

Remediation Plan Template

(Concerns, Competency Targets, Supports, Timelines, Decision Points)

Document Type: Supervisee Remediation Plan (Supervision Record)

Purpose: A structured, fair, and defensible process to address performance/competency concerns while prioritizing client welfare and supervisee development (Borders, 2014).

Confidentiality: Supervision/QA record; maintain per organizational policy and applicable jurisdictional requirements.

1) Administrative Information

- **Supervisor:** [Name, credentials, license/state/number]
- **Supervisee:** [Name, credential status, jurisdiction(s)]
- **Setting:** [Agency/Practice]
- **Plan Date Initiated:** [MM/DD/YYYY]
- **Remediation Period:** Start [] – End [] (anticipated)
- **Review Cadence:** Weekly Biweekly Monthly Other: []
- **Supervision Frequency During Remediation:** [e.g., 60 min weekly + ad hoc consult]

2) Reason for Remediation

Triggering Concern Type(s) (check all that apply):

- Clinical skills deficit Documentation deficiency Risk/safety management concern
 Ethics/boundary concern Professionalism/communication Cultural responsiveness concern
 Scope/competence mismatch Policy/procedure non-adherence Other: []

Summary of Concern(s) (brief, behaviorally specific):

- Concern #1: [What happened; observable behavior; impact/risk]
- Concern #2: []
- Concern #3: []

Evidence/Examples Supporting Concern(s):

- Dates/instances: []
- Records reviewed (notes, recordings, audits): []
- Prior feedback provided (date and content): []

Client Safety Impact (if any):

- None identified Potential risk Actual harm/near miss (describe): []

Immediate Protective Actions Implemented (if applicable):

- Increased supervision Case transfer/coverage Restricted activities Mandatory consult
 Other safeguards: []

3) Competency Targets and Success Criteria

Define targets as **observable behaviors** with **measurable criteria**.



Target 1

- **Competency Domain:** [e.g., risk assessment; documentation; boundaries]
- **Current Performance (baseline):** [objective description; data if available]
- **Expected Standard (“Competent”):** [clear performance statement]
- **Success Metrics:** (check/complete)
 - % compliance: [e.g., 90% notes within 24 hrs for 4 consecutive weeks]
 - Quality rubric score: [e.g., $\geq 3/4$ on documentation rubric for 10 notes]
 - Observation rating: [e.g., “Competent” on skills rubric in 2 recorded sessions]
 - Supervisor audit findings: [criteria]
 - Other: []

Target 2 (copy as needed)

- **Competency Domain:** []
- **Baseline:** []
- **Expected Standard:** []
- **Success Metrics:** []

4) Remediation Interventions and Supports

Specify what will be provided and what the supervisee will do.

Supervisor-Led Supports (check all that apply):

- Structured agenda + focused skills rehearsal
- Increased direct observation (live or recorded)
- Co-therapy/shadowing
- Weekly chart audits (n=#) with written feedback
- Case conceptualization templates/decision aids
- Ethics consultation / clinical consultation (as appropriate)
- Additional training modules (internal/external)
- Referral to specialty supervision/consultation
- Other: []

Supervisee Action Requirements:

- Training/reading assignments: [title/topic + due dates]
- Deliberate practice tasks: [role-plays, scripts, worksheets]
- Documentation corrections/standards: [specific expectations]
- Required consultation thresholds: [when to consult before acting]
- Self-reflection tasks (professional, non-therapy): [e.g., countertransference log tied to cases]

Access/Accommodations (if applicable):

- Scheduling supports, workload adjustments, accessibility needs: []

5) Timeline and Milestones

Overall Remediation Duration: [e.g., 6–12 weeks]

Milestone Schedule:



Milestone	Date Due	Evidence Reviewed	Criteria Met (Y/N)	Notes/Next Steps
Baseline review completed	[]	[]	<input type="checkbox"/> Y <input type="checkbox"/> N	[]
Midpoint evaluation	[]	[]	<input type="checkbox"/> Y <input type="checkbox"/> N	[]
Final evaluation	[]	[]	<input type="checkbox"/> Y <input type="checkbox"/> N	[]

Documentation Review Plan:

- Notes reviewed per week: []
- Recordings/observations per month: []
- Cases prioritized for review: [high-risk, new intakes, etc.]

6) Decision Points and Possible Outcomes

Define predetermined checkpoints to ensure transparency and due process (Borders, 2014).

Decision Point A (e.g., Week 2–3):

- **If progress adequate:** continue plan as written
- **If progress inadequate:** intensify supports (e.g., increase observation/audits), revise targets, restrict duties as needed

Decision Point B (e.g., Midpoint):

- **Criteria to continue/modify:** []
- **Criteria to extend remediation:** []
- **Criteria to initiate formal review/escalation:** []

Decision Point C (Final): Outcomes may include:

- Successfully remediated (return to standard supervision)
- Extension with revised targets (time-limited)
- Continued restrictions/role modification
- Referral to additional training or specialty supervision
- Termination of supervision/placement (if client welfare or ethical obligations require)

Escalation Pathway (if indicated):

- Notify: Clinical director HR Training program lead Compliance/QA Other: []
- Documentation required: []

7) Risk Management and Stop-the-Line Addendum (if relevant)

Immediate consultation required for: [SI/HI, suspected abuse, acute psychosis, scope-of-practice issues, legal requests, etc.]

Back-up coverage: [name/contact]

After-hours protocol: []



8) Acknowledgment, Signatures, and Recordkeeping

By signing, the parties acknowledge the plan, expectations, timelines, and decision points.

- **Supervisor Signature:** _____ **Date:** // _____
- **Supervisee Signature:** _____ **Date:** // _____
- **Optional Administrator/Training Lead:** _____ **Date:** // _____

Distribution/Storage: Copy provided to supervisee Yes No
Stored in: [] Retention: []

