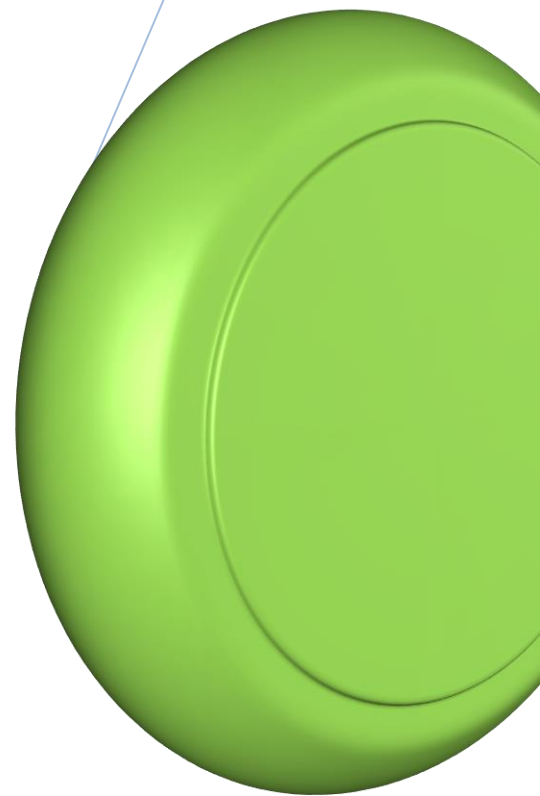
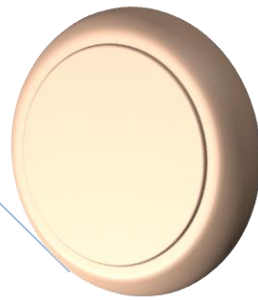
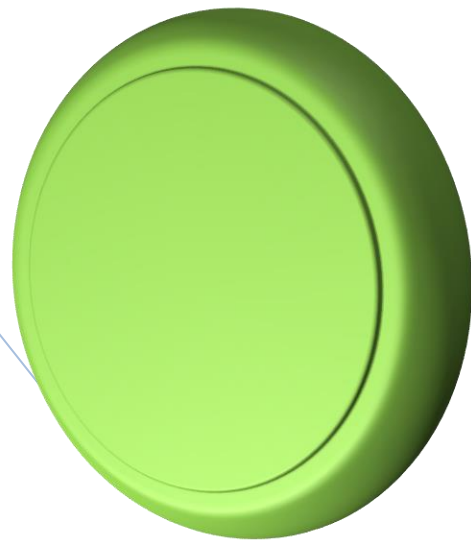




TRAINING MODULE FOR SUPERVISOR



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Summary

This resource aims to disseminate findings and learning from the therapeutic journey undertaken by 6 Creative Therapies programmes in 5 European countries and involving co-production with therapy participants who were from a refugee background, from the view of Arts Therapists acting as peer supervisors for one another.

Create is an ERASMUS+ project which contributes to the achievement of:

- The objectives of the European 2020 Strategy including the headline education target
- The objectives of the strategic framework for European cooperation in education and training (ET 2020)
- The promotion of European values in accordance with Article 2 of the Treaty of the European Union.
- EU Agenda on Migration (2015)

The development of professional Arts Therapists (across Europe supports the EU agenda for adult learning.

The Create project has developed learning resources which support the professional development of new and existing Peer Supervisors of Creative Therapists through the development of approaches for professionals working in this role with therapists working with migrants experiencing mental health issues.

The information held in this particular resource presents ideas, considerations and recommendations for Creative Therapists acting as Peer Supervisors.

All other resources are available online via the Create website;
www.create-eu.com

Common Methodology

As stated in the Training module for Creative Therapists, the first challenge was to agree language to describe the shared and individual therapy approaches. This was complex due to differing professional standards, therapeutic approach/training.

Common themes in the Creative Therapist's practice were arts and creativity as vehicles for psychological healing. It was also recognised the benefits of borrowing from the Therapist group's

genres of practices whilst maintaining a focus on individual modality. This led the partnership to agree the shared and inclusive terminology of Creative Therapies within the Create project paradigm, and thus a supervision framework which was inclusive, effective, and had a true European dimension to it.

The practitioners involved in the Supervision pilot brought a wide range of experience and knowledge of acting in a Supervisory capacity, as well as culturally and methodologically diverse and therefore a key challenge was to develop a model of supervision which supported therapists effectively and took into account these differences.

Piloting of training modules

Between June 2017-January 2018 6 partners from 5 different countries piloted both the Training Module for Creative Therapists, consisting of 52 hours of Creative Therapies with refugees, and a peer supervision system designed to effectively support the Creative Therapists in their work with refugees. The content and learning generated from this pilot phase has been used in the creation of this training module, the aim of which is to give the reader an understanding of the model of supervision that we developed, how it was used as part of the Create project, and top tips that need to be considered when adopting this methodology in your own projects and

practice. A key focus for both training modules was the exploration of a co-production based approach with participant, therapists and stakeholders.

The partnership took a very pragmatic approach in developing the model of supervision needed within this type of project, which started with defining supervision: The partners agreed on the definition below

What is Supervision?

Supervision is a formalised, regular, reflective review of yourself and work, undertaken within a structured, contractual, supervisory relationship.

Finding a definition which was fit for purpose

Create was an Erasmus+ project delivered by 7 different partners from diverse cultural, geographic and methodological backgrounds. One of the key considerations that we had when developing a Supervision framework and method was the differing professional structures, methods, and bodies for psychotherapists/Arts therapists in each country. For example in some countries there is a professional qualification and training which is necessary to be called a supervisor. Therefore there was a common consensus in the development of the CREATE method that it would be difficult to use the term supervision in the traditional sense described above, and therefore the partners needed to develop their own terminology and definition which could provide effective support and could be transferred across the different territories. This new way of working focussed on Peer support, however it should be noted that Therapists were also encouraged to take advantage of existing structures during the piloting phase of the project to support their practice. For example therapists may have had a CREATE peer supervisor as well as their normal Clinical supervisor should they have one.

What is Peer Supervision?

Reciprocal supervision is a structured, mutual learning experience between peers who wish to work together. It is based on reciprocity, built on trust, and provides support

It is used to challenge, encourage honesty, in-depth reflection and constructive analysis on practice, related and contextual issues. And its aim is to enhance self-confidence, personal and professional learning, and promote best practice within the people taking part

Based on this common understanding, the project partners developed a key term InterVision which they used to describe the method of supervision they created

What is InterVision?

In order to ensure that InterVision was effective and validated, the project partners wanted it to be grounded in accepted good practice around supervision of Therapists. Therefore partners agreed that the InterVision method should follow the "Supervision Triangle" method

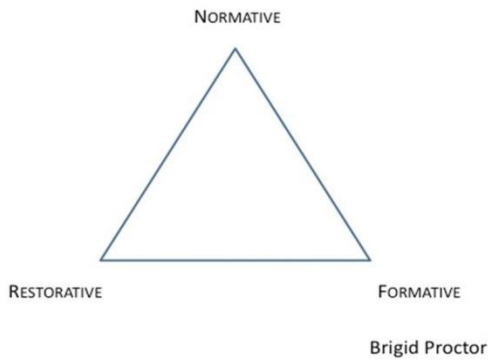
One of the most commonly used clinical supervision frameworks is Proctor's Model, derived from the work of Brigid Proctor:

The model describes three aspects of the tasks and responsibilities of supervisor and supervisee; Normative, Formative and Restorative (management, learning and support), and can be shown in the diagram below¹

The Supervision Triangle

Within this model Proctor describes 3 Key Objectives for supervision which were adopted within the InterVision model, these are described as:

¹ Integrative Approaches to Supervision, Proctor 2001, P31



The Supervision Triangle

through just practicing within their own locality.

Restorative: relating to considerations with regards to the impact of the work, emotional/psychological support needed and provided and safeguarding wellbeing. In relation to the CREATE method this was also important as it enabled practitioners to learn from one another where there were differing levels of experience of working with the target group of Refugees with mental health issues, and from different geographical and political contexts for example some of the piloting took place in Sicily with Refugees who had just arrived in the EU as well as in places which were seen as the final destination for Refugees.

Key elements of the Create InterVision method:

Duration

Each supervision session should be a minimum of 60 – 90 minutes long. The partners found that this was the optimum of time to work effectively online across different countries. It gave practitioners enough time to overcome any technical issues, go deep enough into issues in order to encourage reflection and learning and develop key actions which could be taken forward by the supervisor and supervisee.

Flexibility in roles

The piloting of the developed InterVision model took place over a 6 month piloting period where each individual regardless of experience in the field, therapeutic approach taken, or modality of practice took the role of supervisor for an equal number of times. This is important as it ensured the “formative” and “normative” nature of the supervision ensuring that there was mutual learning for all practitioners, and a transfer of knowledge and experience within the network. It also ensured a continual freshness to the approach which supported the continuous development of the practice and the model itself,

Supervision online

Create InterVision takes place online, as it involves practitioners from different countries working and sharing together. When working in this way there are several practical issues which need to be considered in order to maximise productivity and effectiveness. We would therefore recommend the following top tips:

- Adopt a blended approach which involves some preparatory written work from the supervisee detailing a narrative of what has happened in the sessions to be discussed, considerations should be shared and an agreement of confidentiality should be reached, the online virtual meeting, and then some post supervision reflection from the Supervisor and Supervisees after having sufficient time to process what has been discussed.
- Ensure that both practitioners taking part in the supervision are in an area with good WIFI reception minimising any technical difficulties.
- Research and find the best online platform to use within the different countries.
- Develop a timetable and session plan including times and dates so that practitioners involve have a clear understanding of when they are expected to meet and for how long.

- Some practitioners may find it useful to involve a third party who takes on the role of observer/note taker. As the main interaction takes place online it is often more difficult to ensure that the supervisee feels that they are being “actively listened” to and to ensure full understanding and empathy is reached. Therefore any further distractions, for example notetaking can be detrimental to this. Therefore, it might be useful to have a third practitioner who can take notes, and seek clarification, post-supervision of any key points.

Create Shared Principles

- Non-hierarchical relationship

In order for InterVision to work effectively there should be no hierarchy to the relationship, both the supervisor and supervisee are there on their own professional merits, and recognise one another’s validity as therapists in their own right, with whom they can share, learn and grow together.

- Reciprocity and mutuality

It is recognised in InterVision that both parties benefit from the process both in terms of learning and development of skills and competences around supervision and reflective practice, but also in developing awareness of working with the target group of Refugees in general and specifically different groups from different countries and cultural backgrounds for example one practitioner may be working with a group of Somali men, another maybe working with a group of Syrian women and these 2 groups may present different challenges and needs for the practitioner which through the InterVision process will be explored and shared agreement will be made to explore different issues using agreed methods.

- Trust, honesty and transparency

Due to the first 2 points describe above, the values of Trust, Honesty and Transparency are of paramount importance in order to ensure that the InterVision is effective, the peer supervision relationship needs to be built on trust, honesty, and remain transparent at all times in order for both parties to feel the benefits of working together and to ensure that best practice is shared within the CREATE network of practitioners.

- Equal commitment to time and process

Both parties need to prioritise the InterVision accordingly and commit to the process an equal amount which they can discuss and agree to at the start of the process. There is no fixed schedule or frequency which we suggest however both parties need to ensure that it is realistic in terms of workload and personal commitment and is done at an appropriate time and duration. If this is not done the both the non-hierarchical relationship is lost, as well as mutuality and reciprocity within the process. Further to this if the commitment to the time and process becomes too much it is important for the practitioner to raise it with the peer and discuss either changing the time or frequency of the InterVision sessions.

- Structured sessions

Advanced planning and agreed structure is essential to the flow and effectiveness of the InterVision process. The structure should be agreed via email before the meeting and information shared In order for both partners to attend the session prepared and equipped to discuss the issues effectively.

Model InterVision Session Structure

Logistics	
Date and time of Supervision:	
Organisation/Individuals participating	
Communication Platform used: (Skype, Google Hang Outs, Others...)	
1. STRUCTURE: Describe current state of your CREATE project: <ul style="list-style-type: none"> • within your own organisation and other workload • your cooperation with other stakeholders and resettlement professionals 	
2. RELATIONAL / CLIMATE: <ul style="list-style-type: none"> • Are there any issues with client commitment and engagement • How is your therapeutic relationship with clients? • If you are working with groups, how are the group dynamics? • Are there any communication issues? 	
Content <ul style="list-style-type: none"> • Topics/focus/characteristics of particular clients • Selected Therapeutic Processes • Case Review, what progress have individual clients/or the group as a whole made • Are there any therapeutic issues for example transference? • Goals and strategies and future considerations for therapeutic sessions 	
KEEP <ul style="list-style-type: none"> • Therapeutic/Creative interventions that went well and that you want to use again 	

and why?	
ADJUST <ul style="list-style-type: none"> • Therapeutic/Creative Interventions that require improvement/how? 	
DISCARD <ul style="list-style-type: none"> • Therapeutic/Creative Interventions that didn't go well/why? 	
SESSION EVALUATION <ul style="list-style-type: none"> • Content/Topics, are there any topics or content that we discussed this time, that we need to explore again in the next session • Creative Methods: how did you feel about the creative methods used? • Are there any creative methods you would like us to use next time? • Additional comments 	

An example of a Creative Method used in InterVision

'The use of Stories, Films and plays in Supervision' Mooli Lahad

Stage 1

Choose or create a hero who would be a fantastic co-therapist

- Think about your therapy sessions, of a difficult stage in the therapeutic process or a difficult case, an issue that has concerned you or has been difficult to manage.
- Choose a character, a hero from a film, a play, a book that you would like to support you as your co-therapist
- Think about what your character would say about you if they were to introduce you

Stage 2

Imagine the following situation

- You ask your co-therapist to join you for a session with your clients; you set the time and the date. On the day of the session you receive a telephone call from a Lottery company to tell you that you have won 5 million Euros.

- You rush to collect your winnings and forget all about the meeting. Your co-therapist arrives at the session and meets your clients.
- Later that evening you remember where you were expected to be and immediately call one of your clients. What does he/she say about the encounter with your co-therapist? What are your client's impressions of that person? Was there anything significant/strange they remembered from the meeting?

Stage 3

Next you sit and take a deep breath and the telephone rings:

- Your co-therapist is on the telephone sharing their reactions and impressions of that session.
- What are the most important observations your co-therapist made? What was most meaningful? (If any). How did they perceive the clients? What was the most unusual thing that happened in the session?
- In your role as co-therapist, what are the main recommendations following that meeting with your clients?

Cultural Competence

Create focused on developing knowledge, skills and competency of Arts Therapists working with Refugees and Asylum Seekers with mental health issues. One of the key learning points that they found from the piloting phase of the project was the need to develop cultural awareness and intercultural competencies.

This was twofold in terms of the InterVision process as one of the key areas that InterVision aimed to draw reflection upon was:

- the interaction between the therapists own culture and that of your client as this will assist with understanding and developing engagement

Reflect on such questions as,

- What did the client understand?
- Did I really listen and understand their perspective?
- What was I thinking while the client was talking?
- What do I think they have understood?
- Was I aware of the non-verbal cues in the discussion?
- Was there anything I didn't cultural understand or felt different?
- Did I reflect back to the client my understanding?

It is important to ask not only ourselves but each other:

- What are my own cultural values and practices?
- How have these developed?
- What have been critical influences on the development of these values?
- How might these values and practices influence my work with clients?
- What biases and prejudices might I hold?
- How might clients perceive these values, biases and prejudices?

The importance of intercultural competence was twofold in relation to InterVision as it did not only influence the reflective practice between the supervisee and the client but that of the supervisor and the supervisee as they were from different countries and cultural backgrounds.

Ethical Considerations

- **Confidentiality** – is critical to the success of InterVision. All parties must understand that the content of InterVision sessions is confidential, to ensure that the supervisee is open in his or her discussion.
- **Integrity of relationships** – the relationship between the peer supervisor and supervisee must reflect the core values of respect, honesty, trust and compassion. This means that issues of power imbalance should be specifically addressed, as should any dual relationship.
- **Competence** – both the peer supervisor and supervisee must demonstrate competence within the supervisory process. It is expected that they will demonstrate the ability to engage with a supervisee and practice appropriate interpersonal skills to facilitate the supervision process

Key Risk Considerations

- Client rights, Confidentiality and Privacy

Working across different EU states obviously brings with it some extra risks to client rights than just working in a traditional supervision framework. One of these is clarifying their rights in relation to practical support options that the therapist may suggest, and also their rights in relation to the therapeutic process and sharing of information with other professional who are not working within the same legal frameworks as their direct therapist. Therefore it is good practice to establish a three way agreement between the therapist, peer supervisor and client to establish what each party is comfortable with and how much and what information can be shared within the point of the therapeutic triangle

- Informed consent

Further to this as the process moves forward it is important to ensure that the client continues to provide their informed consent to the process. Therefore, it is important for the Therapist to discuss the InterVision process with the clients and to ensure that they understand what it means for them. This should be done as part of the establishment of the agreement suggested above and should also be reviewed at appropriate regular intervals within the therapeutic process to ensure that informed consent is maintained throughout.

- Service delivery

Working across borders also raises risk around service delivery in terms of maintaining quality and being compliant with any legal or professional frameworks which may exist. It is important therefore to check at the start of the process what ramifications there are, this should be the responsibility of the therapist as they are in the country where the therapy is take place and should be built into the agreement described above.

- Boundary issues and conflicts of interest

Finally as with all therapeutic relationship there needs to be discussion, and management of boundary issues, people acting outside of their agreed role, and conflicts of interest. Indeed part of the InterVision process is to act as safeguard against any boundary issues or conflicts of interest occurring within the therapeutic relationship. Also it should be added that having the distance away from direct service and therefore the therapeutic relationship can enable the peer supervisor to identify and support the therapist and client to overcome boundary issues and conflicts of interests earlier.

Challenges to the InterVision process.

- Online/technical difficulties

One of the key challenges to the InterVision system and process is having viable resources and local infrastructure for it to run smoothly, obviously as technology becomes more advance and virtual

communication becomes easier this challenge will diminish but at this moment it still exists and needs to be acknowledged.

- Other demands on people's time could impact on attendance

InterVision is demands a commitment and time allocation within busy working days often working across different EU time zones, therefore it is important that all parties are committed and make space within their works schedule to accommodate the process. This may in some cases require organisation “buy in” as well as personal, and this should be considered very important to be gained at the start of the process so to not cause serious challenges during the process.

- An overabundance of advice giving and other less than helpful responses

Another key challenge to InterVision is to ensure that the process does not get in the way of the relationship between the therapist and the client. The role of the peer supervisor is to encourage and enable reflective practice and only where appropriate make suggestions as to session content and ways forward. They are not there to solve the problems for either the therapist or indeed the client and therefore it is both the role of the supervisor and supervisee to challenge where one party is providing unwanted and advice or demanding advice.

People could feel criticised or demoralised

- Supervision interactions: Professional and Personal clashes, and the process being disabling and disempowering rather than enabling and empowering.

As the InterVision process works on a Peer supervision model it is important that there are rigorous internal checks done by each peer taking part. As discussed above the process will only work where it is built on Trust, Honesty and Transparency and the main reason for this is to ensure that it is working for each of the people involved. Therefore, it should be recognised that not all InterVision relationships are going to work and therefore each party needs to feel confident enough to raise these issues and know that they will be accepted in the spirit raised.

What are the benefits of InterVision?

InterVision supports reflection on process and content of your work, it enables therapists to

1. Gain feedback on the therapeutic process and content of therapy sessions from trusted, respectful peers who are there for the therapist and to support the process as a whole
2. It supports Therapist’s intercultural and therapeutic skills and practice in a non formal reciprocal process
3. Celebrates successes. But also deals with problems and issues projected onto the therapists from the clients.
4. Explore and express stress stimulated by the cases that the therapist is working on in a non-judgemental manner with people working in the same field but from different perspectives as it is done across EU borders.
5. If used properly and effectively the InterVision process can support therapists to plan and use your personal and professional resources more effectively, it can also lead the therapist to be pro-active rather than reactive in relation to their own professional development, and also their planning of sessions.
6. Through the EU piloting of the InterVision method the Create partnership has demonstrated that it fosters open communication and therefore acts as a good model to draw on in similar work contexts

7. Peer supervisors may well have knowledge and experience that the as a practitioner you do not have. InterVision enables meaningful networking and helps develop a professional identity for each of the therapists involved. It also provides an opportunity for shared reflection and learning drawing on the wisdom, knowledge and skills of a newly developed CREATE network of practitioners who are passionate and motivated to support Arts Therapists across the EU support the resettlement of Refugees and Asylum Seekers with mental health issues.
8. It provides a sense of an egalitarian community to therapists who often feel at times that they are working in isolation and not supported. By having a CREATE InterVision network the model provides cohesion and support to the profession working with this target group as a whole, and supports the ongoing continuous professional development of therapists across the EU

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Compagnie Arti-Zanat' – France



CESIE – Italy



Associazione Sementera Onlus – Italy



Clonakilty Community Arts Centre – Ireland

For more information about the Project and to learn more about the CREATE method please visit www.create-eu.com



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