

## Colorado Clinical Bridge Framework Guide

### Staffing structure

At the time of clinical bridge implementation, agencies must identify an appropriate staffing mode for providing clinical supervision. This document offers some things to consider.

### Clinical supervisor requirements

- Meets State Board requirements to provide clinical supervision
- Holds the appropriate licensed designation based on state licensing board requirements
- Has two years of post-licensure clinical social work experience
- Is professionally trained in supervision
- Meets all other requirements to provide licensure supervision

### Internal – Informal clinical supervision structure

#### Model 1

- One dedicated LCSW case-carrying unit supervisor position
- 5%–10% dedicated to a clinical supervision role within the direct team
- Capacity for 2–3 supervisees

#### Model 2

- One non-case-carrying supervisor position (LCSW)
- 60% dedicated to a clinical supervision role across the agency
- 40% dedicated to program-specific case carrying/leadership support
- Capacity for 10–15 supervisees

## Internal – Formal clinical supervision structure

### Model 3

- One dedicated, full-time clinical supervisor (LCSW)
- 80% clinical supervision responsibility
- 20% training and professional development role
- Capacity for 20–25 supervisees

## External – Contracted clinical supervision (part-time)

### Model 4

- Contracted, part-time provider position (LCSW)
- 100% clinical supervision responsibility
- Capacity for 10–15 supervisees
- Annual fiscal year contracting process

## External – Contracted clinical supervision (full-time)

### Model 5

- Contracted, full-time provider position (LCSW)
- 100% clinical supervision responsibility
- Capacity for 25–30 supervisees
- Annual fiscal year contracting process

## External – Front Porch Initiative

### Model 6

- The Front Porch Initiative (FPI) is a grant-funded opportunity dedicated to providing high-quality and culturally responsive professional development for emerging social work clinicians. This is subject to program availability and funding.
- This opportunity includes:
  - Matching with a qualified clinical social worker supervisor
  - Paid weekly supervision (individual and/or group) toward licensure in Colorado
  - Support navigating licensure pathways
  - Reimbursement for the following (up to \$550):
    - Application to DORA to obtain the SWC credential
    - Exam preparation courses and materials
    - Colorado jurisprudence exam
    - Application to ASWB for approval to take the Master's Exam
    - ASWB Master's Exam registration
    - Application to DORA to obtain the LSW license
    - Application to ASWB for approval to take the Clinical Exam
    - ASWB Clinical Exam registration
    - Application to DORA to obtain the LCSW license

## Budget priorities, hiring, and contracting

Work with agency site leaders to determine the budget allocation available for the chosen staffing structure. Evaluate budget constraints and co-develop a financial plan to ensure program and position sustainability. Consider the following areas related to funding and hiring for clinical supervisor positions:

- Explore annual costs for full-time and/or part-time contracted positions
- Collaborate with human resources and contracts teams
- Examine internal positions that could be reclassified or reassigned
- Assess whether internal individuals could be deployed full-time or part-time
- Identify the hiring process if a new, reclassified, or reassigned position is available
- Make key decisions regarding the number of positions allocated to this program
- Develop position descriptions as appropriate

## Clinical licensure program components

### 1. Identification of program participants

#### Licensure supervisee:

- Identified staff members must meet licensure board requirements for supervisee experience
- Must have a current satisfactory performance rating
- New employees may also be eligible if they are in good standing with the agency and licensing board
- Must have completed all educational requirements as indicated by board requirements

### 2. Establishment of the program referral and submission process

- Step 1: Identify the division or program responsible for tracking and managing referrals
- Step 2: Develop a referral form with key information (e.g., program area, position/role)
- Step 3: Identify key individuals responsible for approving supervisees in the program. Determine whether the referral form will be approved electronically
- Step 4: Develop a data tracking tool and repository for all program referrals

### 3. Develop the clinical supervision pathway approval process

- Supervisee reviews the policy
- Supervisee discusses participation with their direct supervisor
- Supervisee completes and submits the referral form to the appropriate point of contact
- Referral form is routed for agency/division approval
- Schedule an initial interview with the supervisee
- Schedule an additional assessment meeting with the direct supervisor
- Create a checklist and guide the supervisee through the state application process
- Support supervisee submission of the application, including supervisory contract, supervisory training documentation, and all other state board requirements

## 4. Clarifying the clinical supervisor's role and responsibilities

The following outlines the role and responsibilities of an internal and/or external clinical supervisor within the program:

- Ensure local policy and practice align with state board requirements
- Develop processes to engage unit supervisors and team members
- Develop a model of practice for clinical supervision
- Develop individual and group supervision practices
- Coordinate professional development opportunities related to clinical topics
- Serve as a subject matter expert (SME) on clinical topics (e.g., ethics)
- Develop a multi-track approach for communication with agency staff (e.g., newsletters, internal/external site development, Microsoft applications)
- Develop a repository for clinical resources (e.g., LCSW exam guide, books, tools, assessments, article reviews, treatment planners, DSM-5)
- Develop a tracking tool for all program applicants (e.g., referral approval date, supervisee interview date, supervisor interview date, supervisor contract review/approval date, state board application submission date, state board approval date, clinical supervision start date, 6-month and annual evaluation dates, state board exam approval date, supervision termination date)
- Develop a documentation framework and requirements

## Ongoing communication plan

A clear communication strategy should be developed to provide employees with education, information, and details about the clinical supervision pathway program. The education plan should include ongoing presentations to key audiences (senior management, middle managers, supervisors, and staff). Each presentation should:

- Present the vision
- Establish clarity regarding access
- Share progress and impact

The outcome of each presentation should be increased staff education, behavior change, and buy-in.

## When developing an effective communication plan, consider the following steps:

- Identify the purpose and goal of communication and engagement
- Determine proposed methods of engagement (e.g., mini-workshops, forums, webinars, online platforms, or social media)
- Ensure engagement methods consider adult learning styles and principles
- Identify who will design and carry out the communication plan
- Develop key messaging points with collaborators and the community in mind
- Ensure messaging is vetted with all necessary team members within the agency
- Determine who will be the contact person regarding policy, access, and approval
- Identify technical support needed to develop an online presence (e.g., internal site, online supervision groups, weekly/monthly topic-specific communication)
- Schedule frequent presentations to senior management, the supervisory team, and direct staff
- Develop partnerships to share information about clinical developments across the state, locality, or region
- Consider timing issues or requirements

## Evaluation and program performance measures

### Key program data points to track:

- Number of individuals referred to the program
- Number of participants approved and enrolled in the program
- Number of participants who successfully complete the program
- Percentage of participants who earned their licensure
- Impact of program implementation on the agency, including:
  - Number of staff retained due to program availability
  - Increase in new hires due to program availability
  - Impact on professional development and client outcomes (e.g., promotions, improvements in practice)
  - Compare the progress of program participants to other agency staff (e.g., burnout reduction, improved competency)
  - Comparison of program implementation at each agency site to the agencies without the program

## Sustainability plan

**The following should be incorporated into the implementation process of the clinical licensure program at each agency site:**

1. Assemble a sustainability planning team (this may also be the initial project team).  
Ensure the team is inclusive and diverse, including key staff and collaborators.
2. Clarify the vision, mission, and guiding principles for the program.
3. Establish criteria to determine what to continue, modify, or eliminate, analyze current programs, policies, and systems, and use collected data to inform this work.
4. Analyze implementation successes and barriers, and determine sustainability strategies.
5. Identify essential collaborations and partnerships needed to support and carry out sustainability strategies.
6. Develop and follow through on action steps.
7. Monitor and evaluate implementation of the sustainability plan in cooperation with collaborators and key staff. Document and communicate sustainability successes. Apply continuous quality improvement in a deliberate manner.
8. Focus on the program's goal and purpose. Evaluate the options considered and key decision points that led to success.
9. Build an ongoing process for reviewing implementation progress and determining if modifications are needed.
10. Continue to develop and cultivate buy-in among participants and supporters.
11. Engage in a strong, ongoing marketing and communication plan, both internally and externally.