# Joy C. Tanner, MA, LPCS, DCC

Licensed Professional Counselor Supervisor (#S9355)
Board-Certified TeleMental Health Provider (#1222)
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# Professional Disclosure Statement for Supervision

#### Qualifications

I received a Master of Arts in Professional Counseling from Liberty University in 2011. I am a Licensed Professional Counselor Supervisor (LPCS #S9355) in the state of North Carolina. I am also a Board-Certified TeleMental Health Provider (BC-TMH #1222). I have been supervising provisionally licensed counselors since 2015. I am also trained in providing distance supervision, adding convenience and efficiency to the supervision process. I sincerely enjoy training and equipping the next generation of counselors as they develop their professional identity, walking alongside them as they gain professional counseling experience, and with an emphasis on ethical and legal standards of practice.

## Nature of Supervision

My approach to supervision is founded in developmental models of supervision. Attention to the supervisory relationships and supervisory roles is critical to these approaches, requiring the supervisor to be intentional, proactive, and flexible. Supervision interventions are tailored to supervisees' developmental, cognitive, and conceptual levels, as well as the supervisees' motivation, skills, and personal attributes, while insuring the needs of the individuals being served in counseling are met. Supervision must be dynamic and include teaching, counseling, and consulting with the supervisees. It also includes review and evaluation of raw data from clinical work through live observation, co-therapy, or audio/video recordings of direct counseling experience; all of which can be done online through distance supervision methods. My supervision includes a variety of activities including interventions and techniques used with individuals in counseling, case conceptualization, professional behaviors, and the development of the counselor as both a person and a change agent.

My goal as a supervisor is to help the supervisee gain more complex and integrative assessment, conceptualization, and intervention skills. Supervision also includes goals of increased self-awareness, cultural competence, and may involve examining personal behaviors, thoughts, or feelings that are elicited by a client or situation. Supervision involves evaluation and insuring that each supervisee is ready to become fully licensed. The main goal of supervision, as in the counselor/client relationship, is to provide the best possible services and prevent harm. Goals are co-constructed and tailored to the supervisees' needs according to the individual contract created by the supervisor and supervisee, performance and experience, reason for supervision, and in accordance with current standards of practice and ethics in the field.

Both supervisor and supervisee have responsibilities in supervision. The supervisee's responsibilities are to prepare for and attend sessions, complete homework assignments, watch videotapes of counseling sessions and complete a tape critique, keep supervisor informed regarding all client issues and progress, maintain liability insurance at all times (minimum \$1M single incident/\$3M aggregate), and complete supervision record at each supervision session. The supervisor's responsibilities are to prepare for and attend all sessions, provide feedback each session and a formal evaluation at each quarter and at the end of the supervision contract, review client case notes and other materials for quality control purposes, complete supervision record at each supervision session, and maintain licensure as a clinical supervisor in NC. Other mutually agreed upon methods of evaluation will be used to effectively communicate any progress or areas of further development depending on the areas of focus during the supervision.

## Counseling Background

My counseling experience includes working with children, adolescents, adults, families, couples and groups. I have worked in both private practice and community mental health settings as an Outpatient Therapist, Intensive In-Home Team Leader, Adult Services Program Manager, and Outpatient Therapy Program Manager. Through these positions I have gained valuable experience in provision of crisis response and stabilization, as well as coordinated clinical interventions and case management for clients, their families, and natural supports within their community settings. I believe that problems have psychological, biological, emotional, social, and spiritual dimensions. My counseling approach is eclectic and client-centered, often utilizing cognitive behavioral, trauma-focused, and psycho-educational, family systems, and reality therapy approaches. I have extensive training in multiple Evidence Based Practices including Trauma-Focused Cognitive Behavioral Therapy, Systematic Training for Effective Parenting, Illness Management and Recovery, Seeking Safety, and the Resource Parent Curriculum: Parenting Children Who Have Experienced Trauma. I am also trained to provide Distance Counseling services and actively work to comply with all ethical and legal standards for privacy and security.

I have served clients with various abilities and diverse cultural and ethnic backgrounds. I believe I am a good listener, compassionate, non-judgmental, research-oriented, empathetic, encouraging, self-aware, and authentic. I also consistently strive to model and share these values with my co-workers, supervisees, and colleagues.

### Confidentiality

The issues discussed in supervision will be confidential with a few 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 a job, licensure or certification; and (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. In the case of client sessions discussed in supervision, a signed release of information is obtained by the supervisee from the counseling client in order to clearly define the role of the supervisor and the purpose of audio/video taping, live observation, and/or co-therapy.

#### Session Fees and Length of Service

Individual, dyadic, or triadic supervision will be provided at a minimum of one hour per every forty hours of professional practice. Individual supervision will be provided at a rate of \$60 per session, dyadic supervision will be provided at a rate of \$45 per person/session, and triadic supervision will be provided at a rate of \$30 per person/session. Group supervision will be provided at a minimum of two hours per every forty hours of professional practice. The fees for group supervision will be based on the specific supervisory contract, including the modality of supervision, and the purpose of the supervision. Cash, check, and credit card are all acceptable forms of payment and fees are due immediately upon receipt of invoice.

# **Emergency Contact**

It is critical to follow established protocols when faced with potential crisis situations or emergencies. All client incidents should be reported as soon as possible and at most, within 24 hours of the event, particularly if there is a diversion from any established procedures or ethical guidelines. In case of emergency, whether personal or with a client, you can reach me by phone at (919) 523-9716.

#### Complaints

I abide by the NBCC, ACA, and NCBLPC Code of Ethics as well as the CCE's Standards for the Ethical Practice of Clinical Supervision. If you are dissatisfied with any aspect of the supervision process, please inform me so we can determine if if our work together may be improved or whether a referral to

another supervisor would be appropriate. If you believe I have treated you unfairly or unethically and we are unable to solve the problem together, you may file a formal complaint against me by contacting:

> North Carolina Board of Licensed Professional Counselors P.O. Box 77819 Greensboro, NC 27417 Phone: 844-622-3572 or 336-217-6007

Fax: 336-217-9450 E-mail: Complaints@ncblpc.org

My signature below indicates tha voluntarily agree to participate ir	t I have read and fully understand the abount supervision services.	e information, and that l
Supervisee Printed Name	Supervisee Signature	 Date
	 Supervisor Signature	 