ICPHAA

Irish Counselling, Psychotherapy & Allied Healthcare Professionals Association

MEMBERS' PROFESSIONAL PRACTICE

Supervision Policy

Why clinical supervision matters, what ICPHAA expects of members in each membership category, and how supervision should be arranged, recorded and evidenced.

REFERENCE	ICPHAA-POL-03	VERSION	1.0
EFFECTIVE	9 November 2026	NEXT REVIEW	9 November 2027
POLICY OWNER	ICPHAA Board of Directors		

MEMBERS' PROFESSIONAL PRACTICE · ICPHAA-POL-03

Supervision Policy

APPLIES TO	All ICPHAA members who see clients or provide supervision, in every membership category, including Student Members on placement.
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POLICY OWNER	ICPHAA Board of Directors
CONTACT	ICPHAA Registry · admin@icphaa.ie

AT A GLANCE

- Clinical supervision is an essential, career-long part of ethical practice, not a box-ticking exercise.
- Each membership category has its own supervision requirement, set out in the ICPHAA accreditation requirements.
- Supervision must be with a clinical supervisor who meets ICPHAA's supervisor criteria.
- Members keep a supervision log and written agreement, and produce them at renewal, on audit or in any complaint.
- Members increase supervision when caseload, client complexity or personal circumstances call for it.

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1. Purpose

Clinical supervision provides a structured, reflective and supportive space in which practitioners examine their work, develop their skills, keep to ethical standards and protect both the welfare of their clients and their own wellbeing. ICPHAA regards supervision not as a bureaucratic requirement but as a valuable professional practice that is central to safe, ethical and effective work throughout a practitioner's career.

This policy explains what supervision is for, what ICPHAA expects of members in each membership category, who may act as a supervisor, and how supervision should be agreed, recorded and evidenced. It supports the commitment in the ICPHAA Code of Conduct for Members that every practising member maintains supervision appropriate to their caseload and membership category.

2. Scope

This policy applies to:

- Student Members on placement or otherwise working with clients as part of their training;
- Pre-Accredited Members, Accredited Members and Accredited Members & Supervisors;
- members holding accredited role categories, including Accredited Counsellors, Accredited Addiction Counsellors and Accredited Addiction, Trauma or Bereavement Support Workers;
- Allied Healthcare members, in so far as their work involves therapeutic or supportive contact with clients;
- members who act as clinical supervisors to other practitioners.

It covers individual, group and online supervision, and applies to paid, voluntary and pro bono client work alike. Members who are not currently seeing clients should tell the ICPHAA Registry, as this may affect their supervision requirement for that period.

3. What supervision is for

Good supervision serves several connected functions. It provides:

- **Case consultation.** A space for clinical problem-solving, formulation and treatment planning.
- **Ethical support.** Help in working through complex ethical dilemmas, including confidentiality, boundaries, risk and safeguarding decisions.
- **Reflective practice.** Reflection on the therapeutic relationship and on the practitioner's own responses within it.
- **Professional development.** Ongoing learning that complements the member's continuing professional development.
- **Quality and safety.** A means of monitoring standards of practice and the welfare of clients.
- **Practitioner wellbeing.** Attention to the practitioner's own wellbeing, resilience and fitness to practise.

ICPHAA wants members to experience supervision as enriching and useful. Members are encouraged to choose a supervisor whose approach suits their work, to prepare for sessions, and to bring difficulties openly rather than only presenting work that is going well.

4. Requirements by membership category

Supervision requirements reflect the different levels of experience and independence of practitioners at different stages of their professional development. The specific amount and frequency of supervision required for each category is set out in the ICPHAA accreditation requirements, published by the Accreditation Department. Those requirements are a minimum: members should arrange more supervision whenever their caseload, the complexity of their clients' needs or their own development calls for it.

CATEGORY	WHAT IS EXPECTED
Student Member	Supervision at the level required by the training programme and placement, and never below the ICPHAA requirement for students. Supervision must be with a supervisor approved by the training programme who meets ICPHAA's supervisor criteria.
Pre-Accredited Member	Regular supervision in proportion to client contact hours, at the ratio set for this category in the ICPHAA accreditation requirements, with a supervision log available on request.
Accredited Member and accredited role categories	Ongoing, regular supervision for as long as the member is seeing clients, at no less than the level set for the category, whatever the size of the caseload.
Accredited Member & Supervisor	Supervision of their own client work, plus regular consultative supervision of their supervisory practice, appropriate to their supervisory caseload. This may be individual or with a suitably experienced peer supervision group.
Allied Healthcare members	Clinical or professional supervision appropriate to their discipline and role, as set out in the ICPHAA accreditation requirements for their category.

Members working with higher-risk client groups, with children and young people, in addiction or trauma services, or in isolated practice should consider whether additional supervision is needed, and discuss this with their supervisor.

5. Choosing a supervisor

Supervision counted towards an ICPHAA requirement must be provided by a clinical supervisor who meets ICPHAA's supervisor criteria, published by the Accreditation Department. In summary, the criteria look for a supervisor who:

- is an accredited, experienced practitioner in counselling, psychotherapy or a relevant discipline;
- has completed recognised training in clinical supervision;
- has substantial post-qualification clinical experience, as specified in the criteria;
- engages in ongoing professional development in supervision and receives supervision of their own supervisory work.

Accredited Members & Supervisors meet these criteria. Where a member wishes to work with a supervisor who is not an ICPHAA Accredited Member & Supervisor, the member should check with the Accreditation Department, before supervision begins, that the supervisor's qualifications and experience meet the criteria. Supervision that does not meet the criteria may not be counted towards a membership requirement.

> AVOIDING CONFLICTS
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> A supervisor should not also be the member's therapist, close friend, family member or business partner. Where a supervisor is also the member's line manager, the member should consider whether separate, independent clinical supervision is needed. See the Conflict of Interest Policy.

6. The supervision agreement and arrangements

Every supervisory relationship should begin with a written agreement between supervisor and supervisee. The agreement should cover:

- the frequency, length, format (in person, online or group) and fees of supervision;
- how confidentiality works in supervision and its limits, including what the supervisor will do if they have serious concerns about client safety or the supervisee's practice;
- how client information will be shared, keeping identifying details to a minimum;
- what records each party will keep;
- arrangements for cover, cancellations and ending the relationship;
- how the arrangement will be reviewed.

Group supervision

Group supervision may count towards the requirement where it is facilitated by a supervisor who meets ICPHAA's supervisor criteria, the group is small enough for each member to have adequate time for their own work, the sessions are structured and reflective rather than general discussion, and the supervisor keeps a record of each supervisee's participation. Any limits on how much group supervision may count are set out in the ICPHAA accreditation requirements.

Peer supervision and online supervision

Peer supervision groups without a qualified supervisor do not count towards the requirement, but are encouraged as a valuable additional activity. Online supervision is acceptable where it takes place on a secure platform in a private setting, in line with the Digital & Practice Environment Policy.

7. Supervision records

Members keep accurate records of their supervision, made at the time. For each session the record should include:

1. the date and length of the session, and whether it was individual or group;

2. the supervisor's name and the basis on which they meet ICPHAA's supervisor criteria;
3. a brief summary of the matters discussed, without identifying client information;
4. any actions agreed, and any concerns raised about clinical practice, risk or practitioner wellbeing.

Members also keep a copy of their supervision agreement. Supervision records are retained securely for the period set out in the ICPHAA accreditation requirements and must be made available to ICPHAA at renewal, on audit, or in connection with any complaint, fitness to practise or disciplinary process.

8. Responsibilities

Members are responsible for arranging supervision that meets this policy, for using it actively and honestly, for keeping records, for increasing supervision when needed, and for telling ICPHAA if they are unable to meet their requirement.

Supervisors are responsible for providing competent, ethical supervision within their own competence; for keeping their own supervision records; for raising concerns with the supervisee where practice falls short; and, where they have a serious concern that a client is at risk and the concern is not being addressed, for taking appropriate action, which may include contacting the ICPHAA Registry.

ICPHAA, through the Accreditation Department, is responsible for publishing the supervision requirements and supervisor criteria, for answering members' questions about whether a supervisor meets the criteria, for checking supervision evidence at renewal and on audit, and for keeping this policy under review.

9. Non-compliance and concerns

Where a member has not met their supervision requirement, ICPHAA will first seek to understand why and to agree a plan to put adequate supervision in place within a set timeframe. Members facing difficulties, for example because of illness, bereavement, a change of supervisor or a break from practice, should contact the ICPHAA Registry early.

Seeing clients without adequate supervision, failing to provide supervision evidence when asked, or giving misleading information about supervision is a breach of the ICPHAA Code of Conduct for Members. It may affect membership renewal and may be considered under the Fitness to Practise Policy or Disciplinary Procedures. Supervision records may be reviewed in any complaint about a member's practice.

Questions and concerns about this policy can be sent to the ICPHAA Registry at admin@icphaa.ie.

10. Monitoring and review

The ICPHAA Board of Directors owns this policy and reviews it at least annually, with input from the Accreditation Department, or sooner where changes in law, regulation or professional practice require it. Changes to the supervision requirements for any membership category are published by the Accreditation Department and notified to members. The current version is available at www.icphaa.ie.

READ ALONGSIDE

- ICPHAA Code of Conduct for Members
- Continuing Professional Development (CPD) Policy
- Confidentiality Policy
- Conflict of Interest Policy
- Professional Standards & Accreditation Policy
- Fitness to Practise Policy

DOCUMENT CONTROL

VERSION	DATE	CHANGE	APPROVED BY
1.0	9 November 2026	Reissued in the ICPHAA policy framework (replaces the former ICPA version).	ICPHAA Board of Directors

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