



Healing Home, LLC
Anita Woods, M.A., RMHCI
Jacksonville, FL

Supervisory Disclosure and Informed Consent

This Ethical Informed Consent agreement is between Healing Homestead, LLC (Supervisor) having a place of business in Jacksonville, FL, and _____ (supervisee), a Counselor in Training (CIT). The purpose of supervision is to meet the state of Florida's requirement for Registered Mental Health Counseling Interns of 100 hours of supervision in no less than 100 weeks. The term of this agreement will begin on the day this agreement is signed. This agreement may be terminated at any time by written notification from the supervisor or supervisee. Notification of cancellation will also be sent to Florida's Board of Mental Health.

Types of Supervision:

Please select which type of supervision the supervisee chooses to participate in Group ____ or individual ____ supervision with Healing Homestead, LLC. Supervision sessions will be scheduled at mutually agreed-upon times weekly or biweekly per Florida requirements of at least one hour of supervision every two weeks.

Objective and Outcomes of Supervision:

- 1) The objective of supervision is for the development of responsibility, skills, knowledge, attitudes, and adherence to ethical, legal, and regulatory standards in the practice of clinical mental health counseling.
- 2) The intern reviews the diagnosis and treatment of each client with the supervisor.
- 3) The supervisor provides the intern with oversight and guidance in diagnosing, treating, and dealing with clients.
- 4) The supervisor evaluates the intern's performance and gives guidance for changes or improvements.



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Supervisor/Supervisee Rights and Responsibilities:

- 1) Both the supervisor and supervisee should perform using and maintaining the ethical guidelines documented in the 2014 APA Code of Ethics.

Supervisor Rights:

- a) Address any matters of concern about the supervisee's performance.
- b) Stay abreast of the supervisee's client caseload.
- c) Provide professional, beneficial feedback to the supervisee regarding his/her work performance.
- d) Observe the supervisee's counseling methods and communication and suggest appropriate changes.

Supervisor Responsibilities:

- a) To ensure supervision sessions are timely and consistent.
- b) Document supervision meetings and provide meeting notes as the supervisee requests.
- c) Create and maintain a supervision file for each supervisee in which the supervisor is responsible.
- d) To communicate and ensure each supervisee understands his/her role and responsibilities.
- e) Monitor the performance of each supervisee according to counselor ethical guidelines.
- f) Support the supervisee's personal counseling goals and plan.
- g) Complete all forms required by the Florida Board of Mental Health for Registered Mental Health Counseling Interns and Supervisors (<https://floridasmentalhealthprofessions.gov/forms/>).

Supervisee Rights:

- a) Confidential, one-on-one, private supervisee/supervisor session.
- b) Have access to the supervisor's knowledge, receive guidance, and have the supervisor's undivided attention during individual sessions.
- c) Provide input into the supervision agenda.
- d) Expect the supervisor to perform agreed-upon actions and meet agreed-upon expectations, including the training and development needs of the supervisee. When set actions are missed, expect the supervisor to provide reasoning and set agreed-upon recovery dates.
- e) Supervisor to be professional and constructive in challenging the supervisee.



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Supervisee Responsibilities:

- a) To discuss and review client cases using video or written documentation.
- b) To substantiate diagnoses, modalities, and interventions given to clients.
- c) To be receptive to supervisor suggestions and willing to change interventions or modalities where needed.
- d) To contact the supervisor and direct management when an emergency arises.
- e) To follow company and supervision protocols when facing client SI/HI situations.
- f) Pursue counselor continuing education consistently.

Financial Information:

- Hourly rate for supervision: \$60 per 1-hour session, unless the supervisee is counseling at Healing Homestead, LLC.
- Counselor Liability Insurance is the responsibility of the supervisee to obtain.
- Proof of insurance must be provided to the supervisor.

This agreement may be updated at any time but must be agreed upon by the supervisor and the supervisee before documentation and approval.

Both parties agree to the guidelines and specifications of this document to the best of their abilities according to the 2014 APA Code of Ethics.

SUPERVISOR	DATE	SUPERVISEE	DATE
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Termination Date: _____