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British Association of Play Therapists

BAPT Guidance for Clinical Supervisors

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British Association of Play Therapists

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Introduction

Clinical supervision is a crucial component of the professional development and ethical practice of Play Therapists. It provides a structured and supportive framework for therapists to reflect on their work, enhance their skills, and ensure the well-being of their clients. Clinical supervision supports the practitioner in their development and understanding of the therapeutic process and their own self-awareness. It also provides a quality assurance mechanism for practice and enhances public protection for users of play therapy services.

BAPT is committed to ensuring that BAPT Registered Play Therapists® receive high-quality supervision as a core aspect of their therapeutic practice. This “Guidance for Clinical Supervisors” outlines BAPT clinical supervision requirements. BAPT has trademarked the “BAPT Approved Supervisor®” title to show its commitment to providing the public with highly trained professionals working to a recognised standard endorsed by BAPT. Only BAPT Registered Play Therapists® or BAPT Retired Members are eligible to apply for BAPT Approved Supervisor® status. Note: Portfolio conversion to BAPT Play Therapist® follow the same guidelines.

Clinical Supervision Requirements

The Ethical Basis for Good Practice in Play Therapy (Section 1.4) outlines the expectations of BAPT members in relation to supervision. It states:

- All Play Therapists, including supervisors, are required to receive on-going, appropriate, formal and regular supervision independently of their managerial relationships.
- Supervisors have a responsibility to maintain the good practice of Supervisees and to protect clients from harm and bad practice.
- Supervision must be provided by an appropriately qualified and experienced Play Therapist, except where no such Play Therapist exists in the geographical region. In such circumstances, the Play Therapist must receive supervision from an appropriately qualified and experienced Therapist or equivalent. This Supervisor should be subject to either statutory regulation through the Health and Care and Professionals Council (HCPC), or voluntary regulation through the Professional Standards Authority (PSA).
- Supervision must involve face to face contact, except in circumstances where physical distance between the Play Therapist and an available supervisor precludes such contact.
- Play Therapists must receive supervision adequate to maintaining their level of competency, functioning and good practice.

BAPT holds the Accredited Register of the British Association of Play Therapists and is the governing body for Play Therapy. BAPT recognises that its’ members may

provide other adjunctive therapies in addition to Play Therapy. BAPT expects that its' members will seek appropriate levels of clinical supervision specific to the therapeutic intervention provided, but recognises this document relates specifically to the practice of Play Therapy as regulated by the Professional Standards Authority (PSA).

Clinical Supervisor Experience

Clinical supervisors will hold significantly greater experience in Play Therapy practice than their supervisees. As a guide, "significantly greater experience" is defined as a minimum of three years greater experience than the supervisee. BAPT would expect that a clinical supervisor would have completed a minimum of 300 hours of post qualifying Play Therapy practice. In addition, BAPT encourages all new clinical supervisors to undertake additional training in supervisory practice. BAPT also suggests in line with good practice BAPT Approved Clinical Supervisors® consider committing five hours of their yearly CPD allowance to training, webinars, reading or peer forums relevant to supervision practice.

Clinical Supervision of Student Play Therapists

For students undertaking a BAPT accredited master's course in Play Therapy, it is expected that clinical supervision during training must be provided by a BAPT Approved Supervisor®. If there are mitigating circumstances, for example, geographical location, students should seek advice from their university. BAPT may use their discretion and allow for a higher ratio of online supervision versus in-room supervision. In all cases, students should seek guidance from their university to ensure the appropriateness of the clinical supervisor.

Clinical Supervision of Qualified Play Therapists

Whilst BAPT recommends BAPT Registered Play Therapists® receive clinical supervision from a BAPT Approved Supervisor®, it recognises that this is not always possible due to geographical location or other mitigating circumstances. In this instance, the supervisee should ensure their clinical supervisor is appropriately qualified and a member of a recognised governing body, regulated by the Professional Standards Authority (PSA) or Health and Care Professionals Council (HCPC). The Supervisee should ensure that within the Supervision contract, their chosen Supervisor will have an understanding of BAPT Play Therapy Core Competencies, together with The Ethical Basis for Good Practice in Play Therapy (BAPT), which will be reviewed on a yearly basis within the context of clinical supervision.

If any clinical supervisor is sought from a governing body, other than BAPT, they should have completed a minimum of 300 post-qualifying therapy hours, ideally with children and/or young people.

The Supervisee should ensure that within the Supervision contract, their chosen Supervisor will understand BAPT Play Therapy Core Competencies, together with The Ethical Basis for Good Practice in Play Therapy (BAPT), which should be reviewed on a yearly basis within the context of clinical supervision.

Supervision of Clinical Supervisory Practice

A BAPT Approved Supervisor® who clinically supervise Play Therapists require separate supervision of their supervisory practice. This does not need to be a BAPT Approved Supervisor® but must be provided by a qualified therapist/counsellor who is an approved/accredited supervisor by their professional body.

As guidance for newly Approved BAPT Supervisors® the selected Clinical supervisor of supervisory practice should meet the following criteria:

- Have a minimum of two years greater supervisory experience than the play therapist supervisor
- A minimum of 150 hours of completed supervisory practice

Frequency of Clinical Supervision

The following table outlines the minimum requirements for clinical supervision for both Qualified Play Therapists (QPTs) and Newly Qualified Play Therapists (NQPTs*). It should be noted that these requirements are the minimum BAPT expect their members to undertake depending on their case load and level of experience, and NQPT's may choose to participate in more clinical supervision to further their professional development and ensure their work is safe and ethical at this juncture.

- **An NQPT is a Newly Qualified Play Therapist, who has just completed a BAPT accredited Masters in Play Therapy and working towards a minimum of 100 clinical hours in the first year of post qualification practice.**
- **A Play Therapist is deemed as an NQPT for the remainder of the renewal year in which they qualify, and then a further full year post qualifying. For example, if a student qualified in May 2024, they would remain a NQPT until the renewal cycle in October 2025, when they would be eligible to become a BAPT Full Member. However, you cannot become a Full Member until you have at least 100 practice hours.**

Caseload	Qualified PTs Recommended Monthly Supervision Hours	NQPTs Recommended Monthly Supervision Hours
Category A: 1-10 children	1 to 1.5 hours	2 to 3 hours
Category B: 11-16 children	1.5 to 2 hours	3 to 4 hours

Category C: 17-20 children	2 to 3 hours	N/A *
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****BAPT state that this type of case load is not ethically responsible and ill-advised for Newly Qualified Play Therapists (NQPT).***

Students undertaking a BAPT accredited Master's course will be required to have clinical supervision at a ratio of 1 hour of clinical supervision to every 2 hours of clinical practice. Further information on the requirements of individual courses can be found with each university's documentation.

Format of Clinical Supervision

BAPT believes the manner in which supervision takes place should be the responsibility of the supervisor and supervisee and feels that while the ideal is for sessions to take place in room together, the use of video calling, and other online platforms should be encouraged where geographical or practical restrictions make meeting in person impractical. Email and paper only formats are not accepted as part of supervision.

Students undertaking a BAPT accredited Master's course are expected to have in room together supervision, unless there are mitigating circumstances. In this case, 50% in room together versus 50% online supervision will be accepted by BAPT.

Group Supervision

Group supervision will not include more than four supervisees. Group supervision will be calculated by the addition of one half of the required supervision i.e., 1.5 group supervision hours are equivalent to 1 individual supervision hour. 3 group supervision hours are equivalent to 2 individual supervision hours.

Peer Supervision

Peer supervision can be a useful tool for reflective practice, but is not accepted as a format for the requirements of clinical supervision accepted by BAPT. Peer supervision must be used in addition to individual or group supervision; Play Therapists cannot only be supervised through peer supervision.

Context of Clinical Supervision

Clinical supervision will endeavour to be independent of all managerial relationships and aims to avoid potential multiple relationships with the supervisee where feasible. Clinical supervisors' practice will fully comply with the BAPT Equal Opportunities Statement and Policy and are responsible for ensuring they:

1. Are aware of relevant equal opportunities legislation and how it applies to their supervisory practice.
2. Regularly review and evaluate the ways in which they undertake their work in order to ensure that standards of practice are being applied fairly to all supervisees.
3. Provide access to review and evaluation procedures and results.

Delivery of Clinical Supervision

Clinical supervision is a crucial component of the professional development and ethical practice of Play Therapists. It provides a structured framework for Play Therapists to reflect on their work, enhance their skills, and ensure the well-being of their clients. Effective clinical supervision will include the following:

Supervisory Contract

In order for clinical supervisors to conform to consumer rights and related legislation, it is imperative the supervisor – supervisee relationship is formalised through a contract. This will ensure a clear understanding of services offered, fees and other relevant details. The following list is not exhaustive but will help form the basis of a typical supervision contract:

- Name and address of supervisor (location of supervision, if different)
- Title of document – “Supervision Contract”
- Cost of sessions
- Description of the type of supervision to be provided
- Experience and qualifications held by the supervisor
- Duration and frequency of the sessions
- Arrangements and charges (if relevant) for cancellation or annual leave
- Arrangements for the termination of the supervisory relationship
- Confidentiality statement
- Overview of supervisors’ legal responsibilities including safeguarding
- Note keeping policy
- Statement of consent
- Consent to store data under the GDPR regulations
- Overview of supervisors’ responsibilities as per the BAPT Professional Conduct Procedure and Policy 2014

Regular Reviews

It will be necessary to define the clear goals and objectives for the supervision process. This will be different depending on the experience of the supervisee. Opportunities should be given to allow the supervisor and supervisee to revisit the goals and objectives set.

In addition, opportunities should be given to regularly review and evaluate the supervisory services. This should also be done in conjunction with the supervision contract. Supervisees should be encouraged to provide feedback on the supervision process to improve its effectiveness.

A Safe and Supported Environment

The supervisor should ensure that the supervision environment is safe, confidential and free from judgement. Supervisees should feel comfortable discussing their cases and concerns openly. This will only be possible with regular scheduled supervision. Consistency is the key to effective supervision.

Supervisors should promote reflective practice by encouraging supervisees to explore their feelings, thoughts and any examples of countertransference during sessions. This will encourage supervisees to gain insight into their own processes and biases. If appropriate, opportunities should be given for more creative forms of supervision, to facilitate more effective use of self. However, supervisors should have undertaken adequate training before embarking upon the use of creative approaches within the supervisory relationship.

The supervisory relationship should allow supervisors to provide constructive feedback and guidance on the supervisees' Play Therapy practice, whilst acknowledging and being sensitive to the power dynamics between supervisor and supervisee.

The supervisor should acknowledge issues concerning difference and diversity and be cognisant of the sensitivities of such issues. Supervisors should pay particular attention to cultural competence, ensuring supervisees are aware of and address cultural issues and diversity in their Play Therapy practice.

Supervisors should also encourage their supervisees to undertake ongoing professional development, stay updated on the latest research and best practices within Play Therapy. Supervisors also need to emphasise the importance of self-care to maintain their own emotional well-being.

Ethical Considerations

All supervision sessions should be fully compliant with the BAPT Ethical Basis for Good Practice in Play Therapy. Supervisors should enshrine the BAPT Core Competencies.

Supervisors should encourage their supervisees to discuss ethical dilemmas and boundaries within Play Therapy, ensuring that supervisees adhere to the ethical guidelines and standards of BAPT.

Supervisors should stress the importance of maintaining confidentiality in supervision discussions, while also acknowledging situations where client safety or ethical obligations may require disclosure. Both supervisors and supervisees need to be aware of their legal obligations and responsibilities.

Record-Keeping and Documentation

Supervisors should keep written records of supervision sessions but ensure confidentiality. However, all documentation needs to adhere to relevant government legislation including the Data Protection Act (2018) and be GDPR compliant.

Supervisors Self-Awareness

Supervisors should be aware of their own biases and potential countertransference when providing supervision. There should be an acknowledgement and sensitivity of the dynamic parallel process between the supervised cases and the supervision of the cases.

Supervisory practice will reflect the supervisor's theoretical and philosophical orientation. Supervisors should be aware that clinical supervision is an ongoing process that evolves with the supervisee's experience and needs. It should be a collaborative and growth-oriented relationship, ultimately for the benefit of the clients discussed.

Responsibilities of the Clinical Supervisor

The clinical supervisor has a responsibility and duty of care to the supervisee, and an ethical responsibility to the supervisee's clients and to the supervisee's employer. The clinical supervisor monitors, supports and advises the supervisee regarding all aspects of their Play Therapy practice and, if appropriate, personal issues that should be taken to personal therapy.

The clinical supervisor's duty of care towards the supervisee will include:

- Not engaging in exploitative or unethical conduct towards the supervisee
- Obtaining informed consent or agreeing a contract for clinical supervision with the supervisee (if appropriate, consent will also be sought from the supervisee's employer)
- Acting within limits of own training, expertise, and competence
- Providing selection and skilled use of methods appropriate to the supervisee's situation
- Not harming the supervisee as a result of physical or psychological methods employed
- Not giving inaccurate or damaging advice
- Clarifying and maintaining agreed or employer's limits to confidentiality

- Making an appropriate referral to another clinical supervisor or agency when required
- Ending clinical supervision in a way consistent with the supervisee's best interests.

(Based on Jenkins, P. (2007) *Counselling, Psychotherapy and the Law* 2nd Edition. London: Sage Publications.)

The legal responsibilities of the clinical supervisor are:

Towards Clients:

- Duty to maintain confidentiality
- Right to break confidentiality in the public interest

Towards Supervisee:

- Duty of care
- Duty to maintain confidentiality
- Right to break confidentiality in the public interest
- Compliance with terms and conditions of supervision contract with supervisee
- Provision of service quality consistent with consumer legislation

Towards Supervisee's Employer:

- Duty of care
- Duty to maintain confidentiality
- Right to break confidentiality in the public interest
- Provision of service quality consistent with consumer legislation

General:

- Compliance with Data Protection Act 2018
- Compliance with Human Rights Act 1998 and Equality Act 2010
- Compliance with Children Act 1989 & Children Act 2004
- Compliance with Mental Health Act 1983 & 2007

Duties of the Clinical Supervisor

Towards Clients:

- Ensure clients have been appropriately selected according to the supervisee's experience, competencies and ability
- Ensure supervisee's practice and conduct conforms to the BAPT Ethical Basis for Good Practice in Play Therapy

Towards Supervisee:

- Undertake clinical supervision appropriate to the supervisor's experience, competencies and ability

- Undertake supervision training and any other related professional development activities that enhance the quality of supervisory practice
- Facilitate on-going supervisory relationship
- Offer clear and honest information regarding supervisor's Play Therapy and supervisory experience and training
- Provide clear contract regarding fees and services provided in clinical supervision
- Advise, guide and monitor supervisee's practice and conduct in all areas of Play Therapy practice
- Encourage opportunities for training and continuing professional development
- Support the supervisee
- Ensure supervisee's practice and conduct conforms to the BAPT Ethical Basis for Good Practice in Play Therapy
- Ensure supervisee's practice is competent, ethical and appropriate
- Facilitate supervisee's learning and awareness of strengths and weaknesses
- Facilitate supervisee's personal and professional development
- Enable supervisee to delineate between supervisory issues and personal therapy issues

Towards Supervisee's Employer:

- Acknowledge and respect accountability of supervisee's employer for service provision
- Consult the supervisee's employer over serious causes for concern and breaches of the BAPT Ethical Basis for Good Practice in Play Therapy
- Ensure the supervisee's practice and conduct conforms to the BAPT Ethical Basis for Good Practice in Play Therapy

Towards BAPT:

- Undertake clinical supervision appropriate to the supervisor's experience, competencies and ability
- Undertake supervision training and any other related professional development activities that enhance the quality of supervisory practice
- Ensure supervisory practice and conduct conforms to the BAPT Ethical Basis for Good Practice in Play Therapy
- Ensure supervisory practice and conduct conforms to the BAPT Equal Opportunities Statement and Policy
- Consult the supervisee's employer over serious causes for concern and breaches of the BAPT Ethical Basis for Good Practice in Play Therapy

Complaints and Professional Conduct

For any dispute / complaint relating to the supervisor, (not necessarily a BAPT member), the supervisee should follow the appropriate Professional Conduct / complaints procedure of the supervisor's governing body.

For any dispute / complaint relating to a BAPT member, regardless of whether they are the supervisor or supervisee, please refer to BAPT's Professional Conduct Procedure and Policy 2014. ([BAPT-Professional-Conduct-Procedure-Policy.pdf](#))

If a complaint against a clinical supervisor is made or upheld under BAPT's Professional Conduct Policy, about either the supervisor's practice as a Play Therapist and/or as a supervisor, BAPT may withdraw indefinitely or for a period, that person's approval as a supervisor; pending the outcome of the complaints process. The clinical supervisor may need to make a re-application to become a BAPT Approved Supervisor® following the completion of the Professional Conduct process or completion of a Sanction under that process.



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