



Centrepoint Psychotherapy

Your space for Harmony, Balance & Growth

Professional Disclosure Statement for Clinical Supervision

Yael (Joelle) Lazar, MA, RCC, DC
Centrepoint Psychotherapy
659A Moberly Rd.
Vancouver BC, V5Z 4A4

604-788-2803 (Work Cell)
joelle@centrepointpsych.com

Educational Background and Credentials

MA	Master of Counselling	City University	2013
BA	Bachelor of Arts	McGill University	1994
Registered Clinical Counsellor (RCC)		#11405	
RCC-Approved Clinical Supervisor (ACS)		Pending	
Divorce Coach			

Counseling & Psychotherapy Background

At the onset of my counselling career I worked for two not for profit community health agencies where I provided support for individuals with anxiety, depression, trauma, complex grief, and problematic substance abuse. I also worked with couples and families navigating parenting, and mental health challenges. I founded Centrepoint Psychotherapy in 2014.

My approach to psychotherapy is informed by attachment theory, psychodynamic and relational psychoanalytic principles, the physiology of trauma, mindfulness and compassion. My focus is to continually strengthen my case conceptualization, psychodiagnosis, and response to intervention skills with the use of Client video. I believe that positive change takes place when I align with the healing force in my Clients, and their will to resolve self destructive patterns that limit their ability to live their lives to the fullest.

Supervision Background

In the earlier part of my career I received Gestalt and AEDP focused supervision. Since 2017 I've benefitted from ISTDP supervision with peers, in group supervision with more Senior ISTDP Therapists, and in ISTDP core training. More recently I receive supervision in relational psychoanalysis, and Integrative ISTDP which is reflected in my supervision approach.

Supervision Approach

My focus is to provide the optimal level of support, training, and encouragement to help my Supervisees develop essential psychotherapy skills, as well as confidence to be their authentic self.

In my view effective Supervision requires flexibility and adaptation. Toward this end I draw from a post-modern approach in which my Supervisee and I develop case conceptualization and clinical interventions through a process which includes connection, collaboration, and co-construction.

Throughout this dynamic process I move fluidly between the role of Teacher, Supporter, Colleague, Advocate, and Consultant based on my Supervisee's needs.

My priority and responsibility is to foster Supervisee competence, and safeguard the wellbeing of their clients.

Drawing from the Seven-Eyed Model of Supervision, I attend to the relational and systemic dynamics that unfolds between between the client and my Supervisee (transference and countertransference), between my Supervisee and myself, and the interplay between the two.

In my supervision work I aim to listen well so I can get an in depth understanding of my Supervisee's level of experience, needs, and goals in order to provide a structure that facilitates growth and skill development.

Drawing from the Integrated Developmental Model of Supervision, I assess my Supervisee's development based on these eight domains:

1. Theoretical orientation
2. Client problem conceptualization
3. Treatment goals and plans
4. Interpersonal assessment
5. Intervention skill competencies
6. Assessment techniques
7. Individual differences
8. Professional ethics

Goals of Supervision

The main objective of Supervision is to enhance the Supervisee's clinical knowledge and abilities so they can feel more confident, and can better serve their clients and feel more fulfilled in their therapeutic work.

I am attentive to Supervisee development in key areas of competence, such as:

- enhanced listening skills
- clinical thinking skills, including the ability to reflect on clinical material
- attention to transference signals to guide response to intervention
- self awareness of countertransference to form a hypothesis about the therapeutic relationship
- how to spot signs of the unconscious therapeutic alliance (UTA)
- applying attachment theory and relational concepts to the client to deepen understanding of clinical process and effective intervention.
- psychodiagnosis of client anxiety (Striated, Smooth, Cognitive Perceptual Disruption/CPD), and their system of resistance (Isolation of Affect, Repression, or Projection).
- awareness of ethical issues and cultural competence.
- tailoring interventions to the client based on client's level of anxiety, and system of resistance.

- Skill development in therapeutic approaches to enhance Supervisee therapeutic strengths, and competence (EFT/PACT with couples, IFS, Gestalt, Mindfulness, Self-Compassion, Attachment and Body-Centered interventions, etc.)
- Self-of-the-Therapist work - use of genogram to highlight family of origin themes, and POTT (Person of the Therapist Supervision Instrument) will be offered to promote self reflection, and awareness of signature themes that may impact Supervisee's therapeutic potential.

Supervisee Responsibilities:

Supervisees are highly encouraged to obtain Clients consent to be videotaped (with Client visible in the recording), and to bring client video to supervision as this provides the most accurate data with which to develop a Supervisee's counselling skills.

Supervisees will communicate when issues arise with clients, in the supervisory relationship, and about health issues that pose a threat to their ability to fulfill the needs of their clients.

Supervisor Responsibilities:

I will remain cognizant and sensitive to the power differential between myself and my Supervisee, and cultivate an atmosphere where the Supervisee feels free to be open and introspective in approaching personal issues that surface in the context of their work.

Should Supervisees experience distress in response to their work with Clients that is beyond the scope of a Supervisory relationship, I will make appropriate referrals to qualified professionals.

I will provide training in assessing risks to Client well being (Suicide/Self Harm), how to avoid legal issues, and consultation in navigating ethical issues.

Evaluation Procedures

Supervision will be tailored to meet Supervisee goals, and support the Supervisee to meet the standards of practice and ethics in the field.

Evaluating the Supervisee's counselling work is essential to safeguard the wellbeing of clients. Adherence to the ethical standards of the BCACC, and any supervisory directives is expected and a basis for evaluation. The supervisee will be provided copies of written ongoing and summative evaluations.

Supervisees will be routinely assessed and given feedback, and any performance issues will be addressed in a timely manner.

In the event that a Supervisee demonstrates behaviour that is negligent of Client welfare, or puts Clients wellbeing at risk, I will communicate my concerns clearly, and develop a mutually agreed upon plan to remediate and resolve the issues. Wherever possible, opportunities for remediation, will be provided via written contract and procedures of due process, where permitted by law. If these efforts are not appropriate, or don't resolve the issues, I will be obligated to exert my legal responsibility to protect the public, and bring my concerns about Supervisee competence to the appropriate regulatory bodies.

Confidentiality

I will keep the content and process of supervision sessions confidential, with a few noted exceptions: (a) the client's welfare is in danger of harm, (b) a written release is provided by the Supervisee, or (c) the contract for supervision provision requires communication with a third-party (university supervisor, licensure board, etc.). In these events, effort is made to inform the supervisee of the disclosure.

Fees

The supervision fee is based on the specific supervisory contract, including the modality of supervision (individual or group) and the purpose of supervision. My current fees for sixty and ninety minute supervision sessions may be found on my Janeapp booking page <https://centrepoinpsychotherapy.janeapp.com/>.

Emergency Situations

In the event of a client emergency, supervisees will follow the client emergency protocol delineated in our Supervision Contract. In case of emergency, Supervisees must either contact 911, or a family member of the Client to take the Client to the nearest hospital emergency department, or the Access and Assessment Centre (AAC) located at 803 W 12th Ave, Vancouver, BC V5Z 1M9, telephone number (604) 675-3700. It is critical that Supervisees follow established protocols when faced with client emergency or ethical dilemma, and any incidents should be either discussed or reported in a reasonable timeframe, particularly if there is a diversion from established procedures. I can be reached via email, or on my cell phone during regular office hours.

Ethical Standards

I adhere to the BCACC Code of Ethics. Supervisees are expected to adhere to ethical practice and legal standards of the counseling Code of ethics of the professional association to which they belong.

Plan for Resolving Disagreements

If a supervisee is dissatisfied with my work, they are encouraged to address the situation with me openly and directly.

Dissolving the Supervision Contract

If either Supervisor or Supervisee wish to dissolve the supervision contract, they will make every effort to communicate this to each other in person or on the phone, and provide a clear, thoughtful explanation for this decision.

If desired, Supervisor will provide contact information for alternative Supervisors.

Joelle Lazar, MA, RCC #11405, ACS

Supervisee

Date