



# Schenectady County Public Health Services

Children with Special Needs  
107 Nott Terrace, Suite 306  
Schenectady, New York 12308-3170  
Phone: (518) 386-2815  
Fax: (518) 386-2801

## Certification of Under the Supervision and Accessibility for Psychological Counseling Services

School Year \_\_\_\_\_ Agency Name \_\_\_\_\_

LMSW Name \_\_\_\_\_ License # \_\_\_\_\_ NPI # \_\_\_\_\_  
(print)

\_\_\_\_\_  
Signature of Licensed Master Social Worker (LMSW)

\_\_\_\_\_  
Date

### I am providing under the supervision of and accessibility in the following manner:

- Be readily available to the LMSW for assistance and consultation, through phone, email or fax;
- Consult with the LMSW through regular meetings and make recommendations, as appropriate;
- Provide at least two hours per month of in person individual or group clinical supervision;
- Review and sign periodic progress notes (i.e. monthly/quarterly) prepared by the LMSW;
- Review and sign each session note;
- Review service sheets used for Medicaid billing.

**I will keep the appropriate records documenting that the “Under the Supervision Of” activities have occurred (i.e. telephone logs, minutes of meetings, minutes of observations etc.) and will provide a copy of these to the county at least quarterly.**

Supervisor Name \_\_\_\_\_ License # \_\_\_\_\_ NPI # \_\_\_\_\_  
(print)

\_\_\_\_\_  
Signature of Supervisor/Title

\_\_\_\_\_  
Date

### Contact Information

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