	December-16							
UnitedHe	alt	thcare Community Plan						
SUPERVI	SO	PRY PROTOCOL						
Clinic Name:								
City / State:								
Audit Date:								
Auditor:								
		Rating Scale: Y = Yes N = No	Υ	N	N/A			
	1	The Clinical Supervisor(s) is/are an Optum/UBH credentialed clinician.						
Comments:								
	2	There is a written policy addressing the supervisory protocol utilized at the clinic.						
Comments:								
	3	The patient's diagnostic assessment, treatment plan, and changes in diagnosis are reviewed and signed by the clinical supervisor.						
Comments:								
	4	Verification of the Supervisee's training and education is documented and available for review.						
Comments:								
	5	There is documentation that the Supervisor and Supervisee meet regularly on a one to one basis for supervision.						
Comments:								
	6	The Supervisor's education level meets the state's clinical supervisory requirements or the Supervisor's education level is consistent with the supervisee's.						
Comments:								
	7	Patients are informed that a clinician who is not credentialed by Optum/UBH is providing treatment to them.						
Comments:								

	8	Clinical supervisor is an employee of the Group who provides mental health and/or substance abuse disorder services, and who's training and education is appropriate to the supervision they are providing.		
Comments:				