

### **LPC SUPERVISION CONTRACT**

This SUPERVISION CONTRACT is effective the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by and between Dr. Rhonda Johnson (the "Supervisor") and \_\_\_\_\_ (the "Supervisee").

**SUPERVISOR:** The above named Supervisor agrees to provide supervision as required by the Texas State Board of Licensed Professional Counselors to \_\_\_\_\_ (Supervisee). Supervision will be conducted one hour a week of face-to-face supervision (whether individually or as part of a group).

#### **SUPERVISEE:**

1. Supervisee shall purchase and maintain at Supervisee's expense professional liability insurance from Cincinnati Insurance Company in the minimum amount of one million dollars per occurrence and three million in the aggregate. The Supervisee shall provide proof of coverage prior to entering into this agreement.
2. Experience and supervision will be documented on a weekly basis on forms and a log acceptable to the Supervisor.
3. The Supervisee will provide a completed and signed copy of the On-Site Supervisor Release/Acknowledgement of Responsibilities.
4. HIPAA regulations will be followed at all times with computers, phones, and Internet connections having password protection.
5. The above named Supervisee understands that being in clinical supervision does not guarantee success in obtaining licensure.

**FEES:** The Supervisee shall pay the Supervisor the sum of \_\_\_\_\_ per individual supervision session and \_\_\_\_\_ per group supervision session.

**PROFESSIONAL RESPONSIBILITY:** For and throughout the term of this Contract, the full professional responsibility for services provided by the Supervisee will rest with the Supervisor. \_\_\_\_\_ (Supervisee) agrees to act in an ethical manner while in supervision and to take responsibility to quickly address any problem that may cause harm to clients.

**REMEDATION PLANS:** If the supervisor has concerns about the Supervisee’s skills or has ethical concerns, the Supervisor will create a remediation plan and have the Supervisee agree and sign a remediation plan of changes for the supervisee to implement.

Your computer and Internet Password protected.

**TERMINATION:** This contract shall terminate upon the earlier to occur: (a) the completion by Supervisee of the herein above-referenced 3,000 clock hours of Services and receiving LPC licenseure (b) notice of termination (with or without cause) with 60 days notice by either party to the other. Supervisee shall be entitled to a copy of the records kept by Supervisor for Services rendered up to the effective date of such termination.

**STANDARDS:** Supervisor and Supervisee shall adhere to the Rules of the Board and the Code of Ethics for the Texas State Board of Licensed Professional Counselors.

**CLIENT EMERGENCIES:** Supervisee shall notify Supervisor of any client emergency. A “Client Emergency” is circumstances under which a reasonable person would believe that:

- a. The client represents serious threat to himself or others; or
- b. immediate therapeutic contact is reasonably necessary for the well being of the client.

**MODIFICATION OF THIS AGREEMENT:** This agreement may be modified provided:

- (a) the modification is evidenced in writing,
- (b) the modification is agreeable to both parties and
- (c) the new agreement satisfies all Board requirements

This agreement is entered into as the date and year first above written.

Supervisee Signature: \_\_\_\_\_ Date:

Supervisor Signature: \_\_\_\_\_ Date:

**LMFT SUPERVISION CONTRACT**

This SUPERVISION CONTRACT is effective the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by and between \_\_\_\_\_ (the "Supervisor") and \_\_\_\_\_ (the "Supervisee").

**SUPERVISOR:** The above named Supervisor agrees to provide supervision as required by the Texas State Board of Licensed Marriage and Family Therapists to \_\_\_\_\_ (Supervisee).

Supervision will be conducted a minimum of 1 hour every week (whether individually or as part of a group). Any group supervision will not involve more than six (6) supervisees. The supervisor will not provide supervision to more than 12 supervisees.

**SUPERVISEE:**

1. Supervisee shall purchase and maintain at Supervisee's expense professional liability insurance from Cincinnati Insurance Company in the minimum amount of one million dollars per occurrence and three million in the aggregate. The Supervisee shall provide proof of coverage prior to entering into this agreement.
2. Experience and supervision will be documented on a weekly basis on forms and a log acceptable to the Supervisor.
3. The Supervisee will provide a completed and signed copy of the On-Site Supervisor Release/Acknowledgement of Responsibilities.
4. HIPAA regulations will be followed at all times with computers, phones, and Internet connections having password protection.
5. The above named Supervisee understands that being in clinical supervision does not guarantee success in obtaining licensure.

**FEES:** The Supervisee shall pay the Supervisor the sum of \_\_\_\_\_ per individual supervision session and \_\_\_\_\_ per group supervision session.

**PROFESSIONAL RESPONSIBILITY:** \_\_\_\_\_ (Supervisee) agrees to act in an ethical manner while in supervision and to take responsibility to quickly address any problem that may cause harm to clients.

**REMEDICATION PLANS:** If the supervisor has concerns about the Supervisee’s skills or has ethical concerns, the Supervisor will create a remediation plan and have the Supervisee agree and sign a remediation plan of changes for the supervisee to implement.

**TERMINATION:** This contract shall terminate upon the earlier to occur: (a) the completion by Supervisee of the herein above-referenced 3,000 clock hours of Services and receiving LMFT licensure or (b) notice of termination (with or without cause) with 60 days notice by either party to the other. Supervisee shall be entitled to a copy of the records kept by Supervisor for Services rendered up to the effective date of such termination.

**STANDARDS:** Supervisor and Supervisee shall adhere to the Rules of the Board and the Code of Ethics for the Marriage and Family Therapists.

**CLIENT EMERGENCIES:** Supervisee shall notify Supervisor of any client emergency. A “Client Emergency” is circumstances under which a reasonable person would believe that:

- a. The client represents serious threat to himself or others; or
- b. immediate therapeutic contact is reasonably necessary for the well being of the client.

**MODIFICATION OF THIS AGREEMENT:** This agreement may be modified provided:

- (a) the modification is evidenced in writing,
- (b) the modification is agreeable to both parties and
- (c) the new agreement satisfies all Board requirements

This agreement is entered into as the date and year first above written.

Supervisee Signature: \_\_\_\_\_ Date:

Supervisor Signature: \_\_\_\_\_ Date:

