

21 NCAC 68 .0512 RESPONSIBILITIES OF SUPERVISOR AND SUPERVISEE

(a) A professional who has received a credential from the Board and who is serving as a clinical or practice supervisor shall:

- (1) be aware of their position with respect to supervisees and therefore not exploit the trust and reliance of such persons;
- (2) avoid dual relationships that could impair professional judgment, increase the risk of exploitation, or cause harm to the supervisee. To implement this standard the supervisor shall not:
 - (A) instruct or supervise a person with whom the supervisor has participated in a sexual activity; a person living in the supervisor's household; or an immediate family member. For the purpose of this Rule, "immediate family member" means spouse, parent, sibling, child, grandparent, grandchild, stepchild, stepparent, parent-in-law, and child-in-law;
 - (B) provide therapy or therapeutic counseling services to supervisees; or
 - (C) solicit or engage in sexual activity or contact with supervisees during the period of supervision.
- (3) trained in and knowledgeable about supervision methods and techniques;
- (4) supervise or consult only within their knowledge, training, and competency; and
- (5) guide their supervisee to perform services in accordance with the ethical principles of this Chapter. As authorized by the supervisee's employer, the supervisor shall assign to their supervisees only those tasks or duties that these individuals can be expected to perform, based on the supervisee's education, experience, or training, either independently or with the level of supervision being provided;
- (6) withhold confidential information provided by a supervisee except:
 - (A) as mandated by law;
 - (B) to prevent harm to a client or other person involved with the supervision;
 - (C) in educational or training settings where there are multiple supervisors, and then only to other supervisors who share responsibility for the performance or training of the supervisee; or
 - (D) if consent is obtained.
- (7) establish and facilitate a process for providing evaluation of performance and feedback to a supervisee. To implement this process the supervisee shall be informed of the timing of evaluations, methods, and levels of competency expected. Supervision documentation shall be signed by the supervisor and supervisee and include the date, time, duration, method, and topic of the supervision session;
- (8) withhold endorsement of supervisees for credentialing, employment, or completion of an academic training program if they believe the supervisees are not qualified for the endorsement. A supervisor shall develop a plan to assist a supervisee who is not qualified for endorsement to become qualified;
- (9) make financial arrangements for any remuneration with supervisees and organizations only if these arrangements are in writing. All fees shall be disclosed to the supervisee prior to the beginning of supervision; and
- (10) review documentation of previously supervised work experience, provided by the supervisee, for the purpose of credentialing by the Board. The supervisor may verify these hours to the Board if the supervisor deems that the supervision was performed and may include these verified hours in their evaluation to the Board.

(b) The supervisor of record shall provide notice to the office of the Board within 30 days from the date of the last session of clinical supervision that supervision has terminated. Upon receipt of this notice, the Board shall notify the supervisee that they have 30 days to obtain a supervisor to retain the current credential. The supervisee shall add a new supervisor or otherwise update their supervision contract signed and dated by the supervisor and supervisee on file with the Board.

History Note: Authority G.S. 90-113.30; 90-113.33; 90-113.38; 90-113.39; 90-113.40; Eff. April 1, 2003; Amended Eff. January 1, 2014; January 1, 2010; Readopted Eff. October 1, 2020.