



Bridgette N. Montgomery  
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Bridge of Love II LLC

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#### **Professional Disclosure Statement & Statement of Supervisee Rights Qualifications:**

I am a License Clinical Social Worker (CW109767), and a National Certified Sex Offender Treatment Specialist. I have a Masters of Science Social Work, and Master of Science in Non-profit Management and I'm finishing my Masters of Science in Special Education with a Certification in 4th-8th grade middle level Language Arts.

I am the founder and owner of Bridge of Love II LLC, located in Newtown Square Pa. I have worked as a clinician for over 19 years and I have a varied background across several domains of social work practice. I currently operate a group practice, where I am the sole proprietor. I provide individual, group, couples, and family therapy. I treat a range of social, emotional and behavioral problems, while providing effective ways to cope with those problems. I provide psycho-education, and relapse prevention to help individuals recover from a variety of addictive behaviors which includes, but is not limited to: criminal conduct and substance abuse, and deviant sexual acting out behaviors.

I supervise, educate and consult with Master Level Social Work Learners, working towards obtaining their clinical licensure to pursue private practice and/or other clinically driven professional careers. I help social workers develop their clinical social work skills. I coach, counsel and motivate others into reaching their full potential and operating in the gifts they were naturally born with. I love doing educational and informational webinars, psycho-education, groups, and Mentoring others.

### **Supervisory Approach:**

I believe that supervision is an important aspect in teaching and developing counseling skills. It is important that my students feel safe and open to address issues, ideas and concerns during the supervisory process. My supervisory style is grounded in cognitive-behavioral, psychoanalytic, and psychodynamic approach; however my niche entails treating Trauma survivors, as well as Juvenile and Adult Sex Offenders. I welcome feedback from all of my supervisees as this allows me to gain an understanding of their intrinsic potential and work to fully meet their needs.

As a supervisor it is important for me to model setting boundaries and to identify strengths and weaknesses that hinders the supervisee's learning plan. As a supervisor, my goal is to address any concerns that the counselor may have, during the supervision session. While supervision is not counseling, it is important to address personal issues that may impact the counselor in training, and client relationship, or the supervisor and client in training relationship.

### **Confidentiality**

No ethical codes or legal statutes denote communication between a supervisor and supervisee as privileged. By signing this form, supervisee's consent to waiving their rights to confidentiality. Be aware that:

1. I reserve the right to discuss any supervisee that I feel is impaired with a license professional colleague to take any steps that I deem necessary to prevent harm to clients and/or others.
2. I reserve the right to consult with experts in the event that a supervisee is working with a client(s) whose presenting problem fall outside of my areas of expertise. All experts will be held to the same standard of confidentiality as I am.
3. I am legally mandated to report suspected child abuse as well as credible threats to national security. I also report suspected elder abuse.
4. I reserve the right to break confidentiality for any other reason I deem necessary in order to ensure the wellbeing of SITs, CITs, and clients.
5. In the event that a supervisee's case will be discussed with others, I will make a reasonable effort to disclose to the supervised that I will be breaking confidentiality prior to doing so. I will attempt to disclose the reasons for the breach, as well as to whom the breach will be made. I cannot guarantee that I will be able to disclose confidentiality breaches before they happen.
6. I maintain supervision files (similar to counselor's client files) which include supervision notes that are written following each supervision session.

7. Due to the nature of electronic communications I consider email, text message, voice mail, Skype, and any other electronic communications to be publicly accessible. Thus, I will not discuss specific (identifiable) client information via these means. By signing this contract supervisee agree not to communicate any identifying or protected health information to me (or others) via these means. Talking about clients in de-identified or vague ways via electronic means is acceptable.

### **Dual Relationships:**

Professional boundaries are a critical aspect of the supervisory relationship. I ask that the supervisee work with me to maintain professional boundaries by avoiding dual relationships to the extent that is possible. Given my professional roles, some dual relationships may arise. For example, I am likely to belong to the same professional organizations as supervisee. Sexual contact is never appropriate in a supervisory relationship. Friendship, business relationships, and 'hanging out' are also inappropriate.

Supervision requires a delicate balance regarding the use of consulting skills, teaching skills, and, at times, counseling skills. While I may ask supervisee to explore personal feelings, values, and biases in relation to work with clients, I am not ethically in a position to provide counseling or any mental health treatment to supervisee. Thus, I may recommend that a supervisee seek individual counseling. I may also limit supervisee disclosure as necessary, to maintain boundaries around the supervisory relationship and to prevent the supervisory relationship from transitioning into a counseling relationship.

### **Legal and Ethical Standards**

I agree to hold myself to the highest possible ethical standards. I will abide by the ACA code of ethics, the ACES Standards for Counseling Supervisors, and the NBCC code of ethics, with the understanding that federal and state laws supersede ethical standards.

By signing this document supervisee agree that they are familiar with and will abide by the 2014 ACA code of ethics as well as Michigan Statutes governing counseling.

In the event that I breach ethical standards or am not meeting a supervisee needs, supervisee are encouraged to address the situation with me first. If a supervisee does not feel safe addressing a given situation with me, they are encouraged to address the situation with their advisor or through other university channels.

I maintain my professional liability insurance policy through Allied World Insurance Company will can be provided to supervisee upon request.

## Expectations for Supervision

By signing this document supervisee agree to be on time to scheduled supervision sessions. Supervision times will be scheduled in advance. If session need to be rescheduled, contact must be made in a timely manner.

Feedback is an essential aspect of the supervisory relationship as it fosters personal growth. I expect supervisee to be open to feedback as I am. Feedback may involve discussions that feel intensely personal or that evokes a strong emotional reaction.

**Fees:** The fee for supervision is \$75 per 1 hour individual and \$50 per 1 hour group sessions, unless otherwise stated.

Supervision session may also be held via videoconferencing software: Zoom, Webinarjam, or doxy.me.

**Emergencies:** Please notify me of any emergencies or ethical issues including: breaking client confidentiality, hospitalizing a client, and legally or ethically questionable situations, as soon as possible.

**Effective Dates:** This contract is effective from the date it is signed for the duration of which supervision will be provided.

## Signature Page

By signing below you agree that you have received, read, understand, and agree to abide by the preceding four page supervision contract. You further agree that you have discussed and resolved any questions or concerns with Bridgette Montgomery prior to signing this agreement.

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**Supervisee Signature**

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**Date**

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**Supervisee Name (please print clearly)**

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**Bridgette Montgomery Signature**

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**Date**