

**DRAFT 1:1 TELEPHONE CLINICAL SUPERVISION AGREEMENT**

**Supervisee:**

**Supervisor:** John Driscoll

**Date agreement reached:**

**Review date for evaluation of sessions:** Ongoing documentation

**Frequency / Duration of meetings:** 60 mins. pre-booked telephone meetings

**Venue:** Telephone clinical supervision

**WHAT THE CLINICAL SUPERVISEE EXPECTS: TELEPHONE CLINICAL SUPERVISION:**

**WHAT THE CLINICAL SUPERVISOR EXPECTS: TELEPHONE CLINICAL SUPERVISION:**

- Commitment to regular sessions as agreed -Supervisee to phone **XXXXX XXXXX** as agreed.
- As far as possible both parties to be available on times agreed and end sessions promptly.
- That the supervisee will phone supervisor or e.mail if unable to make the agreed session.
- Supervisee to maintain and develop own supervisory documentation as evidence for formative and summative assessments.
- Supervisee is willing to accept feedback on practitioner performance
- Supervisee will email a summary of each session and pre-prepare CS documentation prior to the next session
- Supervisee to offer feedback to supervisor on the process of supervision (telephone method) as well as the supervision itself.

**MAINTAINING CONFIDENTIALITY:**

- A copy of the contract agreed sent to manager but NOT for individual sessions
- Both the supervisee AND the supervisor are accountable to each other for maintaining session confidentiality
- Will need to discuss electronic storage and email as a supplement to the session.

**ANY OTHER ISSUES:**

- Suggest dates and times for next phone session
- Fill in supervisee expectation and send to supervisor
- Inform ward manager about clinical supervision work
- Read about reflective models

**SUPERVISEE SIGNATURE:**

**SUPERVISOR SIGNATURE:** *J.Driscoll*

**(OPTIONAL) ONGOING TELEPHONE CLINICAL SUPERVISION DOCUMENTATION**

<b>Clinical Supervisee:</b>	<b>Clinical Supervisor:</b> John Driscoll
<b>Designation:</b> ICS Module Student	<b>Designation:</b> ICS Module Leader
<b>Ward / Department:</b>	<b>Ward / Department:</b>
<b>Date of Clinical Supervision Session:</b>	
<b>REVIEW OF PROGRESS ON ACTION POINTS SINCE LAST SESSION:</b>	
<b>ISSUE / TOPIC FOR DISCUSSION THIS TIME (WHAT?):</b>	
<b>WHY THIS IS IMPORTANT TO ME (SO WHAT?):</b>	
<b>KEY POINTS FROM DISCUSSION WITH SUPERVISOR:</b>	
<b>NOW WHAT?/ ACTIONS FOR NEXT TIME:</b> <b>Clinical Supervisee:</b>	<b>NOW WHAT? / ACTIONS FOR NEXT TIME:</b> <b>Clinical Supervisor:</b>
<b>ON REFLECTION / EVALUATION:</b> <b>Clinical Supervisee:</b> What I <u>liked least</u> about the session  What I <u>liked best</u> about the session	<b>ON REFLECTION / EVALUATION:</b> <b>Clinical Supervisor:</b> What I <u>liked least</u> about the session  What I <u>liked best</u> about the session
<b>Signed:</b> <b>Clinical Supervisee</b>	<b>Signed:</b> <b>Clinical Supervisor</b>