

Summary of Supervisory Contract

The following summary of content to be included in a supervisory contract is adopted from Sutter, E., McPherson, R. H., & Geeseman, R. (2002). Contracting for supervision. *Professional Psychology: Research and Practice*, 33, 495-498. doi: 10.1037/0735-7028.33.5.495. Copyright 2002 American Psychological Association. No further reproduction or distribution is permitted without written permission from the American Psychological Association.

I. Both parties agree to the following:

1. Description of the purpose of the supervised clinical experience (e.g., meet licensure requirements, establishing new competencies, meet licensing board disciplinary requirements, etc.).
2. Beginning and ending dates of supervision.
3. Description of how many hours per week the supervisee will work; how many hours of individual, delegated, or group supervision per week; and a statement that the primary supervisor retains full responsibility for overseeing any delegated work.
4. Statement describing the legal limits of the supervisor-supervisee fiduciary relationship (that this agreement is not a partnership, contract of employment, joint venture, or a profit sharing agreement; and that neither party has the authority to obligate the other to any additional undertaking or commitment) and a statement describing the pay anticipated to both the supervisor (not to be paid by the supervisee, however) and to the supervisee.
5. Fees to be paid to the supervisor, source of payment, and any included benefits.
6. A statement assuring compliance with written policies about record keeping and patient access to records, documentation of supervised activities and supervision, confidentiality and its exceptions, handling of emergencies and terminations, client billing (including reporting of supervised status of therapist-supervisee), and obtaining proper client informed consent.
7. Malpractice insurance details.
8. Agreement to keep each other informed about the facts of any alleged injury from the care or treatment of a patient and to cooperate with each other if there is a malpractice claim.
9. Agreement to keep each other informed of changes in this contract, and that the contract may be terminated by either party with 2 weeks notice, and that any dispute about the enforcement or application of this agreement must first be submitted to mediation.

II. Supervisor agrees to the following:

1. Avoidance of dual relationships with supervisee that would lead to exploitation or loss of objectivity.

2. Responsibility for all professional services provided by supervisee, agreement to assign only tasks within supervisee's competence, and a specific description of the following: a) supervisee's activities, b) proposed delegated supervision or group supervision, c) the extent of supervisor's availability to the supervisee, d) the back-up supervisor in case of emergency, e) the method of documentation of supervision by supervisor.
3. Obligation to continually evaluate appropriateness of services rendered and professional development of the supervisee, frequency of evaluation, specific areas that will be evaluated, and the name of the individual or agency to receive these evaluations.
4. Description of the nature or style of supervision (e.g., observation, allowing supervisee to observe supervisor, reviewing supervisee's test protocols and reports or recordings of therapy sessions, discussing supervisee's work concerns, structuring the sessions around selected topics).
5. Space (consulting rooms), equipment, and support services to be provided to the supervisee.
6. Specific credentials to be maintained in good standing.
7. Assurance that supervisee will use an appropriate title indicating his/her training status.
8. Assurance that supervision will normally occur at the same site where the supervisee sees clients and patients.

III. Supervisee agrees to the following:

1. Agreement to document supervised in a specific manner (e.g., log).
2. Compliance with all relevant ethics codes, legal requirements, and office policies.
3. Informed consent to clients, including information regarding trainee's supervised status (all written reports and billing statements should include trainee's supervised status).
4. Assurance that supervisee considers the supervised experience as a learning opportunity and will seek the benefit of the supervisor's instruction and oversight.