

Natasha D. Pemberton-Todd, LPCS

Conflict Coaching and Consulting, PLLC

10130 Mallard Creek Road, Suite 300, Charlotte, North Carolina 28262

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My name is Natasha Pemberton-Todd and I cultivate effective clinicians. I am pleased that you selected me to join you on your journey towards North Carolina counseling licensure through regular supervision.

Educational Background:

I received a Master's degree in Community Counseling from Andrews University in 2001. I also hold a Master's degree in Education with a specialization in Training and Performance Improvement from Capella University. This training and performance improvement specialization has greatly enhanced my counseling, administrative and supervision practice.

Over the years, I have pursued specific training in play therapy (application across age groups), trauma treatment, parent-child interaction therapy (PCIT), working with young children, disaster mental health, mood disorders, anger management, attachment, working with children of substance abusing parents/caregivers, and many other areas.

Having worked in several medium to large agencies over the years I have purposely gleaned extensively from the diverse clinical expertise of peers, clinical, and business administrators alike. The burgeoning knowledge and skills have positively impacted my passion for integrated mental health and you will find that my case conceptualization will lean heavily in this direction. Nevertheless, I am a passionate lifelong learner and will be always open to learning more about what I do not know or know little about.

MY LICENCES AND CERTIFICATIONS

I have been a licensed professional counselor (LPC) in North Carolina since 2006 and a LPC supervisor (LPCS) in North Carolina since 2012. My licenses numbers are as follows:

- Licensed Professional Counselor Supervisor License # S5225
- Licensed Professional Counselor License #5225

COUNSELING SERVICES OFFERED/THEORETICAL ORIENTATION

I have worked in various capacities and with various populations throughout my over 13 years of professional counseling experience. Since 2000 I have been providing counseling services with clients ranging from age two to adulthood via individual, family and group counseling sessions. These hundreds of sessions over the years have included treatment of the following presenting problems: attention deficit hyperactivity disorder (ADHD), sexual abuse (victims), physical abuse (victim), grief/loss, relational problems, anxiety disorders, bipolar disorder, oppositional defiant disorders, conduct disorders, major depression (children and adults), adjustment disorders and suicidality. I have also worked with young adults and older teens in developing career and life goals. I particularly specialize in working with young children (ages 0 to 5) as well as teen girls and women's issues. I have conducted most of these sessions in community mental health agency settings which have, at times, been conducted in clients' homes.

My counseling theoretical orientation is eclectic ranging from highly structured (CBT) to significantly less structured interventions (client-centered play therapy)—depending on the treatment goals being addressed as well as the client's needs. I believe strongly in first assessing the needs of the client and applying an approach that best fits with client's needs and best practice protocol. A thorough evaluation

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determines the approach that is right for the client. My services are provided on an individual, family or group basis as is clinically appropriate.

SUPERVISION TRAINING AND EXPERIENCE

In preparation for my role as a board-approved supervisor, I have completed over 45 hours of continuing education hours focused on supervision theory and practice. I am always looking for opportunities to increase my clinical and supervision skills through reading, consultation, and attending educational workshops.

In my previous roles as an outpatient department manager and assistant to the clinical director of a community mental health agency, I participated in and led weekly inter-disciplinary team (IDT) to provide direction to clinical staff on difficult cases. IDT also included assisting provisionally licensed clinicians in developing their clinical judgment and skills through regular feedback, easy access for staffing cases, and monitoring of outcomes.

THEORETICAL ORIENTATION TO SUPERVISION

I believe supervision is the mirror by which one uses reflection to develop into a competent professional counselor. Hence, it is imperative to utilize your practice activities for processing and development. My approach to supervision pulls from a variety of models and as such lends toward being integrated. I choose this approach because, as with my counseling practice, I prefer to utilize the model that will work best for the particular supervisee. Nevertheless, I have a definite lean toward developmental models of supervision.

I believe that supervisees need supervisors in varying capacities as their skills develop. Thus, you may find that in the initial stage of the supervision relationship there will be a focus on relationship-building and goal setting, inclusive of developing a working contract. In the next phase of the relationship, my role will move to that of counselor and teacher whereas you will be expected to regularly introspect your skills, techniques, theoretical underpinnings and transference issues. These will be processed during the supervision hour. At the third and fourth stages, my role will move more towards a consultative and reflective role as your skills sharpen. During these last two phases you will be expected to take more initiative in your own development.

At all of these stages you will be expected to provide cases for staffing. **I will request video and/or audio recordings of sessions.** I may also sit in on some of your sessions, especially during the initial stages of our relationship, and conduct **co-therapy** as appropriate. **Direct observation** via a one-way mirror is expected to be utilized as the practice expands but will be requested to occur with some of your clients as appropriate. Our regular supervision time will occur face to face individually and/or in a group with the option of additional support by phone and/or email. Synchronous technology media may also be utilized as appropriate.

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Supervision Foci:

Our supervision journey will focus on the following:

- Developing competence in standard mental health assessment and treatment modalities while encouraging a lifelong love of learning and growing within the field
- Gaining a thorough underpinning of theoretical orientations and their practical application
- Developing your clinical skills in assessment, treatment planning, implementation and documentation.
- Overseeing your development of solid ethical decision making in the clinical setting
- Modeling and promoting appropriate ways to work with issues of multicultural difference in the counseling setting.
- Developing your self-awareness and ability to discern your issues to sort through in clinical supervision versus the client's issues so as to avoid countertransference in therapy. In cases where such issues negatively impact or stymie work with clients I will instruct that you obtain your own therapy to sort through these areas.
- Assist in alleviating your professional performance anxiety while increasing your professional identity and areas of expertise.
- Facilitate the alignment of your professional development with your longer range professional goals

EVALUATIVE PROCESS

The evaluative process for supervision will take place as follows:

- Quarterly evaluation consisting of the *Therapist Evaluation Checklist* and/or a related tool will be utilized to chart your development through this process
- A series of effective summative evaluations to the North Carolina Board of Licensed Professional Counselors on a quarterly basis
- A formative process of evaluation consisting of regular feedback based on cases staffed and observations I make via the modes mentioned above
- *Interpersonal Process Recall* interventions will be utilized as recordings are reviewed
- You will be invited to periodically evaluate my performance as clinical supervisor using an objective measure. This measure will typically be administered during group supervisions to allow for voluntary anonymity.

LIMITS OF CONFIDENTIALITY AND PRIVILEGED COMMUNICATION

Please note that as with the counseling relationship, there are limits to the confidentiality of the supervisory relationship. These will typically revolve on issues related to client welfare. Additionally, there will be occasions when I will be required to provide relevant information regarding your readiness for independent practice. There may also be occasions where ethical conflicts will need to be staffed with other senior therapists for advisement.

Please note that engagement in group or triadic supervision makes guarantee of confidentiality tenuous; however, know that I will do everything in my power to emphasize and maintain the confidentiality of our sessions.

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COST OF SUPERVISION

*Individual Supervision.....\$85 per hour

**Triadic Supervision.....\$80 per hour per person

Group Supervision.....\$75 per 2 hour session

Check or cash are accepted.

Visa, Mastercard, or PayPal are accepted on the company's website or in person.

*Note that you will not be eligible for triadic supervision for the first 13 supervision sessions. This is to establish the underpinnings of a strong working relationship, provide you with focused support and allow for privacy while you develop in key growth areas thereby significantly reducing professional performance anxiety.

**Triadic Supervision rates are close to individual supervision rates as they are credited as individual sessions and the supervisor's preparation is twice of that as for an individual session.

EMERGENCY CONTACT

In the event of emergency, I may be reached by 410-262-8409 or npt@conflictcoaching.co

ETHICAL CONSIDERATIONS

As a Licensed Professional Counselor and a board-approved supervisor, I am bound by the Codes of Ethics established by the American Counseling Association as well as the Center for Credentialing and Educator's Approved Clinical Supervisor (ACS).

SUPERVISEE'S RESPONSIBILITIES

- Schedule and attend at least one supervision session per 40 direct and indirect hours worked (1:40)—if working for an agency
- **NOTE:** If you are in a private practice or in a setting where you are the only clinician with limited or no clinical hierarchy, supervision is expected to occur weekly even if the hours worked are below 40 hours.
- Maintain liability insurance at all times (minimum \$1M single incident/ \$3M aggregate)
- Provide supervisor with copy of current liability insurance
- Provide supervisor with official (NCBLPC) copy of approved clinical hours
- Submit audio/visual recordings of your sessions regularly.
- Complete homework or assignments.
- Implement supervisor's directives
- Keep supervisor informed regarding all client issues and progress
- Complete supervision log at each supervision session
- Alert supervisor, in a timely manner, if running late for a session
- Check emails and other communiqué regularly
- Prepare for supervision by:
 - Completing homework assignments
 - Reviewing, knowing or having all relevant information for the case(s) to be staffed
 - Following up on recommendations made in previous sessions
 - Obtaining recordings of your sessions for supervisor's review as applicable
 - Obtaining samples of your documentation for supervisor's review as applicable

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--Have an agenda for supervision sessions; share this at the beginning of session

SUPERVISOR'S RESPONSIBILITIES

- Maintain a confidential record of our sessions containing our contractual agreement, session notes, session logs, evaluations and other documents needed to verify our work together.
- Attune to issues of diversity within our relationship as well as the relationships between you and your clients
- Be available to you in the case of emergency or to provide you with back-up in the event that I would be away for an extended period of time
- Prepare for and attend all sessions. Preparation for sessions will include:
 - Reviewing supervisee's case notes and other documentation if supplied in advance
 - Watching video or audio recordings of counseling sessions and completing a critique if such is supplied in advance
 - Researching information on various clinical issues pertinent to your work
- Question the counselor to justify approach and techniques used
- Ensure that ethical guidelines and legal statutes are upheld.
- Intervene directly if client welfare is at risk.
- Focus on BOTH your clinical and your professional development
- Provide clinical feedback at each session.
- Complete supervision record at each supervision session.
- Complete a formal evaluation at the end of each quarter and at the end of the supervision contract.
- Maintain licensure as a clinical supervisor in NC and status as a NBCC approved clinical supervisor.
- Engage in ongoing clinical and supervisory development

COMPLAINTS PROCEDURES

At times disputes may arise between supervisors and supervisees which they find difficult to resolve between themselves. In such cases, you may lodge complaints with the agency's Executive Director, Dr. Carlos Todd. In addition to the office number listed above, he may also be reached via email at ctodd@conflictcoaching.co. Should redress not be satisfactory then a written complaint can be filed with:

North Carolina Board of Licensed Professional Counselors

P.O. Box 77819 Greensboro, NC 27417

Telephone: 844-622-3572 or 336-217-6007 | Fax: 336-217-9450

Email: Complaints@ncblpc.org

<http://www.ncblpc.org/license-info/complaints>

By your signature below, you are indicating that you read and understood this statement, and that any questions you had about this statement were answered to your satisfaction. By my signature, I verify accuracy of this statement and acknowledge my commitment to conform to its specifications.

Printed Name of Supervisor

Printed Name of Supervisee

Date and Signature of Supervisor

Date and Signature of Supervisee