

RETIRED DOCUMENT

This document is retired, effective April 1, 2026, corresponding with the *Health Professions and Occupations Act* (HPOA) in-force date. As this document is retired, it is not considered a **Standard, Code of Ethics, or Code of Conduct** under the HPOA.



College of

HEALTH AND CARE PROFESSIONALS OF BC



Standard Category:	Standard Title:	Standard #:
Clinical Practice Standard	Supervision	SOP-PRAC-07
Regulation Bylaw Reference:		HPA Reference:
Bylaws: Schedule 17, Section 5		Section 19(1)(k)
Authorization:	Date Approved:	Date Revised:
Board	December 6, 2019	December 2, 2022

DEFINITIONS

“Supervision” means the process by which a supervisor oversees a supervisee’s practice of a health profession superintended by the CHCPBC or oversees a supervisee’s engagement in delegated clinical activities as part of a registrant’s practice, where that supervisory oversight is required by or under the *Health Professions Act* or CHCPBC’s Bylaws, including requirements of CHCPBC standards or guidelines. Supervisory oversight may include a supervisor monitoring, reviewing, guiding, directing, training, evaluating, or providing formal or informal feedback about, a supervisee’s activities, performance, or competencies, in accord with professional standards and guidelines.

NOTE: Supervision focuses on professional standards and guidelines. Supervision may be distinguished from employment-related or organizational (e.g., administrative or managerial) supervision.

“Supervisor” means a registrant who has agreed to provide supervision, including supervision for a Certified Practice (CP) certificate applicant, Communication Health Assistant (CHA), Conditional registrant, university student, or registrant. A supervisor includes a Practice Review Supervisor.

“Practice Review Supervisor” means a registrant appointed by the Quality Assurance & Professional Practice (QAPP) Committee to provide supervision to another registrant to remediate practice deficiencies identified in a practice review.

NOTE: A supervisor for a conditional registrant may have a concurrent role as the registrant’s employment-related (e.g., administrative or managerial) supervisor, but must not occupy any role during supervision giving rise to an actual or apparent conflict of interest.

“Constant supervision” means supervision where the supervisee may not engage in clinical activities unless the supervisor is in attendance.

“Close supervision” means supervision with a sufficiently close proximity between supervisor and supervisee that a supervisor may attend in person at the request of either the supervisor or supervisee, e.g., the supervisor and supervisee work within the same facility.



“General supervision” means supervision where the supervisor is accessible to a supervisee but does not attend in person. General supervision is synonymous with remote supervision. Accessible may be by telephone, email or virtually.

SCOPE

All CHCPBC Registrants.

PURPOSE

To define supervision.

To define and classify levels of supervision used by the CHCPBC.

To outline the application of the various levels of supervision.

To identify the required qualifications of supervisors in various practice capacities.

STANDARD

General qualifications for all supervisors

The supervision involves oversight of the supervisee’s practice and includes registrants and Communication Health Assistants (CHAs). A registrant may not act or continue as a supervisor unless the registrant meets the following criteria (the “general qualifications”):

- The registrant is a Full registrant (a Conditional or Non-practicing registrant may not act as a supervisor);
- The registrant meets all QAPP Program requirements (i.e., Practice Hours and Continuing Competence Credits (CCCs)), including requirements pertaining to certified practice if applicable;
- The registrant is not subject to limits or conditions on their practice;
- The registrar is satisfied the registrant is free from any actual or apparent conflict of interest that may affect the registrant’s supervisory oversight of the supervisee; and
- The registrant is not under investigation.

If a registrant fails to meet one or more of these criteria while acting as a supervisor, that registrant must immediately inform CHCPBC. CHCPBC will then conduct a review which may involve a committee review of the circumstances, to determine if the registrant may continue to act as a supervisor, or whether they must cease to act in this capacity. If instructed by CHCPBC to cease acting as a supervisor, the registrant in question must make all reasonable efforts to arrange for an alternate supervisor for the supervisee.

A registrant may not, with respect to supervision, directly charge any Certified Practice certificate applicant supervisee, CHA supervisee, or student supervisee.



Additional qualifications for specific circumstances

In addition to meeting the general qualifications, registrants must meet the following additional qualifications as they apply to specific circumstances.

Certified Practice certificate applicants

A registrant may not act or continue as a supervisor for an applicant for a Certified Practice (CP) certificate unless the registrant meets the following criteria:

- The registrant currently holds the applicable certificate;
- The registrant has held the applicable certificate for at least six months;
- The registrant has declared they are competent and have the necessary skills to provide supervisory oversight;
- A regulated health professional from British Columbia, must have Full registration with their regulatory college and have the CP area of practice within their scope of practice.
- A regulated health professional, who is registered with another regulatory body, outside of British Columbia, may not act as a supervisor for CP applicant unless:
 - The Registration Committee¹ has pre-approved the regulated health professional's qualifications as substantially equivalent to the requirements for holding the applicable certificate;
 - The regulated health professional meets the requirements of their regulatory body for the activities covered by the certificate for at least 6 months; and
 - The regulated health professional has declared they are competent and have the necessary skills to provide supervisory oversight.

Communication Health Assistants (CHAs)

A registrant acting as a supervisor for a CHA remains accountable and responsible for the care provided by the CHA. Registrants do not need to co-sign CHA charting as per [Documentation & Records Management \(SOP-PRAC-01\)](#)

Conditional registrants

A Full registrant may not act as a supervisor for a Conditional registrant unless they have a minimum of 2 years clinical experience.

RHIP (Conditional) Practicum

A registrant may not act as a supervisor for a RHIP (Conditional) practicum unless the registrant meets the following criteria:

- The supervising registrant has had at least 2 years of clinical experience;
- The training setting allows for practical experience with the relevant population; and
- The RHIP (Conditional) registrant and the supervisor must complete a *Proposed RHIP (Conditional) Practicum Supervisor* (Form 8) and a *Summary of Clinical Practicum Hours* (AF-17).

¹ On the recommendation of the QAPP Committee.



Graduate students

A Registered Audiologist (RAUD) or a Registered Speech-Language Pathologist (RSLP) acting as a supervisor for a graduate student must adhere to the student's university guidelines and requirements for supervision of graduate students.

A registrant acting as a supervisor for a graduate student with the University of British Columbia (UBC) must adhere to UBC's guidelines for clinical instructors/educators.

Where a university's guidelines and requirements for supervision do not specify an experience requirement, a registrant must not act as a supervisor for a graduate student without at least 5 years' experience as a Full registrant.

APPLICATION OF THE LEVELS OF SUPERVISION

All supervisory situations

A supervisor must provide, and a registrant supervisee must receive, CLOSE or CONSTANT supervision when a supervisee is learning a new skill(s) and is not yet independent, or in any other situation where the supervisee's relevant skills are insufficient to practice independently or with GENERAL supervision.

Certified Practice training

A supervisor for a registrant in training for a CP certificate, and their registrant supervisee, must adhere to the levels of supervision in the approved certification program. They may extend the level of supervision for any objective(s) beyond required levels by mutual agreement.

Communication Health Assistants (CHAs)

A supervisor must always provide GENERAL supervision to their CHA supervisees, e.g., in person, by telephone, or electronically.

A supervisor providing GENERAL supervision must document the essence of any issue, request or query, and the guidance they provided.

CONSTANT or CLOSE supervision is required when a CHA is learning a new skill or needs a refresher at the discretion of the supervising registrant.

If, in a supervisor's clinical judgment, a potential risk to a client warrants increased supervision, a supervisor must provide CLOSE or CONSTANT supervision for the CHA.

Conditional registrant practice

A supervisor for a Conditional registrant must always provide, and a Conditional registrant must always receive, at least GENERAL supervision. They may adjust the level of supervision beyond required levels by mutual agreement.

RHIP (Conditional) Practicum & graduate student training



The level of supervision appropriate for a RHIP (Conditional) practicum or a graduate student will vary with the supervisee's level of training and their skills in various aspects of practice.

A supervisor for a RHIP (Conditional) practicum or a graduate student must provide, and the supervisee must receive, levels of supervision appropriate to learning objectives, and as required by the College's Bylaws or the student's university guidelines and requirements for supervision and/or instructors/educators. They may adjust the level of supervision beyond required levels by mutual agreement.

Remedial situations

A QAPP Practice Review supervisor and other supervisors as directed, must provide to a supervisee, the level of supervision required by the QAPP Committee, any undertaking & consent agreement of the Inquiry Committee (IC), any order of the Discipline Committee (DC), or any remedial learning plan concerning supervision in an employment setting.

REFERENCES

Supervisor resources

Many of the core supervisory skills are the same in these various practice contexts. The University of British Columbia (UBC) has excellent resources including:

1. The [Preceptor Education Program](#) – This is free and has eight excellent modules 15-20 minutes each.
2. E-Tips – Also free modules that cover several of the basics.
3. One-day workshops offered periodically by UBC's [Department of Physical Therapy](#) – CHCPBC can submit names of potential attendees. Please notify the College if you are interested in an upcoming workshop.

Supervision requires skills and abilities on the part of the supervisor. Registrants providing supervision are advised to review their skills and abilities and develop a learning plan accordingly. The *Clinical Supervision Skills Tool* (Victorian Government, Melbourne, Australia) offers extensive learning plan options for supervisors.

CHCPBC RELATED DOCUMENTS

[Certified Practice & Above Entry Level Practice \(SOP-PROF-06\)](#)

Certification Program & Application forms (Certificates A ~ L)

[Clinical Supervision Skills Toolkit \(ACPG-07\)](#)

[Attaining & Maintaining Practice Competence \(SOP-PROF-02\)](#)

[Communication Health Assistants \(Delegation & Assignment\) \(SOP-PRAC-04\)](#)



[Communication Health Assistants \(Education, Training, & Competence\) \(SOP-PRAC-05\)](#)

[Communication Health Assistants \(Verifying Education, Training, & Competence\) \(CPG-09\)](#)

[RHIP \(Conditional\) Practicum Requirements \(POL-R-02\)](#)

[Registrant Code of Ethics \(SOP-PROF-08\)](#)

[Registrant Code of Ethics \(Annotated\) \(SOP-PROF-09\)](#)