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Risk Mitigation

- Take steps to make sure client understands accountability structure and that they have access to supervisor
- Be known to client
- Monitor work of supervisee closely
- Allow for the time to understand and explore the dynamics of each client/therapist relationship
- Supervisors' duty to consider boundary and countertransference issues, discernable through case discussion
- Monitor progress of client- independent of supervisee's own monitoring

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Good Supervision Can Should Get "Personal"

Scenario:

- Supervisee working with a high degree of autonomy; reviewing a case where file is thick with notes but no indication of goals of therapy, or progress
- Supervisee becomes defensive when you try to engage them in discussion so
 you can learn more about the case, deflects any substantive questions ("I have
 other cases that are higher priority and it feels like you don't trust me")
- Even after you explain that supervisory relationship implies the supervisee
 requires guidance, that you have a responsibility to your client, to understand
 the case, as well as responsibility to Supervisee (who wouldn't/shouldn't be
 under supervision if not necessary)

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Check: Format of Supervision

- Supervision should be conducted on an individual basis; in privacy may be more likely to share personal issues that may be impacting clinical work
- More in-depth discussions possibly in privacy, without using time of other supervisees, and to protect both client and supervisee confidentiality
- Supervisors must be free to appropriately confront supervisee behaviour which could potentially embarrass the supervisee

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• group supervision cannot be used as a replacement for individual supervision.

https://www.psych.on.ca/getmedia/f7e76c03-c0fd-4527-b2dc-c774dce9f003/OPA-BEST-PRACTICES-FOR-SUPERVISION-OF-REGISTERED-MEMBERS-OF-OTHER-COLLEGES-AUTHORIZED-IN-THE-CONTROLLED-ACT-OF-PSYCHOTHERAPY.pdf

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Managing the (Unbalanced) Relationship

- Set expectations from beginning of relationship: collaborative but also hierarchical
- Discussions high enough level to be educative but also case specific enough to talk about particular client/supervisee issues
- It is your duty to each client to know whether they are progressing/or not
- Be aware of self-esteem of supervisee, but don't let it prevent ability to deliver supportive, yet constructive (uncomfortable) feedback
- Remember importance of trust, commitment in supervisory relationship; can earn trust by being fair, objective, predictable, supportive, even while being constructively critical

https://www.psychotherapy.net/article/seven-mistakes-in-clinical-supervision

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Clarity: Role and Boundaries

- protect the boundaries of the supervisory relationship; supervisor ≠ therapist, parent figure or friend
- British Association for Counselling and Psychotherapy:

Supervision is a <u>formal</u> arrangement for therapists to discuss their work regularly with someone who is experienced in both therapy and supervision. The task is to work together to <u>ensure and develop the efficacy of the therapist/client relationship</u>. The agenda will be the therapy and feeling about that work, together with the supervisor's reactions, comments and challenges.

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https://us.sagepub.com/sites/default/files/upm-binaries/58975 Creaner.pdf

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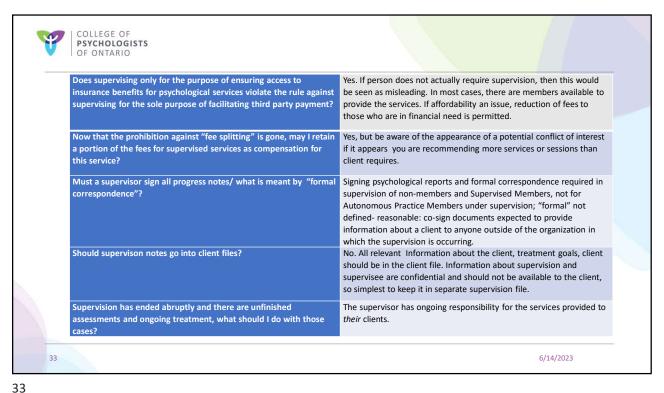
FY 2022-23: 157 Queries to Practice Advisory Service Related to Supervision (highest to lowest number of queries)

- Supervision-Non-Regulated Providers
- Supervision-Regulated Non-members
- · Supervision- Controlled Act of Psychotherapy
- Supervision v. Consultation
- Co-Signing Reports
- Supervision-records
- Supervision-Supervised Practice Member
- Supervision- paying supervisee
- Supervision-charging/paying for
- Supervision-Controlled Act of Communication a Diagnosis
- · Supervision-Administrative
- Supervision-Problem with Supervisor

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Questions	Answers
Who can I permit to provide the Controlled Acts?	CPO Members, those fulfilling requirements for CPO Registration, those already members of other Colleges whose members permitted under legislation
May I supervise only some of a person's caseload?	As long as it is clear in your contract with them, there is no misleading information in the public domain that could suggest all of the work is supervised, and those clients whose services are being supervised are aware of that
How many individuals may I supervise?	As many as you can, responsibly: ensure monitoring of every case, be clinically responsible for each case, be prepared to ensure continuity of care for every client requiring services
Can I supervise a person delivering services if the services are outside of my authorized areas of practice, populations or competence- even if the supervisee obtains consultation from someone qualified?	No
After supervision ends, can the supervisee retain the file or must 1?	You must, even if client will be transferred to responsibility of former supervisee; may ask client for permission to provide copy to former supervisee, if they will be continuing the work autonomously





Scenario

 You notice that your supervisee has been wearing a new Rolex watch which you know is worth several thousand dollars. When you compliment them on it, they tell you that it was a holiday gift from a wealthy client. As a good supervisor, you review the College's Standard 13.6 with the Supervisee:

Members must not accept a gift of more than token value from a client. In accepting even a small gift, members must carefully consider the potential clinical implications of this.

- Even after you have had a fulsome discussion of the clinical importance of protecting professional boundaries, and of avoiding a potential conflict of interest, the supervisee refuses to return the watch, saying that no matter how well they could explain this, it would offend the client and risk disrupting a productive therapeutic alliance with a highly vulnerable client
- The best option(s) for you, as a supervisor, is/are to:
 - a. Accept that the supervisee may be correct about risking the therapeutic alliance and let it go
 - b. Tell the supervisee that, unless they either comply with your direction, you will no longer be willing to supervise them
 - c. Reassess the supervisee's knowledge and skill with a view to reviewing all of their existing cases and using that information to determine whether any other boundary problems or apparent conflicts of interest are occurring
 - d. Contact the client yourself and advise them that your supervisee cannot accept this gift and take whatever steps are possible to arrange for the supervisee to return it

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The Rules

- Professional Misconduct Regulation:
- 1. The following are acts of professional misconduct for the purposes of clause 51 (1) (c) of the Health Professions Procedural Code:
 - 2. Failing to maintain the standards of the profession.
 - 5. Failing to supervise adequately a person who is under the professional responsibility of the member and who is providing a psychological service.
 - 8. Discontinuing professional services that are needed unless,
 - i. the client requests the discontinuation,
 - ii. the client withdraws from the service,
 - iii. reasonable efforts are made to arrange alternative services,
 - iv. the client is given a reasonable opportunity to arrange alternative services, or
 - v. continuing to provide the services would place the member at serious personal risk.
 - 9. Providing a service that the member knows or ought to know is not likely to benefit the client.
 - 10. Practising the profession while the member is in a conflict of interest (note: member themselves not in COI, but supervisee must adhere to relevant legislation, regulations, standards).

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- Standards of Professional Conduct:
- 4.1.1: All Supervision ...
 - 2) Supervising members must assess the knowledge, skills and competence of their supervisee and provide supervision as appropriate to the supervisee's knowledge, skills, and competence, based on this assessment;

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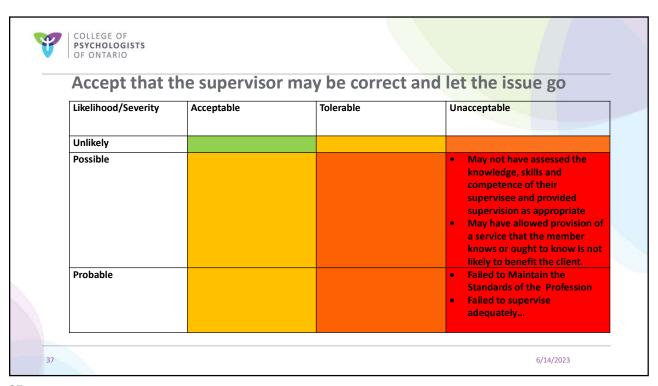
5) Supervising members must ensure that there is an individual supervision agreement, signed by both themselves and their supervisee, for each supervisory relationship and such an agreement must include, at a minimum:

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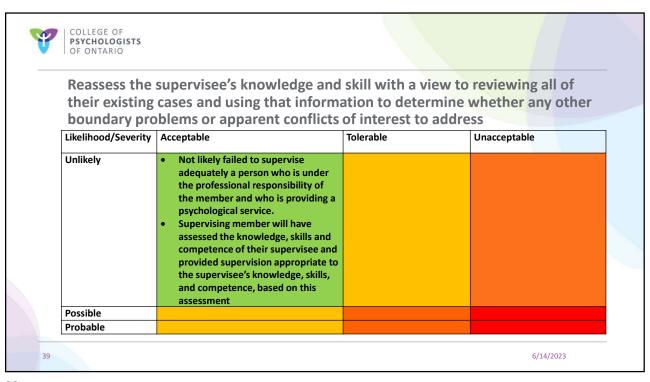
- h) confirmation that the supervisee will comply with all requirements under the legislation and regulations relevant to the service and the Standards of Professional Conduct (2017);
- 9) Supervising members must make best efforts to ensure that the supervisory relationship is conducive to professional development and in the best interests of their supervisee.

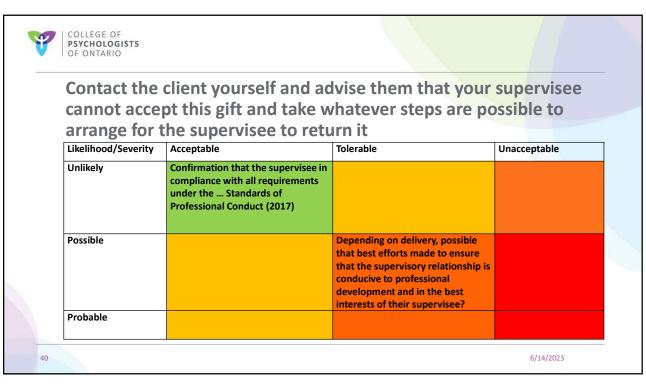
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¥	college of psycholog of ontario	supervisee that unless	they either comp	oly with your			
direction you will no longer be willing to supervise them							
	Likelihood /Severity	Acceptable	Tolerable	Unacceptable			
	Unlikely	Failed to supervise adequately a person who is under the professional responsibility of the member and who is providing a psychological service					
	Possible		Best efforts to ensure that the supervisory relationship is conducive to professional development and in the best interests of their supervisee ?	If clients lose service, may ave discontinued professional services that are needed unless			
38	Probable				e		









Topics

- Authorized Supervised Practice Brief Overview
- Roles and Responsibilities of Primary and Alternate Supervisors
- Decision to Enter into Supervisory Relationship Things to Consider
- Common Challenges Encountered in Supervision for Registration - Tips for Mitigating Issues



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The Period of Authorized Supervised Practice

Candidates who've met College's academic requirements must undertake a period of authorized supervised practice in Ontario as part of registration process and eventual autonomous practice

- Minimum of 1500 hours of supervised practice completed over a minimum of 12 months required
- ▶ Supervised Practice certificates can be extended up to 2 years (if necessary)
- Oral Exams held in June and December; some candidates will acquire more than the minimum amount of months and hours by the time they attend Oral Exam
- Even if candidate's accumulated 12 months and 1500 hours, they remain under supervision, meet regularly with both supervisors, until Oral Exam passed
- ▶ 3 Exams during supervised practice EPPP, JEE, and the Oral Exam the final step!



Roles and Responsibilities of Primary & Alternate Supervisors

Period of supervised practice serves the public interest, fosters professional development for members who supervise, and provides an evaluation of candidate which assists College in determining candidate's readiness for autonomous practice.

The Primary and Alternate supervisors:

- Function as teacher and mentor
- Serve as role model for upholding College's standards
- Accept ultimate responsibility for services provided by candidate
- Set training goals and objectives for the supervisory period, discuss plans and timelines for the period of supervision.
- Maintain the record of supervision, evaluate and report to College on candidate's progress via Work Appraisal Forms



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Roles and Responsibilities of Supervisors (cont'd)

- Meet face-to-face with candidate for <u>individual</u> supervision (at least 1 hour weekly for Primary, 1 hour bi-weekly for Alternate).
- Communicate with each other on candidate's progress period of supervision
- Co-sign candidate's reports, and in private practice setting supervisor also responsible for client billing
- Assist candidate in preparing for College's examinations



Decision to Enter into a Supervisory Relationship

- An up-to-date understanding of College's registration requirements?
- Authorized areas of practice/client groups match those for which candidate will be declaring?
- Sufficient time to dedicate to supervision?
 - If candidate requires more time and additional support, will you be available?
- Is your setting able to provide the candidate with a sufficient and broad range of cases/activities in their declared areas/client groups?
 - Narrow range of presenting problems? e.g. only eating disorders in clinical psychology
 - Only assessment, or only intervention cases?
- Do you have a plan in case you aren't able to continue (or if candidate isn't able to continue)?: supervisor replacement? plan for transitioning client care to another provider?



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Best Practices

Many challenges can be mitigated by:

- Taking time to discuss expectations, goals, timelines, and compensation -- before beginning the supervision period. Both verbally and written – refer to the "Individual Supervision Agreement" Section 4.1.1. Standards of Professional Conduct
- Ensuring that supervisor and candidate are up to date and knowledgeable of the College's Standards, Guidelines, and registration policies
- Engaging in regular and frequent communication (both with candidate and other supervisor) -revisiting goals and timelines when necessary
- Creating the conditions in which candidate feels comfortable to raise questions, and discuss their challenges
- Being mindful of unconscious bias and assumptions
- Contacting the College early in the supervision process if there are specific concerns in supervision



Some Common Challenges in Supervision for Registration

- Off-site Supervision where there aren't at least 2 members of the College available to be supervisors, College would consider accepting off-site supervisor(s) – this situation requires co-ordination with workplace so that a supervisor has access to clients, client files. Important to inform clients of supervision arrangements.
- Working Remotely supervisors may not always be able to meet in-person with candidate, in which case may meet virtually (face-to-face in real time) occasionally via a secure platform
- Leave of Absence candidate may need to take a leave of absence e.g. parental leave,
 College can temporarily suspend the supervised practice certificate. College should be
 notified as soon as possible, supervisors must arrange for transfer of client care, and
 notify college in advance if candidate will be returning. Similarly, if supervisor must take
 a leave of absence what is the plan? Notify the College before the leave takes place.



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Common Challenges cont'd

- Guidelines for Declaration of Competence Found in the Registration Guidelines Supervised Practice
 - Important for supervisors to be familiar with these guidelines to avoid any misunderstanding once supervision begins.
 - Normally, candidate should not select more than 2 areas of practice usually not feasible to gain sufficient breadth of experience in more than 2 areas during supervised practice
 - Not acceptable for candidate to declare an area of practice or client group for which they have not had formal academic training. Period of supervised practice not to be used to undertake training in new areas.
 - Does candidate feel some pressure from an organization or supervisor to check off areas of practice or client groups for which they may not have had adequate preparation? Does candidate have a good sense of their limits of competence?



Common Challenges cont'd

- Guidelines for Declaration of Competence
 - If College identifies a lack of congruence between candidate's academic training and Declaration of Competence, the candidate will be asked to provide information to justify the inclusion of the areas of practice and client groups.
 - Registration Committee may require candidate to change the Declaration of Competence. Issuance of the certificate for supervised practice may be held up until the issue is resolved.
 - Important to remember that there is a process in place for members to undertake an expansion to their areas of practice/client groups once they are an autonomous practitioner



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Common Challenges cont'd

- Preparing for Examinations (EPPP, JEE, Oral Exam)
 - Examinations often a source of candidate anxiety
 - · Limited number of attempts permitted at each exam
 - Being mindful that during exam prep candidate may need to reduce their workload
 - Discuss exam timelines with candidate, be aware of how they are doing, discuss their plans for studying
 - Because of limited number of attempts permitted, candidate shouldn't rush to re-take an exam if not feeling ready – candidate may feel pressure to get through supervised practice as quickly as possible
 - Encourage discussion on the topic of exams with the candidate early on in supervision – offer support e.g. integrating JEE prep into supervision, offer to do mock oral exams when it comes time for oral exam prep



Common Challenges cont'd

- Evaluating Candidate's Readiness for Autonomous Practice
 - Supervisors are entrusted with the responsibility of evaluating candidate's readiness for autonomous practice
 - Genuine and constructive feedback to candidate, and to the College via Work Appraisal Forms, is an important part of protecting the public and ensuring quality psychological services
 - There may be times when a candidate does not agree with a supervisor's evaluation
 - Creating and maintaining a supervisory relationship in which candidate feels safe and supported is important in addressing areas that may need remediation



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Common Challenges cont'd

- Evaluating Candidate's Readiness for Autonomous Practice
 - If there are concerns about candidate's readiness for autonomous practice, then discussion with the other supervisor is particularly important. Does the other supervisor share the same concerns ?
 - Candidates are expected to defer to supervisor's direction If it's determined that
 candidate needs additional time on supervised practice, then an extension of their
 certificate for supervised practice is possible Supervisors should notify the College
 in this case



Common Challenges cont'd

- Candidates Completing a Training Plan
 - In cases where the Registration Committee has identified gaps in a candidate's academic preparation, they will be required to complete a training plan
 - Candidate's undertaking a training plan typically take longer than the minimum 12month period, and may require more intensive supervision
 - If candidate is advised that a training plan is required, important to have training plan proposal submitted promptly so that it can receive Registration Committee approval early in the registration process
 - Supervisors expected to assist candidate in developing a training plan proposal in keeping with College's Training Plan Manual — a College resource document that details training plan requirements and procedures



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Supervision Resources Available on College's Website

- The Supervision Resource Manual 3rd Edition, 2022
- The Registration Guidelines: Supervised Practice
- ➤ The Standards of Professional Conduct, 2017 (Section 4 Supervision Standards)

www.cpo.on.ca



Questions

Questions about this presentation:

bwsquestions@cpo.on.ca

Registration questions for the College, any time: registration@cpo.on.ca





COMPLAINTS ABOUT SUPERVISION

BARBARA WAND SEMINAR
JUNE 15, 2023

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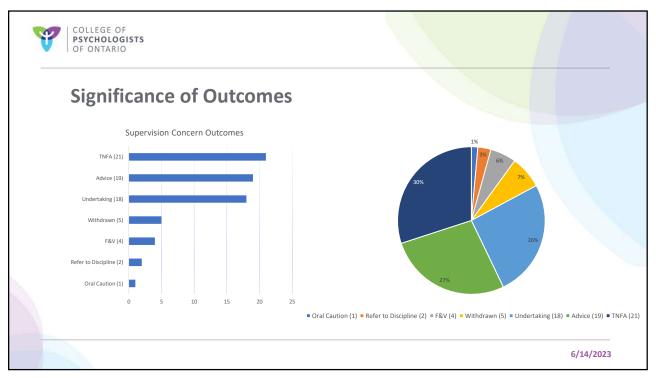


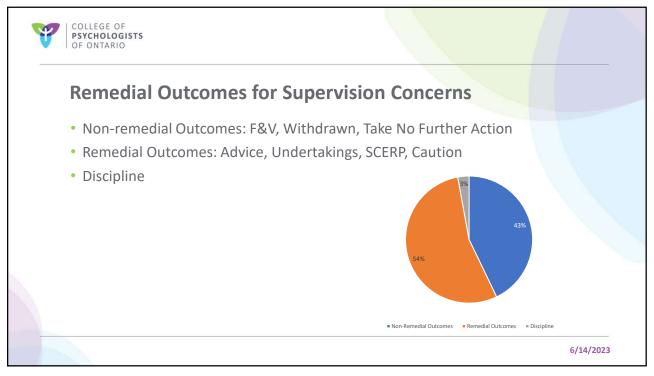
Supervision as a source of complaints

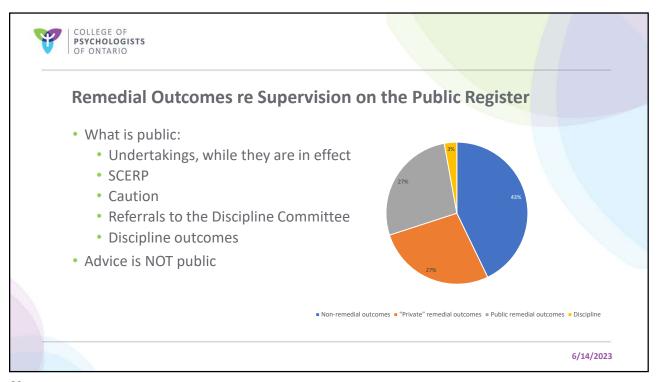
- **70** complaints and reports regarding supervision in the last 5.5 fiscal years
 - June 1, 2017 April 2023
- 546 complaints and reports in the same period overall
- Complaints and reports regarding supervision = 12.8% of the total – not insignificant

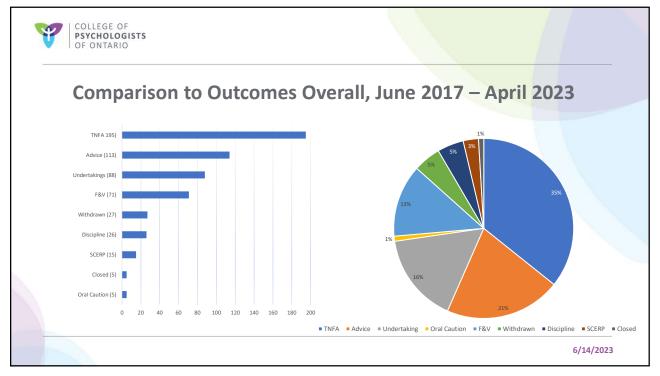


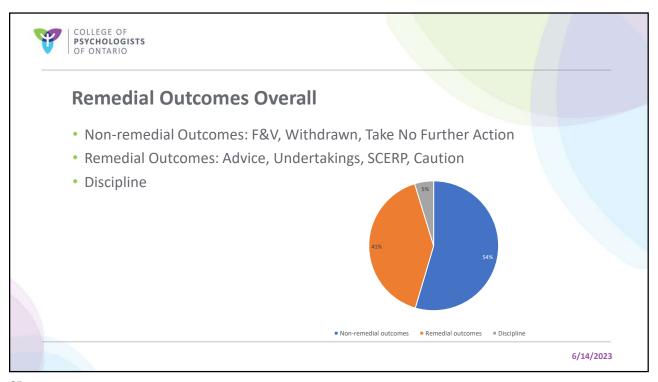
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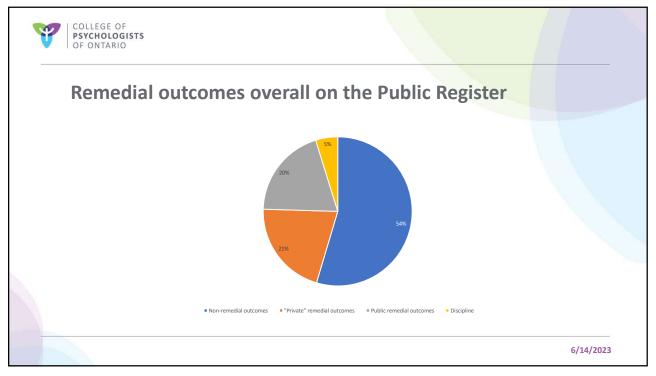


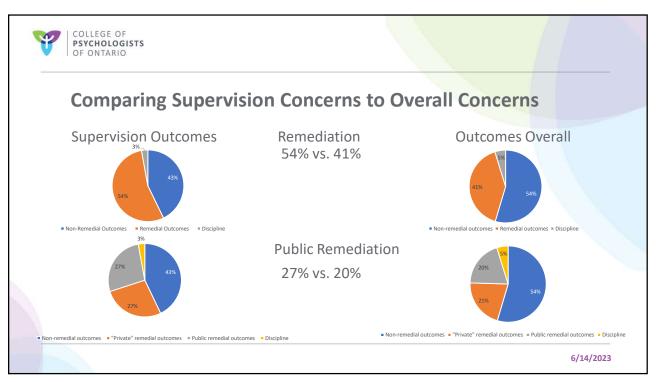














What makes Supervision higher risk?

- Responsibility for client care when someone else is providing that direct care
- Volume of supervisees (and volume of supervisees' clients)
- Confusion (of members, supervisees and clients) regarding the member's role in the provision of supervised services
- Billing and invoicing, including for third parties
- Responsibility for client records
- Content of supervision records and supervision contract

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Case Study #1 – Supervisee with personal issues

- You have a supervisee who is going through a difficult time, personally
- There have been complaints from clients, and admin staff, about sessions starting late, and missed sessions
- You do not believe that this supervisee should be seeing any clients at this time;
 these personal issues are starting to affect judgement and client care
- What is the best way to handle this situation?

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Case Study #1 - Options

- 1. Instruct the supervisee to inform clients that they will be taking some time off. Have the supervisee ensure that clients are provided with alternative care options.
- 2. Inform clients that the supervisee is not available due to personal reasons. Take on responsibility for all clients in the short term. In the long term, give clients the option to continue with you or another supervisee.
- 3. Terminate your supervisory relationship with the supervisee and take on direct care for all of the supervisee's clients.
- 4. Ask the supervisee to take some time off. If they agree, transition their clients' care to another supervisee in your office.
- 5. Transition the supervisee's clients to another supervisee in your office regardless of your supervisee's desire to take time off.

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Case Study #1 - Things to Think About

- How do you have difficult conversations with a supervisee who appears to be going through a difficult time?
- What is the threshold for ensuring that your supervisee is practicing safely?
- As the supervising member, do you have an account of all the clients you are responsible for? What is your actual client volume?
- Do you have a plan for seamless, continuing services should one (or more) of your supervisees be unable to continue providing services?
- What is your transition/termination plan should you be unable to take on direct service provision for all of your supervisee(s)' clients?

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Case Study #2 - Boundary violations and sexual abuse

- You have a longstanding, trusted supervisee who is a member of the CRPO
- A client wrote to tell you that at the end of the last session, when she was crying, the supervisee hugged her, and then kissed her on the mouth. She no longer wants to continue in therapy with him.
- As proof of her allegations, she forwards you an email from the supervisee where he says "I'm sorry about what happened. It was probably too much. It won't happen again."
- You immediately raise this allegation with your supervisee. He says he hugged the client at the end of the session because she was crying. He recognizes that he may not have obtained her consent to do so. He firmly denies having kissed the client.
- He says the apology in the email was solely in reference to the hug.
- How do you proceed?

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Case Study #2 - Options

- 1. Tell the client you have the utmost trust in your supervisee. He has learned his lesson and she can continue therapy with him.
- 2. Given the alleged breach of boundaries/sexual abuse regarding this one client, take the client on directly.
- 3. Immediately reassign all the supervisee's clients to another supervisee and reassess your supervisory relationship/learning plan.
- 4. Terminate the supervisory relationship, report the allegations to the CRPO, and take on all of the supervisee's clients.
- 5. Terminate the supervisory relationship, take on all of the supervisee's clients, and make a self-report to the CPO.

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Case Study #2 - Things to think about

- Are you familiar with reporting requirements?
 - Sexual abuse
 - Termination, etc. for reasons of professional misconduct, incompetence, or incapacity
 - Non-health regulators (e.g. OCSWSSW) may have other reporting requirements
- · Are you familiar with the RHPA definition of sexual abuse?
- Ethical considerations about non-mandatory reporting, providing the client with information about funding for therapy from the CPO, when that could potentially trigger an investigation into the adequacy of your supervision.
- Balancing duty to clients and supervisory relationships.

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Case Study #3 – The Private Clinic

- You have been asked to provide supervision of psychological services for a small clinic run by a mix of psychotherapists, social workers, and unregulated therapists.
- You are intrigued, but take your role as a supervisor VERY seriously.
- You have an exploratory meeting with the clinic owners. What are some of the things you will need to learn before deciding whether to supervise?

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Case Study #3 – What to learn

- 1. What are the clinic's areas of practice and client populations
- 2. How many clients do they have and is supervision required for all of them
- 3. What is the intake process
- 4. What is the goal/purpose of supervision
- 5. How will your supervisory role be communicated to clients
- 6. Where are client records stored and who has access to them
- 7. What is the background/training/experience of all potential supervisees
- 8. All of the above (and more!)

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Case Study #3 - Things to Think About

- When providing supervision, you are not providing services directly to the client, but you are fully accountable for services provided to that client
 - Need to know your supervisee(s) well and trust their knowledge and judgement
 - Need to have a good understanding of the reason for supervision, and your role as supervisor
 - Need for frequent and substantive supervision meetings
 - Need to be proactive about supervision rather than wait for the supervisee to bring issues to you (or hear about them from the College)
 - Need to have an excellent account of your client volume, and a plan should you be required to provide direct services to some or all clients
 - Need to be accessible and responsive to all clients

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