

COUNSELOR OR PSYCHOLOGIST SUPERVISION				
COMPETENCY 1: The Practitioner-Patient Relationship				
Country/Mission/Project:			Date last supervision:	
Date:			Goals of last supervision:	
Supervisee:				
Supervisor:				
INTENSITY OF SUPERVISION NEEDED:	IS Intensive Supervision Needed SS Some Supervision Needed MO Model for Others NA Not Applicable	INTENSITY	COMMENTS <i>What exactly is the supervision need? What do supervisee and supervisor think?</i>	SUPPORT PLAN <i>What can supervisee work on before next time? How will supervisor support?</i>
Non-verbal communication Appropriate body language helps patient feel comfortable (open, not too close/far, eye contact). kind and calm tone. Practitioner stays focused, does not seem "distracted".				
Verbal communication Clear language. Practitioner takes time to check that the patient has understood; explains when the patient does not understand. Appropriate speed. Pauses to give the patient time to respond.				
Active listening Shows understanding, paraphrases (rewords), summarizing, clarifies what patient has said.				
Validating Normalizes patient reactions, lets patient know their emotional reactions are understandable. Does not minimize feelings, tell patients to feel differently. No judgment or blame communicated				
Empathy and attunement <input type="checkbox"/> Level 1 Skills: Practitioner puts themselves in patient perspective, to understand their experience. Tone and activity is sensitive to the patient's state (mirroring). <i>See Examples Lvl 1.</i> <input type="checkbox"/> Level 2 Skills: Can adapt own emotional response appropriately in session.				
Collaborative Encourages patient to take an active part in the session. Does not tell the patient what to do in a situation (give advice) but encourages the patient to come up with their own ideas or solutions. Gives supportive feedback to the patient, praises openness.				

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COUNSELOR OR PSYCHOLOGIST SUPERVISION					
COMPETENCY 2: Technical Skills					
Country/Mission/Project:				Date last supervision:	
Date:				Goals of last supervision:	
Supervisee:					
Supervisor:					
INTENSITY OF SUPERVISION NEEDED:	IS Intensive Supervision Needed SS Some Supervision Needed MO Model for Others NA Not Applicable	INTENSITY	COMMENTS <i>What exactly is the supervision need? What do supervisee and supervisor think?</i>	SUPPORT PLAN <i>What can supervisee work on before next time? How will supervisor support?</i>	
Frame & Boundaries <input type="checkbox"/> Level 1 Skills: Sessions help the patient feel safe. They are welcoming and have an ending. patient can openly say their needs. Practitioner helps the patient feel comfortable. Roles, what to expect in the session, limits and confidentiality are clear. <i>See Examples Level 1.</i> <input type="checkbox"/> Level 2 Skills: Frame can be adapted when needed.					
Collecting History <input type="checkbox"/> Level 1 Skills: Practitioner conducts an assessment using standard tools and follows the patient's main concerns, including patient's current supports and strengths. Includes screening for risk of harm and abuse. <input type="checkbox"/> Level 2 Skills: Practitioner conducts a semi-structured interview (standard areas but flexible). Follows up on "hints" of patient and future areas to explore. Uses diagnostic tests where appropriate. Includes patient current supports and strengths. Includes screening for harm/abuse					
Differentiating <input type="checkbox"/> Level 1 Skills: Practitioner helps patient in explore different sides of an issue to understand their difficulty. <input type="checkbox"/> Level 2 Skills: Helps the patient express nuances (fine differences) in emotions and work out ambivalences, even if the patient does not say directly. <i>See Examples Level 2.</i>					
Treatment Plan <input type="checkbox"/> Level 1 Skills: helps patient identify recovery goals (what gives their life meaning? What are their hopes). Is specific in planning with patient, breaks large goals into smaller steps. Includes families/carers/support in planning as needed. Considers resources/barriers in community. At discharge, concludes counselling process supportively, reflecting together on patient progress <input type="checkbox"/> Level 2 Skills: Structures the treatment with the patient based on their goals and prioritizes the plan based on MSF counselling guidelines and responsible professional practice. Concludes the counselling process with a relapse prevention plan. Puts in place a relapse prevention plan collaboratively.					

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COMPETENCY 2: Technical Skills (Page 2)			
	INTENSITY	COMMENTS	SUPPORT PLAN
Psychoeducation <input type="checkbox"/> Level 1 Skills: Gives enough psychoeducation (information) on symptoms experienced, using specific examples. <input type="checkbox"/> Level 2 Skills: Includes comparisons, images or metaphors used by the patient where possible.			
Making Links <input type="checkbox"/> Level 1 Skills: Reviews recovery process with patient, links with previous statements/sessions. <i>Example: reviews session notes, connects what patient says with what was said earlier.</i> <input type="checkbox"/> Level 2 Skills: Makes links for patients with what was discussed in previous sessions and what has happened over the course of sessions and treatment. Includes events and practice opportunities outside sessions. Supports patient reflection.			

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COUNSELOR OR PSYCHOLOGIST SUPERVISION					
COMPETENCY 3: Case Discussion					
Country/Mission/Project:				Date last supervision:	
Date:				Goals of last supervision:	
Supervisee:					
Supervisor:					
INTENSITY OF SUPERVISION NEEDED:	IS Intensive Supervision Needed SS Some Supervision Needed MO Model for Others NA Not Applicable	INTENSITY	COMMENTS <i>What exactly is the supervision need? What do supervisee and supervisor think?</i>	SUPPORT PLAN <i>What can supervisee work on before next time? How will supervisor support?</i>	
Patient-Centered Care <input type="checkbox"/> Level 1 Skills: Advocates for patient. Considers patient a “whole person.” Does not generalize or base explanations on “all patients with this problem.” <i>Example: links patient’s anxiety to patient’s specific experience.</i> <input type="checkbox"/> Level 2 Skills: Integrates thoughts, feelings, behaviors, interpersonal relationships, learning history, environmental and physical factors.					
Categorization <input type="checkbox"/> Level 1 Skills: Identifies patient’s “main complaint”/difficulties and chooses appropriate syndrome. Considers how the person is doing in their day-to-day activities (what is going well, what are the main areas of difficulty). <input type="checkbox"/> Level 2 Skills: Gives appropriate diagnosis based on comprehensive assessment. Considers other similar presentations. Describes functional impairment (how/where is MH condition affecting the patient?). Where no clinical diagnosis, uses other psychological frameworks to understand difficulties. Example: systemic understanding of a conflict, attachment framework.					
Adapting <input type="checkbox"/> Level 1 Skills: If patient is not improving, uses case discussion to understand why and adapt the intervention. <input type="checkbox"/> Level 2 Skills: Thinks about alternatives to own assumptions (ideas about the patient). Adapts interventions. Example: considers impact of rapport (how their own response affects interaction - countertransference) or intervention’s fit for patient.					
Observation <input type="checkbox"/> Level 1 Skills: Describes patient’s appearance and behavior in a simple way. <i>Examples: says how the patient was dressed, if patient was talking slowly or moving a lot, crying a lot.</i> <input type="checkbox"/> Level 2 Skills: Links observations to current difficulties where appropriate, takes them into account in the treatment plan. Examples: recognizes when patient is very self-critical, considers style of help-seeking, comments on carer-child interactions.					

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COMPETENCY 3: Case Discussion (Page 2)			
	INTENSITY	COMMENTS	SUPPORT PLAN
Choice of Intervention <input type="checkbox"/> Level 1 Skills: Uses interventions based on MSF counselling guidelines and WHO. Shows awareness of basic counselling concepts. <i>See Examples Level 1.</i> <input type="checkbox"/> Level 2 Skills: Uses interventions based on MSF counselling guidelines, WHO, and own professional practice or continued learning. Considers benefits of different interventions. Priorities of intervention are based on case formulation.			
Ethical Issues <input type="checkbox"/> Level 1 Skills: Brings up uncertainties in case discussion. Shows awareness of when to seek supervision. <i>Example: risk concerns about abuse.</i> <input type="checkbox"/> Level 2 Skills: Practitioner brings up uncertainties in case discussion and seeks supervision. Shows awareness of common ethical dilemmas and can describe them. Examples: concerns about risk, limits of competency, conflicts of interest (personal involvement with patient).			
Multidisciplinary Work 1 <input type="checkbox"/> Level 1 Skills: Communicates about treatment plan with other team members, shares information. Makes appropriate referrals. <i>Example: discusses rehabilitation goals with the medical team (with patient consent).</i> <input type="checkbox"/> Level 2 Skills: Example: discusses concerns about psychiatric symptoms with the prescriber			

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COUNSELOR OR PSYCHOLOGIST SUPERVISION					
COMPETENCY 4: Clinical Files					
Country/Mission/Project:		Date last supervision:			
Date:		Goals of last supervision:			
Supervisee:					
Supervisor:					
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Completeness <input type="checkbox"/> Level 1 Skills: Practitioner completes appropriate clinical forms after each session, including any screening tools used. Patient's main reason for being seen is clear. <input type="checkbox"/> Level 2 Skills: Assessments include syndromes (diagnoses where appropriate) and follow-up notes include monitoring tools and comments on patient progress.					
Regularity <input type="checkbox"/> Level 1 Skills: Practitioner provides regular follow-up to patients and documents missed appointments. <input type="checkbox"/> Level 2 Skills: Frequency (how often) is appropriate to the patient's needs.					
Multidisciplinary Work 2 <input type="checkbox"/> Level 1 Skills: Appropriate referrals are made to other services, either inside or outside the project. Referrals are adapted to patient needs and respect their wishes. <input type="checkbox"/> Level 2 Skills: This includes management of complicated situations (e.g., protection).					

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COUNSELOR OR PSYCHOLOGIST SUPERVISION				
COMPETENCY 5 (OPTIONAL): Specific Situations and Subgroups				
Country/Mission/Project:			Date last supervision:	
Date:	Click or tap here to enter text.		Goals of last supervision:	
Supervisee:				
Supervisor:				
INTENSITY OF SUPERVISION NEEDED:	IS Intensive Supervision Needed SS Some Supervision Needed MO Model for Others NA Not Applicable	INTENSITY	COMMENTS <i>What exactly is the supervision need? What do supervisee and supervisor think?</i>	SUPPORT PLAN <i>What can supervisee work on before next time? How will supervisor support?</i>
Interventions for children <input type="checkbox"/> Level 1 Skills: Uses expressive (creative) activities adapted to the child's development stage. Example: play or art activities. <input type="checkbox"/> Level 2 Skills: Uses expressive interventions to understand the child's inner world and relationships (adapted to the child's development stage). Therapeutic exercises adapted for children. Example: play therapy, art therapy, therapeutic stories for the purpose of psychoeducation.				
Crisis management <input type="checkbox"/> Level 1 Skills: Practitioner identifies signs of an acute crisis and seeks specialized advice where needed. Example: When the patient becomes very distressed, talks about wanting to end his/her life or hurt others. <input type="checkbox"/> Level 2 Skills: Can stabilize a patient in acute crisis. Can use appropriate skills-based techniques. Examples: a patient having a panic attack or is dissociating.				
Interpreter Practitioner works with interpreter/translator in a collaborative way. Gives clear guidance, requests feedback. Gives space for debriefing and listens.				
Groups <input type="checkbox"/> Level 1 Skills: Practitioner moderates group sessions, allowing participants to contribute and ask questions. Summarizes and closes group sessions appropriately. <input type="checkbox"/> Level 2 Skills: Plans and structures group sessions adapted to patients' shared difficulties and recovery goals. Observes process. Encourages participants to model behavior for and support each other. Does not lecture. Can reframe critical contributions in the group.				

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Additional Comments:

COUNSELOR OR PSYCHOLOGIST SUPERVISION					
COMPETENCY 6: Therapeutic Interventions (Level 2 Skills)					
Country/Mission/Project:		Date last supervision:			
Date:		Goals of last supervision:			
Supervisee:					
Supervisor:					
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Skills-Based Orientation <input type="checkbox"/> Level 2 Skills: Engages patient as an active participant. Supports patient in gradually (step by step) tolerating emotions, experiencing mastery, and regulating behaviors.					
Cognitive Orientation <input type="checkbox"/> Level 2 Skills: Supports patient in exploring and differentiating thoughts, feelings, wishes, beliefs, and assumptions in relation to their reality and history.					
Experiential Orientation <input type="checkbox"/> Level 2 Skills: Integrates techniques (i.e. psychodrama, roleplay, behavioral experiments, gestalt therapeutic elements, etc.) when appropriate for the patient and familiar for the practitioner.					
Directiveness <input type="checkbox"/> Level 2 Skills: Adapts own directiveness to the needs and readiness of the patient. <i>Examples: exploring motivation and readiness for change, "rolling with resistance," providing a holding environment for very distressed patients.</i>					
Relationships <input type="checkbox"/> Level 2 Skills: Practitioner attends to moments of inter- or intrapersonal conflict (conflict between people or within the person). Can explore with patient how this relates to relationships outside. Responds in a way that allows for a different relationship experience.					
Narrative/trauma <input type="checkbox"/> Level 2 Skills: Respects patient as an expert for experience, helps patient cope in the present. Provides psychoeducation on specific symptoms. Supports patient in regaining meaning, integrating experiences into their life story. Does not impose own interpretation or force exposure.					

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Additional Comments: