

Giselle Macfarlane Psychotherapy PLLC
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Supervision Contract

The purpose of the contract. This agreement has been created to address the legal, ethical, practical, and clinical issues of the supervisory relationship. This agreement is intended to articulate and clarify the mutual responsibilities of the parties involved and the procedures and standards for effective supervision.

Licensure

I am a licensed Marriage and Family Therapist in the state of Washington. My credential number is LF60700027. Licensure indicates that a practitioner has met basic education, competency, and supervision standards. If more information is needed, contact the Department of Health, PO Box 47890, Olympia, Washington 98504-7890, 360 236 4030.

Qualifications

I obtained a Master's in Psychology with a concentration in Couple and Family Therapy from Antioch University Seattle in 2014. I also received a Bachelor of Arts degree in Liberal Studies with a concentration in Psychology from Antioch University Los Angeles in 2011. My therapeutic work is informed by my 25 plus years as a documentary photographer working on social justice issues that many marginalized and disenfranchised groups face.

My clinical experience began in 2013, working in community mental health. I currently work with children, youth, and families in private practice. I am an Emotionally Focused Couples Therapist. In working with trauma, I am trained in Lifespan Integration and Somatic Transformation. I am also a clinical fellow of the American Association for Marriage and Family Therapy. I am an AAMFT Approved Supervisor and a Washington State Approved Supervisor.

I have experience providing therapy to individuals, couples, and families. I treat people with concerns including anxiety, depression, attachment issues, anger management, trauma, self-harm, identity issues, and questioning. I utilize a systemic, humanistic, emotionally-focused perspective with individuals, couples, and families working through conflict, life transitions, blended families, grief, and loss. Additionally, I use evidenced based approaches in helping parents struggling with their child's behavioral difficulties, academic underachievement, and peer relationship problems. I am religion friendly, an LGBTQ ally, and poly-friendly.

Social Justice

As a woman and an advocate of social justice, I understand the importance of culture, privilege, racism, heterosexism, oppression, classism, ageism, etc. These contextual elements play an important role in our lives and are considered when determining goals and strengths.

Philosophy of Supervision

My preferred approach to both therapy and supervision is an integrative one that carefully and thoughtfully selects from several useful models rather than adhering to one specific school of thought. The overarching approach that informs my case conceptualizations is a systemic, humanistic, attachment, emotionally-focused perspective. I conceptualize clients based on the systems concept of wholeness that states that individuals are a part of an interconnected whole. My overriding humanistic stance is to treat all members of the system with unconditional positive regard. In addition, I focus on the emotional attachment of the client as emotional attachments are connected to our most basic needs to survive and thrive. I also utilize interventions from attachment theory which states that people are affected by their early attachment figures. Moreover, I employ evidence-based practices such as cognitive-behavioral therapy and emotionally-focused therapy as practical approaches to help supervisees find solutions for their clients. As a woman, my work is also informed by feminist theory that questions our cultural understandings and advocates for fairness. In the practical application of my work with clients, I assume a collaborative egalitarian feminist stance.

In working with supervisees, I ensure client welfare by engaging in a variety of roles: coach, teacher, mentor, administrator, advocate, role model, container, and gatekeeper. While I encourage supervisees to consider the

theoretical perspectives that inform my work with clients, I am committed to supporting supervisees using the theory of change that most resonates with them. I believe coaching and teaching systems theory will ensure that supervisees develop a systemic understanding in their clinical work. In supervising from a developmental standpoint, I am able to meet supervisees where they are. In collaboration with supervisees, goals are set around these domains: clinical and professional development, self-awareness, and cultural competence. In addition to increasing and strengthening the acquisition of knowledge and skills. Goals will be reviewed and revised as needed.

Typical Supervision Meeting

Supervision can involve several distinct activities. However, supervision meetings often involve a quick check-in regarding the supervisee's current caseload and any possible legal or ethical issues. I work collaboratively asking the supervisee what they need help with and what they would like to get out of the meeting. They typically have questions about a particular case. Then we might talk about what the supervisee has already tried, their countertransference, and possible approaches to try in future sessions. If necessary, I might provide some didactic information about the research. At the end of the discussion, I often ask what the supervisee got out of the conversation and was it helpful. Other areas of discussion might include professional development, ethics, administrative issues, documentation, licensure, how to get more clients in private practice, office logistics, trainings, how to advertise, how to build a website, etc.

Confidentiality

Information about clients and supervisees will be kept in strict confidence unless there is a legal or professional obligation to do otherwise. For example: 1) in the instance when you or someone else is in imminent danger of harm I may disclose your information or your clients' information for the purpose of safety; 2) I am a mandated reporter and therefore have a legal and ethical responsibility to inform the relevant authorities of any child or vulnerable adult abuse; and 3) I have an ethical responsibility to inform your professional organization of any unethical behavior.

If I am supervising your clients at an agency or some other outside organization, by signing this document, you are waiving your confidentiality between me and those organizations. Sufficient supervision requires me to communicate freely with staff at these organizations for the purpose of reviewing files and other important supervision tasks.

Financial Responsibilities

The fee for supervision is \$200 for a 55-minute session. If I spend more than 10 minutes on the phone or reading and responding to emails from you during a given week I will bill you on a prorated basis for that time. I may end the supervisory relationship if you have a significantly overdue balance, you are non-compliant with supervision recommendations, or you are not consistently showing up for appointments. A minimum of a 48-hour notice is required for rescheduling or canceling an appointment or you may be charged the full fee. If you fail to make or arrange for payment of the outstanding balance, you agree to pay the legal costs incurred in the collection of said debt.

Termination of Service

I may terminate supervision with you in the following situations: 1) you fail to pay the fee; 2) you are not cooperating with my clinical recommendations; 3) you are not consistently showing for appointments; 4) you do not meet with me at least once per month; 5) there is a discovered conflict of interest (for example, I later learn that you are close friends with one of my relatives); or 6) I am moving or closing my practice.

Vacations

If I am on vacation or otherwise unavailable, we will plan accordingly. If we elect to have a covering supervisor, you will be provided with their name and phone number. This covering supervisor will have access as needed to your client information and is bound by the same laws and rules as I am to protect your confidentiality.

Supervisee Responsibilities

- To obtain client signed informed disclosure and consent of the following:
 - Inform your client's that you are under supervision.
 - My contact information: Giselle Macfarlane, 206 947 6087, giselle@gmtherapy.com

- That I am bound by the same confidentiality laws and ethics
- The supervisee is in supervision and will be discussing clinical information with me
- To abide by the current rules and regulations of the Washington Department of Health and other relevant professional licensing entities
- To abide by the national code of ethics for your profession (e.g., AAMFT)
- To not practice outside your competence
- To abide by the relevant professional standards of care
- To adhere to the policies of the employers of the supervisor and supervisee
- To immediately inform me of any legal or ethical problems e.g. but not limited to:
 - All client emergencies, ethical dilemmas, or any best-practices issues or concerns.
 - Disputes with clients or impasses in therapy.
 - Allegations of unethical behavior by clients, colleagues, or others (e.g., family members)
 - Threats of a complaint or lawsuit.
 - Mental health emergencies requiring immediate action.
 - High-risk situations and cases in which client's evidence suicidal thoughts, gestures, attempts, or a significant history of attempts, or those presenting with a history of, propensity for, or threats of violence.
 - Contemplated departures from standards of practice or exceptions to general rules, standards, policies, or practices.
 - Suspected or known clinical or ethical errors.
 - Contact with clients outside the context of treatment, incidental or otherwise.

Legal issues such as possible reporting obligations related to suspected abuse or neglect, or ethical violations by other professionals.

- To take reasonable means to protect client confidentiality when using means of communication
- To obtain and maintain professional liability insurance coverage
- To prepare appropriately for supervision sessions
- To submit clinical documentation for review by the supervisor when requested
- To be open to feedback in a non-defensive manner
- To implement the recommendations made by the supervisor
- To complete readings and other educational assignments made by the supervisor
- To participate in personal counseling outside of the supervisory process when it appears that personal issues may be undermining the supervisee's clinical effectiveness and professional growth
- To be on time to supervision meetings
- To provide a minimum of 48-hours-notice when rescheduling or canceling an appointment or you will be charged the full fee
- To talk with me about any complaints you have about my supervision
 - If you believe that I have been unwilling to listen and respond, or that I have behaved unethically, you can complain about my behavior to the Department of Health, PO Box 47890, Olympia, Washington 98504-7890, (360) 236-4030.
- To initiate meetings as often as necessary to provide competent care for your clients. It is your responsibility to schedule with me. I will not track you down if you fail to schedule with me. If more than a month passes without you initiating a meeting, I may terminate our supervisory relationship since you are not compliant with this contract.
- In a crisis or emergency, please do not call me since I am often not immediately available by phone. If you would like to speak with someone immediately, here are some numbers that are staffed 24/7: Call 988 and start a chat at <https://chat.988lifeline.org/>

Supervisor Responsibilities

- To foster an atmosphere of trust, support, encouragement, and mutual respect that is conducive to the professional growth of all participants in the supervision experience
- To abide by the American Association for Marriage & Family Therapy Code of Ethics
- To abide by the current licensing rules and regulations of the Washington Department of Health
- To adhere to the policies of employers of the supervisor and supervisee

- To consider the client's best interests
- To review case material via case presentation, direct observation, co-therapy, video or audio recording
- To provide feedback regarding the supervisee's work with clients
- To provide readings and other educational assignments as needed
- To collaborate with the supervisee in evaluating the supervisory process on an ongoing, informal basis
- To be available to the supervisee between supervision sessions for brief clarifications as needed
- To assist the supervisee in exploring interpersonal and intrapsychic issues which appear to impact on the supervisee's clinical work
- To recommend personal counseling for the supervisee should the supervisee be unable to resolve personal issues which are affecting her/his therapeutic effectiveness and professional development
- To have someone cover my supervision if I am on vacation or otherwise unavailable
- To end the supervisory relationship if the supervisee has a significantly overdue balance, the supervisee is non-compliant with recommendations, or the supervisee is not consistently showing up for appointments
- To keep confidential records of the dates and times of supervision meetings, the cases involved, and the supervision content

Goals for Supervision:

1. _____
2. _____
3. _____
4. _____

Supervision Agreement

I, the supervisee, have read the supervision contract as well as the responsibilities of the supervisee. I agree to act accordingly to everything stated there as shown by my signature below. I understand that this agreement can be terminated if either party does not live up to his or her responsibilities as outlined above. I agree to adhere to the contents of this agreement, until otherwise negotiated and formalized as addenda to this agreement.

Print Supervisee Name

Supervisee Signature

Date

Giselle Macfarlane, MA, LMFT
Supervisor

Supervisor Signature

Date