

## Supervision Contract

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### Introduction to Supervision Contract

This document is intended to establish parameters of supervision, assist in supervisee professional development (whether licensure, post-licensure, or developmental supervision), provide clarity in supervisor responsibilities including the responsibility of the supervisor to protect the client.

This contract between \_\_\_\_\_(supervisor) and \_\_\_\_\_(supervisee) at \_\_\_\_\_(site of supervision), signed on \_\_\_\_\_(date) serves to verify supervision and establish its parameters.

### I. Competencies Expectations

- A. It is expected that supervision will occur in a competency-based framework.
- B. Supervisees will self-assess clinical competencies (knowledge, skills, and values/attitudes)
- C. Supervisors will compare supervisee self-assessments with their own assessments based on observation and report of clinical work, supervision, and competency-instruments.

### II. Context of Supervision

- A. \_\_\_\_\_hour(s) of individual supervision per week.
- B. \_\_\_\_\_hour(s) of group supervision per week
- C. Review of videotapes and/or audio tapes is part of supervision process
- D. Treatment notes complete for all sessions for the past week and available in the supervision session for review
- E. Supervision will consist of multiple modalities including review of tapes, progress notes, discussion of live observation, instruction, modeling, mutual problem-solving, and role-play.

### III. Evaluation

- A. Feedback will be provided in each supervision session. Feedback will be related to competency documents.
- B. Summative evaluation will occur at \_\_\_\_ (number) intervals per year: \_\_\_\_\_(specify dates)
- C. Forms used in summative evaluation are or available at \_\_\_\_\_.

D. Supervisor notes may be shared with the supervisee at the supervisor's discretion and at the request of the supervisee.

E. In order to successfully complete the sequence, the supervisee must attain a rating of \_\_\_\_ (on the evaluation Likert scales).

F. If the supervisee does not meet criteria for successful completion, the supervisee will be informed at the first indication of this, and supportive and remedial steps will be implemented to assist the supervisee.

G. If the supervisee continues not to meet criteria for successful completion, the steps in place and procedures laid out will be followed.

#### **IV. Duties and Responsibilities of Supervisor**

A. Oversees and monitors all aspects of client case conceptualization and treatment planning

B. Reviews video/audio tapes outside of supervision session

C. Develops supervisory relationship and establish emotional tone

D. Assists in development of goals and tasks to achieve in supervision specific to assessed competencies

E. Challenges and problem solves with supervisee

F. Provides interventions with clients and directives for clients at risk

G. Identifies theoretical orientation(s) used in supervision and in therapy and takes responsibility for integrating theory in supervision process, assessing supervisee theoretical understanding/training/orientation(s)

H. Identifies and builds upon supervisee strengths as defined in competency assessment

I. Introduces and models use of personal factors including belief structures, worldview, values, culture, transference, countertransference, parallel process, and isomorphism in therapy and supervision

J. Ensures a high level of professionalism in all interactions

K. Identifies and addresses strains or ruptures in the supervisory relationship

L. Establishes informed consent for all aspects of supervision

M. Signs off on all supervisee case notes

N. The supervisor distinguishes administrative supervision from clinical supervision and ensures the supervisee receives adequate clinical supervision

O. Clearly distinguishes and maintains the line between supervision and therapy.

P. Discusses and ensures understanding of all aspects of the supervisory process in this document and the underlying legal and ethical standards from the onset of supervision

## **V. Duties and Responsibilities of the Supervisee**

- A. Upholds and adheres to ACA Code of Ethics
- B. Reviews client video/audio tapes before supervision
- C. Comes prepared to discuss client cases with files, completed case notes and prepared with conceptualization, questions, and literature on relevant evidence-based practices
- D. Is prepared to present integrated case conceptualization that is culturally competent
- E. Brings to supervision personal factors, transference, countertransference, and parallel process, and is open to discussion of these.
- F. Identifies goals and tasks to achieve in supervision to attain specific competencies
- G. Identifies specific needs relative to supervisor input
- H. Identifies strengths and areas of future development
- I. Understands the liability (direct and vicarious) of the supervisor with respect to supervisee practice and behavior
- J. Identifies to clients his/her status as supervisee, the supervisory structure (including supervisor access to all aspects of case documentation and records), and name of the clinical supervisor
- K. Discloses errors, concerns, and clinical issues as they arise
- L. Raised issues or disagreements that arise in supervision process to move towards resolution
- M. Provides feedback weekly to supervisor on supervision process
- N. Responds non defensively to supervisor feedback
- O. Consults with supervisor or delegated supervisor in all cases of emergency
- P. Implements supervisor directives in subsequent sessions or before as indicated.

## **Procedural Aspects**

- A. Although only the information which relates to the client is strictly confidential in supervision, the supervisor will treat supervisee disclosures with discretion.
- B. There are limits of confidentiality for supervisee disclosures. These include ethical and legal violations, indication of harm to self and others (and others as specific to the setting).

C. Progress reports will be submitted to \_\_\_\_\_ describing your development, strengths, and areas of concern.

D. If the supervisor or the supervisee must cancel or miss a supervision session, the session will be rescheduled.

E. The supervisee may contact the supervisor at (contact #) \_\_\_\_\_ or on-call supervisor at \_\_\_\_\_. The supervisor must be contacted for all emergency situations.

### **Supervisor's Scope of Competence:**

I hold an M.S. and Ed.S. in Counselor Education from the University of North Carolina at Greensboro, degree being received in 1996. I have been a Licensed Professional Counselor since 1999 and a clinical supervisor since 2002.

### **Supervision Services Offered/Models Used**

Professional counselors can always benefit from continued professional development, and clinical supervision is one important way to promote self-assessment and development. Below I will describe my approach to counseling (as this may affect my interventions as your supervisor) as well as my preferred model of clinical supervision.

In working with adolescents and adults as a counselor, I believe in strongly encouraging the client's strengths and making a plan for action. My theoretical model is Community Reinforcement Approach, which is grounded in both behavioral therapy and social learning theory. The goal of this approach is to replace problem behaviors with healthy and adaptive skills and behaviors. This approach involves identifying the client's motivators or reinforcers and creating a plan of change around them.

Supervision includes your active involvement as well as efforts to improve your counseling skills and abilities. You will have to work both in and out of the supervision sessions. You will be asked to record sessions so that we might examine your skills and give you constructive feedback. Sometimes change will be easy and swift, but more often it will be slow and deliberate; effort may need to be repeated.

I take a developmental approach to clinical supervision. Counselors who are not continuously growing and developing both personally and professionally can become stagnant, and often do more harm than good with their clients. And while much can be gained by attending workshops and conferences, the real work begins when counselors turn inward, examining their own skills, as well as sharpening themselves as tools within the counseling session. As a clinical supervisor, I see my role as one to provide challenge and support while you look inside yourself in just this way.

As with any powerful intervention, there are both benefits and risks associated with participating in clinical supervision. Risks might include feeling strong anxiety upon being evaluated, or experiencing uncomfortable feelings of anger, guilt, or sadness when working through your own issues which might affect your abilities to successfully function as a professional counselor. If

you are willing to take these risks, I believe that the benefits of personal and professional growth will far outweigh the fleeting discomfort.

**Confidentiality**

I regard the information you share with me with great respect, so I want us to be as clear as possible about how it will be handled. I do not share anything outside of our supervision unless I am legally or ethically required to do so.

**Explanation of Dual Relationships**

As fellow professionals we may encounter each other outside of these supervision sessions. Please help me maintain an appropriate professional relationship as supervisor and supervisee within our sessions. These professional boundaries are needed in order for you to receive the most benefit from our time together.

**Complaint procedures**

If you are dissatisfied with any aspect of our work, please inform me immediately. This will make our work together more efficient and effective. Please feel free to ask if you have questions. Please sign and date this form as well as the Letter of Agreement. A copy will be returned to you and I will keep a copy in your confidential records.

The contract may be revised at the request of supervisee or supervisor. The contract will be formally reviewed at quarterly intervals and more frequently as indicated. Revisions will be made only with consent of supervisee and approval of supervisor.

We, \_\_\_\_\_(supervisee) and \_\_\_\_\_(supervisor) to follow the directives laid out in this supervision contract and to conduct ourselves in keeping with our Ethical Principles and Code of Conduct, laws, and regulations.

\_\_\_\_\_  
Supervisor Date

\_\_\_\_\_  
Supervisee Date

Dates Contract is in effect: \_\_\_\_\_