

Evaluation of appropriateness for video supervision

For use by supervisors of trainees and associates working toward California licensure as an LMFT, LPCC, or LCSW.

Supervisor name _____

Supervisee name _____

Date supervision relationship began _____

Date of this assessment meeting _____

Note: Assessment meeting **must** occur within 60 days of commencement of supervision relationship.

Supervisee skills

In the judgment of the supervisor, does the supervisee present adequate skills to effectively utilize video-based supervision? Consider the supervisee's technical skills, communication skills, clinical skills, and any other skills you deem relevant. On the back of this page, you may wish to list specific evidence that the supervisee has adequate skills for video-based supervision. **Yes** **No**

Supervisee preferences

Does the supervisee prefer to utilize video-based supervision when available? **Yes** **No**

Supervisor preferences

Does the supervisor prefer to utilize video-based supervision when available? **Yes** **No**

Supervisee privacy

In the judgment of the supervisor, is the location where the supervisee will be while receiving video supervision adequately private? Consider the totality of the location, including both the physical environment and the equipment being used. **Yes** **No**

Supervisor privacy

In the judgment of the supervisor, is the location where the supervisor will be while providing video supervision adequately private? Consider the totality of the location, including both the physical environment and the equipment being used. **Yes** **No**

If "no" is selected for any question, video-based supervision is prohibited.

Signature of supervisor _____

Title and date _____

This original document should be maintained as part of the supervisor's records.

This form is by Ben Caldwell, PsyD, and is based on requirements detailed in Assembly Bill 1758 (2022).

This form is available for download at bencaldwelllabs.com/supervision

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