What makes an effective supervisor? What is good CBT supervision? How can CBT supervisors best facilitate the development of those they supervise, and how can qualified CBT therapists learn to become good CBT supervisors? These are some of the questions we seek to address in this book.

In our work as CBT trainers, one of the first questions we ask those who approach us for supervision is not only what they are seeking from us, but also what they believe makes a good CBT supervisor. Working with many practitioners over many years, we have been struck by the similarities in the responses received, which express a belief that a CBT supervisor will ideally:

1. Convey human qualities of relating, such as warmth, curiosity and appropriate humour, that are likely to enhance a sense of safety and trust.
2. Demonstrate a genuine interest in the clinical work of the supervisee.
3. Communicate an authentic interest in, and commitment to, the development of those they supervise.
4. Be enthusiastic about CBT and how this can facilitate change in people’s lives.
5. Be a solid, reliable and consistent presence during the supervisee’s learning experience, who both supports and challenges in order to foster therapist development.
6. Be appropriately transparent in motivation for the use of specific interventions.
7. Provide regular feedback.
8. Possess subject matter expertise, and make explicit use of the knowledge- and evidence-bases of CBT in the service of supervisee development.
10. Be an effective trainer.

Although there may be other criteria you would include, this confection of ideal qualities highlights two critically important points about CBT supervision: namely, that it is a complex undertaking characterized by multiple roles and activities, and that providing consistently high-quality CBT supervision is likely to be a challenge!

What do we know about CBT supervision?

Supervision is widely regarded as playing a vital role in the quality control of psychotherapies, referring to, ‘...a formal, independent process of reflection and review which enables practitioners to increase individual self-awareness, develop their competence and critique their work’ (Lane and Corrie, 2006: 192).

Within CBT, supervision is deemed to be an essential component of therapist development and, more broadly, has been described as the ‘signature pedagogy’ of the mental health professions (Barnett et al., 2007). However, while elevated to the heart of effective and ethical practice, our actual knowledge of what represents ‘optimal’ CBT supervision, the range of competences and skills needed to supervise effectively and how to adapt the style and approach of supervision to meet the needs of individual supervisees remains limited. There is currently little substantive guidance on what competent CBT supervision entails and how best to deliver CBT supervision, and a paucity of information on how supervisors should go about developing the prerequisite knowledge and skills to become effective in this domain of professional practice.

This lack of clear guidance is not specific to CBT. Reviewing the supervision literature as a whole, Bernard and Goodyear (2014) note that while there is a well-established body of knowledge concerning the development of those receiving supervision, far less attention has been given to the development of those providing it. The professional practice literature has not kept pace with the widespread official endorsement of supervision as a primary vehicle for therapist development and, as argued by Milne and James (2002), the field of CBT now needs to address this.

Developing a thorough understanding of the requisite competences, knowledge and skills underpinning CBT supervision is critically important for a variety of reasons. These include:
1. As the lead professional body for the practice and theory of CBT in the UK, the British Association for Behavioural & Cognitive Psychotherapies (BABCP) will only accredit therapists who can demonstrate that they receive regular CBT-focused supervision.

2. The increasingly diverse clinical populations for whom CBT is recommended, as well as the extension of cognitive and behavioural principles into different but related areas of professional activity (for example, the emergent field of coaching psychology), has resulted in a proliferation of concepts, models, procedures and techniques that practitioners must learn to navigate effectively. High-quality CBT supervision across this expanding body of knowledge is critical to ensuring that practitioners can remain abreast of the knowledge and skills they need to offer their clients an optimal service.

3. The advent of the UK Government’s initiative Improving Access to Psychological Therapies (IAPT; Department of Health, 2008) has resulted in closer scrutiny of the supervision arrangements that need to underpin the development of CBT competences. As a national initiative that aimed to support Primary Care Trusts in implementing National Institute for Health and Clinical Excellence (NICE) guidelines for people suffering from depression and anxiety disorders, IAPT has trained a new workforce of cognitive-behavioural therapists, all of whom require supervision to deliver CBT-focused interventions to offer patients a ‘realistic and routine first-line treatment’. Central to the Government’s mental health strategy set out in the White Paper, *No Health without Mental Health* (Department of Health, 2011), was completing the nationwide roll-out of IAPT with further investment to extend access to empirically-supported psychological therapies to children and young people, older people, and those with long-term physical or mental health conditions. Supervision has remained central to the governance of CBT in this context.

4. There is a growing recognition that professional ‘survival’ is tied to our commitment to remain informed and justify our practice (Guest, 2000). Increased public expectations of what psychological interventions can offer, coupled with a challenge to the traditional notion of the professional as the sole source of expert knowledge, has resulted in an increased emphasis on credentialing and state regulation of the psychological professions (Lane and Corrie, 2006). Supervision has a critical role to play in enabling practitioners to justify the services they deliver and reassuring the public that appropriate quality assurance mechanisms are in place.

5. One of the most significant contributions of CBT to the field of psychotherapy has been its allegiance to the scientist-practitioner model (see Lane and Corrie, 2006, for a contemporary interpretation of this) in which CBT research and practice have mutually shaped the development of knowledge and its translation into the clinical practice setting. The historical dearth of investigative interest in CBT supervision – in terms of theories and research that can support the systematic development of this area of professional practice – is at odds with the values
underpinning CBT itself and is unsustainable in a current professional climate that places a strong emphasis on empirically-supported interventions (Reiser and Milne, 2012).

These, among other, developments have led the competences and skills required to deliver CBT supervision to become an increasing focus of both clinical services and training providers. This has been evidenced by the development of a Supervision Competences Framework (Roth and Pilling, 2008a), as well as the option to pursue Supervisor Accreditation through the BABCP. However, there remains a lack of formal guidance on how supervisors can develop the required competences and a virtual absence of standardized methods of assessment for providing supervisors with accurate and meaningful feedback on their work. The gulf between what is expected and the knowledge that is available poses a significant challenge to those practitioners seeking to provide (or indeed receive) high-quality CBT supervision, as well as for services wishing to commission and organize effective CBT supervision for their clinical staff.

Who is this book for?

This book seeks to meet the needs of an increasing number of practitioners who are required to provide CBT supervision in a wide range of contexts, for therapists who are working with an increasingly diverse range of clients and clinical presentations. It is intended for those who, through choice or of necessity, find themselves providing CBT supervision and who wish to add to their armoury frameworks, models, tools and strategies to enhance their effectiveness.

Our primary aim is to meet the learning and development needs of CBT supervisors operating in ‘real world’ contexts where the evaluation of supervisee (and supervisor) competence may increasingly serve multiple and potentially conflicting agendas. We hope, therefore, that the book will be useful for a wide range of professional groups, including:

- Those starting out in their supervisory careers, who are trying to assist therapists in learning particular CBT approaches and who are in effect operating within an ‘expert–apprentice’ role.
- Experienced CBT practitioners offering supervision to other experienced clinicians who seek to refine their professional practice.
- Those who are working with colleagues as peer supervisors in dyad or team contexts.
- CBT supervisors who are increasingly asked to work with non-CBT practitioners and who are, therefore, having to function outside their comfort zone in order to present new perspectives on clients’ needs.

This book is also intended for those in higher education settings who are providing substantive trainings or workshops on how to deliver CBT
supervision and who want some guiding principles for the development of course materials. Finally, we have sought to give a voice to those receiving CBT supervision and who want to learn how to capitalize on the learning opportunities provided, as well as discover the criteria that will be guiding their supervisors’ thinking and actions.

Consistent with our primary aim we do not attempt to provide an exhaustive review of the supervision or CBT literatures. Rather, we draw selectively on ideas that appear to have direct practical relevance in order to provide a means through which CBT supervisors can, independently, work towards honing their craft. We do, however, assume that readers will have a good working knowledge of the concepts, theories and techniques of cognitive and behavioural therapies. Believing that the field provides a sound basis for learning and development, we also assume that the principles and methods that underpin CBT are also relevant for CBT supervision. For this reason, we often draw parallels between the two activities and use cognitive and behavioural concepts to elucidate aspects of the supervisory process.

An overview of the book: Introducing the PURE Supervision Flower

A function of this book is helping you decide where you wish to direct your energy at this point in your supervisory career. Supervision, like therapy, is a complex, multifaceted intervention that defies simplistic categorizations and definitive formulae. There are multiple tasks that a supervisor undertakes and many ways in which the process can unfold – some intended, some unintended – as a function of the type of CBT being practised and the context in which supervision takes place. How, then, can a book such as this do justice to the multiple forms of CBT supervision that exist while equipping you with ideas and methods that you can readily ‘import’ into your practice without elaborate instruction or training?

Our response to this challenge has been to develop an organizing framework to help you navigate the different sections of this book and the individual chapters therein. We term this organizing framework the ‘PURE Supervision Flower’ which is illustrated in Figure 1.

The PURE Supervision Flower is not offered as a distinct model of CBT supervision. Rather, it is a visual heuristic for assisting supervisors (and those who train them) in identifying specific areas of skill that may need to be a focus of attention or refinement.

We have chosen the concept of the flower as a basis for our heuristic as this is commonplace in CBT as a means of illustrating maladaptive (‘vicious flower’) and adaptive (‘virtuous flower’) maintenance cycles and so is likely to be familiar to all CBT practitioners.

Figure 1 illustrates that the PURE Supervision Flower has 12 petals. Each ‘petal’ is concerned with an area of practice that, in our experience,
tends to emerge as a source of reflection, dilemma or concern, and for which CBT supervisors typically seek guidance and support. Thus, each ‘petal’ denotes a specific domain of activity which the CBT supervisor needs to master in order to provide an optimal learning experience. These 12 domains of activity can be grouped into four classes of activity, indicated by the acronym ‘PURE’:

- **Prepare** (for CBT supervision: Part I, Chapters 1–3)
- **Undertake** (CBT supervision: Part II, Chapters 4–6)
- **Refine** (your CBT supervision: Part III, Chapters 7–9)
- **Enhance** (your approach to CBT supervision: Part IV, Chapters 10–12)

The content of the book is organized around the PURE Supervision Flower as follows:

**Part I** focuses on preparing for supervision [the Prepare component of the PURE Supervision Flower] in which we identify what needs to be in place in order to establish an appropriate, effective and ethical basis for
CBT supervision. Part I comprises three chapters that enable you to identify and work with those factors that provide the foundations of any supervision arrangement.

**Chapter 1** enables you to reflect on the personal and professional values that shape your beliefs about, and approach to, supervision. CBT is now widely regarded as comprising a broad range of scientifically grounded approaches, rather than a single school, theory or method. There are ongoing debates and developments within the family of CBT approaches, which have implications for the practice of CBT supervision as both practitioners and supervisors need to ‘situate’ themselves within the range of approaches available. This chapter will help you reflect upon this diversity, consider where you locate yourself within this conceptual landscape and identify some of the factors that have shaped your position.

Having established the values that underpin your approach, **Chapter 2** supports you in thinking about the context in which supervision is provided. CBT supervision is provided in a range of settings that span primary care, secondary mental health care and specialist health care settings as well as a wide range of private and public sector services. Additionally, supervision is increasingly organizationally mandated and embedded, and supports methods of service delivery that are themselves evolving. This chapter helps you develop a clearer understanding of the current and emerging contexts in which CBT supervision is delivered, and offers ideas on how best to manage the opportunities and pressures to which these contexts can give rise.

Drawing on the material of chapters 1 and 2, **Chapter 3** examines how to develop a supervision contract for the work that is to take place. The importance of establishing appropriate objectives, selecting an appropriate supervision ‘methodology’ and clarifying the methods of evaluating practice to be used are discussed. We also identify some of the common pitfalls in the contracting phase of supervision and offer guidance on how to avoid them.

**Part II** examines the delivery of CBT supervision (the Undertake component of the PURE Supervision Flower). In Part II, we examine the specific content and tasks of CBT supervision. This includes how a supervisor’s values and theory of supervision are expressed in what is actually delivered. Part II comprises three chapters that enable you to identify and work with those factors that facilitate the development of those whom you supervise.

In **Chapter 4** we take forward the frequently endorsed position that the practice of CBT supervision should in many respects mirror the practice of CBT itself. We focus on how CBT supervisors can usefully structure their sessions and develop a supervisory style which is an expression of the CBT approach employed.

**Chapter 5** considers the range of possible supervisory interventions that can be drawn upon to provide effective CBT supervision and that attend to the development needs of supervisees. A clear implication of the notion that good CBT supervision should mirror the practice of CBT itself
CBT Supervision

(whichever version of CBT is being embraced) is that a broad range of supervisory methods should be used, taking into account the strengths and needs, developmental level and learning style of the supervisee. We consider what some of these methods might be in the context of an increasing focus on supervision as a vehicle for the development of specific competences.

Chapter 6 examines the central issue of how to assess supervisee competence and deliver feedback based on your evaluations. We offer some ways of undertaking this often challenging task, identify common obstacles to the effective delivery of feedback and provide recommendations on how to hone your approach.

Focusing on the content of supervision must be balanced with managing the process of supervision. Supervisors typically have to act as ‘gatekeepers’ as well as educators and mentors and, as such, are required to meet the needs of multiple stakeholders. This introduces a ‘policing’ function that can create tensions in the supervisory relationship.

Part III focuses on managing the supervision process [the Refine component of the PURE Supervision Flower] where we consider some of the process issues that can arise and which need addressing to ensure that supervision remains a productive learning environment. Part III comprises three chapters as follows:

In Chapter 7, we consider the role of the supervisory relationship in facilitating therapist development. We examine ways in which the relationship can be conceptualized in order to better balance the managerial, educational and mentoring functions of supervision, and provide recommendations on how to refine your relationship building in this context.

Chapter 8 explores the important issue of power in supervision, which unfolds in complex ways as our work is applied to increasingly diverse populations. We suggest that cognitive-behavioural supervisors need to be aware of the relevance of power in the practice of CBT and possess competence in working with power issues as they arise in supervision.

Chapter 9 explores some of the more potentially uncomfortable aspects of CBT supervision – namely, when the process does not go as planned. Like CBT itself, various ‘resistances’ to the supervisor’s interventions, and ruptures occurring within the working alliance, are common. This chapter examines a range of factors that have the potential to undermine the supervisory process and how you might approach addressing these.

Finally, in Part IV the book explores how you can hone your competence as a CBT supervisor [the Enhance component of the PURE Supervision Flower] in the context of the complex issues that can arise. In the final three chapters, we consider ethical issues and also explore what makes a good supervisor. Additionally, we provide a means through which you can assess your own level of competence and compile a professional development plan for enhancing knowledge and skill in key areas.

Chapter 10 extends the topics covered in Chapters 8 and 9 to examine some of the ethical challenges that can occur. Supervision, like therapy, always exists within an ethical and legal context and cognitive-behavioural supervisors need
to develop skills in the identification and resolution of potentially complex dilemmas. We provide three approaches to considering and resolving such dilemmas: thinking about ethics within the context of an external framework, developing your own ethical maturity and developing a shared ethical understanding with supervisees as issues arise in supervision.

Chapter 11 introduces current thinking about the supervisor competences that are central to effective CBT supervision. Building on ideas discussed in previous sections, this chapter examines a recent supervision competence framework and enables supervisors to undertake a personal audit of their supervisory strengths and needs. This chapter will help you decide how to assess your own competence and any areas you may need to develop.

Finally, in Chapter 12, we look at how you can increase your expertise as a CBT supervisor in the longer term. Specifically, we consider pathways for continued professional development as well as the critical importance of self-care in a world of professional practice that is rapidly changing and increasingly uncertain.

Learning features

Because the aim is to retain a strong, practical focus, all theoretical material is grounded in a range of learning activities. In particular, the book capitalizes on two principal types of learning activity: (1) tools to analyse your practice and (2) questions, offered as reflective ‘prompts’, to engage you in personalizing the content to your own practice.

An additional learning feature is the inclusion of case material. This takes the form of specific supervision dilemmas in which you, the reader, are asked to act as ‘supervisory consultant’ to two CBT supervisors – Patrick and Nina. These supervisors are fictitious individuals but the challenges that they encounter are common. By asking you to visit the world of CBT supervision through the eyes of Patrick and Nina, we seek to provide a narrative into which the specific themes of the chapters can be embedded. We take this opportunity now, to introduce you to each of them:

Introducing Patrick

Patrick qualified as a CBT therapist three years ago. His core profession is mental health nursing but, following his accreditation as a CBT therapist, he has worked exclusively as a CBT therapist for a large Mental Health Trust in an inner-city area. He currently has a split post working two days each week in a child and adolescent mental health service and three days in an adult primary care (IAPT) service. He is well regarded by his colleagues and line managers in both services. Patrick is new to providing CBT supervision and enjoys the experience but sees this as forming part of his role, rather than as a distinct vocation. He has attended a five-day ‘Introduction to CBT Supervision’ course, which he found useful.
Introducing Nina

Nina qualified as a clinical psychologist over 25 years ago and chose CBT as an area of specialism, based on her commitment to this way of working. She runs a small private practice, holds managerial responsibility for a mental health charity and has a part-time post as a senior lecturer and supervisor on a university-based postgraduate CBT training course. She also offers supervision on a private basis and is an accredited supervisor and trainer with the BABCP. Nina has been involved in the professional development of junior colleagues for more than 20 years and highly values the training environment. Supervision is a distinct domain of professional activity which she sees as part of her vocation.

Finally, each chapter (with the exception of Chapter 12) also includes a boxed section entitled, 'Tips for Supervisees'. These tips offer recommendations to those who are receiving CBT supervision. At the core of supervision lies a relationship to which supervisors and supervisees both contribute. As such, we believe that a text on CBT supervision needs to give space to supervisees’ perspectives, even though the principal focus remains the development needs of the supervisor.

How to use this book

Having ideas that you can personalize to your own context is a principle that lies at the heart of the book. A function of the PURE Supervision Flower is that it can enable you to decide where you need to focus your efforts at this particular point in your supervisory career. For example, if you are relatively new to supervision, you may find it advantageous to focus on the Parts I and II of this book (the Prepare and Undertake components of the Supervision Flower). If you are an experienced CBT supervisor and are seeking a conceptual and practical guide to assist you in critiquing and refining your work, you may find it more useful to focus on Parts III and IV (the Refine and Enhance components). Equally, if, on reflection, you recognize that you need to attend to particular aspects of your supervisory practice (it may be, for example, that you are highly effective at CBT skill development, but less confident at managing process issues), you may choose to focus on one particular petal in order to gain fresh perspectives on how to strengthen your practice in this area.

However you choose to use this book, we recommend that you resist the temptation of trying to absorb the contents all at once. Take time to build a relationship with the ideas presented and to consider how they relate to your work as a supervisor (or indeed as a supervisee). As you travel through the book, we invite you to refer back to earlier chapters, so you can explore dilemmas from the perspective of multiple models. It is our wish to support you in compiling a personal portfolio of knowledge that will support you in your work. Our task is to help you navigate the different ideas and approaches presented. Your task is to
transform everything you read into a form that makes sense for you and your professional context.

So before you get underway, give some thought to what you might need to support you through the process. We recommend that you invest in a learning journal for recording any insights, thoughts or questions that occur to you. As we will be inviting you to participate in a series of experiential exercises to refine your practice, having a method for recording your results and insights will be important in enabling you to reflect upon your learning.

It is also important to be aware that this book is not intended to be a substitute for supervised practice by an appropriately qualified individual. The material is designed to aid your learning and development but not to replace formal training in CBT supervision. Indeed, you may decide that you need access to additional support when experimenting with some of the exercises provided. We warmly encourage you to discuss your reactions, discoveries and learning with colleagues, peers, supervisors and trainers (and if you are a trainer yourself, your students).

For the purposes of this book, we use the terms ‘therapist’ and ‘supervisee’ interchangeably to refer to the person/persons receiving supervision. Those providing CBT supervision are referred to as ‘supervisors’ or ‘CBT supervisors’. For subsequent chapters, the acronym ‘CBTS’ will be used as a short-hand for CBT supervision.

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### Learning Activity A  What do you want from this book?

Before you continue, we recommend that you spend a few moments reflecting on your primary learning needs, making a written note of any key points. This will help you plan your learning with us to optimal effect. For example, are you:

1. Just about to start working as a supervisor and want to become clearer about some of the main points to hold in mind as you offer cognitive-behavioural supervision for the first time?
2. Relatively early on in your supervisory career, seeking one specific model of supervision that can help you establish a systematic approach?
3. An experienced cognitive-behavioural supervisor wanting to critique and refine your existing approach, perhaps seeking to ‘iron out’ any habits that might negatively impact your ability to offer a high-quality service?
4. Encountering difficulties with specific types of supervisee or supervisory issue?
5. A therapist seeking a cognitive-behavioural supervisor and needing to know what types of qualities to look for, and the sorts of questions to ask?
6. A supervisee who wants to understand how their CBT supervisor might approach supervision, and how to get the most out of the process?
7. A practitioner who wants to develop cognitive-behavioural supervision as a distinct area of specialism?
And finally…

Lesser commented that, ‘It is important to be aware that the supervisory room is crowded with all sorts of “persons” who create anxieties for both the supervisor and the supervisee’ (1983: 126). Although writing from a psychoanalytic perspective, we believe that this observation is equally relevant to CBT supervision. Indeed, we would argue that it is precisely because the supervision setting is ‘crowded’ with the stories, priorities, wishes and needs of multiple stakeholders that supervision is such a complex, fascinating and potentially transformational vehicle of professional development.

While the journey of supervision may start out as a requirement of your professional role, it can also become a vocation, affording the privilege of supporting the development of a colleague and providing a unique perspective on the complexity of therapeutic work. If, in the pages that follow, we are successful in providing you with some useful ways of facilitating more effectively the extraordinary journey of development that supervision can provide, we will have fulfilled our purpose.