

PCC Supervision Contract

Primary Care Connect Supervision Contract (pg. 1 of 3)

The following contract was completed on the and is agreed to by the supervisor and the supervisee

The six month supervision contract review will take place on the

1. Structure and format of supervision:

- a) One hour supervision sessions will take place fortnightly .
- b) Sessions will take place in a clinic consulting room or appropriate alternative location as nominated by GVCHS manager.
- c) It is the responsibility of the supervisor to ensure all documentation is stored in a locked filing cabinet, which can be accessed by the supervisee upon request. Records will only be accessed by management in the instance of legal intervention e.g., A Work Cover claim directly relevant to the supervision content.
- d) The supervisee must not miss more than three scheduled sessions per annum. More than three missed sessions will result in a notification being made to the appropriate manager.
- e) Both the supervisor and the supervisee must adhere to the professional standards and legislation relevant to both GVCHS and their profession.

2. The supervision agenda should include the following:

- a) Any matters the supervisee wishes to include
- b) Any matters arising from previous supervision sessions
- c) Overview of clients and/or work undertaken
- d) Positive and constructive feedback on work undertaken
- e) Agreed future action plans or tasks
- f) Discussion of skill development, knowledge and value base
- g) Identification of educational or professional development needs
- h) Administrative and program updates or information
- i) Reflection of professional experiences and feelings
- j) Feedback of experience and expectations of supervision

3. Responsibilities and Duties

Supervisees are responsible for:

- Maintaining an ongoing commitment to clinical supervision and incorporating it into their work practice
- Ensuring they understand their role as a supervisee
- Being prepared for sessions, discussing issues openly and being reflective of practice, being receptive to feedback and incorporating as relevant into work practices.

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Supervisors are responsible for

- Providing clinical supervision which assists the supervisee in exploring their clinical practice, giving clear and constructive feedback and challenging and supporting the supervisee
- Encouraging ongoing professional development
- Being prepared for each session and completing supervision notes
- Maintaining a level of professional development and practice that is required to provide quality supervision

4. Expectations of supervision:

a) What I want from you as a supervisor:

b) What I want from you as a supervisee:

5. Mutually determined goals and tasks:

Goal 1 -

Supervisor Tasks -

Supervisee Tasks -

Goal 2 -

Supervisor Tasks -

Supervisee Tasks -

Goal 3 -

Supervisor Tasks -

Supervisee Tasks -

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6. Procedures

- a) Supervision notes will be retained in a locked filing cabinet and will be archived for seven years after the supervisee ceases employment at GVCHS.
- b) Support outside supervision sessions must be negotiated with the supervisor and the manager and availability of any extra support will depend on urgency of issue and workload demands of the supervisor. Supervisors must not be expected to provide line management support to their supervisees.
- c) If there are disagreements, disputes or conflict areas between the supervisee and supervisor the issues should be discussed openly and honestly with both parties working to find solutions. If a solution is unable to be formulated the appropriate manager should be notified.
- d) If the supervisory relationship is deemed by either the supervisor or supervisee to be inappropriate or ineffective it is their responsibility to advise the appropriate manager as soon as possible.
- e) All parties involved in clinical supervision have a role in maintaining confidentiality for the session content. The exception to this is where there is a clear breach of professional conduct, unsafe practice or illegal practices that put the consumer, practitioner and/or GVCHS at risk. In this instance the clinical supervisor will provide the supervisee with support, but will report the concern to the supervisee's Manager. In all cases the supervisee must be informed of the action taking place.
- f) Clinical supervision must be focused on clinical practice issues as opposed to any personal issues of the practitioner. If personal issues are a concern to the supervisee or supervisor access to debriefing and the Employee Assistance Program is provided by GVCHS.

Signed:

Supervisor

Supervisee