



PROFESSIONAL DISCLOSURE STATEMENT
Prepared by Clinical Supervisor
Sharral M. Dean, LPC, MAC, SAP, CAADC, RPT-S, CPCS

Introduction

First and foremost, I would like to congratulate you on completing your master’s degree and beginning your licensure journey. The information provided in this statement will provide you with the details about my qualifications and outline some of the guidelines in which we work. I encourage you to ask me questions if further explanations are needed, and I look forward to working with you.

Educational Training

M.S. Mental Health Counseling, Fort Valley State University

B.S. Health Sciences, Georgia Southern University

Clinical Experience, Training, Credentials, and Affiliations

- Licensed Professional Counselor (GA) #006824
- Certified Professional Counselor Supervisor (GA) #648
- Substance Abuse Professional
- Certified Advanced Alcohol and Drug Counselor #C0142
- Registered Play Therapist Supervisor # S3217
- Master Addiction Counselor #508748
- Certified Yoga Teacher 200/300

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Supervision Experience and Training

I have been a Certified Professional Counselor Supervisor for the state of GA since 2016 meeting all requirements of the Licensed Professional Counselor Association of GA as is required since 2018 and licensed as a professional counselor since 2013. Since this time, I have worked in a variety of settings including community mental health, non-profit agencies, psychiatric residential treatment, group homes, and private practice. I have provided mentorship as well as supervision services to students and mental health professionals. As of March 2023, I became a Registered Play Therapist Supervisor after being a Registered Play Therapist for ten years.

My clinical experience has focused on: anger management, anxiety, depression, stress, parent-child relational issues, work-related stress, domestic violence, sexual abuse, trauma, substance use disorders, and women's issues. I do not treat eating disorders and have limited experience with disordered eating issues; therefore, should the supervisee present these issues I will seek consultation.

Current Practice Statement, Capacity, & Supervisee Characteristics

Supervision will occur in a private practice setting with master's level clinicians and Associate Professional Counselors (APC). The use of Tele-supervision may be utilized if it is deemed appropriate between the supervisor and supervisee. I will assess the supervisee's competence for the use of tele-supervision to determine if this method is the best training method

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to utilize. Per the licensing board requirements, I will require at least 1/3 in-person supervision should tele-supervision is chosen (LPCAGA, n.d.).

Supervision Philosophy & Approach

I approach supervision from the framework of the Integrated Developmental Model and Discrimination Model. Utilizing the Integrated Developmental Model (IDM) for supervision, I am able evaluate the supervisee's level of development using the Discrimination Model where I observed the supervisee's skill set in intervention, conceptualization, and personalization. Then, with intentionality, I will choose the role of teacher, counselor, and/or consultant to address the supervisee's presented concern (Bernard & Goodyear, 2019).

Information about the Supervision Process

Within the first thirty (30) days, the supervisee will be required to provide copies of their graduate degree, graduate transcript, proof of liability insurance, and arrive prepared for each meeting. Supervision is intended to oversee the quality of care of the client, improve clinical skills and facilitate professional development; therefore, come prepared to discuss a case, receive feedback, discuss audio/video recordings, and explore concerns in a supportive environment. Throughout this process, the supervisee will be discussing theoretical orientations for the conceptualization of their work with clients, and two audio or video recordings will be viewed of your sessions (Bernard & Goodyear, 2019; LPCAGA, n.d.).

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Supervisee Expectations

The supervisee is expected to arrive on time, be prepared for the weekly one-hour supervision sessions and complete the weekly supervision log that I will provide. Your clients must be made aware that you are obtaining clinical supervision, and you should explain the confidentiality within the supervisory relationship.

I will provide opportunities to facilitate workshops/groups for professional and skill development and you will be encouraged to participate. Please note that non-participation will not reflect poorly on your evaluations; however, this is a developmental element that is offered to all supervisees and interns. You will be expected to follow the Code of Ethics and Standards according to ACA, LPCA of GA, and/or APT (Bernard & Goodyear, 2019; LPCAGA, n.d.).

The supervisee will be provided with self-evaluation forms to give feedback regarding the supervisory relationship, counseling techniques, case conceptualization, and assessment you are receiving (Bernard & Goodyear, 2019). You are encouraged to provide feedback and ask questions throughout this process to increase your awareness and that of the supervisor.

Supervisor Expectations

This will be a collaborative journey, and as the supervisor, I will provide professional development opportunities, therapeutic skill development, and clinical feedback, along with, requiring compliance to ethical standards, legal issues, and professional merit (Bernard & Goodyear, 2019). As the supervisor, I will review audio and video recordings of the supervisee's session and provide a release for the client's consent.

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At the end of our supervisory relationship, I will ensure that your licensure application is reviewed and FORM E for the hours that I provided Clinical Supervision, per Rule 135-5-.02, is signed for submission to the licensing board (LPCAGA, n.d.).

Evaluation Process

To evaluate the supervisor process, you will be expected to submit two audio or video recordings each year. The supervisee will have the opportunity to evaluate my work with you as well via verbalization and assessment tools that will be provided by the supervisor. Furthermore, the supervisor may attend your sessions for live observations, provide opportunities for professional development, and to facilitate workshops. Should remedial assistance be required, the supervisee will be immediately notified, and we will create a plan of action to develop the targeted area (Bernard & Goodyear, 2019).

Confidentiality, Limits, & Communication with External Entities

The issues we discuss in supervision will be confidential with exception to: 1) In the event I am asked to provide a recommendation for a job, licensure, or certification, 2) I cannot guarantee confidentiality during triadic or group supervision, but I will encourage confidentiality and act immediately if it is not upheld, 3) Should I seek consultation regarding my supervision of your work, 4) In the event the supervisee displays signs of impairment, 5) In the event the supervisee displays behaviors that are unethical and or dangerous to the client, 6) Should I, as the supervisor, be court ordered to testify about the supervisory relationship or regarding a client of the supervisee, 7) In the event that a client's welfare is in danger and the supervisee is found

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incapable to effectively assist the client, 8) If a child, elderly person, or dependent person is being abused (Bernard & Goodyear, 2019; LPCAGA, n.d.)

Emergency Contact information

In the event of an emergency, I can be reached at 478-227-6525 (work), 478-777-9311 (cell/text), or admin@seedsoflifecounselingagency.com (email). Please leave a detailed message for me on my cell phone and I will return the call as quickly as possible. If I am out of town during the emergency or cannot be reached, please contact Dawn Beesly at 478-554-9085 with CARES House, for assistance.

Fees for Supervision & Payment

One 60-minute individual session will be held weekly on _____ at ____am/pm unless there is a conflict, and the supervisor/supervisee has arranged to reschedule the session. The cost per individual session is \$60 and can be paid by cash or with credit card on the date of the session unless prior arrangement has been made by the supervisee with the supervisor. Group sessions are offered on _____ at ____am/pm comprising of 4 individuals at \$50 per person per session, and payment is due at the time of the session paid by cash or with credit card.

Grounds for Termination of Supervision Contract

Grounds for termination includes but is not limited to: noncompliance with this agreement, not upholding professional, ethical behavior, or legal standards, forging documentation, missing 2 sessions without notice, non-payment of 3 sessions without prior notice or arrangement, and noncompliance with the remediation action plan.

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Complaint Reporting Procedure

I adhere to the LPCA, ACA, APT, NADACC, and CPCS Code of Ethics. You are encouraged to discuss any concerns with me first, nevertheless, you may file a complaint against me with any of these organizations should you feel I am in violation of any of these codes of ethics (Bernard & Goodyear, 2019).

GA Secretary of State
Licensing Division
237 Coliseum Drive
Macon, GA 31217-3858
404-424-9966
<https://sos.ga.gov/page/how-submit-complaint>

Acknowledgement of Statement Receipt & Consent for Supervision

We agree to these terms and will abide by these guidelines.

Supervisee: _____ Date: _____

Supervisee Signature: _____

Supervisor: _____ Date: _____

Supervisor Signature: _____



References

Bernard, J. M., & Goodyear, R. K. (2019). *Fundamentals of clinical supervision* (6th ed.). Upper Saddle River, NJ: Pearson.

License Professional Counselors Association of Georgia. (n.d.). CPSC sample contract.

<https://lpcag.memberclicks.net/cpsc-sample-contract>

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