L3 Practitioner Competency & Case Supervision Log

Supervisor Name: ___ Practitioner Name: __ *Date:* **__ Case Reference (ID): _ Session Duration: ___**

Section 1: The Supervisory Alliance (Success Scan)

Instruction: Start the session by building psychological safety. Use this section to document professional wins and establish a collaborative tone.

- [ ] **Success Scan:** What is one clinical win the practitioner had this week?

- [ ] **Parallel Process Check:** Is the practitioner feeling overwhelmed? (How they feel is how they will treat the client).

Section 2: The Supervisory R.O.O.T.S. Scan™

Instruction: Evaluate the practitioner's application of the core framework for the specific case being reviewed.

R.O.O.T.S. Phase	Evaluation Criteria	Supervisor Notes/Observations
REVEAL	Did they uncover the "story behind the story" or just check boxes?	
ORGANIZE	Is the Matrix logically sound? (e.g., Assimilation vs. Defense)	
OPTIMIZE	Are foundations (Sleep, Stress) addressed before supplements?	
TARGET	Are interventions evidence-based and within scope?	
SUSTAIN	Is there a plan for client independence (vs. dependency)?	

Section 3: Safety, Ethics & Liability

Instruction: Ensure clinical safety and mitigate vicarious liability. Check all that apply.

- [ ] **Scope of Practice:** Are all recommendations non-prescriptive (or within legal bounds)?

- [ ] **Red Flags:** Did the practitioner miss any "clinical red flags" or safety concerns?

- [ ] **Data Integrity:** Is the client's "Reveal" data (labs/intake) accurately interpreted?

- [ ] **Resource Check:** Does the practitioner need an advanced protocol (e.g., Advanced Gut Restoration)?

Section 4: Practitioner Development Reflection

Competency Score (1-5): _ *(1: Needs Heavy Support | 5: Ready for Autonomy)*

Focus Area for Next Session: - [ ] Clinical Skills (R.O.O.T.S. Fidelity) - [ ] Administrative Skills (KPIs/Billing) - [ ] Professional Confidence (Parallel Process)

Supervisor Recommendations & Action Plan:

Next Steps:

- [ ] Practitioner to update Client Matrix based on feedback.

- [ ] Practitioner to research: _____

- [ ] Schedule follow-up supervision for: _____ (Date)

Supervisor Signature: ____ *Practitioner Signature:* **____** *AccrediPro Standards Institute Certified Tool | Level 3 Supervisory Track*