

## **OCTC SUPERVISORY INNOVATIONS**

## THE ERA OF SUPERVISION

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First we learned how to do CBT. In this country that process started in the early 1980s, and it has continued ever since. Then we learned how to teach others to do CBT, starting about 10 years later. The first OCTC Diploma course was run in the early 1990s. Then we all thought more deeply about how to apply the theory of CBT to the process of supervision.

So the 'era' of supervision began, probably shortly after the turn of the century, and questions about it drifted more strongly and more frequently to the centre of attention especially for those involved in teaching as well as doing CBT. This was when it became apparent that the rate at which access to CBT could be increased was limited by the small number of available supervisors.

Remembering that CBT 'pioneers' in this country had no available supervisors was helpful. How did these beginners in the field learn to reflect on their CBT practice? There are numerous answers: they generalized from supervision of other treatment methods; they used each other and, either in pairs or in larger groups, created opportunities for peer supervision or, working alone, they read widely, and they used the principles of reflective practice. They listened to their own recordings. They went to conferences, and these started to arrange more practical workshops. In every case they built their expertise on an understanding of the theory on which CBT is based. In my view formulation work and supervision have much in common. They both are firmly rooted in familiarity with the principles of CBT, both with respect to style and technique. Neither process works well without a thorough understanding of the underlying theory.

## The ERA of supervision

So the ERA of supervision, the acronym, was invented as a reminder of the links between principles and practice as applied to the process of supervision.

**The E stands for Expertise**. It provides a reminder to supervisors to think about how they use their expertise in supervision: e.g. using a Socratic and collaborative style, being explicit, giving and getting feedback, using agendas, providing information and suggestions only

when they are needed and so on. The purpose is to help supervisors think about how best to use their expertise so as to meet the needs of individual supervisees and foster their development as therapists. The assumption is that their own skills as therapists will help them to guide discovery, and to attend to the content, the procedure and the process of therapy. Their expertise will help them do the same things during supervision, and also help them to recognize and to acknowledge the current expertise of supervisees.

The R stands for Responsibility. The principle being referred to here is, simply, that responsibility for the outcome of supervision is shared. So supervisors and supervisees should both play an active part in the process: in the way it is set up, goals are agreed, meetings are structured, and content is decided. Mutual feedback enhances mutual responsibility, and fosters mutual respect. Responsibility is unlikely to be being shared when one person is doing all the talking.

The A stands for Assumptions. Assumptions we know from theory and from practice are closely linked to behaviours. They can be either helpful or unhelpful. Examples of unhelpful assumptions for supervisors to hold might be, "I have to know everything", or "I should always have an answer" or "I should never be at a loss - or tired - or confused". It can be extremely useful to encourage supervisors to identify any unhelpful assumptions that could interfere with their practice as supervisors. This work can then be followed up by working on developing, and behaving in accordance with assumptions that could be more helpful. Examples of more helpful assumptions for supervisors to have might be: "I don't know everything and I can ask questions / learn from my supervisee / look things up."; "I will get confused at times and this is my cue to pause for clarification."

A dynamic interaction. In practice the use of expertise, the balance of responsibility, and the activation of helpful or less helpful assumptions will vary over time as suggested in the diagram below. Listening to tapes of supervision sessions can provide a useful prompt to keep all three in mind, and to help to ensure that none of the three principles is forgotten, or outweighs the other.

