ALBERTA COLLEGE OF
SOCIAL WORKERS

PRACTICE SUPERVISION

Guideline

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Practice supervision is a cornerstone of professional social work practice and a key mechanism through which social workers maintain competence, accountability, and professional growth throughout their careers (Davys & Beddoe, 2021).

It should not be understood as an indicator of limited competence, but rather as a normal and expected component of ethical and competent practice across all stages of a social worker's career.

Supervision, consultation, and reflective professional dialogue serve multiple, interrelated functions. These include supporting ongoing learning and skill development (formative), providing space for reflection, support, and professional resilience (restorative), and ensuring accountability to clients, organizations, professional standards, and the public (normative).

These functions may coexist and, at times, exist in tension within supervisory relationships, particularly where supervision involves both support and evaluative or risk management responsibilities. Effective supervision acknowledges and navigates these tensions in a way that strengthens both public protection and professional development.

Through this relational and structured process, supervision supports social workers to develop confidence, refine practice, strengthen professional judgement, and navigate increasingly complex practice environments. It also provides a forum for exploring ethical dilemmas, assessing and managing risk, clarifying professional boundaries, responding to uncertainty, and integrating professional values into practice and decision-making.

PURPOSE

The purpose of this practice guideline is to complement the ACSW Standards of Practice and CASW Code of Ethics (2005) by providing clear, evidence-informed guidance regarding practice supervision in social work across Alberta. The guideline identifies circumstances where supervision is required by legislation, standards, or ACSW policy (see Appendix A), clarifies regulatory expectations related to supervision, and supports reflective decision-making for social workers, supervisors, employers, and organizations.

SCOPE

This guidance applies to social workers at all stages of professional practice, recognizing that supervision, consultation, and other forms of professional support remain important throughout a social worker's career, although the nature and frequency of those supports may change over time.

Providing practice supervision is a distinct and advanced area of practice. This document is not intended to provide comprehensive education or training in supervision theory, supervisory models, or the development of supervisory competence, nor does reading or applying this guidance establish competence to provide supervision.

UNDERSTANDING SUPERVISION: DEFINITIONS

Supervision, as used throughout this document, refers to **practice supervision** unless otherwise specified. Supervision is one example of professional support in the practice of social work. Not all professional support involves authority over practice.

Practice supervision, as defined in Standard A(y) of the ACSW Standards of Practice, refers to a formal supervisory relationship that includes oversight, evaluation, and direction of professional social work practice. It is distinguished from other forms of professional support, such as consultation, mentoring, or coaching, which may be valuable but do not include formal authority or accountability for practice decisions or service delivery.

A determining feature of practice supervision is the presence of evaluative and directive authority, including responsibility for reviewing, guiding, and being accountable for the quality and safety of professional practice. Not all supervisory, consultative, or leadership roles meet the criteria for practice supervision under the Standards; classification depends on the extent of supervisory authority, evaluative responsibility, and accountability for practice.

Where a relationship meets the criteria for practice supervision under the ACSW Standards of Practice, the supervisor must be a registered social worker with no conditions on their practice permit, unless otherwise permitted under legislation, regulatory policy, or approved exceptions.

Supervision is distinguished by its focus on accountability for professional social work practice and the authority to evaluate, direct, and oversee professional decisions and service delivery. Other forms of professional support such as consultation, mentoring or coaching may be valuable but do not carry authority or accountability for practice.

Clinical supervision is a type of practice supervision specific to clinical social work practice.

All clinical supervision is practice supervision because it includes accountability for professional practice and authority to oversee services being provided. However, not all practice supervision is clinical supervision. Many social workers require practice supervision in non-clinical roles such as community practice, case management, advocacy, policy, leadership, research, education or program coordination.

Clinical supervision may be required where a social worker:

- **is pursuing a clinical practice enhancement or designation**
- **performs restricted activities such as psychosocial intervention under supervision**
- **provides psychotherapy or other advanced clinical services**

Practice supervision

- Includes clinical supervision
- Does not include administrative supervision

Administrative supervision refers to the managerial and organizational oversight of a social worker's role within an employment setting. It is primarily concerned with job performance, workload management, operational requirements, compliance with organizational policies, and the effective delivery of services within the parameters of the agency or organization.

Administrative supervision includes authority and accountability for employment-related expectations and may involve evaluation of job performance. It is distinct from practice supervision, which relates to oversight of professional practice as defined in the ACSW Standards of Practice. Administrative supervision may or may not include practice supervision; these functions can exist separately or be combined within a single role, depending on the organizational structure.

In some settings, the same individual may hold both administrative and practice supervisory responsibilities. In other settings, these roles are separated, with different individuals providing administrative oversight and practice supervision. Where both functions are present, or where they are separated, it is important that the scope, purpose, and limits of each role are clearly defined to ensure shared understanding of authority, accountability, and professional oversight.

Clear differentiation between administrative supervision and practice supervision helps social workers, supervisors, organizations, and the public understand the nature of the supervisory relationship and avoid confusion between employment-based oversight and professional practice supervision.

To distinguish between these activities, the following descriptions are provided, with additional detail in Appendix B.

When supervision is limited to overseeing organizational requirements and compliance with policies, it does not fulfill practice supervision requirements under the ACSW Standards of Practice.

MENTORSHIP

Mentoring is a supportive, relationship-based process that focuses on the mentee's overall professional growth, long-term development, and career progression. It typically involves a more experienced social worker offering guidance, wisdom and perspective, drawing on their broader professional journey.

The mentoring relationship is collaborative and nonevaluative. The mentor does not hold authority over the mentee's practice, is not accountable for the mentee's service delivery, and does not provide formal oversight. Instead, mentorship emphasizes:

- **exploring career goals**
- **navigating professional identity**
- **expanding networks and opportunities**
- **developing confidence and leadership capacity**

CONSULTATION

The ACSW Standard of Practice 1(f) defines consultation as a problem-solving process in which professional expertise is offered to an individual, group, organization or community. In a professional practice context, consultation is a process that occurs between two or more professionals, where one is seeking help, insight, or assistance regarding a particular matter or problem. The focus is narrow and specific, and advice or guidance provided may or may not be put into action (ACSW, 2023).

COACHING

Coaching is a structured, time-limited, and goal-oriented process focused on developing specific skills, competencies, or performance outcomes. It is typically driven by clearly defined objectives that the coach and coachee establish together.

Coaching emphasizes:

- **targeted skill-building**
- **performance enhancement**
- **measurable goals**
- **short-term, focused learning cycles**

The coach helps the coachee refine techniques, build confidence, and improve performance in particular tasks or roles. Unlike supervision, coaching does not include evaluative authority, regulatory accountability, or responsibility for the coachee's professional decisions. Coaching can support or complement supervision, but it does not replace the oversight, direction and accountability required within a supervisory relationship. (Falender & Shafranske, 2004, 2017).

These professional support activities may occur amongst peers, colleagues, supervisors, managers, or external professionals. However, unless one individual holds formal authority and accountability for overseeing practice, these activities do not constitute practice supervision under the Standards of Practice.

See Appendix B: Differentiating Professional Support Roles for more details on the distinctions between these roles.

PRINCIPLES OF SUPERVISION

These concepts are designed to provide a shared understanding of supervisory relationships and guide how supervision is planned, delivered and documented.

In the context of supervision, a principle refers to a fundamental guiding belief or foundational concept that shapes how supervision is understood, designed and practiced.

These are not procedures or rules. They are the ideas that guide policies, expectations and behaviours within supervisory relationships. (ACSW, 2023).

Accountability

Supervision is an accountable professional relationship in which the supervisor holds responsibility for oversight, evaluation, and ensuring ethical, competent, and safe practice.

Competence and Scope Alignment

Supervision ensures that practice aligns with a social worker's competence, role, and scope of practice. Work assigned must be appropriate to demonstrated capability.

Safe, Ethical and Standards-Aligned Practice

Supervision supports adherence to ethical, legal, and professional standards and contributes to the protection of clients, the public, and the profession.

Clear Roles, Expectations and Boundaries

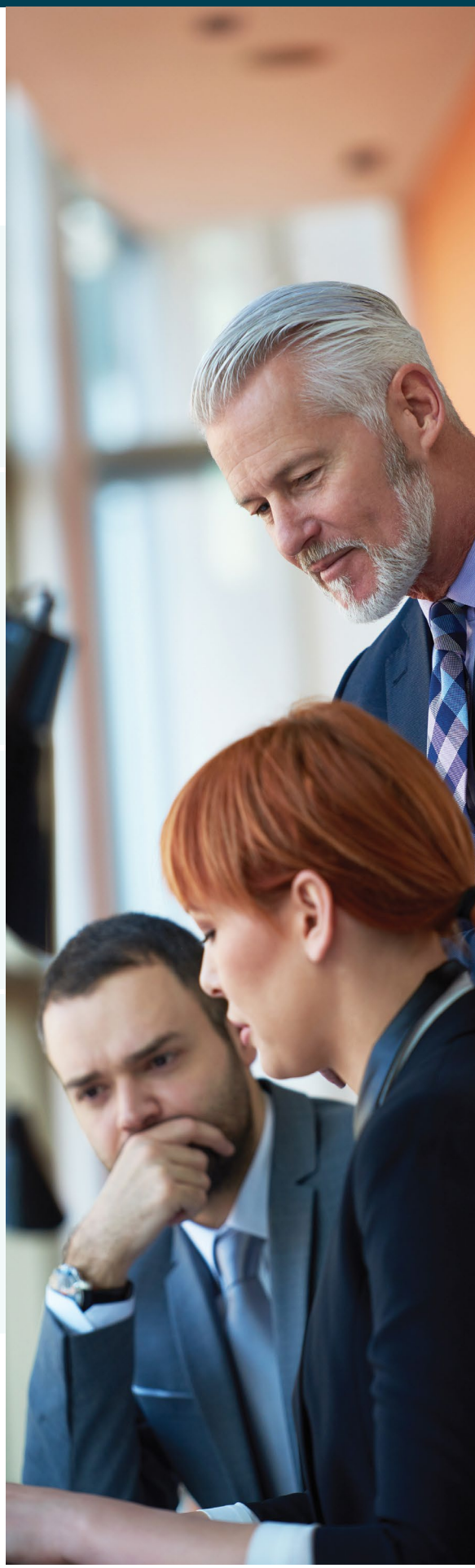
Supervision requires clear understanding of roles, authority, expectations, and responsibilities. It distinguishes practice supervision from administrative supervision and other forms of professional support.

Monitoring, Evaluation and Feedback

Supervision includes ongoing observation, structured feedback, and formal or informal evaluation to support safe practice and professional development.

Reflective, Culturally Responsive and Supportive Practice

Supervision supports reflective practice, cultural responsiveness, and awareness of systemic, relational, and organizational influences on practice. It fosters ethical reasoning and professional judgement in complex contexts.



WHO CAN PROVIDE SUPERVISION?

Providing supervision is not simply an extension of practice expertise, it is a distinct and advanced area of social work practice (Falender & Shafranske, 2019; Davys & Beddoe, 2021). Supervisors should be experienced professionals who have demonstrated competence in their own practice, have received training and have experience in supervision models, leadership and mentorship, and who practice with cultural responsiveness and reflective awareness of systemic and relational influences in supervision.

Registered social workers who supervise should:

REGISTRATION

- **Have active registration on the ACSW general registry** with no conditions on their practice permit.
- **Have active registration on the ACSW e-practice or general registry** if they reside in another province and provide supervision virtually, and comply with all registration requirements. They cannot have any conditions on their practice permit in any other jurisdiction where they are regulated.
- **If applicable, hold any requisite practice enhancement required** to provide the specific type of supervision (such as authorization to perform the restricted activity of psychosocial intervention).

EDUCATION

- **Have academic credentials equivalent to or exceeding** those of the supervisee.

EXPERIENCE

- **Be experienced practitioners. ACSW typically defines this as a minimum of five years of relevant practice experience.**
- **Be able to demonstrate:**
  - **competence across the supervisory domains** outlined in this guideline.
  - **experience in the practice** they are supervising.
  - **engagement in formal education or structured professional learning** related to supervision prior to assuming the supervisory role. Educational preparation should address topics such as:
    - supervision models and approaches
    - ethics and boundaries in supervision
    - providing feedback and evaluating competence
    - documentation and accountability in supervision
    - managing power dynamics and dual roles
    - supporting reflective practice and professional development.

CONTINUING COMPETENCE

- **Participate in ongoing supervision** and/or consultation
- **Identify ongoing professional development** in this practice area in their annual learning plan

In circumstances where supervision is appropriately provided by another health professional, they should possess the requisite practice expertise, supervision competence, and authority to assume responsibility and accountability for the supervisee's professional social work practice. The supervisor should understand the regulatory requirements and professional responsibilities of social workers. These are reflected in the Standards of Practice and Code of Ethics. In all cases, supervision arrangements must be clearly defined, appropriate to the practice context, and consistent with applicable standards, legislation, and organizational requirements.

Before entering a supervisory relationship, both supervisors and supervisees share responsibility for assessing their readiness, capacity and areas for development. To support this, a summary of key supervision competencies and indicators is provided in Appendix C. These competencies outline the knowledge, skills, ethical responsibilities, and relational qualities required to guide, evaluate, and support social workers in practice.

SUPERVISION IN EMPLOYMENT CONTEXTS

Supervision is implemented differently across employment and practice settings depending on organizational structure, service demands, staffing availability, and the nature of practice. While the principles of practice supervision remain consistent, the way supervision is implemented may vary.

In many employment contexts, supervision may be provided through a variety of roles or structures.

Regardless of structure, the following conditions should be met:

- **Clarity about who holds responsibility** for practice oversight and evaluation
- **Understanding of and documentation** of supervision arrangements
- **Supervision that:**
  - **Is appropriate to the identified supervision** goals or requirements, level of risk, complexity, and competence of practice
  - **Includes mechanisms for escalation** of concerns where required

In some employment contexts, access to appropriate practice supervision may be limited due to organizational structure, staffing constraints, or role design. Refer to the section on accessing supervision (p.14) and the FAQs for additional guidance when supervision is not available.

THE PRACTICE OF SUPERVISION

SUPERVISION MODELS OR FRAMEWORKS

A practice model or framework provides a structured way of understanding and guiding how supervision is carried out in a particular context.

A variety of supervision models and frameworks are used in social work practice. Supervisors typically draw on multiple approaches to respond to the needs of supervisees, the practice context, and the purpose of supervision. This guideline does not prescribe a specific model or framework.

PRACTICE SUPERVISION THROUGHOUT PROFESSIONAL PRACTICE

The need for supervision, and/or approach to supervision may change over time depending on the nature of the work, level of risk, professional experience, practice setting, and regulatory requirements.

While all social workers are expected to engage in ongoing professional reflection, consultation, and competence development appropriate to their role and setting, as set out in the Standards of Practice (G.1(g)), **there are specific circumstances where formal supervision is explicitly required by legislation, ACSW Standards of Practice, or ACSW policy.**

Field Practicum Supervision

Supervision requirements are set through accreditation/approval standards and are identified by the student's academic institution.

Social work students in practicum may or may not already be registered social workers depending upon the academic qualification being pursued. Social work students participate in field practicum placements that require supervision. The ACSW Education Approval Standard 7, Field Placement, outlines the practicum placement supervision requirements for social work diploma programs. The Canadian Association for Social Work Education (CASWE-ACFTS) is the accreditation body for Bachelor of Social Work and Master of Social Work programs in Canada.

Provisional Registration

The *Social Workers Profession Regulation* 4(2) outlines the required supervised practice hours (1500 hours) for social workers on the provisional registry.

Re-instatement or Re-entry to Practice

Social workers returning to practice and reinstating a licence or returning to an active practice status after a period of withdrawal or inactive status, may be required to engage in supervision.

Acquiring Practice Enhancements

Most social work practice operates fully within the general scope of practice, including many roles in direct practice, community development, advocacy, teaching, policy and research.

Practice enhancements are a pathway for those seeking advanced clinical recognition.

The following practice enhancements are voluntary designations that recognize advanced competence in clinical social work practice and require supervision:

- **independent authorization to perform the restricted activity of psychosocial intervention**
- **clinical social work designation**

ACSW Standard E.5(c) requires social workers performing the restricted activity of psychosocial intervention to have supervision if they are not individually authorized.

ACSW clinical program policies and procedures outline who can provide supervision to clinical candidates. (ACSW, 2023; ACSW Clinical Policy, 2026).

Practice Remediation *(Health Professions Act 40.1(1))*

Supervision may also be used as a structured tool for practice remediation when concerns about competence, judgement, or adherence to standards are identified and do not meet the threshold for a complaint. Concerns may be identified by the social worker themselves, or through ACSW departments such as Registration, Professional Practice or Professional Conduct.

Professional Conduct *(Health Professions Act 82(1)(i))*

A finding of unprofessional conduct can result in a supervision condition being applied to a social worker's practice permit. Supervision is also used in professional conduct cases as a structured tool for practice remediation.

ACCESSING SUPERVISION

The Standards of Practice reference supervision both directly (where supervision must be provided and documented) and indirectly (where competence in specific practice areas requires supervised experience or training or consultation). Details on where ACSW's Standards request or require supervision can be found in Appendix A.

While standards relating to supervision remain unchanged, the College recognizes that access may be limited by geography, area of practice, availability of qualified supervisors, or financial considerations. In such circumstances, social workers remain responsible for taking reasonable steps to obtain appropriate supervision and for maintaining records of the efforts made to secure it.

Where ongoing supervision is not reasonably available, social workers should implement alternative measures to support competent and ethical practice and address identified learning, practice, or risk management needs. Such measures may include:

- **structured peer consultation** or peer reviews
- **targeted continuing education**
- **professional engagement activities** reflected in the annual professional development plan
- **careful scope-of-practice** management
- **ACSW** Practice Consultation Service

Social workers should be prepared to demonstrate how they have assessed their supervision needs and what steps they have taken to support competence, professional accountability, and safe practice where access to supervision is limited.

Limitations in access to supervision do not remove the obligation to practice competently and ethically; however, it is understood that specific circumstances may require adaptive strategies to uphold professional standards and client safety (Bogo, 2022; Davys & Beddoe, 2021; O'Donoghue & Tsui, 2015).

COMPONENTS OF SUPERVISION

This section outlines the core components of the supervision process, including how supervision is planned, documented, delivered, and evaluated. It also describes the key responsibilities of supervisors and supervisees, clarifying how oversight, guidance, decision-making authority, and accountability function within the supervisory relationship (Falender & Shafranske, 2019; Bogo, 2022).

Accountability and Responsibility

In a supervisory relationship, **responsibility** refers to the supervisor's active role in supporting the supervisee's practice, including goal setting, guidance, feedback, evaluation, and addressing practice concerns to ensure ethical, competent and safe service delivery (Falender & Shafranske, 2019; Davys & Beddoe, 2021; Alberta College of Social Workers, 2023).

Accountability, in contrast, is the supervisor's obligation to be answerable for the oversight of the supervisee's professional practice within the scope of the supervisory relationship. Supervisors hold accountability to multiple stakeholders:

- **Supervisees** – Providing appropriate oversight, guidance, and feedback, within the established scope and parameters of supervision.
- **Clients and the public** – Exercising appropriate oversight to support safe, ethical, and competent practice and contribute to improved client outcomes.
- **ACSW** – Ensuring supervision aligns with the Standards of Practice and Code of Ethics.
- **Employing organization** – Supporting safe, ethical, and competent service delivery through adherence to professional and organizational requirements, provision of evidence-based and evidence-informed practices, participation in monitoring and evaluation processes, and contributing to conditions that support quality service delivery, workforce stability, and positive client outcomes.

While accountability establishes a formal duty to uphold professional standards, it does not equate to personal liability for every action of the supervisee. Liability is typically framed by regulatory standards, organizational policies, and the supervisor's adherence to professional, ethical, and documented supervisory practices. Maintaining thorough records, following established supervision protocols, and escalating risks appropriately are key measures that help supervisors balance accountability with risk management while protecting clients and maintaining public trust.

Supervision is a formal professional relationship with responsibilities for both parties. Appendix D contains questions to support shared reflection and dialogue for the supervisor and supervisee prior to establishing supervision. They assist in clarifying roles, authority, capacity and expectations, and in determining whether supervision can be provided in a manner that is consistent with professional standards.

SUPERVISORY REQUIREMENTS

This section describes professional expectations and leading practices in the provision of supervision. It is intended to clarify supervisory obligations and standards-aligned practices.

DEVELOPING A SUPERVISION PLAN OR CONTRACT

A clear and structured plan is essential for establishing a shared understanding of expectations, responsibilities, and boundaries within the supervisory relationship. It ensures supervision is purposeful, transparent, and grounded in professional and ethical standards, and provides a foundation for accountability, safety, and reflective learning (Davys & Beddoe, 2021).

The supervision plan outlines key elements of the supervisory arrangement, including goals, format, duration, documentation expectations, evaluation processes, and mechanisms for addressing concerns. The plan may be developed jointly but should be reviewed jointly to ensure shared understanding and clarity. Appendix F provides additional information regarding supervision contract components.

In settings where supervisory responsibility is shared between two or more individuals (e.g., job-sharing or part-time arrangements), roles and responsibilities must be clearly defined, including coordination of evaluation processes, information sharing, and continuity of supervision.

CONSENT

Attention to informed consent is a core professional responsibility within supervision practice. Consent considerations arise both in relation to participation in the supervisory relationship and the involvement of clients in supervision activities.

Supervisee Consent

The supervision contract serves as a form of informed consent to the supervisory process. It helps ensure that supervisees understand and agree to the purpose, expectations, roles, responsibilities, limits of confidentiality, methods of supervision, documentation practices, and any evaluative components of the supervisory relationship.

Client Consent

Supervision may involve discussion of client services, review of client documentation, observation of professional practice, or the recording of client interactions for supervisory purposes. Social workers must ensure that clients are appropriately informed about the role of supervision in service delivery and that consent requirements are addressed in accordance with the ACSW Standards of Practice.

Attention should be given where supervision involves direct observation, recording of client interactions, or circumstances where clients may not reasonably anticipate the involvement of others in the supervisory process. While the way consent is obtained may vary depending on the practice context, social workers remain responsible for ensuring that consent processes are consistent with professional obligations, client needs, and applicable standards.

Standard B.4 (a)(b)(c) related to consent and **Standard D.5** related to confidentiality apply in relation to consent in a supervision context. Relevant standards related to informed consent and supervision are summarized in Appendix A.

The reflective questions in Appendix E provide practical considerations to support the application of consent requirements in supervision contexts.

METHODS OF SUPERVISION

Unless otherwise specified in legislation, regulation, standards of practice, or ACSW policy, there are no prescribed hours or fixed formats for supervision. Instead, supervisors are responsible for determining appropriate methods and frequency of supervision based on professional judgement, competence, and contextual risk.

Supervision should be guided by competency-based and developmental principles, using ongoing observation, feedback, and reflective dialogue to assess practice and support growth (Falender & Shafranske, 2004, 2017, 2019; Davys & Beddoe, 2020). Early in a supervisory relationship, or when supervisees are new to a role, setting, or level of risk, supervision typically involves more frequent, structured, and directive oversight. This may include direct observation, case review, documentation review, and focused guidance on ethical decision-making, risk assessment, and role expectations.

As competence develops, supervision may shift toward greater reflective dialogue, indirect observation, and increased autonomy. However, this progression is not linear. The intensity and methods of supervision should be reviewed and adjusted in response to changes in risk, practice context, or performance. Supervision should be strengthened when supervisees encounter unfamiliar populations or interventions, increased complexity, emerging ethical uncertainty, or when concerns about competence or performance arise. In such circumstances, supervisors may temporarily increase structure, frequency, or direct oversight to support safe and competent practice.

This flexible, risk-informed approach ensures that supervision remains responsive to both developmental needs and practice realities, supporting accountability, professional growth, and client safety. **Standard F.2E** in the ACSW Standards of Practice outlines a supervisor's responsibility in this area. Refer to Appendix A for more information.

Supervision may be provided in individual, group, or blended formats depending on purpose, risk, and supervisee needs. Individual supervision is generally required where close oversight, individualized feedback, or formal evaluation is necessary, particularly in higher-risk or complex practice contexts.

Group supervision can support shared learning and reflective discussion where supervisees have comparable learning needs and where confidentiality, complexity, and risk can be appropriately managed. In many contexts, a combination of individual and group supervision provides the most effective balance of oversight and professional development.

Assigning Work

Responsibility for assigning work may rest with a practice supervisor, an administrative supervisor, an employer, or another designated individual, depending on the practice setting and organizational structure. Regardless of how work is allocated, social workers with supervisory responsibilities must take reasonable steps to ensure that professional activities are appropriate to the supervisee's competence, stage of professional development, and the complexity and risk of the practice context.

Where a practice supervisor has concerns that assigned work exceeds a supervisee's competence or readiness for independent practice, those concerns must be discussed with the supervisee and, where appropriate, with the individual or organization responsible for workload allocation. Practice supervisors must not provide supervision for activities that fall outside their own area of competence and must ensure they have sufficient knowledge, skill, and judgement to effectively oversee and evaluate the professional work for which they are providing supervision.

Effective supervision requires ongoing communication regarding scope of practice, competence, risk, and professional development to support safe and ethical service delivery.

Coordination with Administrative Supervision

In some settings, practice supervision and administrative supervision are performed by different individuals. In these cases, clear communication and role clarity are essential to support safe, ethical, and accountable practice. Coordination between roles should occur in accordance with organizational policy and with appropriate transparency to the supervisee. Administrative supervision does not replace or diminish the requirements of practice supervision.

Delegation of Supervision Functions

Supervisors may delegate specific supervision activities such as direct observation, skills coaching, or focused feedback to another qualified professional who has the relevant expertise, experience, and competence in an area of practice. This may include other regulated professionals or experienced practitioners with specialized knowledge relevant to the supervisee's work.

Delegation of supervision functions does not transfer accountability. The primary supervisor remains responsible for the overall supervision relationship, including oversight, evaluation, and decisions related to the supervisee's practice development.

Where supervision functions are delegated, the supervisor must ensure appropriate coordination and communication with the individual providing delegated input and must integrate that input into ongoing supervision and evaluation processes.

Supervising Other Regulated Professionals

When supervising other regulated professionals, supervision may occur within overlapping scopes of practice (e.g., psychotherapy, psychosocial intervention, case management, program evaluation) or within administrative or operational supervisory structures and is shaped by role, delegation, and organizational authority rather than professional designation alone. Each regulated professional remains accountable to their own regulatory body, scope of practice, and ethical and practice standards. Supervisors should have sufficient understanding of the relevant professional scopes and obligations to support safe and coordinated practice.

Where a social worker holds a formal supervisory role, they remain accountable for the adequacy of supervision provided within that role, including appropriate oversight, delegation, and evaluation.

Supervising Unregulated Staff

When supervising unregulated staff, supervision is grounded in organizational authority and delegated responsibility. The supervisor is responsible for ensuring that assigned tasks align with the individual's role, training, and demonstrated competence, and for providing direction, training, monitoring, and evaluation in accordance with organizational requirements.

Unlike regulated professionals, unregulated staff do not have independent regulatory accountability, and responsibility for service quality and safety rests primarily with the supervising professional and the employing organization.

PROFESSIONAL RELATIONSHIPS: MAINTAINING BOUNDARIES

Maintaining appropriate professional boundaries is essential to an effective and ethical supervisory relationship. Boundaries support clarity of roles, reinforce the purpose and authority of supervision, and create conditions for reflective, accountable practice.

Standard F.5 sets out expectations regarding dual and multiple role relationships. Refer to Appendix A for additional information about this standard.

Within supervision, these expectations are heightened by the inherent evaluative function of the relationship and the presence of power. This includes not only formal supervisory authority, but also positional and relational power, such as professional status, seniority, institutional authority, and power associated with social location and identity. Supervisors must be attentive to how these dynamics may shape participation, disclosure, and decision-making within supervision.

Supervisors must ensure that authority is exercised in a manner that is transparent, respectful, and not influenced by personal, social, financial, organizational, or other contextual factors that may compromise professional judgement or objectivity. This includes identifying and managing actual or perceived conflicts of interest and situations where roles may overlap, shift, or become unclear.

Clear expectations regarding communication, availability, confidentiality, and the scope and limits of supervision must be established and revisited as needed. Supervisors should remain alert to early indicators of boundary strain, including role confusion, shifting expectations, or drift from the supervisory focus, and respond promptly through clarification, consultation, or revision of the supervision agreement.

Where boundary concerns arise, supervisors and supervisees should engage in open dialogue and seek consultation where appropriate, ensuring decisions remain aligned with ethical and regulatory expectations and support safe, reflective practice. This includes distinguishing supervision from other supportive processes such as debriefing following critical incidents or personal therapy. Reflective questions to help manage dual roles in supervision can be found in Appendix G.

FEEDBACK AND EVALUATION

Feedback and evaluation are integral components of supervision. Supervisors provide ongoing feedback to support learning and development, and formal evaluations when required. Together, these processes support professional growth while contributing to accountability to clients, organizations, and the public.

From the outset of the supervisory relationship, expectations regarding feedback and evaluation should be made clear. Transparency supports a shared understanding of how progress will be assessed and reduces uncertainty about expectations and processes.

Feedback is most effective when it is specific, timely, balanced, and clearly connected to professional expectations. It should be grounded in the supervisor's observations, clearly expressed, and delivered in a manner that supports learning and reflection, including thoughtful, curious, and reflective dialogue where appropriate.
Giving and receiving feedback constructively requires care, preparation, and attention to how messages are communicated and received. (Davys & Beddoe, 2021)

Where areas for development are identified, expectations for improvement should be clearly articulated, along with strategies or supports to strengthen competence and professional practice.

Formal evaluations should be fair, transparent, based on clearly defined criteria, and shared with the supervisee as set out in the ACSW Standards of Practice, F.2(c). Refer to Appendix A for more information.

Additional information on giving feedback effectively is available in this resource, Giving and receiving feedback, available on the ACSW website.

At times, supervisors may identify concerns related to competence, professional judgement, ethical practice, or service delivery. When this occurs, supervisors should respond in a timely and proportionate manner by increasing oversight, providing clear feedback, documenting concerns, and implementing appropriate supports or corrective measures. Where supervisors do not have the authority to manage performance or take disciplinary action, concerns should be escalated to the appropriate individual or level of leadership while continuing to support the supervisee and promote client and public safety.

DOCUMENTING SUPERVISION

Social workers are expected to maintain records appropriate to the type of service being provided and are required to document supervision, as detailed in the Standard **G.1(i)**. Refer to Appendix A for additional information.

Supervision documentation may be maintained in written or electronic format and should clearly identify the date, participants, modality, key discussion points, decisions made, direction provided, and follow-up actions. Both supervisors and supervisees may maintain supervision records where appropriate to ensure shared clarity and continuity of supervision.

Supervision documentation may include both transitory (process) notes and summative (formal) records. Transitory notes are working documents used to support ongoing supervision and are not typically part of the permanent supervision record. Summative records include supervision agreements, supervision logs, evaluations, significant practice decisions, risk management actions, and directions related to practice. These records form part of the accountable supervision record and should be clear, objective, and suitable for professional or regulatory review.

Supervision records should be managed, stored, and retained in accordance with applicable legislation, organizational policy, and any relevant record retention requirements. Where no legislative requirement exists, social workers are expected to adhere to the following Standard of Practice:

CHANGES TO THE SUPERVISORY RELATIONSHIP

Supervision may be time-limited or connected to a particular role, learning goal, employment context, or regulatory requirement. While individual supervisory relationships may end, social workers remain responsible for engaging in supervision or peer consultation appropriate to their field of practice and setting, as outlined in the Standard G.1(g). Refer to Appendix A for additional information.

When a supervisory relationship ends or changes, reasonable steps should be taken to support continuity of professional oversight, clarify ongoing responsibilities, and safeguard clients, supervisees, and the public.

Whenever possible, supervision transitions should be planned. Planning allows time to address outstanding issues, clarify responsibilities, and arrange appropriate ongoing supervision where required. Where client services may be affected, social workers should follow applicable standards related to continuity of service, referral, and termination.

At the conclusion of a supervisory relationship, any outstanding practice concerns, learning goals, supervision requirements, or risk management issues should be appropriately addressed and communicated, consistent with confidentiality obligations and organizational requirements. Supervision documentation should be finalized, maintained, and retained in accordance with applicable legislation, organizational policy, and ACSW Standards of Practice.

COMPETENCE

The ACSW expects social workers who provide supervision to participate in continuing competence activities related to the provision of supervision as set out in Standard G.1(i). Refer to Appendix A for more information.

This requirement recognizes that supervision is a specialized area of practice that requires ongoing learning, reflection, and skill development. Continuing competence activities help supervisors strengthen their ability to navigate the ethical, relational, organizational, and evaluative dimensions of supervision while supporting competent practice and public protection.

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APPENDIX A: ACSW REQUIREMENTS FOR SUPERVISION IN STANDARDS OF PRACTICE

The table below notes standards referenced in this guideline.

STANDARD	DESCRIPTION
B.4	**Consent for Services** (a) A social worker will obtain informed consent from a client before providing professional services to the client. A social worker will give to each client an accurate account of the professional services to be provided: i. before starting services and at any time the social worker is proposing a change to the services being provided; and detailing any potential risks to the client. (b) Where services are mandated, the principles of informed consent will be applied as much as is reasonable for the given circumstances. (c) Written informed consent is required from a client before professional services provided to the client are observed by others or electronically recorded for supervision purposes
B.6	**Use of Assessment Instruments** (a) Social workers will receive training and supervision as is appropriate prior to using assessment instruments independently.
D.4	**Record Keeping and Confidentiality – Maintenance and Disposal** (a) A social worker will store records in a way that maintains the confidentiality of the information contained in the records. (b) A social worker will adopt retention policies and procedures that will physically safeguard case records against any anticipated threats or hazards to their security or integrity. (c) When a social worker's documentation is part of the workplace's permanent record, the retention of such records must be done in accordance with organizational policies. (d) A social worker will maintain professional records for 10 years following the last entry for a professional service. Where an organization maintains both a paper and an electronic file, only one (1) complete file must be maintained following the closure of the file.
D.5	**Confidentiality** (h) A social worker will inform clients that supervision and professional consultation are part of professional social work practice and that confidential information may be shared as part of the process.

E.3	**Technology in Social Work Practice** (m) When using or providing supervision and consultation by technological means, a social worker will follow the standards that would be applied to a face-to-face supervisory relationship and will be competent in the technologies used.
E.4	**Limits on Practice and Adding New Services or Techniques** (b) A social worker will limit her or his practice to areas in which the social worker has gained competence through education, training, or supervised experience.
E.5	**Restricted Activity: Psychosocial Intervention** (c) A social worker not individually authorized may perform restricted psychosocial interventions under the supervision of another authorized regulated health professional competent in the restricted activity.
F.2	**Professional Relationships: Dignity of Others** (b) A social worker who has the responsibility for hiring or evaluating the performance of other staff members will fulfill such responsibilities in a fair, considerate, and equitable manner, using clearly defined criteria. (c) A social worker who has the responsibility for evaluating the performance of colleagues, employees, supervisees, or students will share their evaluations with them. (e) A social worker providing practice/clinical supervision is responsible and accountable for the services provided by a student or supervisee. The social worker will provide an adequate level of supervision to both be aware of the supervisee's strengths and limitations and to meet the developmental needs of the student or supervisee.
F.4	**Impaired Ability to Perform** (e) A social worker whose ability to provide professional services is impaired will seek supervision in developing a plan for managing responsibilities to clients and others as may be appropriate. Where the social worker does not have a direct supervisor/manager the social worker will consult with a colleague.

F.5

Dual/Multiple Role Relationship

(a) A social worker will act to ensure that the difference between professional and personal relationships with clients is explicitly understood and respected and that the social worker's behaviour is appropriate to this difference.

(c) If a dual/multiple role relationship other than those noted in section F.7 develops and is discovered after the professional relationship has been initiated, the social worker will seek supervision or where no supervisor exists, consultation regarding the relationship and:

i. Discuss the possible consequences of the dual/multiple role relationship with the client;

ii. Terminate the professional relationship if it is in the client's best interests to do so; and

iii. If appropriate, assist the client in obtaining professional services from another social worker or another professional

(e) A social worker who continues to provide professional services when a dual/multiple role relationship may exist must seek regular consultation/ supervision with another social worker regarding the dual/multiple role relationship and subsequent provision of professional services to the client and include the contents of the consultation in the client's record.

G.1

Professional Accountability: Within the Profession

(g) A social worker will have ongoing practice/clinical supervision or peer consultation appropriate to their field of practice and setting.

(i) When a social worker provides supervision, the supervision must be ethical, competent, and consistent with these Standards of Practice. A social worker who is responsible for the supervision of others will:

i. be aware of the different types of supervision and multiple responsibilities of a supervisor;

ii. participate in continuing competence activities related to the provision of supervision; and

iii. keep appropriate records of supervision.

APPENDIX B: DIFFERENTIATING PROFESSIONAL SUPPORT ROLES

Supervision is one example of professional support in the practice of social work. Not all professional support involves authority over practice. Practice supervision is distinguished by its focus on accountability for professional social work practice and the authority to evaluate, direct, and oversee professional decisions and service delivery. Other forms of professional support such as consultation, mentoring, or coaching may be valuable but do not carry authority or accountability for practice. The following table clarifies the distinctions between supervising, consulting, coaching and mentoring.

DIMENSION	SUPERVISING	CONSULTING	COACHING	MENTORING
Primary Purpose	Oversight of practice; professional development; client protection	Provide expert input, perspective, and expanded options related to specific cases, issues, or areas of expertise	Enhance performance, goal attainment, confidence, and skill or leadership development	Support professional growth, career development, identity formation, and wisdom-sharing
Authority Structure	Formal, hierarchical	Non hierarchical and collegial (even when occurring within supervision)	Collaborative and developmental; may occur within a hierarchical context	Typically non-hierarchical; relational and developmental
Evaluative Function	Yes — includes performance evaluation	No formal evaluative function (though supervisor retains evaluation authority if embedded in supervision)	Typically, non evaluative, though evaluative authority may remain in the background if part of supervision	No formal evaluation; feedback is developmental and supportive
Accountability for Outcomes	Supervisor shares responsibility for practitioner competence	Practitioner retains responsibility for decisions and outcomes	Practitioner retains responsibility for decisions and outcomes (ultimate responsibility remains with supervisor when embedded in supervision)	Mentee retains responsibility for learning and professional decisions

Focus of Attention	Social worker development and quality of client services	Specific cases, challenges, questions, or areas requiring expertise	Skill development, performance improvement, confidence-building, and leadership capacity	Long-term professional growth, role socialization, confidence, and career trajectory
Scope	Ongoing, comprehensive	Often time limited and issue specific	Often goal focused and time defined	Typically long-term and evolving
Power Differential	Explicit and structural	Minimal or absent	Minimal to moderate, depending on context and organizational setting	Minimal; based on experience rather than authority
Decision Making Authority	Supervisor may direct, approve or restrict practice	Consultant advises and offers perspectives; does not direct practice	Coach facilitates reflection and learning; does not direct practice	Mentee makes decisions; mentor offers guidance and perspective
Typical Outcomes	Competence, ethical practice, risk management, professional growth	Increased clarity, informed decision making, and expanded practice options	Improved skills, performance, confidence, and capacity for self directed growth	Improved skills, performance, confidence, and capacity for self directed growth

Davys & Beddoe, 2020; Falender & Shafranske 2004, 2017, 2019.

APPENDIX C: COMPETENCE AREAS AND INDICATORS

COMPETENCE AREA	COMPETENCE INDICATOR
Practice	• Demonstrates sustained competence and experience in the practice being supervised • Understands relevant interventions, professional responsibilities, risks, and limitations of practice • Applies practice knowledge to guide supervisee decision making and problem solving • Maintains current knowledge of evolving standards, research, and practice developments
Ethical and Professional Integrity	• Demonstrates knowledge of applicable legislation, Standards of Practice, and Code of Ethics • Integrates professional and regulatory expectations into supervisory guidance and evaluation • Maintains appropriate professional boundaries and manages power dynamics in supervision • Engages in ongoing learning and consultation related to supervisory practice
Supervision-Specific Knowledge and Skills	• Demonstrates knowledge of supervision models, approaches, and methods • Structures supervision intentionally, including goal setting, agenda setting, and documentation • Uses a range of supervisory methods such as teaching, coaching, modelling, and reflective discussion • Adapts supervision approaches to the developmental level, role, and learning needs of the supervisee
Evaluative Capacity	• Assesses supervisee competence using multiple sources of information (e.g., observation, documentation review, case discussion) • Provides timely, specific and constructive feedback • Conducts both formative and summative evaluations of practice • Documents supervision discussions, evaluations, and decisions appropriately

Risk Management and Ethical Judgment	• Recognizes ethical concerns, competence gaps, and practice risks early • Provides corrective feedback and increased oversight when concerns arise • Takes appropriate action to address risks to clients, organizations, or the public • Escalates concerns through appropriate organizational or regulatory channels when required
Relational and Communication Skills	• Establishes respectful and professional supervisory relationships • Communicates expectations clearly and addresses concerns directly • Encourages reflection and open discussion of challenges and mistakes • Recognizes and responds to power dynamics, cultural differences, and systemic inequities
Contextual and Organizational Awareness	• Demonstrates awareness of organizational policies, role expectations, and system pressures affecting practice • Supports supervisees in navigating tensions between organizational requirements and professional standards • Ensures sufficient time and organizational support for regular supervision activities • In multidisciplinary settings, clarifies roles and collaborates with discipline specific supervisors when evaluation of professional competence falls outside the supervisor's expertise
Reflective Practice Skills	• Encourages critical reflection on practice decisions, ethical dilemmas, and organizational challenges • Supports supervisees in identifying learning needs and professional development goals • Reflects on their own supervisory practice and seeks consultation or feedback when needed • Engages in continuing professional development related to supervision

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APPENDIX D: REFLECTIVE QUESTIONS FOR SUPERVISORS AND SUPERVISEES

These questions support supervisors and supervisees in shared reflection and dialogue prior to establishing supervision.

SUPERVISOR QUESTIONS

Scope and Role Clarity	• Am I clear on the purpose and scope of the supervision (e.g., practice supervision, administrative oversight, regulatory requirements)? • Does this supervision fall within my own scope of practice and competence?
Competence and Experience	• Do I have the skills required for supervision, including feedback, evaluation, documentation, and reflective facilitation?
Authority and Accountability	• Can I determine and adjust the methods and frequency of supervision? • Do I have the authority to provide meaningful supervision, including the ability to address performance concerns and escalate risks? • Am I prepared to be accountable for oversight and shared responsibility for outcomes within the scope of supervision?
Time and Capacity	• Do I have adequate time to provide regular, structured, and responsive supervision?
Power, Ethics and Equity	• How might power dynamics, differences (social, cultural, structural and positional), or organizational context affect the supervisory relationship? • Am I prepared to practice supervision in an ethical, culturally responsive, and anti-oppressive manner?
Supports and Consultation	• Do I have access to consultation or organizational support for complex or high-risk situations?

APPENDIX E: REFLECTIVE QUESTIONS – CONSENT

The following reflective questions provide practical considerations to support social workers in applying consent requirements when supervision occurs as part of professional practice.

SUPERVISOR QUESTIONS

Transparency and expectations	• Have I informed the individuals, groups, communities, students, or colleagues I work with that supervision or professional consultation may occur as part of maintaining competent practice? • How might I reasonably communicate the role of supervision in this practice context (e.g., orientation materials, program information, course outlines, research protocols)? • Would someone involved in this work reasonably expect that consultation or supervision may occur?
Understanding when explicit consent may be required	• Does this supervision activity involve direct observation, recording, or participation by others that would require explicit consent? • Have I explained who will observe, what the purpose is, and how information will be used or stored? • Have I ensured that consent is voluntary and informed, including the ability to decline where appropriate?
Context and feasibility	• Is it reasonable and practical to seek consent in this situation, or are there time-sensitive or organizational factors that affect how consent can be addressed? • If consent cannot be discussed in advance, how can I ensure transparency at another appropriate point?
Documentation and clarity	• Have I documented consent when required (e.g., observation or recording)? • Is it clear who is responsible for obtaining and documenting consent within the supervision arrangement?

APPENDIX F: REFLECTIVE QUESTIONS FOR SUPERVISORS AND SUPERVISEES

The following reflective questions provide additional guidance for identifying and managing dual roles within supervision.

SUPERVISOR QUESTIONS

Identify and avoid conflicts of interest	• Do I have, or have I had, any personal, professional, or financial relationships with this supervisee that could influence my judgement? • Are there potential or perceived conflicts that might affect how I evaluate or support the supervisee? • Have I considered how the dual role might impact clients, colleagues, or the organization?
Disclose and document	• Have I openly discussed the dual role with the supervisee, and where appropriate, with clients or the organization? • Have I clearly outlined the risks and mitigation strategies associated with the dual role? • Am I documenting decisions, discussions, and mitigation measures in a way that is secure, confidential, and reviewable? • Do I have a plan for periodic review of this documentation to ensure ongoing risk management?
Clarify roles and authority	• Have I clearly defined which aspects of supervision are practice-related versus administrative? • Are expectations and decision-making authority transparent to the supervisee and relevant stakeholders? • Are there areas where my administrative and practice responsibilities overlap, and if so, how will I manage or delegate them? • Have I established clear boundaries around my authority to direct, evaluate, or make decisions about the supervisee's work?
Set decision/rules for escalation	• Am I confident that safeguards are in place to protect the supervisee, clients, and myself in situations of dual roles?
Respect prohibited relationships and power differentials	• Are there dynamics in this supervisory relationship that could be perceived as exploitative or biased? • What steps am I taking to maintain professional boundaries and mitigate risks related to power differentials?

APPENDIX G: DEVELOPING A SUPERVISION CONTRACT

This appendix identifies components of a supervision contract. This is provided as an example only.

Format and Schedule	Determine: • The methods of supervision that will be used for the supervisee's assigned responsibilities (e.g., direct observation, documentation review, reflective supervision) • Any boundaries or restrictions placed on the supervisee's practice at this stage of their development • Information about confidentiality, privacy • Individual or group supervision • In person/virtual supervision
Terms and Duration	• Effective date • Duration of supervision and each session • Purpose of supervision
Compensation	• Hourly rate • Who is paying (individual or organization) • Cancellation policy • Liability insurance coverage
Evaluation and Schedule of Evaluation	• How often the supervisor will evaluate the supervisee's performance • How will changes to the supervision plan be completed (e.g., increase in client complexity, change in supervision method)
Documentation	• How will supervision be documented • Where will documentation be stored • How will the supervisee receive a record of supervision and evaluations • Who else will have access
Addressing Concerns (in practice and/or supervisory relationship)	• How will feedback be provided • How will concerns be addressed and escalated • How approval for external supervision and communication amongst others in oversight roles will be managed (manager, regulatory college, credentialling body, etc.) • When supervision might be terminated

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