Supervisee Name: ________________________________

Please refer to the law and rules governing professional counseling practice for all information related to licensure. The law and rules are available on the board’s website at: http://www.dshs.state.tx.us/1pc/.

Overview of some important Board-Ordered supervision requirements:

- Supervision that is Board-Ordered is not the same as supervision towards licensure (LPC-Intern to LPC). For Board-Ordered supervision, the board has determined that the licensee requires supervision of his or her professional counseling practice related to protection of the public.

- Board-Ordered supervision must be provided by a Texas LPC who is a board-approved supervisor.

- Supervisory sessions must be in face-to-face, one-on-one sessions of at least one hour in duration. Group supervision is not acceptable.

- Supervision shall include rehabilitation related to the issues outlined in the Board Order.

- Compliance with all laws and rules, as well as the Board Order, or any other supervision terms that are applicable, is required.

- Goals shall include a plan for completion of any Continuing Education or other requirements in the Board Order.

- Supervision shall occur in the frequency as required by the Board Order.

- Reports to the board related to supervision shall be submitted in the frequency as required by the Board Order. Reports are due to the board not later than 30 days after completion of the period of supervision designated by the board. Quarterly reports shall include information about the dates, times, and duration of supervision sessions, number of direct client contact hours the licensee provided, as well as the therapeutic service period covered in the report. Content related to the supervisor’s assessment of the supervisee’s compliance with laws and rules governing professional counseling practice is required, as well as progress towards rehabilitation related to the issues outlined by the board in the Board Order. Reports shall include the supervisor’s assessment of whether the supervisee should be practicing counseling in the setting(s) in which she/he is working. Reports may be submitted in letter form, including all these elements, with an original signature.

- The supervisee is responsible to ensure that the supervisor submits the reports timely, or the supervisee may be found in default of the Order, and appropriate disciplinary action may be taken.

- Supervision as a result of a Board Order requires the initial submission of a letter from the executive or designee of the employer(s) on agency letterhead, acknowledging understanding of the Board-Ordered nature of the supervision (as opposed to supervision towards licensure) and authorizing the Board-Ordered supervision within 30 days of commencement of supervision.

- The supervisee must submit a current job description from the agency in which the professional counselor or intern is employed with verification of authenticity from the agency director or his or her designee on agency letterhead or submit a copy of the contract or appointment under which the licensee intends to work, along with a statement from the potential supervisor that the supervisor has reviewed the contract and is qualified to supervise the licensee in the setting.

- Unless otherwise specified, the supervisee shall continue supervision until officially released by the board or executive director. This will be beyond the timeframe required for supervision because the supervisor must submit a final report to the board within 30 days of the end of the time period for supervision as designated in the Board Order, which must then be reviewed and accepted by the board or executive director. The final report must include the supervisor’s assessment of whether the supervisee should be practicing counseling.

- The supervision shall begin within 30 days of the effective date of the Board Order whether or not the supervisee is practicing professional counseling. It is the responsibility of the supervisee to follow-up with the board to establish the effective date of the Board Order.

- A Board-Ordered Supervision Plan shall be submitted to the board for approval within 30 days of commencement of supervision.

- If the supervisee is not practicing professional counseling at the time of the effective date of the Board Order, supervision shall begin within 30 days of the Order, but only supervision accrued while practicing professional counseling will satisfy the supervision requirements of the Board Order. If the supervisee is not practicing as a professional counselor (LPC) when supervision begins, the supervisor must clearly document that the supervisee is not currently practicing professional counseling in the Comments section (section VI) of the Board-Ordered Supervision Plan and in the submitted reports to the board. When the supervisee begins practicing counseling, a new Board-Ordered Supervision Plan describing the work setting must be submitted to the board. A separate Board-Ordered Supervision Plan is required for each employment setting.
A supervisee under Board-Ordered supervision shall not practice without being under supervision. If supervision under the plan terminates for any reason, the supervisee and the supervisor must report the termination to the board within 10 days of termination. The supervisee shall not practice until under supervision by another board-approved LPC supervisor.

The supervisor shall submit a statement to the board within 30 days of commencement of supervision that she/he is independent from the supervisee and does not have a current or prior business, professional, or personal relationship with the supervisee (included in the Affidavit on the last page of the Board-Ordered Supervision Plan).

The supervisee shall inform all clients, employers, and other relevant parties of the probationary status of her/his license.

A new Board-Ordered Supervision Plan must be submitted for approval when any change occurs in the conditions of supervision as approved by the board in the original, approved Board-Ordered Supervision Plan (such as location of practice). This must be submitted within 30 days of the change.

I. Supervisee Information

Name: ______________________________________________ License Type and Number: _______________________

Phone Number: __________________ Is the supervisee currently practicing as an LPC? ☐ Yes ☐ No

Business Name: ______________________________________

Business Address: ____________________________________________

Business Phone: __________________________________________

Work Schedule: ☐ Full time (30hrs/wk) or more ☐ Part time (Hours per week ________)

II. Board-Approved LPC Supervisor Information

Name: ______________________________________________ License Number: _______________________

Business Name: ______________________________________

Business Address: ____________________________________________

Business Phone: __________________________________________  Are you a board-approved LPC Supervisor? ☐ Yes ☐ No

III. Supervision Schedule

Beginning Date of Supervision: ________________________ Supervision Format: ☐ Individual

Frequency of Supervision Sessions: ________________________ (1 hour of supervision every 2 weeks, 1 hour of supervision every month, 1 hour of supervision every quarter, etc.)

Frequency of Reports to Board: ________________________ (Weekly, Monthly, Quarterly, etc.)

IV. Supervision Process (attach additional pages if necessary)

Describe the supervisee’s work setting(s): ____________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

Describe the clients served:

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

Describe the supervisee’s duties and responsibilities, including treatment methods utilized:

_________________________________________________________________________________________

_________________________________________________________________________________________
Formulate four goals for the supervision:
1. _____________________________________________________________
2. _____________________________________________________________
3. _____________________________________________________________
4. _____________________________________________________________

Methods of supervision to be used: _______________________________________

V. Attachments to include with Board-Ordered Supervision Plan

Current job description from the agency in which the supervisee is employed with verification of authenticity from the agency director.

☐ Yes  ☐ No

Acknowledgement letter from agency’s director or designee on agency letterhead, authorizing board-ordered supervision.

☐ Yes  ☐ No

Statement from board-approved supervisor that the supervisor has reviewed the job description and is qualified to supervise the supervisee in the setting.

☐ Yes  ☐ No

VI. Comments

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

VII. Affidavit of Understanding and Signatures

Under penalties of perjury, I declare and affirm that the statements made in the supervision plan, including accompanying statements, are true, complete and correct. I understand that any false or misleading information in, or in connection with my supervision plan may be cause for denial or loss of supervision time received and/or loss of licensure. I hereby certify that I have reviewed a copy of the law and regulations pertaining to professional counseling in the state of Texas, including those related to Board-Ordered supervision.
Supervisee
I, as the supervisee, affirm that all information provided by me on this form is true and accurate, and I affirm the following:

- That I have read the Board Order relating to supervision that I am required to procure as a condition of my license.
- That I will meet with my supervisor as required by the Board Order.
- That I will abide by all law and rules of the board including ethics requirements.
- That I will inform all clients, employers, and other relevant parties of the probationary status of my license.
- That I am independent from the supervisor and do not have a current or prior business, professional, or personal relationship with the supervisor.

_________________________________________  _______________________________________
Signature of Supervisee                              Date

Board-Approved LPC Supervisor
I, as supervisor of the above named applicant or licensee, affirm that all information provided by me on this form is true and accurate, and I affirm the following:

- That I have read the Board Order relating to supervision that I am agreeing to provide as a condition of the supervisee’s license.
- That I will meet with the supervisee as required by the Board Order.
- That I will monitor the supervisee’s abidance of all law and rules of the board including ethics requirements.
- That I am independent from the supervisee and do not have a current or prior business, professional, or personal relationship with the supervisee.

_________________________________________  _______________________________________
Signature of Supervisor                              Date

Mail To:
Texas State Board of Examiners of Professional Counselors
Mail Code 1982
P.O. Box 149347
Austin, Texas 78714-9347
Phone: 512-834-6658  Fax: 512-834-6677