**Supervision Contract**

Supervision Agreement between:

 ……………..................................................................... (Trainee) &

........................................................................................ (Workplace Supervisor)

**Practicalities Workplace supervision**

* One session each ……........…… for ………….........…….. hours/minutes
* The venue the session (s) will take place at is ……………….....................
* The person responsible for booking the accommodation is …………..........
* Cancellation arrangements…………………………………..........................

**Workplace supervision** –

At least 3 different cases over the year

Caseload review.

Observation of supervisor /experienced therapist – at least once

Observed clinical practice (in vivo, tape, video) throughout the programme

\*Cases need to be agreed with the supervisor as suitable for this training programme: i.e. mild to moderate anxiety and depression.

**Aims of Supervision**

The primary focus of supervision is the welfare of the client through the supervisee’s learning process, in terms of knowledge attainment, attitude refinement, and skills development.

**Professional Guidelines/BABCP Code of Standards and Ethics to which I will adhere:**

...................................................................................................................................................

In addition I agree to adhere to my workplace policies relating to supervision and ethical practice …………………………………………….

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Goals for Workplace supervision:

1.

2.

3.

4.

**Steps in the event of a breakdown in the arrangements for clinical supervision:**

In the event of inappropriate behaviour by the supervisor/supervisee this should be discussed together initially. If this is unsuccessful or the behaviour is of a serious and immediate nature then.............................................. (Workplace) should be informed IMMEDIATELY.

In the unlikely event that the relationship between the supervisee and supervisor deteriorates, each person is responsible for attempting to work together to resolve the problem.

**Changes to this agreement and timescale:**

Changes to this agreement can be negotiated at any time.

This agreement covers the period ………………………….………………………….

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_ Workplace Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_

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

[Adapted from BABCP template]