Table 3: Competencies for CBTp Consultation & Supervision		
Support of Engagement	*	Ability to model and support all of the engagement, normalization, collaboration and exploration skills outlined in Tables 1 and 2, both within the context of the supervision/consultation relationship and through discussion of trainees' provision of CBTp
Support of Formulation and Treatment Planning	*	Extensive experience with provision of CBTp, which includes experience with formulation and treatment planning for a variety of different presentations including positive and negative symptoms of psychosis (e.g., voices and other hallucinations, paranoia, delusions, negative symptoms and thought disorder) and common comorbidities Awareness of, and experience with, adaptations to treatment planning that may be necessitated due to cognitive
	*	deficits and/or thought disorder Ability to work collaboratively with trainees to support their development of skills in formulation and treatment planning, by communicating principles in a clear and understandable manner
Support in Selection and Application of CBT Skills	*	Advanced competence in a provision of all of the general CBT skills listed in Table 1, as well as the CBTp-specific skills and strategies listed in Table 2  Ability to explain the rationale for provision of different skills and to discuss issues relevant to the selection and
CDT SKIIIS	*	pacing of different skills  Ability to model provision of all of these same skills within the context of supervision
Provision of Feedback	*	Ability to accurately assess the learning needs and level of competence of supervisees and to provide feedback that is developmentally appropriate
	*	Ability to provide constructive criticism in a supportive manner  Ability to reliably and accurately assess CBTp fidelity through the us of standardized fidelity rating meaures and to provide constructive feedback based on these ratings.
Assessment of Competence	*	Ability to accurately assess competence and adherence to CBTp model through observation of supervisee engaging in provision CBTp and through discussion in supervision
	*	Ability to accurately assess competence in formulation and treatment planning through evaluation of formal case formulations and treatment plans submitted by supervisees  Ability to reliably assess adherence to model with use of validated competency measures (e.g., CTSR or CTRS)
CBT Structure of Supervision	*	Ability to reliably assess adherence to model with use of validated competency measures (e.g., CTSR or CTRS)  Ability to model the structure of a CBTp session within each supervisory meeting: Including check in, review of between meeting work; identification of targets/focal areas of supervision (agenda); appropriate pacing of supervision session; ability to elicit feedback from trainees; and provision of guidance regarding action steps to improve skills