

Appendix 1 – Example Supervision Agreement

Example Supervision agreement

Name of practitioner:	
Year:	
Role / level of practice:	
Named Practice Supervisor:	
Named Management Supervisor:	
Named Restorative Supervisor:	
Start date of agreement:	
Review date of agreement:	

What is the purpose of your supervision?

- e.g. management / practice /restorative supervision
- relating to a specific task or skill?
- Is it aiming to meet specific learning or development needs, how will supervision help?

What structure will your supervision take?

- e.g. 1:1, peer / groups?
- Face to face or remote?
- Is direct or indirect supervision required?

Frequency of supervision?

- e.g. weekly / monthly / quarterly?
- How long for and what time of day?
- Is there protected time in both supervisor and supervisee job plan?
- How will you ensure sufficient privacy and confidentiality?
- Who is responsible for arranging the dates / times / location / booking of room?

Location of supervision?

- How will you ensure privacy and maintain confidentiality?

Feedback, documentation, and confidentiality

- How will you evaluate and review the success and ongoing relevance of the supervision agreement?
- What type of record will be kept and where?
- How will you both access the record?
- Who will be responsible for completing the documentation?
- What are the confidentiality terms? What circumstances may require information to be shared?

What is the purpose of your supervision?

Adapted from HCPC Supervision Agreement Template which can be accessed here:

<https://www.hcpc-uk.org/globalassets/standards/meeting-our-standards/supervision/supervision-agreement-template-word.docx>

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What structure will your supervision take?

Frequency of supervision?

Location of supervision?

Feedback, documentation, and confidentiality

Other comments

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