

PLACEMENT CONTRACT FORM OUTLINE

Please note that this section of the contract is compulsory.

1. Trust/Organisation name
2. Specialty
3. Co-ordinating Clinical Supervisor(s)
4. Clinical Supervisor(s)
5. Trainee name
6. Start/end date of placement
7. Brief description of placement and setting(s)
8. Statement that the paramount concern will always be that the trainee is enabled to raise any concerns about the safety and wellbeing of users of the service; this should be a standing item on supervision agenda.
9. Specific competencies that need to be developed by this trainee on this placement:
 - Areas for development identified during the last placement
 - Any competencies which were rated as '*Referral*' on the last placement that must be developed to an appropriate level on this placement
10. Main aims of the placement, including the core competencies (see ECC form) that are expected to be achieved and how these will be developed. Model-specific therapy competences should always be included
11. Specialist experience offered and how it will contribute to competency development, including specific therapy models and/or psychological testing
12. Main areas of work to be undertaken, with whom and with an estimate of how much (e.g. client and carer work, staff and team work, teaching and community/organisation work.)
13. Induction to the placement – agree on what will help the trainee orient to the new service and colleagues
14. Direct observation:
 - Opportunities for the trainee to observe others (including supervisors)
 - Opportunities for the supervisor to directly to observe the trainee
 - Opportunities for detailed discussion and review of the development of model-specific competences based on observation of the trainee
15. Potential QIP area and supervision arrangements (including draft reading) if applicable

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16. Supervision arrangements for selection of material, support and reading drafts of Assessment of Clinical Skills (1st years)/ Professional Practice Report/ Supplementary Report including issues that need to be considered in obtaining informed consent
17. Supervision plan (*recommended minimum face-to-face contact: 90 minutes per week*) and additional informal or emergency contact arrangements. Also, supervision cover if needed
18. Annual and study leave plan for this placement

NB: Annual and study leave to be taken during the placement, needs to be negotiated by Supervisor and Trainee at the very start of placement

19. Confirmed number of placement days to be done
20. Signed and dated by the trainee and all supervisors

Trainee name: _____

Date: _____

Trainee
signature: _____

Co-ordinating
supervisor
name: _____

Co-supervisor
name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

Suggested Template for Clinical Supervision Contract

Please note that this written section of the contract is optional, though a conversation about each of the areas outlined below is strongly recommended as good practice.

The following template includes some guidance on areas worth attending to together. Detailed suggestions of general expectations between trainee and supervisor are given at the end, though these are intended to guide rather than be prescriptive. Clinical supervision serves multiple purposes including education, support, management and assessment. Establishing a strong supervisory alliance will support the navigation of these different, sometimes conflicting, purposes.

The contract should include additions and adaptations to suit the specific needs and preferences of the individual trainee and supervisor. *NB. The written content below is less important than the conversation so lots of written detail is not necessary.*

Placement details

Trainee name:	Year of training:
Placement:	Placement dates:
Co-ordinating supervisor:	
Co-supervisor (if applicable):	

Practical arrangements for supervision:

Frequency and duration:
Day and time:
Cover arrangements:
Best way to make ad hoc contact if needed:

Supervision process:

How will content and priorities for discussion be agreed?
How will feedback be shared (in both directions)?
How/what should we prepare for supervision?
How can we attend meaningfully to matters of ethnicity, culture, language, and other aspects of social identity in the placement setting, supervision dyad and in the clinical work?
What signs might we notice if supervision isn't working well for either of us? How will we let each other know, so we can resolve this?

Expectations

What is expected of the trainee?
What is expected of the supervisor?

Expectations of the trainee that could usefully be discussed

- To make supervisor(s) aware of learning and competency development needs, styles and preferences.
- Carry out the advice or instructions given in supervision and feedback where this was not possible.
- Pro-actively inform supervisor/s of actions carried out and barriers to this (e.g. insufficient time; unsure of what to do; external obstacles).
- Keep all supervisors informed of whereabouts including attendance at meetings, any changes to normal working week. Start by seeking permission/advice on which meetings to attend and how to use time best over placement. The trainee can negotiate changes as long as supervisor/s are kept informed.
- Use local procedures (e.g. update Outlook calendar) to keep supervisor/s updated on whereabouts and activity.
- Discuss openly in supervision the rationale for decisions/actions, reflections on supervisors' feedback, what they have learnt and how they have put this into practice.
- Plan study and A/L suitably far in advance so as not to adversely impact on clinical work or his/her ability to fulfil all placement competences, and to give supervisor/s sufficient notice to plan their supervisory duties.
- Plan time sufficiently to fulfil the multiple demands of placement (and training) and seek support if struggling with time management, especially planning of work-based assignments such as the QIP or PPR. Complete work in a timely manner and seek clarification on expected timescales if unclear.
- Reflect openly on personal circumstances/history/context where it may impact on practice including clinical work, supervisory relationship and any other competences. This should include their career experience to date and previous experience of clinical supervision.
- To be open with their supervisor/s and/or manager if they are struggling with any aspect of placement, in order for them to be supported as early as possible.

Expectations of the supervisor that could usefully be discussed

- To provide supervision regularly and reliably in a planned and appropriate way e.g. without interruptions, at agreed times.
- To be clear with the trainee about individual supervision style preferences and expectations.

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- To take on multiple roles of assessor, educator and mentor/supporter and reflect openly on the inherent challenges of this for them and the supervisory relationship.
- To provide regular, constructive and accurate feedback on progress, based on own and others' direct experience of the trainee.
- To be open to receiving feedback from the trainee about their experience of the placement, work setting or supervision.
- To be clear on the nature of advice given e.g. when suggestions are just points of learning and when they are non-negotiable e.g. due to Trust policy or concern over competence.
- To offer the trainee a supportive and confidential space to reflect on their personal-professional development, including discussion of any relevant personal factors.
- To support the mutual development of cultural humility and intercultural competencies by creating a space where assumptions, values, similarities, and difference can be explored.
- To liaise regularly and share relevant, negotiated information with the trainee's Salomons manager and with their co-supervisor if applicable, to ensure their support and assessment is clear and well-coordinated.
- Supervisor/s to use their own supervision to discuss their supervision as needed, in order to develop their own practice and enhance the service they are offering.
- Beyond these regular contacts, supervisor/s to discuss with the trainee any plans to discuss them or their needs with any other professional.
- Allow the trainee to express specific preferences for work to be undertaken on placement and accommodate these where the service constraints allow.
- To give the trainee adequate notice of any planned A/L or absence from work (e.g. for training/meetings) and make appropriate plans for cover.
- To share own experiences including rationale for actions, where this may be helpful for the trainee's learning e.g. to model open reflection.
- Where difficulties arise in the supervision process, to discuss openly the emotional experience of this, if this feels helpful for understanding the difficulties and moving forward.
- To work closely with Salomons manager to ensure the trainee is well supported, including adjustments for any relevant personal circumstances.
- Where there are concerns that the trainee is not fulfilling their training requirements, these are to be discussed at the earliest opportunity with the trainee and their Salomons manager, and a three-way meeting scheduled as necessary.

Trainee name: _____

Date: _____

Trainee
signature: _____

Co-ordinating
supervisor
name: _____

Co-supervisor
name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____