



Australian Hypnotherapists' Association

Founded 1949

Registered 1957

www.ahahypnotherapy.org.au

ABN 20 004 388 872

Phone: 1300 55 22 54

administrator@ahahypnotherapy.org.au

Registration as an AHA Supervisor

The AHA identifies supervision as vital to the hypnotherapy task and the principal means of enabling a hypnotherapist's professional ongoing development. AHA Supervisors are concerned about the hypnotherapist, the hypnotherapist's clients and the framework in which the hypnotherapist works. AHA Supervisors undertake responsibility for the quality of the supervision provided. This demands a commitment to her/his own personal and professional development as well as to the practice of supervision.

Supervision is a process in which supervisor and supervisee (or group of supervisees) form a relationship with the professional goal of helping the supervisee(s) maintain and improve their hypnotherapy skills within the framework of the theoretical models the hypnotherapist(s) has/have chosen.

The granting and renewal of registration of AHA supervisors is an important part of the Association's function in promoting quality and ethical standards for the profession of hypnotherapy.

Standards for AHA Supervisors

A Supervisor must be able to demonstrate:

- a. A therapeutic approach to supervisees, including: respect; empowerment; genuineness; congruence; clear self-boundaries.
- b. Advanced hypnotherapy and counselling skills including: empathy; questioning; informing; guiding and confronting.
- c. Specific supervisory skills which may include: awareness and use of parallel process; impartiality; flexibility; appropriate integration of the association's accountability and guidelines within the supervisory process.
- d. Ability to work with supervisees presenting from a range of models of hypnotherapy, counselling and psychotherapy.
- e. An integrated personal model of both hypnotherapy and clinical supervision.
- f. An ability to identify areas of concern and facilitate a supervisee's acceptance of responsibility for her/his own development including maintenance of their duty of care to their clients and the wider community.
- g. An ability to identify and evaluate a supervisee's personal and professional resources.
- h. An ability to negotiate an appropriate program to meet the particular development needs of the supervisee.
- i. An ability to address the techniques required for business management and marketing.
- j. A good working of knowledge of relevant theories and industry issues.



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Applicants for registration as an AHA Clinical Supervisor are required to fulfil the following conditions to the satisfaction of the Board.

- i. Clinical Member of the AHA
- ii. Completion of at least five years practical experience (consisting of at least one thousand hours of hypnotherapy under supervision) of working in the field at a **clinical level** prior to applying.
- iii. Applicants who are currently serving on the Board of another hypnotherapy association may not be eligible to register as an AHA Clinical Supervisor. The decision is at the discretion of the Board.
- iv. Every applicant for Clinical Supervisor membership of the AHA must be approved by the Board.

Procedure for the Registration of AHA Supervisors

Applicants who believe they meet the requirements as defined in the Standards for Supervisor membership are invited to apply to the Board via the National Administrator for registration as a Supervisor.

Procedure for the Registration of Clinical Supervisors

Applicants who believe they meet the requirements as defined in the Standards for Clinical Supervisor membership are invited to apply to the Board via the national administrator to become a Clinical Supervisor.

Applicants must provide:

1. Evidence of all training undertaken, and qualifications gained
2. Evidence of having conducted at least one thousand hours of hypnotherapy under supervision.
3. Evidence of having conducted at least fifty hours of both individual and where possible, group supervision
4. The name of three current or recent supervisees and your current Supervisor of Supervision as referees.

The National Administrator will be directed by the Board to notify the applicant of the outcome

Publication of Names

The names of registered AHA Clinical Supervisors will be advertised on the AHA website

Maintenance of Supervisory Status

The Criteria for the Annual Renewal of Accreditation and the Annual Renewal of Membership.

- a) The AHA Supervisor membership year runs concurrently with the AHA membership year - from the 1st of April to the 31st of March each year.



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- b) AHA registration as Supervisor is contingent upon meeting the AHA supervisory standards as stated in the Supervision policy and guideline documents. Thus, no application for annual renewal of membership will be accepted from any Supervisor who has not met these standards.
- c) No application for the renewal of annual supervisor membership will be accepted unless it has been made in the form and the manner that has been prescribed by the Board and all fees paid.

The applicant must –

1. have satisfied all the standard membership requirements for CPD, personal supervision, First Aid, Police and Working with Children Checks and the relevant insurances.
2. Completed the requirements specific to supervisor membership.
 - Provide evidence of having undertaken four (4) hours of supervise the supervisor each membership year.
 - Provide evidence of having completed four (4) hours of supervisor specific CPD each membership year
3. In applying for renewal of membership, the applicant agrees that, in the event of her/his being granted leave of absence from the AHA for a specified period of time, her/his membership will be suspended until s/he returns. Provided s/he returns within the agreed time, both her/his membership will be reinstated.
4. In renewing her/his membership, the applicant implicitly agrees that, if her/his AHA membership status is suspended for disciplinary reasons, her /his membership will be automatically and immediately suspended until her/his membership has been reinstated.



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Application to register as an AHA Supervisor

Surname: _____ First name: _____

Address: _____

Post code: _____

Phone W: _____ Phone H: _____

Phone M: _____ Email: _____

AHA Clinical membership number: _____

Name of current Hypnotherapy Supervisor: _____

First Aid No: _____ Expiry date: _____

Professional Indemnity Insurance Provider: _____

Policy no: _____ Expiry date: _____

Supervision qualifications: (please attach copy/s of completed supervision course certified as a true copy)

Teaching institution: _____

Hours of study: _____

Name of your current Supervisor of Supervision: _____

Phone: _____ Email: _____

Number of individual supervision sessions completed since end of training: _____

Number of group supervision sessions completed since end of training: _____

Have you ever been refused acceptance or had any disciplinary action taken against you by any other association?

(If yes, please provide details below)

Yes

No

I have attached evidence of supervision training: Yes

No

I have attached the name and contact details of 3 referees:

Name: _____ Ph: _____ Email: _____

Name: _____ Ph: _____ Email: _____

Name: _____ Ph: _____ Email: _____

I have read the membership criteria for eligibility for registration as an AHA Supervisor. I

agree to abide by the AHA's Code of Ethics and Conduct

I agree to hold the AHA indemnified for all judgements and costs awarded against it or incurred by it, as the case may be, in any action against it, arising directly or indirectly from my conduct as a Hypnotherapist or Supervisor.

I declare that the information given by me on this form is correct and that I have not willingly suppressed any facts that may be detrimental to my application, and I give permission for an AHA Executive member to check any details / documents should they wish to do so.

Signed: _____ Date: _____