# IC&RC Clinical Supervisor (CS)
# Exam Candidate Guide

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## NOTE REGARDING THE CS REFERENCE LIST

The Reference List is now provided separately from the Candidate Guide and can be found on our website. Please note that to better serve exam candidates with their exam preparation, IC&RC staff are working with Subject Matter Experts to review and update the list of references for the CS exam.

# Purpose of the Exam Candidate Guide

The purpose of the Clinical Supervisor (CS) Exam Candidate Guide is to provide candidates with specific information about the Clinical Supervisor exam. Candidates are encouraged to review the information contained in this guide, along with the IC&RC General Candidate Guide, to support their exam preparation.

# About the Clinical Supervisor (CS) Certification

| | |
|---|---|
| **Purpose** | Certifies individuals who provide direct clinical supervision to counselors in the addiction and behavioral health fields. |
| **Areas of Focus** | Counselor supervision, ethical responsibilities, and workforce development. |
| **Target Audience** | Supervisors overseeing addiction counselors' professional development. |

# Question Breakdown and Exam Length

*(refer to the General Candidate Guide for a more detailed exam overview)*

| CS | |
|---|---|
| **Number of Scored Questions** | 125 |
| **Number of Pre-test Questions** | 25 |
| **Total Number of Questions** | 150 |
| **Length of Administration** | 3 hours |

# Content Domains and Exam Blueprint

All questions on the exam will address content covered in the domains listed in the table below and expanded upon in the following pages. The "weight" of a content domain indicates the proportion of questions from that domain on the exam form relative to the other domains. Candidates can use this information for their individual exam preparation planning.

| Domains | Weight on Exam |
|---|---|
| Domain I: *Counselor Development* | 24% |
| Domain II: *Professional and Ethical Standards* | 23% |
| Domain III: *Program Development and Quality Improvement* | 13% |
| Domain IV: *Performance Evaluation* | 13% |
| Domain V: *Administration* | 10% |
| Domain VI: *Treatment Knowledge* | 17% |

## DOMAIN 1: Counselor Development

A. Develop a supportive and individualized supervisory alliance

1. Supervision techniques (individual and group)

2. Counselor skill building techniques

3. Providing, soliciting, and receiving feedback

4. Clinical supervision models

5. Relationship-building techniques

6. Conflict resolution

7. Teaching and training methods

8. Critical thinking techniques

9. Models of behavior change

10. Tenets of diversity, equity, and inclusion

11. Communication techniques (in-person and remote)

B. Maintain a constructive supervisory learning environment

1. Adult learning styles

2. Motivational techniques

3. Teaching and training techniques

4. Tenets of diversity, equity, and inclusion

5. Leadership styles

6. Capacity to manage stress

7. Observation techniques

8. Educational opportunities and professional development

9. Strengths, challenges, and limitations

10. Assessment techniques and instruments

11. Culturally adapted evidence-based practices

C. Educate supervisees on concepts of diversity, equity, and inclusion (e.g., attunement, humility, self-appraisal)

1. Diverse populations

2. Relationships and boundaries

3. Transference and countertransference

4. Empathy and compassion

5. Self appraisal of personal biases

D. Provide timely and specific feedback to supervisees

1.  Communication skills

2.  Facilitative interpersonal skills

3.  Observation techniques

4.  Individual development plan

5.  Counselor job tasks

6.  Therapeutic modalities

7.  Strengths, challenges, and limitations

8.  Interpret evaluative tools

E.  Create a professional development plan with supervisees

1.  Career development interventions and strategies skills

2.  Assessment practices and tools skills

3.  Time management techniques

4.  Learning assignments plan

5.  Supervisee's strengths, challenges, and limitations

6.  Development goals

F.  Implement a variety of direct supervisory activities

1.  Various supervisory techniques and modalities

2.  Substance use disorder evidence-based practices

3.  Ethical standards and professional codes of conduct

4.  Consequences of ethical violations

5.  Counseling versus clinical supervision boundaries

6.  Clinical observation

7.  Teaching modalities

8.  Stress management (e.g., self-care, compassion fatigue, vicarious trauma, burnout)

9. Reporting and documenting

G. Educate supervisees regarding evidence-based practices

1. Substance use and co-occurring disorders evidence-based best practice

2. Curriculum-based care

3. Emerging trends and current research

4. Maintain qualifications and competence

5. Understanding and implementing a variety of treatment modalities

H. Assist supervisees with developing a personal wellness plan

1. Stress response (e.g., compassion fatigue, moral injury, vicarious trauma, burnout, secondary stress) management

2. Fitness for duty

3. Case load management

4. Problem solving

5. Conflict resolution

6. Collaborative relationships

7. Time management

## DOMAIN 2: Professional and Ethical Standards

A. Adhere to ethical, legal, and professional codes of conduct

1. Scope of practice

2. Policies governing counselor/client and supervisor/supervisee relationships

3. Ethical standards

4. Professional standards and codes

5. Confidentiality standards

6. Consequences of violations of applicable policies, standards and codes

7. Procedures and obligations for reporting violations

8. Impact of establishing dual relationship

B. Follow due process guidelines when responding to grievances

1. Clinical supervisor standards

2. Professional standards and codes

3. Regulatory standards

4. Quality improvement standards

5. Consequences of violations of applicable policies, standards, and codes

6. Procedures and obligations for reporting violations

C. Pursue personal and professional developments

1. Counseling career progression within work setting and profession

2. Training and education required to reach career goals

3. Assessment activities necessary to identify an appropriate career development track

4. Personal and professional strengths and challenges

5. Networking strategies

D. Verify supervisees inform clients about the limits of confidentiality.

1. Applicable regulatory standards

2. Applicable confidentiality standards

3. Client's rights and responsibilities

4. Informed consent policies and procedures

E. Verify that supervisees inform clients about supervision practices and obtain documented informed consent

1. Purpose and value of consultation

2. Importance of informed consent

3. Client's rights and responsibilities

4. Documentation requirements

5. Regulations regarding informed consent

F. Educate supervisees on various ethical decision-making models

1. Ethical decision-making models

2. Ethical codes and guidelines, relevant laws, and regulations

3. Procedures to report ethical violations

4. Identifying ethical dilemmas and violations

G. Verify supervisees maintain complete, accurate, and timely documentation

1. Clinical documentation standards

2. Legal issues related to patient care

3. Applicable record keeping standards

4. Crisis intervention techniques

5. Critical incident reporting standards

H. Seek supervision or consultation to evaluate ongoing training needs

1. Importance of ongoing supervision

2. Individual development plan

3. Remaining open to feedback

4. Modeling appropriate clinical, professional, and personal behavior

## DOMAIN 3: Program Development and Quality Improvements

A. Recognize the balance between fidelity and practical application when implementing new clinical practices.

1. Applicable professional standards and roles

2. Applicable roles within multi-disciplinary team

3. 12 core functions and substance use disorder counseling competencies

4. Management practices

B. Advocate for ongoing quality improvement (e.g., trend analysis, gaps in care, utilization review)

C. Support the organization's quality improvement plan

D. Build and maintain relationships with referral sources and other stakeholders

## DOMAIN 4:  Performance Evaluation

A. Communicate practice expectations and performance metrics

B. Assess supervisees' performance

1. Performance evaluations

2. Observation (e.g., direct, virtual, audio)

3. Record audit

4. Organizing data

C. Self-assess for evaluator bias (e.g., leniency, overemphasis on one area of performance, favoritism, stereotyping)

1. Supervisor accountability

2. Indicators of potential bias

3. Referral protocols

D. Adhere to professional standards of ongoing supervisory documentation (e.g., completeness, clarity, accuracy, security)

# DOMAIN 5: Administration

A. Ensure comprehensive orientation is provided to new employees

    1. Organizational culture and environment

    2. Applicable confidentiality standards

    3. Communicating administrative procedures and policies

    4. Technological applications

    5. Interpreting applicable policies, standards, and codes

B. Involve the supervisees in designing and scheduling their activities to maintain clinically effective service delivery.

    1. Management practices

    2. Grievance policies

    3. Problem solving/conflict resolution theories

    4. Planning and coordinating resources

    5. Staff schedules and clinical activities

    6. Community resources

C. Identify Human Resources processes, (e.g., hiring, disciplinary action, performance review, and termination)

    1. Human resources policies and procedures

    2. Professional standards of performance and ethics

    3. Credentialing or certification standards

    4. Career development interventions and strategies

    5. Communicating standards and expectations

    6. Providing effective feedback

    7. Correlating job requirements to actual job description

D.  Ensure workforce is trained to meet service delivery needs.

1.  Required competency standards

2.  Training assessment tools

3.  Barriers to workforce development

4.  Techniques to assess service delivery needs

5.  Documentation procedures, policies, and standards

6.  Critical incident identification and reporting

7.  Matching training requirements to work requirements

8.  Assessing workforce training needs

9.  Regulatory compliance (e.g., fraud, waste, abuse, documentation)

## DOMAIN 6:  Treatment Knowledge

A.  Utilize knowledge of the tenets of substance use disorders in supervision

1.  Alcohol and other substances

2.  Pharmacology

3.  12 core functions

4.  Mutual support philosophies and traditions

5.  Evaluating various populations for specific needs (e.g, social determinants of health)

6.  Co-occurring and process disorders

7.  Integrated behavioral and physical healthcare

8.  Interdisciplinary care coordination

9.  Diagnostic and Statistical Manual (DSM)

10. Treatment models and their applications

11. American Society of Addiction Medicine (ASAM) patient placement criteria

12. Continuum of care

13. Pharmacological interventions and medication assisted treatment (MAT)

14. Reading and understanding research

15. Communicating treatment expectations

16. Using treatment methods to support long term recovery

17. Impact of stigma

B. Apply the principles of substance use treatment in supervision

1. Progression of substance use disorder

2. Resources on substance use disorder research

3. Recovery support programs

4. The process of recovery

5. Relapse prevention/Maintaining recovery

6. Harm reduction

C. Select assessment and evaluation tools for the population or individual served

D. Identify the use of pharmacological interventions and interactions

1. Medication assisted treatment (MAT)

2. Drug interactions

3. Neuropharmacology

4. Assessing motivation of patient for pharmacological intervention

5. Integrating pharmacological interventions into treatment

6. Providing medication education and information

7. Patient safety concerns (e.g., overdose, withdrawal, impairment)

# Sample Questions

The following are sample questions that are similar to those you will find in the examination. For additional practice, refer to our Practice Exams, which are available on our website.

The questions on the examination are multiple-choice with either three (3) or four (4) choices. There is only <u>one</u> correct or best answer for each question. Carefully read each question and all the choices before making a selection and choose the single best answer.

Mark only <u>one</u> answer for each question. You will not be given credit for any question for which you indicate more than one answer. It is advisable to answer every question since the number of questions answered correctly will determine your final score. There is no penalty for guessing.

## Domain 1: Counselor Responsibility

1. Which of the following is a common symptom of the later stages of burnout?

    (a) Aggression.
    (b) Apathy.
    (c) Depression.
    (d) Dissociation.

2. Group supervision is an effective means to promote skill development for the beginning counselor because it gives the:

    (a) clinical supervisor a basis for reassigning cases when appropriate.
    (b) clinical supervisor a forum to promote staff cohesiveness and morale.
    (c) counselor the opportunity to receive peer support and feedback.
    (d) counselor an opportunity to develop trusting relationships with other counselors.

3. Which of the following situations allows the supervisor to provide the MOST effective feedback to the counselor?

   (a) Self-report of a session by the counselor.
   (b) Audiotape review of a session by the supervisor.
   (c) Supervisor participation in a session as a co-therapist.
   (d) Role-play with the supervisor and the counselor.

4. When presented with conflicting messages, communicators are MOST likely to rely on the:

   (a) non-verbal message.
   (b) verbal message.
   (c) most recent message.
   (d) context of message.

## Domain 2: Professional and Ethical Standards

5. What are the MOST effective ways the supervisor can demonstrate supervisory involvement and prevent malpractice?

   (a) Consultation and documentation.
   (b) Role-playing and role modeling.
   (c) Counseling and documentation.
   (d) Co-facilitation and feedback.

6. Clients should be informed of a supervisory relationship because:

   (a) any observation will inhibit the client.
   (b) the client may question the credibility of the counselor.
   (c) the client's care will be discussed openly in agency staff meetings.
   (d) the supervisor has a relationship with the client through the counselor.

## Domain 3: Program Development and Quality Improvements

7. The BEST management technique to use in order to maintain effective programming and to ensure a maximum level of client care is:

   (a) practicing linkage and networking strategies.
   (b) monitoring supervisees regularly for signs of burnout.
   (c) reviewing daily program schedules
   (d) matching clients to appropriate staff and level of care.

8. A community treatment specialist contacted the supervisor to report that a number of their clients are unable attend treatment at the supervisor's facility because the facility has limited evening hours. How should the supervisor proceed?

   (a) Arrange a meeting with the administrator and operations staff to discuss expansion of hours.
   (b) Schedule treatment sessions at a local community center that has evening hours.
   (c) Discuss extending the hours of the facility with the staff and have them vote on the outcome.
   (d) Authorize overtime for counselors willing to work the extended hours.

## Domain 4: Performance Evaluation

9. Being skilled at self-assessment is an important competency for both supervisee and supervisor as a movement toward:

   (a) improved self-image.
   (b) higher self-esteem.
   (c) enhanced self-awareness.
   (d) increased self-concept.

## Domain 5: Administration

10. A supervisee is a new hire and unfamiliar with the structure of the agency. During orientation, the first thing a supervisor should do is to:

   (a) ensure that the supervisee reads and understands the agency's policies and procedures.
   (b) have the supervisee job shadow another individual in the clinical schedule for group and individual treatment.
   (c) set goals for evaluation purposes during the first supervisory session.
   (d) establish an individual development plan according to the agency's policies.

## Domain 6: Treatment Knowledge

11. Which counselor behavior is an effective method for dealing with denial?

   (a) Stating the client is not ready to change.
   (b) Asking circular questions.
   (c) Self-disclosure.
   (d) Consultation.

12. Which of the following are potential results of cocaine use?

   (a) Bloodshot eyes, impaired reflexes, and increased risk of being in a motor vehicle accident.
   (b) Loss of psychological boundaries, a feeling of enhanced insight, and enhanced recall of past events.
   (c) Nausea and vomiting, slurred speech, excitement, and double vision.
   (d) Convulsions, strokes, and possible death from cardio - respiratory arrest.

## Sample Questions Key

| | |
|---|---|
| 1 | B |
| 2 | C |
| 3 | C |
| 4 | A |
| 5 | A |
| 6 | D |
| 7 | D |
| 8 | A |
| 9 | C |
| 10 | A |
| 11 | B |
| 12 | A |