

JOHANNES KIEDING, L.L.C. LCSW

ASTANDFORHEALTH, ACCELERATED PSYCHOTHERAPY SERVICES /
GETTINGBETTERTHERAPY, ADVANCED PSYCHOTHERAPY TRAINING

Supervision Agreement

Thank you for your interest in working with me.

This agreement outlines the terms of our professional supervision and consultation relationship, designed to enhance your clinical skills and professional development.

Each supervision/consultation stands alone — as soon as either of us believe I am no longer useful to you, the supervision arrangement comes to an end.

The supervision you receive from me cannot be used towards obtaining licensure.

Supervision Activities: You are welcome to show me video recorded material of your work, or to simply describe your work to me. You are also welcome to role-play with me where you channel and act the part of your patients, and I the part of the therapist so that you can get an experiential sense for my clinical suggestions. You are welcome to use the time watching and discussing my work. If you choose to share video-recorded material, please ensure you have obtained appropriate consent from your clients, in line with ethical and legal standards.

Session Length and Cancellation Policy: The supervision sessions are 50-minutes in duration, unless agreed upon otherwise. If you cancel before end of day the Sunday (PST) before our scheduled appointment, you will not need to pay. If you cancel with less notice, you will need to pay me \$285 USD.

What to Expect: I will endeavor to point out what you did well and what you could be doing better. Though my feedback to you will be informed by the fundamental principles of ISTDP, my primary focus will be to help you utilize your own personality and your own unique voice as a therapist. I will encourage you to allow the principles of ISTDP to inform you “from behind,” meaning that, optimally speaking, the technique of ISTDP does not get in the way of you being fully present with your patients and developing your own unique approach to ISTDP and psychotherapy. You are free to reject any and all of my suggestions.

Addressing Emotional Reactions: If you are having emotional reactions to your patient, I may inquire into your own first-person experience — not in the capacity of a therapist, but in the capacity of a supervisor aiming to help you address barriers to you being the best therapist you can be. You are free to reject any such questions about your own first person experiences.

Fees and Payments: You will pay me what you get paid by your clients, with a minimum floor of \$150 USD per 50-minutes. If you get paid less than \$285 USD per hour but this fee does not pose a hardship for you, you will pay me \$285 USD per 50-minutes.

Payment Information: Payments can be made via Venmo, PayPal, Revolut, or Wise. Venmo: Joe-Smith-159; PayPal: johanneskieding@yahoo.com. For Revolut or Wise, please request barcode information.

In signing this form, you agree to these terms:
