

Table 5 Facilitated Group Clinical Supervision

Benefits of Facilitated Group CS	Challenges of Facilitated Group CS
<ul style="list-style-type: none"> • Learning from each other’s practice examples and ways of working • Self confirmation in giving feedback • Shared responsibility, which takes some load off the supervisor • Supportive environment for the supervisees • Opportunities for role play and other action techniques • Offers a range of ideas, experiences and perspectives • Input and feedback from peers • Can reflect the therapeutic context being supervised (i.e. parallel process) • Provides enough difference to avoid consensus collusion • Less expensive and time consuming than individual supervision • Opportunities for personal growth via group dynamics • Supervisor can check out whether group members share concerns without seeming critical, or possibly shaming a supervisee 	<ul style="list-style-type: none"> • Supervisor must be skilled in working systemically with groups and must be able to facilitate whilst also supervising (dual tasks) • Supervisor’s anxiety about his or her own competence may pose a barrier, as there is greater exposure of the supervisor’s abilities and experience • Supervisees’ anxiety about their levels of competence may cause reluctance to participate in the group (or to engage passively and silently) • Less time for each supervisee, as the group must balance the needs of each member • Group needs to have a high level of trust in order for participants to feel safe • Potential for overload of ideas, or confusion about which ideas to use • Enough similarity must exist between group members to have some overlap of ideas and perspectives (e.g., shared client group; general theoretical approach, or practice principles) • Important to clarify purpose and needs of supervisee presenting a case, or that can get lost in the group process

References for this section: The Bouverie Centre (Moloney, Vivekananda & Weir, 2007).