

## **Directed Paths, LLC ALC Supervision Contract**

### **Purpose**

This form has several purposes. It is designed to:

1. Inform you about myself and my theoretical orientation
2. Describe the supervision experience
3. Provide structure for your counselor experience
4. Clarify expectations

### **Professional Disclosure**

I, Keli M. Brothers, Ed.D., LPC-S, attest that I am an Alabama Board of Examiners in Counseling “approved supervisor”. I have held a full professional counseling license (LPC) in the state of Alabama since 2015, and supervisory license since 2021.

I completed a Bachelor of Arts in Psychology in 2009 from The University of Alabama. I obtained a Master of Arts in Community Counseling from University of North Alabama in 2013, and went on to obtain a Doctor of Education degree in Counseling Psychology from Argosy University in 2018. I am a member of Chi Sigma Iota, NAADAC the association for addiction professionals, the National Association of Black Counselors, the Alabama Counseling Association, and the Alabama Association of Addictions Counselors. I have worked in agency, academic, and/or private practice settings since 2010. I have had a private practice since 2017 and have served as adjunct faculty to two universities since 2018. In fall of 2023 I began serving full time as an Assistant Professor of Clinical Mental Health Counseling at UNA.

My clinical experiences have developed a broad intervention knowledge base for issues ranging from substance use disorders, process/behavioral disorders, general mental health (depression, anxiety), and severely mentally ill. I also have experience across numerous demographic populations.

### **Model of Supervision**

There are several models of supervision aimed to ensure the integrity of the counseling profession. I endorse the Discrimination Model as it is one in which the supervisor takes on a role of educator, counselor, or consultant and the focus is on supervisee’s intervention skills, conceptualization skills, and personalization skills. The benefit of this model is that the roles of educator, counselor, or consultant are not stagnant and thus allow me as the supervisor to adjust responses based on presented needs of the supervisee. Although this model provides means of evidence based efficient supervision, it does leave the areas of supervisor/supervisee dynamic and the evaluation of supervisee somewhat deficient. This is where I would integrate elements of my model of counseling which strongly involves Rogerian Person-Centered Theory.

This theory focuses on building rapport, and thus will afford me the opportunity to ensure supervisees that the dynamic between us is one of mutual respect and regard. As a result of healthy rapport and mutual respect, a budding counselor can better receive constructive criticism and necessary feedback to grow in practice. I adhere to the belief that supervision is truly a combined effort on the part of both the supervisor and supervisee to ensure effective care is being provided to the community.

### **Supervisory Expectations**

We will meet on a regular basis either in person or synchronous online/virtual platform (Skype, Zoom, etc. as approved by ABEC). At least one individual meeting will be held weekly for 50 minutes unless we have made other arrangements. There will be at least one other indirect contact made weekly. An alternative to this indirect hour, when possible, is a group supervision meeting weekly that is also 50 minutes in length unless other arrangements are made. Each 50-minute supervision session is equal to one hour toward the required annual 100 hours of supervision.

24-hour notice of need to cancel supervisory sessions is requested when possible. Supervisees will be assessed a \$25 fee for no call, no shows to supervisory sessions; and, repetition thereof, is grounds for dissolving the supervisory relationship.

As your supervisor I am required to have working knowledge of your activities in practice including record keeping, interventions utilized, financial management(if billing insurance), ethical engagement, and backup coverage in the possibility of an unforeseen absence.

Therefore, as a part of your clinical supervision, we will establish and discuss procedures to:

Keep client records, log hours (direct/indirect), accurate financial management, maintain adherence to ABEC standards and procedures to keep licensure, ethical practice, and review client forms and records.

### **Practical Issues**

Supervision is an investment in your career as a licensed clinician. As such, there is a financial component to the supervisory relationship. Fees for supervision can be paid on a biweekly or monthly basis but cannot be paid in arrears. Fees for each individual supervision session are \$50/per individual session with the weekly indirect hour counted as an individual session. Fees for group supervision (when applicable) sessions will be half of the individual fee. Fees are due on the 1<sup>st</sup> of each month and are considered late after the 15<sup>th</sup> of each month. No call, no show fees are half of the individual fee to be paid prior to subsequent sessions.

Monthly with all individual (\$50/session x8) = \$400

Monthly with Group (\$50/ind \$25/group) = \$300

**Ethical/Legal Disclosure**

The content of our supervision sessions is confidential with the exceptions of: treatment of a client that violates the legal or ethical standards set forth by professional associations and government agencies and disclosures agreed upon by your agency (if applicable).

While under supervision the supervisee will need to obtain and maintain liability insurance.

If at any point in our work together a concern arises, it will be the responsibility of both supervisee and supervisor to discuss said concern and work toward a resolution. In instances where resolution is not possible, the supervisory relationship may be dissolved.

In the event the supervisor becomes unexpectedly unavailable due to loss of life or some other permanent circumstance, supervisees' paperwork will be placed under the care of Dr. Jeffrey D. Brothers, LPC, until the supervisee is able to obtain transition to a new supervisor.

**Statement of Agreement**

Signature below reflects that both supervisor and supervisee have read and understand the information outlined in this consent form. If questions arise in the future, together we can read and update this document to best guide our work together.

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisee Signature \_\_\_\_\_ Date \_\_\_\_\_