

## OCTC SUPERVISORY INNOVATIONS

### PRACTICE OF SUPERVISION (POS)

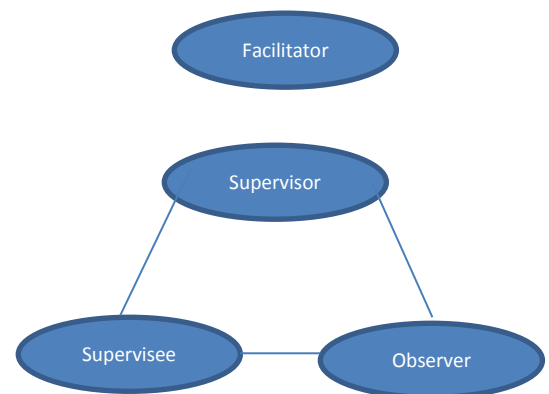
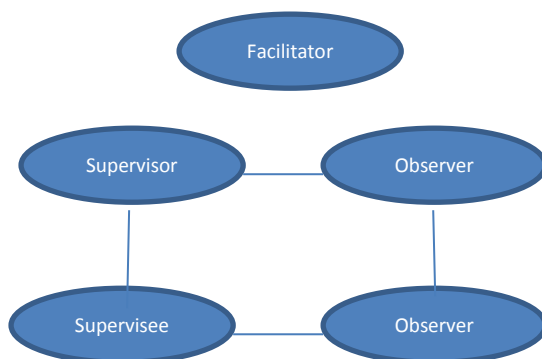
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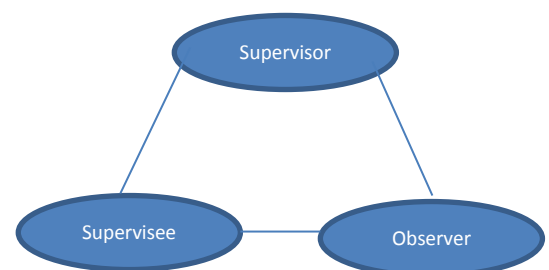
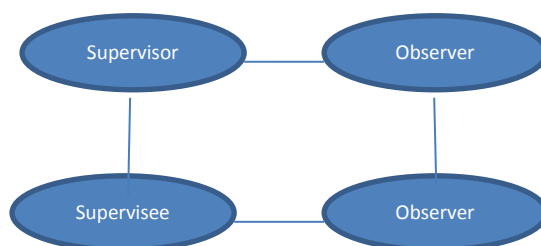
As part of its CBT Supervision training and skills maintenance, OCTC developed “Practice of Supervision” sessions or “PoS sessions”. These half-day exercises facilitate real-life supervision practice with immediate feedback and an emphasis on learning from reflection on feedback and self-appraisal. Three or four supervisors have the chance to receive supervision on supervision practice, whilst also getting supervision on a real clinical issue. These sessions have proved very popular and have often been cited as the most valuable aspect of the supervisor training courses run by OCTC.

PoS groups usually comprise 3 or 4 active participants plus or minus a facilitator:

- (i) **With an experienced facilitator** who comments on the whole process: this is particularly fruitful when supervisors are in training and can benefit from the observations of an experienced CBT supervisor who can comment on content and process issues. Two possible configurations are shown below.



- (ii) **Without an experienced facilitator:** useful for peer supervision of experienced supervisors.



Each active participant has an opportunity to receive and to give brief clinical supervision, and an opportunity to be an observer who can also offer feedback. Each individual supervision session lasts from 20 to 35 minutes and is immediately followed by feedback which (about 15 minutes). A half-day session might look like this:

3-person group plus facilitator:		
1.30 - 2.20	Person 1 (supervisee)	Person 2 (supervisor)
2.20 – 3.10	Person 2 (supervisee)	Person 3 (supervisor)
Break		
3.30- 4.20	Person 3 (supervisee)	Person 1 (supervisor)
4.20-4.30	Reflection and feedback on the entire session	
4-person group plus facilitator:		
1.30 - 2.10	Person 1 (supervisee)	Person 2 (supervisor)
2.10 – 2.50	Person 2 (supervisee)	Person 3 (supervisor)
Break		
3.05- 3.45	Person 3 (supervisee)	Person 4 (supervisor)
3.45 – 4.25	Person 4(supervisee)	Person 1 (supervisor)
4.25-4.30	Reflection and feedback on the entire session	

We give the following guidelines to participants:

**As a supervisee:**

You will need to have prepared a supervision question and to have considered the amount of background information that is necessary to present to your supervisor: you can only present a brief introduction so carefully consider the minimum that is necessary. Your supervisor can always ask for additional information. Don't forget that you can use the Padesky 'Consultation worksheet' if you think that it would be helpful in preparing your question. If you decide that it is relevant, you can bring material such as a brief formulation diagram. The onus on you is to prepare yourself to get the most out of the supervision experience and later to feedback on that experience. In feeding back, you are encouraged to first state what was helpful about the experience and then to state what might have enhanced it further.

*Remember that you will need to get consent from the patients that you bring to supervision.*

**As a supervisor:**

You will have the opportunity to offer brief supervision on a real clinical issue and then receive feedback on your practice from your supervisee, observers and the group facilitator. You will have an opportunity to reflect on the feedback and to consider how you might continue to develop you practice in the light of it. Ideally, you will then have a new or revised goal for your development as a supervisor.

**As observers:**

You will watch and comment on the *supervisor's performance*, rather than commenting on the issue or question that was brought to supervision. You are not expected to be a supervisor by proxy, you will be commenting on the *supervisory practice* of the supervisor. Remember to offer constructive feedback as you are encouraging helpful learning. Aim to state one or more things that you felt went well and to offer one or two suggestions for making the supervision even better.

**Facilitators:**

You will referee if necessary and add pertinent suggestions and observations that the rest of the group have not offered. Facilitator comments should emphasise the *supervisor's practice* rather than the clinical content of the supervision session – although the two are not mutually exclusive. In particular facilitators should make sure that enquiry is made re:

- What was helpful / facilitating about the supervision?
- Was there anything that the supervisor or supervisee would have liked to have been different?
- What have the supervisor / supervisee/ observer learnt from the experience and how will this inform their future practice?

Within OCTC we use PoS as a training medium in our supervisor training courses and as a development exercise for experienced supervisors. The format lends itself well to peer supervision-of-supervision (SoS) sessions, offering a productive structure for the group.