

## Supervision Professional Disclosure Statement

**Mark D Larson, D. Min., LPC, Fellow AAPC**

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Senior Staff Therapist  
Sanctuary Counseling Group  
(Formerly known as Methodist Counseling and Consultation Services)

Business & Mailing Address: 1801 East 5<sup>th</sup> Street, Suite 110, Charlotte NC, 28204-2472  
Service Locations: Dilworth United Methodist Church, 605 East Boulevard, Charlotte NC, 28203;  
University City United Methodist Church, 3835 West WT Harris Boulevard, Charlotte, NC, 28269

### Qualifications

In 2002 I received my highest relevant degree, the Doctor of Ministry from Columbia Theological Seminary in Decatur, Georgia, a training program accredited by the American Association of Pastoral Counselors. My training there emphasized outpatient marriage and family therapy and professional trauma response consultations with faith congregations. In 1993 I completed three years (beginning and advanced) professional training for pastoral psychotherapy at the Presbyterian Samaritan Counseling Center, Charlotte, N.C., a training program accredited by the American Association of Pastoral Counselors. My training there emphasized individual and group outpatient psychotherapy. Previously in 1985 I received the Master of Divinity degree from the Divinity School of Duke University.

I am a North Carolina Licensed Professional Counselor Supervisor (2189), a Certified Fellow in the American Association of Pastoral Counselors (4191) an ordained Elder in the Western North Carolina Conference of the United Methodist Church (821) and a Certified Emotional Freedom Techniques Practitioner in the Association for the Advancement of Meridian Energy Techniques (1405021).

I have offered clinical counseling services for a fee, since 1989 and supervision of clinical practice since 2004. This means in 2017 I have twenty-eight years of professional counseling experience and thirteen years of supervision experience. Sometimes concurrently from 1985 until 1994 I served United Methodist congregations as an ordained pastor. Since 1994 I have been a full time clinician, while occasionally serving congregations as a part-time parish consultant or interim pastor.

From 2004-2008 I provided individual supervision to psychotherapy interns in the Carolinas Institute for Clinical Pastoral Therapy, an AAPC accredited training program, and taught their Marriage and Family Systems Therapy course. From 2004-2013 I organized and directed eleven (each lasting ten-months) fee-based "Pastoral Leadership Consultation" and "Pastoral Care in Communities" consultation and support groups for parish pastors. I lead didactics and case conferences promoting leadership development from a systems theory perspective, group conflict assessment and management, and self-care. From 2010 to the present I have provided individual contract supervision to Licensed Professional Counselor Associates.

My post-degree contract training includes group and individual supervision of my supervision:

2004-2008 with Dr. Louis B. Reed, Clinical Director, Presbyterian Samaritan Counseling Center, Charlotte, NC

2010-2012 with Tom Oneal, Executive Director, Counseling Center at Charlotte.

2012 –2013 with Dr. Loren Townsend, Henry Morris Edmonds Professor of Pastoral Ministry and Professor of Pastoral Care and Counseling, Louisville Presbyterian Theological Seminary

In January, 2012 I completed the certificate course “Supervising Pastoral Counseling and Marriage and Family Therapy” at Louisville Presbyterian Theological Seminary, a course accredited by the Association of Theological Schools, the American Association for Marriage and Family Therapy and the American Association of Pastoral Counselors.

### **Counseling Background**

I practice in an outpatient, fee-for-services group practice agency structure. My areas of competence include: counseling with individuals (teens through older adults) in the areas of grief, depression, anxiety, phobias, anger management, chronic pain management, attention deficit and/or hyperactivity difficulties, emotional and sexual abuse healing, trauma recovery and 12-step recovery from addictions. I counsel with individuals in life transitions, identity, spirituality and faith issues. Additionally I offer counseling with couples, especially where there has been infidelity or addiction; counseling with adolescents and families in relationship conflicts and parenting issues.

My style of talk therapy is informed by several modern and post-modern theories which include pastoral theology, faith and moral development, classic and contextual family systems, neo-psychoanalytic (attachment theory), narrative, psychodynamic, cognitive behavioral, solution-focused, personality temperament and educational approaches. Additionally I am certified to practice “Emotional Freedom Techniques” as an optional treatment. EFT is an Energy Psychology self-tapping protocol that is effective in a wide variety of areas from attention deficit difficulties and chronic pain, to trauma recovery, phobias and addictions. Often EFT speeds and deepens the effectiveness of traditional talk therapy. In some instances it can be more effective than traditional talk therapy.

### **Nature of Supervision**

I provide individual supervision and group supervision. My approach to clinical supervision is multicultural and contextual. I believe you and I can begin supervision best, as I provide resources to help you clarify your personality temperament, learning style, theoretical approaches, level of expertise, scope of practice and practice context. As part of this, you will be given questionnaires, a temperament self-sorter and clinical skills assessment instruments. This initial information-gathering will help us work toward clarifying your own unique clinical learning goals. Selected readings may be recommended or required to aid your learning.

I evaluate on an ongoing basis. My goal is to provide verbal feedback focused on your chosen question of the supervisory hour as well as your long-term learning goals. I provide evaluative feedback for your growth, affirming what you are doing right and helping you identify your next steps toward becoming a highly functioning self-supervising professional. If you request and authorize it, I can provide a formal written evaluation of your work. In each supervisory session I will review an audio or video portion of your therapy session that relates to the question you bring to supervision. If you or I request it I may listen to an extended

portion of the session. Occasionally I might arrange with you live observation of your session or observation through a video link. I might direct you to hand out a questionnaire or survey to active clients so you and I might receive direct feedback about your work.

### **Confidentiality**

The issues you discuss in supervision will be confidential with the following exceptions:

- 1) Your performance and conduct in this clinical experience will be described in general terms when I submit quarterly reports and verification of supervision forms to the NC Board of Licensed Professional Counselors and other credentialing boards or when consultation with another professional is necessary.
- 2) If I am asked to provide information about your clinical experience in the form of a recommendation for job, licensure, or certification.
- 3) Disclosures made in triadic or group supervision cannot be absolutely guaranteed as confidential. Although I will take every measure to encourage confidentiality and act appropriately if confidentiality is not upheld.

### **Session Fees and Length of Service**

Individual supervision sessions are 45-50 minutes in length and the cost is \$75.00 per session. Groups of two (triadic) supervisees are \$45.00 per person per single session. For groups of three or more, the total charge is \$50.00 per person for 2 clinical sessions (1.5 clock hours). The charge for a written Supervision Report is our organization's standard charge: \$50.00 per page. Fees are payable at the beginning of each session by cash, check or credit card. It is our standard practice to keep your credit card information locked in our business office. If you are unable to keep an individual supervision appointment please call me to cancel at least 24 hours in advance to avoid paying the total fee for the session. In cases of emergency weather or illness I will work with you in negotiating exceptions to this policy. Group supervision sessions are calendared well in advance and generally there are no refunds for cancellations of group supervision sessions.

### **Supervisee's Responsibilities in Supervision**

- 1) Attend sessions and come prepared.
- 2) Complete homework or assignments.
- 3) Keep supervisor informed regarding all client issues and progress.
- 4) Maintain liability insurance at all times (minimum \$1M single incident/\$3M aggregate).

### **Supervisor's Responsibilities in Supervision**

- 1) Prepare for and attend all sessions.
- 2) Provide feedback each session and a formal evaluation at each quarter and at the end of the supervision contract.
- 3) Review client case notes and other materials for quality control purposes.
- 4) Complete supervision record at each supervision session.
- 5) Maintain licensure as a clinical supervisor in NC and status as a NBCC approved clinical supervisor.

**Emergency Contact**

In case of emergency you can contact me at 704-533-5731.

**Complaints**

I abide by the NBCC, ACA, and NCBLPC Code of Ethics as well as the CCE’s Approved Clinical Supervisor Code of Ethics. Although supervisees are encouraged to discuss any concerns with me first, you may file a complaint against me with any of these organizations should you feel I am in violation of any of these ethical codes.

The N.C. Board of Licensed Professional Counselors  
P.O. Box 77819  
Greensboro, N.C. 27417  
Phone: 844-622-3572  
E-mail: <http://complaints@ncblpc.org>  
Website: [www.ncblpc.org/assets/complaint\\_Form](http://www.ncblpc.org/assets/complaint_Form)

**Supervision Arrangements**

We will meet on the following day and time:\_\_\_\_\_.

**Acceptance of Terms**

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

\_\_\_\_\_  
Supervisee’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dr. Mark Larson

\_\_\_\_\_  
Date

6-12-2017