

**NOTE.** The supervision PDS below is an example that is specific to a supervisor in the counseling field. However, it may or may not be in the format and/or include all the Information required by your counseling state board and/or other entities for which you may want to use or submit your supervision PDS. Please check with your state board or other organization regarding their required template and content.

### **Professional Disclosure Statement For Clinical Supervision**

NAME, PhD, LPCS, NCC, ACS  
Physical address/Mailing address

Office phone number  
Cell phone number  
E-mail address

#### Educational Background and Credentials

PhD	Counseling and Counseling Education	UNCG	2004
M Ed	Counseling and Guidance	Clemson	1998
BS	Biology	Augusta St.	1990

Licensed Professional Counselor Supervisor (North Carolina)	#
Approved Clinical Supervisor	#
National Certified Counselor	#

#### Counseling Background

I have counseling work experience in residential, acute care, community agency, crisis intervention, college counseling clinic and outpatient private practice settings. I have experience with adolescents and adults, providing personal, psychoeducational and psychosocial counseling services. I also have experience in working with families and caregivers. Additionally, I have experience working with adults in crisis and with substance abuse problems.

My orientation to counseling is based on cognitive-behavioral, humanistic, developmental and systemic theories of counseling, and I employ Rogerian, cognitive-behavioral, reality therapy, and Gestalt techniques. I believe that the primary process of counseling involves helping clients to find the resources within themselves in order to develop requisite skills and address themes related to their presenting problem(s) or underlying issues.

#### Supervision Background

My supervision training includes several years of administrative and clinical supervision in residential and community agency settings. My training was formalized during my doctoral program including an academic course and several semesters of supervised supervision of practicum and internship counseling students. Since June 2004, I have directed and supervised students in the Vacc Counseling and Consulting Clinic at UNCG as a Clinical Associate Professor.

#### Supervision Approach

My approach to supervision is founded in developmental models of supervision. Attention to the supervisory relationship and supervisory roles is critical to these approaches, requiring the supervisor to be intentional, proactive, and flexible. Supervision interventions are tailored to supervisees' developmental, cognitive, and conceptual levels, as well as the supervisees' motivation, skills, and personal attributes, while ensuring the needs of the client(s) are met.

Multiple roles and foci are employed in supervision. The supervisor may use a variety of roles with the supervisee, such as teacher, counselor, or consultant, addressing overall developmental goals in addition to the expressed goals

and identified performance issues. Supervision may focus on interventions/techniques to use with clients, case conceptualization, professional behaviors, or the counselor as both a person and change agent. The pervasive goal of supervision is for the supervisee to gain more complex and integrative assessment, conceptualization, and intervention skills. Supervision also includes goals of increased self-awareness and may involve examining personal behaviors, thoughts, or feelings that are elicited by a client. However, it must be stated that supervision and personal counseling are distinct activities and processes, despite any attendance to personal issues and reactions and overlap in the techniques employed. Any issues that are unrelated to the supervisee's efficacy with clients or that may be identified by the supervisee or supervisor as needing further attention are to be referred to a different, qualified professional; providing any therapeutic interventions beyond the scope of the client must be precluded. Lastly, supervision involves evaluation, which is incompatible to the goals of personal counseling.

Live observation and/or audio/video recordings are the predominant modes of reviewing counseling skills for supervision.

#### Evaluation Procedures

Goals are co-constructed and tailored to the supervisees' needs according to: individual contracts, performance and experience, reason for supervision (licensure/internship/credentialing), and in accordance with current standards of practice and ethics in the field.

Supervisees are provided feedback continuously and apprised of any performance issues. Furthermore, supervisees are provided opportunities for remediation, if needed, via written contract and procedures of due process (with the exception of certain gross ethical violations). Adherence to the ethical standards of ACA and NBCC and any supervisory directives is expected and a basis for evaluation. Supervisees are provided copies of any written summative evaluations.

#### Confidentiality

Privileged communication is not applicable to supervision sessions. However, every effort is made to keep the content and process of supervision sessions confidential, with a few noted exceptions: (a) the client's welfare is in danger of harm, (b) a written release is provided by the supervisee, or (c) the contract for supervision provision requires communication with a third-party (university supervisor, licensure board, etc.). In these events, effort is made to inform the supervisee of the disclosure.

#### Fee Schedule

Supervision of counseling students in internships is free of charge, as it pertains to the specific instructional agreement and prospectus. For non-students, payment is based on the specific supervisory contract, including the modality of supervision (individual or group) and the purpose of supervision. For this contract: TBA

#### Emergency Situations

In the event of a client emergency, supervisees may contact me at my office or via cell phone. It is critical to follow established protocols when faced with client emergency or ethical dilemma, and any incidents should be either discussed or reported in a reasonable timeframe, particularly if there is a diversion from established procedures.

#### Ethical Standards

I adhere to the NBCC Code of Ethics, the NBCC Standards for the Ethical Practice of Clinical Supervision, the ACES Guidelines for Counseling Supervisors, and the applicable ACA Code of Ethics and Standards of Practice. Supervisees are expected to adhere to ethical practice and legal standards of counseling. If a supervisee is dissatisfied with my work, they are encouraged to address the situation with me openly and directly. If the issue isn't resolved or they

continue to be dissatisfied, the supervisee may contact the NCBLPC (844-622-3572), NBCC (336-547-0607) or ACA (703-823-9800).

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Name, PhD, LPCS, NCC, ACS                      Supervisee                      Date

June 2015