HEAD OFFICE:
Fran Fleming, *Association Administrator*
The British Association of Dramatherapists
2 Holt Close, Chislehurst, Kent, BR7 5FH
Email: franfleming@badth.org.uk

The British Association of Dramatherapists

British Association of Dramatherapists

Clinical Supervision Guidelines for the Profession

Introduction
Definition of Clinical Supervision
Overview
1. Clinical Supervision: Aims and Content
2. Types of Clinical Supervision
3. Clinical Supervision in the Workplace
4. External Clinical Supervision
5. Technology in Supervision
6. Management Supervision
7. Who can provide Supervision
8. Frequency of Supervision
9. Responsibilities within the Supervisory Relationship
10. Concerns and Complaints
11. Anti-discriminatory Practice in Dramatherapy Supervision

BADth Statement for employers of Dramatherapists
Guidelines for the application for inclusion into BADth Supervisor's Register
FAQs

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

Introduction

The purpose of this document is to offer guidance and establish and maintain standards with regard to Supervision for both Dramatherapists and Dramatherapy Supervisors, who are registered with The British Association of Dramatherapists (BADth). This document should be considered in conjunction with BADth's Code of Practice BADth :: Code of Practice and also the Health and Care Professions Council http://www.hcpc-uk.org/

This document is principally concerned with CLINICAL Supervision which may also be known as Supervision, Consultancy Supervision, or Non-managerial Supervision. It is an essential part of good practice for Dramatherapy and is different from training and Line Management Supervision which may be a requirement of the workplace in addition to Clinical Supervision.

Definition of Clinical Supervision

Clinical Supervision is a formal, collaborative process in which two or more professionals meet to discuss the clinical content and process of the Supervisee's work and is an important and integral part of Dramatherapy practice. It is intended to help Supervisees maintain ethical and professional standards of practice and to enhance critical reflection and creativity. It should take into account the setting in which Supervisees practise and its frequency will vary according to the volume of clinical work, the experience of Supervisees and their work setting.

Overview

The value of Clinical Supervision is specified under the standards set by the regulatory body, the Health and Care Professions Council (HCPC), and Clinical Supervision is also an expected element of practice as specified in the BADth 'Code of Practice'. As such, all Dramatherapists who are practising their profession are expected to receive Clinical Supervision as part of their work.

Dramatherapists are recognised as autonomous practitioners, and each holds an individual professional responsibility to meet the standards set by the HCPC. The HCPC does not specify who should provide Clinical Supervision, or how much Supervision a therapist should receive, and BADth acknowledges that Dramatherapists are a diverse group of people, working across a wide variety of settings and circumstances.

This document is therefore given for reference and guidance only. It is intended to provide members with information about the Clinical Supervision process and guidance on a range of issues and different circumstances. The aim of the document is to equip therapists with the knowledge and skills to make informed choices and evaluations in respect of their Supervision provision.

BADth recognises that members' arrangements for Clinical Supervision will usually be made according to a variety of factors including experience, availability, work place requirements etc. and may not always meet the guidance given here. Therapists are expected to evaluate the strengths and weaknesses of their Supervision arrangements, and ensure these are addressed over time.

HCPC standards of proficiency and standards of conduct, performance and ethics are legally binding standards and therapists are advised to be mindful of these in considering their Clinical Supervision provision. HCPC regulations on standards of proficiency, codes of conduct, performance and ethics, and fitness to practise can be found in full at www.hcpc-uk.org/. BADth standards of practice are membership standards and part of what members agree to when they join the organisation.

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

1. Clinical Supervision: Aims and Content

Aims

The principle aims of Supervision are to protect client safety and to reflect on and develop the clinician's practice. The Supervisee remains responsible and accountable for their clinical work. The role of the Supervisor is to support the clinician to develop their clinical practice, and to ensure the welfare of the client through the Supervision Process.

Content

The process of Supervision should ensure that the needs of the client are being addressed, and monitor the effectiveness of therapeutic interventions. It should include elements of education/learning, function as a form of self-regulation for Supervisees, and be both supportive and challenging. It may help to challenge patterns that appear ingrained and help to expand techniques and theoretical knowledge.

Clinical Supervision may include discussion and analyses of the dramatic, verbal and behavioural material, the emotional and psychological world of the client including conscious and unconscious processes, the relationship between the client and the therapist and the impact of this on the therapy, and areas of resistance / difficulty. It may also include exploration of the dynamic between the Supervisee and the Supervisor where this reflects or parallels aspects of the clinical work, and between the Supervision process and the organisational / clinical context of the work.

Clinical Supervision is primarily a clinical resource and benefits from an environment of trust, where the Supervisee is free to explore challenges and difficulties, including the emotional impact of the work, in a supportive and contained environment. All Dramatherapists have an individual professional responsibility to assess their Clinical Supervision needs, in conjunction with managers / employers where appropriate, and to ensure their practice meets HCPC standards. HCPC standards of proficiency (SoP) and standards of conduct performance and ethics (SCPE) reflect the importance of Clinical Supervision and require the therapist to:

recognise the role and value of Clinical Supervision in an Arts Therapy context

understand the value of reflection on practice and the need to record the outcome of such reflection

act in the best interests of your patients, clients and users

make sure your knowledge, skills and performance are of a high quality

carry out your duties in a professional and ethical way

BADth 'Code of Practice' section 'Professional Conduct' states, 'Clinical Supervision is essential to good practice and Dramatherapists maintain regular Supervision in addition to monitoring and reviewing their work alone and with peers.'

2. Types of Clinical Supervision

Individual, Group and Peer Supervision

Individual, one to one face to face Clinical Supervision with an experienced Supervisor is often the primary form of Supervision for a therapist's work.

Group Supervision refers to a process where a group of practitioners will take turns

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

to present work for discussion in the presence of a Supervisor.

Peer Supervision refers to a process where two or more therapists present work to each other for discussion. Although practitioners of different disciplines, experience and status may be present; no one individual is acting as the Supervisor in this context.

Individual Supervision is particularly important for recently qualified therapists, those with limited clinical experience, and those managing a heavy or demanding caseload. Group Supervision may form part of the Supervision provision of any therapist, and may be a primary source of Supervision for more experienced therapists. Very highly experienced practitioners may wish to include some Peer Supervision as part of their formal Clinical Supervision provision.

3. Clinical Supervision in the Work Place

In many cases, Clinical Supervision will be provided by the employer and determined by the structures and/or policies in the workplace. Supervision arrangements may be written into the job description, which is part of the contract of employment.

A Supervisor may be a colleague of the Supervisee. They may belong to the same professional, clinical or staff team, and/or be familiar with the same patient cohort as the therapist. In some organisations, Clinical Supervision may be provided by the therapist's line manager, particularly where the manager may hold clinical responsibility for the client group.

Where Clinical Supervision is provided by a practitioner who is also the line manager, or by another close colleague of the Supervisee, it is important that attention is paid to dynamic issues that may arise with regard to boundaries, the content of Supervision sessions (Managerial and Clinical), and possible conflicts. Consideration may be given as to whether additional/external Supervision may be necessary or beneficial. **(See section on management Supervision below)**

Where possible, the Supervisor and Supervisee should not be directly co-facilitating clinical sessions together on a regular basis. This is because Clinical Supervision requires a position where the Supervisor is outside the immediate dynamics of the co-facilitating relationship and clinical material under consideration in the Supervision process.

4. External Clinical Supervision

For therapists who receive neither Management Supervision nor Clinical Supervision in the workplace (e.g. some freelance therapists) the responsibility is upon the individual to ensure that their Supervision needs are met, be aware of the relevant issues and to negotiate directly with the employer to ensure that the means and responsibility for meeting such needs are clarified. This may include costing Supervision and CPD into prices, negotiating on caseload size, seeking professional support and guidance outside the employing institution etc.

Where external Supervision is used in addition to Supervision provided by an employer, therapists should be mindful of their responsibilities to the employer, the potential for boundary issues and conflicts, and the need for transparency and accountability within the arrangements.

5. The use of Technology in Supervision

Real time Supervision: while it is likely that the primary and preferred mode of Supervision will be face to face it is recognised that real time technologies (e.g. through Zoom or telephone may

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

enable Supervision to take place at a distance. It is the responsibility of Supervisee and Supervisor to ensure that the quality of this provision meets the requirements of GDPR and Supervision as outlined elsewhere in this document**.**

Supervision through time delayed technologies (such as email) should be used only in conjunction with face to face and / or real time Supervision. These must be within a clear and ethical frame in line with guidance regarding written recordings.

6. Management Supervision

This is usually carried out by the therapist's line manager. This type of Supervision will be concerned with the overall management of workload, including the needs and responsibilities of the employee, rather than with clinical material. It may cover issues including caseload management, wider aspects of the job description, appraisal of job performance, training and development needs, and routine matters such as sickness and absence. There may be some discussion of clinical content where it overlaps with the above. Management Supervision is determined through the workplace hierarchy and will not necessarily be from the same, or even a similar discipline to the therapist.

7. Who can provide Clinical Supervision

A Clinical Supervisor will normally be another practitioner in your own or a related discipline. They should be familiar with the concept of Clinical Supervision as it is understood and practised within the Arts Therapies and other Psychological Therapies, and be competent to provide Supervision within the definition and aims given above. Supervisors should also be in Supervision themselves.

A Clinical Supervisor should be familiar with the clinical field the therapist is working in, and aware of any statutory / legal issues pertaining to the client group and/or the setting of the clinical work.

The first line choice of Supervision for Dramatherapists is Supervision from a Dramatherapist who is experienced in the same area of clinical work, and in providing Supervision. This may be particularly important for newly qualified therapists.

BADth recognises that it may not always be possible to receive Supervision from a Dramatherapist, and/or that therapists' needs and interests often develop over time. There may therefore be instances where Supervision is provided by professionals who are not Dramatherapists. Other practitioners who sometimes provide Supervision for Dramatherapists include ***other Arts Therapists, Psychotherapists, Psychologists*** and other professionals with skills, experience and training in therapeutic work and the Supervision thereof. Where therapists receive Clinical Supervision from a practitioner who is not a Dramatherapist, they should be mindful of their professional requirements and seek to ensure their CPD reflects this.

8. Frequency of Supervision

The amount of Clinical Supervision a therapist requires will depend primarily upon the number of clinical contact hours. Other issues that are relevant include the clinical setting, the relative in/experience of the therapist, the complexity of cases, and any particular issues / stressors in the work.

In all cases, the therapist should be mindful of their own needs and the requirements under HCPC standards, and the importance of Clinical Supervision in maintaining these. BADth recommends that therapists receive Clinical Supervision on a weekly, two

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

weekly or monthly basis, appropriate to factors outlined above.

BADth recommends that all therapists in clinical practice receive no less than one and a half hours per month of individual Clinical Supervision, or group equivalent.

9. Responsibilities within the Supervisory Relationship

Supervisors and Supervisees have a responsibility to make explicit the expectations and requirements they have of each other in an individual contract, and to consider how this relates to the workplace. Both parties are responsible for establishing a constructive and collaborative working relationship to include the capacity to address difficult or challenging material in the therapy and in the various relationships. Each party should assess the value of working with each other and review regularly.

Reasonable confidentiality in relation to all aspects of the Supervision process should be maintained by both parties as appropriate to the setting and the circumstances. Where it exists, workplace guidance and policy on confidentiality should be observed. Consideration should also be given to HCPC and BADth guidance on confidentiality.

Appropriate confidentiality practice includes a recognition that the care of the client requires relevant information to be shared between those responsible for that care, including therapist, Supervisor, and other professionals (such as managers, other therapists, statutory/ legal considerations etc).

Records of the work should be kept by both parties. Records may include information relating to the client discussed, the issues brought to Supervision, the areas of discussion, and any action points agreed. Both parties should be aware that in the event of a formal process, information and records from the Supervision process may be called for.

Supervisors must ensure that together with their Supervisees they consider their respective legal liabilities.

Levels of communication between Clinical Supervision and the managerial structures of the employer may vary, depending upon circumstance. Relevant clinical information may be required to be shared. Many managers / employers will want to monitor attendance at Clinical Supervision, some will also require basic feedback on content, others may want to include Clinical Supervision within the appraisal process. In all cases, the rationale for the expectations should be transparent between all parties, open to discussion/negotiation on professional issues, and considered in the context of the aims agreed.

Lines of communication, accountability and responsibility should be clarified, and the actions to be taken in the event that the Supervisee's practice causes concern to the Supervisor.

Supervisors and Supervisees should take all reasonable steps to ensure that any personal or social contact between them does not adversely influence the effectiveness of the Dramatherapy Supervision. A Supervisor must not have Dramatherapy Supervision and a personal Dramatherapy contract with the same Supervisee over the same period of time.

Responsibilities of a Supervisor include:

- responsibility for helping Supervisees to reflect critically upon their work, while at the same time acknowledging that clinical responsibility remains with the Dramatherapist.
- ensuring that their own arrangements for Supervision are appropriate in order to support and evaluate their Supervision work
- ensuring that their own practice meets relevant standards of proficiency, CPD, GDPR, ICO and codes of conduct and ethics

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

- informing the Supervisee as appropriate about their training, qualifications, theoretical position, and methods of Supervision used
- arranging, negotiating and managing practical issues such as length of sessions, setting of fees, absence, notice periods, providing or securing an appropriate venue for sessions, etc; as appropriate to the circumstances
- responsibility for setting and maintaining the boundaries between the Dramatherapy Supervision relationship and other professional relationships, e.g. training and management. Supervisors must not exploit their Supervisees financially, sexually, emotionally or in any other way.
- responsibility to enquire about any other relationships which may exist between Supervisees and their clients as these may impair the objectivity and professional judgement of Supervisees
- discussing with Supervisees the need to have arrangements in place to take care of the immediate needs of clients in the event of a sudden and unplanned ending to the Dramatherapy relationship. It is good practice for the Supervisor to be informed about these arrangements.
- to recognise, and work in ways that respects the value and dignity of Supervisees and their clients with due regard to issues such as origin, status, race, gender, age, beliefs, sexual orientation and disability. This must include raising awareness of any discriminatory practices that may exist between Supervisees and their clients, or between Supervisor and Supervisee.
- responsibility to take action if they are aware that their Supervisees' practice is not in accordance with BADth's Code of Practice and HCPC's Standards of proficiency for Arts Therapists.
- responsibility to help their Supervisees recognise when their functioning, as Dramatherapists is impaired due to personal or emotional difficulties, any condition that affects judgement, illness, the influence of alcohol or drugs, or for any other reason, and for ensuring that appropriate action is taken.
- discussing their policy regarding giving references and any fees that may be charged for this or for any other work done outside Dramatherapy supervision time.
- formalising a Dramatherapy supervision contract, Supervisors must ascertain what personal therapy the supervisee is having or has had. This is in order to take into account any effect this may have on the Supervisee's Dramatherapy work.
- Supervisors working with trainee Dramatherapists must clarify the boundaries of their responsibility and their accountability to their Supervisee and to the training course and any agency/placement involved. This should include any formal assessment required.
- responsibility for monitoring and working within the limits of their competence.
- responsibility for withdrawing from Dramatherapy supervision work either temporarily or permanently when their functioning is impaired due to personal or emotional difficulties, illness, the influence of alcohol or drugs, or for any other reason.

Supervisors must ensure with a Supervisee who works in an organisation or agency that the lines of accountability and responsibility are clearly defined and that there is a distinction between line management supervision and Dramatherapy supervision.

Best practice recommends that the same person should not act as both line manager and Dramatherapy Supervisor to the same Supervisee. However, where the Dramatherapy

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

Supervisor is also the line manager, the Supervisee should also have access to independent Dramatherapy supervision.

Supervisors must make explicit to the Supervisee any conflict of interests that may occur between their obligation to an employing agency and the supervisee.

Supervisors must conduct themselves in their Supervision-related activities in ways which do not undermine public confidence in either their role as Supervisor or in the work of other Supervisors. Information about work with a Supervisee may be used for publication or in meetings only with the Supervisee's permission and with anonymity preserved.

If a Supervisor is aware of possible misconduct by another Supervisor which cannot be resolved or remedied after discussion with the Supervisor concerned, they should implement the Complaints Procedure, doing so within the boundaries of confidentiality required by the Complaints Procedure of BADth and HCPC.

Supervisors are responsible for consulting with their own Supervisor before former therapy clients are taken on as Supervisees or former Supervisees are taken on as therapy clients. Supervisors are responsible for holding professional indemnity insurance as appropriate (private practice).

Responsibilities of a Supervisee include:

- identifying issues from practice for discussion, preparing material to present to the Supervisor;
- ensuring they receive Supervision across the range of their caseload
- being willing to engage with thinking about challenges and difficulties arising in the clinical work, or the various relationships in the process;
- ensuring that relevant information is shared appropriately;
- meeting the practical arrangements as agreed with the Supervisor.
- in some cases, it may be appropriate to create a written contract addressing issues raised in this section.

10. Concerns and Complaints

In the event of a concern arising about the practice of a Supervisor or Supervisee, guidance may be sought from BADth by any party on the issues and advice sought about appropriate procedures. BADth procedures include advice, mediation and dispute resolution process.

If a concern arises about a Supervisee's practice, the Supervisor should, where possible, discuss this first with the Supervisee and seek to establish the extent to which this can be addressed through the Supervision process.

Where there are serious or immediate concerns, and/or the process has broken down, the Supervisor should report their concerns to the Supervisee's line manager in the first instance, or direct to the employer where there is no line management structure. Considerations under HCPC fitness to practise regulations may apply.

In the event of a Supervisee having a concern with regard to their Supervisor, this should first be raised direct with the Supervisor, then through the workplace structures if necessary, and/ or through BADth procedures where appropriate. Considerations under HCPC fitness to practise regulations may apply. Complaints by either party in relation to the handling of such issues should be dealt with through the workplace structures, or BADth procedures, as appropriate.

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

Where there is compelling reason to believe that a practitioner (Supervisor or Supervisee) is unable to do their job safely and effectively, and/or that their health, character, skills or knowledge give serious cause for concern, then HCPC fitness to practise regulations may come into force. HCPC fitness to practise regulations are intended to protect patient safety, not to punish registrants or mediate in professional disagreements. The HCPC can only consider complaints where fitness to practise is believed to be impaired by:

- misconduct;
- lack of competence;
- physical or mental health;
- conviction or caution for a criminal offence;
- fraudulent entry to the register;
- a decision made by another regulator responsible for healthcare.

11. **Anti-discriminatory Practice in Dramatherapy Supervision**

BADth recognises that discrimination and prejudice exists in our society. In response to this BADth are actively pursuing equality of opportunity through a continued commitment to the development of good practice. We value and respect the contribution that others make to this process.

Anti-discriminatory practice underpins the basic values of Dramatherapy and Dramatherapy supervision as stated in this document and in BADth's Code of Practice for Dramatherapists. Supervisors have a responsibility to be aware of issues of prejudice and diversity that may exist within the supervisory relationship and to address them if and when it occurs.

Supervisors must recognise, and work in ways that respects the value and dignity of supervisees and their clients with due regard to issues such as origin, status, race, gender, age, beliefs, sexual orientation and disability. Supervisors need to be alert to any prejudices and assumptions that Dramatherapists reveal in their work with clients and to raise awareness of these so that the needs of clients may be met with sensitivity. One purpose of Dramatherapy supervision is to enable Supervisees to recognise and value diversity and difference. Supervisors have a responsibility to challenge the appropriateness of the work of a supervisee whose own belief system interferes with that of their clients.

Attitudes, assumptions and prejudices can be identified by language used, and by paying attention to the selectivity of material brought to Dramatherapy supervision.

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

BADth Supervision Statement for Employers of Dramatherapists

What is Supervision?

Clinical supervision is an essential part of good practice for all Dramatherapists. It is one of the standards set by the regulatory body the Health and Care Professions Council (HCPC) and is a required element of practice under The British Association of Dramatherapists (BADth) Code of Ethical Practice. The HCPC say that supervision 'offers many opportunities for assessment of practice, learning and development' and that 'The process results in improved learning, practice delivery and communication.' (HCPC Continuing Fitness to Practise – Peer review and clinical supervision 4.2.3)

Supervision for Dramatherapists largely falls into two categories, managerial supervision and clinical supervision. This statement focuses on clinical supervision. Clinical supervision should ensure that the needs of the client are being addressed and monitor the effectiveness of therapeutic interventions. It covers legal, ethical and safety issues. It should include elements of education and learning and be both supportive and challenging for the supervisee. It may help to address patterns that appear ingrained and expand techniques and theoretical knowledge. Supervision benefits the organisation, the therapist and their clients.

Who Provides Supervision?

A clinical supervisor is normally another Dramatherapist or a practitioner in a related discipline who is familiar with the concept of clinical supervision in Dramatherapy. A supervisor may work within the same institution as the supervisee or may be an external professional either brought in to conduct sessions or seen privately. Where supervision is external BADth recommends that employers should pay for the full or part cost. Appropriate supervision provision should be built into a Dramatherapists contract with a separate agreement drawn up between the employer, the Dramatherapist and the supervisor. BADth maintains a register of approved supervisors

Frequency of Supervision

The amount of individual supervision recommended by BADth depends on the amount of direct clinical work undertaken by the Dramatherapist. Ideally a full-time post requires a minimum of one hour clinical supervision a week. Supervision can take place weekly, fortnightly or monthly. The recommended minimum for any practising Dramatherapist is one and a half hours per month. This should be increased if the Dramatherapist is receiving supervision as part of a group. Issues that should be considered are the complexity/type of caseload, the experience or inexperience of the Dramatherapist and other relevant work issues.

This document was written with reference to:

HCPC *Continuing Fitness to Practise – Towards an Evidence Based Approach to Validation* (2010)

'Maps and Models of Supervision' in *Supervision in the Helping Professions*, Hawkins, P & Shohet, R. (Open University Press: 1989)

British Association for Art Therapists *Guidelines for supervision*

Association for Professional Music Therapists *Guidelines for supervision*

The British Association of Dramatherapists is a company limited by guarantee

Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

Guidelines for the application for inclusion into BADth Supervisors Register

The following guidelines are provided to address some of the commonly asked questions and issues about your application. The information provided is not meant to be exclusive or exhaustive but rather represents the core areas of your application. All applications will be considered in their own right and the merits of each application will considered individually. The BADth Supervision Subcommittee are all practising registered supervisors. Applications are all anonymised and generally reviewed within two weeks.

What are the basic requirements for application?

The applicant must

- Be a Dramatherapist registered with the Health Care Professions Council (HCPC)
- Have a minimum of four years post qualifying experience as a Dramatherapist
- Have been a Full member or International member of The British Association of Dramatherapy for a minimum of one year.

AND

- Completed an assessed supervisors training programme of at least 120 hours. (total hours of programme)

OR

- Provide equivalent evidence of acquired Prior Experiential Learning through your experiences in a supervisory role leading to the achievement of the knowledge and skills of the above areas. Minimum 100 hours of clinical individual and group* (*more than 3 supervisees) supervision

If completing a course, it must address the fundamentals

- Current supervision literature – models, skills and research
- Ethical and legal issues in supervision
- Supervision contracts, boundaries and documentation
- Identify and evaluate issues in the therapist-client and supervisor therapist-client relationship
- Cultural, gender, ethnicity, socioeconomic and power issues in therapy and supervision
- Dynamics in individual and group supervision

Where can I get hold of the application forms?

Application form can be downloaded directly from the BADth's website http://www.badth.org.uk . Go to the members' area and click on the supervision section to download the form.

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

What happens then?

Your application will be acknowledged and processed by the Administrator and allocated for consideration to the Supervision Subcommittee. All applications for inclusion will be considered anonymously by the Supervision Subcommittee, this process usually takes about two weeks.

Can I appeal against the decision of the BADth's Supervision Subcommittee?

The decision made by the BADth Supervision Subcommittee final. This does not deny your right resubmit your application at a future date should you wish to exercise that choice.

Is that any cost involved?

There are no changes involved for the application process or inclusion on the Register.

FAQs – Supervision

Q1. What supervision courses have been approved to train as a supervisor for the BADth register?

Please ask BADth Supervisors Subcommittee for details

Q2. Does this course have the correct requirements to allow me onto the BADth Supervisors Register once qualified?

Requirements:
Training course to have minimum of 100 contact hours with the student and contain a wide range of modules (usually 120hrs)
The trainee will be expected to practice as a supervisor during the course, usually offering a minimum of 10 individual sessions as a trainee supervisor
The course will be primarily experiential with some written work and formal assessment
The trainee will be in supervision throughout their training and some courses expect the trainee to be in personal therapy
Most courses have an entry requirement of 3 years post qualifying experience with evidence of practicing as a therapist

Q3. Does my supervisor need to be a Dramatherapist?

A Clinical Supervisor will normally be another practitioner in your own or a related discipline. They should be familiar with the concept of Clinical Supervision as it is understood and practised within the Arts Therapies and other Psychological Therapies. A Clinical Supervisor should be familiar with the clinical field the therapist is working in, and aware of any statutory / legal issues pertaining to the client group and/or the setting of the clinical work.

The first line choice of Supervision for Dramatherapists is Supervision from a Dramatherapist who is experienced in the same area of clinical work, and in providing Supervision. This may be particularly important for newly qualified therapists. Other practitioners who sometimes provide Supervision for Dramatherapists include ***other Arts Therapists, Psychotherapists, Psychologists*** and other professionals with skills, experience and training in therapeutic work.

Q4. How much supervision do I need in relation to my clinical hours?

In all cases, the therapist should be mindful of their own needs and the requirements

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW

under HCPC standards, and the importance of Clinical Supervision in maintaining these. BADth recommends that therapists receive Clinical Supervision on a weekly, two weekly or monthly basis. The amount of Clinical Supervision a therapist requires will depend primarily upon the number of clinical contact hours. Other issues that are relevant include the clinical setting, the relative in/experience of the therapist, the complexity of cases, and any particular issues / stressors in the work.

BADth recommends that all therapists in clinical practice receive no less than one and a half hours per month of individual Clinical Supervision, or group equivalent.

Q5. Do I need an external supervisor if I am having internal supervision?

If you feel that the supervision you are receiving for internal supervision is sufficient in terms of time and opportunity to discuss your clinical work then BADth does not require you to have an additional external supervisor. This is something you could discuss with your internal supervisor.

The British Association of Dramatherapists is a company limited by guarantee
Registered company no. 3195460. Registered Office: 2 Holt Close, Chislehurst, Kent, BR7 5FW