

## Placement Supervision Form

Complete this form and provide a copy to the Placement Coordinator for approval. A copy should be retained by the student and another by the Field Supervisor.

STUDENT	
Student name	
Student number	
Student phone number	
Student email address	
Placement number	Second <input type="checkbox"/> Final <input type="checkbox"/> Course Unit: MPSYC _____

PLACEMENT AGENCY	
Name of Placement Agency	
Address	
Phone number	
Email address	
Sector	<input type="checkbox"/> Government <input type="checkbox"/> Non-government <input type="checkbox"/> Community Health <input type="checkbox"/> FACS <input type="checkbox"/> Corrective Services <input type="checkbox"/> Private Practice <input type="checkbox"/> Other _____

SUPERVISORS	
<b>Field Supervisor (Primary)</b>	
Phone number	
Email address	
Supervisor's position in Agency	
<b>Additional supervisor(s)</b>	
Phone number(s)	
Email address(es)	

Before committing to offering a student supervision please consider whether you may have leave planned, or are considering leaving your position during the period of placement. Has a back-up plan been considered, i.e. who will supervise the student during this period?

Type of Placement (tick all that apply)			
<b>a) Population</b>	<input type="checkbox"/> Elderly	<input type="checkbox"/> Adult	<input type="checkbox"/> Adolescent <input type="checkbox"/> Child
<b>b) Location</b>	<input type="checkbox"/> Urban	<input type="checkbox"/> Rural	
<b>Planned Placement Period:</b>	From: _____ to: _____ all clinical competencies and hourly requirements are met		
<b>Paid or Unpaid Placement</b>	<input type="checkbox"/> Unpaid <input type="checkbox"/> Paid (Note: If this is a Paid Placement- student will need to provide evidence of own or that they are covered by agency/organisation insurance)		
Number of days per week			
Approximate number of days in total			
Hours/week of scheduled supervision			
Minimum target hours for this placement (see page 5)	Client Contact: _____	Supervision: _____	Total: _____

### Training Goals and Objectives: Text

In collaboration between student and supervisor, specify a range of activities to be covered and skill base to be developed on this placement. Outline goals and objective in the following areas:

Clinical Competencies	Goal
Scientific knowledge of psychology	
Ethical, legal and professional matters	
Professional Reflexivity, Deliberate Practice & Self Care	
Psychological assessment and measurement	

Clinical Competencies	Goal
Psychological Intervention Strategies	
Communication and Interpersonal Relationships	
Health equity, cultural responsiveness and working with diversity	
Health equity and culturally safe practice with Aboriginal and Torres Strait Islander Peoples	

Supervision Arrangements	
Location of supervisor	<input type="checkbox"/> On-site <input type="checkbox"/> Off-site If off-site, student to liaise with placement organisation to nominate an on-site AHPRA-registered clinician to provide on-site support and complete the "Consent to Provide Oversight" form.
Style of supervision:	<input type="checkbox"/> Discussion <input type="checkbox"/> Observation of supervisor <input type="checkbox"/> Observation of student <input type="checkbox"/> Other _____
Method(s) of observing student performance:	<input type="checkbox"/> Direct (mandatory requirement) <input type="checkbox"/> audio <input type="checkbox"/> video <input type="checkbox"/> other _____
<b>Direct observation:</b> Please advise how you plan to directly observe the student's practice?	
<b>Support:</b> Please advise how support will be offered to the student if immediate supervision is required (e.g., client crisis)?	

### Supervision Arrangements

Supervisor's requirements of student (e.g. pre- placement preparation, caseload, agency requirements, willingness regarding particular goals etc.):

### Approved by:

<b>Placement site management (if applicable):</b>			
Name			
Date		Signature:	
<b>Field/Primary Supervisor:</b>			
Name			
Date		Signature:	
<b>Additional Supervisor(s):</b>			
Name			
Date		Signature:	
<b>Student:</b>			
Name			
Date		Signature:	
<b>UNE Placement Coordinator:</b>			
Name			
Date		Signature:	

*Please see student clinical psychology manual for further detailed information*

## Outline of Placement Requirements

### Rule A

Placement unit	Client contact hours	Supervision hours	Total hours
PSYC513*	100	60 (1hr per placement day)	300
PSYC523/534	150	25 (1hr every 2 days)	350
PSYC524/535	150	25 (1hr every 2 days)	350
<b>Total</b>	<b>400</b>	<b>110</b>	<b>1000</b>

\*supervision is to be provided at a ratio of 1 hours per 7.5 placement hours for the first 180 hours, and 1 hour per 15 placement hours for the remaining 120 hours

### Rule C – Psychologists with General Registration

Placement unit	Client contact hours	Supervision hours	Total hours
PSYC523/534	Students receive advanced standing (AS) for this unit		
PSYC514	150	36*	350
PSYC524/535	150	25 (1hr per 15 placement hours)	350
<b>Total</b>	<b>350</b>	<b>50</b>	<b>700</b>

\*supervision is to be provided at a ratio of 1 hours per 7.5 placement hours for the first 180 hours, and 1 hour per 15 placement hours for the remaining 170 hours

### MPSYAE

Placement unit	Client contact hours	Supervision hours	Total hours
PSYC534	150	23 (1hr per 15 placement hours)	350
PSYC535	150	27 (1hr per 15 placement hours)	400
<b>Total</b>	<b>300</b>	<b>50</b>	<b>750</b>

Placements are to be completed at a rate of 2, 3 or 4 days/week, to be negotiated between the student and the field supervisor, and approved by Placement Coordination Team. At a rate of 7.5 hours/day, the above hours equate approximately to 47 days in the 350 hour placement & 53 days in the 400 hour placement.

### Supervision

Supervision of PSYC534/535 is to involve at least one hour of direct contact between the supervisor and student for every 2 days (i.e., 15hours) of placement (not just client contact).

Supervision can occur in both individual (one-on-one) format and also group format. However, at least 50% of supervision is to occur in individual format. Supervision with the Primary Supervisor must be more than with a Secondary Supervisor.

**\*Activities that constitute supervision:**

**Direct Individual Supervision:**

- Any time students are communicating 1:1 with their primary or secondary supervisor and discussing client-related matters. This can include communication occurring face to face, Skype, telephone, or videoconferencing
- Students shadowing/observing their supervisor running a session/conducting an assessment (this can count as both client contact and supervision)
- When the student's supervisor observes the student in a session

**Indirect Individual Supervision:**

- Supervisor reviews any client-related work (e.g., reviewing of student notes, emails to clients, reports, scoring of psychometric assessments)

**Group Supervision:**

- Group Supervision is anytime you, one of the listed supervisors or an endorsed clinical psychologist and board-approved supervisor, and 1 other colleague engage in the following:
- Team meetings that focus on service provision to client/s
- Discussing clinical topics (e.g., evidence-based treatments, advancement in assessments)
- Discussion of cases

**Client Contact Hours**

Direct contact involves assessment, therapy, and contacts with other relevant informants (e.g. teachers, support workers, allied health professionals). Direct client contact can occur in individual or group contexts. Time spent in supervision and case conferences or presentations is not to be considered direct client contact.

**Other Placement Hours**

Other placement activities may include record-keeping, attendance at meetings, case presentations, research on client problems, and familiarisation with relevant aspects of the placement organisation/site.

**Other Issues regarding Placement Hours**

Naturally, some variation in hours achieved at each of the three placements may occur. It should be noted, however, that there is no provision for purposely undertaking extra hours at any one placement with the express purpose of reducing necessary hours at subsequent placements. Each placement has its own target hours irrespective of whether greater hours might have been achieved on previous placements.

It needs to be borne in mind that these are *minimum* requirements. Furthermore, achievement of target goals regarding hours in any one placement would not necessarily take precedence over other concerns, such as appropriate finalisation of assessment/treatment for an individual client or outstanding supervision matters, as being the criterion upon which the decision to finalise a placement is made.

**Supervisor Obligations on Placement**

Field Supervisors are required to oversee all activities of students on placement. This includes close monitoring and countersigning of all written material. Note that APAC General Accreditation Standard 1.10 states that "the supervisor has sufficient oversight of the student's practice." We recommend that this include supervisors countersigning all reports and case notes written by the student arising from training undertaken as part of placement.

Field Supervisors are also requested to utilise the "Supervisor Comments" section of the log book. While obviously every activity will not require comment, the supervisor comments column can provide a valuable record of student progress. Consistent documentation in this area is also likely to enable timely recognition and rectification of any problems that might arise during the placement. Regular Field Supervisor comments made in relation to areas covered by the initial contract, mid-placement review and final placement review can provide continuous monitoring of these key areas.

Please return this form to the Placement Coordination Team:

[AskUNE@une.edu.au](mailto:AskUNE@une.edu.au)

Title your email: "Psychology Placements: Pre-Placement Documents"

***Thank you to all Field Supervisors for your support of the UNE Master of Psychology (Clinical) program***

## PsyBA/AHPRA Professional Competencies – Clinical Psychology Placement (Student Guide)

The UNE Placement Team have developed a brief guide for students and supervisors alike on the new AHPRA/PSYBA Clinical Competencies to support the development of goals. *These are only some examples* of goals and we would expect that you would give some considered thought to your goals and how these might be Actioned and/or Observed by your supervisor.

*Students are not expected to demonstrate full competence across all domains during a single placement. Competencies may be developed through observation, participation, reflection, supervision, and skill development appropriate to postgraduate training level.*

Competency	What this covers (at student level)	Examples of student learning goals	How supervisors may observe this
<b>1. Scientific knowledge of psychology</b>	Applying psychological theory, models, and research evidence to understanding client presentations and guiding practice.	<ul style="list-style-type: none"> <li>Link client presentations to relevant psychological models</li> <li>Case discussions demonstrate theory–practice links</li> </ul>	<ul style="list-style-type: none"> <li>Student can explain clinical reasoning in supervision</li> <li>Justify assessment or intervention choices using evidence</li> </ul>
<b>2. Ethical, legal and professional practice</b>	Practising within ethical guidelines, legislation, professional boundaries, and placement policies; recognising limits of competence.	<ul style="list-style-type: none"> <li>Identify ethical issues and discuss them proactively</li> <li>Demonstrate appropriate consent, confidentiality, and documentation</li> </ul>	<ul style="list-style-type: none"> <li>Ethical reasoning discussed in supervision</li> <li>Professional behaviour and boundaries observed</li> </ul>
<b>3. Professional reflexivity, deliberate practice and self-care</b>	Reflecting on personal responses, biases, strengths, and limits; using feedback intentionally; attending to wellbeing.	<ul style="list-style-type: none"> <li>Engage in reflective practice</li> <li>Actively integrate supervisor feedback</li> <li>Identify strategies to manage emotional load</li> </ul>	<ul style="list-style-type: none"> <li>Reflective capacity evident in supervision</li> <li>Openness to feedback and growth mindset observed</li> </ul>
<b>4. Psychological assessment and measurement</b>	Developing skills in assessment selection, administration, interpretation, and integration appropriate to training level.	<ul style="list-style-type: none"> <li>Observe/assist/complete assessments</li> <li>Contribute to formulations informed by assessment data</li> </ul>	<ul style="list-style-type: none"> <li>Assessment reasoning discussed accurately</li> <li>Appropriate attention to strengths and limitations of tools</li> </ul>
<b>5. Psychological intervention strategies</b>	Developing and applying evidence-informed intervention skills under supervision, tailored to client needs.	<ul style="list-style-type: none"> <li>Practise core therapeutic skills</li> <li>Reflect on intervention fit and effectiveness</li> </ul>	<ul style="list-style-type: none"> <li>Skill development observed in sessions</li> <li>Thoughtful reflection in intervention choices</li> </ul>
<b>6. Communication and interpersonal relationships</b>	Building effective therapeutic relationships and communicating clearly with clients, supervisors, and teams.	<ul style="list-style-type: none"> <li>Demonstrate rapport and attunement</li> <li>Communicate clearly in notes and reports</li> </ul>	<ul style="list-style-type: none"> <li>Therapeutic engagement observed</li> <li>Written and verbal communication is clear and professional</li> </ul>
<b>7. Health equity, cultural responsiveness and diversity</b>	Understanding how culture, identity, disability, neurodiversity, and systemic factors shape client experience and access to care.	<ul style="list-style-type: none"> <li>Reflect on power, privilege, and barriers to care</li> <li>Adapt communication or approach as needed</li> </ul>	<ul style="list-style-type: none"> <li>Cultural responsiveness evident in case discussions</li> <li>Willingness to reflect on assumptions and bias</li> </ul>
<b>8. Culturally safe practice with Aboriginal and Torres Strait Islander Peoples</b>	Practising in ways that promote cultural safety, respect self-determination, and acknowledge historical and ongoing impacts of colonisation.	<ul style="list-style-type: none"> <li>Reflect on own cultural positioning</li> <li>Seek guidance or cultural consultation appropriately</li> </ul>	<ul style="list-style-type: none"> <li>Respectful, culturally safe stance evident</li> <li>Appropriate use of supervision and consultation</li> </ul>

*(Developed with the support of AI).*