

**Minnesota Board of Behavioral Health and Therapy
LPCC Supervision Contract**

Instructions:

1. **Do not submit this form to the Board.** Both the supervisor and supervisee should maintain this form in their files in the event that it is requested by the Board.
2. Supervision must be clinical in nature and not employment related supervision. Supervision must meet the requirements of Minn. Stat. sec. 148B.5301, subd. 2 and Minn. Rules part 2150.5010.
3. If the supervisee receives supervised experience at more than one setting or with more than one supervisor, a separate contact form must be completed for each supervisor and/or setting. If the supervisor and/or setting changes, a new contract should be completed and maintained in your records.
4. The supervisee may be licensed after completing a total of 4,000 hours of supervised professional practice, applying for LPCC licensure, and meeting all other requirements for licensure application.
5. In order to provide supervision to an individual for purposes of their LPCC licensure, the supervisor's qualifications as a supervisor must be approved by the Board. If the Supervisor has not submitted the Supervisor Application form and been approved as a Supervisor, they should visit the Board's website page to download the Supervisor Application form and submit it to the Board with the required documentation. The Board's web address is: <https://mn.gov/boards/behavioral-health/lpc-and-lpcc/supervisors.jsp>

Part I. General Information

1. Name of Supervisee: _____
2. Name of Supervisee's place of employment during supervision: _____
3. Name of Supervisor: _____
4. Name of supervision location (Business): _____
5. Address of supervision location: _____
6. **Date supervision beginning (M/D/Y):** _____ **Anticipated end date (M/D/Y):** _____

7. Supervisor (check one):	
<input type="checkbox"/> <input type="checkbox"/>	is already an approved supervisor with BBHT is submitting the Supervisor Application form to the Board office. <i>Please note: Supervision conducted prior to the date the supervisor is notified that he/she has achieved the "Approved Supervisor" designation of the board may not be approved.</i>

	List Hours:
8. Total hours supervisee is scheduled to work per week (professional practice)	
9. Total hours of supervision supervisee will receive with this supervisor per week:	
10. Supervision will be conducted in the following setting (circle one): Individual (1 to 1) / Group / Both	

Part II. Conduct of Supervision

<i>Supervisee Initial:</i>	<i>Supervisor Initial:</i>	
		11. Supervision will be conducted under the terms of this contract
		12. The supervisee must complete 4,000 hours of supervised, professional practice, including 200 hours of supervision. This may be distributed between multiple supervisors.

<i>Supervisee Initial:</i>	<i>Supervisor Initial:</i>	
		13. The content of supervision will include professional counseling knowledge, skills, values, and ethics with specific application to the practice issues faced by the supervisee.
		14. The content of supervision will include the standards of practice and ethical conduct, with particular emphasis given to the professional counselor’s role and appropriate responsibilities, professional boundaries, and power dynamics .
		15. The content of supervision will include the supervisee’s permissible scope of practice, as defined by Minnesota Statutes, sections 148B.50, subd. 5 and 148B.5301, subd. 5.
		16. Supervision must be obtained at the rate of 2 hours of supervision per 40 hours of professional practice.
		17. Supervision will be evenly distributed over the course of the supervised professional practice
		18a. 75% to 100% of required supervision must be received in person (150 hours or more).
		18b. 0% to 25% of required supervision may be received via telephone or audio or audiovisual electronic device (50 hours or less)
		19a. At least 50 percent of supervision must be done on an individual basis (one-to-one) (100 hours or more).
		19b. Up to 50 percent may be done in a group setting (100 hours or less).
		20. Supervision (200 hours – 100 hours of which must be individual) will be completed in no fewer than 24 consecutive months and no more than 72 consecutive months.
		21. The supervised practice will be clinical practice. It will include the supervisor’s observation of the supervisee’s successful application of professional counseling knowledge, skills, and values in the differential diagnosis and treatment of psychosocial function, disability, or impairment, including addictions and emotional, mental, and behavioral disorders.
		22. The supervised professional practice will include delivery of clinical services in the diagnosis and treatment of mental illnesses and disorders in both children and adults .
		23. Total supervised professional practice hours required is 4,000 hours. Supervision not received/provided under this contract will be received/provided under a different contract due to a different supervision setting or supervisor.
		24. 1,800 client contact hours are required. Anticipated client contact hours under this contract are (list total):

25. Part III. Signature and Certification
<p>We, the undersigned, have read and agree that the supervision will be conducted as described in this Supervision Contract, and that the information contained herein is true and correct to the best of our knowledge.</p> <p>Supervisor signature: _____ Date: _____</p> <p>Supervisee signature: _____ Date: _____</p>