

# Continuing professional development and the role of reflexivity

**Susy Churchill** discusses the values of being a reflective practitioner

There is an increasing emphasis within BACP on looking at continuing professional development (CPD) from the viewpoint of it contributing to our effectiveness as reflective practitioners (as evidenced, for example, by the re-accreditation documentation). In my opinion, this is especially important for workplace counsellors, as we need to consider not just the client, but the organisation for which they work, and this double relationship can raise uncomfortable practice issues.

In this article, I'll be considering a set of interlinked questions:

- Why do we engage in CPD?
- How do we select appropriate CPD activities?
- What does it mean to be a reflective practitioner?
- How does this relate to CPD?

My starting point is my beliefs, based on reflection on my own professional development; and, as a supervisor and trainer/lecturer, having witnessed and facilitated the professional development of others:

- that professional development is inextricably connected with personal development
- that reflection is an essential part of learning
- that it is vital for effective learning that we are honest with ourselves about our insecurities
- that we need to be open to questioning entrenched concepts in response to client need.

As clinical manager of an Employee Assistance Programme (EAP) provider, one of my criteria for selecting affiliate counsellors is evidence of attending a range of trainings. I have turned down qualified and experienced therapists whose trainings show 100 per cent adherence to a 'pure' theoretical model if a conversation with them shows they are more committed to maintaining belief in their theoretical approach than flexibly adapting their model to the needs of organisational customers.

## Why do we engage in CPD?

- Because it's a BACP/BPS, etc, requirement?
- Because it's a chance to update our knowledge and skills?
- Because it's an opportunity to meet up with old colleagues and friends?
- It's a couple of days out of the consulting room?
- Because we want to find out more about a

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particular issue?

- For career development?
- To reassure ourselves that our practice is 'good enough'?
- For the joy of learning?
- Because we thrive on challenge?

These reasons can be related to our stage of professional development as practitioners<sup>1</sup>, to Maslow's<sup>2</sup> hierarchy of needs, and to pragmatic motives relating to the need to pay the mortgage. Most readers of this journal will have progressed beyond level 1 (trainee) and level 2 (apprentice) (figure 1, p8), though it is worth remembering that we can and do regress to these stages when working in a new context, or with particular presenting issues/client groups for the first time. Broadly, the developmental models postulate moving from a focus on the client and the client's problem, then on types of intervention, onto a focus on process (of the therapeutic relationship, and of the client's wider social context) and finally to the stage where one's practice is a reflection of one's integration of self-awareness, theoretical knowledge, research evidence and principles derived from reflection on practice.

## How do we select appropriate CPD activities?

I would argue that the first requirement is to be honest with ourselves about our motives for embarking on a particular CPD activity. Reflection – in supervision, in the process of writing our notes, on our feelings after sessions with particular clients – should provide us with guidance. Am I feeling insecure in my knowledge base about, for example, postnatal depression, or uneasily aware that 'trusting

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the process' is leading me to avoid the responsibility of evaluating what might help shift this stuck client? Am I confident in my practice and my ability to find relevant information on unfamiliar issues, but looking for opportunities for career progression?

If we're about to work in a new area, or are confronted with an unfamiliar presenting problem, it's appropriate to select activities that give us the Level 1 foundation in client presenting issues and characteristics. Examples for the workplace counsellor might be learning about normal and abnormal responses to trauma or redundancy, for example. We probably also want some Level 2 focus on appropriate interventions and guidance on when to use them.

If what I really want is a break from day-to-day routine, and the opportunity to explore ideas with colleagues, then a workshop format is probably going to be more applicable than a 'knowledge-heavy' series of conference presentations.

If my confidence has been sapped by working with a lot of clients who've experienced severe trauma, or a string of client DNAs, my focus will probably be extra supervision, or masterclass type formats.

When my focus is on career development, it's time to do some market research and reflection on personal motives:

- Do I want more clients, variety, money, security, flexibility, status, challenge, etc?

- Do I need to upgrade my qualifications by doing a Master's degree or doctorate?
- Do I need a specialist qualification in an area where I have practitioner experience?
- What opportunities are out there?

There are times when it's appropriate to challenge ourselves to step out of our comfort zone, and times when it's not! If we're struggling to balance the needs of caring for an elderly relative with maintaining our professional resilience, then CPD activities with a focus on self-nurturing may be more appropriate than embarking on a further qualification.

### What does it mean to be a reflective practitioner?

Under the 'reflective practice' criteria, the current (Jan 2005 onwards) BACP accreditation application<sup>3</sup> asks for:

- a rationale for the choice of the (CPD) activity with reference to your practice
- how the (CPD) activity has influenced your practice
- a rationale for the choice of the experience/activity (which contributes to your self-awareness)
- how such awareness is applied in your practice
- how reflection in and on supervision influences practice by a description of your awareness gained through supervision
- a demonstration of its application in your practice.

The core themes are: being able to give a rationale for our personal and professional development

Level	Stage	Counsellor focus	Counsellor's training needs	Counsellor's developmental tasks
1	Trainee (0-100 hours practice)	Client story and presenting issues	Theoretical grounding Formulation skills Knowledge re specific presenting issues	Avoiding premature conclusions re client presentation Gaining experience in the process of therapy
2	Apprentice (100-450 hours practice)	Interventions Own process	Variety of interventions (including silence!) Understanding of therapeutic process	Learning to trust the process Managing own emotional response to clients
3	Practitioner (450-2000+ hours practice)	Therapeutic process	Updating on evidence-based practice, legal issues, etc	Avoiding complacency Avoiding burnout Maintaining view of each client as unique
4	Senior practitioner (2000+ hours practice)	Systemic (the client in their world) and contextual (national and international events; counselling setting)	New perspectives Encouragement to articulate and test practice-based evidence	Owning one's actual theoretical model as a personal integration Recognising and challenging one's habitual responses

Figure 1: Stages of counsellor professional development. (Adapted from Stoltenberg and Delworth, 1987<sup>1</sup>)

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activities; showing how these activities (and awareness derived from supervision) are demonstrated in our practice; and being able to articulate the awareness gained through supervision

Similarly, in describing our client work in case studies, the BACP accreditation form asks us to answer the following questions in our case studies:

- how your personal theoretical framework operates in practice
- your own self-awareness as a practitioner and how this is used in the relationship with your client/s
- your awareness of issues of difference and equality
- how you have gained self-awareness through your supervision
- how this integrates into your work with clients.

These questions focus on four aspects of reflexivity:

- how we use our theoretical model
- how we use our self-awareness
- how we avoid discriminatory practice
- what we gain from supervision, and how supervision impacts on our practice.

### Why is reflexivity seen as so important?

My personal suggestions (based on the reflective process of writing this):

- as part of ethical awareness
- an essential part of learning, and using continuing professional development
- to develop awareness of whether our practice matches our espoused model
- to bring unconscious communication to light
- to maintain an awareness of where the counselling is going
- to help identify our blind spots
- to prevent complacency, and maintain an inquiring attitude
- as part of self-care and reducing the risk of burn-out
- to identify our bad habits
- to maintain awareness of the organisational aspects of our clients’ issues.

Interestingly, while all counsellors would probably subscribe to the concept of reflective practice, and

authors such as Wosket<sup>4</sup> and Rowan and Jacobs<sup>5</sup> have written books focused on the therapeutic use of self, a search of Psych-Info 1985-2006 revealed very few articles on reflective practice, most of which related to nursing, education and social work.

### How does this relate to CPD?

As a trainer and supervisor, I regularly exhort my students and supervisees with the mantra ‘Personal development *is* professional development’. What I mean by this is that because counselling is based on the development of an effective relationship between therapist and client, the more I am willing to ‘be in relationship’ the more likely it is that the client will experience me as a ‘good-enough’ ‘secure base’. So how does this relate to CPD and reflexivity?

As trainees, it is easy to suffer from mental and emotional indigestion as we attempt to swallow our tutors’ knowledge whole. Journaling, discussion in small groups and other reflective techniques are vital for the trainee to make the links with ‘how this relates to the client I saw last week’. I would argue that it’s also vital to build in reflection on ‘how does this relate to *me*?’ Without this, there’s a danger of developing ‘pseudo-competency’<sup>6</sup>: we feel that ‘we don’t really know’ – the brain may be engaged, but the person of the therapist is not.

As more mature practitioners, attending CPD events can have the same impact. Whether we’re attending a conference on assessing the risk of suicide, or a workshop about the latest research into post-trauma interventions, if we only relate the information we’re receiving to our clients, there is a lack of integration: the person-centred school might refer to a lack of congruence, or a Jungian to the shadow remaining unconscious. The process of reflexivity needs to encompass not only ‘how can I use this as a practitioner?’ but also ‘how can I use this to grow as a person?’

I would like to conclude by suggesting that the key question a reflective practitioner might ask in relation to CPD is: ‘How does this influence who I am as a practitioner and a person?’ ■

### References

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- 6 Clarkson P. The Achilles syndrome: overcoming the secret fear of failure. Shaftesbury: Element Books; 1994.