**Clinical Psychology Training Programme - University of Leeds**

**Contracting in Supervision**

The Placement Assessment Form includes a section on ‘Contracting’ for each of the 10 Competency Areas within which priorities and agreements can be identified and recorded. The purpose of this document is to highlight a number of areas that you might like to consider when planning and reviewing ***supervision*** arrangements. **This is supplementary to the PAF and is optional** (you can upload it to the documents area of PebblePad if required). It has been produced in response to requests trainee clinical psychologists and supervisors.

This is intended to be a starting point – it can be added to or amended by trainees or supervisors as needed

*Please consider the following and record agreements where necessary – it may be more practical to type into the electronic version of this document available on PebblePad via the Extranet*

***Practicalities***

Time, Frequency and Duration of Supervision (minimum 1 hour per week, BPS Guidelines)

Other opportunities for contact between Supervisor and Supervisee (observations, shadowing, joint work etc. a further 2 hours each week, BPS Guidelines)

Availability of other supervisors (in the absence of named placement supervisors)

Caseload/workload: type, size and range (minimum 6 weekly contacts recommended, adjusted for stage of training, complexity, other commitments)

What will be included in supervision? (e.g. focus on direct client contact, reflections, discussions regarding theory/models, modelling and role play, team issues, service development issues)

How will theory-practice links be supported (e.g. reading, observations of supervisor?)

What access to work will there be (e.g. direct observation, joint work, audio and video recordings)? How will these be used in supervision?

[In the case of having two or more supervisors – how will communication between parties be managed?]

***Process issues in Supervision***

Will supervision be based on a particular model (of supervision and/or of therapy)?

What expectations are there regarding supervision (e.g. level of detail, level of autonomy, implicit rules of working, what you value or dislike in supervision?)

How might previous experiences of supervision impact on this relationship?

How will feedback be sought and how will it be given (including constructive challenge)?

How will ruptures be managed (including contact with Clinical Tutors)?

What confidentiality boundaries are there, and how will they be managed?

How will cultural humility, and issues of sameness and difference be included in supervision?

How will personal issues (including transference and counter-transference) be dealt with in supervision?

What are the impacts of the developmental stage and learning style of the Supervisee and of the interpersonal styles of both Supervisor and Supervisee?

How and when will issues of evaluation be dealt with?

If any concerns arise from either party how will these be raised and managed?

When will these arrangements be reviewed? (e.g. prior to MPV)

**Supervisee** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_