### GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES



### **BOARD OF PSYCHOLOGY EXAMINERS**

Roy Schneider Regional Medical Center 9048 Sugar Estate St. Thomas, Virgin Islands 00802 (340) 774-7477 ext.5074

# POST-LICENSURE SUPERVISION CONTRACT for PSYCHOLOGICAL ASSOCIATES

The United States Virgin Island Psychology Examiners Board was created for the purpose of examining and licensing all persons in the United States Virgin Islands who engage in the practice of psychology. The Board is also charged with safeguarding the people of the United States Virgin Islands from the dangers of unqualified and improper practice of psychology.

As required by Virgin Islands law, post-licensure Psychological Associates may only practice under the supervision by an approved supervisor. This agreement, including any attached submitted Plan of Supervision, shall not be effective until the Plan of Supervision is approved by the Virgin Islands Board of Psychology Examiners.

The Board ultimately protects the public health and welfare through regulation of the practice of psychology. To achieve these goals the Board, in addition to its other duties:

- Reviews proposed Supervision Plans and suggests revisions as necessary.
- Provides copies of the approved Supervision Plan and related documents to the Supervisor and Supervisee.
- Provides access to copies of current statutes and rules relating to the practice of psychology in the Virgin Islands. (Pertinent Virgin Islands Code and Virgin Islands Rules and Regulations involving the practice of psychology in the Territory may be found online at www.usvipsychologyboard.com).

# I. REQUIREMENTS FOR SUPERVISION OF POST-LICENSURE PSYCHOLOGICAL ASSOCIATES

1. Requirements for the supervision of post-licensure Psychological Associates are set forth in 27 V.I.R.R. § 169e-3.

- 2. Once licensed, a Psychological Associate may only practice psychology privately under supervision by an approved supervisor. [27 V.I.R.R. 169e-3(a)].
- 3. The Supervisor must be a Virgin Islands psychologist who has been licensed for two years. [27 V.I.R.R. § 169e-3).
- 4. It shall be the Supervisor's responsibility to provide the best possible professional guidance that is mutually beneficial to both the Supervisee and the public that the Psychological Associate serves. The professional expertise, areas of competence, and experience of the Supervisor must parallel the expected practice of the Supervisee.
- 5. No strong personal relationship shall exist between the Supervisor and the Psychological Associate. [27 V.I.R.R. § 169e-3(b)].
- 6. No Psychologist or other qualified professional shall supervise more than (3) Psychological Associates at any time. [27 V.I.R.R. § 169e-3(b)].
- 7. There shall be a contract between a Supervisor and the Psychological Associate which shall be filed with and reviewed by the Board. No supervision arrangement may commence until such time as the Board approves the supervision contract.
- 8. After 3 years, supervision requirements may be reduced for highly experienced Psychological Associates upon request made to the Board in conformity with 27 V.I.R.R. § 169e-3(d).
- 9. Individual supervised sessions shall be held as follows:
  - a. 1-20 hours of practice per week requires 1 hour of face-to-face supervision per week.
  - b. More than 20 hours of practice per week requires 2 hours of face-to-face supervision per week.

Governmental agencies or private organizations involved in the practice of psychology which may submit alternative supervision plans for one or more Psychological Associates upon demonstrating that either: (1) compliance with standard supervision requirements would constitute a significant hardship; or, (2) the alternative plan would provide significantly superior supervision. If one of those conditions is met, then supervision from a qualified mental health professional from a related discipline may be acceptable if the Board determines that the supervision would be comparable to the individual supervision requirements set forth above. [27 V.I.R.R. § 169e-3(f)(1)

## II. CANDIDATE INFORMATION

Candidate's Full Name:		
(Last)	(First)	(Middle Initial)
Mailing Address:		
Physical Address:		
Phone Number(s):		
Email Address:		
III. SUPERVISOR INFORMATION		
Name of Supervisor:		
(Last)	(First)	(Middle Initial)
V.I. License #:	Date Initially Licensed:	
Business Address:		
Phone Number(s):		
Email Address:		
Fee for Supervision:		
General Description of range of services to be pr	ovided:	
IV. ASSOCIATE SUPERVISOR INFORM	MATION – (if applicable)	
Name of Associate Supervisor:		
(Last)	(First)	(Middle Initial)
V.I. License #:	Date Initially Licensed:	
Business Address:		
Phone Number(s):		

## V. SUPERVISOR'S PLAN FOR SUPERVISION

Signature of Psychological Associate	Date
Signature of Supervisor	Date
Signature of Associate Supervisor (if applicable)	Date
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	VIRGIN ISLANDS PSYCHOLOGY EXAMINERS BOARD
	By:(Signature of Board Member)
Printed Nar	me:
Title	

1. Please attach a separate document prepared by the Supervisor detailing the Plan for Supervision,

which shall be incorporated herein and made a part hereof of this Supervision Contract. The Plan must set forth the specifics of the agreement between the parties, including, but not be limited to, fees to