
Supervision Best Practices to Recruit, Train, and Retain the Early Career Behavioral Health Workforce: A Scoping Review and Expert Interviews

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Background

Demand for behavioral health services exceeds the supply of qualified clinicians in the U.S., resulting in a strained behavioral health system. Clinician shortages not only disrupt access to care but also impact early career behavioral health clinicians (ECBHCs) who require clinical supervision to independently practice. This study conducted a scoping review and expert interviews to identify best practices, barriers, and opportunities to strengthen supervision for ECBHCs.

Methods

Scoping review methodology was utilized to develop search criteria, systematic appraisal, and full-text review of peer-reviewed U.S. studies examining supervision models, practices, or outcomes for ECBHCs. Semi-structured interviews were conducted with experts in clinical supervision for ECBHCs. Reflexive thematic analysis identified convergent themes and exemplary quotes.

Results

Seven articles met inclusion criteria. While none explicitly evaluated specific evidence-informed supervision models, components such as case consultation, role-playing, and video recordings, and benefits and barriers associated with supervision were identified. Twelve expert interviews were conducted. Four primary themes emerged from thematic analysis: (1) *Benefits of Supervision*; (2) *Challenges to Supervision*; (3) *Adaptive Supervision Strategies*; and (4) *Future Priorities and Supervision Goals*.

Policy Implications

Analyses found wide variability in how clinical supervision is structured and measured. Inconsistent standards and limited research on evidence-based supervision strategies can affect the quality of care delivered. Potential strategies to address these challenges include increasing training and evaluation, financial investments to offset supervision costs for ECBHCs and incentivize supervisors, streamlining administrative processes, and implementing policies that permit tele-supervision.

Conclusion

Supervision has not been systematically measured or leveraged as a workforce intervention, and standardization, dedicated training, and policy changes are needed to support ECBHCs.

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