



## **Contract for Supervision of Professional Experience**

Supervision of Professional Experience (SPE) at Sentiero adheres to the guidelines set forth by the American Psychological Association's Guideline for Clinical Supervision in Health Service Psychology (hereafter referred to as the *APA Guidelines for Supervision*). The APA Guidelines for Supervision are organized around the following domains: (1) Supervisor Competence; (2) Diversity; (3) Supervisory Relationship; (4) Professionalism; (5) Assessment, Evaluation, Feedback; (6) Problems of Professional Competence; and (7) Ethical, Legal, and Regulatory Considerations. This contract establishes parameters of supervision, assists in supervisee professional development, describes the evaluation process, and provides clarity of supervisor and supervisee duties, roles, and responsibilities for SPE at Sentiero.

### **I. Purpose, Goals, and Objectives**

The aim of SPE is to monitor and ensure patient welfare and wellbeing, promote the professional identity and competence of the supervisee, complete the requirements for training at Sentiero, and fulfill the requirements of the supervisee's pursuit of licensure as a psychologist in California.

### **II. Registered Psychological Associate (RPA) Clinical Duties**

The Registered Psychological Associate (RPA) will be engaged in individual, group, and family psychotherapy with children, adolescents, and adults. The RPA will also conduct psychological, neuropsychological, and psychoeducational evaluations for diagnostic clarification, assessment of executive functioning, learning disabilities, and determining eligibility for ADA accommodations.

The goals and objectives for SPE include: (1) to prepare the trainee for practice as a psychologist in the private sector; (2) to develop the trainee's professional identity in relation to a particular theoretical orientation, as well as areas of clinical interest; (3) to develop the trainee's conceptualization of case formulation and interventions; to enhance the trainee's knowledge of psychological, neuropsychological, and psychoeducational assessment for diagnostic clarification, clinical interventions, and ADA accommodations.



In order to facilitate socialization into the profession, the RPA will be required to attend weekly supervision and consultation groups with licensed psychologists and trainees in order to discuss clinical work and relevant issues related to the field of psychology. The RPA will also be required to attend monthly continuing education events at an APA-approved institution in order to further develop clinical skill and expertise. Attendance and/or presentations at local, state, and national conferences will be regularly encouraged and required at least once during training.

### III. Supervisor Qualifications

**Dr. Emily N. Kierce** is the President and Founder of Sentiero. She is a Licensed Psychologist (PSY31489) via the California Board of Psychology. She is a school and clinical psychologist. She earned a Doctor of Psychology (PsyD.) in Clinical Psychology from California School of Professional Psychology at Alliant International University, San Diego. She has a Specialist in School Psychology (S.S.P.) and a Master of Science (M.S.) in Psychology from Barry University in Miami Shores, Florida. She obtained a post-doctoral certification in Adult Psychoanalytic Psychotherapy from San Diego Psychoanalytic Center and completed her postdoctoral fellowship with Dr. Timothy H. Rayner, Psychiatrist and Training and Supervising Psychoanalyst. She is a Nationally Certified School Psychologist (NCSP) via the National Association of School Psychologists (NASP) and holds the Pupil Personnel Services (PPS) credential in School Psychology from the California Commission on Teacher Credentialing.

**The supervisor is ultimately responsible for the clinical work of the supervisee, and thus cannot supervise any case outside of the scope of professional knowledge and/or training. Potential referrals will be discussed in order to make a determination pertaining to the appropriateness of any given case, contingent upon the skill level of the supervisee and the competence of the supervisor.**

### IV. Supervisory Relationship

The supervisory working relationship is comprised of the same components as the therapeutic working alliance (i.e., goals, tasks, and rapport), but the alliance is formed between supervisor and supervisee instead of clinician and patient. Thus, the supervisory relationship is essential to effective clinical supervision yet is distinct from



consultation, psychotherapy, or mentorship. In the supervisory relationship it is understood that there is a power differential that also involves evaluative aspects. As such, the supervisor will bear the responsibility for managing and discussing the quality of the working relationship but encourages bidirectional feedback. Supervision will be tailored to fit the specific needs of the supervisee. In order to get the most out of the experience, it is important to use supervision well. It is expected that the supervisee will be prepared with an agenda for the meeting and prioritize what topics need to be discussed. The supervisee controls the meeting to the extent needed to ensure ones professional and clinical needs are met. Also, it is important to present an agenda early in the hour and to take notes as needed. In preparation for supervision meetings, please bring relevant case files (i.e., clinical and/or assessment protocols) to each meeting for examination and review by the supervisor. *Please note: While patient information shared within supervision is confidential, the supervisor will treat supervisee disclosures with discretion and in the context of training. Accordingly, the supervisor will regularly discuss progress with delegated supervisors and seek feedback from other staff within Sentiero.*

It is expected that a large component of supervision will involve review of content and contextual issues (e.g., case formulation, diversity competency, ethical/legal issues, administrative/financial issues, clinical techniques, crisis issues, and evaluation). Just as important, will be the focus on process components (e.g., self-evaluation, processing of technique dilemmas, personal hypotheses, etc.). Reflective practice and self-assessment are integral to clinical training and maximizes the learning process. Feedback will be ongoing, emphasizing both process and outcome. The translation of this information and learning into action will be one measure of growth.

Individual supervision will be face-to-face and scheduled for a minimum of one hour per week or 10% of hours worked, whichever is greater. Group supervision is scheduled each Monday morning from 0800 to 1200. The supervisee is responsible for informing the supervisor about the need for additional supervision based on hours worked. There may be rare circumstances when supervision needs to be cancelled by either party. In those cases, it is expected that an agreement will be reached on a rescheduled supervision time. At times, supervision may be delegated to another licensed psychologist employed by Sentiero with approval from the California Board of Psychology.



## V. Assessment/Evaluation/Feedback & Record Keeping

At the onset of training the supervisee will complete a list of goals that will guide the clinical experience. As the supervisory relationship and learning needs evolve over time, the supervisor and supervisee will work collaboratively to adjust the focus within each supervision meeting, as needed. In addition to ongoing direct verbal feedback, a formal, written evaluation will occur quarterly. At a minimum, audio recordings of sessions must be submitted quarterly in order to provide both verbal and written feedback.

All patient documentation will be co-signed by the supervisor. Any patient request for records are property of the corporation and must be released by the supervisor.

## VI. Supervised Professional Experience (SPE) via the California Board of Psychology

**Commencement.** Supervised Professional Experience (SPE) begins upon receipt of an email from the Board of Psychology notifying the supervisor and supervisee that the SPE Agreement has been accepted. Paid training might start prior to this date; however, hours cannot be counted toward licensure and patient care cannot be conducted until board approval has been received.

**Hour and Supervision Logs.** All supervisees accruing hours for licensure are required to utilize Time2Track. The trainee will be reimbursed for the cost of the T2T account upon submitting a receipt for payment to Dr. Kierce. The supervisor will keep a record of all supervision meetings, which the supervisee can review at any time. The supervisee is also required to keep detailed written records of individual and group supervision, which will be signed monthly by the supervisor. The SPE log will be shared by the Clinical Director to the trainees Sentiero Gmail account.

**Time2Track and SPE Logs must be signed and dated by the supervisee and then submitted to the supervisor (i.e., placed in the supervisor's mailbox at Emerald Plaza) for review and signature the first week of each month. Unsigned or incomplete logs will be returned to the supervisee. Time2Track and supervision logs submitted more than 30 days late will not be accepted.**

The supervisor will send a copy of the signed documents electronically to the



supervisee each month. Records will be maintained by the supervisor for a minimum of ten years after the supervisee obtains a professional license.

**Goal Setting.** Trainees will set goals upon training utilizing the Sentiero SMART Goals Template. Progress on goals will be reviewed quarterly with supervisors at the time of evaluation. Please see examples in the Goal Setting Folder via the Human Resources shared drive.

## VII. Role Expectations

### *i. Mutual Expectations*

- If supervision is canceled, a good-faith effort to reschedule will be made
- Compliance with legal and ethical guidelines put forth by the California Board of Psychology and the American Psychological Association
- Review audio recordings of psychotherapy and assessment sessions
- Develop and maintain positive supervisory relationship
- Negotiate training goals and tasks to complete in supervision
- Complete tasks and paperwork in a timely fashion
- Monitor the welfare and well-being of patients
- Maintain professionalism in all interactions
- Identify and discuss ruptures in the supervisor alliance
- Complete scheduled evaluations and process the evaluations in supervision
- Demonstrate mutual respect and provide feedback regarding the supervision process

### *ii. Supervisor Expectations*

- Establish parameters of supervision
- Monitor all aspects of supervisee's cases
- Provide intervention and directives for patients and high-risk situations
- Provide the supervisee with a minimum of one-hour, face-to-face supervision (or 10% of the hours worked, whichever is greater)
- Be prepared for supervision by reviewing sessions, providing feedback, monitoring clinical work, etc.
- Maintain current knowledge of laws and ethical standards



- Model use of personal factors (e.g., beliefs, worldviews, values, culture, transference, countertransference) in supervision
- Distinguish and maintain the line between supervision and psychotherapy
- Facilitate the supervisee's ability to conceptualize cases, develop treatment plans, conduct psychological assessments, interpret psychological assessment data, and report writing
- Serve as a consultant in crisis/emergency situations
- Facilitate the development of the supervisee's multicultural awareness and sensitivity
- Enhance the supervisee's self-awareness
- Provide ongoing verbal and written feedback on supervisees clinical skills, style, and interpersonal dynamics in a manner that is facilitative and constructive
- Serve as a professional role model
- Assist the supervisee in balancing demands
- Facilitate the supervisor professional growth

### *iii. Supervisee Expectations*

- Be prepared for supervision (i.e., discussion of patient care, prepared questions, recordings of sessions, readings completed, clinical supervision log)
- Keep a written record of all supervision (i.e., individual and group) which should be signed by the supervisor first week of every month in individual supervision
- Maintain current knowledge of laws and ethical standards
- Read and be knowledgeable of all Sentiero documentation and consent forms
- Document all postdoctoral hours via Time2Track and obtain supervisor signature the first week of every month in individual supervision
- Be actively engaged in the process
- Keep supervisor informed of all cases
- Continuously develop culturally responsive case conceptualizations
- Bring personal factors to supervision such as transference, countertransference, and parallel processes
- Identify goals and tasks to achieve in supervision
- Identify professional strengths and areas for future development
- Inform all patients of licensure status and clinical supervisor
- Disclose errors, concerns, clinical issues



- Respond to, and incorporate, supervisor feedback
- Obtain and maintain professional liability insurance
- Membership in a professional organizations, completion of continuing education, and in-person attendance at one conference

**1. Development of Professional Identity.** In order to foster professional identity and gain exposure to the field of psychology, the supervisee must become a student member of at least one local, state, or national professional organization, attend at least one in-person conference during the training year, and complete a minimum of 18 APA-approved continuing education credits.

**2. Professional Liability Insurance.** All clinicians at Sentiero must maintain professional liability insurance with a minimum of \$1,000,000 per incident and \$3,000,000 aggregate coverage. A current copy of insurance coverage must be maintained on file with the corporation.

**3. Continuity of Care.** It is understood that the supervisee enters into an implied long-term therapeutic commitment with any and all patients treated. In the event of resignation or termination of the supervisee, the needs of the patient dictate the disposition of clinical care. Under most circumstances, the patient will follow the supervisee to another clinical setting or role. It also implies that the supervisee does not begin treatment with a patient without the intention of providing ongoing/necessary care, as well as considering the financial resources and clinical presentation of the patient and/or reasonably planned personal circumstances.

**4. Informed Consent.** For each new patient the supervisee will need to provide informed consent at the outset of assessment and/or treatment to explain verbally the limits of confidentiality. The supervisee's discussion with the patient should include training status, information about being supervised, and that therapy and assessments may be videotaped and examined in supervision with consent (written consent for videotaping must be obtained). The supervisee's patient must be provided the name of telephone number of the supervisor. Additionally,



clinical documentation must include that the patient has been (1) informed and consented to treatment; (2) made aware of limits to confidentiality; and (3) communicated understanding of the consent. Examples of clinical documentation will be reviewed and discussed in supervision.

### VIII. Emergent Situations

As alluded to earlier, the supervisor and supervisee both have 100% responsibility for the welfare of any and all patients treated under supervision. Therefore, the supervisee must inform the supervisor immediately of any high-risk patient situations or emergencies encountered. If the supervisor is not immediately available during an emergency, please contact:

**Psychologist**  
(619) 999 - 9999

### IX. Revision and Signatures

This contract may be revised at the request of the supervisor or supervisee. This contract will be formally reviewed at quarterly intervals and more frequently as needed. Revisions will be made with consent of both supervisee and supervisor.

Subsequent signatures indicate agreement to follow the directives outlined in the supervision contract, as well as to adhere to professional conduct as outlined by respective ethical principles and codes of conduct, law, and regulations.

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Trainee

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Date

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Emily N. Kierce, Psy.D.  
Supervisor of Professional Experience  
Licensed Psychologist  
PSY31489

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Date