

# Clinical Supervision Agreement Schedule

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## Part A — Parties to this Agreement

**Supervisor****Qualification**

Accredited Mental Health Social Worker (AMHSW)

**AASW Membership No.**

468971

**Practice name**

Snowdrop Therapy and Counselling Services

**Email**

admin@snowdroptherapy.com.au

**Phone**

0466822551

**Supervisee name****Qualification /  
registration****Employer / organisation****Email****Phone**

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## Part B — Purpose & Framework

This agreement sets out the terms, expectations, and responsibilities governing the clinical supervision relationship between the supervisor and supervisee named above. It is entered into in good faith and in accordance with the AASW Code of Ethics (2020) and the AASW Supervision Standards.

Clinical supervision is a formal, professional arrangement that supports reflective practice, ethical decision-making, and the ongoing professional development of the supervisee. It is distinct from line management, mentoring, or personal therapy.

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## Part C — Supervision Arrangements

<b>Commencement date</b>	
<b>Session frequency</b>	
<b>Session duration</b>	
<b>Session format</b>	Telehealth
<b>Location / platform</b>	Halaxy Telehealth
<b>Review date</b>	

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## Part D — Fees & Payment

<b>Supervision fee per session</b>	\$180, unless agreed otherwise
<b>Fee review</b>	Annually, with 30 days written notice of any change
<b>Payment method</b>	
<b>Invoice / receipt</b>	Provided upon request

### Automatic payment on the day of appointment

Fees will be automatically deducted on the scheduled date of each supervision session. By signing this agreement, the supervisee authorises this automatic payment arrangement. The supervisee is responsible for ensuring sufficient funds are available prior to each session date.

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## Part E — Cancellation & Rescheduling Policy

The supervisee understands and agrees to the following cancellation policy:

<b>48 hours or more notice</b>	No charge. Session may be rescheduled at mutual convenience.
<b>Less than 48 hours notice and Non-attendance</b>	50% of the full session fee will be charged.
<b>Supervisor cancellation</b>	No fee charged. Session will be rescheduled at no cost to supervisee.

### **Important — cancellation fee deduction**

Where a cancellation fee applies (less than 48 hours notice), 50% of the session fee will be automatically deducted on the originally scheduled date of the appointment. The supervisee agrees to this deduction by signing this agreement.

Notice of cancellation must be provided by email or phone. Session time and date cancellations via SMS may be accepted at the supervisor's discretion. The supervisee is encouraged to reschedule cancelled sessions promptly to maintain supervision continuity in line with AASW Supervision Standards.

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## **Part F — Roles & Responsibilities**

### **Supervisor agrees to:**

- Provide a safe, confidential, and uphold professional boundaries in the supervision space
- Prepare for and be fully present during each supervision session
- Offer guidance, challenge, and support to facilitate reflective practice
- Maintain accurate records of supervision sessions
- Adhere to the AASW Code of Ethics (2020) and AASW Supervision Standards
- Notify the supervisee of any planned leave with as much notice as possible
- Raise concerns about the supervisee's practice directly and in a timely manner

### **Supervisee agrees to:**

- Attend scheduled sessions punctually and prepared to engage
- Bring relevant case material, ethical dilemmas, or practice questions to sessions
- Complete agreed tasks or reflections between sessions
- Maintain honesty and openness about their practice and professional challenges
- Notify the supervisor of any planned leave or need to reschedule in advance

- Adhere to the AASW Code of Ethics (2020) and relevant professional standards
  - Honour the payment and cancellation terms outlined in this agreement
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## **Part G Confidentiality & Limits**

All information shared within the supervision relationship is treated as confidential. The supervisor will not disclose information shared by the supervisee to third parties without consent, except in the following circumstances:

- There is a risk of serious harm to the supervisee, a client, or another person
- There is a mandatory reporting obligation under child protection legislation
- Disclosure is required by a court order or other legal obligation
- The supervisor has a professional obligation to consult with their own supervisor or an AASW ethics advisor

Where possible, the supervisor will discuss any proposed disclosure with the supervisee prior to it occurring. Client information discussed in supervision should be de-identified wherever clinically possible.

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## **Part H Record Keeping**

The supervisor will maintain brief records of each supervision session, including the date, duration, topics discussed, and any agreed actions. These records are stored securely in accordance with the Privacy Act 1988 (Cth) and the Australian Privacy Principles (APPs).

The supervisee is encouraged to maintain their own reflective supervision journal or notes. Supervision records may be used to verify supervision hours for AASW membership, accreditation, or registration purposes upon request.

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## **Part I — Professional Boundaries & Conflict of Interest**

Both parties agree to maintain appropriate professional boundaries throughout the supervision relationship. The supervisory relationship is professional in nature and must not extend to personal, therapeutic, or dual relationships that could compromise objectivity or create a conflict of interest.

If a conflict of interest arises (for example, a change in the working relationship, shared clients, or personal circumstances), both parties agree to raise this promptly and, if necessary, to seek

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an alternative supervision arrangement. Either party may end this agreement with four (4) weeks written notice, or immediately in the case of a serious breach of ethics or professional conduct.

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### **Part J — Concerns & Dispute Resolution**

Both parties agree to raise any concerns about the supervision relationship directly with each other in the first instance. If concerns cannot be resolved, either party may seek guidance from the AASW or another appropriate professional body. Complaints regarding the conduct of an AASW member may be directed to the AASW Ethics and Complaints process.

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### **Part K — Review of this Agreement**

This agreement will be reviewed at least annually, or earlier if there is a significant change in circumstances (such as a change in role, employer, practice setting, or supervision needs). Both parties may request a review at any time by written notice.

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### **Part L — Signatures**

By signing below, both parties confirm they have read, understood, and agreed to the terms of this Clinical Supervision Agreement.

#### **Supervisor**

Signature

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**Full name:**

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**Date:**

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#### **Supervisee**

Signature

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**Full name:**

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**Date:**

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*This document should be signed in duplicate. Each party retains one original copy for their records.*

*For queries regarding AASW supervision standards, visit [www.aasw.asn.au](http://www.aasw.asn.au)*