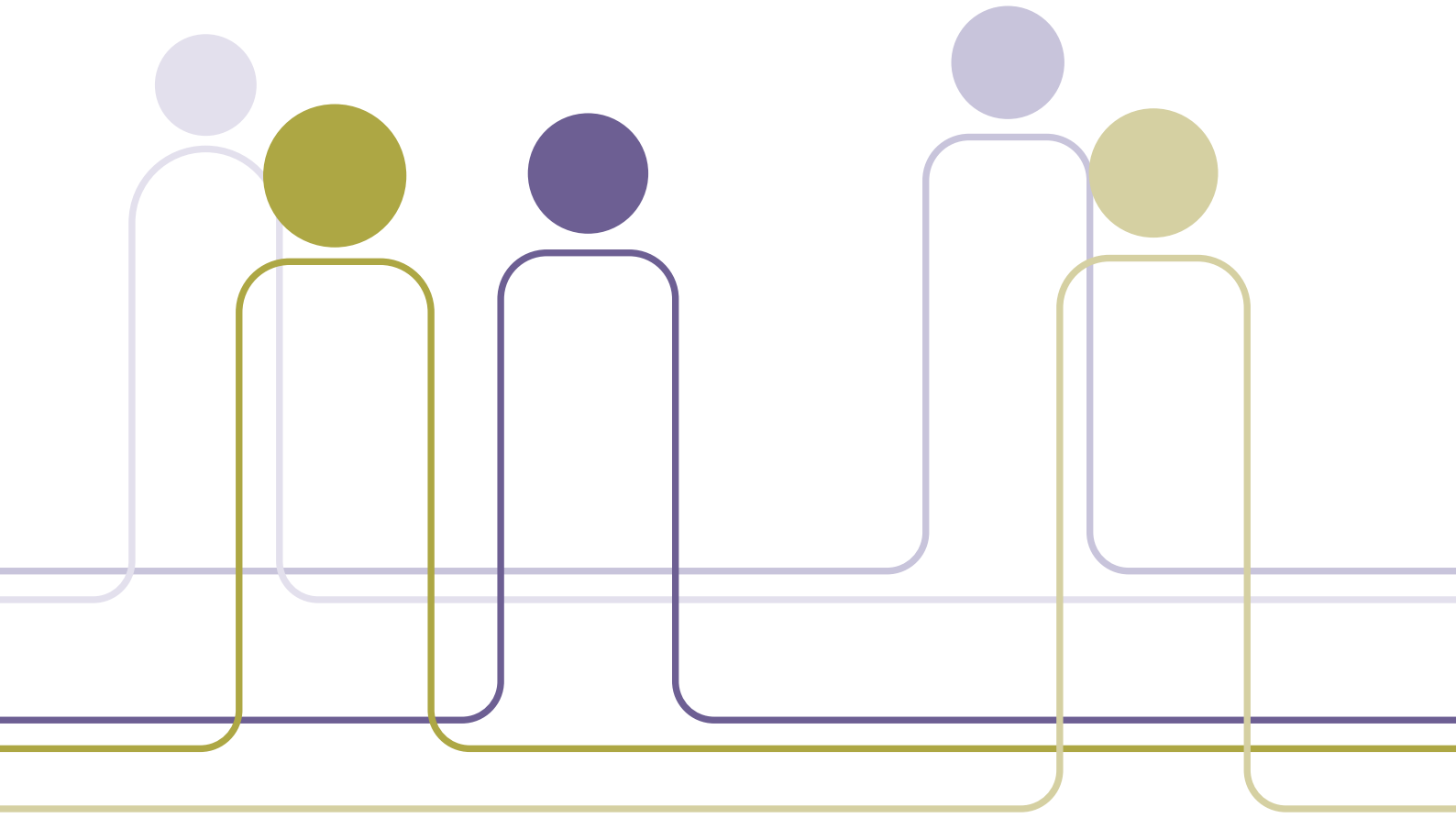
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015

Supervision for the counselling professions



Fact sheet

Ethics in Practice

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Using Fact Sheet resources

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The term 'practitioner' is used generically in a wider sense, to include those who work in the practice of therapy, psychotherapy, coaching and pastoral care.

1 Introduction

This resource gives an overview of the different elements that go into making a good supervision relationship. It is for both supervisees and supervisors and covers aspects of the relationship that apply to both of these roles. It also has sections specifically for supervisees on how to choose a supervisor and for supervisors on being a supervisor.

We commit to having regular effective supervision as members of BACP in order to be able to practise safely and within our competence.

BACP's *Ethical Framework for the Counselling Professions* (2026) reiterates that supervision is a core part of ethical practice and not an optional extra.

Counsellors and psychotherapists must have regular supervision that fits the level of risk involved in their practice, their experience and the setting in which they practise (Core Responsibility 4.3).

The Framework also requires practitioners to be accountable and transparent and to work collaboratively (EF2026 Principles). Supervision provides a main way to demonstrate this accountability, giving us as practitioners a professionally supported space to foster self-awareness, review ethical dilemmas, relational processes, and hold risk.

Most importantly though the relationship should become a foundation for us as practitioners to depend on as we build our practice. Both supervisee and supervisor should learn from the process – for supervisors welcoming the new knowledge and understanding of the individual supervisee that adds to their knowledge and understanding. For the supervisee welcoming new insights into their work and support with their development

BACP makes it clear that supervision is required for roles involving emotionally challenging communication or complex relational work. Practitioners are responsible for selecting supervision that is appropriate to their modality, client group, workload, level of experience, and any specialist areas of practice. Supervisees are responsible for ensuring they have the appropriate qualifications and experience to undertake the role.

2 What is supervision?

So, what is supervision? There is no specific definition, but we can think of it as a formal, collaborative process where two or more people form a 'supervisory relationship'. In this relationship they share an understanding of how to work together effectively to provide a safe, ethical and competent service to clients. The content and structure of supervision may differ between clinical contexts, settings, theoretical orientations and our experience as practitioners.

However, supervision needs to provide us with a space that allows us to reflect in depth about all aspects of our practice ensuring that our supervisor has the qualifications and competence to supervise our work in accordance with the BACP membership requirements that apply to us (depending on our level of experience caseload and training), and that allows us to collaborate on ethical dilemmas and other challenges in our work. To ensure that supervision meets these requirements it should be independent of any line management (Core Responsibilities 4.3 a-e).

An effective supervisory relationship is one in which the supervisor invites honest and open discussion and provides the opportunity for collaborative reflection (BACP, 2026). Collaboration in this context is defined as follows:

'A collaborative process is a fundamental aspect of all ethical practice and decision-making in counselling, psychotherapy, coaching, supervision and training. Collaboration, which considers identity and diversity, involves taking deliberate steps towards mitigating potentially harmful power dynamics and inequalities between people, this will include collaborating on how any work will be undertaken.' (EF 2026)

We also need to ensure we are clear about who holds key responsibilities for clients in the relationship (Core Responsibility 4.3e). Working out 'who is responsible for what' relies upon explicit and honest discussions between supervisor and supervisee within the context of a collaborative, trusting and respectful supervisory relationship.

To sum up a supervisor should be able to support us to:

- Work safely within our skills and training
- Meet our BACP membership requirements and the requirements of any training we are undertaking
- Understand and stay within the limits of our practice
- Keep on top of safeguarding responsibilities
- Think about diversity, power, and difference in our work
- Look after our own wellbeing and stay fit to practise
- Keep track of our ongoing professional development.

3 The tasks of supervision

One popular model of supervision helps to provide a structure for the tasks of supervision. The *normative*, *formative* and *restorative* tasks of supervision (Inskipp and Proctor, 1995) can each be monitored. The EF shows us that each task requires the supervisor to demonstrate various Ethical Principles (EP).

For example, the *normative* task (protecting standards and ethical practice) may require a supervisor to show the EP of 'Do no harm' when challenging suspected unethical work.

The *formative* task (developing the supervisee's skill, knowledge and understanding) could require the supervisor's expression of the EPs of 'Transparency' and 'Integrity' if their own theoretical knowledge in a particular area is limited and specialist input is required. Providing the *restorative* task (which offers the supervisee the chance to recharge) when listening to a supervisee reporting possible burnout, may require the EP of 'Compassion' to be demonstrated. This might mean making time for the supervisee to discuss difficulties in their personal life, (whilst maintaining the boundary between therapy and supervision).

To support these tasks, supervisors need to be aware of:

- power and/or authority within the relationship
- conscious and unconscious influences and parallel processes
- areas involving difference, diversity, discrimination, oppression and background.

These tasks will also vary depending on the experience of the supervisee. For new/trainee therapists structure, safety and containment are essential.

The priorities at this stage are:

- very close monitoring of client safety, safeguarding, and risk
- clear guidance on boundaries and ethics
- clarity on assessment, formulation, and endings
- working primarily within the trainee's modality
- clear and constructive feedback on competence and fitness to practise
- regular evaluations of training and placement requirements
- close examination of biases, assumption and self-awareness.

Here, supervision is protective, ensuring clients are safeguarded, while the practitioner becomes more skilled and strengthens their therapeutic work.

For experienced therapists, supervision shifts towards more autonomy and complexity.

The priorities include:

- collaboration when dealing with ethical dilemmas
- encouraging autonomy and critical reflection
- addressing bias, power, and systemic influences in practice
- monitoring burnout, stagnation, or ethical drift
- sustaining long-term professional development.

At this stage, supervision becomes less directive and more reflective, while still maintaining oversight and accountability.

Ethical decision-making

As we have identified, supervision is an inherently collaborative process, particularly when considering the decisions that we make about our work. The *Ethical Framework 2026* offers provides a six-point structure for making our ethical decisions, and there is also an ethical decision-making tool Ethical Decision-Making Model.

The opportunity for ethical decision-making can present itself in several ways within a supervisory context:

- A supervisee presenting an ethical dilemma about a client in a supervision session, with the hopes of working with their supervisor to come to a decision about next steps
- A supervisee reflecting on a decision they have already made in a session with a client, to explain their rationale for that decision and gain their supervisor's perspective on that process and what could have been done differently
- Supervisee and supervisor identifying a potential ethical dilemma in discussion of client work and working together to consider what an appropriate ethical decision might be in response
- A supervisor explaining to their supervisee why they have suggested or made a particular ethical decision about their work.

In the above examples, supervisee and supervisor must be able to account for their ethical decision-making by providing reasons for decisions made and actions taken, reflecting on whether they were done '*with the intention to ensure fairness, equality and justice*', in line with the *Ethical Framework 2026*.

If a complaint is made about a supervisee or supervisor, the BACP Professional Conduct Panel will use the E*thical Framework* as a reference point concerning the standards expected of members, to inform decision-making.

For further reading, see other resources on the BACP website.

4 The relationship

This is an important relationship in our working life as therapists. Ideally it will be a long-term commitment for both parties. As we have already seen, it is professional relationship that informs clinical development, decision-making and safeguarding.

4.1 Choosing a supervisor

We now move on to how we choose a supervisor for this important role in our work.

Selecting a supervisor is an exercise in professional judgment. The initial conversations are a starting point of establishing whether the supervisory relationship can support the supervisee's practice, competence and ethical commitments. It requires reflection on your current practice demands, developmental stage and areas of complexity or risk.

Some areas to consider in making our choice could include:

What are their professional qualifications and experience both as a therapist and as a supervisor? Does their theoretical modality match with yours and are they clear about their approach to supervision?

What is their approach to diversity, inclusivity, and cultural competence?

The *Ethical Framework 2026* commits us to the principle of anti-oppressive practice (EF 2026 Principles). More and more therapists consider inclusivity and awareness non-negotiable criteria, as well as working collaboratively with transparency fairness. So, it will be important to understand their approach to issues around gender, sexuality and relationship diversity, intersectionality and their experience and training in anti-oppressive practice.

What is their experience and approach to crisis and risk management – how do they handle discussions about high-risk clients or ethical dilemmas and what guidance do they provide when supervisees face complex or borderline cases?

4.2 Being a supervisor

As we have seen being a supervisor requires appropriate qualifications and experience; it also comes with responsibilities.

These are greater where the supervisee is a trainee but they are still there with an experienced supervisee. So as with client work this is a relationship which the supervisor needs to have the capacity to hold.

Supervision of supervision is essential in this and is part of meeting our commitment to Core Responsibility 4.3 in ensuring we have adequate supervision for all of our work.

Later in this resource we consider what can get in the way of the relationship. The supervisor needs to be able to be open and reflective of their part in any rupture and having their own supervision to explore this will be key. Personal style is something that a supervisor will develop as they become more experienced. Reflection on what that style is and how it fits with the supervisee.

Supervision of supervision

It is important to be clear about the structure, contracting and practical arrangements of the supervision including contact between sessions, asking yourself do I understand and can I meet the supervision requirements of this therapist. This is particularly relevant if they are in training and have to meet both the requirements of their training institute and their professional body and their course supervision requirements.

4.3 For both supervisee and supervisor

It helps in developing a safe and affirming space for both if it is clear from the outset what each of you expect from the supervision and have had a chance to assess as far as possible if you will get on – will your relationship work?

Much like the therapeutic relationship in counselling, the strength and quality of the supervisory relationship appear to have more impact on learning, satisfaction and professional growth than strict adherence to any single supervisory model (Bernard & Goodyear, 2019; Watkins, 2014). In other words, how the supervisor and supervisee relate to each other often matters more than the framework being followed.

It is a role grounded in safety and trust, and therefore the supervisee, like the client, needs to feel psychologically safe, respected and able to speak openly about uncertainty, or mistakes for learning to happen. If the relationship feels evaluative without being supportive, or distant rather than collaborative, development can stall.

So, for both supervisor and supervisee it is important to ask do I like and trust this person? And to build in reviews where you can each address how the relationship is progressing and what needs (if anything) to change.

5 Monitoring the supervision relationship

Conflicts, challenges and ruptures happen within the supervisory relationship. Like any relationship, misunderstandings can happen. Mearns (1991) cautions that 'the unspoken (supervisory) relationship' can be complicated by 'layers upon layers' of unclarified differences of opinion about the aims and practice of counselling and supervision, unvoiced reactions and unexpressed assumptions. This may be especially relevant when working with different cultural understandings.

Strong feelings, thoughts and dynamics commonly found in human relationships, can also arise. It's important to ensure both supervisees' and supervisors' emotional (and other) needs are met outside the supervisory relationship, and it is wise to monitor this area also.

Recognising what is happening, acknowledging it, awareness of any part they play in the situation and then managing situations (either at the time or afterwards) are part of the supervisor's responsibility (Core Responsibilities 1.1, 1.4). Supervisors (and supervisees) must 'be honest and transparent' about 'anything that has gone wrong' during their work (Core Responsibility 2.2). This involves providing a timely and full explanation of what happened, the likely effects as well as providing an apology to those affected. We should also act quickly to 'limit harm and meet any legal obligations'. Some trainees and newly qualified therapists may require enhanced supervisory support when spotting a mistake or taking appropriate action afterwards.

Core Responsibility 4.3 states that supervision should be independent of line management. This recognises the importance and uniqueness of the supervision relationship but dual relationships can arise in other situations. Supervisee and supervisor are both in the counselling world and may meet at conferences, training events or be involved in other professional ways. There can be a fine line between a professional and personal relationship, and any tensions between overlapping roles should be monitored (Core Responsibility 1.3a).

In addition, the supervisor needs to be wary of what might involve a boundary crossing (meeting at a conference, for example) and a boundary violation (moving into a sexual relationship with a supervisee whilst still offering supervision, for example). Overlapping boundaries may be more likely in peer relationships. See further resources on the BACP website.

5.1 When to take a closer look at the supervisory relationship

Supervisors should monitor, evaluate and generally attend to the relationship throughout its lifetime. Supervisees should also be proactive in evaluating and reflecting on the relationship. However sometimes circumstances may arise which ask us to pay particular attention to the relationship.

Some examples are:

- following a significant work or life event for either person
- when certain types of client material are re-enacted in supervision, for example, traumatic parallel process or projective identification
- before and after planned and unplanned breaks
- after working together for a prolonged period
- when either has concerns about supervision or the other's practice
- if either person becomes the subject of the BACP (or similar) professional conduct procedure
- when preparing to end the relationship.

5.2 Ways of monitoring

Listen to your internal supervisor

As practitioners we can develop our self-awareness of various perspectives and insights gained before, during and after sessions. According to Casement (1985), this reflective practice can be compared to listening to an 'internal supervisor'. This inner resource can provide a lot of useful information, emerging from the thoughts, fantasies, dreams, intuitions, emotions and bodily responses we have both as supervisors and supervisees in response to our work. Use of this information not only helps enlighten the work but also contributes to developing and maintaining ethical, effective practice.

Reviews

Discussions between supervisor and supervisee are very important when monitoring process. As therapists we are very aware of the importance of creating, attending to and maintaining healthy relationships with clients, and this equally applies to our supervision relationship. Building in reviews at regular intervals allow space to look at the relationship.

It's important that supervisors support themselves during any feedback process so that they can hear, evaluate and respond appropriately to potential criticisms without justifying, blaming or making excuses. Using their own supervision of the supervision relationships they have will support them in this.

5.3 What gets in the way of looking at the relationship?

Barriers might include:

- lack of trust
- fear of rejection, humiliation, being judged (even positively)
- non-urgent client material 'suddenly remembered' or 'more important'
- crises and life events that seem to happen frequently, taking priority
- cancellations, repeated rearrangement and forgotten review sessions
- fear that existing conflicts and tensions could worsen
- unaddressed prejudice and denial of difference
- lack of choice in supervisor/supervisee pairing
- unconscious dynamics
- actual or imagined imbalance between challenge and support
- sexual attraction
- fear that any evaluative function (e.g. report writing) may be affected
- feeling 'cosy' within the relationship
- managing multiple relationships
- strains in life.

It helps to:

- explain and normalise the process of monitoring early in the relationship
- include the task in your supervision contract
- set review dates and/or do a mini-review at the end of each session
- have an agreement to reschedule cancelled reviews
- be pro-active in bringing issues to the supervisee's attention (for example, unspoken tension) whilst asking their supervisee to do the same
- look after your health and wellbeing.

6 Application to practice

Case studies and their application to practice

From a BACP perspective, clinical supervision is often seen as a lifeline for practitioners. It helps us stay ethical, reflective, and grounded in the work. However, it's not a checklist, but a negotiated relationship shaped by expectations, professional boundaries, and the theoretical approaches of both the supervisor and supervisee.

A lot of the literature focuses on what supervision *should* provide, but far less attention is given to its limits, the tensions that could potentially arise, and the ways supervisees learn to navigate these boundaries over time.

Looking through a developmental lens helps explain why the same supervisory experience can feel very different depending on where someone is in their career. What feels supportive and containing to a trainee might feel restrictive or even frustrating to a more experienced practitioner. Conversely, what feels natural to a senior therapist could overwhelm a novice. Our stage of development shapes not only what we need from supervision, but also how we perceive whether it feels safe, meets our current needs, and whether it helps foster growth.

In everyday practice, supervision is an ongoing negotiation between what is hoped for and what is realistically available; recognising what is achievable and what is not is central to making supervision meaningful, sustainable, and ethical.

Understanding supervisory effectiveness means paying attention to how realistic expectations and relational dynamics meet.

The distinction between reachable and unreachable expectations highlights a key professional skill: careful judgment. Supervisees must learn to evaluate supervision not only through comfort or satisfaction, but through thoughtful reflection.

The following fictionalised case studies explore how supervision might unfold in real life when these factors come together, highlighting both the opportunities and challenges that can arise in practice.

6.1 Case study 1: Reachable and unreachable expectations in clinical supervision

Supervisees often come into supervision with clear, and sometimes unspoken, expectations about what they need. These expectations can include emotional support, guidance through ethical dilemmas, constructive feedback, or practical advice for client work. They may also be shaped by prior experiences, confidence levels, personal stress, or professional development stage. Supervisors, on the other hand, bring their own professional orientation, relational and ethical stance. These factors shape what they can offer, how they engage, and where they naturally set limits. Supervision is therefore not a neutral space that automatically adapts to a supervisee's desires. Instead, it is a negotiated space between two professionals with different perspectives and ways of working.

Elena, in this example, is an experienced therapist in private practice. She values reflective, relational work, and enjoys exploring the nuances of client interactions. She also appreciates clear guidance when facing ethical dilemmas or complex clinical decisions. She enters supervision hoping for both depth and direction.

Her supervisor, Daniel, uses a collaborative approach by guiding supervisees towards their own understanding rather than giving direct answers. He believes that allowing supervisees to work through dilemmas independently helps build professional confidence and judgment. While Elena finds his approach thought provoking, she notices that at times it leaves her feeling uncertain, especially when she is anxious about risk or ethical considerations.

Over the first few sessions, Elena enjoys the richness of the conversations, but gradually she starts to feel disconnected. She wishes for more explicit guidance. Rather than expressing this early on, she begins questioning herself: Am I expecting too much? Should I just adapt to his style? Would asking for more direction make me appear incompetent?

These internalised worries influence how she participates in supervision, making her more cautious and sometimes less open.

As time goes on, the tension begins to affect the supervisory relationship. While the sessions remain thoughtful, Elena experiences frustration and lingering doubt. Eventually, when she chooses to address the issue directly, she shifts the conversation to reflect on what she needs from supervision, sharing that while reflection is valuable, there are moments when she would benefit from more guidance.

Daniel listens carefully and explains his approach. He shares his belief that supervision works best when the supervisee develops their own decision-making, rather than being given instructions. Together, they explore:

- What Elena finds most supportive and helpful in supervision
- Daniel's beliefs about the purpose and scope of supervision
- The professional responsibilities Daniel carries as a supervisor
- How much Daniel can adapt his style without stepping outside his professional principles.

Through this discussion, the distinction between **reachable and unreachable expectations** becomes clearer.

Daniel can offer structured discussion of ethical dilemmas, clarify key points, and summarise guidelines more explicitly in ways that suit his supervisory style. However, providing direct instructions on exactly what Elena should do is outside his approach. This is not avoidance; it is a boundary rooted in professional integrity. Something which is fundamentally important to him.

This reframes the conversation in a more helpful way. The focus is no longer whether supervision is 'adequate', but whether it meets Elena's current needs. In this discussion, they are able to identify areas of compromise: Daniel will be clearer at the end of sessions and highlight ethical principles more directly, while Elena recognises that her wish for direct instruction is tied to moments of anxiety. She also sees the value in Daniel's approach: sitting with uncertainty helps her develop confidence in her own judgment.

At the same time, they acknowledge the limits of negotiation. Supervision is inherently bounded by theory, ethics, and professional identity. Not all differences can or should be resolved through compromise.

From a BACP perspective, this example illustrates the shared responsibility in supervision. It is not a one-way provision of support, but a collaborative relationship requiring honesty, transparency, and mutual respect. Compromise works when adjustments remain within ethical and professional boundaries. If meeting in the middle required either person to step outside their core professional values, it would be unethical to ignore the mismatch. Sometimes, changing supervisors is the most responsible next step.

6.2 Case study 2: Cultural context and ethical self-awareness

The second example demonstrates how supervision can uncover implicit assumptions and expand understanding, especially around cultural context and ethical reflexivity.

Aisha is a therapist working with a client struggling to balance personal ambitions and strong family obligations rooted in a community-first mindset. Early in therapy, Aisha introduces conversations about independence, boundary setting and personal growth. From her training, she understands these as markers of psychological development. However, the client responds with discomfort, explaining that family loyalty is central to their identity. Since discussing boundaries, their anxiety has increased. They express concern that pursuing personal goals at the expense of family obligations feels like a betrayal of who they are.

In supervision, Aisha and her supervisor examine the assumptions underpinning her thinking.

The supervisor maintains a curious, non-critical stance. The aim is not to correct Aisha but to help her broaden her perspective and become aware of her own cultural lens.

As a result of these conversations, Aisha realises that her initial perspective of the client's needs, while well-intentioned, reflected dominant Western assumptions about autonomy and growth. She recognises that her focus on boundary setting may have overlooked the client's values and family priorities.

In subsequent sessions, Aisha shifts her approach. Instead of encouraging the client to distance themselves from family, she explores how the client negotiates responsibilities and maintains a strong connection to their family. She supports the client in defining what balance means in their own terms, rather than applying external standards of independence.

The outcome is significant. The client appears more comfortable and more able to reflect on their situation. The therapeutic relationship strengthens, not because of any technical intervention, but because the client feels understood and respected.

Supervision in this case functions as a reflective space that protects both client and therapist from unexamined bias. It helps Aisha widen her understanding, approach her work with more flexibility, and stay ethically aware. The focus shifts from trying to 'correct' or 'adjust' the client to building understanding, working together, and responding in a way that respects the client's cultural background.

This experience also strengthens Aisha's confidence as a practitioner. Rather than feeling she has 'got it wrong', she begins to see supervision as a place where her thinking can evolve safely. She becomes more alert to how her own background, training, and cultural assumptions may shape her formulations in other cases. Over time, this builds a habit of pausing, questioning, and checking her perspective before moving too quickly toward a solution. In this sense, supervision not only benefits this particular client, but also contributes to Aisha's ongoing professional growth.

This case highlights how supervision expands perspective, strengthens relationships and improves the quality of therapeutic work. It demonstrates how reflective dialogue and ethical questioning within supervision can lead to better outcomes for both client and practitioner.

What are my views on Aisha and Elena's challenges with their supervisors?

- How might their background or context influence their struggles?
- What have I learned from these cases that I can apply in future practice?
- How could I build trust and understanding with clients in situations like theirs?
- Whose standards of growth are being applied?
- How does the client define wellbeing within their cultural context?
- Could encouraging independence unintentionally harm the client's sense of self?

How does this apply to my practice?

- What's important for me in supervision?
- Do I see supervision as a monitory practice?
- How can I be clear from the start about how the supervisor works and what their limits are?
- How can I have open and honest conversations about expectations, especially if something feels uncomfortable?
- How can I recognise that differences in style, background, experience, and personality are normal?
- How can I stay aware of power, identity, and the wider social factors that affect both the therapist and the client?
- Do I feel the relationship is safe and workable?
- Do I feel that there may be alternative ways to work ethically and effectively that honour the client's values?

Further reflection

- If I began to consider changing supervisors, how would I know whether it is my own avoidance of challenge, or a genuine lack of fit and how would I approach that conversation?

- If my practice setting were to change, for example, moving into private practice, online work, or a specialised field, how would I assess whether my current supervisor still meets the demands of the new context?

7 Conclusion

Developing the skill of discernment strengthens independence, accountability and the ability to think things through carefully. Supervision, like therapy, involves working through differences, having open discussions and respecting professional boundaries. Learning how to recognise these limits and work within them reflects the same complexity we manage in everyday clinical practice.

It is my view that supervision works best when supervisees take responsibility for stating what they need, rather than expecting the supervisor to foresee it. Silence can easily be mistaken for agreement, and when tensions are addressed openly, they can become opportunities for learning, instead of signs that something has gone wrong.

Supervision that tries to meet every expectation is likely to disappoint. And if it ignores a practitioner's stage of development, it can feel static or leave the practitioner feeling unheard.

Good supervision balances professional standards with genuine care, while recognising the limits of any supervisory relationship. It is not expected nor important to get everything right, and is more about sustaining honest conversation, shared responsibility and growth.

Supervision is most useful when it brings unspoken assumptions into the open and questions about fit, boundaries and expectations offer meaningful learning.

Approaching supervision with an awareness of what is realistically possible allows practitioners to consider not only what they want from it, but what can actually be created together within a particular working relationship.

From a BACP perspective, supervision is a living, negotiated relationship that supports growth, reflection, and ethical practice. It doesn't erase the challenges of clinical work but provides a safe container where complexity can be held, explored and transformed into learning and deeper insight.

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Material for this resource has been written by a number of authors from the BACP author bank and their contributions are gratefully acknowledged:

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References and further reading

BACP (2026) *Ethical Framework for the Counselling Professions 2026.* Lutterworth: BACP

BACP (2021a) *Supervision Competence Framework*. Lutterworth: BACP. (Accessed 20 February 2026)

BACP (2025) 032 Legal Resource: *Supervision within the counselling professions in England, Northern Ireland and Wales.* Lutterworth: BACP. (Accessed 20 February 2026)

BACP (2024) S*upervision: Information and resources for practitioners and supervisors.* Lutterworth: BACP. Available at: www.bacp.co.uk/membership/supervision. (Accessed 20 February 2026

Berne, E. (1968) *Games people play.* Harmondsworth: Penguin

Caffrey, K., Scott, J., Touhey, G. (2014) Group supervision – does it count? *Therapy Today*, 25(5), pp30-33. (Accessed 20 February 2026)

Carroll, M., Tholstrup, M. (eds) (2001) *Integrative approaches to supervision.* London: Jessica Kingsley Publishers. (Accessed 20 February 2026)

Casement, P. (1985) *On learning from the patient.* London: Tavistock

Creaner, M. (2014) *Getting the best out of supervision in counselling and psychotherapy.* London: Sage. (Accessed 20 February 2026)

Dunnett, A., Jesper, C., O'Donnell, M. and Vallance, K. (2013) *Getting the most from supervision.* Bloomsbury Publishing. (Accessed 20 February 2026)

Feltham, C., Dryden, W. (1994) *Developing counsellor supervision.* London: Sage. (Accessed 20 February 2026)

Goldberg, C. (1981) The Peer Supervision Group – An Examination of its Purpose and Process. *Group*, Spring 1981, 5(1), pp27-40. (Accessed 20 February 2026)

Hawkins, P., Shohet, R. (2012) *Supervision in the helping professions* (4th edition). Maidenhead: Open University Press

Hawkins, P., McMahon, A. (2020) *Supervision in the helping professions* (5th edition). London: Open University Press. (Accessed 20 February 2026)

Inskipp, F., Proctor, B. (2001-2019) *Making the most of your supervision, 2nd Ed.* Twickenham: Cascade. (Accessed 20 February 2026)

Inskipp, F., Proctor, B. (1995) *The art, craft and tasks of counselling supervision.* Part 2: Becoming a supervisor (2nd edition). Twickenham: Cascade

Lohani, G. and Sharma, P. (2023) Effect of clinical supervision on self-awareness and self-efficacy of psychotherapists and counselors: A systematic review. *Psychological Services*, 20(2), 291-299. https://doi. org/10.1037/ser0000693 (accessed 19 February 2026)

Mearns, D. (1991) *On being a supervisor.* In: Dryden, W. and Thorne, B. (eds) Training and supervision for counselling in action. London: Sage

Ness, O., McNamee, S., Kvello, Ø. Eds. (2021) Relational Processes in Counselling and Psychotherapy. *Palgrave Texts in Counselling and Psychotherapy.* Heidelberg: Springer Nature

Proctor, B. (2008) *Group supervision: A guide to creative practice.* London: Sage

Stainsby, K. (2009) Playing at supervision. *Therapy Today* 20(5): 34-37.

Wallace, K., Cooper M. (2012) *Supervision personalisation form* V1.1. Available at: Supervision+Personalisation+Form+2017-08.pdf (accessed 19 February 2026).