

FORM S1 SUPERVISION AGREEMENT - AGENCY ONLY

SAFCA Professional Supervision

“National Standards Requirements & Responsibilities”

Supervisee to Complete:

Name:

Postal Address :

Phone contact: Work: Mob:

Email Address:

Your job title:

Signature: _____ Date:

SAFCA Approved Supervisor to Complete:

Name:

Phone contact: Bus: Mob:

Email Address:

Your job title:

Agency you work for:

(if you are supervising a full member – delete this paragraph) I agree to supervise this NEW Financial Counsellor through to Stage 2 Standards of the [SAFCA Supervision Framework](#). Supervision can occur one-on-one (face-to-face or via internet and phone) and in group supervision contexts. Some supervision will be one-on-one.

Signature : _____ Date:

The Agency acknowledges:

- **Support of the Supervision Plan:** The supervision process requires time to be set within the usual work day, but separate from usual work duties, to allow for the Supervisor and new financial counsellor to meet. It may also require additional activities to be undertaken by the new financial counsellor depending on their learning needs. It is important that the Agency understands and supports this by making the time available during work hours for this to occur.

- **Professional Indemnity Insurance:** It is a requirement of the national Code of Conduct that all financial counsellors (including volunteers) are covered by their agency's professional indemnity insurance.
- **Acceptance of a confidentiality agreement with the supervisor:** This is an important part of any agreement between an agency and external supervisor because the supervisor may need to sight a client file, for example to check an income and expenditure statement or a letter regarding the client. **NB** This is not necessary if the supervisor is a part of the same agency.
- **Acceptance of national Code of Ethical Practice:** Agency representatives and supervisors are asked to refer to the national Code of Ethical Practice (on the SAFCA website) for Financial Counsellors. We anticipate that most of the contents of the Codes will already resonate with or reflect the Agency's procedures and policies. [The *Code of Practice* is the second half of the *Code of Ethical Practice* document]
- **Awareness about ASIC Grants Exemption to Financial Counselling Agencies** ASIC has granted conditional relief from the licensing requirements to financial counselling agencies that may provide information about financial products (such as early release of superannuation or house insurance) or credit information as part of a financial counselling service. A condition of the granting of the relief is that individual financial counsellors in South Australia must be members of, or be eligible to be members of, SAFCA (Refer to the SAFCA website for details of the exemption)

Agency Manager's (of SUPERVISEE) acknowledgement

The Agency employing the NEW Financial Counsellor in either a paid or voluntary capacity, must sign below to ensure the agency acknowledges the information above.

Signature of Agency Representative: _____

Name (print)

Date

Do not send this form to SAFCA

This goes on file with the Supervisors and the Supervisees employee/HR files