Australian Psychological Society (APS) response to the Supporting Children Draft Guideline: Organisation Feedback Form
August 29, 2022

SECTION 1: Feedback on key sections within the Draft Guideline

The draft Guideline contains five key sections:

- Guiding Principles
- Goal setting
- Selecting and planning supports
- Delivering supports
- Outcomes, quality, and safeguarding

This set of items gives you the option to provide feedback on these overarching sections of the Guideline.

The next set of items (Section 2 of this form) gives you the option to provide feedback on specific Recommendations/Good Practice Points within each of the sections.

PLEASE NOTE: To ensure that everyone providing feedback has the same opportunity, and to ensure that the Guideline Development Group considers all feedback equally, we will only consider feedback provided via this form and we make no undertaking to review (and will not respond to) any further information referred to via links (e.g., weblinks, resources).

Feedback on Key Section: Guiding Principles

Please provide your feedback (up to 150 words) on the 'Guiding Principles' section of the Draft Guideline. You can tell us what you like/support about this section or what could be improved.

Maximum word limit: 150 words (to ensure equal opportunity, the Guideline Development Group will not read beyond 150 words).

The APS highly recommends the inclusion of "Good Practice Points" for all the Guiding Principles Recommendations (pp.39-42) to assist implementation by practitioners, educators and families. It seems to be assumed that all who engage with the Guideline will have a common understanding of what is meant by each Guiding Principle. See more feedback below about matters that the "Good Practice Points" for Guiding Principles Recommendations could address.

Feedback on Key Section: Goal-setting

Please provide your feedback (up to 150 words) on the 'Goal-setting' section of the Draft Guideline. You can tell us what you like/support about this section or what could be improved.

Maximum word limit: 150 words (to ensure equal opportunity, the Guideline Development Group will not read beyond 150 words).

No additional feedback.

Feedback on Key Section: Selecting and Planning Supports

Please provide your feedback (up to 150 words) on the 'Selecting and Planning Supports' section of the Draft Guideline. You can tell us what you like/support about this section or what could be improved.

Maximum word limit: 150 words (to ensure equal opportunity, the Guideline Development Group will not read beyond 150 words).

No additional feedback.

Feedback on Key Section: Delivering Supports

Please provide your feedback (up to 150 words) on the 'Delivering Supports' section of the Draft Guideline. You can tell us what you like/support about this section or what could be improved.

Maximum word limit: 150 words (to ensure equal opportunity, the Guideline Development Group will not read beyond 150 words).

Add 'psychologists' to the list of suitably qualified and experienced practitioners (e.g., allied health professionals, psychologists, medical doctors, educators)

Feedback on Key Section: Outcomes, Quality, and Safeguarding

Please provide your feedback (up to 150 words) on the 'Outcomes, Quality, and Safeguarding' section of the Draft Guideline. You can tell us what you like/support about this section or what could be improved.

Maximum word limit: 150 words (to ensure equal opportunity, the Guideline Development Group will not read beyond 150 words).

Consider adding more information about unregulated versus self-regulated versus AHPRA-regulated health professionals to inform the broad range of non-practitioner stakeholders who will engage with this document (e.g., autistic people, parents, advocates). See, for example, https://www.health.gov.au/health-topics/allied-health/about

SECTION 2: Feedback on Recommendations/Good Practice Points within the Draft Guideline

The draft Guideline contains 84 Recommendations. Many of these Recommendations also contain a set of Good Practice Points.

This set of items gives you the option to provide feedback on specific Recommendations (and associated Good Practice Points) within the draft Guideline. For the purposes of this form, we have included the Recommendation number and text. Please refer to the draft Guideline itself, for the associated Good Practice Points.

You can tell us (in up to 100 words) what you like/support about particular Recommendations, or what could be improved.

PLEASE NOTE: To ensure that everyone providing feedback has the same opportunity, and to ensure that the Guideline Development Group considers all feedback equally, we will only consider feedback provided via the survey and we make no undertaking to review (and will not respond to) any further information referred to via links (e.g., weblinks, resources).

Maximum word limit: 100 words (to ensure equal opportunity, the Guideline Development Group will not read beyond 100 words).

Guiding Principles: Feedback on Recommendations

Recommendation 1

Child and family-centred: Supports should be child and family-centred, where individual goals, preferences, and circumstances are respected, valued, and supported.

No additional feedback.

(Word limit: 100 words)

Recommendation 2

Individualised: Supports should be individualised for each child and family.

No additional feedback.

(Word limit: 100 words)

Recommendation 3

Strengths-focused: Supports should build on each child's and family's strengths.

No additional feedback.

Recommendation 4

Holistic: Supports should be holistic in terms of the goals that are targeted and the way they are achieved, considering all aspects of the child, family, and their community.

No additional feedback.

(Word limit: 100 words)

Recommendation 5

Honour childhood: Supports should honour the goals and activities of childhood including play, relationships, and personal discovery.

No additional feedback.

(Word limit: 100 words)

Recommendation 6

Foundation for the future: Supports should lay the foundation for a positive future, including optimum health, choice, learning, participation, and wellbeing.

No additional feedback.

Recommendation 7

Ethical: Supports must be ethical to protect the rights of children and families.

No additional feedback.

(Word limit: 100 words)

Recommendation 8

Culturally safe: Practitioners should acknowledge and respect the values, knowledge, preferences and cultural perspectives of the child and family, and reflect on their own cultural knowledge and competency in delivering services.

No additional feedback.

(Word limit: 100 words)

Recommendation 9

Respecting Australia's First Nations Peoples: Supports should be culturally safe for Aboriginal and Torres Strait Islander Peoples, built on an acknowledgment of the barriers to accessing supports that they may experience, an understanding of current and historical truths and their enduring impact; and respect for deep connection to Country, language, customs, and traditions.

There appears to be an error that the Strength of Recommendation for "Respecting Australia's First Nations Peoples" is described as N/A (rather than Strong?).

(Word limit: 100 words)

Recommendation 10

Evidence-based: Supports should reflect the best available evidence from research, evidence from clinical practice, and the preferences and unique context of each child and family.

The APS highly recommends including "Good Practice Points" to assist implementation of this Recommendation by practitioners, educators and families. For example, some families come to practitioners with enquiries about non-evidence-based, and at times potentially harmful interventions. It is the practitioner's responsibility to provide accurate information, including sensitively debunking 'fad' treatments and steering families away from these if possible. Fad practices cost families time, money, and hope and lessen opportunities for effective evidence-based interventions, particularly during important early developmental periods. Practitioners would benefit from practice points about addressing this issue competently rather than avoiding it.

(Word limit: 100 words)

Recommendation 11

Assent (children): Each child has the right to say no to supports and their assent (expression of approval) should be sought and respected, whether they communicate using words or in other ways.

> The APS highly recommends including "Good Practice Points" to assist implementation of this Recommendation by practitioners, educators and families. For example, adults sometimes make decisions for children in their best interests that children do not necessarily agree with (e.g., wearing a seatbelt, going to childcare, exposure to appropriate yet challenging activities). Similarly, there may be support and treatment strategies for autistic children that they do not assent to that are in their best interests. In addition, non-verbal indicators of treatment agreement, or otherwise, are subject to interpretation. Practitioners would benefit from practice points to assist them to navigate these issues.

Recommendation 12

Informed consent (parents): Parents should have the information they need to make informed choices about supports and provide consent for any supports they or their child receives.

> No additional feedback.

(Word limit: 100 words)

Recommendation 13

Qualified practitioners: Practitioners should have relevant qualifications, be regulated, work within their scope of practice, and engage in continuing professional development.

> The APS highly recommends referring to professional supervision requirements for practitioners as part of the wording of Recommendation 13 i.e., add "including professional supervision" to the end of the Recommendation sentence.
>
> There is also an opportunity here to note a preferred position that practitioner training for evidence-based assessment and intervention with autistic people is embedded in professional level training e.g., in psychology Master's programs.

Recommendation 14

Neurodiversity-affirming: Supports should be neurodiversity-affirming, embracing each child's unique understanding of other people and the world around them, and not seek to 'cure' autism.

No additional feedback.

(Word limit: 100 words)

Recommendation 15

Parent and family affirming: Supports should uphold the family's autonomy in raising their child, and ensure the natural roles of children, parents, siblings, and other family members are affirmed and preserved.

No additional feedback.

(Word limit: 100 words)

Recommendation 16

Timely and accessible: Each child and family should be able to access the supports they need, when they need them, and in ways they desire, regardless of who they are, where they live, or how much money they have.

The APS highly recommends the inclusion of "Good Practice Points" to assist implementation of the Recommendation by practitioners, educators and families. For example, in relation to the statement about families receiving support in "ways they desire", provide some guidance about how to address this when this might conflict with research findings about what constitutes best practices or harmful approaches, such as when a family expresses a desire for their child to undergo chelation therapy which is known to be harmful and possibly fatal.

(Word limit: 100 words)

Recommendation 17

Coordinated: Practitioners should engage in open and regular communication with other practitioners to ensure supports are coordinated.

The APS highly recommends including "with parental consent" as part of the wording of Recommendation 17 (additional to this being a focus in Recommendation 12).

(Word limit: 100 words)

Goal Setting: Feedback on Recommendations

Recommendation 18

Practitioners should consider goals that help the child acquire skills that promote their learning, participation and wellbeing.

No additional feedback.

(Word limit: 100 words)

Recommendation 19

Practitioners should consider goals that empower parents and families to support and advocate for their child, and promote their own and their family's wellbeing.

No additional feedback.

(Word limit: 100 words)

Recommendation 20

Practitioners should consider goals that create safe and accessible environments that support learning, participation, and wellbeing.

The APS highly recommends developing advanced content for the "Good Practice Points" about restrictive and other practices that contravene human rights, rather than simply reproducing the glossary information. For example, Guideline users may be unaware that practices such 'time out' in separate, enclosed spaces are restrictive practices. This is also relevant to Recommendations 30 and 73.

Consider also providing guidance in the "Good Practice Points" that inclusive/psychologically safe spaces for Indigenous and CALD families must incorporate culturally specific items such as pictures, books, psycho-education info sheets in different languages, and a visible Acknowledgement of Country.

(Word limit: 100 words)

Recommendation 21

Goals should be neurodiversity-affirming.

No additional feedback.

(Word limit: 100 words)

Recommendation 22

The child and parents should be involved in setting goals, as well as other people, when relevant.

The APS commends the reference to "family and family like" in the "Good Practice Points" for this Recommendation. This is a good reminder to Guideline users about the diversity of family structures and who is considered 'family' by autistic people and those who support them.

(Word limit: 100 words)

Recommendation 23

In recommending goals, practitioners should consider the unique aspects of the child and the contexts in which they live.

No additional feedback.

(Word limit: 100 words)

Recommendation 24

In recommending goals, practitioners should consider the unique aspects of the family and the contexts in which they live.

No additional feedback.

(Word limit: 100 words)

Recommendation 25

Practitioners should have a strong rationale for why a goal is recommended, which considers the potential benefits and risks for the child and family.

No additional feedback.

(Word limit: 100 words)

Recommendation 26

Practitioners should ensure that the agreed goals are shared in a way that is informative, understandable, and meaningful to the child and the family.

No additional feedback.

(Word limit: 100 words)

Selecting and Planning Supports: Feedback on Recommendations

Recommendation 27

Supports should help the child communicate with a variety of people in everyday contexts, for a variety of reasons, and in ways that they desire.

No additional feedback.

(Word limit: 100 words)

Recommendation 28

Supports should meet the child's sensory needs across activities, interactions, and settings.

No additional feedback.

(Word limit: 100 words)

Recommendation 29

Supports should help the child develop their cognitive skills as the foundation for learning about themselves, other people, and the world around them.

> No additional feedback.

(Word limit: 100 words)

Recommendation 30

Supports should help the child develop social-emotional skills, supporting them to understand, express, and regulate their emotions as a foundational skill for learning, participation, and wellbeing.

> The APS highly recommends developing advanced content for the "Good Practice Points" about restrictive and other practices that contravene human rights, rather than simply reproducing the glossary information. For example, Guideline users may be unaware that practices such 'time out' in separate, enclosed spaces are restrictive practices. This is also relevant to Recommendations 20 and 73.

(Word limit: 100 words)

Recommendation 31

Supports should help the child develop motor skills, maximising their ability to move in functional ways that they desire.

No additional feedback.

(Word limit: 100 words)

Recommendation 32

Supports should help the child to acquire academic skills that maximise their learning and participation in educational settings.

No additional feedback.

(Word limit: 100 words)

Recommendation 33

Supports should help children to acquire skills that are relevant to their participation in meaningful daily activities.

No additional feedback.

Recommendation 34

Supports should empower families in raising the child and promote the wellbeing of the child and family.

No additional feedback.

(Word limit: 100 words)

Recommendation 35

Supports should lead to the creation of accessible environments that support the child's learning, participation, and wellbeing.

No additional feedback.

(Word limit: 100 words)

Recommendation 36

The child and parents should be involved in selecting supports, as well as other people, when relevant.

No additional feedback.

(Word limit: 100 words)

Recommendation 37

In recommending supports, practitioners should draw on multiple sources of information for the potential benefits and risks for the child and family.

No additional feedback.

(Word limit: 100 words)

Recommendation 38

Practitioners should consider the best available research evidence when making support recommendations for the child and family.

The APS commends the provision of Appendix C that is referred to in the "Good Practice Points". Appendix C summarises evidence from meta-analyses and is critical content that will be of high value to Guideline users. The APS recommends inserting a document link to Appendix C to assist Guideline users to navigate to Appendix C more easily. Consider other opportunities within the document to make additional links to Appendix C to make clear the importance of research evidence when supporting autistic people, their families and supporters.

(Word limit: 100 words)

Recommendation 39

Practitioners should recommend supports that offer a plausible, practical, desirable, and defensible pathway to helping children and families achieve personally meaningful and valued outcomes.

> No additional feedback.

(Word limit: 100 words)

Recommendation 40

Practitioners should ensure the child and family understand the rationale for recommended supports, along with potential benefits, costs, and alternative options.

> No additional feedback.

(Word limit: 100 words)

Recommendation 41

People who recommend supports should have relevant qualifications and work within their scope of practice.

> Practitioners may believe their qualifications and professional registration is sufficient for working effectively with autistic children and their families. Therefore, the APS highly recommends that explicit parameters for additional training and hours of supervision by an autism-experienced practitioner be included as part of Recommendations 41, 42, 44, 48, and/or 49 or this information is included in the "Good Practice Points" content.
>
> There is also an opportunity here to note a preferred position that sufficient practitioner training for evidence-based assessment and intervention with autistic people is embedded in professional level qualifications e.g., in psychology Master's programs.

(Word limit: 100 words)

Recommendation 42

Practitioners who recommend supports should have professional experience that matches their responsibilities.

> Practitioners may believe their qualifications and professional registration is sufficient for working effectively with autistic children and their families. Therefore, the APS highly recommends that explicit parameters for additional training and hours of supervision by an autism-experienced practitioner be included as part of Recommendations 41, 42, 44, 48, and/or 49 or this information is included in the "Good Practice Points" content.

(Word limit: 100 words)

Recommendation 43

Practitioners who recommend supports should be eligible for membership with the relevant professional association and regulated.

> Practitioners may believe their qualifications and professional registration is sufficient for working effectively with autistic children and their families. Therefore, the APS highly recommends that explicit parameters for additional training and hours of supervision by an autism-experienced practitioner be included as part of Recommendations 41, 42, 44, 48, and/or 49 or this information is included in the "Good Practice Points" content.
>
> The psychologist's role is far greater than stated in the "Good Practice Points" for Recommendations 43, 48, and 50. The APS requests the inclusion of additional content e.g., diagnosis, psychoeducation and supporting learning/development, adaptive behaviour, relationships, self-esteem and identity, inclusion, social communication.

(Word limit: 100 words)

Recommendation 44

Practitioners who recommend supports should have knowledge and practical skills that are directly relevant to working with autistic children and their families.

Practitioners may believe their qualifications and professional registration is sufficient for working effectively with autistic children and their families. Therefore, the APS highly recommends that explicit parameters for additional training and hours of supervision by an autism-experienced practitioner be included as part of Recommendations 41, 42, 44, 48, and/or 49 or this information is included in the "Good Practice Points" content.

(Word limit: 100 words)

Recommendation 45

Practitioners who recommend supports should provide the child and family with an accurate, complete, and timely plan of proposed supports.

No additional feedback.

(Word limit: 100 words)

Recommendation 46

Where a practitioner does not have the qualifications, professional experience, professional regulation, relevant knowledge and skills, personal capacity, and/or professional capacity to plan a particular support, they should refer the child and family to a practitioner who does.

No additional feedback.

(Word limit: 100 words)

Delivering Supports: Feedback on Recommendations

Recommendation 47

Supports should be delivered by the people (e.g., parents, practitioners) who are likely to lead to the most meaningful and sustained increase in the child's learning, participation, and wellbeing.

No additional feedback.

(Word limit: 100 words)

Recommendation 48

Practitioners who deliver supports should have relevant qualifications and work within their scope of practice.

Practitioners may believe professional registration is sufficient for working effectively with autistic children and their families. Therefore, the APS highly recommends that explicit parameters for additional training and hours of supervision by an autism-experienced practitioner be included as part of Recommendations 41, 42, 44, 48, and/or 49, or this information is included in the "Good Practice Points" content.

The psychologist's role is far greater than stated in the "Good Practice Points" for Recommendations 43, 48, and 50. The APS requests the inclusion of additional content e.g., diagnosis, psychoeducation and supporting learning/development, adaptive behaviour, relationships, self-esteem and identity, inclusion, social communication.

(Word limit: 100 words)

Recommendation 49

Practitioners who deliver supports should have professional experience that matches their responsibilities.

Practitioners may believe their qualifications and professional registration is sufficient for working effectively with autistic children and their families. Therefore, the APS highly recommends that explicit parameters for additional training and hours of supervision by an autism-experienced practitioner be included as part of Recommendations 41, 42, 44, 48, and/or 49 or this information is included in the "Good Practice Points" content.

(Word limit: 100 words)

Recommendation 50

Practitioners who deliver supports should be eligible for membership with the relevant professional association and regulated.

The psychologist's role is far greater than stated in the "Good Practice Points" for Recommendations 43, 48, and 50. The APS requests the inclusion of additional content e.g., diagnosis, psychoeducation and supporting learning/development, adaptive behaviour, relationships, self-esteem and identity, inclusion, social communication.

(Word limit: 100 words)

Recommendation 51

Where another person assists a practitioner in the delivery of supports, that person must have appropriate knowledge, skills, experience, training, and regulation; and be adequately supervised and supported by the practitioner who has overall responsibility for the delivery of supports.

The APS highly recommends clarifying the meaning of "another person assists a practitioner" and providing examples such as allied health assistants, other members of a collaborative team (educators, family members). Depending on the role/reporting arrangements, the practitioner may not have "overall responsibility for the delivery of supports", for example in a collaborative team of professionals each professional must be held to their own professional standards and accountability.

(Word limit: 100 words)

Recommendation 52

Practitioners should support the child, people around the child, and/or changes to the environment in whatever combination is likely to lead to the most meaningful and sustained increase in the child's learning, participation, and wellbeing.

No additional feedback.

(Word limit: 100 words)

Recommendation 53

Practitioners should deliver supports in the setting(s) that are likely to lead to the most meaningful and sustained increase in the child's learning, participation, and wellbeing.

> No additional feedback.

(Word limit: 100 words)

Recommendation 54

Practitioners should deliver supports in the format(s) (one-on-one, in a group) that are likely to lead to the most meaningful and sustained increase in the child's learning, participation, and wellbeing.

> No additional feedback.

(Word limit: 100 words)

Recommendation 55

Practitioners should deliver supports in the mode(s) (e.g., in person, telepractice) that are likely to lead to the most meaningful and sustained increase in the child's learning, participation, and wellbeing.

No additional feedback.

(Word limit: 100 words)

Recommendation 56

Practitioners should deliver supports in an amount and duration that is likely to lead to the most meaningful and sustained increase in the child's learning, participation, and wellbeing.

No additional feedback.

(Word limit: 100 words)

Recommendation 57

Practitioners should coordinate the supports they deliver with other relevant service providers and service systems.

No additional feedback.

(Word limit: 100 words)

Outcomes, Quality, and Safeguarding: Feedback on Recommendations

Recommendation 58

The child, their family and the practitioner(s) should be involved in determining who will be involved in monitoring and review of supports.

No additional feedback.

(Word limit: 100 words)

Recommendation 59

Practitioners should monitor the extent to which the supports were delivered as planned.

No additional feedback.

(Word limit: 100 words)

Recommendation 60

Practitioners should monitor the child's and family's progress towards goals.

No additional feedback.

Recommendation 61

Practitioners should monitor the child's and family's generalisation and maintenance of use of skills across people, settings, and activities, and over time.

> No additional feedback.

(Word limit: 100 words)

Recommendation 62

Practitioners should monitor the costs and benefits to the child and family of receiving the supports.

> No additional feedback.

(Word limit: 100 words)

Recommendation 63

Practitioners should monitor for unplanned outcomes associated with the supports they deliver.

> No additional feedback.

(Word limit: 100 words)

Recommendation 64

Practitioners should monitor progress by directly asking and listening to the child and family.

No additional feedback.

(Word limit: 100 words)

Recommendation 65

Practitioners should monitor progress through child observations.

No additional feedback.

(Word limit: 100 words)

Recommendation 66

Practitioners should monitor progress through reports from others.

No additional feedback.

(Word limit: 100 words)

Recommendation 67

Practitioners should monitor progress through the collection and evaluation of outcome data.

No additional feedback.

(Word limit: 100 words)

Recommendation 68

Practitioners should review goals, experiences, and outcomes at regular intervals based on the needs and preferences of each child and family.

No additional feedback.

(Word limit: 100 words)

Recommendation 69

Practitioners should ensure that information they collect during monitoring is shared with children and families, and shared with other people, when relevant and appropriate.

No additional feedback.

Recommendation 70

Practitioners should share information related to monitoring and reviews in a way that is informative, understandable, and meaningful to the child and family.

No additional feedback.

(Word limit: 100 words)

Recommendation 71

Practitioners should empower and support the child and parents to make decisions about whether to continue, change, or stop accessing supports.

No additional feedback.

(Word limit: 100 words)

Recommendation 72

Practitioners should communicate to the child and parents when there is indication that their services are no longer required or recommended.

No additional feedback.

Recommendation 73

Practitioners should ensure that the delivery of supports takes place in a safe environment.

The APS highly recommends developing advanced content for the "Good Practice Points" about restrictive and other practices that contravene human rights, rather than simply reproducing the glossary information. For example, Guideline users may be unaware that practices such 'time out' in separate, enclosed spaces are restrictive practices. This is also relevant to Recommendations 20 and 30.

(Word limit: 100 words)

Recommendation 74

Practitioners should have up-to-date knowledge of research evidence for the effectiveness, acceptability, feasibility, and risks of the supports they recommend and deliver.

No additional feedback.

(Word limit: 100 words)

Recommendation 75

Practitioners should have up-to-date knowledge of the views and preferences of autistic people regarding different supports and their delivery.

No additional feedback.

Recommendation 76

Practitioners should have recent experience working with autistic children and their families, and engage in continuing professional development.

No additional feedback.

(Word limit: 100 words)

Recommendation 77

Practitioners should access clinical supervision that matches their knowledge, skills, and professional experience.

No additional feedback.

(Word limit: 100 words)

Recommendation 78

Practitioners should inform the child and family about how they can make complaints about the supports they receive.

No additional feedback.

Recommendation 79

Practitioners should inform the child and family of any potential or actual conflicts of interest they have in providing supports or making referrals.

No additional feedback.

(Word limit: 100 words)

Recommendation 80

Practitioners should follow relevant international conventions, national and state legislative requirements, and other associated regulations.

No additional feedback.

(Word limit: 100 words)

Recommendation 81

Practitioners should ensure clear, appropriate, and accurate information is shared with the child, family, and other practitioners.

The APS highly recommends including "with parental consent" as part of recommendation 81 (additional to this being a focus of Recommendation 12).

Recommendation 82

Practitioners should have a documented procedure for the monitoring of adverse effects of supports.

No additional feedback.

(Word limit: 100 words)

Recommendation 83

Practitioners should be familiar with, and respect, the individual language and terminology preferences of the child and family.

No additional feedback.

(Word limit: 100 words)

Recommendation 84

Practitioners should respect each child and family member for who they are, respect their goals, values and preferences, and work in ways that promote and protect their human rights.

No additional feedback.

SECTION 3: Other Feedback

Please provide any other feedback that you feel is important for us to consider.

Maximum word limit: 150 words (to ensure equal opportunity, the Guideline Development Group will not read beyond 150 words).

- Move Indigenous Acknowledgement (p.37) to the earlier "Acknowledgements" section (p.iii).

- Move "Reading the Guideline" (p.35-36) earlier to help readers navigate.

- Be more succinct and remove repetition, e.g., remove the duplication of Recommendations (pp.2–12) - include as an Appendix if a separate list is needed with the "Good Practice Points".

- All Recommendations and "Good Practice Points" are valuable. However, without advanced content, the Guideline may have limited impact. Some professional Guideline users may view the contents as simplistic, covering known information.

- Encourage professional users to engage deeply with the Guideline content via 'reflective practice' boxes that pose questions such as: How can supervision support you to provide best practice care? How do you know you are using best practice progress monitoring methods?

- It is unclear from the information provided what the "Conditional" strength of some Recommendations means – does this refer to the tentative nature of the evidence, or something else?