



CHURCHILL  
HYPNOTHERAPY

*Everyone deserves the chance to fly*



## Kim Dyke and Sandra Churchill Group Supervision Agreement

I ..... (Insert name) have been advised of the qualifications and background of the Supervisors, **Kim Dyke** and **Sandra Churchill**, and agree to Supervision, within the Code of Ethics and Practice for the Supervision of Hypnotherapists, as issued by the AfSFH/NCH/HS/Other. I agree to abide by the byelaws of either the AfSFH/NCH/HS or other identified therapy organisations/Governing Bodies.

It is acknowledged that the Supervisors are not accountable for the Supervisee's work with clients; the Supervisee retains accountability for their own work. The Supervisee is responsible for arranging their own Supervision and deciding what to bring along for discussion. The Supervisors will support the Supervisee's case for membership upgrade on the satisfactory progress of their professional development.

The Supervisee is requested to advise the Supervisors of their intention to **attend or not attend** Group Supervision by email to the following email address: **supervisors@mail.com** at least **one week before the session is scheduled to take place** so that notice can be given to the venue and the necessary arrangements can be made to accommodate those attending.

Group Supervision, which is recommended and encouraged for the benefit of all, will take place every month for 10 months of the year on a Friday promptly from 1pm to 4pm at Alzheimer's Support, Park House, 1 Park Road, Trowbridge, Wiltshire. BA14 8AQ. All of the Supervision dates can be found on the sheet accompanying this document in the Supervision Pack. Please note that Group Supervision is not offered in August and December. To avoid disruption the Supervisors and the Supervisee will endeavour to arrive on time. Refreshments will be provided.

Mobile: **Kim Dyke** - 07825 957013 **Sandra Churchill** – 07515 441825

Email: [supervisors@mail.com](mailto:supervisors@mail.com)

Web: [www.kimdykehypnotherapy.co.uk](http://www.kimdykehypnotherapy.co.uk) [www.churchillhypnotherapy.co.uk](http://www.churchillhypnotherapy.co.uk)

## **Supervision Options:**

### ***Option 1:***

#### **Group Supervision (Recommended):**

We offer 10 monthly Group Supervision sessions (August and December excluded) lasting up to a maximum of 3 hours, depending on the numbers attending. All Supervisees will be required to make a monthly payment by bank transfer (for 10 months only) regardless of whether they attend or not. If no attendance, the fee will not be refunded. Due to the costs involved in running the Group Supervision session, this enables the group to run regardless of the numbers attending on the day. This will also entitle the Supervisee to a 1 x 20 minute telephone support session per week, with a minimum of 24 hours' notice.

Should the Supervisee require Supervision for August and December, they will need to book a One to One session either Face to Face (if an hour's session is requested) via Telephone or Skype (if an hour's session or ½ hour's session is requested), arranged by negotiation with the Supervisors using the following email address: **supervisors@mail.com**. This arrangement will not entitle Supervisees to the 20 minute supplementary telephone Supervision offered as part of the group commitment.

If the Supervisee has a quick query during August and December, they can email the Supervisors using the same email address detailed above and the Supervisors will arrange a date and time for a quick phone call with one of them. If the query is in depth, then the Supervisee will need to book either a ½ hour session or an hour session with the Supervisors. This arrangement will not entitle Supervisees to the 20 minute supplementary telephone Supervision offered as part of the group commitment.

### ***Option 2:***

#### **One to One Supervision**

We provide Supervision for a minimum of an hour Face to Face or ½ an hour via Telephone or through Skype (kimdykehypnotherapy@hotmail.co.uk and Sandraclare13) by prior arrangement with a minimum of 24 hours' notice. This can be arranged with the Supervisors using the following email address: **supervisors@mail.com**. This arrangement will not entitle the Supervisee to the weekly 20 minute supplementary telephone Supervision offered as part of the group commitment.

We also offer an additional minimum one hour Face to Face or ½ an hour Telephone or Skype Supervision session in between for those who require it, which can be arranged with the

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Email: supervisors@mail.com

Web: [www.kimdykehypnotherapy.co.uk](http://www.kimdykehypnotherapy.co.uk) [www.churchillhypnotherapy.co.uk](http://www.churchillhypnotherapy.co.uk)

Supervisors by prior arrangement, with a minimum of 24 hours' notice, using the following email address: [supervisors@mail.com](mailto:supervisors@mail.com). This arrangement will not entitle Supervisees to the 20 minute supplementary telephone Supervision offered as part of the group commitment.

If you have an **urgent** query please call either Supervisor at any time. Should you need to leave a message we will endeavour to return your call as soon as we are able. The Telephone number to call is either 01225 765411/07825 957013 for **Kim** or 07515 441825 for **Sandra**.

**Fees:**

<b>Group Supervision (up to 3 hours)</b>	£30.00
<b>One to One, Telephone, Skype Supervision (up to 1 hour)</b>	£50.00
<b>One to One, Telephone, Skype Supervision (up to ½ hour)</b>	£25.00

**Method of Payment:**

For Group Supervision, payment is to be made by Standing Order strictly on 1<sup>st</sup> of the month. For Telephone, One to One or Skype Supervision, payment is to be made by bank transfer prior to the session taking place.

**Payments can be made using the following details:**

Bank: Lloyd's  
Account Number: 50044260  
Sort Code: 30-98-75

**Code of Ethics and Confidentiality**

Ethical considerations with confidentiality are assured during Supervision from both the Supervisor and Supervisee, enabling the therapeutic relationship to build through trust, openness, learning and rapport. There may be circumstances where confidentiality may not be assured, requiring disclosure to other professionals, i.e. referring the client on where there is a limit in knowledge/experience, or where referral by a medical professional requires a report on progress. Legal requirements may require disclosure to Supervisors/Legal Professionals, e.g. where child abuse is revealed.

The Supervisors engage in regular Supervision of their own Supervision and Practice and may discuss issues with their own Peer Supervisor. The purpose of this is to help them work effectively and be more useful to Supervisees. This is a professional relationship governed by confidentiality and the Supervisee will not be named in these conversations; every effort will be made to maintain their confidentiality.

**Changes to Contract:**

The Supervisors reserve the right to review and change the Supervision Contract at any time without prior discussion with the Supervisee. Any changes to the Supervision Contract will be notified to the Supervisee, along with a copy of the updated Contract.

This Supervision Contract is not legally binding. It is for information purposes only that set out what is to be expected from both the Supervisors and the Supervisee. This Contract can be terminated at any time either by the Supervisee or the Supervisor.

Once the Supervisee is happy with this Supervision Contract, they should sign and date it below and return it to the Supervisors.

We look forward to welcoming you to our Supervision service.

Signed Supervisee: ..... Date: .....

Signed **Kim Dyke**: ..... Date: .....

Signed **Sandra Churchill**: ..... Date: .....