SUPP (DIS – CLA)

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|  | SUPERVISOR STANDARD and DECLARATION FORM   * Use for **DISCRIMINATION** only * Please refer to **Guidance on Civil Supervisor Requirements for the Civil Legal Advice Contract 2025 (February 2025)** on completing Supervisor Declaration Forms for advice on how to complete this form. |

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| 1. Details of organisation/supervisor applying | |
| Organisation’s name:  Supervisor’s forename:  Supervisor’s surname:  Continuously qualified as a Supervisor since (date):  Account number(s) (as issued by us) of contracts(s) supervised:  Postcode(s) of other locations supervised (if no Account number): |

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| 2. Generic Supervisor Requirements |
| The Supervisor meets the supervisory standards by having:  (i) Supervised at least one full time Caseworker (or equivalent) who regularly undertook work in the Discrimination Category of Law for at least one year in the previous five year period ; or  (ii) Completed an approved training course covering key supervisory skills no earlier than 12 months prior to the completion of this form . |

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| 3. Legal Competence Standard for Supervisors | | | | |
| i) | Areas of Knowledge – covered in the previous 12 months | | **File name/ref** | **Date closed/ worked on** |
| a) | | **Discrimination** (5 case files of which 3 must relate to Discrimination at work) | 1.  2.  3.  4.  5. | 1.  2.  3.  4.  5. |
| b) | | Non-employment  If an example of a non-employment case is not included in section a) you must outline the steps you will take to ensure the is adequate supervision of non-employment cases |  | |
| c) | | Cases involving arguments about reasonable adjustments (2 case files) | 1.  2. | 1.  2. | |
| **ii)** | | **Skills/Procedure/Knowledge – examples from the last 12 months** | **File name/reference** | **Date closed/ worked on** | |
|  | | Advice and assistance on preparing an appeal/claim, or potential appeal/claim to an employment tribunal (ET) or the County Court (2 case files) | 1.  2. | 1.  2. | |

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| 4. | Discrimination Case Involvement[[1]](#footnote-1)  Supervisors that work full time must demonstrate case involvement in the category of law (200 hours each year) in two of the last 3 years (36 months). Please give details in the first three columns below.  Supervisors that work part-time you must demonstrate case involvement in the category of law (600 hours in total) over the past 5 years (60 months). Please give details in all five columns below.  NB. You are only required to fill in section 4.2(a)-(d) where you are unable to meet the hours requirement at 4.1(a)-(b). | | | | | | |
| Type of involvement | | Minimum/Maximum hours allowed per year (Refer to guidance regarding part-time Supervisors) | Hours in past 12 months | Hours in months 12 to 24 | Hours in months 24 to 36 | Hours in months 36 to 48 | Hours in months 48 to 60 |
|  | |  | All Supervisors | | | Part-time Supervisors only | |
| 1(a)  Personal casework and | | Total minimum 130 hours across personal casework and direct (documented) supervision combined. |  |  |  |  |  |
| 1(b)  Direct (documented) supervision | |  |  |  |  |  |  |
| 2(a)  File Review (inc. face-to-face) | | Maximum 70 hours across all activities combined. |  |  |  |  |  |
| 2(b)  Delivery of external training (CPD- accredited) | |  |  |  |  |  |  |
| 2.c)  Documented research / production of publications | |  |  |  |  |  |  |
| 2.d)  Other supervision | |  |  |  |  |  |  |
| **TOTAL** | | **Minimum 200 hours** |  |  |  |  |  |

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| 5. Declaration |
| **This Supervisor is either a sole principal, an employee, a director, partner or member of the organisation named at 1 above as the date of completion of this form.**  Tick box to confirm  **I confirm that I am either the Compliance Officer for Legal Practice, the Head of Legal Practice, the Compliance Manager or (where the organisation is not regulated) a member of key personnel who either (i) has decision and/or veto rights over decisions relating to the running of the organisation, or (ii) has the right to exercise, or actually exercises, significant influence or control over the organisation, and I confirm that the information provided in this form is accurate.**  Name:  Role:  Dated: |

1. Where you have had extended periods of absence for maternity, sickness or compassionate reasons (continuously for a period of three months or more or for a total of 90 days or more within any of the three defined 12 month periods) please complete the Case Involvement hours in the same way as part time Supervisor. [↑](#footnote-ref-1)