Frank N. Thomas, Solution-Focused Supervision: A Resource-Oriented Approach to Developing Clinical Expertise (New York: Springer Science+Business Media, 2013), 345 pp.

Frank N. Thomas, Professor of Counseling and Counselor Education in the College of Education at Texas Christian University in Fort Worth, has arguably written the definitive book on Solution-Focused Supervision (SFS). To those who, like me, may be minimally familiar with SFS, think of a supervisory approach which is about a 180 degrees polar opposite from "traditional" CPE supervision. SFS gives little or no attention to such things as: the need to access and express feelings (especially "anger"), or the need to identify past causes of current behavior. At times it may even appear a bit simplistic, something of a schmooze session. Thorana Nelson, however, who has written extensively on structural family therapy, points out in her forward that "One of the basic challenges of Solution-Focused Brief Therapy (SFBT) is that it is simple but not easy, and that is true for supervision as well as therapy, consulting, coaching, or any other activity that might use SFBT ideas."

SFS is rooted in the theory and practice of family therapy and systems theory, a dynamic field which has been constantly evolving since the 1950s. The systems approach entailed a new perspective, language, and practice, entailing such things as: viewing a family session in vivo or behind a one-way mirror; the identified patient; dysfunctional families; systemic changes occur in either structure and/or practice; behavioral change occurs at the interface of the subsystems (individuals); boundaries; feedback; heterostasis and homeostasis; and, genograms. On the West Coast, a brilliant group of theoreticians and therapists at Mental Research Institute (MRI) and the Palo Alto Veterans Administration focused on communication theory, beginning with the premise "you cannot not communicate." They identified the double bind theory and developed therapeutic interventions, entailing such things as prescribing the symptom as well as paradoxical injunctions. Their approach to change was further refined by focusing on brief therapy. This movement is associated with the therapist and writer Steve DeShazer and his therapeutically gifted wife, Insoo Kim Berg. They met at MRI in the 1970s and proceeded to develop SFBT at the Brief Family Therapy Center of Milwaukee. Throughout Solution-Focused

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Supervision, Thomas, who also trained at MRI, extensively cites and acknowledges his indebtedness to DeShazer and Berg

Any supervisor and/or therapist who wishes to obtain a fundamental understanding of Solution-Focused Supervision will find Frank Thomas' book thoroughly informative and engaging. His theory is organized under five categories: pragmatism, tentativeness, nonpathology, curiosity, and respect. Within these categories he employs such guidelines as: a future focus; the supervisee is a greater expert on her/himself than is the supervisor; highlighting success; scaling; complimenting; deconstructing; being indirect; supervising one step from behind; hedging; humor; use of metaphors; and contributing without imposing. Each of these components is well explained and then illustrated by numerous verbatim transcripts. One "play within a play" consists of a transcription of Insoo Kim Berg supervising a supervisee, with Thomas then providing his SF understanding of the theory behind Berg's supervisory interventions (there is little or no "Why did you do this?" or "Why didn't you do that?").

While there is obviously so much to commend, I especially appreciated his use of goal setting as an evolving interaction between the supervisor and supervisee. Many supervisors will find it useful. He also cites the few studies that have been done comparing SFBT with other therapeutic modalities such as Behavioral Therapy. While there is no indisputable winner, he does identify the most significant variable in the success of any of the various therapy/supervision models is the level of trust established between the supervisor/therapist and the patient/student.

For me, the shortcomings of *Solution-Focused Supervision* (e.g., more transcripts of the use of SFBT with families as well as group supervision), are quite minor compared to the engagingly thorough way in which he identifies, explains, and then clinically illustrates SF supervision in practice. If you are already familiar with and using an SFS approach in your supervision, then I suspect you will agree with me that it appears to have a strong and exciting future in supervision, therapy, and coaching.

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